

Lead Practitioner Guidance



**Multiagency Working to Support Children
and Families**

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Introduction

This guidance is for any practitioner who wants to find out more about the Lead Practitioner role, is in the process of taking on this pivotal function or is currently undertaking this role to support a family. This guidance forms part of a series of material that will support practitioners in their role. The other guidance documents include:

- Early Help Record Guidance – Completing an assessment and plan for a family
- Team around the Family Guidance

These documents are located within the Early Help Policy Library on the Social Care Academy LMS platform - newhamsca.event-booking.org.uk

The term 'Lead Practitioner' will be referred to throughout this document in line with Working Together to Safeguard Children 2023 guidance, to describe professionals working across all Levels from community early help, targeted early help, child in need and child protection. In addition to this, Newham families were asked whether they preferred the term 'Lead Professional' or 'Lead Practitioner', to describe the named person that coordinates support on behalf of a family. Feedback from these consultation sessions clearly showed that parents/carers preferred the generic term 'Lead Practitioner', as reducing perceived power imbalances and promoting partnership working alongside families.

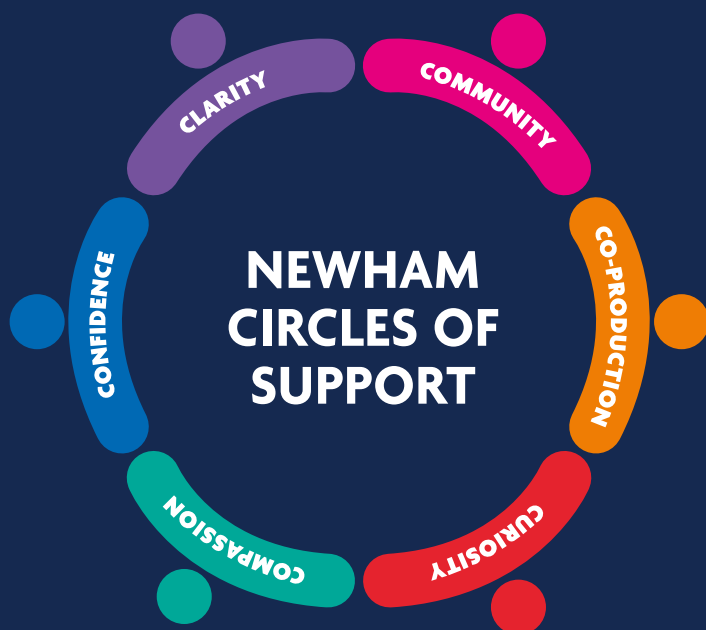
In Newham we use our 'Circle of Support' practice model to support and work collaboratively with our families. The Lead practitioner will be guided by the key principles of the Circles of Support practice model taking a systemic, relational and restorative approach in conversations with professionals and families:

- Drawing on family shared decision making principles through listening to the lived experience of children and family members and putting them at the centre of our interventions.
- Approaching with curiosity understanding the relationships and context that frame family life
- Having a clear purpose, plan and focus to obtain a clear view of the outcomes we seek

Our aim is for all professionals meeting across Early Help to adapt the framework used for Circle of Support meetings. Circles of Support takes the premise that everyone in the network is skilled and has something to offer that might be able to make the worry smaller.

In Circles of Support meetings people are encouraged to hold appreciative positions. As well as generating actions, there is also a focus on reflecting on the dilemmas we are facing and thinking about things from multiple perspectives.

The Lead Practitioner will be supported by the Clinical Team through the Early Help Practitioner Forum (please see details below) to facilitate the meetings using the Circles of Support framework. There will also be the option for Lead Practitioners to be joined by a systemic therapist to facilitate the meetings, if required. Further training on the Circles of Support meetings will be offered via the [Social Care Academy](#) platform.



What is a Lead Practitioner?

The Lead Practitioner is a named professional who will take the lead with co-ordinating support when a child and/or family require interventions and support from more than one professional/service.

The person who takes on the role of Lead Practitioner will vary according to the specific needs of the child and family. Decisions about who should be the lead practitioner should be taken on a case-by-case basis and should be agreed with the child or young person and their family.

Many practitioners in the professional network supporting the family can take on the Lead Practitioner role, as the skills, competence and knowledge required to carry it out are similar regardless of professional background or role.

