

F. This is what I would like to achieve and I think the following tasks and people could help (include friends, family, other significant people in your community and workers)

What type of accommodation and / or support do you feel you need? Would mediation help you to build relationships and / or return home? If not, why?

Is there a certain area you would prefer to be? Would you like someone to contact other services who may be able to help you?

G. If these needs are not met, what may happen? What will the impact of this be on you and your family (what are you worried about?) Please include here what the professional's views are

If the needs you have identified are not met, what are you worried will happen to this child? Think about whether the child will be safe if the situation remains the same as you assess at the end of the EHA.

Will their basic needs be met? For example is there suitable accommodation, appropriate food, clothing and sufficient physical and emotional care, to meet developmental milestones?

What is your recommended action for the young person to take?

H. Is there anything else you think would be helpful for us to know?

If you are using the EHA to request support from another service, you may need to add additional information here in connection to the service criteria. Please check the children and young people's services section on the Professional Choices website.

<http://professionalchoices.org.uk/children-young-peoples-services/>

Please state the source of any information recorded here (for example direct observation, agency record), you may like to think about.

Please indicate if the young person is priority need under homeless legislation (check with housing advice if needed) and if they require supported accommodation and are not just homeless.

What do they do (employment / interests)? - Are parents or carers in work and if so what do they do? Have current employment circumstances led to financial issues for the family? Do the family have significant hobbies or interests? What is the impact of this one the Young Person who is the subject of the EHA?

Are there any known risks in the family such as past or current: Child Protection concerns / Domestic Abuse / Drug or Alcohol issues. Who do they relate to?

Are there any cultural issues such as religion not already covered?

I. What level of needs do you now feel this family has according to the Effective Support for Children and Families in Somerset—for Assessment and Services guidance? Why? This should be completed by the professional working with this young person.

Refer back to the Effective Support for Children and Families in Somerset—for Assessment and Services Guidance. After looking at the document, record the current level of need for this Young Person and their family here, and give reasons for your decision.

J. Expected date of the first Team Around the Child / Young Person (TAC) Meeting (call a TAC meeting to agree who will do what, this should be done ASAP and within a maximum of 4 weeks of the date of this EHA), or if not required the next follow up meeting with the young person / child and their family, please include the time and venue)

Please include the next date of the P2i Service and Allocation Panel that you expect/wish for this young person to be discussed at.



Specific Guidance to support you with completing the Young Person Led Early Help Assessment for P2i

(For further support with completing the rest of the Early Help Assessment, please use the Practitioner Guidance).

You can find this on the Professional Choices website:

<http://professionalchoices.org.uk/eha/>



Section 1. Initial Details

Please include their Age in the Date of Birth box.

If they will not disclose an address, please do not write NFA or No Fixed Abode. They must have a 'care of' address where post goes or where their belongings are stored. If they are sleeping in a vehicle then the address where it is parked would be sufficient. If they really do not have an address then please use C/O the Area Hub they presented to or have a local connection to.

Section 2. Person Undertaking this Assessment

Please include contact information because you may be called upon for further information at panel.

Section 3. Personal Data: Consent to the completion of an Early Help Assessment

Consent must be gained from the young person to complete and EHA. If they refuse to give consent then you cannot continue with the assessment and they will not be given housing support through P2i.

Section 4. Children and Young People in your family

This is useful to complete to identify any other young people/siblings who may be at risk of homelessness or have issues within the home.

Section 5. Adults in your home and adults who do not live with you but are important to you

This is paramount because it may identify family/friends/neighbours that the young person may be able to live with, preventing their homelessness. Contact numbers for these adults is essential so they can be contacted to discuss the reasons they may be asking them to leave and/or to find out if they can return to live with them either on a temporary or permanent basis.



Questions You Should Ask the Young Person...

A. What is important to you?

Why are you here today?

Where are you living and how long can you stay there? Are you sleeping rough or sofa surfing? What is your address history for the last 5 years?

Is your current accommodation in a state of disrepair? Have you been asked to leave or served a formal notice or eviction warrant?

Could you safely stay at home/current accommodation if you had mediation support with your family/friends/landlord?

B. What do you like about your life; what is working well; and, what needs to change?

What has led to you being homeless?

Do you use any illicit substances? If so what and how often/how much? Are you seeking help from any agencies in respect of this use? Do you want to change how much you use?

C. What do the adults listed in Section 5 say is working well; and what needs to change?

What is your family situation? Is there any risk of violence or abuse at home?

What did parent/family/friend say when a practitioner spoke to them on the phone?

What did other services say when a practitioner followed up with these? (e.g. Police/YMCA/Landlord).

D. What is your current support network (include friends, family, people you know in your community and workers)?

What support are you getting from other services? Who, What, How Long?

Do you have wider family links? (Parents / Siblings / Grandparents / Auntie / Uncle / Cousins / Friends).

Are you able to stay with these? Do they support you financially or emotionally? Would anyone stand as a guarantor if you needed alternative accommodation?

Do you have a local link? (lived in the area for at least 6 out of the last 12 months, or 3 out of the last 5 years, parent/sibling lived here at least 5 years, attend education, training or employment locally).

E. What can you manage yourself and what do you need support with?

Do you have any arrears or debts? Can you manage financially or do you need support? Do you have any income? Are you claiming benefits?

Do you have any medical conditions or disabilities? Do you take any medication?

Do you have mental health problems? Do you access GP / Dentist / CAMHS / AMH? Do you have a history of self-harm?

Do you have any literacy or numeracy difficulties? Did you get support at school / college?

Are you pregnant or do you have any dependent children? When are you due? Have you been in care or left care?

Are you, or have you been support by Youth Offending Team or Probation? Have you been in a secure unit or prison?

Do you have difficulties managing your anger? Do you have Substance Misuse problems?

Do you have relationship issues? Are you at risk of violence or harassment?