



Early Help Toolkit: Putting our principles into action

Early Help means working in partnership with children, young people, parent/carers, adults and families within their communities to stay safe through promoting happy, healthy lifestyles, wellbeing and resilience. We will work together to identify emerging needs and inequalities at the earliest opportunity and ensure that help is available to support and empower individuals to address needs and prevent them getting worse. Early help and intervention is, therefore, about giving people the right help, at the right time, by the right service.

(B&NES Early Help & Intervention Strategy 2021-25)

The following resources aim to support you in connecting families in Bath & North East Somerset (B&NES) to Early Help services.

The toolkit is split into the following sections:

B&NES Early Help Offer.....	2
The Child's Voice	2
Participation of parents and carers.....	5
Think Family	6
Reducing Parental Conflict.....	6
Early Help Assessment	7
Consent.....	11
What is the Early Help Triage Process?.....	11
Thresholds	11
Step-up/Step-down Process.....	12
Child Protection Procedures.....	13
Information Sharing.....	14
Quality Assurance, Monitoring and Evaluation.....	14

Complaints and Compliments	17
Training and Development	17
Managers' Section.....	17
Further Resources.....	18
Your Feedback.....	19
Glossary of Terms and Acronyms	19

B&NES Early Help Offer

One-minute Early Help guide: available [on the Early Help HUB page](#)

Early Help Offer: available [on the Early Help HUB page](#)

[Early help leaflet](#)

The Child's Voice

Since 2000 B&NES has been signed up to the United Nations Convention on the Rights of the Child. **Article 12** states that:

'Children and young people have a right to be involved in all decisions that affect their lives'

Participation is the process by which service users influence decision-making and bring about change. It is about making sure the voice of service users is heard when decisions are being made that affect their lives. It is also a process rather than a 'one-off' event and has varying degrees of involvement. If undertaken successfully, it will lead to active engagement and a positive two-way process.

In B&NES, we are committed to the active participation of children, young people and their families wherever possible. However, we recognise that children, young people and their families may want to engage at different levels with services that affect them. Some may wish to be *informed*, some may wish to be *consulted* while others may wish to be actively *involved* in both decision-making and service delivery.

Types of participation

Individual participation, where children, young people and their families are involved in planning support plans. Ensuring children and young people have a say in decisions about his or her life and service provision is the bedrock of good participation practice.

Social participation, for example through engaging with services or through specific social action projects. Programmes where young citizens are motivated to be involved

in their community and participate in the design and delivery of activities and programmes.

Public participation, typically through involvement in forums, participation in surveys and consultations or through activities linked to quality assurance and improvement of services), and representation on boards. This work has the potential to make strategic as well as operational impact, with children and young people and their families helping shape decision making at senior level.

Whilst we *Think Family* and are keen to hear from all family members, we must hear the child's voice and focus on their experiences and the impact these experiences have on their life. The safety and wellbeing of the child or young person is paramount, and they must be kept at the centre of our work. When working with the wider family we should always view this in relation to 'how will these actions improve outcomes for the child'. This will be achieved by building on strengths as well as identifying difficulties and barriers to achieving the outcomes that we are aiming for.

Tools that can be used to help gain the voice of the child/young person:

The three houses template enables children to discuss likes/hobbies/strengths/protective factors, dislikes/worries and risks related to the child and dreams/hopes/wishes: www.socialworkerstoolbox.com/the-three-houses-template/

The fairy tool enables children to discuss worries, good things, wishes, and whether or not things are 'going well': [www.manchestersafeguardingpartnership.co.uk/wp-content/uploads/2017/01/83887.39-Signs-of-Safety SOS-Com-Tool Fairy A3 WEB.pdf](http://www.manchestersafeguardingpartnership.co.uk/wp-content/uploads/2017/01/83887.39-Signs-of-Safety_SOS-Com-Tool_Fairy_A3_WEB.pdf)

All about me. Collection of 40 sheets that practitioners can use to learn about children's views, wishes, feelings and day-to-day lives: www.socialworkerstoolbox.com/all-about-me-direct-work-sheets-activities-booklet/

Feelings Faces. How do you feel today? www.socialworkerstoolbox.com/feelings-faces-how-do-you-feel-today/

Listen to My Voice. Toolkit and guide to consulting with children and young people, particularly those facing challenges to engagement through special educational needs and/or disabilities: www.childrenengland.org.uk/listen-to-my-voice

