



Children's MARS Policy and Procedures

Early Help

August 2021

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Introduction

Providing early help is more effective in promoting the welfare of children than reacting later. Early help means providing support as soon as a problem emerges, at any point in a child's life, from pre-birth and the foundation years through to the teenage years. Early help can also prevent further problems arising; for example, if it is provided as part of a support plan where a child has returned home to their family from care, or in families where there are emerging parental mental health issues or drug and alcohol misuse.

[Working Together to Safeguard Children 2018](#) sets out the rationale for providing early help and provides clear expectations of all partners in relation to early help.

Effective early help relies upon local organisations and agencies working together to:

- identify children and families who would benefit from early help
- undertake an assessment of the need for early help
- provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child

Local authorities, under section 10 of the Children Act 2004¹, have a responsibility to promote inter-agency co-operation to improve the welfare of all children.

Identifying children and families who would benefit from early help

Any organisation or agency working with children, young people and families should have effective mechanisms to identify emerging problems and potential unmet need. Local authorities work with organisations and agencies to develop joined-up early help services based on a clear understanding of local needs. This requires all practitioners, including those in universal services and those providing services to adults with children, to understand their role in identifying emerging problems and to share information with other practitioners to support early identification and assessment.

Multi-agency training is important in supporting this collective understanding of local need. Practitioners working across universal, targeted and specialist services have a responsibility to identify the symptoms and triggers of abuse and neglect, to share that information and provide children with the help they need. To be effective, practitioners need to continue to develop their knowledge and skills in this area and be aware of the new and emerging threats, including online abuse, grooming, sexual or criminal exploitation and radicalisation.

[The One Family Approach - Helping Children and Families in North Lincolnshire document 2020/24](#) outlines the different levels of need and when professionals should make a referral if they believe a child is in need or at risk of significant harm.

¹ Section 10 of the Children Act 2004 requires each local authority to make arrangements to promote co-operation between the authority, each of the authority's relevant partners and such other persons or bodies working with children in the local authority's area as the authority considers appropriate.

The Children's MARS Board enables professionals to effectively, competently and consistently support children, young people and their families in the early help arena. It has processes in place that monitors and evaluates the effectiveness of frontline practice, training and outcomes for children and young people.

Practitioners should, in particular, be alert to the potential need for early help for a child who:

- is disabled and has specific additional needs²
- has special educational needs (whether or not they have a statutory Education, Health and Care Plan)
- is a young carer
- is showing signs of being drawn into anti-social or criminal behaviour, including gang involvement and association with organised crime groups
- is frequently missing/goes missing from care or from home³
- is at risk of modern slavery, trafficking or exploitation
- is at risk of being radicalised or exploited
- is in a family circumstance presenting challenges for the child, such as drug and alcohol misuse, adult mental health issues and domestic abuse
- is misusing drugs or alcohol themselves
- has returned home to their family from care⁴
- is a privately fostered child⁵
- has a parent/carer in custody

Schools have a central role to play in enabling their pupils to be resilient and to support good mental health and wellbeing. School staff are well placed to observe children day-to-day and identify those whose behaviour suggests that they may be experiencing difficulties including mental ill health. Schools should ensure they have clear systems in place for identifying possible mental health problems, including routes to seek advice or escalate concerns.

Where children have suffered abuse and neglect, or other potentially traumatic adverse childhood experiences, this can have a lasting impact throughout childhood, adolescence and into adulthood. It is key that school staff are aware of how these children's experiences can impact on their mental health, behaviour and education.

Effective assessment of the need for early help

Children and families may need support from a wide range of local organisations and

² [Part 3 of the Children and Families Act 2014](#) promotes the physical, mental health and emotional wellbeing of children and young people with special educational needs or disabilities

³ [Children who run away or go missing from care \(2014\)](#)

⁴ Children return home to their families from local authority care under a range of circumstances. These circumstances and the related local authority duties are set out in flow chart 6

⁵ Private fostering occurs when a child under the age of 16 (under 18, if disabled) is provided with care and accommodation by a person who is not a parent, person with parental responsibility for them or a relative in their own home. A child is not privately fostered if the person caring for and accommodating them has done so for less than 28 days and does not intend to do so for longer.

agencies. Where a child and family would benefit from coordinated support from more than one organisation or agency (e.g. education, health, housing, police) there should be an inter-agency assessment. These early help assessments should be evidence-based, be clear about the action to be taken and services to be provided and identify what help the child and family require to prevent needs escalating to a point where intervention would be needed through a statutory assessment under the Children Act 1989. A template Early Help Assessment form is available on the [Children's MARS website](#).

