

Early Help Assessment (EHA) Guidance Pack

For Lead Professionals and Assessors

October 2025



Version Control

Version 1

22/10/2025

Contents

Overview	4
Whole Family Working	4
Liquidlogic Early Help Module (EHM)	5
Collaborative working and information sharing	5
Family Valued and Relational Practice.....	6
Before starting an EHA	7
Next Steps.....	7
Writing the Early Help Assessment	8
Considering previous interventions	9
Ensure all areas of the assessment are completed	9
Avoid jargon and acronyms	9
Providing context.....	10
Child's lived experience	10
Parent/Carer voice	11
Analysis and Summary.....	11
Supporting documents.....	12
Sharing the EHA.....	12
Targeted Support Service	12
Appendix 1: EHA Checklist.....	13
Appendix 2: EHA Information Gathering Proforma	16
Links to Further Guidance	19

Overview

The Early Help Assessment (EHA) is a *consent based* holistic needs assessment tool to be used with children, young people and their families. It should be completed where professionals are identifying emerging to moderate unmet needs or where a multi-agency approach may be required.

The EHA can be completed by any professional working with the child, young person or family, whether they are employed, a volunteer or working within the public or private sector.

An EHA should be considered where:

- A child (or children) in a family has one or more unmet needs that may require a multi-agency approach;
- The child or family's needs are unclear or;
- An EHA is required in order to access a targeted offer

Before starting the process, consent must be obtained from parent/carer(s), or where deemed Gillick Competent, from the young person themselves and the Peterborough Privacy Notice shared.

Where consent is not provided, the EHA should not continue. Efforts should be made by the professional to identify barriers for engagement and highlight the benefits, however the decision ultimately remains with the family.

Whole Family Working

All professionals completing an EHA are strongly encouraged to consider the needs of all those living in the family home, or anyone considered to be a part of the family network. This may include siblings living at different addresses or with separated parents. This is to ensure the family's needs are considered and supported as whole through a coordinated approach.

Consent should always be sought from the parent/carer(s) before including siblings/wider family members within the Early Help Episode. Where this is not provided, please ensure this is clearly recorded within the EHA and case recording on [Liquidlogic EHM](#).

EHA's should be completed together **with** parents/carers and where appropriate, the child or young person, ensuring their voice and lived experience is clearly recorded.

If you are uncertain about including a child or family member within the Early Help Episode, please contact the Targeted Support Service for further advice and guidance.

Liquidlogic Early Help Module (EHM)

In Peterborough, Liquidlogic Early Help Module (EHM) is used by both internal staff and external partners to record all Early Help activity.

All Early Help Assessments (EHAs) undergo a rigorous quality and safeguarding check by the Targeted Support Service known as the 'Early Help Gateway'. This is to ensure all assessments are holistic, consider wider family needs where appropriate, and address any safeguarding concerns. Where it is felt there are gaps in the assessment or further context required, they may be returned to the Lead Professional for more information.

Any ongoing activity relating to the Early Help episode, for example, Team Around the Family (TAF) meetings, should also be recorded on EHM to evidence the progress for the child/family.

[Information on accessing Peterborough Liquidlogic EHM](#)

Collaborative working and information sharing

As has been highlighted in many Serious Case Reviews and high-profile cases, collaborative working and information sharing is key to meeting the needs of children and families. This is the same for the Early Help approach and strong multi-agency working is vital.

The EHA should aim to provide a 'snapshot' of what life is like for the child/family, reflect the presenting needs and consider previous experiences of universal, targeted or specialist support.

In many situations, professionals initiating the EHA are often only directly involved with one child or adult within the family, making assessing the whole family more challenging.

Where there are other agencies working with the family, for example other Schools, Nurseries, Health Visitors etc, parental consent should be sought in order work collaboratively with other professionals to gather information on all relevant family members.

Professionals should make reasonable attempts to establish contact with other involved agencies to include them in the assessment process. Where this is not provided, please clearly state this within the EHA and consider including those agencies within the subsequent Team Around the Family (TAF) process.

Family Valued and Relational Practice

The Family Valued approach is being implemented across Peterborough with those working with children and families.

The approach centres on a clear focus on the child or young person and is based on the relational principle of working *with* children and families, rather than doing things to or for them. It is a whole-system approach to changing culture, behaviours, and practice, which leads to transforming outcomes for children that focus on building and maintaining positive relationships. Being centred on the child and their experience, it is underpinned by a belief in families' strengths and supporting them to find solutions.

At the heart of Family Valued, is relational practice, which places strong, positive relationships at the heart of work undertaken with children and families.

