

# EARLY HELP FAMILY PLAN GUIDANCE

V1.0

Dated 04/04/19

## **Introduction**

This guidance is to be used in addition to the information contained within the Early Help Family Plan that was launched on the 01/04/19.

The purpose of this guidance is to provide insight on:

- how to approach the completion of the Early Help Family Plan,
- give clarity on what makes a 'Good' plan

There are two key points to remember when completing a plan:

- Across all areas of the plan remember to be clear in your writing, include evidence and impact regarding progress made and how this connects to decision making.
- With regard to planning tasks and actions, these need to be SMART – Specific, Measureable, Achievable, Realistic and Timely.

**Always remember to check the Threshold document during the assessment and planning process.**

## Completing the Early Help Family Plan:

### Family plan dates and meeting number:

Plan start date:	<input type="text"/>	Date of review meeting: Time & Venue:	<input type="text"/>	Review Meeting No.	<input type="text"/>
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- The 'Plan start date' box will be a fixed date and will need to reflect the date the plan started. This date and will remain the same on the plan regardless of how many meetings are held. This is so it can easily be seen how long the plan has been open.
- The 'Date of Review' and 'Time and Venue' boxes are to be updated at the start of each new meeting.
- The 'Review Meeting No.' box is to indicate the number of the meeting and will need to be updated at each meeting.

**Family Details:**

Parent/Carer First Name	Surname	D.O.B (dd/mm/yyyy)	Significant Other/s First Name	Surname	D.O.B (dd/mm/yyyy)
Child/Young Person First Name	Surname		D.O.B (dd/mm/yyyy)		
Family Address:	Significant Other/s Address				
Telephone No.	Telephone No.				

- As with the Early Help Assessment, ensure that you put as much detail into this section as possible. Details should already be known as it is expected that they were obtained during the assessment which led to the plan.
- As with the Early Help Assessment, be mindful that there could be more parent/carers or significant others in the child's life so ensure that these details are relevant and accurate. Significant others are viewed as friends/family that have a significant role in the child's life.

**Reason for the Early Help Support Plan:**

What is the reason for this Early Help Family Plan?

Please include;

Date Assessment completed (e.g. Early Help Assessment/CYPA)  
Focus of this Early Help Family Plan  
Have any significant events taken place since the completion of the last Plan?

- Ensure that the date the assessment was completed is written in this box
- Briefly summarise what the focus is of this plan and why it was needed. Be clear and specific and link this information to the



previous plan. If you are completing the first plan after the assessment, make comment on how the plan links to the recommendation of the assessment.

- With regard to significant events, examples of this could be parental separation / reconciliation, family bereavement. There is no requirement to put all the detail in of all updates since the last meeting. This detail will go into the updates in their relevant actions on the plan.

**Family Plan: Overall**

CHILD/YOUNG PERSON'S DEVELOPMENTAL NEEDS						
Please complete relevant areas of need for each child/young person. Tick all that apply (if needed)						
CHILD'S NEEDS	What are you going to do to help improve or strengthen?	Who will do this & support required?	By when?	How will we know when things have improved?	Who will be responsible for this?	How long will it take?
Health						
Education						
Emotional and Behavioural Difficulties						
Special Educational Needs						
Physical Disabilities						
Communication Difficulties						
Other						
Other						

- In the sections relating to 'Child/Young Person's Developmental Needs', 'Parenting Capacity' and 'Family and Environmental Factors', please note that not all boxes need to be completed. Also the child development section needs to be completed separately for each child. The other two sections are for all children and family members.

**ENVIRONMENTAL CAPACITY** Please complete relevant areas of need

Area of Need	What are we doing to change, improve or strengthen?	How will we know things have improved?	By when?	How will we know what things have improved?	Solutions for how we are doing	Evidence of good practice	Other good practice
Health							
Education							
Employment							
Skills							
Community Resilience							
Family and Social Inequalities							
Other							

**ENVIRONMENTAL CAPACITY** Please complete relevant areas of need

Area of Need	What are we doing to change, improve or strengthen?	How will we know things have improved?	By when?	How will we know what things have improved?	Solutions for how we are doing	Evidence of good practice	Other good practice
Health							
Education							
Employment							
Skills							
Community Resilience							
Family and Social Inequalities							
Other							

- Only fill in the boxes that have actions which relate to the relevant section. If a section has no action, use the phrase 'No action identified at this time' as this indicates that the section has been considered. For example, if there were no actions identified that related to Health, instead of leaving boxes blank the phrase 'No action identified at this time' can be inserted.

