

Barking and Dagenham

Children's Care and Support

Self-Evaluation, summer 2026



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Introduction

In Barking and Dagenham, our approach to supporting children and families is rooted in compassion, accountability, respect, empowerment and sharing through participation: This is our CARES practice model approach. These principles shape practice, support strong and enduring relationships, and drive timely, meaningful change so that children are safe and receive the right help at the right time.

We are proud of the outcomes that children and families have achieved over the last year. Early help has been strengthened, and families have told us about the positive impact this has had on their lives, building parenting skills and confidence. Children who need help or protection have received effective, timely support that is truly child centred. This keeps children safe, and we have seen low levels of repeat referrals and child protection plans, and more children staying with family or within their family networks.

Children in care are supported to thrive. We are leading the way through investment our Lifelong Links service, Mockingbird Hub model, in-house therapy team and wraparound education support. Through this, children stay in contact with wider networks, and report better emotional wellbeing and education outcomes than the national average.

Care leavers are supported into adulthood to achieve the outcomes that are important to them. We have worked in close partnership with care leavers to improve information and advice, wellbeing, housing and employment support. As a result, care leavers have more stable homes and have better education, employment and training outcomes than the national average.

In a borough with high deprivation and complex needs, we continue to face challenges that practitioners meet with tenacity, care and compassion. We have seen an increased number of children on a child protection plan, and numbers remain high. This partially reflects complex needs and the movement of families into the borough who were not previously known to us. It also underlines the need to continue to strengthen prevention and early help, which is progressing through our Families First Programme.

We have made progress against the areas for improvement identified in standard and focused Ofsted inspections over the last three years and continue to embed these so that all children experience consistently good social work practice. Addressing the use of unregistered provision is a top priority, with rigorous and robust processes that have been further strengthened in recent months as we move towards zero use.

We have also driven development in other areas. Children's journey through care and support - including strategy discussions and assessments - are more timely. The number of children coming into care via police protection has dropped. Practice leads drive excellent practice in relation to child sexual abuse, exploitation, domestic abuse and homeless young people. Underpinning this is a better resourced, more stable workforce who are committed to making a difference in children's lives; and strengthened performance reporting and quality assurance, which then drives continuous improvement.

Our Families First Partnership programme is progressing well, with coproduction at the heart of the design. Our priorities for the year ahead centre on the Families First Partnership programme, continuing to address use of unregistered provision and to ensure improvements and good practice are consistent across the service. We will finalise and implement reforms so that children are safe, with families that stay together, or with people who know and love them when they cannot stay with their parent/s. Support will be provided earlier and in a more integrated way. For children that need to be in care, we will continue to focus on timely permanence. Through our refreshed sufficiency strategy, we will prevent use of unregistered provision, ensure stronger placement matches and increased placement stability, helping children gain a sense of belonging. Alongside this, we remain committed to embedding excellence as standard across all areas of practice as our new CARE Academy develops.



About children and families in Barking and Dagenham



Children and families in Barking and Dagenham live in a proudly diverse outer London borough with a rich heritage. We are home to one of the fastest growing and youngest populations in the country - a source of great energy, creativity, and potential. We have the second highest birth rate in the country, and an estimated 14,200 children moved into the borough from elsewhere in the UK between 2021 and 2024. International migration is also significant. Barking and Dagenham has high levels of deprivation, with poverty influencing every aspect of residents’ lives. We have deep rooted inequalities that are worsened by the cost-of-living crisis. Practitioners work with energy, tenacity and compassion to support children and families who often have complex needs. The budget for children’s services has been protected against the worst of austerity; however, we continue to face significant financial challenges. It is against this backdrop that the Local Government Association recently concluded that we are ‘punching above our weight’ tackling deep-rooted challenges for children and families with passion and purpose.

Borough facts and figures:



18% population growth in Barking and Dagenham between 2011-21 – third highest in England



25% of all residents are aged under 16 – highest proportion in England



The birth rate is 66.7 per 1,000 residents – the second highest in the country



Ethnically diverse - 25% of under 18’s are of an Asian ethnic background, 30% of a Black ethnic background, 10% have mixed heritage.



98.5% schools are rated good or outstanding – as of August 2025



42% of children are estimated to live in poverty – the fifth highest in London



Highest reported domestic abuse offences and domestic violence with injury incidents in London



30% of households have at least one person identified as disabled – highest in London

Children getting care and support

A snapshot from June 2026 shows 2484 children open to children’s care and support. 662 children have a child in need plan, and 422 children have a child protection plan. The number of children with a child protection plan has steadily increased over the year and remains high: This is impacted by the high number of “new” families moving to the borough, complex needs and the need to continuously focus on prevention and early help.

402 children are in our care, and 344 care leavers are getting support. The number of children in care reduced by 10% in 2025-6 whilst the number of care leavers is steadily increasing as more young people choose to remain connected to services into adulthood. This reflects the strength of relationships and the value young people place on the support offered.

The demographics of children accessing early help and social care via the MASH is largely representative of the borough. Children of a White British ethnic background and children with a mixed ethnic background are more likely to have a child protection plan or be in care. Children of a Black ethnic background are less to be in care, and children of an Asian ethnic background are underrepresented across each stage of children’s social care. Reflecting national trends, this reflects wider structural factors, including entrenched poverty that can increase exposure to risk factors and systematic barriers affecting some Black, Asian and other minoritised groups.

The age profile varies across the status of children, with significantly more older children in care than younger age groups.

Leaders maintain a clear focus on understanding and addressing disproportionality across all protected characteristics. We take learning from national research and insights, and locally look at data, practice and lived experiences with an intersectional lens to understand and improve our approach. We put an emphasis on inclusivity and cultural competence so that children get personalised, effective support that reflects their identity and experiences.

Our improvement journey

Over the last three years, we have taken sustained action to address areas for improvement identified in standard and focused Ofsted inspections. Progress is evident, and work continues to ensure that improvements are fully embedded and consistently experienced by all children and families.

Supervision is timelier and more effective. Managers have received robust training and support, and performance data and regular audits provide improved oversight. Audits and data indicate that supervision is increasingly timely and reflective. More information is on **page 14**.

Early help thresholds are more consistently applied: Training and better oversight has led to improvements. Audits indicate thresholds are more consistently applied, and data shows early help is effective in supporting families and reducing escalation. More information is on **page 24**.

Strategy meetings are timely. Urgent safeguarding decisions are made without unnecessary delay. Close management oversight and a dedicated Strategy Meeting Dashboard has improved timeliness, reflected in performance information and audits. More information is on **page 28**.

Homeless young people get a more consistent response focused on safety. Our Homeless Lead Social Worker and Children's Homeless Strategic group have embedded improvements. Young people access critical support faster and more easily than before. Restorative work is introduced early and advocacy is well-embedded. More information is on **page 39**.

Neglect assessments and decision making has improved. Our neglect improvement plan has included a comprehensive training programme, including GCP2 training for social workers, partner training on a screening tool, and a tool for unborn and newborn assessments. An appreciative enquiry report found improvements for children through the GPC2 tool and we are continuing to embed this. More information is on **page 37**.

Direct work tools better inform decision making: In addition to the GPC2 work, training on the Safe and Together model and the DARAC tool has also

been rolled out. Regular audits and data monitoring show steady progress in the use of these tools – with more to do - and positive impact on practice quality. More information is on **page 29**.

