St Helens

Multi Agency Quality Assurance Framework

Version	Date	Amendment
1	September 2017	
2	Oct 2017	updated
3	Nov 2017	Updated and agreed by LSCB
4	April 2018	Updated

Introduction

The Multi Agency Quality Assurance Framework outlines how St Helens measures the quality of the Early Help Assessment Tool and Family Action Meeting process. Capturing the journey of the child and family are key underpinning objectives of the Multi Agency Quality Assurance Framework. The tools developed within this framework will support practitioners, supervisors, managers and service managers to improve our response to families in St Helens who are in need of Early Help. This framework guides practitioners and managers to further embed and improve the use of the EHAT across St Helens.

Purpose of the Framework

- To promote multi agency working and best practice.
- To provide good quality and consistent implementation of the EHAT across St Helens, it will improve the use of EHAT with identification of the needs of families and improve Early Help to support those needs.
- To provide a robust and consistent approach to assessing work undertaken on a multi-agency basis with the child young person and their family through an audit of case records, in relation to Early Help (L2).
- To enable identification of, and learning points, by highlighting examples of good practice and areas requiring improvements in agencies across St Helens.
- To identify training to support the workforce in various ways, to enable professionals working with children and families to work collaboratively, share information safely and undertake the roles and responsibilities that support effective multi agency working.
- To report the identification of key practice issues to the LSCB so that recommendations can be made and action plans implemented.

Background

Following consultation with partner agencies the Early Help Assessment Tool was relaunched in January 2016. Alongside this, the EHAT system was reviewed and re-configured to best suit practitioners in St Helens and in turn improve services offered to families.

Since this time there has been a significant increase in the use of the EHAT system by partner agencies – these include Primary and Secondary Schools, Health, Early Years Providers, Young Carers, Home Start and Children's Centres.

Since September 2015 the Partnership Co-ordinator has provided partner agencies with advice, guidance and support via training, workshops, setting visits and telephone contacts to remove barriers, to improve practice and embed the use of EHAT to promote a more effective and earlier identification of additional needs at Level 2 on St Helens Continuum of Need.

Following the restructure of Children's Services department in May 2017 an Early Help team was created – see flow chart, Appendix 1, page 7. The expectation remains that partner agencies take the lead with the additional support if required from a Family Intervention Worker if support is required within the home. The Early Help Workers will take lead on the more complex families and referrals for the Early Help Workers will be generated via the Front door (to be reviewed November 2017).

The Partnership co-ordinators are part of a North West Common Assessment Framework (CAF) Group, the documents included in this framework are based on good practise from neighbouring authorities.

Key Roles

The St Helens Quality Assurance Framework process will be undertaken by partner agencies, practitioners, managers and service managers to ensure consistency of process across services and at all levels of the workforce in St Helens.
(Framework Chart, Appendix 2, page 8.)

Partnership Co-ordinators

The Partnership Co-ordinators will facilitate and lead the EHAT user group, (see page 4 for more information regarding the user group). They will collate themes from audits undertaken by the User Group, which will be shared with senior management and LCSB on a quarterly basis, to identify best practice and support needs. Two audits per month will be completed by the Partnership Co-ordinators, in addition one to one audits with partner agencies will also be completed, and this will be one per month. Following completion of audits the Partnership Co-ordinator will record the outcome of the audit and any actions to be undertaken by the episode Co-ordinator on the EHAT record and the Quality Assurance matrix.

Partner Agencies

Partner Agencies are part of the EHAT user group. Within this group multi agency audits will be completed bi-monthly. Partner agencies will feedback audit findings to the Partnership Co-ordinators who as part of their role will liaise with the EHAT episode co-ordinator as set out in the EHAT user group section below.

Practitioners

It would be the expectation if the lead practitioner's record is audited that the actions are completed within ten working days. If actions are not completed within timescales the escalation procedure may need to be followed by the Partnership Co-ordinators. The EHAT practitioner self-assessment check list, appendix 3, page 9, is intended to be a prompt for the practitioner, highlighting key questions at various stages of the process to provide good quality records from initiation.
Closure audits, appendix 4, page 10, will be completed by practitioners at the end of L2 intervention whether this is when transferring due to escalating or to universal services. This will ensure records are completed to a high standard upon closure.