In some circumstance the Lead Practitioner may need to be allocated in line with statutory guidance where child protection processes are in place i.e. Working Together to Safeguard Children 2023. Once the referral has been accepted by local authority children's social care, the lead practitioner role falls to a social worker.

Key principles:

- The Lead Practitioner is the named professional who has been identified as the person who will be the family's main point of contact throughout the process.
- The family should be offered the opportunity to choose their Lead Practitioner.
- They are normally someone the family already knows, trusts and has a good relationship with.

Lead Practitioners functions:

They will ensure that the family has given explicit consent for early help involvement



They will arrange and chair the Team around the Family meeting



They will support the family to engage and share their views within the Team around the Family process



They will provide the family with advice, support and guidance throughout the process.



They will help identify and add other agencies to the support network as part of the Team around the Family



They will work closely with the other agencies involved to organise the assessment, develop the plan and coordinate the support needed





Why are Lead Practitioners needed?

Multi-agency working is key to effective safeguarding and child protection (Sidebotham et al, 2016) and it's clear in [Keeping Children Safe in Education \(KCSIE\) \(DfE, 2023\)](#) that "No single practitioner can have a full picture of a child's needs and circumstances. If children and families are to receive the right help at the right time, everyone who comes into contact with them has a role to play in identifying concerns, sharing information, and taking prompt action". Case reviews in each of the UK nations emphasise the importance of information sharing and collaboration between agencies so that professionals can fully understand any risks a child may be exposed to and take appropriate action to keep them safe. ([NSPCC, 2023](#))

Children and their families will access a range of services throughout a child's life. It's vital that practitioners work together to gain a full overview of a child's situation and have a co-ordinated approach to support. A Lead Practitioner will advocate for the child and their family and take the lead to coordinate provision, acting as a single point of contact for children, young people, practitioners and family members, bringing help to them and minimising the need for them to tell their story several times.

Good communication is central to effective multi-agency working. The Lead Practitioner is needed to promote teamwork between agencies and with the child or young person and family. Whilst they are not responsible or accountable for services delivered by other agencies, the Lead Practitioner is able to collate information from all agencies and share it with the family to avoid families being overwhelmed. They are also needed to support the processes that make it as easy as possible for first line practitioners to work together and build trusting relationships with children, young people and families.

What is the role of the Lead Practitioner?

The role of the Lead Practitioner is to coordinate support provision and act as a single point of contact for a child, young person and their family when a range of services are involved and an integrated response is required. The person taking on the role of the Lead Practitioner will vary according to the specific needs of the child and family. This person would be responsible for co-ordinating the actions identified in the assessment process as part of a Team around the Family approach, whilst maintaining communication with the family and other professionals involved.

The role of a Lead Practitioner is pivotal to a child and their family who require support from more than one service.

Key statutory guidance¹ provides an indication of the function of the role including:-

Building a positive relationship with the family and acting as a single point of contact for them and other professionals involved in supporting the family



Assessing the family's needs using a strength-based approach and completing the Early Help Record Assessment and Plan



Co-ordinating the support that families might benefit from, ensuring a focus on the improved outcomes for children and young people



Ensuring where possible, that the children and their family understand what is happening at all times and support them to be involved with decisions being made regarding their care



Promoting teamwork across agencies to ensure an improved agreed outcome for children and their families



The Lead Practitioner will review the plan periodically with the family and other support agencies until the situation has improved and/or the family is empowered and no longer requires a Lead Practitioner to work alongside them.

¹ [Working Together to Safeguard Children - 2023](#)



Change of Lead Practitioner

There are a number of circumstances where the named Lead Practitioner may change:

- When the child and family's level of needs change
- When the remaining needs can be met adequately by a single agency
- When a Lead Practitioner has a change of role or leaves an organisation or setting

In all cases, a change of Lead Practitioner should be planned well in advance and communicated to the family and the wider support network. It is the responsibility of the Lead Practitioner who is handing over responsibility, to ensure that all parties involved are informed of the changes as part of a Team around the Family, Child in Need (CIN)

or Child Protection (CP) meeting. Please refer to Newham's Help and Support Pathways for Children and Families that outlines the process to support a family to transition from statutory involvement to early help support.

Once a family has been stepped across from social care, the Lead Practitioner will review the early help actions identified by the Social Worker on a six weekly interval basis as part of a Team around the Family meeting. When it is decided that outcomes for the child and family have improved or the needs have been successfully met, the family will be encouraged to continue to receive support through universal services.