Life story work is improving. Life story work has been strengthened, with audits identifying some outstanding examples. To accelerate improvement and consistency, 140 additional social workers started to receive life story work training in spring 2026. More information is on **page 51**.

Safety and contingency planning better inform timely action: A safety-planning tool for the risk-outside-the-home (ROTH) pathway has been implemented, and a new safety-plan template for commonly identified issues was launched in June 2026. With more work is planned to further embed this. More information is on **page 32**.

Pre-proceeding pathways are timelier: Oversight of pathways has strengthened, and data shows very few children are waiting over 16 weeks. Training and new quality assurance activity are in place, and audits show positive progress, including improved timeliness and communication. More information is on **page 33**.

Sufficiency to avoid use of unregistered children's homes has improved: Addressing use of unregistered provision is a top priority. Rigorous processes and oversight have been further strengthened and detailed plans are being delivered to prevent and avoid use in future. More information is on **page 49**.

Management and IRO oversight to progress permanence plans has improved. Permanence planning meetings and oversight have been strengthened to improve the timeliness of formalising plans for children to remain with their long-term foster carers. We will continue to understand progress through data, insights and the voice of children and families. More information is on **page 50**.

Our Families First Programme journey

The Families First Partnership Programme in Barking and Dagenham is a whole-system transformation programme designed to reshape how children, young people, and families receive support across the borough. It aims to deliver earlier, more coordinated help and create a more integrated multi-agency response to children's needs which ultimately leads to a reduced proportion of children needing to enter the care system. We are working as the Barking and Dagenham Safeguarding Children Partnership to successfully design and implement new services in line with the DfE model.

We are proud of our extensive coproduction approach to the design of our new children's safeguarding system, which is based on continuous consultation and codesign with staff, stakeholders and partners and children, young people and families. Work to date has involved detailed project groups, widespread participation activity, and development of design concepts. We have collated and are analysing hundreds of pieces of feedback from children and families, alongside in-depth interviews to identify what improvements children and families want to see, and how best to support them

Local context highlights major drivers for change: a fast-growing and diverse population, high levels of deprivation, rising demand on children's services, and feedback from families and professionals calling for clearer communication, easier access to support, and more consistent relationships with practitioners.

Our new system Target Operating Model has been designed in response these insights and coproduction activity – building on strengths, responding to issues and understanding needs.

Our new Target Operating Model will create several positive changes, including:

- Moving to a localities-based way of working, with key specialist spaces
- Reviewing specialist thresholds to ensure children, young people and families get the right help, from the right person, at the right time.
- Building in additional support in early help spaces – responding to the needs of families and partners.
- Ensuring we respond to the needs of the families who 'bounce' between systems – embedding the work we have done to improve our responses to neglect within a new system
- Building on our 'risk outside the home' best practice to create a Multi-Agency Adolescent Protection team alongside our Multi-Agency Child Protection Teams.
- Improving the pre-birth and baby offer
- Creating the connections into other systems – such as SEND support - turning complexity into simplicity for families.

We are currently working on the detailed design of our concept Target Operating Model, in partnership with staff, partners, stakeholders and children, young people and families. We plan to have a detailed Target Operating Model agreed in October 2026, and then we will move to the implementation phase of our programme. The BDSCP Board and our Change Board will ensure implementation is completed in a safe and seamless way, ensuring we do not increase any risk across the system or for families.

“Knowing what is out there is key, because there are so many parents who need support and they don't know about it” – parent feedback



Section 1:

The impact of leaders on social work practice with children and families



Leadership

Leaders drive the conditions for effective practice

Leadership team: Barking and Dagenham benefits from an experienced, stable and well-regarded leadership team. The Director of Children’s Services and Director of Operations both joined in 2018, providing consistent strategic direction. Together they have led and embedded the CARES culture and ethos within and across services, the council and partners. This has driven stability of workforce and strengthened services, outcomes and practice in all areas of a child’s journey. Strong political support and strong relationships, underpinned by a shared commitment to vulnerable children, young people and their families with wider corporate leaders and the Chief Executive, has ensured that services have continued to benefit from investment and remain a strategic priority in council work. Our 2024 Investors in People Gold assessment highlighted the high level of respect and confidence staff have in leaders, managers and colleagues, reflecting the positive organisational culture we are proud of.

Continuous improvement: Leaders have an ambitious vision for children, rooted in our CARES values. Improvement is supported by good performance data and quality assurance activity, ensuring leaders understand practice and the impact support is having on children and families. Our dual focus over the last year has been to continuously build excellence as standard in all we do through our CARES Academy, whilst planning for the implementation of Families First Partnership reforms to provide earlier, more integrated support to children and families. Audit findings evidence consistently improving practice, reflected in performance data and what we hear from children and families.

A 2025 [Local Government Association Peer Challenge](#) recognised a culture of ambition, inclusion and aspiration for local children; and noted the momentum in driving improvements in children’s services.

“Be proud of...the importance you place on continued improvement – looking for ways to adapt and change in order to address the challenges you face whilst striving for improved service delivery” – Investors in People Gold Report, 2024

Visible, engaged leadership: Visible leaders engage with staff to drive improvements, through daily contact, regular meetings, events and newsletters. In the 2025 Staff Temperature Check, 89% of staff in children’s social care reported feeling able to contribute to improvements in their area of work. This helps ensure improvements are embedded and sustainable, in turn helping ensure that children are safe and get the support they need. Staff engagement levels are high, with the departmental response rate to the 2025 Staff Temperature Check being 10 percentage points higher than the council average with a more positive response in many areas. Forums including monthly Child Practitioner Forums enable safe, supportive spaces for employee feedback that is heard and acted on by leaders.

A single service: Over the last five years, all children’s care and support teams have been brought into a single service with a single Directorate with investment in management capacity, staffing skills and resources to improve outcomes for children, such as an in-house therapy service and CARES Academy model. This has strengthened governance, collaborative working and consistent practice, as well as capacity to deliver change and improvement in outcomes.

Corporate support: Councillors and local authority leaders are deeply committed to children and families. The leadership vision for people, place and partnerships has children and families at the centre, and their safety and

wellbeing are central to the council's [2023-26 Corporate Plan](#). This will continue in the 2026-9 refreshed plan (currently being developed).

Tackling child poverty – a critical issue impacting children in our borough – is a corporate and political priority, articulated in our [Foundations for Change](#) strategy. This includes targeted support for lone parents, larger families, care leavers and young people with mental ill-health and who are not in education, employment or training. The council is pioneering work of health inequalities and neighbourhoods. The health of children and family health has been central with a trailblazing MDT around Trinity Catholic School setting the neighbourhood health model for children, outreach pop-up clinics for children focusing immunisation and children with SEND, and a new dentistry provision with Queen Mary University – with £4m funding from the council. Dentist provision will provide free dentistry to families, prioritising children in care and care leavers and providing apprenticeships and jobs for local residents, including those who have care experience and those with SEND.

The Chief Executive, Lead Member, Councillors and the local authority senior leadership team have a strong understanding of children's needs and use this to make informed decisions. A significant proportion of the council's budget is allocated to children's services at 37% in 2025-26. There have been no cuts to children social care front line services, despite the significant financial pressures facing the council. Instead, savings focus on efficiencies in how we work that do not prevent us from continuing to build excellence in all we do. Investment continues to be made in a range of areas to effectively support children and families.