**Do not leave blank boxes as leaving blank boxes can be interpreted as though you have not considered the need for action.**

- Remember to be clear in your writing, include evidence and impact into your decisions and make the planning is SMART, ie Specific, Measureable, Achievable, Realistic and Timely.

**Family Plan: Completing the columns**

What are we going to change,  
improve or strengthen?

- This is where we record the task or action to be completed. Be mindful of what the overall goal is for task or action.
- Be specific in your wording but remember to write the tasks in a way that can be understood by everyone involved.

**Family Plan: Completing the columns**

Who will do this?  
Is support required?

- This is where we record who will be taking responsibly for identified tasks or actions.
- Consider if tasks will be the responsibility of one or more people and if support is needed, who will do this?

**Family Plan: Completing the columns**

By when?

- With regard to when tasks will be completed, consider when it will need to be completed? Is it a short term task? A long term task?



	<ul style="list-style-type: none"><li>• Remember to avoid using phrases such as 'ongoing' or 'asap'</li><li>• If you are not clear on what the end date will be, put the date of the next TAF meeting into this section to ensure that the task is reviewed timely.</li></ul>
<p><b><u>Family Plan: Completing the columns</u></b></p> <div data-bbox="497 699 844 863" style="border: 1px solid black; padding: 5px; margin: 20px auto; width: fit-content;"><p>How will we know when things have improved</p></div>	<ul style="list-style-type: none"><li>• With regard to this box, ask yourself 'what will we need to see to show us that there has been change?', 'what is it that will tell us things are better?'</li><li>• These should be agreed following contributions by all involved</li></ul>





**Family Plan: Completing the columns**

**Evidence for how we  
are doing**

- Following the agreement of ‘how we will know when things have improved’, record in this box what evidence has been gathered to show progress. Are we seeing the changes needed? Why/Why not?
- Be specific about what the evidence is, where it was from and how it shows progress.

**Family Plan: Completing the columns**

**Evidence of goal  
achieved**

- Once it is agreed that a task or action is achieved the evidence of this is recorded in this box.
- Be specific about what the evidence is, where it was from and how it shows how the goal was achieved.
- Note: It is not necessary to repeat all the information in the previous box in this one as that box is to record the progress as the plan progresses.

**Family Plan: Completing the columns**

Date goal  
achieved

- Insert date of goal completion in this box.

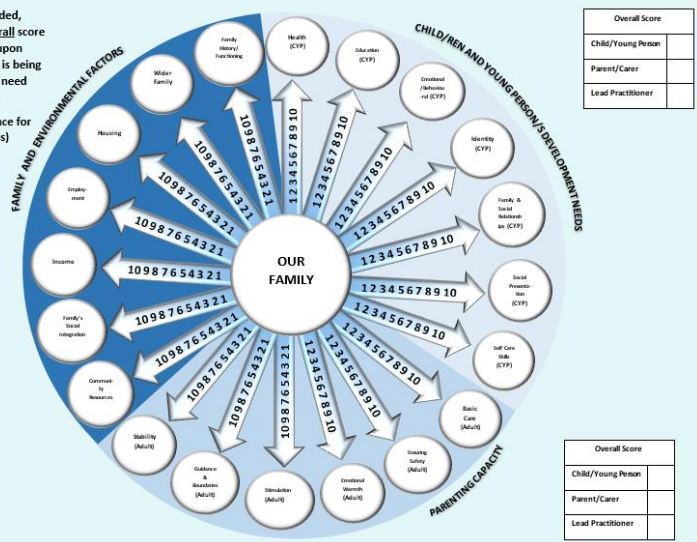


## Scaling:

Using the scores provided, please provide an overall score between 1-10, based upon how you feel progress is being made for each area of need identified in the Plan.