Who can be a Lead Practitioner?

The role of the Lead Practitioner can be taken on by different types of practitioners in the children's workforce as the skills, competence and knowledge required to carry out the role are similar regardless of professional background or job. The role is defined by the functions and skills undertaken or the level of the family's needs.

The person who takes on the role of a Lead Practitioner will usually be someone who is already supporting the family or is part of a network of support. In some cases, the Lead Practitioner could be allocated a family to support or they may already have an existing positive working relationship with the family.

Lead Practitioners could include but is not limited to roles such as:

Midwife



Health Visitor



School Nurse



Social Worker



Teacher or a
member of the
pastoral team



Early Years Worker



Attendance Team



Housing Officer



Family Support
Worker



SENCo



Youth Justice
Worker



A practitioner
from a Voluntary,
Community or faith
sector



It is recommended that children, young people and families with additional needs have co-ordinated support from a range of practitioners across the Level of need. However, for children receiving statutory involvement and there are child protection concerns, the Lead Practitioner would typically be the Social Worker.

How is the Lead Practitioner Identified?

The Lead Practitioner could be identified through the following means:

1. By being the first person that identifies that a child, young person and their family could benefit from support.
2. During a Team around the Family (TAF) meeting as someone that has the best relationship with the family. This person would be chosen after a multiagency discussion.
3. The family may select a person to act as the Lead Practitioner on their behalf.
4. The family's needs are aligned to the role and service of the identified Lead Practitioner.

How might other professionals support the Lead Practitioner in this role?

Children, young people and families are supported most effectively when services are planned and delivered in a co-ordinated way, to offer integrated support across the continuum of needs and services. Multiagency partnership working is key to supporting children as soon as a need arises. They play a critical role in offering their input and the expertise of their agency to provide a holistic picture of the child and family's needs to inform assessments, reviews, interventions and support.

Keeping Children Safe in Education (2023) requires that professionals work together to help and protect the welfare of children as soon as a need is identified. No single practitioner can have full knowledge of a child's needs and circumstances. The Lead Practitioner ensures that everyone working with children and their families understands the role they should play and the role of other practitioners. The Lead Practitioner should ensure practitioners are aware of and comply with published arrangements set out by local safeguarding partners.

The Lead Practitioner cannot work in isolation or hold the bulk of the responsibility for carrying out all tasks and actions identified. Through a Team around the Family (TAF) meeting, professionals from partner agencies work together to provide help and support through a coordinated plan in association with the family. It is essential that the other professionals involved with the child/family, support the Lead Practitioner in the exercise of their role, by such means as:

- agreeing to Chair, take and disseminate minutes of meetings
- ensuring that they attend meetings as required and that they provide information and follow through actions as agreed within their services.
- in the absence of the Lead Practitioner i.e. annual leave, short-term sickness and in exceptional circumstances, other supporting professionals should continue to support the functions of the Lead Practitioner where possible to ensure children, young people and family members receive seamless support.

What happens when professionals disagree?

There may be many reasons as to why professionals may disagree with an action or plan for a family. Examples of flashpoints for disagreements may include:

- Any one agency or professional feeling their concerns are being ignored or downgraded by another service.
- Any one agency or professional wanting more involvement from social care or other agencies.
- Any one agency or professional feeling resentful that a family is being stereotyped or labelled.
- Agencies or professionals being in conflict over the information sharing process in relation to the safety and welfare of the child.
- Having the feeling of doubt or lack of confidence to be named as the Lead Practitioner.
- A strong feeling that the situation cannot be managed at an early help level.
- Worries of not being heard or not having the ability to pull together other professionals.
- Professionals feeling unable to challenge the decisions of another agency, and unsure about trusting their own judgement
- Escalation procedures not being used, or a lack of confidence or knowledge around this.

As professionals, we should always be curious and conscious about the reason why we are involved and how the decisions we make, will have an impact. Every agency working with children, young people and families should feel confident to challenge decision making if it is for the benefit of the child, young person and their family.

Practitioners are expected to work together in accordance with local safeguarding arrangements to resolve any disputes. Professionals must have regard to statutory safeguarding guidance when attempting to resolve disputes. The Lead Practitioner will escalate unresolved disagreements in accordance with the Escalation Policy for Newham Safeguarding Partnership.