The Early Help Team
The Early Help team are an integral part of the delivery of L2 support in St Helens.

Early Help Service Manager

The Early help service manager will ensure that the QA Framework processes are being established and embedded throughout Early Help services. The Early help service manager will complete six quality audits per year, to identify best practice, to inform service development and partnership working.

Early Help Team Managers

The Early Help Team Managers will complete two detailed audits of the cases led by the Early Help workers per month to identify best practice, training or support needs. In addition to this from January 2018 they will be expected to complete two brief audits per worker per month, with the template due to be held on the EHAT system.

Family Intervention Co-ordinators

The Family Intervention Co-ordinators will be part of the EHAT user group, they will complete two audits a month (cases open to a family intervention worker with partnership agency as lead). Through monthly supervision Family Intervention Workers will receive feedback in relation to the quality of the records and any actions needed. On a bi monthly basis one of these audits will be within the user group.

Early Help Workers, Family Intervention Workers and partner agencies will be part of the EHAT user group completing multi-agency audits.

EHAT User Group

The EHAT User Group will be responsible for ensuring that the EHAT process at Level 2 is being conducted in a high quality and effective way across all services providing early help, intervention and support for children, young people and families.

The group will meet not only to ensure that records and outcomes for children are of a high standard, but that the EHAT system is further developed to ensure it meets the needs of practitioners, children and families and is effective in its use to help improve outcomes. The group will meet bi-monthly.

The meetings are designed to be interactive to encourage multi agency networking and discussion amongst members to achieve a solution focused approach to EHAT questions, issues and challenges.

The group will be chaired by the Partnership Co-ordinator and/or Systems Support Officer. The membership is made up of practitioners (professionals who work with children and families) who provide intervention and support to children who are in need of early help at Level 2. The group currently consists of representation from the following organisations: 0-19 Health Partnership, Schools' representative(s), Troubled Families, Children's Centre, Bridge Centre and Early Help. There is a requirement for further agencies to be represented. See Multi Agency Agreement/Terms of reference appendix 5, page 11.

The first multi-agency audit session will commence September 2017; subsequent sessions will be bi-monthly. The Partnership Co-ordinator will provide feedback to the Lead Professional of the audit completed, with learning points and any actions needed to meet the required audit standards. Actions should be completed within 10 working days. The audit should not be carried out by any person who has had any involvement in the particular record being audited. Records for multi-agency audits will be randomly selected by the Partnership Co-ordinator based on agency involvement.

Safeguarding concerns that are identified during completion of audits by practitioners within the audit group will be addressed by the Partnership Co-ordinator and the Lead Professional/episode co-ordinator to ensure that St Helens Safeguarding Procedures are followed.

The audit tool scores how well different aspects of the early help assessment was completed and the effectiveness of the family action plan and reviews. The grade descriptors tool supports the scoring and grading of an EHAT when using the EHAT audit form and ensures a standardised approach by all agencies completing an audit. See multi agency audit form and grade descriptors (guidance for auditor) in appendix 6, page 12 & 15.

Voice of the Child

As part of the audit requirements it is expected that the Voice of the Child/Young Person is evident throughout their record. They should be continually involved, and have information fed back to them in a way that they can understand. There should always be evidence that their voice has influenced the decisions that professionals have made. When gaining the voice of the child agencies/practitioners should clearly record

- conversations the practitioner have had with the child/young person as to why they are involved with their family
- what difference the assessments/plan has made to the child/young person
- record the voice of the child in the child/young persons own words
- evidence clearly if the child/young person has attended the meeting and if not why not – if a child/young person does not attend a meeting their views should be gained prior to the meeting

Obtaining the Voice of the Child as part of the plan, will ensure that the child feels listened to, feels involved in their plan and their points of view and experiences are shared.

Appendix Content Page

Quality Assurance for the EARLY HELP ASSESSMENT FRAMEWORK

Early Help Assessment Quality Assurance will be undertaken as outlined below to ensure consistency of process across services and at all levels of the workforce in St Helens.

Service Manager

Who	When/How often	Tools
Service Manager will ensure that the Early Help Assessment Framework processes are being established and embedded across the Early Help services.	Annual review of the checklist and improvements to be incorporated into the service planning process.	Early Help Assessment Framework, review all tools.