Free virtual training on the voice of the child /young person in the Early Help Assessment: <https://bathnes.learningpool.com/enrol/index.php?id=907>

B&NES Participation Strategy – Children and Young People: www.bathnes.gov.uk/services/your-council-and-democracy/consultations/consulting-children-and-young-people/strategy-part

Engaging with the views of non-verbal children and/or children with SEND

The Cheshire Autism Service Resource pack includes information for collecting the voice of the pupil for those with differences in their communication style:

<http://ies-news.info/wp-content/uploads/2017/02/Pupil-Voice-RESOURCES-PACK-Feb-2017.pdf>

Engaging with the views of very young children

Remember also, the value in gaining children's views through observation. This could also include using a simple version of feeling faces that very young children can point to.

Best hopes of a young person

A template, provided by Mentoring Plus is available [here](#).

This is called 'My Personal Plan' and offers a chance for the young person to discuss their hobbies, interests, role models, what makes them feel safe, aspirations, and their best hopes for an Early Help service.

Children state that they want:

- 1.** Vigilance: adults notice when something is troubling children and young people;
- 2.** Understanding: children are heard and understood, and that understanding is acted upon;
- 3.** Consistency: adults provide a stable relationship of trust;
- 4.** Respect: children are treated with respect and presumed competent rather than not;
- 5.** Engagement: children are informed about and involved in procedures, decisions, concerns and plans;
- 6.** Explanation: to be informed of the outcome of assessments and decisions and reasons when their views have not met with a positive response;
- 7.** Support: to be provided with support in their own right as well as a member of their family;
- 8.** Advocacy: to be provided with advocacy to assist them in putting forward their views;
- 9.** Protection: to be protected against all forms of abuse and discrimination and the right to special protection and help if a refugee.

Summarised from [Working Together to Safeguard Children](#)

Participation of parents and carers

As with hearing the voice of the child or young person, it is equally important that parents and carers are involved in discussions and decision making which impacts on them. Participation of parents and carers ensures that they can contribute to assessments and plans in relation to them and their families and can identify and build on strengths and skills to make lasting changes. The participation of parents and carers should also contribute to the co-production of, and influencing of, service provision. Parents have the primary responsibility to meet the needs of their children. It is important to remember that parenting can be challenging; asking for help should be seen as a sign of strength.

Co-production and consultation work was carried out in 2021 across B&NES for several different pieces of work to ascertain the key themes regarding prevention and early intervention. Approximately 350 individuals contributed.

The key themes captured are:

- People want to live their lives, go to work, and do the things that they enjoy, with support as and when needed. To create a system that works for all, everyone needs to be involved from the start. Good services encourage people to engage at the earliest stage. The focus is on prevention and early support.
- People want to be listened to; no-one wants to repeat their story all the time nor have multi assessments for services. There needs to be clear timescales and picture of the process and what they can expect to happen in what timeframe. People want to be involved in the design and delivery of the support that is available to them and for there to be a strength-based approach to supporting people.
- People want support to be available locally, timely and in a flexible manner.
- People want to be able to freely access information, advice and support independently. People want a Directory of Services - something easy to access. They want to be able to access support through a variety of mediums.
- People want to be valued and active members of their community.
- Families and carers felt that they need access to support as well as the person they are supporting.

Tools that can be used to help gain the voice of the parents/carers:

Ladder of Engagement: www.england.nhs.uk/get-involved/resources/ladder-of-engagement-2/

Engaging Parents and Families

This toolkit has been developed to provide practitioners in all settings with a practical resource to help support partnerships with parents and families in all aspects of their

children's learning. Although aimed at learning, it is also transferable to health and wellbeing and early help.

https://education.gov.scot/improvement/Documents/Parental%20involvement/PAR2_EngagingParentsandFamiliesToolkit/par2-engaging-parents-toolkit-section3-060416.pdf

Think Family

Think Family means securing better outcomes for adults, children and families by coordinating the support and delivery of services from all organisations. Neither adults or children exist in isolation and Think Family aims to promote the importance of a whole-family approach.

We must recognise and respond to the needs of all family members holistically; we cannot lose sight of the child in addressing the needs of their parents and carers, or provide children and young people with short-term responses without addressing the root causes with their parents. Addressing the needs of the parent/carers can improve the outcomes for the child. Professionals must consider strengths and sources of support within family networks.