(Please refer to guidance for Key scores and analysis)

Overall Score	
Child/Young Person	
Parent/Carer	
Lead Practitioner	



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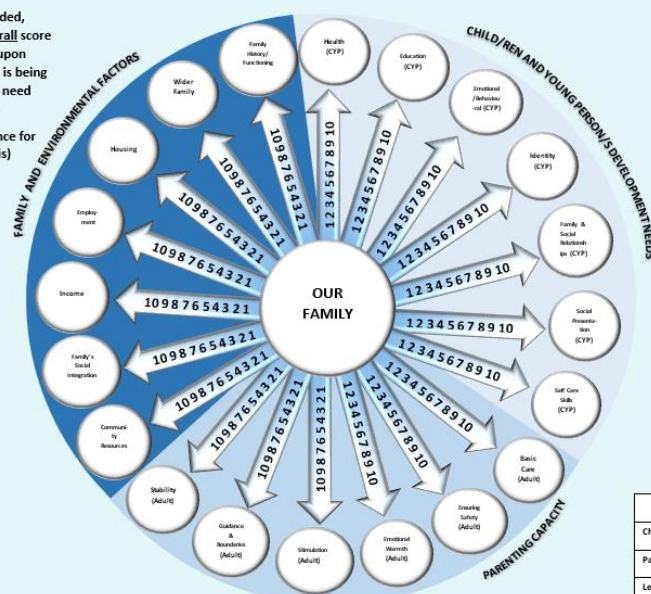
- Scaling should be completed at each Team Around the Family Meeting
- Scaling should be used on the arrows to measure the Parent Carer, Child/Young Person (where appropriate) and Lead Practitioner view of current progress of each relevant area of the plan. Scaling is not needed on every arrow, only ones that have actions associated to them.
- An overall score from the Parent Carer, Child/Young Person (where appropriate) and Lead Practitioner is required in the outer boxes
- The key below will aid the scoring (note the key can also be found in an appendix at the end of this guidance).

## Key for Scaling:

Using the scores provided, please provide an **overall** score between 1-10, based upon how you feel progress is being made for each area of need identified in the Plan.

(Please refer to guidance for Key scores and analysis)

Overall Score	
Child/Young Person	
Parent/Carer	
Lead Practitioner	



Overall Score	
Child/Young Person	
Parent/Carer	
Lead Practitioner	

Overall Score	
Child/Young Person	
Parent/Carer	
Lead Practitioner	

- 1: At crisis point, immediate support required in order to prevent crisis intervention. Not engaged with services (formal action may have started)
- 2: Immediate concerns still present but family beginning to engage with services.
- 3: Immediate concerns ongoing but family are engaging and starting to recognise the need for improvement.
- 4: Family are working well to resolve the issues, though concerns are still present.
- 5: Family have engaged with services in a meaningful way, improvements are being made.
- 6: Family have made significant improvements with ongoing support from services.
- 7: Issues may still be occurring but family are able to recognise and resolve as they arise with reduced support from services.
- 8: Family needs are met and may need low level support.
- 9: Family are able to resolve issues on their own via signposting and accessing universal services where appropriate.
- 10: Family needs are met, there are no current concerns. Family able to identify their own issues.

## Views of family and professionals regarding the plan:

What are the parents/carers views about the Early Help Family Plan?	What are the child/young person/s views about the Early Help Family Plan?
<input type="text"/>	<input type="text"/>
What are the Lead Practitioners views about the Early Help Family Plan?	
<input type="text"/>	

- With regard to capturing the views of family and child(ren), be clear in recording what their views are.
- Questions for these boxes include, but are not limited to :
  - Do they agree with the plan? If not, why not?
  - Is there anything they want to add or say?
  - Do they have any feedback about their experiences they want to share?
- It is acceptable to put the views of all children in the 'child/young person/s views' box. There is no need for separate boxes for each individual child.



- With regard to the 'Lead Practitioner' views, this is a short summary where the Lead Practitioner is able to record comments with regard to the overall progression of the plan.

Note: Make comment regarding if the plan is progressing as required and if a further meeting is required (why/why not).

- Remember to separate fact from opinions and to use evidence where appropriate.

**Who contributed to the Early Help Family plan?**

Please list the parent(s)/carer(s)/professional(s) who supported with the completion of the Early Help Family Plan. (Please add additional lines if required)

Name	Relationship to Child/Young Person/Parent/Carer	Contact Details	Were they present at TAF Meeting? (Y/N) (If No, was report/information provided?)	Verbal consent was obtained at meeting regarding actions detailed in the Plan? (Y/N)

Date of Next Review Meeting:

- This is where family members and professionals who contributed to the plan are recorded. It is important for recording purposes that all boxes are filled out and are accurate.
- Ensure that the date of the next meeting is added.