Line Manager/Supervisor

Who	When/How often	Tools
Line managers/Co-ordinators of practitioners using the Early Help Assessment Framework process. This tool can be used within one to one/supervision sessions to ensure that the Early Help Assessment Framework process is understood and to highlight any further training or support needs.	To support new staff when first using the Early Help Assessment Framework process. Quarterly sampling of Early Help Assessments completed by team members. 2 Per month, 1 being within the QA Group. (bi monthly) Early Help Team managers – 2 detailed audits per worker per month.	Early Help Assessment Framework. Quality Assurance Audit Form (appendix 6, page 12)

Practitioner

Who	When/How often	Tools
Practitioners/Partner Agencies using the Early Help Assessment Framework process. The purpose of the self-assessment checklist is to help develop an understanding of what is required in terms of quality.	Use the checklist every time the Early Help Assessment Framework process is used. Use the closure Audit when closing every EHAT episode.	Practitioner Self-Assessment Checklist (appendix 3, page 9) EHAT guidance Closure Audit (appendix 4, page 10).

Feedback to Senior Management Team and LSCB

Who	When/How often	Tools
Partnership Coordinators and Early Help Team Managers	In line with requirements set by LSCB or at least 6 monthly.	Early Help Assessment Framework reports

Early Help Assessment Tool Practitioner Self-Assessment Checklist		
If you are new to the Early Help Assessment process, use this checklist every time. If you are experienced in using Early Help Assessment Tool, you should be checking your quality at least once every 3 months.		
Practitioner Name:	**Date:**	
Childs Name:	**EHAT No:**	

Early Help Assessment Framework Process	Y	N
Have you checked if an EHAT is already open?		
Did you explain to the child/young person and/or their parent/carer the reason/s why you would like to carry out the assessment?		
Have you explained to the child/young person and/or parent/carer the purpose of the Early Help Assessment process?		
Information Sharing and Consent		
Have you agreed with the child/young person and/or parent/carer who the information will be shared with and how it will be recorded? **Or** – if not, are the reasons clear? Have you obtained/reviewed written consent?		
Assessment		
Does the assessment focus on what the child/young person and/or their parents want to achieve? Have you included both the strengths and needs of the child/young person and family in the assessment?		
Is the assessment comprehensive and relevant; have you obtained contributions from all agencies involved and for any service who may get involved in the future?		
Conclusions, Solutions and Analysis		
Does the analysis identify what needs to change and how this will be achieved? Does this relate to your original reason for using the Early Help Assessment process?		
Have you identified how you will know when things have improved?		
Action Plan		
Does the Action Plan identify clear tasks for each member of the Family Action process including the child/young person and/or parent/carer if relevant?		
Have you agreed when to follow up and review the Action Plan? Have you ensured this is within timescale?		
Is the plan outcome focused and SMART?		
Review		
Have you identified if there is any new information that needs to be shared and reviewed in the Action Plan/Family Action Review?		
Are you clear about whether to continue with the Early Help Assessment/Family Action process or close it?		
Have you considered the level on the continuum is correct?		
If there are any barriers to progress, ae these being raised/escalated and services/agencies being held to account for their support?		
Transfer of Lead Professional		
Are you no longer able/need to continue in the role of the Lead Professional (e.g. all your actions have been completed or transition from Primary School to Secondary School). If there are still outstanding additional unmet needs have you agreed to transfer to a new Lead Professional from an appropriate agency and with the consent of the child/young person and/or parent/carer?		

EHAT Case Closure – Audit Form

The case closure audit form is to be used to ensure that the practitioner has given consideration to all aspects of good practice in relation to recording and communication between agencies when ending an EHAT episode.