The Cabinet Member for Children's Social Care and Disabilities has been in post for several years and has a detailed knowledge of local needs. Political oversight is robust and includes:

- **Routine scrutiny and oversight:** Councillors including the Deputy Leader of the Council looks at performance and leads deep-dive discussions to identify how the council can support and improve outcomes for children
- **Overview and Scrutiny Committee:** Councillors on the committee are active in holding decision-makers to account. The Committee reviewed the outcome

of the 2025 Ofsted focused visit and informed the subsequent improvement plan.

- **Corporate Parenting Board.** Councillors play an active role in fulfilling the promises of the Corporate Parenting Strategy, being ambitious for and championing the needs of children in care and care leavers.
- **Committee-in-common** of our Barking and Dagenham Integrated Care Board Sub-Committee and Health and Wellbeing Board. Councillors and partners work together to improve the health and wellbeing of children and reduce the significant health inequalities in the borough. This includes a focus on neighbourhood working, as a model for prevention and early intervention in each local area.

Council leadership: Strong, council-side leadership has resulted in strong performance, particularly over the last three years. We have Investors in People Gold accreditation, with IIP reflecting that staff had high level of respect for – and confidence in – leaders, managers and each other. Our 2025 [LGA Corporate Peer Challenge](#) was positive, with the local authority found to be an 'innovative and creative council that is well respected by its partners'. In November 2025, our adult social care services were [rated 'outstanding'](#) by the Care Quality Commission, one of only four local authorities with this rating. In February 2026, our youth justice services were [rated good with outstanding features](#) by HMIP.

Our Best Chance Partnership Strategy 2022-25 set out our ambitious partnership plan for babies, children and young people. The strategy has delivered improvements for children and young people in a range of areas:

- More children are receiving early help interventions that are successful.
- A higher proportion of schools are rated good or outstanding.
- Child immunisation rates and childhood obesity has improved – with more to do
- The proportion of young people are in education, employment or training is higher than benchmarks

A renewed partnership strategy setting out our ambitions for children in Barking and Dagenham is now being developed. The strategy will align work programmes across SEND, health, and Families First.

Partnership working

Partnership work is prioritised and effective

Strong and resilient partnerships: Effective multi-agency partnership working is well-embedded in children’s social care, underpinned by strong relationships. This enables the partnership to remain effective through the significant organisational change in health services and the police. The 2025 LGA Corporate Peer Challenge noted that “The council works well with partners such as schools, health and the VCFSE, with scope to further develop stakeholder relationships and discussions to help drive place leadership on social value, net zero etc”. Our internal work with housing, education, community safety, adult social care and others is likewise well-embedded and drive improvements for children and families.

Multi-agency safeguarding arrangements: The Barking and Dagenham Safeguarding Children Partnership (BDSCP) provides strong multi-agency oversight of safeguarding practice. Partners work together in a culture of respectful challenge and shared responsibility. As part of our commitment to continuous improvement, we recruited our Independent Scrutineer in August 2025, acting as an effective ‘critical friend’ and keeping the partnership focused on keeping children safe and getting the timely support they need.

Partnership priorities: Partnership priorities - neglect, child exploitation and child sexual abuse - are grounded in local intelligence, research and feedback. Each priority has an accompanying partnership strategy and is overseen by a multi-agency working group that drives improvement and monitors the impact. These priorities reflect the most significant safeguarding issues affecting local children. Transitional safeguarding is a shared priority across the Safeguarding Children’s Partnership, Safeguarding Adults Board and

Community Safety Partnership Board following insights and learning, and a shared plan is being developed to drive improvements in this area.

Partnership planning and service design: The partnership effectively plans, designs and commissions services for each safeguarding partnership priority. Partnership insights on child sexual abuse from data, multi-agency audits and evidence identified the need for a strengthened CAMHS offer, which is now being developed. Partnership planning goes beyond Board priorities: The partnership is key to transformation plans and ensuring sufficiency so that the right accommodation and services are in place for children and families: Our short- and medium-term sufficiency plan and our refreshed 2026 Sufficiency Strategy set this out and are described in more detail in Section 3.

Partnership continuous improvement: In 2024, we set up the One Panel and Learning from Practice committees, drawing on regional best practice. The One Panel reviews referrals for Child Safeguarding Practice Reviews, Domestic Homicide Reviews and Safeguarding Adult Reviews. Concurrently, the multi-agency ‘Learning from Practice’ committee looks at learning from these, along with system-wide learning from reviews published elsewhere and from non-statutory reviews. This approach enriches our understanding of need, risk and strengths in the borough and means we can better identify and implement system-wide learning. As part of our commitment to learning, we are now carrying out a thematic review to understand how the partnership responds to and protects girls who experience or are at risk of significant harm after identifying this as an emerging issue.

Partnership insights: Insights support effective partnership working. The Performance and Quality Assurance Committee was relaunched in autumn 2025 to strengthen multi-agency oversight. The committee is developing a new partnership performance dashboard to improve shared understanding of need and performance. While data from some partners remains limited, work

is progressing to improve this. A partnership audit schedule is being agreed, aligned to shared priorities and building on existing multi-agency audits.

Case study: Child sexual abuse

In January 2026, partners completed a multi-agency audit on child sexual abuse within the family environment. The audit found committed, compassionate and child-centred practice, supported by a good range of professional input. It also highlighted the need for more consistent use of specialist support and greater attention to cultural and identity-related barriers. Strengthening awareness of harmful sexual behaviour and increasing the confidence of schools and foster carers to identify and respond to concerns were identified as improvement areas. These findings have informed our 2026–29 Child Sexual Abuse Strategy that is now being delivered through the Child Sexual Abuse Strategic Sub-Group.

The Families First Partnership Programme: We are working closely with our safeguarding partners, police, health and education, to design and implement develop family help and design and implement new services to reduce the proportion of children and young people coming into the care system. New services will focus on a joint approach to providing enhanced early support to children and families to stop their issues escalating. If issues do escalate, a new multi-disciplinary Family Help Service will streamline support for children and their families, and Multi-Agency Child Protection Teams (MACPT), will provide specialist oversight of the support needed by our most vulnerable children to keep them safe. This will include an MACPT focussing on the needs of adolescents, strengthening in particular the response to extra-familial harm.

Our workforce

Our workforce is equipped and effective

CARES Academy: We were delighted to officially launch our CARES Academy in 2025, providing a training and development hub to embed excellence in practice. The Academy has a range of staff learning, development and best practice resources to support staff, ensuring they have the skills, confidence and tools they need. The CARES Academy is becoming a well-established part of people’s experience of social care and are continuing to build on this.

Workforce continuous improvement: We have invested in a new Workforce Lead, appointed in autumn 2025, and our 2026-8 CARES Workforce Strategy and Board now provide clear direction and oversight. The mission for the strategy is to “attract, nurture and retain a skilled, resilient and engaged workforce who can deliver excellent services, now and in the future”. This is driving workforce improvements, including improved oversight through a dashboard that gives a single overview of workforce recruitment, agency use, retention, sickness, absence and demographics.

Management capacity: We have invested in management capacity following the 2022 and 2023 Ofsted visits and our positive progress was reflected in our March 2026 visit and report. Senior and first-line management numbers have increased, particularly in high-demand areas. Overall, there were 9 senior managers and 34 first line managers as of September 2025 compared to 8 and 24 respectively the year before. Pressures have remained in some areas as demand has grown. As a result, we have further increased management capacity, including new posts in the CARES Quality Assurance service and in the Family Safeguarding and Support service.