Creating emotionally safe environments

The environment in which you hold meetings and discussions with children and families should be comfortable, inviting and free of barriers. Where possible, consider removing tables/desks that can feel intimidating and instead, sit in a circle for your discussions.

Promoting collaboration and family group decision making

Create a forum where the children, young people and parents feel seen, heard and valued. Give plenty of opportunities and encouragement for their contribution, offer solutions and make decisions about their plan, rather than being professionally led. The family and their network are part of the team and central to the decision-making process.

Empathetic and open communication

Strive to understand the world from the child/family's perspective, acknowledging their experiences and challenges as well of that of professionals.

A 'no blame' culture

Acknowledge behaviours as a form of communication of a need or difficulty, rather a deliberate act. Question the reasons behind the behaviours being displayed and utilise trauma informed practice approaches and how you may best support the child and/or family to feel safe, comfortable and empowered.

Before starting an EHA

Before starting an EHA, professionals should check Liquidlogic EHM to see if one already exists for the child or siblings or whether they are already open to Children's Social Care.

Active Early Help Episodes are indicated by a teal coloured 'E' flag.



Where this is already an open Early Help Episode for a sibling or household member, please liaise with the current Lead Professional to discuss including other family members and updating the EHA. Please contact the Targeted Support Service for further support in the process to consolidate siblings to an existing episode within EHM.

Active Children's Social Care involvements are indicated by a bright green coloured 'R'. The allocated Social Worker (where applicable) will be displayed when it is hovered over.



Where a child or sibling/household member is open to Children's Social Care, please contact the allocated Social Worker to explore your concerns and the current support plan in place.

Should you need guidance in how to appropriately search for Child Records within Liquidlogic EHM, please refer to the EHM Knowledge Centre for the *Create Person EHM User Guide*.

Next Steps

Where you have determined an EHA should be initiated, discuss the Early Help Process with the family, share the [Peterborough Privacy Notice](#) and explain how you may be able to explore support them with their needs.

Arrange a meeting with parent/carer(s) and where appropriate, the child/young person(s) to gather information and ensure you include their voice and lived experience.

Consider utilising key work tools with the family, such as the Outcome Star, to gather information, as these often help to provide structure for open and meaningful discussions.

Remember, the EHA is a collaborative and consensual process and should be done *with* the family, not *to* them. They should be provided with the opportunity to inform the assessment from their lived experience, not just the professional perspective.

Please utilise the [EHA Checklist](#) when completing your assessment.

Writing the Early Help Assessment

An EHA may be completed for a specific concern, such as development or behaviour, however it's important to gather holistic information that reflects the child and family's overall situation. Work collaboratively with the family to create a balanced assessment that highlights both strengths and areas needing support. The main body of the assessment is split into 3 key areas:

Child Development Needs

This should explore health, education and learning, emotional and behavioural development, identity, family and social relationships, social presentation and self-care skills for each child included within the assessment.

Where appropriate, provide examples or observations to provide context, such as when referencing challenging behaviour - what does this *look like* for the child? What strategies are implemented and to what effect etc.

Parent/Carer Attributes

This should explore basic care, safety and protection, emotional warmth, stability, guidance, boundaries and stimulation provided to the children by parents/carers. This should also consider parent/carers own needs e.g. physical/mental health, substance misuse, trauma etc.

Where parents/carers have their own needs, include information how these impacts on their parenting ability and/or relationships with other family members. For example, where a parent may struggle with a mental health difficulty, how does this affect the wider family and availability/response to the children.

Family & Environmental Factors

This should explore the family history and functioning, wider family network, housing situation, employment, financial circumstances (access to appropriate benefits, debt, financial stability), social integration and use of community resources.

Where discussing areas such as housing, consider whether they are socially housed or have private rent/mortgage arrangements, as additional can be accessed via Social Landlords. Explore sleeping arrangements, for example, where a child has poor sleep, do they share a room with another family member that may also be being impacted.

Discussing financial circumstances can be uncomfortable and may not feel relevant to some of the concerns being raised, however rather than using questions such as

“What are your financial income and outgoings?”

consider less invasive questions such as

“Are you accessing any benefits?” or *“Are there any debts causing you concerns at the moment?”*

These questions feel less intrusive and help identify missed entitlements or debt issues that could lead to serious problems like homelessness, which may hinder a family's ability to engage with other support.

Considering previous interventions

Information on previous interventions provided to the child/family at universal, targeted and specialist levels is important to consider. This may be support provided via your own organisation, a previous setting or as part of an earlier Early Help or Social Care episode.

