

Quick guide to

# The Early Help Assessment and Plan (EHAP)

## What's new?

- ✓ A revised and shortened form (paper or electronic)
- ✓ More ways to register an EHAP
- ✓ Team Around the Family (TAF) meetings
- ✓ Updated thresholds of need descriptors
- ✓ Early Help Assessment Diagram & portable tool
- ✓ A simplified EHAP Audit Form

Children & Families

## A note to EHAP users

The Early Help Assessment and Plan (EHAP) has replaced the CAF (Common Assessment Framework). This guidance explains the new process which builds on the good work of the CAF (retaining effective features of the CAF process) but incorporating new ways of working together to ensure early help is delivered in an efficient and coordinated way to the families who need it.

We hope you find this guidance user-friendly and the EHAP process effective.

We want to continue learning from good practice especially where this leads to achieving desired outcomes for families; as well as from any issues arising. We encourage everyone using the EHAP process to give feedback or make suggestions. We may be able to help straightaway with an issue or your feedback may contribute to future improvements.

### **We listened and took action**

Following the re-launch of the CAF in 2010, we gathered feedback on various aspects of the process and resources and have addressed a number of issues with the launch of this new EHAP process.

We have revised the form to add missing detail, delete unnecessary parts and expand some answer boxes for ease of use. The EHAP form is now also available online/electronically. There are more ways to register a new EHAP to support different working practices and time constraints. Assessment and review meetings now focus on the family as a whole and are consequently known as Team Around the Family (TAF) meetings instead of Team Around the Child (TAC).

If you would like to share examples of effective practice or give feedback please address this to:

**Family Information Service  
Ealing Council  
2nd Floor, SE/14  
Perceval House  
14-16 Uxbridge Road  
Ealing W5 2HL**

**020 8825 5588  
(Mon-Fri, 9am-5pm)  
EHAP@ealing.gov.uk**

## Are we making a difference?

That is the question everyone who works with children and families in these challenging times will be asking.

And the answer we all want to be able to give is – yes!

We're making a difference because we have ways of working to help us identify that a child or young person needs help; at the early stages of an emerging problem - when that help has the best chance of being effective in changing the course of events for the better. And then we're able to work together efficiently to deliver that help.

And we're doing this whilst keeping the child/young person and their family very much involved and engaged; so that the help offered is appropriate and welcomed - giving it a greater chance of success.

Ealing's Early Help Assessment and Plan (EHAP) is an assessment and 'communication' tool that will help us achieve this. It offers a shared process for coordination and delivery of multi-agency and targeted support with a quality assurance and evaluation requirement to inform continued development and improvement of services.

The EHAP has learned a great deal from Ealing's experience of the CAF (Common Assessment Framework); through consultation across services, organisations and professions. The resulting EHAP process incorporates the feedback we've had and makes the best use of what is working well.

It's time to take this forward and start using the EHAP as part of all our working practice to achieve the very best we can for the children, young people and families in our care.



Judith Finlay  
Director Children & Families



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# What is an EHAP?

Essentially, the EHAP is based on the same concept as the Common Assessment Framework (CAF) – a process by which the needs of a child or young person are assessed and an action plan to meet those needs is agreed and progressed.

However, the EHAP has a new focus – it promotes the importance of identifying needs and delivering help as early as possible. And it shifts the focus from looking at the child/young person's needs primarily - to establishing a greater understanding of the challenges faced by the family as a whole and delivering help wherever possible.

## Benefits of using an EHAP

### **For the child/young person and family:**

- Effective, early identification of needs.
- A single assessment offering access to multi-agency support without the need for numerous referrals and processes.
- Full participation, shared decisions and transparency.

### **For practitioners and services:**

- The EHAP is a shared, accessible process offering a single structure and approach to conducting a holistic assessment of needs, planning how to meet those needs and reviewing progress.

- A common structure to record and share information amongst practitioners which reduces duplication and makes it easier to spot warning signs in terms of safeguarding.
- Team Around the Family (TAF) meetings (integral to the EHAP process) ensure a balance of input and ownership between professionals, the child/young person and their family.
- Working together in this way ensures services gain a better understanding of each other's remit and capacity - enabling better collaboration in future.

# When to use an EHAP

An EHAP is used when needs cannot be met by a single service area or by universal services (those working at Level 1 of the Thresholds of Need) and where a multi-agency or targeted approach is necessary. Refer to diagram on page 7.

For schools and other organisations that employ professionals from different services/sectors e.g. from the NHS, Social Care, mental health, education etc – engaging the expertise of these professionals to support a child/young person and their family is an example of multi-agency and targeted support even though they may all work for the same school or organisation.

## Observations or situations that might lead to use of an EHAP include:

- ✓ Where a practitioner observes a significant change or worrying feature in a child/young person's appearance, demeanour or behaviour.
- ✓ A change in general wellbeing and social interaction with others.
- ✓ Persistent non/late attendance.
- ✓ Being without necessary equipment or clothing such as a PE kit, a coat in cold weather etc.
- ✓ A child who appears hungry or where a packed lunch or means of buying lunch have not been provided.
- ✓ Where a practitioner knows of a significant event in the child/young person's life that may have a negative impact such as divorce or bereavement.
- ✓ Where there are worries about the family's home environment.

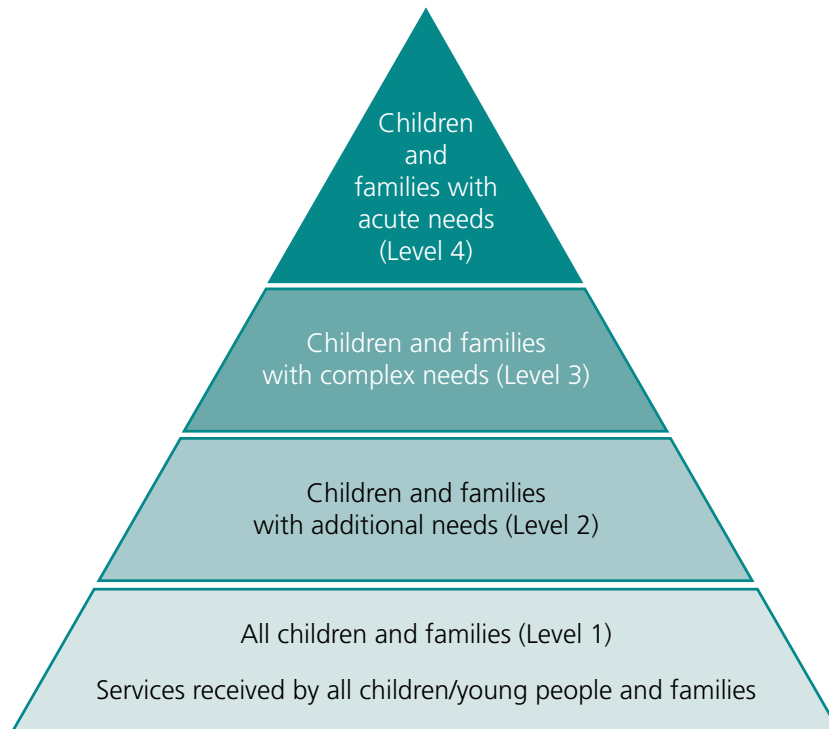
## Other indicators that a child or young person needs help and support:

- Missing developmental milestones or making slower progress than expected
- Presenting challenging or aggressive behaviour
- Experiencing physical or mental ill health or disability (either their own or within their family)
- Exposure to drugs/substance misuse or violence within the family
- Having to undertake caring responsibilities
- Experiencing family breakdown
- Being bullied or becoming the bully
- Suffering discrimination or disadvantage for reasons such as race, gender, sexuality, religious belief or disability
- Becoming homeless
- Becoming a teenage parent
- Persistent non-attendance at childcare/nursery or school
- Neglect (*for guidance on spotting neglect as well as other indicators of child abuse please refer to the Ealing Child Protection Procedures [www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP)*)

**This is not an exhaustive list and should be used together with your professional judgement, knowledge of each family and your service's safeguarding measures.**

# Understanding Thresholds of Need

Refer to Ealing's Assessment Protocol & Thresholds of Need Guide.



## Level 1: Universal

There are no additional needs. Response services are universal services.

## Level 2: Low risk to vulnerable

Children with identified needs, showing early signs of vulnerability or the family's needs are not clear, not known or not being met. This level is the threshold for initiating an EHAP as the need for multi-agency support is evident. Response services are universal and targeted services.

## Level 3: Complex

The family has complex needs that are likely to require longer-term intervention from statutory and/or specialist services. High level additional unmet needs will usually require a targeted and integrated response.

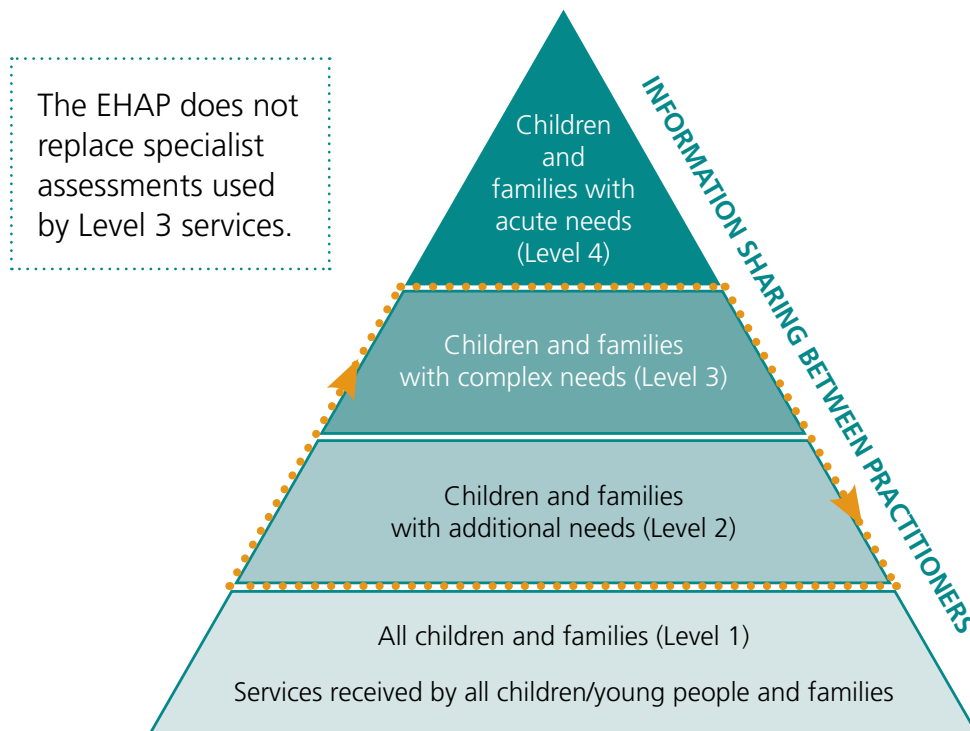
## Level 4: Acute

Children are suffering harm or are at risk of harm or abuse and require intensive support and protection. Or the family has acute needs requiring statutory intensive support. This level includes the threshold for child protection requiring Social Care intervention.

To download a copy of the Ealing's Assessment Protocol & Thresholds of Need Guide visit [www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP). For a print copy, email your details to [EHAP@ealing.gov.uk](mailto:EHAP@ealing.gov.uk)

# Threshold levels and where EHAP is used

The overlaid arrows on the diagram below show where the EHAP is positioned across the threshold levels. The EHAP is **not** a tool for children who only need universal services or for children with additional and/or complex needs who need a **single service** at Level 2 or Level 3. The defining position of EHAP is focussed on the requirement of multi-agency and targeted **support that includes Level 2 and/or Level 3 services**.



## Who can initiate an EHAP for a child/young person?

An EHAP can be initiated by any professional or other support worker (such as from a voluntary service) with knowledge of the family.