A high-quality service that incorporates a 'think child, think parent, think family' approach will:

- Respect an individual's wishes & recognise their role/responsibilities in a family;
- Incorporate a resilience-led perspective building on family's strengths;
- Intervene early to avoid crises, stop them soon after they start & continue to provide support once the crisis has been resolved;
- Be built upon a thorough understanding of the developmental needs of children, factors that impact parenting capacity, parental mental health problems on children and the impact of parenting on a parent's mental health.

[From:

<https://democracy.bathnes.gov.uk/documents/s3350/Appx%201%20Presentation%20-%20Think%20Family.pdf>]

Reducing Parental Conflict

Reducing parental conflict guidance:

B&NES Council guidance on parental conflict including definitions, domestic abuse and parental conflict and referral questionnaires for both people working with families and self-referrals: <https://beta.bathnes.gov.uk/reducing-parental-conflict>

B&NES reducing parental conflict toolkit: This toolkit aims to provide you with practical information and advice on how to support parents in conflict, as well as

giving you knowledge about some other local services that could provide support. The toolkit is available [on the Early Help HUB page](#).

Guidance linked to Parental Responsibility

A mother automatically has parental responsibility (PR) for her child from birth. A father usually has PR if he is

a) married to the child's mother or

b) listed on the birth certificate (after a certain date, depending on which part of the UK the child was born in). However, there are variations for different circumstances so always check PR by referencing www.gov.uk/parental-rights-responsibilities/who-has-parental-responsibility.

Early Help Assessment

Sometimes it's obvious that a child or young person could benefit from receiving help early on, but it's not clear what type of help is best for them; they could have lots of needs, or their needs could be complex or unclear. An Early Help Assessment (EHA) can help ensure that they get the right help. Completing an EHA is not a referral to Early Help Services.

The EHA should be completed in partnership with the child or young person and their family, and **ALWAYS get their consent**. You should also consider getting input from other professionals working alongside the child or young person and their family when you carry out the EHA. Once the EHA is complete, consider doing the following:

- Organise a Team Around the Child/Family (TAC/TAF) meeting, which should include the child or young person and their family, as well as other professionals involved with them
- [Complete an action plan](#)
- Review progress, prevent any barriers and celebrating successes
- Ensure the child or young person is involved and at the centre of all discussions and decisions

Completing an early help assessment:

This webpage includes guidance on preparing for an early help assessment. It has a section for people working with families and children, and a separate area for parents and carers: <https://beta.bathnes.gov.uk/early-help-assessment> It includes a template action plan.

Lead Professionals

A lead professional is normally someone the family has a good working relationship with who coordinates the support being offered, and normally calls and chairs the TAC/TAF process. They do not take on the role of other professionals and their specialisms. Families/young people should have a say in who the lead professional will be. They can also act as the main point of contact for everyone involved.

Free virtual training on having difficult conversations within the Early Help Assessment process: <https://bathnes.learningpool.com/enrol/index.php?id=908>

