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| **Family Name:** |  | **Date toolkit completed:** |  |
| **Lead Professional:** |  | **Organisation:** |  |

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| --- | --- | --- | --- |
| **House Name/No.** |  | | |
| **Street** |  | | |
| **City** |  | **Postcode** |  |

**Who's in our family?**

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| --- | --- | --- | --- | --- |
| **Name** | **Surname** | **Gender** | **DOB** | **Relationship** |
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| **Toolkit guidance** | |
| This *Toolkit* is for 'Stronger Futures' information gathering purposes only and should not replace the completion of a whole family assessment; it should be used in conjunction with a completed request for an Education Health and Care Needs Assessment.  **Once completed please upload this toolkit to SSE alongside the request for EHC Needs Assessment and send a copy of this toolkit to:**  [earlyhelp&troubledfamiliesdatateam@portsmouthcc.gcsx.gov.uk](mailto:earlyhelp&troubledfamiliesdatateam@portsmouthcc.gcsx.gov.uk) | |
| Name and date of assessment |  |
| Name of child |  |

**Family consent and privacy**

Your family's information will be used to carry out the Stronger Futures Checklist. To complete this process we may gather and share information with services who are working with you, please state below the organisations that you are happy for us to gather and share information with. This information may be shared to evidence progress that your family have made against Stronger Futures Outcomes and may be shared with government departments.

|  |  |  |  |
| --- | --- | --- | --- |
| Portsmouth City Council |  | Children's school, nursery or college |  |
| NHS Trust Health services/GP |  | Housing services and providers |  |
| Children, Family and education services |  | Hampshire Constabulary |  |
| Portsmouth's Multi-Agency Safeguarding Hub |  | Probation services |  |
| Domestic abuse services |  | Government departments |  |
| Adult mental health services |  | Other |  |
| Adult substance misuse services |  | **Consent to all** |  |

**Privacy notice**

The Council respects your family's privacy and will only use your information where it is lawful. Your information will be kept securely and for no longer than is necessary.The Council and partner organisations have a duty to share information with one another where they have concerns that an infant, child or young person has been harmed or abused, or is at risk of harm or abuse. We may be required by law to disclose your personal information without your consent for the purposes of preventing or detecting crime/fraud or apprehending and prosecuting offenders. In these circumstances we do not need consent to share information.

To find out more about how the Council uses personal information, see the [Data Protection Privacy Notice](https://www.portsmouth.gov.uk/ext/the-council/data-protection-privacy-notice) on the Council's website or contact [data.protection@portsmouthcc.gov.uk](mailto:data.protection@portsmouthcc.gov.uk) (telephone 023 9268 8482) To request a copy of your records or to ask the Council to stop using your information, contact: [data.protection@portsmouthcc.gov.uk](mailto:data.protection@portsmouthcc.gov.uk)

**Consent**

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| ☐ **I Consent to sharing our family's information for Stronger Futures programme (PLEASE TICK)**  I understand that selected information about my family and the Early Help Services they receive will also be used by the Council, partner organisations in Portsmouth and Central Government to plan and evaluate Early Help Services for families. |

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| **Name of parent/carer** | **Signature** | **Date** |
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| **Name of family member - Over 12** | **Signature** | **Date** |
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|  |  |  |
| **Name of professional** | **Signature** | **Date** |
|  |  |  |