## Do Level 1 universal services use the EHAP?

Level 1 universal services use the EHAP to support a child/young person who also needs support from services at Level 2 and/or Level 3.

Once a child/young person no longer requires multi-agency support involving a Level 2 or Level 3 service, and their needs can be met by Level 1 universal services - the EHAP is closed.

## Do Level 4/Social Care/other statutory services use the EHAP?

The EHAP is not used by Social Care or any other Level 4 statutory service for service delivery.

The EHAP record is closed and transferred to Social Care or other Level 4 statutory service when a case escalates and is referred to these services. The EHAP gives the receiving Level 4 service a greater understanding of the background of the case, everybody involved so far and what support has already been delivered or attempted.

Level 4 services may at a later date identify the need for longer-term, lower level support from Level 2 and 3 services for a family. This will normally be managed as an extension to their work with the family.



# Is an EHAP appropriate?

## 1. Are there immediate child protection concerns?

If **yes**, make a telephone referral to Ealing Children's Integrated Response Service (ECIRS) on 020 8825 8000 (24hrs).

### What happens next?

If you have child protection concerns, you will be able to speak to a social worker immediately. Within 24 hours of your referral, the social worker will update you on the action taken, i.e. whether the case was referred to the social care locality team or remains within ECIRS for further exploration.

You will receive an outcome letter once the case is closed. The outcome may be that the case is transferred to a Level 2 or Level 3 service such as SAFE 0-18 or closed with no further action.

## 2. Can my service meet the needs of the child/young person and family?

If **yes**, discuss with your manager/colleagues how best to support the family. You should all be in agreement that the needs are clear and that your service can provide the support.

## 3. Can a Level 1/universal service meet the family's needs?

If **yes**, signpost the family to the appropriate service(s). Get advice from the Family Information Service (FIS) on 020 8825 5588 or refer to **the Quick Guide to Ealing Family Support Services directory (download at [www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP) or get a printed copy from the FIS).**

## 4. Can a single Level 2 or Level 3 agency/service meet the family's needs?

If **yes**, make a referral to the service for the family.

Referral procedures for some services are listed in the online Family Services Directory at [www.ealing.gov.uk](http://www.ealing.gov.uk) or in **the Quick Guide to Ealing Family Support Services (as above)**. **You can also visit the service website and contact them directly.**

## 5. Does the family need support from more than one service including Level 2 and/or Level 3 service(s).

If **yes**, initiate the EHAP process.

# Examples of underlying issues and multi-agency/targeted support

A child/young person's behaviour, demeanour and/or drop in their achievement at school may be an indication that something is going on in their personal life that is adversely affecting their wellbeing. Refer to 'When to use an EHAP' on page 6 for detailed examples of what to look out for.

## Life situation

### **Child living in bed and breakfast accommodation**

## Possible issues the family might be dealing with

- Parents may be struggling and as a consequence not giving the child the attention, stimulation, support etc they need
- Parents may also be at risk of relationship difficulties
- Child's sleep pattern, stress levels and ability to do their homework may be affected - collectively leading to lower attainment at school
- Child's behaviour might change due to frustration/boredom, worry etc which they may be unable to verbalise
- The child's safety may be compromised due to shared kitchens and bathrooms and periods of time when the child is alone in the bedroom

### **Living with debt**

- Stress in the home leading to relationship breakdown
- Isolation and reduced socialising due to restricted budget
- Risk of homelessness
- Problems heating the home and providing adequate winter clothing

### **Child who has a serious illness/health issue/disability**

- Poor attendance leading to underachieving
- Parents' work and earning potential may be affected leading to money problems
- Sense of isolation, feeling left behind, depression
- Poor socialising affecting friendships and inclusion
- Struggling to access support for the family/carers

**Important.** The following examples demonstrate how different life situations may impact on the lives of children and young people and what action could be taken to offer support. None of the content is intended to be exhaustive or to be taken as a literal/prescribed course of action for each case.

### Possible questions and actions to consider

1. Get in touch with the family's Housing Officer to understand their chances of better accommodation. Or to chase an existing re-homing offer. Is there a way the B&B can offer a bigger room?
2. Check the family is getting all the benefits they are entitled to
3. Ensure class teacher and pastoral care manager are aware of home circumstances. Agree additional support for the child e.g. with homework
4. Explore breakfast clubs, after school clubs and activity options

### Potential services to consider for multi-agency/targeted support

- Housing Officer
- School – teacher
- School – Parent Support Adviser/Welfare/PSED Officer
- SAFE 0-18
- JCP
- Family Information Service (FIS)
- Children's centres for children under 5

1. Is the family getting all the benefits they are entitled to?
2. Get a debt management adviser to work with them
3. Is their housing affected?
4. Can their energy supplier offer a low income tariff or arrange a different payment system?
5. Are the children eating regular meals?
6. Are there any free activities the children can participate in out of school to improve their sense of isolation?
7. Are the parents registered at a children's centre?
8. Can any charities or community groups provide free goods/services?

- Children's Centre Family Service (if child under 5)
- Debt Management Adviser (e.g. Christians Against Poverty or Turn2Us)
- Ealing Food Bank
- JCP
- School
- Housing

1. Is a support programme in place at the school?
2. Get advice from the FIS on services, respite care, benefit entitlements etc
3. Is the school SENCO/Inclusion working with the child already?
4. What measures have been put in place by the school nurse?
5. Are there any support groups specific to the condition he child has?
6. Can the child get a free nursery place from Children in Need (for children under 5)

- Family Information Service Additional Needs & Disability Information Officer
- School – teacher
- School – pastoral care/SENCO/Inclusion
- School nurse
- GP/health visitor
- Home-start
- ESCAN or Child Development Team
- Contact a Family
- Children in Need (CIN)

## Life situation

### **Living with an adult who has mental health issues**

## Possible issues the family might be dealing with

- Potential for neglect. Physical and emotional needs not being met
- Child at risk of becoming a young carer
- Child may develop behaviour problems due to inability to cope or understand
- Child may be worried/fearful for their parent's health/illness or of being taken away from the parent
- Child may find socialising and integration difficult. Stigma and potential for being a victim of bullying

### **Child who is a young carer**

- Child might be growing up too quickly/unable to experience and participate in activities with peers
- Lateness and possible non-attendance
- Household chores and domestic responsibilities
- Stress and anxiety
- Sense of isolation/exclusion
- Low income/debt in the home

### **A teenage mother**

- Struggling to cope and inexperienced
- Stress and relationship issues with parents/family
- Money worries and concern about the future
- Unable to maintain friendships
- Not participating in age-appropriate activities
- Falling behind with school work
- Being at a higher risk of abuse and domestic violence

### **Child living in a home where there has been domestic violence**

- Behaviour issues due to blurred boundaries, inability to express worry/fear
- Relationship breakdown and personal instability
- Potential for drug/alcohol misuse
- Neglect, missing school, underachieving, non-participation etc

### **Child with one parent in prison**

- If the main earner is in prison, money problems could lead to debt and housing issues
- Child may be worried about the future
- May suffer bullying or become the bully/behaviour issues
- May be feeling guilt, anger, upset

## Possible questions and actions to consider

1. Is the child under any risk? Such as abuse or neglect?
2. Has the child become a young carer?
3. Is the school aware and offering support with learning?
4. Is the child receiving support from pastoral care?
5. Does the child need emotional support themselves?
6. Is the family getting all the benefits they are entitled to?

## Potential services to consider for multi-agency/targeted support

- School – teacher
- School – social worker/pastoral care
- Home-start or Family Lives
- Ealing Young Carers
- Ealing Mental Health and Wellbeing Service
- SAFE 0-18

1. Who is supporting the child?
2. Are they part of a young carer's support group?
3. Can any respite services be engaged to support?
4. Are emergency plans in place for the child (if the parent is incapacitated) and for the parent (if the child is unavailable due to school commitments etc)?

- Ealing Young Carers
- Respite services
- School – teacher
- School – social worker
- Children's centre (if under 5)
- JCP (entitlements)

1. Is the mum registered with her local children's centre for services and support?
2. Can Home-start support in the home?
3. Is the mother claiming all the benefits she is entitled to?
4. What support is being offered by the school?
5. Is childcare provision in place to allow her to continue her studies?

- Children's centres
- FIS
- Health visitor
- Home-start
- School – social worker
- School – teacher
- Parenting Service
- JCP
- Ealing Youth & Connexions

1. Find out what support is already in place if any
2. Ensure the school are aware and the child is offered appropriate support
3. Would the family benefit from parenting support?
4. Can a SAFE 0-18 Family Worker visit the home and offer support?

- Ealing Victim Support
- SAFE 0-18
- School
- Stephen's Place Children's Therapeutic Service
- Parenting Service
- DVIP (Domestic Violence Intervention Project)
- Children's Centre Family Service (if any children under 5)

1. Does the child have a stable life despite the parent in prison?
2. Is the family's home and income affected? And are they entitled to additional benefits?
3. What can be done to offer support at school and at home?
4. Would the child benefit from counselling – does the school offer access to Place2Be counsellors?
5. Is the child's schoolwork affected?

- School – pastoral care
- School – teacher
- School – Place2Be
- SAFE 0-18
- Parenting Service
- Prison Liaison Officer
- JCP

# EHAP process

## The EHAP process and the roles and responsibilities at each stage

This diagram illustrates stages of the process, showing expected time-lines between stages and the roles of the EHAP Initiator and Lead Professional with the child/young person and their family positioned at the heart of every stage.



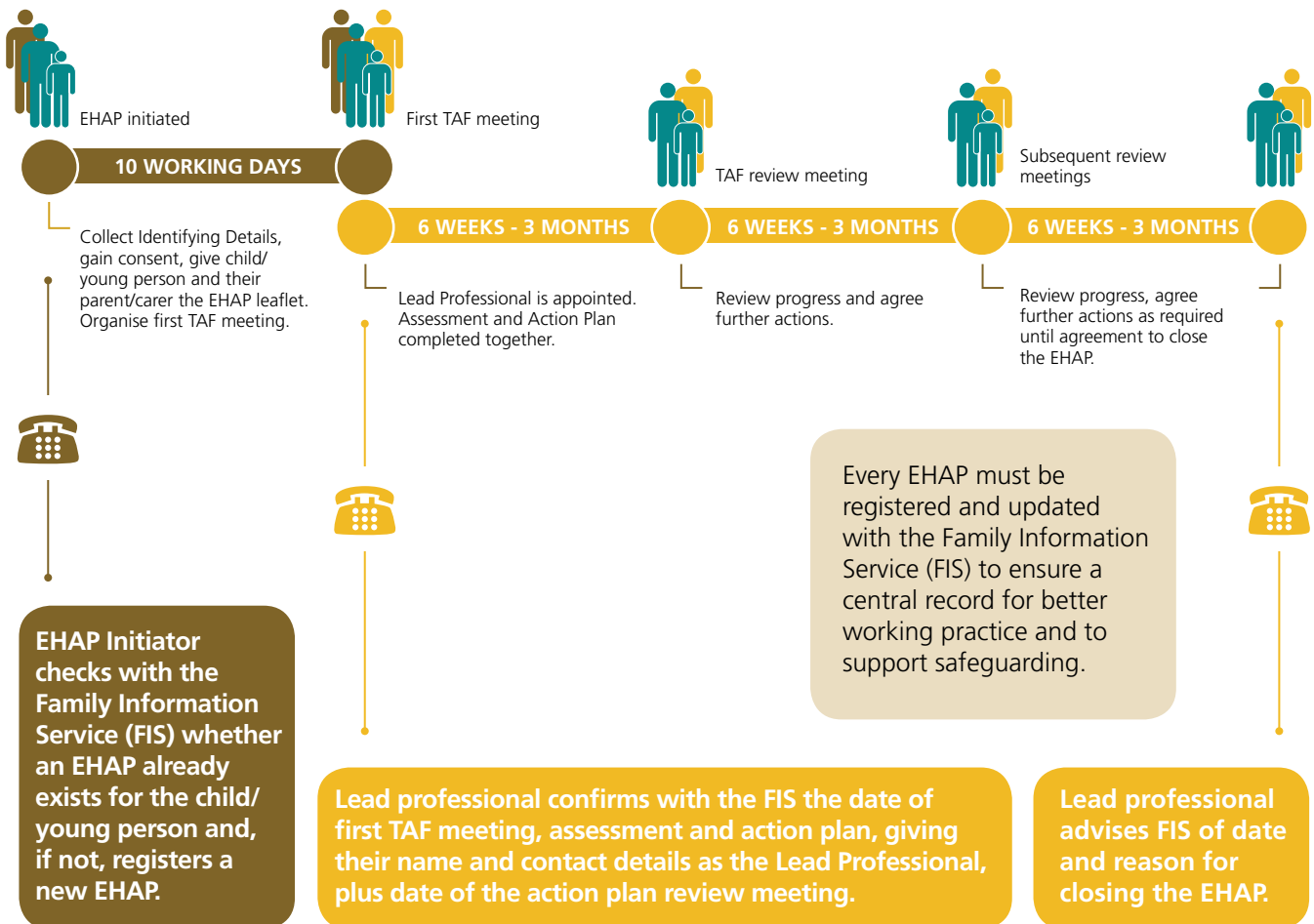
**Child/young person & family's** participation is at the heart of **every** stage of the EHAP process.