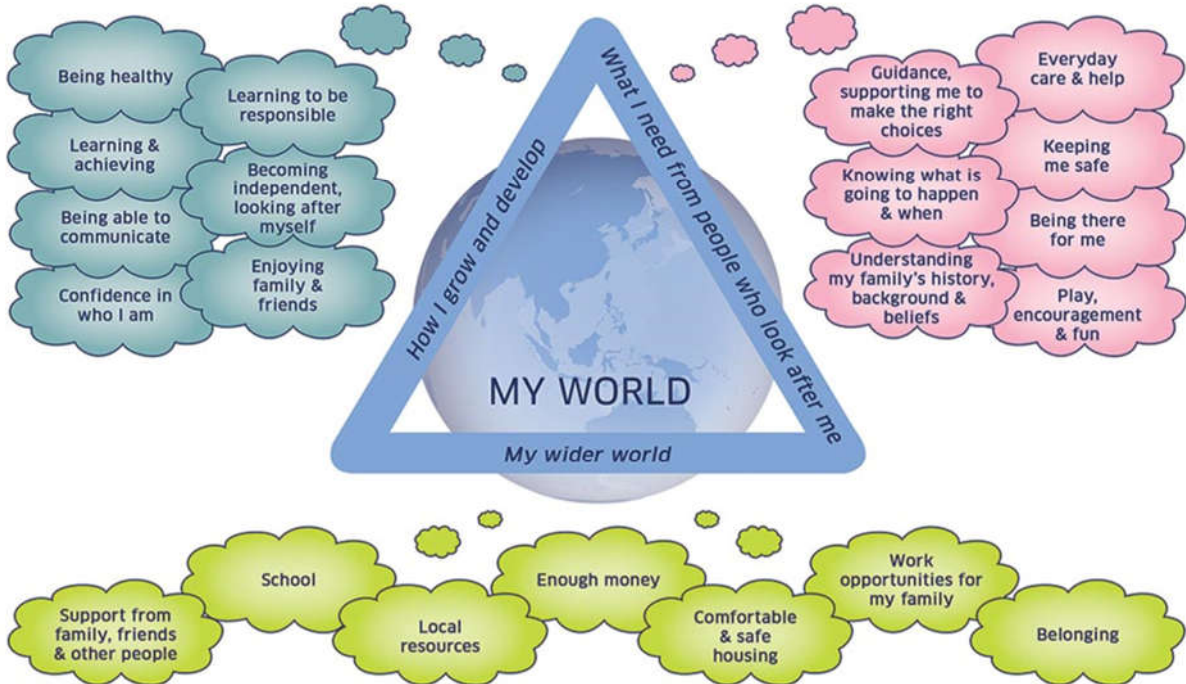
Genogram Guidance is available [on the Early Help HUB page](#).

Family Finance Form is available [on the Early Help HUB page](#).

Tools to improve assessment conversations:

My world assessment triangle provides a basis for a holistic assessment of a child's or young person's needs. How the child/young person grows and develops is understood in relation to the care they receive from others and how they experience their wider social and physical environment. The interaction between the three domains and the way they influence each other must be analysed to gain a complete picture of a child's/young person's unmet needs and how to identify the best solutions.

My world triangle



The whole child or young person: Physical, Social, Educational, Emotional, Spiritual & Psychological development

Cue cards for conversations:

<p>Home</p> <ul style="list-style-type: none"> • Finance (e.g., income, benefits, debt) • Housing (e.g., type, stability, relationship with neighbours, conditions, fit for purpose?) • Play and leisure opportunities • Animals 	<p>Health</p> <ul style="list-style-type: none"> • Physical (e.g., current health/medical issues, regular health checks, immunisations, allergies, dentists, opticians, nits) • Diet and nutrition (e.g., balanced diet, food intolerance) • Sexual health Substance/alcohol misuse • Smoking • Exercise and physical activity • Developmental milestones • Speech and Language development
<p>Emotional health/feelings</p> <ul style="list-style-type: none"> • Anxiety/stress • Self esteem • Self-care (e.g., appearance, self-harming, sleeping patterns, relationship with food, risky behaviours) 	<p>Behaviour/development</p> <ul style="list-style-type: none"> • Citizenship (e.g., role in community as a community champion, active group member, religion) • Anti-social behaviour Response to authority Coping strategies Online activity Sanctions (e.g., exclusion)

<ul style="list-style-type: none"> • Mental health (e.g., depression, eating disorders) • Coping strategies/resilience • Bereavement and loss (including relationship breakdown/change) 	<p>permanent or temporary) Developmental milestones</p>
<p>Learning/work</p> <ul style="list-style-type: none"> • Aspirations Work – current and previous • Work patterns (e.g., shift work) • Volunteering Opportunities • Barriers to working/studying • Training Learning style and its impact • Developmental milestones • Attainment at school • Targets at school/college 	<p>Identity/me</p> <ul style="list-style-type: none"> • Cultural • Sexuality • Language spoken/understood • Transitions (e.g., from child to young person, school move) • Hobbies and interests • Role/position in family (e.g., eldest child, stepparent, carer) • Level of independence Impact of significant life events (e.g., domestic violence, bereavement and loss, illness)
<p>Family</p> <ul style="list-style-type: none"> • Who is in my family? • Relationships within family • Family identity • Caring responsibilities • Parenting style/approach/boundary setting/routines • Significant events/changes for family (e.g., experience of domestic violence, prison) • Culture 	<p>Relationships/community</p> <ul style="list-style-type: none"> • Key support mechanisms/friendships • Problematic relationships • Sexual/intimate relationships • Community connections • Harassment/bullying/victimisation (e.g., racial, sexuality, religious) • Communications/interpersonal skills

Free Virtual Training - Early Help Assessment Overview:

<https://bathnes.learningpool.com/enrol/index.php?id=904>

Further training on preparing for and carrying out Early Help Assessments:

<https://bathnes.learningpool.com/course/index.php?categoryid=51>

Consent

In B&NES all Early Help services are offered by working in partnerships with families therefore we always gain consent. It is best practice to formally note and record this. A template is available [on the Early Help HUB page](#).