Childs Name:

EHAT Number:

Lead Agency & Name :

Family Intervention Worker (if appropriate) :

Action Required	Date	Outstanding actions / information
Case supervision/ discussion evident of agreed closure.		
Signs of Safety/Case Summary updated.		
Case allocation instructions are evident and all identified task are complete		
Last FAM meeting held that agreed closure. Assessment outcome that agreed closure.		
Chronology updated in the case notes		
Has SMART plan been finalised?		
Evaluation forms completed (as applicable)		
Has a Graded Care Profile been completed if not, why not?		
Practitioner inputted end date in key agencies		
Does the summary/episode started include the length of time the case has been open?		
Have the Troubled Families outcomes been reviewed in the case summary? • are there any TF outcomes outstanding • of those that are outstanding, what steps need to be taken to evidence improvement before case closure? • if stepping down to partner agency or escalating to social care, are the outstanding outcomes clearly evidenced, with timescales, in the transfer /care plan?		
Request for admin to send closure letters and case note added (as applicable		
If partner agency is the lead professional. The FIW has informed them of closure actions and by when?		

Name of Practitioner: **Signature:**

Name of Manager/Co-ordinator: **Signature:**

Date of Closure:

<u>Statement of Intent for Multi Agency EHAT User Group</u>

We, the multi-agency EHAT User group in St Helens realise the importance of an effective early help offer in improving outcomes for children, young people and their families. We will support the workforce to enable professionals working with vulnerable children and families to work collaboratively, share information safely and undertake the roles and responsibilities that support effective multi agency working. We will disseminate best practice and EHAT system information to our colleagues as required.

Agencies involved in the EHAT and Family Action processes will adhere to the principles outlined in the Quality Assurance Framework and ensure they are aware of their services representative who attends the User Group sessions, the appropriate training available (e.g. Lead Professional in Practice) and use this Quality Assurance Framework as a standard Quality Assurance approach.

Information discussed within the user group, in relation to specific EHAT recordings by the agency representatives within the group is strictly confidential. Information must not be disclosed to third parties who have not signed up to the group without the agreement of the partners of the meeting, unless there is a safeguarding/practice concern identified.

Disclosure of information will be in accordance with the Data Protection Act 1998 and also bound by the common law duty of confidentiality.

All agencies should ensure that all notes and related documentation are retained in a confidential and appropriately restricted manner.

Name	Organisation	Signature

St Helens Multi Agency User Group
Early Help Assessment Tool (EHAT) quality audit form

Audited by	**Name:** **Role:** **Agency:**
Date of audit	
EHAT No:	
Lead professional	

Section one - Assessment (to be used with Grade Descriptors A1 – A18)
(An audit of the assessment will not be needed if the case has stepped down from social care following a child and family assessment. If the Child and Family assessment has been completed within 3 months the early help assessment will be populated using the Child and Family Assessment. However the lead professional is expected to document this clearly within the EHAT)

The EH assessment 0 - 13 - **Inadequate** 14 – 26 - **Requires Improve** 27 – 40 - **Good** 41 – 54 - **Outstanding**	**Not met**	**Partially met**	**Met**	**Exceeded**
	0	**1**	**2**	**3**

The EHAT assessment & Recording	**Not met**	**Partially met**	**Met**	**Exceeded**
A1: The assessment is finalised and the record is progressed on the pathway within timescales				
A2: Family relationships are recorded on the childs record				
A3: Key Agencies are recorded on the childs record				
A4: The chronology is relevant and up to date				
A5: The genogram accurately reflects family relationships				
A6: The assessment is free from jargon, clear and concise				
A7: It is clear what information contained in the assessment is fact and what is professional judgement/opinion				
A8: There is evidence that other agencies have been contacted for the purpose of gathering information for the assessment. Contributions have been gathered via the system/manually.				
A9: The assessment is holistic and identifies: • Unmet needs/concerns – vulnerabilities and adversities • Strengths - protective factors and resilience				
A10: The **Families First** nomination has been completed if not already identified.				
A11: The impact of age, disability, ethnicity, faith/belief, gender identity, language, race and sexual orientation has been considered				
A12: There is evidence the children/young people have been involved in the assessment process				
A13: There is evidence the parents/carers have been involved in the assessment process				

	Not met	Partially met	Met	Exceeded
A14: The child's/young person's developmental levels and attachments have been considered and commented on against expected norms.				
A15: Parenting ability is clearly identified, together with professional judgement about the parents' capacity to effectively meet the needs of the children/young people				
A16: The assessment has considered the environment and wider family and the impact on the children/young people, along with potential support networks.				
A17: The assessment has identified any potential safeguarding concerns and evidences how professionals and the family are managing these concerns				
A18: The outcome of the assessment and next steps clearly recorded. The outcome reflects the correct next steps.				
A19: Updates are recorded on case notes within the episode and finalised.				
A20: Management oversight of the assessment is evidenced in case notes				