Caseloads: Caseloads remain manageable overall. Over 2025-6, the average caseload was 14.7, below the national average (15.4) and statistical neighbour average (15.5). The Family Support and Safeguarding had slightly higher caseloads (an average of 17.3 as of February 2026) as we have increased resourcing in the team as a result. The Corporate Parenting Team working with young people aged 18 have higher caseloads at (20 as of February), impacted by more young people leaving care getting support up to age 25. We are addressing this through additional staffing and resource reviews and continuing to closely monitor this.

Staff sickness can also impact caseloads, with stress, post-operation recovery and Musculo-skeletal as the top three reasons for sickness absence. In response, our CARES Academy prioritises staff wellbeing and support to managers. As a result, the absence rate in 2.4% compared to 2.9% the year before.

Wellbeing: A key message in staff feedback and the 2025 Temperature Check was the need to focus on staff wellbeing and the ability to disconnect from work. As a result, in spring 2026 we launched a monthly ‘Time Out Tuesday’ initiative where staff can come together and focus on their own wellbeing. Sessions are facilitated by qualified counsellors who focus on topics including change and anxiety, burnout, grief and loss. The sessions have been well-attended, and feedback informs the future programme.

Recruitment and retention: A stable workforce enables effective relationships, and families have fed back that changes in workers can disrupt trust and progress. We have therefore put a real focus on this, through initiatives and investment in the CARES Academy. As a result, workforce stability has strengthened significantly. Our turnover rate was 18% in 2025-6. This is higher than the 2024-25 figure of 15% but remains much improved than the 2021-3 peak of 24%. Our achievements were reflected in our 2026 Ofsted focused visit and we will continue the focus into the coming year.

Initiatives like the ‘Stay Conversation’ enable positive discussions with agency workers about permanent employment. As a result, the agency rate has improved for the fourth consecutive year and is at an all-time low (see Fig 1).

Vacancy rates have improved and are now at 15%. We continue to invest in apprenticeships, student placements and ASYE pathways, with a steady flow of students and ASYEs who want to stay once they have qualified.

International recruitment has strengthened the workforce, with over 30 social workers from South Africa, Canada and Zimbabwe over the last three years. A rich induction and detailed pastoral care supported their transition to social work in the UK, and we have had positive feedback on the level and quality of this support.

We continue to see staff who have left the organisation returning here to work, often highlighting our organisational culture and support as reasons to return.

	2019-20	2020-21	2021-22	2022-23	2023-24	2024-25	April 2026
Turnover	15.5%	18.8%	24.3%	24.3%	17.2%	14.8%	18.1%
Agency rate	16.1%	20.2%	23.5%	21.6%	18.6%	15.5%	9.3%
Vacancy rate	17.2%	20.9%	20.6%	23.2%	13.3%	18.8%	15.4%

(Fig 1 Department for Education Children’s Social Work Workforce Data for Barking and Dagenham – please note 20025-26 figure are provisional)

Students and Newly Qualified Social Workers (NQSWs): We have a well-embedded approach to supporting students and new social workers, enabling the service to “grow its own” workforce. The service supports 30 students and 14 ASYEs (as of March 2026). This is our highest number of students yet, made possible by an increase in the number of Practice Educators across the

service, with 28 Social Workers completing Practice Educator training over 2024-6.

Those undertaking the ASYE are due to complete in October 2026, and we will then recruit into the 14 NQSW posts that will become available. We also have seven students from the ‘Step-up’ programme who will be ready to take up posts in March 2027. Everyone will be guaranteed posts subject to successful completion of the programme. The success of this approach is reflected in our strong retention figures: The overall retention rates for ASYE candidates was 72% between 2017 and 2025 and 15% of this group have since progressed into management roles. We partnered with Frontline (now Approach Social Work) between 2022 and 2025. During this period, 12 students completed the fully funded social work training programme and qualified as social workers, of which six continue to work with us.

Apprenticeships: We actively promote apprenticeships as an impactful professional development pathway. During the 2025-6, 25 staff members enrolled in these programmes, exceeding our 5% target. Enrolments span diverse disciplines, and include the Social Work Degree Apprenticeship, Senior Leader, Chartered Manager, and Play Therapist qualifications.

Staff morale: Staff morale is good overall. Staff say they are proud to work for the service and feel supported and cared for by managers. Our culture of continuous improvement is felt at every level, with 84% of staff reporting that working in Barking and Dagenham motivates them to do their best work (2025 Staff Temperature Check). This is underpinned with ongoing wellbeing support, with information, advice and help available in a range of formats. Achievements are recognised and celebrated, including through our annual ASYE awards.

Supervision

Supervision timeliness and quality have improved

Journey of improvement: Since our 2023 ILACS and 2025 focused visit, we have taken sustained action to strengthen the quality and timeliness of supervision. A detailed programme of training and support has been delivered, underpinned by a robust Supervision Policy and checklist. Regular performance reports and audits enable strong oversight and demonstrate steady progress.

Timeliness: The expectation is that all staff receive supervision every four weeks, with a 90% target to allow for unavoidable absences. Our performance shows slow and steady improvements, rising from 70% in September 2025 to 83% in May 2026.

There is some variability in performance. For some teams, performance is higher, with 100% for the Assessment Intervention team and 94% for the Corporate Parenting aged 18+ team over 2025-6. The figure was 61% for the Adolescent team over 2025-6, however this has improved to 85% as of May 2026. Pressures remain in some of the Family Support and Safeguarding teams, where capacity pressures have affected supervision levels: This is being addressed through additional recruitment and targeted support for managers, including guidance on proportionate supervision recording.

Quality: Audits show strong progress in the quality of supervision, with an emphasis on reflection and the impact on children. The proportion of routine audited files that have reflective and culturally informed supervision and management oversight that describes the impact of an intervention on children and young people was 54% in May 2025, rising to 93% as of March 2026. Following the 2026 Ofsted inspection, we have updated our supervision form to ensure learning and corrective action from audits is captured.

Management oversight audit

An audit of management oversight in autumn 2025 rated 67% of audited cases as good, and 17% as outstanding. The audit found service-wide strengths in relation to:

- Supervision being reflective and outcomes-focused
- The extent to which children’s and families’ voices were captured and acted upon
- Managers modelling empathic, trauma-informed leadership
- Managers being proactive in crises or complex situations
- Oversight directly improving outcomes for children in most audits

Areas for improvement were around consistency and follow-through, use of performance data, record-keeping, intervention timeliness and variation between teams.

Child sexual abuse: Supervision in relation to child sexual abuse has been strengthened. This is complemented by the CSA Hub consultation offer supporting workers and their managers in case planning. In early 2026, a bespoke supervision tool for sibling sexual harm was introduced with the NSPCC. Feedback from practitioners and managers has been positive, and the tool is supporting more consistent and confident practice in this complex area. We are now continuing to embed use of the form in practice.

Next steps: Leaders recognise the need to continue improving consistency. Targeted work is underway with specific teams, and further training and management support are being considered to embed learning from audits and practitioner feedback. We aim to further promote joint supervision across teams who are both working with a family. Our recent [HMIP inspection](#) noted the quality of supervision was strengthened with the Youth justice worker joining the supervision with the allocated social worker in the Adolescent team. Leaders maintain a strong grip on performance and demonstrate the capacity and determination to achieve further improvement.