What is the Early Help Triage Process?

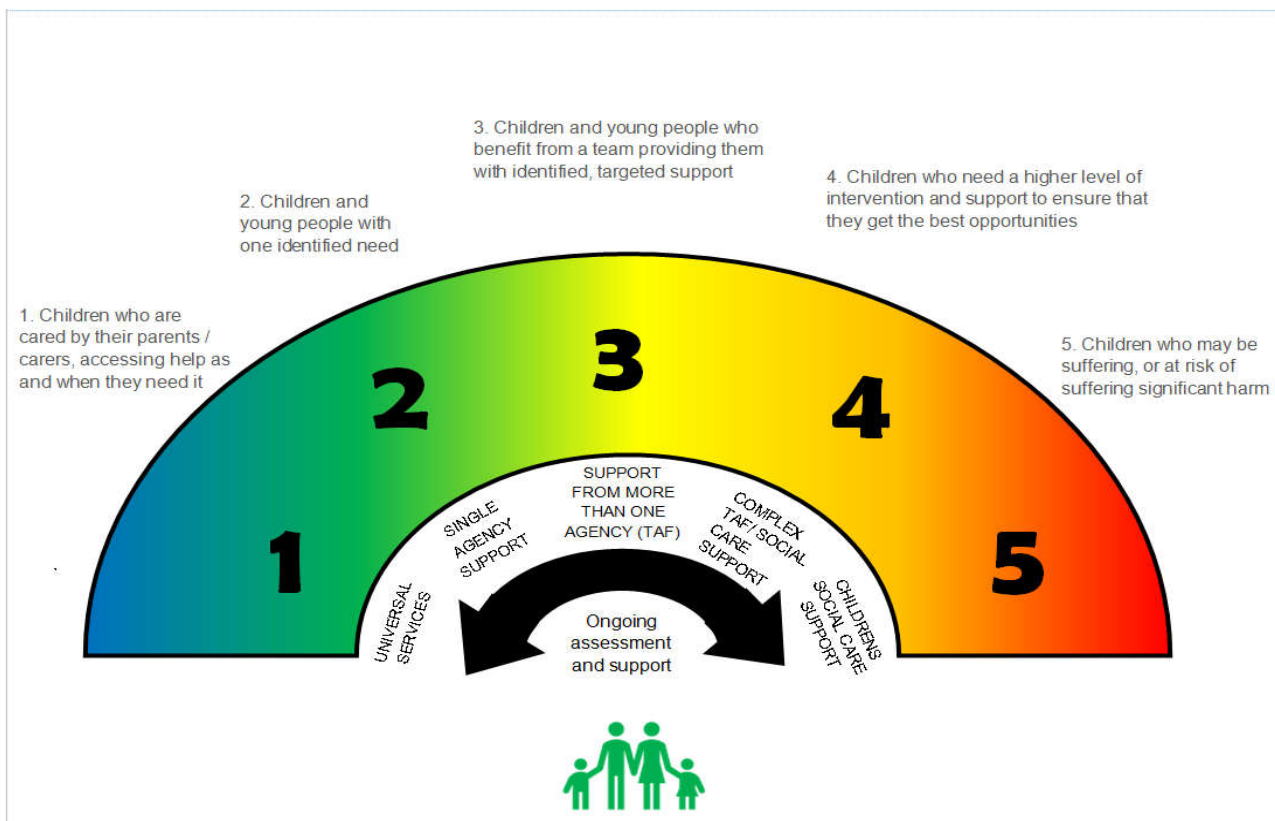
In Bath and North East Somerset Council our Early Help Triage process is where Early Help Services are co-located and work in partnership with their Social Care colleagues in Duty Triage Team (sometimes referred to as the Front Door) to safeguard children, young people and their families and ensure access to Early Help (Right Help, at the Right Time, by the Right Service). A one-minute guide to this process is available [on the Early Help HUB page](#).