- Has the child/family been subject to a previous Early Help Episode?**
Explore what interventions were accessed previously and what impact this had, if any.
- Has the child/family accessed previous Children's Social Care (CSC) interventions?**
Gathering this kind of information can be sensitive, so try to be empathetic and respectful of the family's experiences. Utilise any safeguarding information you may hold as a setting that may help inform and/or structure this conversation. Use 'professional curiosity' to explore what previous concerns led to this intervention and what support they received to address this.

Ensure all areas of the assessment are completed

- Avoid leaving blank fields as this may be interpreted as having been missed or not considered.**
Where the information is unknown, not applicable or the parent/carer doesn't want to share please reflect this appropriately.

Avoid jargon and acronyms

- Where describing areas such as behaviour, avoid using terms such as 'meltdowns' in isolation.**
Provide context as to what this may look like; is the outburst more physical, emotional or both? What types of behaviour do they display e.g. hitting, throwing, biting etc. Are there any identified triggers? What strategies are currently utilised and to what effect?
- Avoid the use of acronyms**
Many acronyms may mean different things in different contexts e.g. NFA - no further action or no fixed abode? Some job title acronyms are not common knowledge outside of their given sector e.g. CNN for Community Nursery Nurse within Health.
Where using acronyms, provide a full explanation of the reference in the first instance before using elsewhere.
- Where there is an existing diagnosis of a condition or disorder, provide information on how this presents for the person affected.**
Some conditions have very specific effects on a person e.g. behavioural traits, physical impairments. Where possible, provide a brief outline of this to provide context and information of any treatments/resources being accessed to manage this. This is just as important for parent/carers conditions as the child, as may impact their ability to engage in subsequent support that may be offered.

Providing context

Statements without examples or contextual information often leads to further questions or gaps in information.

“Freddie is often late for school.”

Whilst the statement above highlights the concern around attendance and punctuality, without context it raises questions around the reasons behind being late, the frequency or patterns that there may be, or what response parents/carers have given when this is discussed with them.

Ensure, where possible, to provide context for statements included within an EHA. This particularly important when describing developmental or behaviour difficulties – remember to include information such as:

- What does this look like?**
How does the issue/concern/behaviour present? Provide examples to help describe the prevalence, intensity, duration etc.
- When does it happen?**
Are there are any known patterns, identifiable triggers or causes etc.
- What is the response?**
How do parents/carers/professionals/the child respond e.g. strategies utilised and the impact seen.

Child's lived experience

We should all strive to gain a picture of what life is like for the child when completing any assessment. Not all children are able to or willing verbalise their thoughts, but professionals can obtain this using observation, as well as conversations.

For example:

“Freddie is happy when he arrives at preschool but is also happy to see mum at the end of the session. He is happiest when playing with trains. Freddie does get particularly upset when his nappy is changed.”

Consider using a key work tool, such as Outcome Star or All About Me exercises, to help gather information from the child/young person. This can be fed into the EHA and added to the Early Help Episode as an attachment to evidence the child’s perspective.

You can be creative and gather this information in various ways, through play, drawing, puppets, etc.

Parent/Carer voice

Always aim to capture the Parents/Carers voice throughout your assessment and tell their story through your narrative, as well as your own professional perspective. At the end of the EHA, there is a mandatory Parent/Carer comments section. This provides Parents/Carers the opportunity to add any last comments on their EHA in addition to what they may have already contributed through the assessment process.

Areas to consider are

- How do they describe the family circumstances?
- What do they see as their strengths/weaknesses?
- What support are they seeking or feel they need?
- What would they like to change for their child/family?
- How do they feel about the process?

Analysis and Summary

The last section of the EHA is the Analysis and Summary. This should provide a concise summary of the findings from the assessment, identifying both strengths for the child and family, as well as areas that require further support.

Also included within this section is a Needs Checklist. This is a list of needs that may be present for a family and the Local Authority reporting of the prevalence of need across the city and inform future service provision.

The Needs Checklist is split into 10 key areas:

- Getting a good Education
- Good Early Years Development (for 0-5 yrs)
- Improved Mental & Physical Health
- Promoting recovering and reducing risk harm from substance misuse
- Improve family relationships
- Children safe from abuse and exploitation
- Preventing and tackling crime
- Safe from domestic abuse
- Secure housing

You should consider each area for each child's need individually and select any current needs you have identified through the assessment process. You should ensure there is information contained within the submitted EHA to evidence any needs that are selected.

Where there are no needs for a particular area, please indicate this by selecting *No Identified Needs*.