Comments/evidence of good practice	

Overall grade for section	**Inadequate**	**Requires Improvement**	**Good**	**Outstanding**

Section two - Review meetings and Family action plan (To be used with Grade Descriptors R1 – R9)

The review meetings and Family Action plan	Not met	Partially met	Met	Exceeded
0 – 7 - Inadequate				
8 - 14 - Requires Improve	0	1	2	3
15 - 22 - Good				
23 - 30 – Outstanding				

The review meetings and Family action plan	Not met	Partially met	Met	Exceeded
R1: The family details, meeting attendees and minutes are clearly recorded on the meetings tab.				
R2: Any new identified needs and strengths are clearly recorded and used to inform the next steps				
R3: The parents/carers are present at the Family Action review meetings. Their views are sought on planning the next steps and their comments are recorded				
R4: The children/young people are present at the Family Action review meetings (if appropriate). Their views are sought on planning the next steps and their comments are recorded				
R5: The FAM plan is specific, measurable, achievable, realistic, timely (SMART) and solution focused. SMART Plan in place				
R6: Reviews are clearly recorded and set within timescales (usually 6 weekly and maximum of twelve weeks apart if part of exit plan) and if not it is clearly recorded why?				

	Not met	Partially met	Met	Exceeded
R7: The review meetings and FAM plan recognises risks and outlines how risk can be responded to or reduced.				
R8: Existing actions been reviewed/closed/updated appropriately				
R9: Any difficulties in engaging/commissioning services or services not delivering on agreed actions have been escalated (if applicable)				
R10: Have all relevant agencies got access to the episode and is there evidence of multi-agency case note recording and professional reports				

Comments/evidence of good practice				
Overall grade for section	Inadequate	Requires improvement	Good	Outstanding

Section three – Closure of the EHAT

The EHAT closure	Not met	Partially met	Met	Exceeded
The closure of the EHAT is clearly evidenced within the record on the 'episode completed' tab. The end and success reasons reflect the situation and the free text box has the summary recorded.				
The closure audit form has been completed				

Comments/evidence of good practice				
Overall grade for section	Inadequate	Requires improvement	Good	Outstanding

Final section – Feedback summary - The overall grading should reflect the majority of grades from the sections. Where only two sections are graded and grades differ, more weighting should be given to the review section as it is recognised that assessments are fluid and reviews should reflect and evidence positive outcomes.

Overall grade	Inadequate	Requires improvement	Good	Outstanding
Overall learning points including any recommended actions				

Audit Guidance

This document supports the scoring and grading of an EHAT when using the EHAT Audit Form.

Grade Descriptors for the Early Help Assessment
The grade descriptors A1 – A18 correlate to each section on the Early Help Assessment audit. R1 – R9 correlate to each section on the review and family action plan audit.
(An audit of the assessment will not be needed if the case has stepped down from social care following a child and family assessment. However the lead professional is expected to document this clearly within the EHAT)

The EH assessment 0 - 13 - Inadequate 14 – 26 - Requires Improve 27 – 40 - Good 41 – 54 - Outstanding	Not met	Partially met	Met	Exceeded
	0	1	2	3
If the voice of the child/young person is excluded from the assessment the overall assessment will be graded as requires improvement and will be addressed with the assessor by the Partnership co-ordinator				
If there are safeguarding concerns which have not been taken into consideration the overall assessment will be graded as inadequate and will be addressed with the assessor/Lead Professional by the Partnership co-ordinator				