Training and development

There is effective organisational support for training and development

CARES Academy training: The CARES Academy provides a structured, ambitious programme of training and development to equip staff with the skills to ensure that children are safe and get the timely support they need. Learning from insights, evidence and feedback flows into the training offer, so that core training runs alongside areas prioritised for improvement. 1097 attendees attended 114 learning sessions between April 2025 and January 2026, demonstrating strong engagement across the workforce. 100% of those who provided feedback agreed that they gained skills and knowledge to positively influence the way they carry out their role (as of December 2025).

CARES Academy training is linked to our career progression pathway, so we “grow our own” leaders and managers and enable workers to achieve their professional aspirations. This approach is having a tangible impact: ten practitioners who completed the ASYE in our service since 2019 have progressed into management roles.

Families First programme training: We are developing our training offer to ensure that staff are prepared for reforms. We have invested in an FFP Training Lead to shape training on the new model and pathways and are looking at wider training needs in order to make the model a success.

Multi-agency training: The local partnership promotes multi-agency learning and training. Our ‘Learning from Practice Tracker’ shows how recommendations from local and national practice and rapid reviews have informed our local training offer, providing partners with assurance that multi-agency training is focused on the right topics. 714 staff from across the partnership attended 29 multi-agency training sessions over 2025-26, with positive feedback on learning and the impact of training.

CARES Academy resources: Our CARES Academy online hub provides a central, accessible repository of best practice resources for staff. This includes policies, procedures, guidance, tools, research summaries and interactive learning materials. Overall, 85% of staff in children’s social care say they are trusted to try new approaches in the way they work (2025 Staff Temperature Check). Our plan for the coming year is to further develop and embed these resources into staff practice.

Practice leads: Our practice leads play a key role in strengthening practice in priority areas. Our Practice Improvement Lead for Children Sexual Abuse and leads practice improvement in this area. Likewise, our Safe and Together Implementation Lead focuses on domestic abuse and our Vulnerable Adolescent Practice Lead focused on child exploitation. Our Care Proceedings Case Manager also delivers learning sessions on best practice on the public audit outline. Our practice leads share resources, provide training, carry out audits and provide consultation with other practitioners – supporting and driving excellence in complex areas of practice.

North East London Teaching Partnership: Staff have access to cross-partnership training and qualifications. The partnership works with higher education institutions to provide an Early Professional Development offer for social workers who have completed the ASYE, supporting the early stages of their careers and potential progression. It also offers opportunities for knowledge exchange through an ‘academics into practice’ programme.

Management development: New senior managers attend the ‘Leaders for London’ children’s services programme, with two Heads of Service participating at the time of writing. The London ‘Realising Potential’ leadership programme is in place for global majority staff, as part of our commitment to developing leadership that reflects the workforce. We have monthly Children’s Leadership Improving Practice (CLIP) meetings with managers to collaborate, share and drive good practice: The forum is well-attended and regarded and ensures management development is a continual process.

Quality assurance and performance

Quality assurance and evaluation have strengthened over the last year

CARES Academy QA: We have put a real focus on quality assurance over the 18 months, which has strengthened and enriched management oversight of frontline practice. Led by the CARES Academy, we have developed a programme of audits that give detailed insights on where practice is strong and where risks or areas to improve lie. Corrective action is taken on individual cases, and themes inform service-wide improvement activity.

244 children’s cases were audited using our routine practice audit approach between May 2025 and March 2026. More than 30 dip sample or thematic audit exercises have been carried out on key areas. Findings result in corrective action for individual children and themes drive improvements at a strategic level. We coordinate regular multi-agency audits, including on our Multi-Agency Safeguarding Hub (MASH) and child sexual abuse: These enable system-wide learning and improvement.

Performance and monitoring: Performance management information provides us with an accurate understanding of support and drives improvement. Performance dashboards and data is systematically reviewed at every level of the organisation. At a team level, managers access regular staff or child-level data so that compliance and performance can be understood and followed-up. At a service level, leaders receive timely, accurate and detailed performance information so emerging issues are quickly identified and acted on. This has contributed to improvements in key areas such as the timeliness of assessments and reduced use of police protection.

Reports analyse children’s protected characteristics, trends over time and benchmarking to build a detailed, holistic view that enables meaningful action. Our approach is reflected in the 2025 LGA Corporate Peer Challenge report that “the council has a strong approach to performance management”.

We are currently developing an education and social care dashboard, bringing together education data for children in social care in one place to strengthen oversight.

Reporting: Reporting of quality and performance information takes place weekly, with more in-depth monthly, quarterly and annual reporting.

Key forums include:

- ✓ Twice-monthly children’s improvement meetings, where performance data and quality insights are triangulated
- ✓ Monthly portfolio meetings with the Cabinet Member for Children’s Social Care and Disabilities
- ✓ Six-weekly Children’s Improvement Board meetings
- ✓ The Performance and Quality Assurance Sub-Committee of the Barking and Dagenham Safeguarding Children Partnership
- ✓ Multi-agency working groups working on shared priorities

Discrimination and inequality: We are committed to tackling discrimination and inequality for children and families. A service-wide deep dive analysis of disproportionality was last carried out in summer 2026 and is routinely reported in key areas. Thematic audits look at specific issues arising from this – such as exploitation and ethnicity – and look at culturally competent practice. We have carried out insight work on LGBTQ+ experiences and are now progressing our LGBTQ+ Social Care Action Plan to develop staff training and more inclusive settings. We held a Race in Practice Conference in April 2026 as part of our commitment to anti-racism to raise awareness and share learning and are looking at learning and development on intersectionality. We have also recently commissioned a thematic learning review of girls with complex needs, having identified this as an emerging trend.

Driving improvements: Quality assurance and performance management information is used to drive improvements that benefit children. For example, routine practice audits have led to an improvement in the timeliness of supervision and a clearer focus on children's lived experience.

Information is triangulated, informed by a deep understanding of the wider context of the borough, and used to drive improvement. For example, an increase in children entering care via police protection in early 2025 triggered a thematic audit. Findings led to system-wide action, resulting in a significant reduction in the use of police protection.

Practice framework

Our CARES Practice Framework is consistently applied

Practice model: The CARES Practice Framework provides a strong and coherent foundation for social work practice. Rooted in compassion, accountability, respect, empowerment and sharing through participation, the framework shapes our organisational culture and guides practitioners in their work with children and families. Our practice model is relationship-based and strengths-focused, supporting practitioners to build meaningful, trusting relationships with children and families. This approach helps to ensure that children are safe and receive the right support at the right time.

Support: The CARES Academy plays a central role in embedding the practice framework. Staff receive training and support through induction, core training that includes relational and strengths-based approaches, and a range of resources on the online CARES Academy hub that help practitioners apply the framework consistently. Application of the framework is reinforced through supervision, performance oversight, feedback from children and families, and the work of the CARES Academy quality assurance team. This ensures that the framework is not only understood but actively used to guide practice.

Impact: We are proud that our CARES Practice framework is well embedded. Audits have confirmed that CARES values are reflected in practice, finding compassionate, accountable, respectful, empowering support that is shared and co-produced. Children and families benefit from more relational, strengths-based and child-centred practice. One of the most significant impacts of the CARES practice framework being embedded via the CARES Academy QA work is how social workers talk and write about the children they are working with. A consistent theme in audits is the child-focused approach on file records, showing sensitive, trauma informed practice where the child’s voice is evident. This in turn means plans are more attuned to the child’s needs and experiences.