A lead professional should undertake the assessment when an emerging need is identified, they should continue to provide help to the child and family, act as an advocate on their behalf and co-ordinate the delivery of support services. A GP, family support worker, school nurse, teacher, health visitor and/or special educational needs coordinator could undertake the lead professional role. Decisions about who should be the lead practitioner should be taken on a case-by-case basis and should be informed by the child and their family.

The lead professional must be competent to deliver the functions of the role and must check with other professionals known to be working with the child/family and the single point of contact whether an Early Help Assessment has already been completed previously on the child.

For an early help assessment to be effective:

- it should be undertaken with the agreement of the child and their parents or carers, involving the child and family as well as all the practitioners who are working with them. It should take account of the child's wishes and feelings wherever possible, their age, family circumstances and the wider community context in which they are living
- practitioners should be able to discuss concerns they may have about a child and family with a social worker in the local authority. Children's Services should set out the process for how this will happen. Professionals are able to discuss concerns they may have about a child and family with a worker in the local authority using the North Lincolnshire Children's Services Single Point of Contact for consultation via 01724 296500 during office hours
- in cases where agreement to an early help assessment cannot be obtained, practitioners should consider how the needs of the child might be met. If in doubt, advice through consultation with Children's Services Single Point of Contact may be sought without disclosing the identity of the person. However, practitioners should still inform individuals that their data will be recorded and shared and the purpose explained to them. If at any time it is considered that the child may be a child in need, as defined in the Children Act 1989, or that the child has suffered significant harm or is likely to do so, a referral should be made

Provision of effective early help services

Local early help services are provided by a range of organisations and agencies who work together to meet the needs of children and families.

In North Lincolnshire, our One Family Approach aims to create a system that works for all children, young people and families where we work together. Our ambition is for children to

be in their family, in their school and in their community. As partners take a One Family Approach across North Lincolnshire, we want children, young people and families to be able to build upon their strengths and their resilience to find or be enabled to find solutions when things are not going so well. They should be able to access available information, advice, guidance and be enabled to maximise their potential and enhance their life chances. We want all children and families to have a sense of belonging and equality of opportunity and through our integrated working, we will address inequalities and enable those more in need to achieve positive outcomes. Where there are significant concerns, we want children, young people and families to be able to access swift, creative and flexible help so they can remain independent. We will protect children and young people with an aim to build resilience and help them live within their family, attend their school and be a part of their community.

In addition to high quality support in universal services, specific local early help services will typically include family and parenting programmes, assistance with health issues, including mental health, responses to emerging thematic concerns relating to risks outside of the home, and help for emerging problems relating to domestic abuse, drug or alcohol misuse by an adult or a child.

Early help should be provided with the consent of, and in partnership with families. The needs and strengths of the whole family should be captured in an early help assessment, undertaken by the lead professional, with a clear focus on the child. Some of these services may be delivered to parents but should always be evaluated to demonstrate the impact they are having on the outcomes for the child.

There should be an early help plan of enabling help, developed with the family, aimed at improving outcomes and reducing need, which is regularly reviewed with the family until no longer needed.

The voices of children and adult family members should be clear throughout assessment, planning and review of support provided as part of the early help plan. If progress for children is insufficient or if the help does not improve outcomes, other approaches should be considered. We want children, young people and families to be supported by a workforce that is resilient, confident, competent and with authorisation to do what they think is the right thing to do without escalating children and families unnecessarily through a range of organisational systems and referral processes when the day to day contact with trusted professionals can make the difference. Professionals will listen to families, work to build upon the child and family's strengths, help them find solutions and only when necessary consult with others to seek assurance, check they're doing the right thing and continue to support the child and family

If the needs of children and families escalate and require a specialist service in line with the levels of need set out in the One Family Approach - Helping Children and Families in North Lincolnshire document 2020/24, a referral should be made to Children's Services.

The Early Help Assessment Model

The model of early help assessment that we have developed in North Lincolnshire is built

around the [Assessment Framework Model](#) (2000), as this continues to be accepted as a holistic model of assessment. The Early Help Assessment is a tool used to assess the needs of children, young people and families to determine the need for help, and the actions to be taken to improve outcomes based upon a holistic view of the needs of the family. The Early Help Assessment takes you through a clear step by step process of information gathering, analysis and action planning.

