

Ben, aged 15, is an only child who lives with his mum, Kerry. Mum has a partner called Dave. Kerry is 36 and Dave is 23. Kerry is under the care of her GP for anxiety and depression.

Ben's father died by suicide when Ben was 14.

Ben has chronic eczema and is registered with the local GP who never sees him. Kerry's partner, Dave, is at a different GP practice to Ben and his mother. Dave has told his GP about the concerns he has about Kerry's behaviour towards him and Ben, and he is worried about Ben's behaviour.

Dave's GP contacts Ben and Kerry's GP to discuss his concerns.

He is worried about coercive control by Kerry over partner, Dave. Verbal altercations have been heard by neighbours and witnessed by Ben and it is unclear if Dave lives in the household.

Kerry has been to see her GP about her depression because she has been struggling recently. Her GP wanted to prescribe medication, but Kerry has declined to go down this route. However, she wanted help as she recognises the impact her depression is having on Ben. Consent was given for a referral to Children's Services about Ben with an Early Help Assessment to be undertaken.

The Children's Reception Team (CRT) have received the referral from Kerry's GP and have passed the case to you for an Early Help Assessment.

You visit the home address. No-one is in, but you have consent to start your Early Help Assessment.

Questions

Who else do you want to ask for information?

What would form part of your Early Help Assessment?

Which new services might you include for Ben or for one of the adults?

What are the short-term goals for Ben?

What are the longer-term goals for Ben?