**EHAP Initiator**  
Initiates the EHAP by collecting the Identifying Details and organising the first Team Around the Family (TAF) meeting.



**Lead Professional**  
Appointed at the first TAF meeting. Completes Assessment and Action Plan together and sets date for review meeting. Maintains contact with the family to monitor progress and any change in needs.



An EHAP can be registered by phone, post, online/electronically, secure email or secure fax (see page 16).

# EHAP register

The EHAP register is maintained by the Family Information Service (FIS) using information provided by the EHAP Initiator and the Lead Professional at key intervals throughout the process as indicated on the process chart opposite.

However, responsibility for each EHAP lies with the professionals/services initiating and progressing the EHAP.

**This includes ensuring secure filing and records management in line with data protection regulations.**

## Unique registration number

The FIS will issue each EHAP with a unique registration number which you should note on the EHAP Form once registration is complete.

If you phone in the identifying details to register a new EHAP you will get a registration number immediately whilst you are on the phone.

If you send in the identifying details to register a new EHAP or complete the online/electronic form – the registration number will be emailed to you.

## Specifically, the EHAP register records:

- Whether an EHAP exists for a child/young person or their siblings
- The lifecycle of the EHAP from initiation/identifying details, first Team Around the Family (TAF) meeting, review meetings and EHAP closure (date and reason)
- The details of the EHAP Initiator and Lead Professional
- EHAP audit results

## The register is used to analyse:

- How many children/young people in the borough have an open/closed EHAP
- Patterns in the lifespan of closed EHAPs
- Patterns in the reasons for closure of EHAPs
- Which services are using EHAPs and in what quantity
- Which services are taking on the role of EHAP Initiator and/or Lead Professional
- Age and demographic data of children/young people for whom there is an EHAP
- Quality and effectiveness of the EHAP process through EHAP auditing

# Options for registering an EHAP

There are a number of ways to register a new EHAP to suit different working practices and time constraints.

Whichever method is used – you must still contact the FIS before initiating an EHAP to find out if an EHAP is already in use for the child/young person or a sibling. This check takes a couple of minutes depending on how many siblings there are.



## Phone

The preferred and most secure method to register an EHAP is to go through the identifying details over the phone with the FIS. Call 020 8825 5588 (Mon-Fri, 9am to 5pm) to speak to an EHAP Adviser within the FIS team.



## Online/electronic

An online form can be completed at [www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP) The FIS will then issue a registration number by email.



## Email

If your service has a secure email system (e.g. one that uses password protection to send and receive mail) you can scan and email the identifying details to register an EHAP to [EHAP@ealing.gov.uk](mailto:EHAP@ealing.gov.uk) The FIS will issue a registration number by email.



## Fax

You can fax in the identifying details to the FIS secure fax 020 8825 9417. The FIS will issue a registration number by email.

When using a fax machine, ensure you do not leave the originals behind and that the machine is not set to print off a duplicate of what you are faxing as a form of confirmation (some machines have this function).



## Post

You can post in a copy of the identifying details part of the EHAP form to register. You must use a 'signed for' method of delivery such as recorded delivery.

Ealing Council's internal post service is secure. So if your service works within a Council building that is served by the internal post service – you can use this to send in the identifying details. The FIS will issue a registration number by email.

Family Information Service  
Ealing Council  
2nd Floor, SE/14  
Perceval House  
14-16 Uxbridge Road  
Ealing W5 2HL



# EHAP support

The Family Information Service (FIS) will be your first point of contact for all EHAP enquiries, support and assistance, maintenance of the EHAP register and EHAP auditing.

Specifically, the FIS can:

- Confirm whether an EHAP already exists for a child/young person or their siblings.
- Issue a unique reference number for an EHAP after registration.
- Support your understanding of the Thresholds of Need when deciding what level of support the child/young person needs.
- Support you in organising a Team Around the Family (TAF) meeting including helping you access the services you would like to invite and helping you find a venue if necessary.
- Provide EHAP training.
- Replenish your stock of EHAP packs, forms and other materials.

Family Information Service  
020 8825 5588  
(Mon - Fri, 9am to 5pm)  
EHAP@ealing.gov.uk

## Order more copies of EHAP materials



# Role and responsibilities of the EHAP Initiator

You become the EHAP Initiator once you identify that a child/young person and their family may benefit from multi-agency support and initiate the EHAP process.

## To initiate an EHAP

1. Obtain verbal consent from the child/young person\* or family to use the EHAP process.
2. Check with the Family Information Service (FIS) whether an EHAP already exists for this child/young person and/or a sibling (includes open or closed EHAPs).
3. If an EHAP exists, get the contact details of the Lead Professional and discuss with them your concerns regarding the child/young person.
4. To initiate a new EHAP - complete the identifying details section of the EHAP form together with the young person or family. At this point they will sign to give their consent in writing for their details to be recorded, stored and shared. If you are registering an EHAP online, signatures will be managed using a paper consent form which can then be scanned and held with the related electronic EHAP.
5. Call the FIS to register the EHAP by phone 020 8825 5588. For more registration options see page 16.
6. Organise a Team Around the Family (TAF) meeting and invite those you want to attend including the child/young person and their family. It is sufficient to invite a small number of professionals from services appropriate to supporting the immediate presenting needs of the family.

The FIS can support you in organising a TAF and in finding a venue if necessary. When contacting professionals/services, remind them that a Lead Professional will be appointed at the first TAF meeting. This will help them decide who is best to attend.

Once the meeting is arranged, inform the family and give them an appointment card with the date, time and venue of the TAF meeting, plus your name and phone number in case of any queries.

7. File the EHAP form securely and bring it to the first Team Around the Family (TAF) meeting.

\*For a child under 12, parental consent must be obtained. For a young person between the ages of 12 and 16, a judgement about the need for parental consent should be made according to their needs and to their understanding of what they are agreeing to. However, it is good practice to encourage the young person to involve their parents/carers in the process if at all possible - for a whole-family approach to dealing with their needs.

# Role and responsibilities of the Lead Professional

Any practitioner can become the Lead Professional – appointed at the first Team Around the Family (TAF) meeting in agreement with the family. The EHAP Initiator can take on the role of Lead Professional if agreed, but is not obliged to do so.

The Lead Professional (once appointed) takes responsibility for the EHAP and must ensure forms and personal details are stored securely.

The Family Information Service (FIS) manage the EHAP register but do not hold any originals or copies of forms. The Lead Professional must update the registered EHAP by calling the FIS at key stages of the process as detailed below and on the EHAP process chart (see page 14). If the EHAP is being managed online you will not need to make progress calls to the FIS.

## At the first TAF meeting

1. Complete the assessment together with the other attending professionals, the EHAP Initiator and the family.
2. Agree an action plan, setting out desired results, who will carry out each action and by when.
3. Give the family opportunity to comment on the assessment and action plan, and ask them to confirm their understanding and agreement to both. Explain the need to record, store and share information with the services identified in the action plan and obtain written consent to do so on the EHAP form. If the EHAP is being managed online, download and use the EHAP Consent Form.
4. Agree a date for the next TAF meeting to review progress with the appropriate practitioners and the family.
5. Confirm (within two working days of the first TAF meeting) that an assessment and action plan have been completed and on what date. Call the FIS on 020 8825 5588 or update the online EHAP if applicable, making sure to inform the FIS of your name and contact number. Store forms securely.
6. Contact the services outlined in the action plan, copy them in on the EHAP and start the process of accessing their service(s) to help/support the family. Services involved should then be invited to the next TAF meeting (review).

**Keep in regular contact with the family** to check they are receiving the help and support agreed in the action plan. This will help you decide the frequency and discussion points for the TAF review meetings - such as any barriers the family have encountered in accessing services.

Regular contact will also help you identify any immediate child protection concerns.

# Role and responsibilities of the family

*This page can be photocopied if the family would like to refer to it.*

It is important for the family to understand that for the EHAP (Early Help Assessment and Plan) to succeed in achieving the results they need - they too have a role to play and a level of responsibility in engaging with the process and services involved.

## **Understanding and agreeing to use an EHAP**

1. The process and purpose of the EHAP will be explained – the family can ask questions at any time.
2. To initiate an EHAP, the family must give full and accurate information to the EHAP Initiator so they can complete the identifying details on the EHAP form.
3. The family must confirm that they understand why an EHAP is being used, what information is being collected and why. And consent to their information being recorded, stored and shared with the support services identified in the action plan.
4. The family will be issued with a contacts and appointment card that they should use and keep safe.
5. The family should attend the Team Around the Family (TAF) meetings. If they can't make an agreed meeting, they must notify the EHAP Initiator or Lead Professional immediately.

## **At the first TAF meeting the family should:**

- Help decide who should be appointed as the Lead Professional.
- Participate as necessary to help complete the assessment and action plan.
- Confirm that they understand both the assessment and action plan, share their opinions and feelings, and make comments or request changes.
- Make a commitment to attend appointments with the services identified in the action plan.
- Make a commitment to keep in contact with the Lead Professional between review meetings and to notify them of any significant issues or changes, especially those affecting the welfare of the child/young person.

## **TAF review meetings**

Ordinarily, TAF review meetings occur every six weeks, and no longer than three months apart. If the family is unable to attend but agree to the meeting taking place without them – the Lead Professional must share the action plan review with the family and obtain their consent to proceed.

## **Closing the EHAP**

During a TAF review meeting the EHAP may be closed if the desired results have been achieved, if the family withdraws consent or if the threshold of need escalates from Level 3 to Social Care and/or any other Level 4 statutory service.

Upon closure, the family have the opportunity to give feedback about the EHAP process they have just experienced.

# First Team Around the Family (TAF) meeting

## Examples of who might attend a first TAF meeting

1. Primary school staff member, (appropriate service) family worker, the child and their parent/carer.
2. High school staff member, a Police Schools Officer, the young person and their parent/carer.
3. Children's centre staff member, a SEN coordinator, the child and their parent/carer.
4. Community/voluntary sector worker, a Children's Centre Family Outreach Worker, the child/young person and/or their parent/carer.