Disagreements over the handling of concerns raised for a child, young person and family can have a negative impact on building positive working relationships. This can also dim the ability to safeguard and promote the welfare of children. All agencies are responsible for ensuring that their staff are supported and know how to appropriately escalate if needed using the inter-agency escalation process. The same method can be used to challenge any actions/ disagreements about a child, young person and family.

In the event that there is any dispute between any parties, the agencies involved will look to resolve this locally before any escalation.

The [Escalation Policy for Newham Safeguarding Children Partnership](#) highlights the importance of escalating professional concerns where a difference of opinion creates a barrier to keeping a child safe. The Escalation Policy for Newham Safeguarding Children Partnership sets out clear routes to escalate concerns in a safe and non-threatening manner, and sets out five principles to abide by together with a staged resolution process.



What training and support is available for Lead Practitioners?

1. Supervision

To support Lead Practitioners to carry out the duties and functions of their roles effectively, individuals should have access to regular opportunities to discuss the families they are supporting through supervision within their agency and ongoing line management support. Where this is not possible to provide, steps could be taken to seek external supervision for an individual or group of staff that are undertaking this essential role.

2. Multiagency Safeguarding Hub (MASH) Outcome and Guidance

Where the MASH identifies that following a contact, a family might benefit from the support from a specific universal service or agency, the receiving agency will be notified via the Early Help Hub of the appropriate level of need and will be given some recommended actions to support the lead agency and/or practitioner to respond to the needs identified. MASH will obtain consent and discuss the intervention with the parents/carers so that they are clear of the potential support plan and agency that will be supported them. MASH will also clearly highlight the plan in their recommendations.

3. Early Help Workforce Development and Training for New Lead Practitioners

Lead Practitioners have access to professional development and training opportunities through the Council's Social Care Academy that provide first line staff a foundation knowledge of the Early Help Framework and Process and Newham's Model of Practice.

Core Competencies Training

The Early Help Core Competencies training modules are delivered virtually over 4 half-days.

EHPM	Core Competencies
Module 1	Introduction to Prevention Early Help and The Early Help Record • What is prevention and early help? • Explore how to use the Pathways to Help and Support • Early Help Framework and Core Principles • How to complete an Early Help Record using the assessment triangle • Voice of the Child • Whole Family Working
Module 2	Early Help Lead Practitioner Role and Function • The role of Early Help Lead Practitioner • Team Around the Family • Organising TAF's • Taking minutes • Professional meetings • Declining consent • Case closures
Module 3	Relationship Based Practice and Systemic Thinking • Attendees will explore what we mean by relationship based practice and how we can work with families to build on their existing strengths and capability • Attendees will be introduced to systemic principles and ways of understanding a family's narrative • Attendees will be introduced to the significance of genograms to understand a family's way of relating and patterns of behaviour
Module 4	Supporting Families that have recently received statutory intervention • Step Down to Universal Early Help • Progressing referrals to MASH • Responding to Step down requests • Expectations



Early Help Standalone Modules

Additional standalone modules are offered through Newham Safeguarding Children's Partnership and Newham Social Care Academy which can be accessed by clicking [here](#).

Social Welfare Alliance Training Programme

The Social Welfare Alliance is supporting all first line workers with information and referral pathways to support residents around income maximisation, immigration support and advice, early years, housing issues and much more.

The purpose of this is to enhance the skills you already have and facilitate you getting in touch with others having similar conversations across the borough.

The training sessions are for anyone in the borough who is regularly having conversations with residents who are presenting with a range of social welfare issues. It applies to any of the borough wide workforce who intercept residents via support services, and in a community, food, or clinical setting where there are underlying issues that are affecting their health and where speedy and efficient support and/or signposting will make an immediate difference.

The Social Welfare Alliance training programme can be accessed [here](#).



Newham Safeguarding Children's Partnership Training Programme

The Newham Safeguarding Children Partnership is committed to providing a comprehensive and effective training programme to all agencies within Newham. The specific aspects of multi-agency child protection training is a result of diverse training needs of individual, professional and organisational differences and the challenging nature of child protection.

Training people together can make a significant contribution to building mutually respectful and trusting relationships, which form the foundation of any partnership working; therefore the process and experience of the courses, are as important as the content. The NSCP Training Programme aims to increase participants' knowledge and skills in the field of Child Protection and Safeguarding in order to provide high quality services and improve outcomes for children, young people and their families and carers.