Supporting documents

It may be useful to include copies of other documents that may add value to the EHA or provide supporting evidence, e.g., a medical report for a child or an Outcome Star completed with the child/parent.

These can be uploaded to the Early Help Episode as an attachment. Should you upload any supporting document, please refer to these in the assessment narrative where relevant.

Sharing the EHA

It's important to check that the family feel you have captured their story and lived experience accurately. Remember, it is their assessment, and they should be happy with the contents before it is finalised.

Always share a copy of the assessment with the family *before* finalising and submitting to the Early Help Gateway. Provide a timeframe to request any additions or amendments to minimise delay in submitting the assessment for screening and becoming outdated.

Should you have an EHA returned to you for further information, remember to revisit the final version and any additions you have made, before you resubmit for authorisation. Ensure that the family understand and have contributed to what should happen next.

Targeted Support Service

Should you require any support or advice when initiating or completing an Early Help Assessment, please contact one of the locality based Early Help Support Officers within our Targeted Support Service.

Central & East

Charlotte Durham

Charlotte.Durham@peterborough.gov.uk

07825 867191

North, West & Rural

Anne Treadwell

Anne.Treadwell@peterborough.gov.uk

07780 276137

South

Bruce Stancombe

Bruce.Stancombe@peterborough.gov.uk

07717 677942

EHM & Training Lead

Gemma Warren

Gemma.Warren@peterborough.gov.uk

01733 864086

Appendix 1: EHA Checklist

Before starting the EHA

- Check EHM for information already recorded**
Remember to check the child and their siblings for previous or current open Early Help Episodes.
- Discuss the Early Help Process with the family**
Share the Privacy Notice and explain how you can help.
- Arrange to meet parent/carer(s) and child**
Always allow, where appropriate, to include both parents/carers and also the child/young person(s) to gather information their voice.

Consent

- Ensure the family understand the Privacy Notice and are happy to proceed.**
See Privacy Notice via Useful Links on EHM or via the Peterborough City Council website. [Corporate Privacy Notice | Peterborough City Council](#)
- Discuss consent to include all relevant siblings within the Episode.**
Ensure to discuss included all siblings into the Early Help Episode and EHA to provide a whole family approach. Where not obtained, ensure clear case recording for rationale.
- Obtain consent to liaise with any other involved agencies/professionals to help inform the EHA.**
Explore other agencies e.g. other Schools, Nurseries etc for siblings to seek contribution to information gathering.

Review Personal Details (Basic Demographics)

- Review the Child Demographics.**
Where a child/family records already exist within EHM, review all information recorded and update where required, e.g. Date of Birth, Addresses, Ethnicity etc.
- Review the Household composition**
Are all the right people recorded as living in the household? Do any of the home addresses need updating?
- Review any Relationships already recorded**
Are there relationships linked that are no longer relevant e.g. Ex Partners or missing family members e.g. new siblings, Step-Parents etc. With consent, ensure key relations are recorded, particularly if referenced within the EHA e.g. aunts/uncles/grandparents if the children are having regular contact.
- Review any contact telephone numbers recorded**
Review contact telephone numbers for each child's record and also parent/carers. Record any contact details against the relevant person record e.g. parent telephone number against the parent record etc.
- Record a locality for all children part of the episode.**
For further advice around localities, please contact the Targeted Support Service.

Completing the EHA

Lead Professional Details

- Complete all of the details of the person completing the assessment**
This is required so it is clear who has completed the assessment and how they can be contacted by the family or another professional, including the Targeted Support Service.
- Complete a reason for opening the assessment**
Provide a short summary of current concerns/present needs
Include detail on who has contributed to the assessment e.g. Parents, child/young person, other settings/organisations e.g. sibling School, Health Visitor, Family Worker

Considering sibling needs (where consent provided)

- Ensure the needs for other children in the family are considered**
Even where the presenting needs relate to one child, there will inevitably be an impact on siblings e.g. emotional wellbeing, copied behaviours etc. Where the decision is made to progress with siblings not included, please record information to reflect that decision e.g. parent consent not provided.
- Review individual Identifying Details for each child**
Check and update personal details recorded for each child subject to the EHA and update anything that is incorrect, i.e. DOB, address and contact details.
- Review and update Relationships recorded for each child**
Ensure all relevant key relationships for each child are recorded, including both parents/carers with parental responsibility.
- Review and update any language/interpreter requirements**
This helps to inform supporting agencies of any language barriers that may be encountered when providing interventions.
- Review Ethnicity for all recorded family members**
Ensure this has been appropriately recorded. Where this is already recorded as 'Information Not Yet Obtained', please ensure this is updated for each family member.
- Review and update any diagnosed disabilities recorded**
Please only record disabilities that have been diagnosed by a relevant Professional. Any recorded disabilities will activate the 'CWD' flag within Demographics.
- Record whether the child/young person has SEN Needs and/or an EHCP.**
Where either are recorded as 'Yes', please provide additional notes in the relevant section to provide further context e.g. category of need