## At the first TAF meeting

- The EHAP Initiator leads the meeting, introducing everyone around the table and confirming the purpose of the meeting.
- The Lead Professional is chosen in agreement with everyone including the family. The EHAP Initiator may become the Lead Professional, but there is no obligation to do so.
- The EHAP Initiator hands over responsibility for the EHAP to the Lead Professional. This should be explained to the family.
- The Lead Professional then takes over responsibility for leading the meeting.
- Attendees complete the assessment together and decide the action plan. The Lead Professional records both.
- The family must sign to give their consent for their information to be recorded, stored and shared with the services identified in the action plan.
- If appropriate, a date is agreed for the next TAF meeting to review progress. Alternatively, this may be left to the Lead Professional and the family to agree at a later date.
- The Lead Professional writes his/her name and phone number on the family's appointment card and the date/time/venue of agreed review meetings or appointments/meetings resulting from the action plan.

## Where to hold a TAF meeting

TAF meetings follow a process that is transparent and professional but do not have to feel formal.

Be flexible about where to host the meeting. It is best to choose a place that is familiar and comfortable for the family that also allows confidentiality.

Venues might include a spare classroom at the child's school, a meeting room at the child's children's centre, or a meeting room at the local health or community centre.

# The assessment

1. The assessment takes place at the first Team Around the Family (TAF) meeting organised by the EHAP Initiator. The assessment is agreed by all and recorded on the EHAP form by the Lead Professional.
2. The family attends to discuss their needs.
3. A Lead Professional is appointed in agreement with everyone at the meeting.

## General prompting questions – to be used as necessary:

- Do you know why we're having this meeting today?
- Is there anything we've discussed that you're not happy with?
- Have we talked about the things that worry you most?
- Is there anything else you'd like to say or do you have any questions?

## Tone and language

When assessing the development of the child, consideration should be given to the tone and language used for questions based on knowledge of the family (i.e. each person's language skills, level of understanding, perception, character etc) applying professional judgement.

## When completing the assessment apply the following principles:

- ✓ Equal opportunities for all, taking into account disability, communication barriers, gender, sexuality, cultural and racial considerations. This includes addressing (where possible) any barriers to equality of experience and successful completion of the assessment (e.g. if an interpreter is required, one should be present).
- ✓ The process must remain transparent at all times. Everyone involved must be honest and open. Discussion and decisions should be clear to all.
- ✓ The family should be allowed access to information held about them at all times.
- ✓ Language used should be non-judgemental both in the discussion and the written record.
- ✓ Questions should not be leading – do not encourage or suggest what the response might be.

- ✓ Evidence should be discussed and recorded of the strengths and positives within the family's situation as well their needs to ensure progression and development of areas that are already working well.  
*Please note: this is a key requirement that is reviewed within the EHAP auditing process.*
- ✓ The family's views and perception of their situation and their needs should be sought and remain central to the assessment at all times.
- ✓ The child/young person must be given the opportunity to contribute to discussions, respond to questions, agree actions, comment and give their opinion etc at appropriate stages throughout the process.
- ✓ The assessment should be regarded as an ongoing process rather than a one-off event. It should evolve and grow with the child, remaining 'current' through subsequent reviews, rather than a fixed snapshot of one point in time.
- ✓ Care must be taken to provide sufficient information within the assessment to enable future planning. This includes facts and analysis.
- ✓ Practitioners' assessment of need should be based on evidence, current research and expertise.

**Early Help Assessment**  EHAP No.

Date of first TAF: \_\_\_\_\_

Child's/young person's full name: \_\_\_\_\_

Lead Professional: \_\_\_\_\_

Role: \_\_\_\_\_ Organisation/service: \_\_\_\_\_

Tel: \_\_\_\_\_ Email: \_\_\_\_\_

Attendees (full name)	Role	Organisation

Development of unborn baby, child or young person:

Parents and carers:

Family and environment:

**My Contacts & Appointments**

The **Early Help Assessment and Plan (EHAP)** is when professionals from services meet with you to work out what help you might need and make a plan to get you that help.

 **Ealing**  
www.ealing.gov.uk

**Children & Families**

# Early Help Assessment Diagram

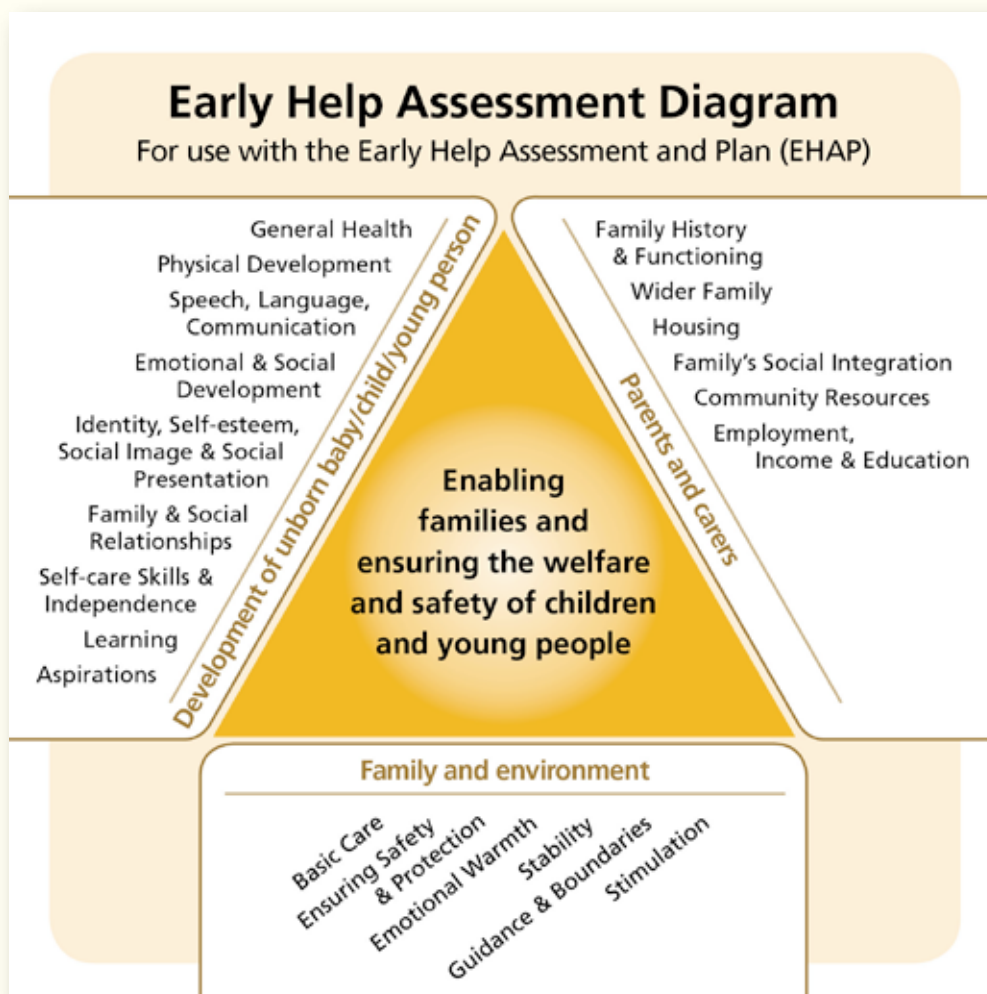
To help you in conducting an assessment we have adapted the Assessment Framework diagram published in the government publication:

## **Working Together to Safeguard Children**

*A guide to inter-agency working to safeguard and promote the welfare of children* (published March 2013, available from [www.gov.uk](http://www.gov.uk))

We've called Ealing's version the Early Help Assessment Diagram. It covers all key areas of the assessment that a professional may need to consider and discuss with the family.

For ease of use - we have also produced this as a small portable tool printed on a durable, laminated card (supplied in your EHAP pack, additional copies available from the FIS).



Reverse of diagram can be seen on page 30.



# Conducting an assessment

In the next few pages you will find guidance on conducting an assessment to ensure a fair and transparent process and giving consideration to the tone and language of questions posed to the family.

*Examples are based on an actual case with all recognisable details changed to ensure confidentiality. We have used the same case to 'sample-fill' an EHAP form to demonstrate its use (see page 31).*

**Good practice** before initiating the EHAP process is to talk to the family on an informal basis to fully understand their situation and to build a case background. If services are already working or have worked with the family before – it is useful to familiarise yourself with what has and hasn't worked previously to build on any positives and not repeat less useful strategies or actions.

## Sample case background

*Information gathered during a meeting between Kasia (Anna's mother) and the headteacher (without a translator).*

Kasia's husband died three years ago. She had relied on him to deal with the money and bills. He spoke good English, Kasia's English is limited.

Kasia has never really recovered from her husband's death and doesn't really know what to do. She doesn't want people in the local Polish community knowing her business.

Kasia and her 10-year-old daughter Anna were evicted from their flat in Ealing 18 months ago for non-payment of rent. All of their belongings were put into storage by the housing company except for anything they could carry.

Since the eviction Kasia and Anna have been sleeping on the living room floor at a relative's house. At weekends and holidays they must leave the house by 7am and stay out for the day because having them

stay is putting a strain on her relative's family and relationships.

Kasia feels very confused and distressed. She doesn't have anywhere to go during the day so she just wanders the streets. She calls in at the housing department nearly every day but does not understand what's going on when she gets to see someone. She does not know how to get her belongings back or find a new place in Ealing. She never waits for translators to be called.

Anna's journey to school takes a long time. They take three buses and Anna is often late, missing half of every first lesson. Other children are noticing and commenting.

The school made a referral to ECIRS but the case was closed after a social worker visited the family and felt there were responsible adults around and Anna could transfer to a Brent school so that she did not miss her lessons. ECIRS are unable to get involved as the family now live outside the borough.

The school is worried because Anna is no longer achieving well in her learning. As a Year 6 pupil, she was expected to achieve level 5 in her SATs which is now unlikely. In literacy there are concerns that Anna will not even achieve the national requirement of a level 4, despite this easily being within her reach.

Anna appears to be taking responsibility for her mother and this is making her feel embarrassed.

### Issues

1. Kasia has become homeless through her lack of ability to understand her circumstances and her inability to:
  - Read the paperwork
  - Meet with the housing association
  - Report to the homeless person's unit
  - Follow instructions when people answer her queries etc

2. Kasia has put Anna's wellbeing at risk and does not realise to what extent. She seems to consider Anna's needs as secondary.
3. The housing situation has lasted too long without a satisfactory solution.

### Concerns

1. Kasia is not able to provide adequate accommodation or take proactive decisions in order to give Anna a settled and stable home life.
2. Kasia and Anna should not have their belongings still in storage.
3. Anna's learning and development is being seriously affected.



# Example questions for the assessment

Below are example questions based on the sample case background on page 25 and used in the sample-filled EHAP form on page 31. These questions are for this example only and not intended to be definitive or actual 'set' questions.

## 1. Development of unborn baby, child or young person

### General health

Diagnosis, conditions and impairments; results of medical investigations; access to and use of dentist, GP, optician; immunisations, developmental checks, hospital admissions, accidents, health advice and information.

#### **Question for Kasia:**

*How is Anna's health? Has she been to the doctor lately?*

#### **Question for Anna:**

*What time do you go to sleep? Do you wake up during the night?*

### Physical development

Fine motor skills (drawing etc); gross motor skills (mobility, playing games and sports etc); activity; relaxation; nourishment; weight; height; vision; hearing.

#### **For Anna:**

*Anna, how do you spend your time outside of school? Do you play any sports?*

#### **For the school nurse:**

*Is Anna's height and weight within normal levels for her age group?*

### Speech, language and communication

Preferred communication, language, conversation, expression, questioning; games; stories and songs; listening; responding; understanding.