- If a family member or professional who has not been in attendance but has contributed to the plan via report or verbal information, the report will need to be attached to the plan.
- Verbal information shared should be incorporated at relevant points in the plan.
- It is acknowledged that signatures will not be able to be obtained until the plan is formally written up so ensure that verbal consent is recorded in the final box of this section.
- Verbal consent regarding the agreed plan will be in effect until written signatures are obtained.

**Signatures:**

I understand and confirm the information that is recorded on this form is accurate, and that it will be stored and used for the purposes of providing support to:

Parent/Carer			
Signature:		Date:	
Print name:			
Signature:		Date:	
Print name:			

Child/Young Person			
Signature:		Date:	
Print name:			
Signature:		Date:	
Print name:			
Signature:		Date:	
Print name:			

Lead Practitioner			
Signature:		Date:	
Print name:		Contact Telephone No:	
Contact Address:			
Email address:			

- Signatures for the plan can be obtained at the following meeting once it has been formally written up.
- Ensure that Lead professionals details are also recorded clearly.

**Remember: All Early Help Plans must clearly show the impact of actions on the child(ren) health, development and overall wellbeing**





Please email your completed Early Help Family Plan to the relevant Family Centre inbox below, based upon the area within the borough the family reside.

If you are sending information via email, please contact the relevant Family Centre to obtain a secure email address to forward the information to.

Family Centre Email address:	Telephone No.
<a href="mailto:Fs.brierleyhill@dudley.gov.uk">Fs.brierleyhill@dudley.gov.uk</a>	01384 813322
<a href="mailto:Fs.dudleycentral@dudley.gov.uk">Fs.dudleycentral@dudley.gov.uk</a>	01384 812440
<a href="mailto:Fs.dudleynorth@dudley.gov.uk">Fs.dudleynorth@dudley.gov.uk</a>	01384 813096
<a href="mailto:Fs.halesowen@dudley.gov.uk">Fs.halesowen@dudley.gov.uk</a>	01384 813954
<a href="mailto:Fs.stourbridge@dudley.gov.uk">Fs.stourbridge@dudley.gov.uk</a>	01384 818780

If you are unable to return your completed Early Help Family Plan via secure email, please hand deliver to your local Family Centre.

If you require support in the completion of the plan, please contact the Early Help Enabler at the relevant Family Centre.

If further support is required with regard to the process or completion of an Early Help Family Plan, contact should be made with your relevant Family Centre.

### **Early Help Family Plan: Key for scaling**

- 1: At crisis point, immediate support required in order to prevent crisis intervention. Not engaged with services (formal action may have started)
- 2: Immediate concerns still present but family beginning to engage with services.
- 3: Immediate concerns ongoing but family are engaging and starting to recognise the need for improvement.
- 4: Family are working well to resolve the issues, though concerns are still present.
- 5: Family have engaged with services in a meaningful way, improvements are being made.
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- 8: Family needs are met and may need low level support.
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- 10: Family needs are met, there are no current concerns. Family able to identify their own issues.

## Example of completing an action in the Family Plan:

### 2. FAMILY PLAN

Throughout the Early Help Family Plan the views of both the child/young person and parent/carer must be considered.

**CHILD/YOUNG PERSON'S DEVELOPMENTAL NEEDS** *(Please complete relevant areas of need for each child/young person. Print off additional pages if required)*

NAME:

AREA OF FAMILY NEED	What are we going to change, improve or strengthen?	Who will do this? Is support required?	By when?	How will we know when things have improved	Evidence for how we are doing	Evidence of goal achieved	Date goal achieved
Health	No action identified at this time						
Education	To ensure that [Child A] attends school regularly.	Parents will be responsible for this action	31/07/19	Feedback from [Education professional] shows that attendance at school has improved  Feedback from parents and child about attendance at school.	[Educational professional] has been contacted by [worker] and has been informed that [Child A] has had improved attendance.  Family have reported that attendance has improved.	[Education Professional] has fed back at TAF meeting that [Child A] has been attending regularly at school and that this has led to an overall improvement in attendance at school.	20/07/19