	Not met	Partially met	Met	Exceeded
A1	Assessment completed by 10 weeks or longer after the date of signed consent	Assessment completed although after the 20 day marker of consent	Assessment completed within 20 working days from the date of consent	Assessment completed well within 20 working days from the date of consent
A2	Family details not recorded	Incomplete record of family details	Family details well recorded.	N/A
A3	Key Agencies not recorded	Incomplete record of key agencies	Key Agencies well recorded	N/A
A4	No evidence of chronology	Chronology evident – not up to date	Chronology evident and up to date	Multi-agency chronology evident and up to date
A5	Genogram has not been created on the system	Genogram created, not all family members included	Genogram created and include all relevant family members	N/A
A6	Assessment includes jargon	Parts of the assessment include jargon	Assessment has no jargon and is clear and concise	N/A
A7	Unclear what is fact and professional judgement in the information recorded in the assessment	Some sections of the assessment unclear on what is fact and what is professional judgement	Information in the assessment is clear on what is fact and which is professional	The assessment clearly distinguishes fact from opinion, this is recorded within the analysis and backed

			judgement	up by evidence/research
A8	Agencies have not been contacted to inform the assessment	Some agencies but not all have been contacted to inform the assessment	Clear evidence that all agencies involved with the family have been contacted and their information included within the assessment	N/A
A9	Unmet needs not recorded No evidence of protective factors and resilience	Reference made to unmet need/concerns for the family. Reference made to protective factors and resilience	Clear examples of the vulnerability and adversities that the family are experiencing. Clear examples of protective factors and resilience for the child/children.	Clear examples of the vulnerability and adversities the family are experiencing the impact it has on the children Clear examples of protective factors and resilience for all the children in the family backed up with research/reports.
A10	Families First nomination has not been completed as part of the assessment	N/A	Families First nomination has been completed as part of the assessment	N/A
A11	The impact of age, disability, ethnicity, faith/belief, gender identity, language, race and sexual orientation has not been considered as part of the assessment	Reference made to the age, disability, ethnicity, faith/belief, gender identity, language, race and sexual orientation	Clear recording of age, disability, ethnicity, faith/belief, gender identity, language, race and sexual orientation	Clear examples of age, disability, ethnicity, faith/belief, gender identity, language, race and sexual orientation has been considered and the impact – clearly recorded throughout the assessment
A12	No evidence of the child/children's involvement in the assessment process	Some evidence of the child/children's involvement in the assessment process	Clear examples of the child/children's involvement and voice in the assessment process	Clear examples of the child/children's involvement in the assessment process and recorded throughout the assessment
A13	No evidence of the parents/carers involvement in the assessment process.	Some evidence of the parents/carers involvement in the assessment process	Clear examples of the parents/carers involvement in the assessment process.	Clear examples of the parents/carers involvement in the assessment process and their views on the impact on the children.
A14	No evidence of the child/children Development	Reference made to Child/children development	Evidence that child/children's development and attachments are considered against	Evidence that child/children development and attachment are considered against

			expected norms	expected norm backed up with research/reports
A15	No evidence of parent/carers ability to meet the needs of the child/children	Reference made to parent/carers ability to meet the needs of the child/children	Parent/carers ability to meet the child/children's needs clearly recorded and evidenced with examples	Parent/carers ability to meet the child/children's needs clearly recorded and evidenced with examples. Evidence that assessment tools have been used
A16	The influence of the wider family and environment has not been considered	Reference made to the influence/impact of the wider family and environment	Clear examples of the influence/impact of wider family and environment	Clear examples of the influence /impact of the wider family and environment and immediate support offered. reference made to research/reports
A17	Safeguarding concerns raised but how risks will be managed not recorded.	Safeguarding concerns recorded – little/vague information about how risks will be managed	Safeguarding concerns recorded and how risks will be managed are recorded	Safeguarding concerns are detailed. How risk will be managed is well recorded. Evidence of Multi-agency toolkit being used
A18	Outcome of the assessment is not recorded, no next steps evident	Some evidence of outcomes have been considered however doesn't reflect all information collated in the assessment, limited next steps	Outcomes clearly recorded in the correct sections, appropriate next steps identified with timescales	Outcome of the assessment demonstrates good analytical skills which reflect the themes throughout the assessment, next steps clear and timescales in place
A19	No updates added to case notes following assessment	Some case notes finalised. Evidence of some case notes, not consistent	Evidence of case notes being inputted regularly, some case notes finalised, some use of analysis	Case notes inputted by all key agencies within timescales. Case notes reflect the current situation at any time, case notes analysed and any actions identified. All case notes finalised
A20	No management oversight of the assessment is evident in case notes	N/A	Evidence of management oversight is evident in case notes	