#### **For the class teacher:**

*Are Anna's language and comprehension skills appropriate to her age?*

#### **For Kasia:**

*What does Anna like talking about?*

### Emotional and social development

Feeling special; early attachments; risk/actual self-harm; phobias; psychological difficulties; coping with stress; motivation, positive attitudes; confidence; relationships with peers; feeling isolated and solitary; fears; often unhappy.

#### **For Anna:**

*How does it make you feel when you get to school late?*

#### **For the class teacher:**

*How do other children in the class treat Anna?*

### Identity, self-esteem, self-image and social presentation

Perceptions of self; knowledge of personal/family history; sense of belonging; experiences of discrimination due to race, religion, age, gender, sexuality and disability.

#### **For Kasia:**

*How did Anna cope when her father died? What does she remember about her father?*

**For Anna:**

*Anna, what makes you feel proud?*

**Family and social relationships**

Building stable relationships with family, peers and wider community; helping others; friendships; levels of association for negative relationships.

**For Anna:**

*How do you get on with the cousins you are staying with?*

**For Kasia:**

*Does Anna visit any other family members?*

**Self-care skills and independence**

Feeding, washing, dressing; positive separation from family; becoming independent; boundaries, rules, asking for help, decision-making; changes to body; details of any aids or special equipment used, and any extra supervision needs. Only ask about special equipment if you know the child has a disability.

**For Kasia:**

*Can Anna organise her clothes, school equipment, wash and dress herself? Is there anything you feel she needs help with?*

**For the class teacher:**

*Does Anna follow rules and know how to keep herself safe?*

**Learning**

**Understanding, reasoning and problem solving**

Organising, making connections; being creative, exploring, experimenting; imaginative play and interaction.

**For the class teacher:**

*What are Anna's problem solving skills like?*

**For Anna:**

*What games do you like to play with other children?*

**Participation in learning, education and employment**

School history: changes, achievements and special aptitudes; access and engagement; attendance and punctuality; participation; adult support; access to appropriate resources.

**For Kasia:**

*Why is Anna having problems with attendance?*

**For the class teacher:**

*Which lessons does Anna like best? Which does she like least?*

**Progress and achievement in learning**

Progress in basic and key skills; available opportunities; support with disruption to education; level of adult interest.

**For Anna:**

*How easy do you find it to do your homework when you're at home? Does anyone help you with it?*

**For the class teacher:**

*Is Anna on target to meet her predicted levels? If not, why?*

**Aspirations**

Ambition; pupil's confidence and view of progress; motivation, perseverance.

**For Anna:**

*Anna, what would you like to do when you're older? What subjects do you think you would most like to do in high school?*

**For Kasia:**

*Has Anna worked to achieve goals in the past?*

## 2. Parents and carers

### Basic care, ensuring safety and protection

Provision of food, drink, warmth, shelter, appropriate clothing; personal, dental hygiene; engagement with services; safe and healthy environment.

**For Kasia:**

*How are you managing with your belongings in storage? What are you doing to try and get a home for you and Anna?*

**For Anna:**

*What meals does your mother prepare for you?*

### Emotional warmth and stability

Stability, affection, stimulating family environment; praise and encouragement; secure attachments; frequency of house, school, employment moves.

**Kasia:**

*What are you telling Anna about your housing situation? How much support are you getting from your doctor?*

**Anna:**

*How do you get along with your mother?*

### Guidance, boundaries and stimulation

Encouraging self-control; modelling positive behaviour; effective and appropriate discipline; avoiding over-protection; support for positive activities.

**For Kasia:**

*Do you encourage Anna to do things for herself? How does she respond to boundaries at home?*

**For Anna:**

*What do you do when you feel angry about something?*

NB: If some of these needs are not being met by the parent/carer try to assess why this may be - for example, the parent may have a physical disability.

## 3. Family and environment

### Family history, functioning and well-being

Illness, bereavement, violence, parental substance misuse, criminality, anti-social behaviour; culture, size and composition of household; absent parents, relationship breakdown; physical disability and mental health; abusive behaviour.

**For Kasia:**

*What was it like for you when you first arrived in the country? How have you coped with the death of your husband and the eviction?*

**For Anna:**

*How did you cope when you had to leave your home?*

### Wider family

Formal and informal support networks from extended family and others; wider caring and employment roles and responsibilities.

**For Kasia:**

*Which members of the family are able to help you? Do you have any friends you could stay with during the day?*

**For Anna:**

*Do you ever visit anyone from your father's family?*

**Housing, social and community elements and resources**

Water/heating/sanitation facilities, sleeping arrangements; reason for homelessness; day care; places of worship; transport; shops; leisure facilities; crime, anti-social behaviour in area; peer groups, social networks and relationships.

**For Kasia:**

*What is your current housing situation? What would you like housing to do to help you?*

**For Anna:**

*Where do you sleep at night? Do you hear a lot of noise when you are trying to fall asleep?*

**Employment and financial considerations including education**

Employment/unemployment, shift patterns, income/benefits; effects of hardship, training needs, volunteering.

**For Kasia:**

*What benefits do you get? Would you like to work? Would you consider taking a class to improve your English?*

**For practitioner:**

*Are there any classes Kasia can take to improve her English and self-confidence?*

**A good assessment is:**

- Efficient** – assesses the needs of the child/young person and their family
- Balanced** – looks at strengths/positives as well as needs
- Inclusive** – reflects the views and wishes of the family
- Unbiased** – remains fair, impartial and non-judgemental
- Solution-focussed** – concentrates on appropriate and doable actions to achieve the desired results
- Authentic** – an accurate, evidence-based record of discussions
- Clear** – concise and easy to understand

If you have an EHAP related enquiry, please contact the **Family Information Service** on **020 8825 5588** (Mon-Fri, 9am to 5pm) email [EHAP@ealing.gov.uk](mailto:EHAP@ealing.gov.uk) or visit [www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP)



# Early Help Assessment and Plan (EHAP) Form

This EHAP form replaces the Common Assessment Framework (CAF) form. The process for assessing the needs of a child/young person/family and creating an action plan to address those needs - remains the same.

## Before initiating use of an EHAP

- 1 Ensure there are **NO immediate child protection concerns**.  
If at any time you are concerned about the welfare or safety of a child/young person – call the Ealing Children’s Integrated Response Service (ECIRS) to discuss your concerns and get advice. Appropriate action will then be taken **020 8825 8000** (24hrs).
- 2 Consider whether **a multi-agency approach is necessary** - or whether a single organisation/service can meet all the child/young person’s needs.
- 3 You must contact the Family Information Service (FIS) to **find out if an EHAP is already in use** for the child/young person or a sibling. And to obtain the registration number and Lead Professional contact details (for an existing EHAP) or **register a new EHAP**. Call **020 8825 5588** (Mon-Fri, 9am-5pm).

**EHAP Initiator comment** Use this space to explain why an EHAP is being initiated for this child/young person giving a brief overview of possible needs. Include an overview of the home situation and family structure.

Anna (aged 10) is arriving late for school every day and misses half of every first lesson - which is commented on by the other children. She is not achieving well despite her abilities. She feels a big sense of responsibility for her mum.

Spoke to Anna's mother and found out that mum is not coping well with their present circumstances. They are homeless and living temporarily with Anna's aunt and sleeping on the living room floor. They take three buses to get to school each morning and their belongings have been put into storage by the housing association.

### EHAP Initiator's details

Date EHAP initiated: 1/2/14

Role: Head Teacher

Tel: 020 8888 8888

Full name: Ms M

Organisation/service: Example Primary School

Email: head@example.ealing.sch.uk

# Identifying Details



**EHAP No.**

12345

## Child/young person's details

If unborn baby state name as 'unborn baby' and mother's full name e.g. 'unborn baby of Ann Smith'

First name: Anna

Surname: S

Previous name: n/a

Date of birth or expected date of delivery: 1/12/1999

Gender:  Male  Female  Unknown

Address: short-term/temporary situation -  
see EHAP Initiator Comment

Postcode: \_\_\_\_\_

Tel: n/a

Family's religion: Catholic

School (name and town): Example Primary School

GP name: Dr P

GP address: Example Medical Centre  
123 Uxbridge Road, Ealing W5

Postcode: \_\_\_\_\_

GP tel: 020 8444 4444

NHS no. (if known) n/a

## Parent/carer (1)

First name: Kasia

Surname: S

Address: (if different from child/young person) n/a

Postcode: \_\_\_\_\_

Tel: 0123456789

Relationship to child/young person: mother

Parental responsibility:  Yes  No

Parent's first language: Polish

Is an interpreter required for meetings?  Yes  No

## Parent/carer (2)

First name: \_\_\_\_\_

Surname: \_\_\_\_\_

Address: (if different from parent/carer 1) \_\_\_\_\_

Postcode: \_\_\_\_\_

Tel: \_\_\_\_\_

Relationship to child/young person: \_\_\_\_\_

Parental responsibility:  Yes  No

Parent's first language: \_\_\_\_\_

Is an interpreter required for meetings?  Yes  No

## Sibling's name

## Gender

## Date of birth

## School

Sibling's name	Gender	Date of birth	School
<u>n/a</u>			

## Additional needs/disability/SEN

Does the child/young person have additional needs, special educational needs or a disability?

Yes  No If yes, give details: \_\_\_\_\_

Does the child/young person have a statement of special educational needs?  Yes  No

Does anyone in the family have any accessibility requirements for meetings?

Yes  No If yes, give details: \_\_\_\_\_

## Is this child/young person a young carer?

Yes  No  Uncertain



**Ethnicity**

**EHAP No.**

12345

**Asian or Asian British**

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background\*

**Mixed**

- White & Black Caribbean
- White & Black African
- White & Asian
- Any other mixed background\*

**Black or Black British**

- Caribbean
- African
- Any other Black background\*

**White**

- White British
- White Irish
- Gypsy/Roma
- Traveller of Irish heritage
- Any other White background\*

**Chinese or other ethnic group**

- Chinese
- Arab
- Any other ethnic group\*
- Not given

\*If other please specify:

Polish  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Services already working with this child/young person and their family**

n/a  
\_\_\_\_\_  
\_\_\_\_\_

**Consent for information storage and information sharing**

I understand the information recorded on this form. I give consent to my information being shared with the services indicated with a tick  below for the purpose of setting up the first Team Around the Family meeting to enable access to help and support from these services.

- |   |   |   |  |
|---|---|---|--|
| <input checked="" type="checkbox"/> Family Information Service (for support and/or to register this EHAP) | <input type="checkbox"/> Children's centres | <input type="checkbox"/> Health         | <input type="checkbox"/> ECIRS (Ealing Children's Integrated Response Service)     |
|   | <input type="checkbox"/> Childcare provider | <input type="checkbox"/> Youth services |  |
|   | <input type="checkbox"/> School             | <input type="checkbox"/> Police         | <input type="checkbox"/> ESCAN (Ealing Service for Children with Additional Needs) |

Please be aware we will contact Social Services if at any time during the EHAP process the child/young person has been harmed or is at risk of harm or abuse.

Full name (BLOCK CAPITALS): KASIA S

Signature: Kasia S Date: 2/2/14

I am  the young person (aged 12-16),  the parent of the child/young person,  the carer of the child/young person.

Verbal consent to initiate an EHAP may be given by the young person (aged 12-16) and/or their parent/carer. However, written consent must then be obtained at the very first opportunity and BEFORE any information can be shared or stored electronically. For children under the age of 12, parental consent must be obtained before initiating an EHAP.