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| **1.Families are reducing offending and anti-social behaviour** | | | | **Who? (e.g. mum, Billy)** |
| *In the last 12 months:* | | | | |
| Have any of the children been in trouble with the police? | | Yes | No |  |
| Have any of the adults or children been involved or sanctioned for anti-social behaviour? | | Yes | No |  |
| Is there a young person at risk of offending behaviour including gang activity, drugs running and radicalisation? | | Yes | No |  |
| Is there an adult serving a prison sentence? | | Yes | No |  |
| Are any of the adults serving a community order or suspended sentence? | | Yes | No |  |
| Are there any other issues relating to crime and/or anti-social behaviour that are concerning you or the family? | | Yes | No |  |
| **Based on these factors, what would you score Crime and ASB overall?** | | | | |
| Issue not present/outcome  achieved | Making progress | Needs improvement | | Area of concern |
| **Further information relating to crime and ASB:** | | | | **Location of evidence** |
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| **2. Children are attending school and parents are supporting their learning** | | | | | **Who? (e.g. mum, Billy)** | |
| *Over the last 3 consecutive terms, have any of the children:* | | | | | | |
| Been persistently absent from school? Below 90% attendance | | Yes | | No |  | |
| Been chronically absent from school? Below 50% attendance | | Yes | | No |  | |
| Been permanently excluded? | | Yes | | No |  | |
| Received a fixed term exclusion of 3 days or more? | | Yes | | No |  | |
| Child with social, emotional and behavioural difficulties registered in an alternative education provision? | | Yes | | No |  | |
| Is there a child with an EHCP in the family? | | Yes | | No |  | |
| Child is not registered with an early years setting? | | Yes | | No |  | |
| Are the family eligible for 2 Year funding? | | Yes | | No |  | |
| Have they taken it up? | | Yes | | No |  | |
| Are there any other education-related issues that concern you or the family | | Yes | | No |  | |
| **Based on these factors, what would you score education overall?** | | | | | | |
| Issue not present/outcome  achieved | Making progress | | Needs improvement | | | Area of concern |
| **Further information relating to education:** | | | | | | **Location of evidence** |
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| **3.Children are safe from harm and well-parented** | | | | | **Who? (e.g. mum, Billy)** | |
| The family are Identified as needing an 'Early Help' assessment? | | | Yes | No |  | |
| The family have had safeguarding concerns, recently (within 6 months) stepped down from a Child in Need or Child Protection plan? | | | Yes | No |  | |
| Is there a need to improve parenting capacity? | | | Yes | No |  | |
| Is there a child with SEN within the family? | | | Yes | No |  | |
| Are the family managing the SEN and coping well? | | | Yes | No |  | |
| Is there a child with an EHCP in the family? | | | Yes | No |  | |
| Is there a child identified at low, medium or high risk of Child Sexual Exploitation (CSE)? | | | Yes | No |  | |
| **Based on these factors, what would you score parenting overall?** | | | | | | |
| Issue not present/outcome  achieved | Making progress | Needs improvement | | | | Area of concern |
| **Further information relating to parenting:** | | | | | | **Location of evidence** |
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| **4. Adults are working, young people are in education, employment or training and families are managing finances** | | | | | **Who? (e.g. mum, Billy)** | |
| Are any of the parents/carers in the household in receipt of out of work benefits *or* Universal credit - work related conditions? | | | Yes | No |  | |
| Is there a young person (post-16) who is not in education, employment or training (NEET)? | | | Yes | No |  | |
| Is there a young person of school age who is identified as 'at risk' of NEET? | | | Yes | No |  | |
| Does the family have significant rent arrears? | | | Yes | No | Approx. amount £ | |
| Are the family at risk of eviction? | | | Yes | No |  | |
| Are family finances/debts impacting on ability to provide basic care for adults and children? | | | Yes | No | Approx. amount £ | |
| Does the family have appropriate support to manage debt? | | | Yes | No |  | |
| Are there any other Housing, employment, training or money issues that concern you or the family? | | | Yes | No |  | |
| **Based on these factors, what would you score employment and finances overall?** | | | | | | |
| Issue not present/outcome  achieved | Making progress | Needs improvement | | | | Area of concern |
| **Further information relating to employment and finances:** | | | | | | **Location of evidence** |
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| **5. Families are supported around domestic abuse** | | | | | **Who? (e.g. mum, Billy)** | |
| Are any family members experiencing domestic abuse (including honour based violence)? | | | Yes | No |  | |
| Has there been domestic abuse in the recent past that is still impacting on the family? | | | Yes | No |  | |
| Has the household been subject to at least one police call out for domestic abuse in the last 12 months? | | | Yes | No |  | |
| Are any of the family members accessing support from domestic abuse services (within the past 12 months)? | | | Yes | No |  | |
| Are any of the young people (16+) or adults in the household known to be perpetrators of domestic abuse? | | | Yes | No |  | |
| Have any family members been deemed at 'High Risk' of harm and been known to MARAC in the previous 2 months? | | | Yes | No |  | |
| **Based on these factors, what would you score domestic abuse overall?** | | | | | | |
| Issue not present/outcome  achieved | Making progress | Needs improvement | | | | Area of concern |
| **Further information relating to domestic abuse:** | | | | | | **Location of evidence** |
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| **6. Children and families are healthy** | | | | | **Who? (e.g. mum, Billy)** | |
| Is there a new mother or expectant mother at risk of poor health outcomes (including mental and physical health)? | | | Yes | No |  | |
| Is there a child with developmental delay identified at the 2-2.5 year old ages and stages check? | | | Yes | No |  | |
| Is there a child or adult with identified mental health problems? | | | Yes | No |  | |
| Is there a child or adult with identified substance misuse? | | | Yes | No |  | |
| Are there family members with a long term health condition which impacts on family functioning? | | | Yes | No |  | |
| Are the family struggling to manage health needs, including missed appointments? | | | Yes | No |  | |
| Are the children registered with a GP and dentist and attending regular check-ups? | | | Yes | No |  | |
| **Based on these factors, what would you score health overall?** | | | | | | |
| Issue not present/outcome  achieved | Making progress | Needs improvement | | | | Area of concern |
| **Further information relating to health:** | | | | | | **Location of evidence** |
|  | | | | | |  |