This training programme is for all staff from all agencies.

To view available courses, please click [here](#).



4. Early Help Lead Practitioner Support Panel (EHLSP)

The EHSC Panel is a fortnightly multiagency meeting on Monday from 10 – 12pm to discuss support for families that are being supported by a universal service. The panel ensures that families have access to the right support, from the right service at the right time to prevent escalation in need and entry to statutory services. Lead Practitioners can present families where the family plan is not progressing or they are feeling stuck to obtain support from professionals from different disciplines and agencies. The panel is coordinated by the Early Help Hub Manager and co-chaired by a School Designated Safeguarding Lead.

Schools and agencies that wish to discuss a family must have that families consent to share information and to receive support from proposed agencies. Advice and guidance can be given where consent has not been obtained although no family identifiers can be shared.

If you wish to present a family and consent has been obtained, please send the child's name, date of birth, address and a brief synopsis of the presenting needs to earlyhelppartnershipteam@newham.gov.uk. You will then receive a time slot to present and the joining instructions.



5. Early Help Practitioner Forum

The Early Help Practitioner Forum provides a community of practice for all Lead Practitioners working with children, young people and families within the community and universal settings. The main focus of these forums are:

1. To provide an opportunity for Lead Practitioners to come together to share good practice and build a supportive community network.
2. To create opportunities to build peer support network within the community.
3. To provide a reflective space for Lead Practitioners to think about families and relationship-based practice.
4. To provide Lead Practitioners the opportunity to share skills, expertise and knowledge.
5. To embed the shared Circles of Support Practice Model across the early help workforce.

The forum will operate on a monthly basis and will be co-facilitated by a member of the in-house clinical team and an Early Help staff member.

To book onto the next Local Practitioner Forum, click [here](#).

Frequently asked questions

Q1 Should an Early Help Record be completed if it is believed a child is suffering or at significant risk of harm?

No, if a child is suffering or is at risk of significant harm then make a referral to Newham MASH immediately. If you are unsure whether the Level has been met for significant harm and what the best course of action is, please contact your contact the MASH Consultation Line on 0203 373 4600. For out of hours emergency calls, please call the Emergency Duty Team on 020 8430 2000.

If you are a Practitioner and you are making a referral on behalf of a parent and the child does not have a social worker, you would need to complete an online referral form by using the link below:

[Request support or protection of a child](#)

If you are unable to get through to the MASH on the telephone number above in urgent matters, please send an email directly to: mash@newham.gov.uk

Q2 If a case is open to social care, do I need to do an Early Help Record?

If a case is open to social care, then the Social Worker will be the lead Practitioner for that case and a single assessment will be undertaken. If this is in place, then there is no need to complete an Early Help Record. However, you will need to contact the Social Worker to ensure that you remain involved in any further plans for the family. If you are unsure as to who the allocated social worker is, you can contact the Early Help Hub who will be able to provide you the relevant details.

Q3 What should I do once I have completed the initial Early Help Record?

The initial Early Help Record should be held by the agency that completed the assessment and the signed copy to be given to parents. It is good practice to also share copy with all members of the TAF meeting and save a copy on your internal safeguarding recording system.



Q4 Who should I complete an Early Help Record for?

Most children will not need an Early Help Record as their emerging needs can be met at universal level and may only require a simple intervention or response. An Early Help Record should be undertaken when a practitioner feels that a child or young person have additional needs that require single or multiagency co-ordinated support. This will help you understand who is currently supporting the child/ family and what actions are required to be taken.

Q5 What happens if consent is withdrawn after it has been given?

This would need to be recorded clearly on each agency's record-keeping mechanisms in respect of the child, young person and family.

Q6 What if a parent declines early help support?

The Early Help Record is a consent based process. If a family has declined early help involvement, this must be logged within your agency so that a record can be kept of any involvement. It may be that you will need to encourage engagement over a period of time. This may mean reaching out to another trusted agency working with the family. Continue to assess the impact of non-engagement on the child/ young person and if you feel that needs are increasing, speak with your Safeguarding Lead or a member of the Early Help Partnership Team for further assistance.

Q7 What if the Early Help Record plan isn't progressing well?

It is important to use the TAF meeting as an opportunity to review progress made against the actions stated within the Early Help Record and to have a discussion as to what may be impacting on progressing the plan.