Verbal consent obtained from: \_\_\_\_\_ Date: \_\_\_\_\_

EHAP Initiator's full name: \_\_\_\_\_ Signature: \_\_\_\_\_



Date of first TAF: 11/2/14

Child/young person's full name: Anna S Date of birth: 1/12/1999

Lead Professional: A B

Role: Deputy Head/SENCO Coordinator Organisation/service: Example Primary School

Tel: 020 8888 8888 Email: ab@example.ealing.sch.uk

Attendee (full name)	Role	Organisation/service	Tel
Ms Kasia S	Parent		0123456789
Mrs M	Head Teacher	Example School	020 8888 8888
Ms A B	Deputy Head/SENCO	" "	020 8888 8888
Ms V	Class Teacher	" "	020 8888 8888
Ms R	School Nurse	" "	020 8888 7777
Mr F	Interpreter	" "	020 8888 5555

**Development of unborn baby, child or young person:**

Anna does not talk about her father's death and presents as an anxious child, rarely initiating conversation with adults. She has severe asthma, which has affected school attendance. Anna has withdrawn from active engagement in learning since the family's eviction and is likely not to read at level 4 literacy as expected. Anna aspires to have a home with her belongings and go to high school with her friends from school.

**Parents and carers:**

Kasia is a very private person, with limited English. She is taking medication and appears depressed and overwhelmed by her situation. Kasia finds it difficult to seek support and is still dealing with the death of Anna's father three years ago. Anna feels responsible for her mother.

**Family and environment:**

Kasia feels unable to make arrangements to move, find accommodation and get her belongings out of storage. Her family don't allow her to use their address on official forms and this prevents Kasia from claiming benefits other than £30 per week income support. So she is in debt.

Is the child/young person involved in caring for a relative or sibling on a regular basis?

**Analysis and summary of assessed needs:**

Anna and her mother need emotional support to manage their situation and the bereavement. Anna needs to feel secure at school now and in future to help her re-engage in learning and not feel responsible for her mother. The family need to find accommodation (with support) to give them security, enable them to claim benefits and for Kasia to begin to manage her debt.



Needs and desired result (Number in order of priority)	Planned actions (Indicate name/service)	Desired completion date
1. Anna to get to school on time.	School to offer Anna's mum (Kasia) support in checking best transport option.	18/2/14
2. A high school place needs to be secured.	Reports to support application to be written by Deputy Head/SENCO (LP).	25/2/14
3. Bereavement support to Kasia and offered to Anna.	LP to make a referral to ECIRS with a view to accessing SAFE 0-18 counsellors.	18/2/14
4. Anna supported in learning and after school activities.	Class teacher to plan learning support sessions and offer after school club activities.	18/2/14
5. Support with housing and managing current situation, benefits and debt.	LP to help Kasia make a new appointment with the Local Authority Housing department with an interpreter present.	18/2/14
6. Ensure Anna's asthma is being managed well.	School Nurse to make referral to the regional Asthma Nurse.	18/2/14

Family or young person's comment on the action plan or anything else so far:  
 Anna is excited and relieved that adults are helping her mother.

**Consent for assessment, agreed actions and choice of Lead Professional**

I understand and agree with the assessment and proposed action plan and choice of Lead Professional. I consent to my information being shared with the services identified in the action plan for the purpose of accessing these services.

Full name (BLOCK CAPITALS): KASIA S

Signature: Kasia S Date: 11/2/14

I am  the young person (aged 12-16)  the parent of the child/young person  the carer of the child/young person

**Agreed date for next Team Around the Family meeting (review):** 25/2/14

Lead Professional's full name: Annie B Signature: AB

**Lead Professional checklist**

- Ensure the security of this form and its contents both paper and electronic.
- Notify the Family Information Service (FIS) of the first TAF meeting and planned review date, giving your contact details as the Lead Professional.

# Action Plan Review



Photocopy for additional reviews

EHAP No.

12345

Date of review: 25/2/14

Child/young person's full name: Anna S Date of birth: 1/12/1999

Lead Professional: A B Tel: 020 8888 8888

Attendee (full name)	Parent Role	Organisation/service	Tel
Ms Kasia S	Parent		0123456789
Ms A B	Lead Professional		020 8888 8888
Mrs M	Interpreter	Language Agency	020 8888 5555
Ms L	Family Support Worker	SAFE O-18	020 8888 3333

**Were actions effective in achieving desired results?** (Number points in relation to action plan and use effectiveness rating below)

- 1) Mostly effective: getting to school on time - Anna is on time most days.
- 2) Partly effective: a supporting statement stating extenuating circumstances submitted to in-year admissions to try to find a high school place.
- 3) Partly effective: a SAFE O-18 counsellor is arranging to meet Anna and Kasia to discuss bereavement support. No appointment made yet. GP is also looking into possible support.
- 4) Mostly effective: Anna has joined an after school club and booster class to help her catch up. Attended most sessions but not all.
- 5) Partly effective: Ealing's housing department is looking at possible accommodation. Sadly, stored possessions have been lost.
- 6) Completely effective: Asthma Nurse has seen Anna and medication has been adjusted.

**Ineffective:** No noticeable/measurable outcome/improvement. **Partly effective:** Small noticeable/measurable outcome, but still much to do to achieve the desired result. **Mostly effective:** Most of the desired result has been achieved. A little extra effort is needed to achieve/sustain all the desired results. **Completely effective:** Desired result achieved and can be maintained without further support.

**Continuing needs and desired result**

(Number in order of priority)

Housing to be identified

**Further actions**

(Indicate name/service)

Family support worker to pursue housing application.

**Desired completion date**

28/3/14

Belongings to be replaced

Family support worker to research funding and volunteer/charity services to replace some belongings.

28/3/14

Bereavement counselling

SAFE O-18

28/3/14

Date of next review meeting:

2/4/14

**Consent for agreed further actions (if applicable) or closure of the EHAP**

I understand and agree with the proposed further action and consent to my information being shared with the services identified for the purpose of accessing these services.

The desired results have been achieved and I consent to the EHAP closing.

I no longer wish to continue with the EHAP and ask for it to be closed.

EHAP closed by LP as level of need has escalated to Level 4/ statutory services.

Family comment on progress, agreed further actions or closure:

Anna is much happier at school. Kasia emphasised the need to still find accommodation.

Full name (BLOCK CAPITALS): Kasia S Signature: KASIA S Date: 25/2/14

I am  the young person (aged 12-16)  the parent/carer of the child/young person  the Lead Professional

# Action Plan Review



Photocopy for additional reviews

**EHAP No.**

12345

Date of review: 2/4/2014

Child/young person's full name: Anna S

Date of birth: 1/12/1999

Lead Professional: A B, Example Primary School

Tel: 020 8888 8888

Attendee (full name)	Role	Organisation/service	Tel
<u>Ms Kasia S</u>	<u>Parent</u>		<u>0123456789</u>
<u>Ms R</u>	<u>School Nurse</u>	<u>Example Primary School</u>	<u>020 8888 7777</u>

**Were actions effective in achieving desired results?** (Number points in relation to action plan and use effectiveness rating below)

Mostly effective - awaiting decision on high school place all paperwork submitted.

Mostly effective - GP has arranged five sessions of bereavement counselling due to start May.

Mostly effective - family have been placed in temporary accommodation nearer the school and allocated a housing officer.

Partially effective - charity contacted and application made to replace key lost possessions.

**Ineffective:** No noticeable/measurable outcome/improvement. **Partly effective:** Small noticeable/measurable outcome, but still much to do to achieve the desired result. **Mostly effective:** Most of the desired result has been achieved. A little extra effort is needed to achieve/sustain all the desired results. **Completely effective:** Desired result achieved and can be maintained without further support.

**Continuing needs and desired result**  
(Number in order of priority)

**Further actions**  
(Indicate name/service)

**Desired completion date**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Date of next review meeting: \_\_\_\_\_

**Consent for agreed further actions (if applicable) or closure of the EHAP**

- I understand and agree with the proposed further action and consent to my information being shared with the services identified for the purpose of accessing these services.
- The desired results have been achieved and I consent to the EHAP closing.
- I no longer wish to continue with the EHAP and ask for it to be closed.

EHAP closed by LP as level of need has escalated to Level 4/ statutory services.

Family comment on progress, agreed further actions or closure:

I am happy that we have accommodation and it is closer to Anna's school. I hope we will hear about a high school place soon. Anna is doing better at school and seems to be happier.

Full name (BLOCK CAPITALS): Kasia S Signature: KASIA S Date: 2/4/2014

I am  the young person (aged 12-16)  the parent/carer of the child/young person  the Lead Professional

# Frequently Asked Questions (FAQs)

## Q1. Who is the EHAP for?

The EHAP is for children and young people who need additional support over and above that which can be provided by a coordinated effort from their school and family, or whose needs are broader than those that can be met by a single service or agency. These children are considered to be at risk of not achieving their full potential without a coordinated multi-agency approach to address their needs.

## Q2. Who is most likely to initiate an EHAP?

It is expected that the majority of EHAPs will be initiated by practitioners from universal services, i.e. early years and childcare settings, schools and health services. Practitioners from these services are best equipped to identify possible needs in their early stages. They have regular contact with the child/young person and their family and can identify whether multi-agency support is needed. They will also have some understanding of which practitioners and services to invite to the first Team Around the Family (TAF) meeting. They may have a good relationship with the child/young person and their family and be in a position to introduce the EHAP process to them.

## Q3. Who is most likely to be the Lead Professional?

Any practitioner can become the Lead Professional – appointed at the first Team Around the Family (TAF) meeting in agreement with the family. If appropriate, the EHAP Initiator can take on the role of Lead Professional, but is not obliged to do so.

The Lead Professional keeps in close contact with the family throughout the EHAP process so is often the person the family is most

comfortable with or a practitioner who the family are confident can move things forward for them.

## Q4. What if an EHAP already exists for a child/young person's sibling(s)? Will I need to start a new EHAP for the child/young person I am working with?

If an EHAP exists for a sibling, contact the Lead Professional to understand the family's situation. If children in the family have significant differing needs then each child will need their own EHAP. However, if there are similar needs for the siblings (for example if a shared event or situation is affecting them all and in a similar way) then one EHAP for the family would be sufficient (using the details of the youngest child for registration) but ensure all siblings are included in the assessment.

## Q5. Do I need parental consent to initiate the EHAP for a child/young person?

For a child under 12, parental consent must be obtained. For a young person between the ages of 12 and 16, a judgement about the need for parental consent should be made according to their needs and to their understanding of what they are agreeing to. However, it is good practice to encourage the young person to involve their parents/carers in the process if at all possible - for a whole-family approach to dealing with their needs.

## Q6. Does the family have to be present at each Team Around the Family (TAF) meeting?

The EHAP is designed to include full participation of the child/young person and their family throughout each stage of the process. Therefore, the family should be present at each TAF meeting.

In exceptional circumstances the family may choose not to attend a TAF meeting or review. In all instances the family has to provide informed consent at each stage of the process to ensure they are happy with the information recorded on the EHAP form and for it to be stored and shared with the services identified in the action plan. The young person or parent/carer must in all cases sign the completed EHAP form and be given a final copy of the form before any action is implemented.

### **Q7. Can a Multi-Agency Panel (MAP) meeting replace a Team Around the Family (TAF) meeting?**

A MAP meeting cannot replace a TAF meeting, as the family is not present. However, MAP meetings can be used to ensure multi-agency awareness of support already being implemented through the EHAP for a specific child/young person. The Lead Professional's details may be disclosed so that professionals from the MAP meeting can get in touch.

### **Q8. What happens if the family changes their mind about proceeding with an EHAP after one has been initiated?**

A family can withdraw from the EHAP process at any time. The EHAP is then closed with the reason noted on the EHAP form and the Family Information Service (FIS) advised of the closure.

If there are child protection concerns the EHAP will still be closed but the case will be referred to ECIRS (Ealing Children's Integrated Response Service) for assessment with the possibility of Level 4 statutory services involvement.

### **Q9. What happens if I believe the EHAP process would be helpful for a child/young person but the family does not consent to an EHAP?**

Ensure you have explained the process and its benefits. If they still do not want to engage with the process – they are within their rights to refuse as the EHAP is voluntary.