Grade Descriptors for the Family Action Meetings and Level 2 plan

The review meetings and Family Action plan
 	
  0 – 7 - **Inadequate**
  8 - 14 - **Requires Improve**
15 - 22 - **Good**
23 - 30 – **Outstanding**
	Not met
	
	0
		Partially met
		
		1
			Met
			
			2
				Exceeded
				
				3

If the voice of the child/young person is excluded from the meeting minutes/Level 2 plan the overall assessment will be graded as requires improvement and will be addressed with the assessor by the Partnership co-ordinator				
If there are safeguarding concerns which have not been taken into consideration the overall assessment will be graded as inadequate and will be addressed with the assessor/Lead Professional by the Partnership co-ordinator				

	Not met	Partially met	Met	Exceeded
R 1	Family details not recorded	Incomplete record of family details	Complete and accurate family details recorded	N/A
R 2	New needs and strengths are not considered	New needs and strengths considered	New needs and strengths are considered and used to inform next steps.	New needs and strengths are considered and used to inform next steps. The plan evidences progress by giving examples of reduced or increased strengths and difficulties
R 3	No family members attending the Family Action meeting.	Family members attended the Family Action meeting, but their voice not included.	Family members attending and engaged in the Family Action Meeting process and their voice included. Their involvement in next steps recorded.	Family members engaged with the Family Action Meeting their voice heard and consistently included in next steps
R 4	No evidence of the child's involvement or voice recorded in the reviews	Some evidence of the child's involvement or voice recorded within the reviews	Clear examples of the child's involvement or voice within the reviews	Clear examples of the child's involvement consistently included in all reviews
R 5	No SMART plan in place	Action plan in place. Some evidence of actions being reviewed/ updated appropriately	SMART plan in place. Evidence of actions being reviewed/update appropriately. Demonstrates how improvements will be made.	SMART Plan in place/ Actions updated appropriately. Consistent evidence of outcome solution focussed reviews.

	Inadequate	Requires Improvement	Good	Outstanding
R 6	Family Action plan drifting due to reviews consistently being out with timescales	Family Action plan drifting due to a gap in review	Majority Family Action reviews within times scales	All Family Action reviews within timescales and if not reason why recorded.
R 7	Safeguarding concerns raised but how risks will be managed not recorded	Safeguarding concerns recorded – little/vague information about how risks will be managed	Safeguarding concerns recorded and how risks will be managed are recorded.	Safeguarding concerns are detailed. How risk will be managed is well recorded. Evidence of Multi-agency toolkit being used.
R 8	No evidence that a Family Action meeting has taken place	No evidence existing actions have been reviewed/closed/updated appropriately in minutes, meeting minutes maybe recorded in case notes	Family Action meeting minutes recorded in meeting section, existing actions have been reviewed/ closed/updated appropriately	Family Action meeting minutes recorded in meeting section, existing actions have been reviewed/ closed/updated appropriately within timescales, case note added to cross reference
R 9	Plan drifting due to difficulties engaging services or them not delivering on agreed actions have not been addressed	Difficulties engaging services identified however no agreed actions to resolve issues	Difficulties and actions taken to resolve issues clearly recorded. Escalation policy followed if needed (if applicable)	N/A
R 1 0	Relevant agencies have not got access to the episode and there is no evidence of multi-agency case note recording and professional reports for meetings	Some agencies have access to the episode, no evidence of multi agency case recording, some evidence of professional reports for meetings	All relevant agencies have access to the episode, evidence of multi agency case recording, evidence of professional reports for meetings	N/A

Grade Descriptors for Early Help Assessment record Closure

Inadequate	Requires Improvement	Good	Outstanding
EHAT not closed when support ends	EHAT closed when support ends but no reason or evidence stated for closure	EHAT closed when support ends. Reason and evidence for closure clearly stated. Correct end/success reasons selected.	EHAT closed when support ends. Reason and evidence for closure clearly stated. Parent/carer's and child's feedback gained Correct closure/ success reasons selected.
No evidence of	Closure audit partially	Closure audit	

closure audit form on the system	completed, some actions outstanding	completed all actions complete, management oversight on the system	

Overall grading

The overall grading should reflect the majority of grades from the sections. Where only two sections are graded and grades differ, more weighting should be given to the review section as it is recognised that assessments are fluid and reviews should reflect and evidence positive outcomes.