Children’s Voice and Feedback

Feedback informs practice and service development

Commitment: Hearing the voice of the child is central to ensuring children are safe and get the support they need. Our commitment is ‘nothing about you, without you’, and we hear and act on children and family views and experiences at every level, from practice to service development and delivery. The CARES values explicitly embed participation, and the CARES Practice Framework sets clear expectations for child-centred practice. Our approach to gathering and using feedback has strengthened significantly over the last 18 months, supported by quality assurance and innovative participation work.

Our local authority approach to participation was recognised in the 2024 SEND inspection and 2025 HMIP inspection; and a recent co-produced [music video](#) to tackle bullying for young people with disabilities won an award at the national Council for Disabled Children SEND Awards.

Child voice: Audit findings show that children’s voices are consistently captured in practice. Routine audits of 244 children between May 2025 and March 2026 found:

- 84% of cases had the child’s voice clearly recorded
- 73% showed evidence that practitioners had acted on the child’s wishes and feelings

A thematic audit in January 2026 found the voice of the child present in **100%** of cases, with particularly strong practice in work with very young children and teenagers. The audit also highlighted the positive impact of strong child-centred practice, including better placement decisions and stability, safer, more child-centred contact arrangements and improved emotional wellbeing and educational outcomes

However, the audit also identified that the link between children’s views and decision-making was not always explicit. This learning is now being built into CARES Academy training and resources to strengthen practice further.

Arrangement for participation and co-production for children and families

Our Participation Framework describes the inclusive range of ways in which we gather feedback and co-produce improvements with children and families. These are summarised below:

Individual forms of participation and co-production include:

- ✓ Feedback from direct work and practice
- ✓ Participation in family conferences
- ✓ Gathering feedback when carrying out audits
- ✓ Children’s rights officer and advocacy support to speak out
- ✓ Surveys sent to families when involvement with social care ends
- ✓ Surveys and individual feedback to inform the Families First Partnership
- ✓ Feedback at the end of an exploitation episode
- ✓ Complaints and compliments

Collective forms of participation in social care include:

- ✓ Skittlz, our children in care council
- ✓ Participation groups for children in care, care leavers and young people in contact with youth justice services
- ✓ Focus groups to inform the Families First Partnership programme
- ✓ Young people and family participation on Boards, e.g. Youth Justice
- ✓ Co-produced improvements, e.g. strategies, better communication
- ✓ Co-produced evaluation of services, e.g. therapy projects

Collective forms of participation across the local authority includes:

- ✓ Annual, youth-led safety summit
- ✓ Young Safeguarders project
- ✓ Youth-led events
- ✓ Youth forums, e.g. Flipside LGBTQ+ youth group
- ✓ Parent and carer forums, e.g. for parents of children with SEND
- ✓ Co-produced improvements and delivery
- ✓ Insights from surveys, e.g. school health survey

Listening to and acting on feedback: The range of ways we hear from and work with children and families means we have rich insights that improve practice and service design. These improvements are articulated in a 'you said, we did' format in some services, and we have recently introduced this service-wide so that there is clear oversight of what children and families have said and what we have done as a result. Themes and actions over the last year include:

- Children and families value trusting, stable and reliable relationships with tenacious, caring social workers. This has informed how we recruit, induct, develop and support staff. We have improved staff retention so that children and families have fewer changes in workers, strengthening relationships as a result.
- Children in care and care leavers want to see improvements in information, communication and the Leaving Care Grant process. This has led to co-produced video's, a co-produced Enhanced Local Care Offer and an improved grant process – explained more in Section 3.
- Inconsistent communication has been highlighted as an area to improve by some children and families. We are addressing this in a number of areas, including through clearer pre-proceeding letters that are quality assured before being sent out.
- Young people feel more could be done to raise awareness of exploitation. We have agreed actions to address this across the partnership as part of our refreshed Adolescent Safety and Wellbeing Strategy.

"From the very beginning, A has been more than just a social worker - she has been a source of strength, reassurance, and guidance during one of the most challenging periods in our lives. She provided invaluable emotional support, creating a safe and trusting space where M could share her concerns without fear of judgment. At every step, she listened with patience and understanding, never dismissing our worries but instead offering practical solutions, encouragement, and hope when it was needed the most. Her presence alone has made a world of difference, and for that, we will always be grateful"

Innovative participation: We are proud of the meaningful contributions children and young people have made to service improvements over the last year. Their insights have shaped areas such as care leaver support, information and advice, and the development of more accessible resources. Here are two examples:

Young Safeguards:

In May 2026, we launched our Young Safeguards programme to strengthen how safeguarding is quality assured. By embedding youth voice and lived experience into local safeguarding arrangements, Young Safeguards will help ensure that children and families are heard and their experiences drive improvements.

Eight 'Young Safeguards' will gather and insights on safety and safeguarding, providing feedback and recommendations for the Safeguarding Children Partnership to take forward.

Families First Partnership programme:

A detailed programme of participation has ensured the views of children and families are at the heart of the Families First Partnership programme. Between October 2025 and May 2026, 360 pieces of feedback were gathered through surveys, focus groups, meetings and phone interviews.

Children and families have highlighted:

- The importance of stable relationships, clear communication and workers who have empathy and are non-judgemental. Changes in workers can disrupt trust and progress
- Families value early help services and want support that is practical and tailored to their needs.
- A lack of awareness, fear of services and difficulty accessing help can act as barriers. Families want clear information and simple access.

This feedback has informed the design of the Families First Partnership programme, and we will continue to engage with families on this in future.

Continuous improvement and learning

We know ourselves well and use this to drive excellent practice

Families first programme: As mentioned earlier, our dual focus over the last year has been to continuously build excellence as standard in all we do through our CARES Academy, while preparing for the Families First Partnership reforms. We have embraced the opportunity to think differently about how to respond to need, and we are using the reforms to improve outcomes for children and families.

Incidents and complaints: A well-established Director Need to Know protocol ensures immediate action and service-wide learning when incidents occur. Complaints are reviewed regularly to identify themes and drive improvement. 136 complaints were received in 2024-25, of which 29% were fully or partly upheld. Support and communication were the biggest themes in complaints received. In response, we have strengthened the quality of communication through training, development and quality assurance activity.

Practice and rapid reviews: We work through the Learning from Practice Committee of the Safeguarding Children Partnership to learn from reviews. We completed a rapid review of Child JL in April 2025 and a Rapid Review of Child EG in April 2026. Insights and recommendations from reviews are being acted on, including a recent review of the multi-agency escalation procedure to ensure processes are clear and effective. As previously noted, we have also recently commissioned a thematic learning review of girls with complex needs, having identified this as an emerging trend and vulnerable group for whom we need an effective response.

Sector-led improvement: Leaders are active, influential contributors to regional and national sector-led improvement. Our Director of Operations chairs the London Children’s Safeguarding Partnership Sexual Abuse sub-group. Our work on child sexual abuse, through our partnership with the Centre for Excellence on Child Sexual Abuse, has attracted interest from the sector and Home Office as an example of good practice. Likewise, our approach to exploitation through our ‘risk outside the home’ pathway was presented to London authorities in spring 2026 as an example of innovation that others are now taking forward.