Thresholds

Most children, young people and families in B&NES enjoy a good quality of life; however, there are some who find life more difficult for a variety of reasons. [B&NES Community Safety and Safeguarding Partnership Threshold Document](#) illustrates the different levels of need experienced by children, young people and families and outlines an approach for assessing these within the context of their families and communities. This document also advises what to do if at any time risks escalate and need to be reviewed with children's social care and a referral or request for service is needed. Any concerns can be reported through this link.

<https://beta.bathnes.gov.uk/reportconcern-about-child>.

The five levels of need portrayed in the document reflect how children and young people often move in a non-structured way between and across levels and how any assessment should reflect the views and aspirations of children, young people and their families and their wishes, in partnership with a wide range of professionals and agencies. If a child or young person is in immediate danger, ring the Police on 999. Otherwise refer urgently to the Duty Team on **01225 396312** or **01225 396313** or, outside office hours, the Emergency Duty Team on **01454 615165**. All professionals are advised to use the online Request for Service form <https://beta.bathnes.gov.uk/report-concern-about-child>



Step-up/Step-down Process

Step-up

To step-up to CSC, professionals can use the [request for service form](#).

Step-down

The following guidance supports professionals to gain a better understanding of the Step-down process, to ensure consistent and seamless support for families when children's social care end their statutory intervention. This is ultimately to try and ensure families receive the right help at the right time by the right service.

When to 'Step Down'

Children's Social Care (CSC) teams should 'step down' to an Early Help or Universal service at the conclusion of a Single Assessment or just prior to the point of closure to Children's Social Care following a period of involvement with the family.

The process should be transparent for all involved, including the family and other professionals. Discussions should be held with parents, carers, children and young people, where appropriate, to ensure that the step down is completed in a timely way and ensure a smooth transition. The child/ren and / or young person will be closed to CSC once the step-down meeting has happened, and a new lead professional has been identified and agreed.

Who is responsible?

The children's social care team, primarily the allocated social worker, is responsible for leading discussions and organising the step-down meeting and facilitating a discussion to agree the new lead professional.

New lead professional

There is no set guidance as to who the lead professional should be following the step-down process. It will depend on the child(ren) and / or young person involved, their identified needs, and the professional network. Discussions should be held in advance to ensure that a lead professional is identified to pick up this role, prior to the step-down meeting being held. The lead professional could be from education, health or the voluntary sector, early help, or any other service involved.

Timeliness

Once the decision is taken that CSC are no longer involved with the family, a step-down meeting should be coordinated by the lead social worker / team. This may align with the formal Child in Need review processes, if the family has remained open, or should be organised to coincide with the conclusion of a single assessment. It is very important that any timing of a step-down meeting considers the need for smooth communication and transitions between services, to allow for a transfer to or creation of a plan for the team around the family. The venue / time chosen for the meeting should be in line with the families wishes.

Child Protection Procedures

Safeguarding children from the risk of harm is everyone's responsibility.

To report a concern in B&NES:

www.proceduresonline.com/swcpp/banes/p_report_concerns.html

Remember to save this link as a favourite so that you can access it quickly.

South West Child Protection Procedures: www.proceduresonline.com/swcpp/

The [neglect toolkit](#) aims to offer a 'Structured Judgement Approach' to identify child neglect and the tools to work with partners and families to improve children's outcomes. It is available [via the](#) Early Help HUB page.

[Information sharing advice](#): B&NES Children, Young People & Families' Services guide to information sharing for parents/carers is available [on the Early Help HUB page](#).

Chronology

A chronology should inform case discussion and key decision making by making it evidence based e.g., current decision making by managers may prioritise verbal

presentation of information that could have gaps. Chronology guidance and an example template are available [on the Early Help HUB page](#).

Sexual Exploitation Screening Tool

This Tool has been developed to enable the identification of children and young people at risk of sexual exploitation and is available [on the Early Help HUB page](#).

DASH Risk Checklist

The purpose of the DASH risk checklist is to give a consistent and simple tool for practitioners who work with adult survivors of domestic abuse to help them identify those who are at high risk of harm and whose cases should be referred to a MARAC meeting to manage their risk. It is available [on the Early Help HUB page](#).