When early help is needed, we know that families want help from people and professionals that they know and trust. The One Family Approach gives the permissions for professionals, including those working with adult family members, to act early and provide the help that is needed. Professionals should seek to enable families to find solutions, based upon their strengths, to improve outcomes and be independent from services. Professionals should know when and how to develop and early help plan for a child and their family, when they should access further help and support from their manager or partner agencies, and when to refer to Children's Services.

The assessment model is built around a strengths-based, solution focused approach, whereby a principle of engagement is that collaboration is built with the family and acknowledging them as the expert in their own circumstances. This does not mean that professionals will be collusive with families or ignore or shy away from raising concerns, it means we will work openly and honestly with families to secure collaboration and change.

Assessment must be underpinned by a recognition and assessment of risk and protective factors. Inherent within the early help assessment is the need for professionals to pay due regard to risk, assess it and identify appropriate risk management actions. Risk cannot be deferred or deflected onto others. Professionals are individually accountable for action, inaction and decisions they make.

Risk management principles

The risk management principles endorsed by safeguarding partners, are as follows:

Those involved in working with people and communities have to support children, young people and adults to live independently, to stay in their own family and community and where necessary be supported to do so. This will involve a balanced risk assessment framework. Therefore, we need to look at 'balanced risk' or being 'risk sensible'. These principles have been adapted from the Association of Chief Police Officers with the aim of being a step towards encouraging a more positive approach to risk by openly supporting decision-making and building confidence in our staff in taking risks.

1. Maintaining or achieving the safety, security and well-being of individuals and communities is a primary consideration in risk decision making
2. The standard expected and required of those working in our communities is that risk decisions are consistent across the services and professions and consideration is given to ensuring that risks are not just passed to other services to take responsibility
3. Harm cannot be totally prevented it is the quality of the decision making that a person is judged on

4. Good risk-taking should be identified and celebrated and staff that make decisions consistent with these principles should be encouraged and supported
5. All partners agencies should consider and assess their decisions and impact on other services/agencies before action is taken and inform partners of strategic decisions
6. There should be openness and transparency in decisions that impact on others

This approach supports the principles that underpin the [Children Act 1989](#) that recognises the child's welfare as paramount. Being strengths-based and solution-focused does not mean discounting or minimising risk, it calls for risk to be assessed and responded to in a proportionate and sensible way, so that action aims to increase safety rather than reduce professional anxiety.

Early Help Assessment guidance that outlines what practitioners need to consider when undertaking a comprehensive and effective assessment is available on the [Children's MARS website](#).

Informing the local authority

Once an Early Help Assessment has been completed you are required to submit the data and family details of the Early Help Assessment using [the link on the Children's MARS website](#). This information allows the local authority to maintain an understanding of need in North Lincolnshire and ensure effective implementation of Children's MARS arrangements and practices that will support the delivery of early help and intervention services for children, young people and families.

Reviewing the Early Help Assessment

Assessment is a dynamic process and every Early Help Assessment completed that identifies unmet needs should be reviewed with the child and their family. The date of the review should be arranged with the family at the time of completing the assessment. Whether the needs have been met by a single agency or whether it requires a coordinated multi agency approach, the assessment should be reviewed in a timescale no longer than 3 months.

A template Early Help Assessment Review form is available on the [Children's MARS website](#).

Early help planning meeting

If an outcome of an early help assessment is that more than one agency is required to support the identified needs of the child and family, a lead professional should be identified and an early help planning meeting should be arranged within 20 working days. Children and families should receive timely, responsive support and must not be left without help following an assessment, where additional need is identified.

The lead professional's agency will be referred to as "*the lead agency*". It is the responsibility of the lead agency to arrange the meeting and for ensuring the child is supported within early

help. The lead agency is responsible for ensuring meeting arrangements - i.e. invitations, venue, chairing and recording the meeting. Reciprocal arrangements with other services regarding the chairing and administration of meetings are encouraged.

Criteria for convening an early help planning meeting

A multi-agency early help meeting should be convened after:

1. The completion of an Early Help Assessment and/or as part of a step down following an initial assessment by Children Services, which has identified needs, which require a multi-agency response, however they do not meet the threshold for a specialist social work service.
2. The parents or carers agree to have the early help planning meeting.
3. Management supervision has agreed or recommended that a meeting is convened.