Q8 What do I do if English isn't the family's first language?

Interpreters should be sought when completing an Early Help Record with a family when there is a language barrier. The Big Word website is a useful resource - www.bigword.com. If a parent or young person has literacy difficulties, you must also ensure they are able to understand the information being recorded.

Q9 As a practitioner who has completed an Early Help Record and identified required support from another agency, how do I know that a child/ family is progressing?

Every Early Help Record will have a lead practitioner assigned who will maintain contact with the family to establish how they feel they are progressing. The lead practitioner acts as a single point of contact with the family and for practitioners. The Early Help Record is a process and not a referral form. Therefore you may be



required to maintain some involvement with the family by attending regular Team around the Family meetings. These meetings provide an opportunity to share information and updates regarding work completed and progress made. Therefore attendance at meetings is paramount. If an agency cannot attend, it is important for them to send a report of their involvement so that this can be shared in the meeting to progress the needs of the family.

Q10 Where can I locate the Early Help Record and other guidance documents?

Please go to the Social Care Academy platform and click on 'The Practice Library' for resources and templates

Q11 Do minutes of meetings have to be recorded?

Individual agencies should take their own notes for their records. The lead Practitioner should complete the review section of the Early Help Record with the minutes of the meeting and ensure this is and shared across all agencies where consent has been given.



Q12 If all actions have been met and the Early Help Record is no longer required, what do I do?

Following agreement with the TAF representatives and with consent from the family, the Lead Practitioner should share a copy of the most updated Early Help Record with the family and Practitioners involved.

Q13 Is there a minimum number of Practitioners required, to pull together a TAF meeting?

No, initially it may just be you and the family working on the plan. Other agencies may be identified at the TAF meeting.

Q14 Can an Early Help Record be initiated without the consent of the family?

The Early Help Process is a voluntary process therefore parent and children (where appropriate) should be fully engaged in the process. Consent must be given.

Q15 How often should a TAF meeting take place?

This would differ in accordance to the complexities of the family situation. Initially, meeting will be frequent approximately every 6 weeks but as improvements are made, this can change to termly until the plan is no longer needed.

Q16 What happens if an agency identifies a safeguarding concern, whereby another agency is the lead practitioner?

A safeguarding referral will need to be followed according to their organisation safeguarding process, this should be done without any delay. The Lead Practitioner will then need to be informed.

Q17 Can an Early Help Record be completed if only one parent consents to support?

Yes, the consent of one parent is sufficient.

For children where the parents are separated, consent must be obtained from the parent who the child lives with.

However, each situation is different and careful consideration will need to be given to make sure the plan is effective.

Q18 What should I do if an Early Help Record is in place, but then an assessment is being initiated by a Social Worker. Should I continue to work from the Early Help Record?

No, if an assessment is being carried out by a social worker, you will need to cease the Early Help Record and share details of your involvement with the social worker.

Q19 What can I do if I do not feel confident to take on the role of the Practitioner lead.

Have a conversation with your line manager or contact the Early Help Team to talk through your worries and gain advice and support.

Q20 What can I do if I do not feel confident to take the lead on TAF meetings?

Help is at hand. The first point of support should be from your line manager. You could also seek support from another agency working with you as part of the plan to do this jointly.

Alternatively, you can also make contact with the Early Help Partnership Team for further guidance and support.

Q21 We do not have enough time to complete so many Early Help Records, how can I manage this?

All Practitioners have a duty to respond to the needs of a child/ young person when needs arise. If you feel that you do not have the capacity to complete the Early help Record for children who require it, you will need to have this discussion with your line manager to ensure that appropriate protected time is allocated to you to enable you to fulfil this.

Q22 If I initiate an Early Help Record does this mean that I am the lead Practitioner?

Initially, Yes. You will be the main point of contact for the child and family. However, following the first TAF meeting the family may choose for another agency to take the lead Practitioner role.



Q23 Is it still Early Help if a young person is 17 years old?

Yes, an Early help record can be completed for anyone age between 0-18 years. This can also be extended if there are specific needs eg: SEN

Q24 How many Early Help Records can a child have?

Children/ Young people should only have one plan at one time, but they can have multiple episodes of help and support during their childhood.

Q25 When would you cease being a Lead Practitioner?

You might cease being the Lead Practitioner if the family's level of needs changes, the family relocates outside of Newham or if the family declines or withdraws from further early help involvement.