Information Sharing

Information sharing is key to delivering better, more efficient services that are co-ordinated around the needs of children, young people and families. Practitioners need to share information as part of their daily practice, so it's important to understand when, why and how to share information. The government's [information sharing advice for safeguarding practitioners](#) and the Information Commissioner's Office [data sharing checklist](#) support good practice in information sharing by offering clarity on when and how information can be shared legally and professionally.

Quality Assurance, Monitoring and Evaluation

Early Help Quality Assurance Framework

The Early Help Quality Assurance Framework describes how B&NES measures the quality of Early Help support provided and includes assessments used by single agencies, support plans and multi-agency Early Help Assessments (which replaced the national common assessment framework (CAF) as of September 2018). The Early Help Quality Assurance Framework should be used to guide services and further embed use of the quality assurance of practice within services which regularly undertake assessments, develop support plans to meet outcomes and inform and provide interventions and support. This is important to help to improve sustainable outcomes for children, young people and families in B&NES. It is available [on the Early Help HUB page](#).

An Early Help case study template is available [on the Early Help HUB page](#). We would ask that you complete a closed case study for all cases, as good practice so we can understand why families close mid-way through a process to learn for this.

Example case studies are available in the B&NES Early Help and Intervention Strategy 2021- 2025, which is available [on the Early Help HUB page](#).

Early Help Assessments Quality Assurance process

This includes the Councils Early Help Assessment and all agencies multi assessments.

These are carried out with children, young people and parents in a range of services. Some of the assessments will be specialist e.g., substance misuse assessment, however all assessments should adhere to the following principles:

- Be timely, transparent and proportionate to the needs of individual children and their families at that time.
- The views, voice and experience of children, young people and their families will be central in the assessment process.
- Be informed by discussions with children, young people, their families and other professionals involved with the family.
- Be informed by other professional assessments.
- Include strengths and protective factors within the family as well as concerns.
- The strength and protective factors should identify the skills the child, young person, parent/carer of family has, and these skills should be used in the plan to improve the areas of concern.
- Requirement to be Analytical and inform the plan of work with the family.

Early Help assessments will be reviewed for quality within the case audit process.

Example Framework for Managers to Check Assessments Against Quality Standards

An example tool is one that the B&NES Council Children & Families Team has developed for managers to check assessments as part of their quality assurance. This is available [on the Early Help HUB page](#)

Deep Dive Audit Tool

This tool can be used with Managers and Practitioners to quality assess casework once completed. It is available [on the Early Help HUB page](#).

Quality Standards for Assessment of Parenting: These standards are commended to all staff to promote high-quality assessment of parenting capacity, either in 'stand-alone' parenting assessments or as part of any wider assessment of children, young people and/or families. They can be used as a checklist by practitioners, managers or auditors. The document is available [on the Early Help HUB page](#).

Quality Standards for Early Help Assessments

1. Informed consent has been obtained;
2. There is evidence of appropriate and quality involvement of the children/young people/parent/carers in the process;
3. The assessment is holistic and identifies:
 - a. Unmet needs, concerns and risks;
 - b. Strengths – protective factors and resilience;
4. The impact of age, disability, ethnicity, faith/belief, gender identity, language, race and sexual orientation has been considered;
5. There is evidence that information from other agencies has contributed to the assessment;
6. The assessment is factual, and evidence based;
7. The assessment is logical, concise and free from jargon;
8. The assessment has considered the wider family context, family history and culture including any adverse childhood experiences and their impact on the children/young people;
9. The assessment has identified any potential safeguarding concerns and evidences how professionals and the family are managing these concerns and/or appropriate escalations have been made to statutory services;
10. The information has been critically analysed and evaluated and there is a summary of findings;
11. Issues identified are accurately carried forward into an outcomes-focused plan;
12. A Lead Professional has been identified;
13. There is evidence of management oversight and/or sign off.

Complaints and Compliments

Sometimes, families might feel they have not received adequate services. If so, please discuss these complaints with them and contact the Early Help Manager to agree how their concerns can be addressed. Complaints often come from miscommunication or misunderstanding. They can usually be resolved in an informal meeting with the main parties. Make sure that you have a clearly accessible and well communicated complaints policy, should families want to move to the next stage of their complaint.

Equally families often welcome the opportunity to be able to feedback on their experience of the service which is often useful in planning future service delivery and providing the opportunity to consider what works when engaging and supporting children, young people and families. See the Bright Start Customer Feedback Policy, as an example [on the Early Help HUB page](#).