Our Director of Children’s Services is the London lead for Special Education Needs and Disabilities (SEND). Through this, we have demonstrated our ambitious ‘preparing for adulthood’ whole-system programme focused on improving outcomes for young people transitioning into adult services, with an emphasis on independence, employment, and sustainable housing pathways.

External expertise: We continually seek out external advice and best practice in ensuring children are safe and get the support they need. We have worked closely and effectively with our Department for Education Improvement Advisor to understand and improve practice on key issues, overseen by our Children’s Improvement Board. We have partnered with North Tyneside local authority, a sector led improvement partner (SLIP) over the last year and are learning from their approach to early help: This is informing our family help model, with a view to further strengthening how early help is utilised in our borough. We received positive feedback from North Tyneside following their visit in March 2026.

*“The authority continues to make good progress on a number of fronts” –
DfE Improvement Advisor*

We worked with Partners in Care and Health to carry out a peer review in relation to preparing for adulthood and transitions and are now using those insights in our preparing for adulthood programme. We also partner with experts in the field, such as through our ongoing collaboration with the Centre of Expertise on Child Sexual Abuse and the University of on best practice in child exploitation. Our partnership with the Family Rights Group has seen our family group conference and Lifelong Links practice flourish. Working with the Fostering Network has led to us being front runners in embedding the Mockingbird hub model, strengthening foster care for children and foster carers.

Services and sufficiency: Leaders have a detailed understanding of needs and demand and shape services in response to this. Our Support to Safety team was developed in response to insights on domestic abuse. We have invested in new roles to meet changing needs, including a Hidden Harm worker and a Mental Health and Wellbeing Lead practitioner working with children in care and care leavers. Our Families First Partnership programme has been designed and informed by need, demand and capacity to ensure it improves outcomes for children and families.

Commissioned services are carefully designed, such as our recently recommissioned service for young carers, informed by a bespoke JSNA on carers. Plans are in place to address pressures where they exist. We are currently working to expand short-break and respite provision for children with disabilities. Short- and medium-term sufficiency plans and our refreshed 2026 Sufficiency Strategy are being delivered to locally address the national shortage in the supply of good quality residential care for children with high and complex needs. This is set out and are described in more detail in Section 3.

Well-informed: Leaders use feedback, research and intelligence to inform decisions. They have a detailed understanding of local need and best practice. Where gaps in knowledge exist, leaders commission further insight. For example, a mental health JSNA focused on children and young people is due to be completed in autumn 2026. Leaders understand key factors that shape demand, including population growth, increased mobility, deprivation and rising complexity. The Families First Partnership programme is designed to respond to these challenges and build on existing strengths.

Overall, continuous improvement activity has led to stronger practice in priority areas, improved timeliness and oversight, better response to risk and a clearer focus on children's lived experience. We are committed to continued improvements over the coming year.



Section 2:

The experiences and progress of children who need help and protection



Early and family help

We are strengthening early help for children and families

Overview: Children and families receive the help they need at the earliest point through wide-ranging prevention and early intervention services. Effective early help is critical in a borough with high deprivation, complex needs and population growth. We are on a journey to strengthen early help through the introduction of a family help model – as part of the Families First Partnership programme - with a clear focus on reducing avoidable escalation and improving timeliness.

Universal provision: Easy access to high-quality, universal provision is a priority. Family hubs provide an accessible, local base for families seeking advice and support. They bring together local authority services and community partners, including perinatal mental health support, health visiting, midwifery services and debt advice. Families value these hubs, and engagement continues to rise, with 1044 people using a family hub over 2025-6 compared with 540 the previous year.

We have invested in evidence-based parenting programmes, so families are supported to help their children thrive. This includes Strengthening Families Strengthening Communities, Stepping Stones, Empowering Parents, Empowering Communities and the ‘Solihull Approach’ launched in September 2025 - as a best practice, evidence-based framework to support emotional wellbeing for children, parents and carers. 123 parents participated in a parenting support programme over 2025-26, reporting improved parenting behaviours and a better understanding of their children’s development.

Six Family Navigators are based in family hubs and play a vital role for families with emerging needs. In 2025–26:

- 536 families received information and guidance
- 508 families received coordinated one-to-one support
- 61% of those families had their needs resolved without escalation

- 21% were appropriately stepped across to Targeted Early Help.

“The Family Hubs service made a big difference for us. As a parent, I sometimes felt overwhelmed and unsure where to turn for support, but the Hub was a welcoming place where I could ask for help without feeling judged. We received really helpful financial advice, which took a lot of pressure off...My child enjoyed the play sessions and made new friends, and I felt more confident knowing there was somewhere I could go for support. It really brought a sense of community and made things feel more manageable” – parent feedback on family hubs

“I now have a better understanding of autism and how I can support my son to make a positive change in his life” – parent feedback on a parenting programme

Family Hubs and Navigators are part of a range of universal and preventative services delivered by the local authority, partners and the voluntary and community sector. This includes a well-regarded youth service and support with debt advice. The Baby Intervention service supports first-time parents of children aged 0-2 years, focusing on routines, attachment and positive parenting. The service works across all thresholds and has an outcomes framework demonstrating strong results and positive family feedback.

Targeted early help advisory service: The Targeted Early Help Advisory Service is the first point-of-contact for children and families who might benefit from more targeted early help, providing advice, signposting, phone consultations and initial triage. The service joined the Multi-Agency Safeguarding Hub (MASH) service in early 2026 to streamline pathways, strengthen early intervention and threshold consistency. This structural change moves us forward towards plans to launch the family help model as part of the Families First Partnership programme.

Targeted early help and rapid response: Targeted Early Help provides up to 16 weeks proportionate support for families experiencing issues including neglect, domestic abuse and parental mental health. Rapid Response offers intensive support for up to 30 days where needs are urgent. The service builds on strengths in the family and family network and is well-used, with 2629 children (1240 families) starting to receive support from the Targeted Early Help team and 784 from the Rapid Response team over 2025-26.

There has been a 12% growth in the number of children getting early help over the last three years, from an average of 785 children open to early help each month in 2022-23, to 879 per month in 2025-26. We had the eighth highest early help assessment rate in London in Q3 2025-6, and the fifth highest in Q4. This reflects a proactive, growing approach to family help in a high-need borough, and our ambition is to reach more families in future.

Timeliness: The Targeted Early Help Advisory Service swiftly triage referrals to provide timely support, with 98% of online referrals screened within three days over 2025-26. Some families then experience delay in being allocated to a worker in the Targeted Early Help or Rapid Response service (the target of 2 days was met in 48% of cases in Targeted Early Help and 25% of cases in Rapid Response over 2025-26). Delays are impacted by demand volatility and capacity pressures, and improvements are being closely monitored and managed: Regular contact with families is maintained and risk assessments are used to prioritise those in urgent need of help and families who have been 'stepped down' by children's care and support. Most families (80%) are allocated to worker within two weeks.

Early help assessments: Early help assessments are consistently of good quality, enabling effective support. Monthly audits highlight child-centred practice, with 859 families and 1,825 children receiving an assessment over 2025. 84% of early help assessments completed within 20 days over 2025-26.

Interfaces with social care: Thresholds are increasingly well understood and applied. Following the 2023 ILACS, leaders strengthened threshold application and continue to monitor step-up and step-down decisions closely.