However, using your knowledge of the family and your professional judgement – if you are still concerned about the welfare of the child/young person – contact ECIRS (Ealing Children's Integrated Response Service) for advice.

ECIRS may have had calls from other professionals relating to the same family and can make an informed decision about how to take things forward to ensure a vulnerable child/young person is not overlooked.

### **Q10. If I initiate the EHAP for a child/young person, does that automatically make me the Lead Professional?**

No, you can become the EHAP Initiator and initiate the EHAP for a family without taking on the Lead Professional role. The Lead Professional is appointed at the first Team Around the Family (TAF) meeting. As EHAP Initiator you may volunteer to be considered for the role of Lead Professional or the family may request that you take on the role - but you are not obliged to do so.

### **Q11. As the EHAP Initiator, what can I do if I find it difficult to get the right people around the table for the first TAF meeting?**

Contact the Family Information Service (FIS) who will support you in making contact with the right people at the required services.

### **Q12. How can I ensure that a practitioner attending the first Team Around the Family (TAF) meeting will be prepared to take on the role of Lead Professional?**

As EHAP Initiator, you should make practitioners/services invited to the first TAF meeting aware that a Lead Professional will be appointed during the meeting. This enables the service in question to make an informed decision about who is best placed to attend the TAF.

**Q13. What happens if I take on the Lead Professional role and then circumstances change and I am no longer able to carry out that role?**

1. Advise the Family Information Service (FIS) who maintain the EHAP register of your intention to withdraw from the Lead Professional role.
2. Advise practitioners/services/agencies planning to attend the next Team Around the Family (TAF) review meeting of your intention to withdraw from the role.
3. Make the family aware of your intention to withdraw from this role and advise them that you will hand over to an agreed practitioner (chosen with their input) at the next TAF review meeting.
4. If at all possible you should attend the next TAF review meeting to support the appointment of a suitable replacement for the Lead Professional role and as a courtesy to the family.

**Q14. What happens if my service's information sharing policy contradicts instructions/guidance in the EHAP information-sharing requirement?**

The information-sharing requirement in the EHAP process states that the EHAP form should only be copied to those services identified in the action plan, where consent has been obtained from the family. The EHAP form is also copied to the family for transparency.

This is a limited and consent-based level of information sharing. Therefore it is unlikely to contradict your own information sharing policy.

Your service will at all times be responsible for EHAPs you are working with and forms must be kept in secure filing.

**Q15. What does 'secure filing' mean?**

All practitioners handling personal information must do so securely. Secure filing for paper records (including EHAP forms) means a locked cabinet or similar storage accessible only to those who have a legitimate reason and permission to see its contents. Electronic secure filing can be achieved by password protecting folders and files, and making sure data is not copied onto portable devices, disks or memory sticks.

When posting copies of EHAP forms to services identified in the action plan or that attended Team Around the Family (TAF) meetings (where consent to share information has been given by the family) - ensure the envelope is sealed and clearly addressed with a return address and use a 'signed-for' postal service.

**Q16. Who should initiate an EHAP for a child if they attend childcare or a school in the London Borough of Ealing but live in another borough?**

The childcare provision or school where the child attends should initiate the EHAP. Each borough has its own cross-boundary protocol so it would be helpful to talk to the EHAP (or corresponding early help team) or Family Information Service of the neighbouring borough to check what their requirements are for information sharing and whether their childcare services are already working with the family in question.



# Resources - useful websites



## Ealing Council website

[www.ealing.gov.uk](http://www.ealing.gov.uk)

## Child Poverty Strategy & Campaign

[www.ealing.gov.uk/cps](http://www.ealing.gov.uk/cps)

## Early Help Assessment and Plan (EHAP)

[www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP)



## Family Services Directory Online

Online searchable directory of services

[www.ealing.gov.uk/fsd](http://www.ealing.gov.uk/fsd)



## Ealing Children's Centres

Children's centres, early years, family support

[www.childrenscentres.org.uk](http://www.childrenscentres.org.uk)



## EalingHELP

For families living with additional needs and disabilities

[www.ealinghelp.org.uk](http://www.ealinghelp.org.uk)



## Young Ealing

Includes advice and information on education, health, employment and leisure activities for young people.

[www.youngealing.co.uk](http://www.youngealing.co.uk)



## NHS

Birth to Five Development Tool

[www.nhs.uk/Tools/Pages/birthtofive.aspx](http://www.nhs.uk/Tools/Pages/birthtofive.aspx)



## NHS Choices

Find your nearest

[www.nhs.uk/Service-Search](http://www.nhs.uk/Service-Search)

# Resources - useful publications

Downloads available from [www.ealing.gov.uk/EHAP](http://www.ealing.gov.uk/EHAP). Print copies available by emailing [EHAP@ealing.gov.uk](mailto:EHAP@ealing.gov.uk) (unless otherwise stated).

If in the course of your work you think of a piece of information or publication, poster etc that would be useful - ask us. We may already have it or similar or it might prompt us to produce it.



## **Quick Guide to Ealing Family Support Services**

*Download/Print*

A guide to all services within Ealing Council and immediate partners within the borough.



## **Ealing's Assessment Protocol & Thresholds of Need Guide**

*Download/Print*



## **Ealing Child Protection Procedures**

*Download only*

Guidance for Voluntary, Community and Private Sector Organisations



## **A Child Poverty Strategy for Ealing**

*Published July 2013*

*Download at [www.ealing.gov.uk/cps](http://www.ealing.gov.uk/cps)*

*Print copies from [children@ealing.gov.uk](mailto:children@ealing.gov.uk)*



## **Ealing Children's Centre Guide**

*Published yearly*

*Download at [www.childrenscentres.org.uk](http://www.childrenscentres.org.uk)*

*Print copies from [children@ealing.gov.uk](mailto:children@ealing.gov.uk)*

A guide to the 27 children's centres located across the borough.



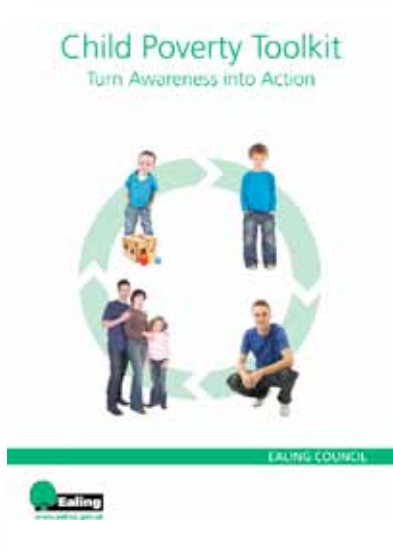
## **Children & Families Activity Guide**

*Published yearly*

*Download at [www.childrenscentres.org.uk](http://www.childrenscentres.org.uk)*

*Print copies from [children@ealing.gov.uk](mailto:children@ealing.gov.uk)*

Clubs, groups, after-school activities, parks and open spaces, libraries, leisure centres, specialist facilities etc for children and families.



The Child Poverty Toolkit is a very simple and effective tool to assist professionals working with families at all levels (including frontline services) to 'unravel' what child poverty actually means to a child, young person and family living in Ealing today. It looks at life situations and experiences from the point of view of the child, young person and family - alongside local statistics covering health, education, employment and much more.

Use the toolkit to kick-start discussion about what you can actually do better or differently within your own line of work and within your organisation to make a positive difference to the lives of children, young people and families living in the borough.

### Feedback from users:

**Samira John**, Early Years Consultant  
Early Years Foundation Stage Team

*'For me, the toolkit reinforced my personal belief that through making small changes that we are all capable of – you can make a difference to the life of a child – even if it is improving one small factor.'*

**Carolyn Sawyer**, Programme Officer  
Came Women and Girls Development Organisation

*'Carolyn answered 'yes' on the feedback form to finding the toolkit informative, sharing it with colleagues and using it to re-evaluate the charity's service and to identify different levels of deprivation amongst families.'*

**Result:** *'The charity is setting up a reading programme for young children, groups for parents to discuss money management, domestic violence and parenting.'*

**Sukhvinder Kaur**, BMER Fundraising & Development Officer  
Southall Community Alliance

*'SCA has used the toolkit to better inform our work with the voluntary and community sector and directly with the community in Southall. In particular it has informed our most recent project funding application to the John Lyons Charity. As a result, we were successfully awarded a grant to look at ways of working with voluntary and community sector groups to minimise the impact of poverty on children and young people.'*

Email [children@ealing.gov.uk](mailto:children@ealing.gov.uk) with your name and address and number of copies you'd like to receive. Alternatively, download a copy at [www.ealing.gov.uk/cps](http://www.ealing.gov.uk/cps)

# EHAP Quality Assurance in Ealing

To ensure the Early Help Assessment and Plan is working for families – there needs to be a quality measure – a way of reviewing and assessing the effectiveness of the process.

In Ealing we have devised a rating and scoring system that looks at:

1. Use of the EHAP process and form
2. Effectiveness of the action plan and actions taken in achieving the desired results
3. Participation and inclusion of the family throughout the process
4. Accuracy of the EHAP Initiator's initial observations
5. Whether overall the EHAP made a significant and positive change in the life of the child/young person and their family.

## **Auditing assists services/organisations using the EHAP to:**

- ✓ Identify training needs within their service/organisation.
- ✓ Identify gaps in service delivery with a view to taking necessary steps to bridge the gaps including raising awareness of external support services locally and nationally, forming new partnerships, reporting back to the LA etc.
- ✓ Inform their service policies and ways of working.
- ✓ Feedback on the EHAP process to enable improvement.
- ✓ Gather evidence to demonstrate effectiveness of their service through reporting positive outcomes.

## **London Borough of Ealing's EHAP auditing requirement**

In addition to the auditing requirement placed on each service/organisation using the EHAP - the Local Authority also has an obligation to audit use of the EHAP process across the borough and report back to Ofsted.

For this purpose, services/organisations may be called upon to submit copies of EHAPs and completed EHAP Audit Forms for evaluation.

Requests for copies of forms for the LA's auditing purposes must be responded to in a timely manner and copies must be submitted securely either by secure email or registered/recorded post.

## **For the London Borough of Ealing audit results will help to:**

- ✓ Evaluate effectiveness of the early help offer
- ✓ Identify training requirements for services/organisations
- ✓ Provide monitoring data for the EHAP process to support service planning and developments in working practices
- ✓ Track outcomes for children and young people
- ✓ Identify gaps in local service delivery
- ✓ Evaluate effectiveness of specific multi-agency collaborations
- ✓ Enable an appropriate response to the reporting requirement for Ofsted

## Getting started

An EHAP Auditor from each service or organisation using the EHAP should read and familiarise themselves with this section of the guidance and with the EHAP Audit Form.

It is advisable to review/audit a few sample EHAPs to test your understanding of the scoring and rating system used within the EHAP Audit Form.

## The EHAP Auditor

The EHAP Auditor needs to be an operational manager, team leader or senior officer, from within the Lead Professional's service/organisation with the appropriate skills i.e attention to detail, analysis etc. to be able to score and rate the EHAP and complete the EHAP Audit Form.





## Auditing checklist:

1. A minimum of 10% (one in every 10 EHAPs) of the total number of EHAPs undertaken, completed and closed by a service/organisation must be audited.
2. Once audits are completed, the result should be phoned through to the Family Information Service to support monitoring of the EHAP process.
3. An audit schedule should be in place to systematically review EHAP forms. Recommended cycle is six-monthly intervals/twice yearly. Ealing's Family Information Service may ask for results at the beginning of each new financial year (April) and mid-year (October).
4. EHAP Auditors should have no prior involvement in the EHAPs being audited.
5. EHAP Auditors should have access to the secure filing where original EHAP forms are stored and must ensure the security of both the EHAP Forms and EHAP Audit Forms.