Involvements/Key Agencies

- Review and record any current involved agencies for each child subject to the EHA**
Ensure GP Practice and Education settings are recorded, as well as any other professional involvement. There may be previously recorded agencies who are no longer involved e.g. previous Schools, Nurseries etc. Please update these to record an estimated end date.

Analysis and Summary

Provide a summary of the findings

A concise overview of what you have determined from the assessment process with the family. This should highlight strengths as well as any areas in need of support. Consider what needs to change and why.

Complete the Needs Checklist

Select any needs that you have identified from the Needs Checklist. Ensure you consider each child individual needs and record appropriately, e.g. low self-esteem may not apply to all children who are subject to the assessment.

Consider any initial actions identified

Record any actions that have been identified following completion of the EHA. Ensure you identify who is responsible to each action and where possible, a target date for completion.

Schedule the initial Team Around the Family (TAF) Meeting

Best practice for all EHAs should include the outcome of a TAF meeting being held – this meeting should be held to include all involved parties to consider, agree and review the support plan required for the child and family. This should be held within 6 weeks of the EHA being completed.

Appendix 2: EHA Information Gathering Proforma

This template can be used to help gather and collate information when completing an EHA. The headings within in each section are prompts for each area required within the assessment. Remember to explore what are you/the family worried about, what is working well and what needs to happen next to a picture of what life is like for the child and family.

Child Development Needs

Health

Explore registered GP/Dentist, diet and eating habits, sleep health/routine, physical health needs and interventions.

Education and Learning

Explore attendance, academic progress and attainment, play skills etc.

Emotional and Behavioural Development

Explore general development, moods and regulation, self-esteem, behaviours and presentation both at home and in setting.

Family and Social Relationships

Explore personal relationships, both family and friends, wider family network and friendship groups.

Identity and Social Presentation

Explore social interaction with adults and peers, both at home and in Education setting, free flow times, structured times etc, aspirations, likes/dislikes, self-image and cultural beliefs.

Self-care Skills

Explore personal and emotional care skills e.g. hygiene routine, dressing etc, independence, organisational skills and resilience.

Parent/Carer Attributes

Basic care, Safety and Protection

Explore relationship between parents/carers and the child/children, basic care and safety provided at home and in community, exposure to any trauma factors e.g. parental mental health, domestic abuse.

Emotional Warmth & Stability

Explore emotional relationship between parents/carers and the child/children, affection, comfort and any observations of interactions between them, also consider the parent/carers own relationship with each other and stability provided.

Guidance, Boundaries and Stimulation

Explore routines and boundaries in the home, sanctions and behaviour management strategies utilised and what stimulation opportunities are provided to the child/children e.g. play.

Parental Health & Wellbeing

Explore any individual needs of the parents/carers e.g. mental health and emotional wellbeing, physical health needs, traumatic events, relationships with others.

Family & Environmental Factors

Family History and Functioning

Explore the household composition, parent/carer relationship status e.g. separated, cohabiting etc, contact/custody arrangements (where applicable) and any relevant family history e.g. past trauma or medical needs.

Wider Family Network

Explore the family's wider support network, considering both family and close friends.

Housing Situation

Explore housing arrangements e.g. socially house, private rent etc, landlord information (where applicable), overcrowding, home conditions and any community/neighbour issues.

Employment

Explore employment status of parents/carers, including fulltime/part time, shift work etc.

Financial circumstances

Explore any debt issues, e.g. rent arrears, risk of eviction/homelessness, benefits being accessed and financial stability.

Social integration and use of community resources

Explore family social activities, access of local amenities e.g. parks, play centres, clubs etc.

Links to Further Guidance

[Working Together to Safeguard Children 2023](#)

(HM Government)

[Peterborough Threshold Document: Continuum of Help & Support](#)

(Cambridgeshire & Peterborough Safeguarding Partnership Board)

[Peterborough Early Help Guidance for Professionals](#)

(Peterborough City Council)

[Lived Experience of the Child Practice Guidance](#)

(Cambridgeshire & Peterborough Safeguarding Partnership Board)