Training and Development

Training relating to early help is available via the B&NES “learning zone”:
<https://bathnes.learningpool.com/course/index.php?categoryid=51>

Making Every Contact Count training provides the skills to work in a different way, encouraging brief interventions that can lead to longer term change. Forthcoming training dates: <https://www.bathnes.gov.uk/services/public-health/public-health-training/making-every-contact-count>

Managers’ Section

Management Oversight

Management oversight should be viewed as a shared process between the lead practitioner (LP) and Line Manager, particularly around decision-making, change of circumstances, escalation of risk or safeguarding. Whilst the primary responsibility is for the line manager to oversee the work of the LP, the nature of early help work often means that monthly supervision cannot be the only avenue for management consultation. Decisions stemming from the following should also be recorded as management oversight by the line manager or the LP:

- supervision
- group supervision (e.g., peer circles)
- team meetings
- multi-agency panel decisions
- discussions at desk spaces, where a manager has agreed a particular way forward or taken a decision
- duty/triage manager consultations; and
- decisions taken at *Team Around the Family* meeting.

Effective case recording is strengthened when either the line manager or the LP takes responsibility for writing up the discussion, where a decision has been made. Management oversight is not primarily about the manager recording decisions, it is about evidencing that both manager and LP are communicating and are taking decisions jointly. A template form is available via the [Skills for Care website](#).

Example framework for managers to Check Assessments Against Quality Standards

An example tool is one that the B&NES Council Children & Families Team has developed for managers to check assessments as part of their quality assurance. This is available [on the Early Help HUB page](#).

Further Resources

Early Help App

The B&NES Early Help App provides information, tools and links to a range of resources that can support volunteers and paid workers to find and access the Early Help offer in the area. Get the app via Google Play or The Apple Store.



B&NES Early Help App
Download the "B&NES Early Help App" for free from the Apple or Android store (only compatible with Apple products of model iOS 8.0 or later)

The banner features a collage of images: a man reading to children, a woman holding a baby, a pregnant woman, and children on bicycles. At the bottom right, there are logos for the App Store and Google Play.

Early Help Hub Pages

[The Early Help Hub](#) is a repository of documents and templates to support you in your work around early help.

[B&NES EH webpage](#) Information on what early help is, how someone can get an assessment and some of the services available: <https://beta.bathnes.gov.uk/get-early-help>

B&NES Early Help and Intervention Strategy

This is the all age Early Help and Intervention Strategy for B&NES and is available at <https://thehub.bathnes.gov.uk/Page/23702>

Your Feedback

We would value your feedback on this toolkit. How can it be improved? What additional resources might you or colleagues like to be included? Please go to the survey section of the Early Help App to comment. Thank you.

Glossary of Terms and Acronyms

ACE	Adverse Childhood Experience
CIN	Child In Need
Connecting Families	Support eligible families to make positive changes; to get in to work, education or training and improve parenting skills; to receive specialist advice if needed (such as to tackle health, drug and alcohol issues); to keep your family safe and be successful members of your community.
CP	Child Protection Plan
CSC	Children's Social Care
CSE	Child Sexual Exploitation
DASH	Domestic Abuse, Stalking, Harassment and Honour based violence Assessment Tool.
Early Help	Giving people the right help, at the right time, by the right service.
EHA	Early Help Assessment
EHAP	Early Help Allocation Panel: meets every two weeks to ensure that the child or young person receives timely support from the most appropriate service.
LP	Lead Professional
MARAC	Multi-agency risk assessment conference: a meeting where information is shared on the highest risk domestic abuse cases between representatives of local police, probation, health, child

	protection, housing practitioners, Independent Domestic Violence Advisors (IDVAs) and other specialists from the statutory and voluntary sectors.
MARF	Multi Agency Referral Form
NEET	Not in Education, Employment or Training
Practitioner	Professional working directly with the family.
SEND	Special Educational Needs & Disability
Signs of Safety	An internationally recognised strengths-based approach to working with families.
TAC/TAF	Team Around the Child/Young Person/Family - this is a group of practitioners working alongside a family to support them in making and sustaining positive change.
Think Family/Whole Family Approach	A nationally recognised approach, including the whole family rather than only engaging with one or two family members.
Threshold	The point at which a child or young person becomes eligible to access a particular level of service.
Universal Services	Those services available to everyone.