Attendance

Parents (and young people where appropriate) should be involved in deciding who should attend the planning meeting or any subsequent review meeting. The meeting needs to bring together all those who can provide relevant information and support to the child and family. The assessor should, where possible attend. However, it is important that professionals do not attend if they do not intend to offer active support to children and families. The meeting is to develop with the child and family a plan of how identified need can be met. The meeting should be non-threatening and inclusive to the child and their family.

Recording the meeting and distribution of records

The chair is responsible for recording the meeting. The chair should use the current format for recording early help meetings. The records should identify the essential details of all children in the family and the parents or carers. Records should also detail who is responsible for carrying out actions agreed in the plan and specify timescales for outcomes to be achieved and any review dates set.

The record should be distributed to the family, invitees and the relevant senior or manager from the lead agency within 20 working days of the meeting.

The lead professional

The choice of lead professional for a child or young person should be made by considering the following factors:

- the predominant needs of the child and family
- the level of trust built up with the child and family
- the wishes of the child and family
- the person and agency with primary responsibility for addressing the child and family's needs
- a clear statutory responsibility to lead on work with the child and family

- a previous or ongoing relationship with the child
- the skills, ability and capacity to provide a leadership and coordinating role in relation to other practitioners involved with the child or family
- an ability to draw on and influence universal and specialist services
- an understanding of the surrounding support systems available to manage and sustain the agreed plan

The lead professional is not a job title or a new role, but a set of functions to be carried out as part of the delivery of effective integrated support. These functions are to:

- **Act as a single point of contact** for the family, whom the family can trust and who can engage with the family in making choices, navigating their way through the system and effecting change
- **Coordinate the delivery of the actions agreed by practitioners involved**, to ensure that children and families receive an effective service that is regularly reviewed. The services and actions identified will be based on the outcome of the assessment and recorded in the plan
- **Reduce overlap and inconsistency** in the services received

Where children in the same family have a range of needs there will still only be one lead professional.

The lead professional may be required to carry out a number of tasks, during their normal course of action, including:

- building a trusting relationship with the individual or family to secure their involvement in the process
- being the single point of contact for the individual or family and as sounding board for them to ask questions and discuss concerns
- being the single point of contact for all practitioners who are delivering services to the individual or family
- coordinating the effective delivery of a package of solution focused action and establishing a process for reviewing process

One of the factors to be taken into account when agreeing the lead professional role will be any administrative support that might be needed in a particular case. This may be provided within the lead professional's home agency, or from support provided elsewhere within the multi-agency team. Another factor to take into account is the availability of the lead professional including cover arrangements in the case of absences. For example, a school-based lead professional is not available during school holidays and should plan ahead with other agencies to ensure there is formally agreed 'cover' to support the family.

Allocation and transfer of lead professional

On some occasions the lead professional may change. This may reflect a change in the needs of the child or family, or the position of the person undertaking the role.

The allocation and transfer of lead professional should be managed as follows.

Stage 1

- A. The assessor discusses the outcome of the Early Help Assessment or initial assessment with their manager and the manager signs the assessment form
- B. Consideration is made to the above criteria
- C. Assessing agency manager identifies a lead professional from within his or her own agency
- D. The early help planning meeting should now be arranged in consultation with the family
- E. Where the assessing agency does not consider they should be the lead agency for any subsequent meetings the following protocol should be followed

Stage 2

- A. The assessing agency/current lead professional's manager identifies another agency that they consider most appropriate to provide a lead professional at this time
- B. The assessing agency/current lead professional's manager contacts the manager of that agency to share their views
- C. The other agency agrees and identifies a lead professional from their agency
- D. The early help planning meeting should now be arranged in consultation with the family

Stage 3

The other agency disagrees with the assessing/current lead agency's decision

- A. The assessing/current lead professional's manager calls a meeting between managers of all agencies involved with the child
- B. A decision is made and responsibility accepted by one of the agencies

Stage 4

Where no agreement is reached the assessing/current lead professional's manager should contact their line manager to inform them of the need to elevate the issue in line with the Children's MARS escalation and resolution procedure. Actions to support the child and family should be continued during the resolution process.

Line management and supervision requirements

Managers of lead professionals benefit from being fully aware of the lead professional functions and the time and workload commitment. Lead professionals will need supervision and their training needs should be supported. Training is usually accessed through local area arrangements.