# The EHAP Audit Form

The EHAP Audit Form is intended to be simple to use and self-explanatory and is designed to assess five key areas: use of the process, effectiveness of the actions, participation of the family, accuracy of the EHAP Initiator's initial observations and whether overall the EHAP made a significant and positive difference to the lives of the child/young person and their family.

Each section is scored differently to arrive at a section rating of:

-  **Completely effective:** The action achieved the required change, and the change is likely to be maintained without further support.
-  **Mostly effective:** The action achieved most of the required change and could be completely achieved with a little extra effort, or the change is effective but not sustainable without ongoing support.
-  **Partially effective:** The action resulted in a small, noticeable/measurable change, but there is still much to do to achieve the required change.
-  **Not effective:** The action did not result in any noticeable/measurable change.

Once the audit is complete, the score/rating for each section and the two questions is recorded on the front of the form, along with the EHAP registration number, details of the EHAP Auditor and Lead Professional, date when the EHAP was initiated, date it was closed and how many TAF meetings were involved throughout.

Comment boxes give the opportunity to review how well that particular EHAP worked, what could be done better/differently in future, any training needs identified etc. Feedback about the EHAP process is encouraged to support development and improvement.

The following pages show a 'sample-filled' EHAP Audit Form to demonstrate use of the form and the scoring and rating system.

For help with any aspect of the EHAP including the auditing and quality assurance requirement, contact the Family Information Service (FIS) on 020 8825 5588 or email [EHAP@ealing.gov.uk](mailto:EHAP@ealing.gov.uk)

The EHAP Auditor for each service/organisation should complete this form. **Audit results must be logged with the Family Information Service (FIS) once completed - call 020 8825 5588 or email EHAP@ealing.gov.uk**

### Quick checklist for the EHAP Auditor:

- You are a team leader/manager/senior officer or equivalent
- The EHAP being audited is closed
- You have no prior involvement in the EHAP being audited

<b>Date of audit:</b> <u>18/4/2014</u>	<b>Number of review meetings:</b> <u>2</u>
<b>Date EHAP initiated:</b> <u>1/2/14</u>	<b>Date EHAP closed:</b> <u>2/4/2014</u>

EHAP Auditor: <u>Mr P S</u>	EHAP Auditor's role: <u>Head of Year 6</u>
Organisation/service: <u>Example Primary School</u>	Tel: <u>020 8888 3333</u> Email: <u>ps@example.ealing.sch.uk</u>
Child's full name: <u>Anna S</u>	DOB: <u>1/12/1999</u>
Lead Professional: <u>A B</u>	LP's role: <u>Deputy Head/SENCO</u>
Organisation/service: <u>Example Primary School</u>	Tel: <u>020 8888 8888</u> Email: <u>ab@example.ealing.sch.uk</u>

## Overview of final rating for each section/question

Note each section rating (Completely effective / Mostly effective / Partially effective / Not effective) below after completion of the audit.

<b>Section 1:</b> Review of using the EHAP process and form	Mostly effective
<b>Section 2:</b> Effectiveness of actions	Mostly effective
<b>Section 3:</b> Participation of the family	Mostly effective
<b>Question 4:</b> EHAP Initiator comment	Partially effective
<b>Question 5:</b> Did we make a difference?	Mostly effective

## EHAP Auditor comments (after completion of the audit)

As a service, is there anything you will develop, improve or change as a result of this audit? Please include training needs identified.

On the whole, this EHAP brought about positive change for the family so we are looking at it as a success.

Areas that need improving is remembering to include the views of the child about the action plan and documenting them.

And numbering new actions agreed in review meetings to assist auditing in future.

**If you have any feedback or suggestions regarding use of the EHAP process email your comments to EHAP@ealing.gov.uk**

## Section 1: Review of using the EHAP process and form

The rating system for this section assumes the target of a 'Good' rating and works backwards taking points off to arrive at the actual rating. For each question tick  the most appropriate rating. Then total the number of ticks in the 'Poor' and 'Not Completed' columns and calculate the rating for this section using the guidance below.

Question	N/A	Good	Satisfactory	Poor	Not completed
<b>Identifying details</b>					
Has the EHAP Initiator given clear reasons for initiating the EHAP?		✓			
Have the identifying details been recorded fully including the details of one/both parents/carers and ethnicity?		✓			
Have disabilities and access requirements been recorded?		✓			
Was written consent for information storage and information sharing from the family obtained?		✓			
<b>Assessment and action plan</b>					
Was the date and attendees of the first Team Around the Family (TAF) meeting recorded?		✓			
Is the Lead Professional identified and their contact details provided?		✓			
Were strengths and positives highlighted to the family, discussed and where appropriate recorded?				✓	
Were planned actions recorded, with who is responsible for each action and dates for completion?		✓			
Were all sections of the assessment completed well including summary of needs?		✓			
Were the needs and desired results recorded clearly and prioritised?		✓			
Is the information included evidence-based and non-judgemental?		✓			
Was the family given the opportunity to comment on the assessment and planned actions?		✓			
Was the date of the next TAF review meeting agreed and recorded?		✓			
<b>Action plan review(s)</b>					
Were the dates and attendees of review TAF meetings recorded?		✓			
Was the comment on progress completed for each TAF review meeting?		✓			
Were all planned actions reviewed?			✓		
Were further actions recorded, with who is responsible for each action and dates for completion?		✓			
If new services were identified – did the family give consent to share information and engage these services?	✓				
<b>EHAP closure</b>					
Was the reason for the EHAP closure indicated?		✓			
				<b>Poor</b>	<b>Not completed</b>
<b>Totals:</b> Count the number of ticks in the <b>Poor</b> and <b>Not Completed</b> columns and write the results here				1	n/a
<b>Sum total:</b> Add the two column totals and write the result here				1	

### Audit rating for section 1: EHAP process and form



Mostly effective

Select the correct rating, depending on the sum total above.

- 0** Completely effective
- 1-4** Mostly effective
- 5-9** Partially effective
- 10-19** Not effective – you should review with the Lead Professional how they are using the EHAP process



## Section 2: Effectiveness of actions


This section measures the effectiveness of the actions in achieving desired results and positive change in the lives of the child/young person and their family.


### Important


This section relies on the Lead Professional having completed the Action Plan and Action Plan Review(s) correctly by a) numbering each action point in the action plan and b) referencing the numbered points in subsequent reviews.


If this has not been done, you can number the actions retrospectively to enable scoring. You should note this in the comment box on the front of this form as a training requirement to ensure this is done correctly in future.

### For each action on the EHAP form, determine the relevant rating:

 **Completely effective:** The action achieved the required change, and the change is likely to be maintained without further support.

 **Mostly effective:** The action achieved most of the required change and could be completely achieved with a little extra effort, or the change is effective but not sustainable without ongoing support.

 **Partially effective:** The action resulted in a small, noticeable/measurable change, but there is still much to do to achieve the required change.

 **Not effective:** The action did not result in any noticeable/measurable change.

Add up how many <b>'unique'</b> actions were recorded during the action plan and subsequently all new actions identified as a result of reviews.				<b>Number of actions (x)</b>
				7
	<b>Not effective</b>	<b>Partially effective</b>	<b>Mostly effective</b>	<b>Completely effective</b>
<b>How many actions fit into each level of effectiveness?</b>		1	5	1
<b>Sum total: of Mostly and Completely effective (y)</b>			6	
<b>Percentage of effective actions:</b> divide the sum total (y) by the number of actions (x) and multiply by 100 which gives you a percentage score.				85.7 %

### Audit rating for section 2: Effectiveness of actions



Mostly effective

Select the correct rating, depending on the percentage above.

**95%-100%** Completely effective

**70%-94%** Mostly effective

**51%-69%** Partially effective

**Under 50%** Not effective – *you should review with the Lead Professional how actions are agreed, recorded and achieved*

### Section 3: Participation of the family

This section measures the participation of the whole family, i.e the child/young person as well as their parents/carers - who must remain central to every stage of the EHAP process.

For each question below, tick  the relevant answer, then total the number of ticks in the 'No' column and write the total at the end of the section as indicated.

Question	N/A	Yes	No
Did the family consent to sharing their information with a range of services for the purpose of accessing help and support?		✓	
Did the family attend the Team Around the Family (TAF) meetings?		✓	
Was the child/young person encouraged to contribute to discussions and was their view sought in agreeing the action plan?			✓
Did the family contribute/get involved in reviewing progress and agreeing new actions at the TAF review meetings?		✓	
Were the family's views taken into account during review meetings?		✓	
Was the child/young person given the opportunity to comment on the assessment, action plan or any other part of the process?		✓	
Did the family understand and agree with the reason for closing the EHAP?		✓	
Was the family's comment on the EHAP process positive on the whole?		✓	
Count the number of ticks in the 'No' column and write the result here			<b>Total</b>   1

#### Audit rating for section 3: Participation of the family



Mostly effective

Select the correct rating, depending on the total number of ticks in the 'No' column above.

- 0 Completely effective
- 1-2 Mostly effective
- 3-4 Partially effective
- 5-8 Not effective

Looking at the EHAP Initiator comment on the front of the EHAP Form being audited - answer question four using the effectiveness ratings.

#### Question 4:

How well did the EHAP Initiator assess presenting issues and possible needs?

Partially effective

Using professional judgement and the evidence within the EHAP being reviewed - rate the overall effectiveness of this EHAP to answer question five.

#### Question 5:

Did we make a difference? Did this EHAP deliver significant positive change to the lives of the child/young person and their family?

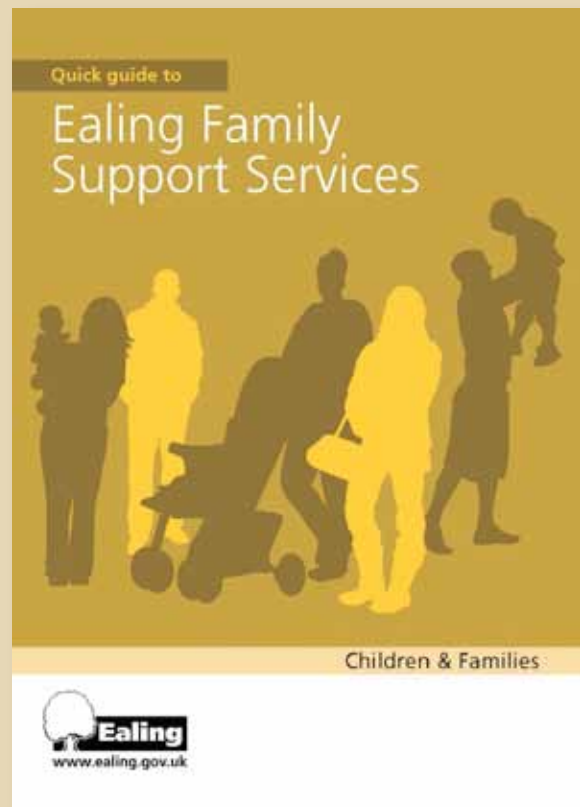
Mostly effective

Have you got  
your copy?

## Quick Guide to Ealing Family Support Services

This guide is aimed at professionals who work with children, young people and families. It will help you understand and access key services within Ealing Council and close partners.

Email [children@ealing.gov.uk](mailto:children@ealing.gov.uk) with your details - order as many copies as your team or service will use.



If at any time you become concerned about the welfare or safety of a child or young person call **ECIRS (Ealing Children's Integrated Response Service)** **020 8825 8000** (24hrs).

For EHAP enquiries, support and to replenish materials call the **FIS (Family Information Service)** on **020 8825 5588** (Mon-Fri, 9am - 5pm) or email **[EHAP@ealing.gov.uk](mailto:EHAP@ealing.gov.uk)**