Participation, permissions and family involvement

Early help meetings are held with full agreement of parents/carers, and where appropriate children and young people. Without that permission the meeting should not go ahead. If permission is refused consideration should be given to whether concerns are sufficient to require a different approach. The lead agency should reassess the circumstances in this case. The family should be involved in all stages of the process. The process cannot continue without their involvement. Children should be involved where appropriate. A record of the meeting should be sent to the family.

Reviewing early help meetings

It is essential that a review is booked following all meetings where the plan for support or service delivery is ongoing. The frequency of the review will be determined by the needs of the family but each plan should be reviewed within three months as a minimum. Where necessary reviews should be held more frequently, particularly if service provision is time-limited or goals are set for the family that require closer review.

Reviews should be held on the same basis as initial meetings. The purpose of the meeting is to discuss progress of the plan, review services provision and ensure the plan is still effective in meeting identified needs.

Child protection

The chair of the early help meeting must have an understanding of child protection procedures. If information arises which indicates that significant harm has occurred or is likely, it is the lead professional's responsibility to discuss these concerns with Children's Services to decide whether or not a referral is required. Where this decision is made, good practice dictates that the family should be informed unless to do so would place the child or young person at an increased risk of harm.

North Lincolnshire Children's Services Single Point of Contact can be contacted on:

- 01724 296500 (9am to 5pm Monday to Thursday, 9am to 4.30pm Friday)
- 08081 689667 (free phone)
- 01724 296555 (answerphone – out of office hours and at weekends)

Information sharing for early help

Effective sharing of information between practitioners and local organisations and agencies is essential for early identification of need, assessment and service provision to keep children safe.

Practitioners should be proactive in sharing information as early as possible to help identify, assess and respond to risks or concerns about the safety and welfare of children, whether this is when problems are first emerging, or where a child is already known to Children's Services (e.g. they are being supported as a child in need or have a child protection plan). Practitioners should be alert to sharing important information about any adults with whom that child has contact, which may impact the child's safety or welfare.

Further guidance on information sharing is available within the [Children's MARS Information Sharing Guidance and the Policy and Procedure for Assessing Need and Providing Help](#)

Governance and quality assurance

All organisations involved in completing Early Help Assessments and involved in providing early help to children and families are represented within the Children's MARS arrangements. Each agency is responsible for the management oversight of the Early Help Assessments completed by their service/ organisation as well as the impact the work has upon children and families and the experience of children and families within the process.

Each organisation is responsible for providing the appropriate support to their practitioners. This should include line management support, in some organisations referred to as 'supervision'. This should provide practitioners with critical reflection and challenge from a senior member of staff. Research has identified the important role that supervision has upon the quality and effectiveness of case work with children and families.

Quality assurance

The assessing or lead agency for a child and their family are responsible for the quality assurance of their Early Help Assessments and early help planning meeting records. It is an expectation on agencies that the designated safeguarding lead or line manager has signed the Early Help Assessment produced as part of their supervision and oversight of the case.

An Early Help Assessment Quality Assurance Checklist based on agreed indicators for this purpose is available on the [Children's MARS website](#).

It is essential that agencies collate information from children, young people and their families about their views and experiences being involved in an early help assessment and early help meetings. Practitioners should collate feedback from children, young people and their parents/carers form following an assessment and an early help meeting. The user views form can be found on the [Children's MARS website](#). The expectation is that agencies will collate these to ensure that they take action where appropriate.

Advice and guidance

A practitioner may require advice or support regarding the plan or interventions required to meet a child's needs. The practitioner should first approach their safeguarding designated senior officer or safeguarding lead within their organisation. Advice or guidance is also available by contacting Children's Services Single Point of Contact.

Where there are professional differences of opinion about actions taken, or decisions made, in respect of arrangements for helping or protecting children, agencies should refer to the [Children's MARS escalation and resolution procedure](#).

Further information and guidance

Children's MARS guidance and forms

- [Early Help Assessment Form](#)
- [Early Help Assessment Review Form](#)
- [User Views Forms](#)
- [Guidance on the process for completing an Early Help Assessment](#)
- [Practitioner's guide to completing the Early Help Assessment Form](#)
- [Early Help Assessment leaflet for children, young people and families](#)
- [Early Help Assessment Quality Assurance checklist](#)

Children's MARS policies and procedures

- [One Family Approach – Helping Children and Families in North Lincolnshire document 2020/24](#)
- [Children's MARS policy and procedure for assessing need and providing help](#)