825 children were 'stepped down' to targeted early help over 2025-6. When families no longer require children's services intervention, they are helped to engage in activities and positively connect with groups in their community. An audit of 10 children presented in January 2026 found the correct application of thresholds in most cases stepped down to early help, and in all cases stepped up from early help to children's social care.

We ran dedicated multi-agency training on our thresholds over 2024-25 to strengthen partner understanding and mainstreamed this through all training over 2025-6. We are currently working closely with partners to design our 'family help' offer and thresholds.

Impact: Early help is reducing escalation and supporting families to make sustainable progress. There are small numbers of 'repeat' contacts with early help, indicating the effectiveness of the intervention:

- 12% of children starting to get support from targeted early help over 2025-6 had a previous 'episode' in the last 12 months – below our target of 15%.
- 9% of children referred to children's social care had a completed Early Help Assessment in the last 12 months.
- 7% of children starting to get support from Rapid Response were previously open to a Targeted Early Help team in the last 12 months. This is significantly improved from the 2024-25 figure of 12%.

Next steps: Through the Families First programme, we will work to increasingly prevent children from needing statutory interventions. We will maintain clear oversight of the relationship between early help performance and child protection trends. The ambition is to see a stabilisation and reduction in statutory interventions over the next 12–18 months through the introduction of the family help model.

Multi-Agency Safeguarding Hub (MASH)

Our MASH identifies and responds to children who may need help or protection

Overview: Our Multi-Agency Safeguarding Hub (MASH) provides a clear and effective front door for children who may be at risk of harm. Effective partnership working between the local authority, police, health services, education, probation and others enables timely decision-making and helps keep children safe. Practitioners apply thresholds consistently, ensuring that children receive the right level of support without delay. The integration of the Targeted Early Help Advisory Service into the MASH is moving the service towards a single, streamlined front door where prevention is prioritised.

Information and identification: Residents and professionals can access timely advice and support through the MASH. The consultation phoneline is well used, enabling practitioners and members of the public to discuss concerns with a social worker and receive guidance on whether a referral is appropriate. This supports good-quality referrals and helps ensure that children who may need help or protection are identified early. For example, Designated Safeguarding Leads in schools receive regular support, and “vulnerable hot clinics” provide early guidance and promote shared understanding of risk.

Triage and referrals: We receive high levels of contacts, reflecting high levels of awareness.

- 12,636 contacts were made to the MASH over 2025-6. This is a decrease of 4%, whilst demand for early help increased.
- 33% contact-to-referral rate over 2025-6, reduced from 40% in 2024-25. We had the fifth highest rate in London for Q4.

- The referral rate per 10,000 of the population was 632 in 2025-6, down from 798 in 2024-5. This ranked 15th highest for London in Q4.

Collectively, this shows that whilst contacts and referrals remain high, demand is decreasing. Concurrently, use of early help has increased and is supporting families effectively.

The high level of contacts and contact-to-referral rate is influenced by need and population change in the borough: Population growth in the borough means there are contacts about children who are not yet known to the local authority which can result in referrals due to levels of caution. In addition to an 11% increase in the birth rate between 2021 and 2024:

- ONS estimates that 14,222 children aged 0-19 years moved into the borough from elsewhere in the UK between mid-2021 and mid-2024.
- International migration was the highest contributor for population change in Barking and Dagenham over this time, with a number of families newly arrived in the UK.
- The collective impact can be seen in use of the Health Visitor service, which has seen a 79% increase of families moving into the area with children under five years old between 2022 and 2025.

Secondly, the high level of contacts and contact-to-referral rates is reflective of the high and complex needs in our borough driven by high child poverty levels. In 2023-24, 26% of children were low-income families – higher than the London average. Leaders understand these pressures well and are taking action through a council-wide focus on child poverty and in social care via the Families First Programme.

Audits and feedback suggest that the quality of referrals to the MASH has improved. People can contact the MASH to get advice on whether to refer, and a checklist is included in the children’s social care Continuum of Need threshold document. Audits tell us that the quality of MASH referrals received from partners could include consideration of wider family networks more consistently. However, audits tell us that the quality of MASH referrals is

sometimes variable and missing details on wider family networks and that we need to maintain a focus on children’s daily lived experience and identity. We are working to address this through an ongoing focus on practice and through joint work with referring partners.

Timeliness: Timeliness in the MASH is strong and improving, ensuring that children at risk receive prompt and proportionate responses.

- 95% of contacts were completed within timescales over 2025-6, up from 89% in 2024–25.
- High-risk (“red”) contacts are responded to very quickly, with 97% completed within one day.
- Multi-agency audits in February 2026 confirmed that red and amber contacts are consistently triaged within 24 hours.

Engagement with families: Audits confirm that parental consent is routinely sought and that decisions to override consent are clearly justified and recorded. This reflects respectful, transparent practice.

Identification and decision-making: Practitioners demonstrate strong understanding of thresholds and risk. Quarterly multi-agency audits across 2025-26 consistently found that decisions were appropriate and that thresholds were consistently applied.

Practitioners in the MASH are supported to make threshold decisions: For example, all referrals coming to the MASH where child sexual abuse is a concern are subject to a brief consult with the Child Sexual Abuse Practice Improvement Lead. This ensures children get the right response at the right time and avoids delay in referrals. Audits have highlighted that thresholds for decisions are particularly strong in high-risk cases.

Audits have highlighted the need to consistently capture the child’s voice: This is being taken forward through the MASH Partnership Board and will continue to be monitored through feedback and quality assurance activity.

Emergency duty team: The emergency duty team (EDT) led by Redbridge continues to provide timely and proportionate response to children’s needs out of hours. Communication and handovers are effective, and strategy meetings with partners are convened promptly when required to safeguard children.

Multi-agency working: There is good multi-agency collaboration in the MASH, echoed in feedback from partners and audits. Partners report positive collaboration, and audits highlight particularly effective joint work between social care, health, education and Refuge. Daily multi-agency meetings support timely information sharing, and co-location arrangements - such as probation staff having access to the local authority system - reduce delays and improve decision-making. Our Multi-Agency Safeguarding Hub Education Coordinator post supports joint working between education and partners to safeguard children. The Support 2 Safety domestic abuse team in the MASH has strengthened the multi-agency response to domestic abuse and is described later in this self-evaluation.

Operational and strategic oversight is strong through the MASH Operational Board and MASH Partnership Board. These drive improvement through constructive challenge and shared oversight and ownership.

Impact: Repeat referrals provide one indication of the effectiveness of early help and safeguarding responses. Repeat referrals reduced to 18% over 2025–26, down from 20% in 2024–25 and slightly below the London Q4 average of 17%. This suggests that support is increasingly effective in preventing escalation and sustaining progress.

Strategy meetings

Strategy meetings are timely and effective and keep children safe

Overview: Strategy meetings in children’s care and support provide a clear, well-understood mechanism for multi-agency decision-making where concerns indicate potential significant harm. Leaders have strengthened oversight since the 2023 ILACS visit. Our approach now delivers timely, child-centred decisions that help keep children safe.

Timeliness: The timeliness of strategy meetings has improved since our Ofsted ILACS visit in 2023 so that urgent safeguarding decisions are made without unnecessary delay. Close management oversight and a dedicated Strategy Meeting Dashboard has improved timeliness:

- 3 days average time from initiation to meeting in 2025-26, down from 4 days in 2024-25
- 85% of monthly audited cases between May 2025 and March 2026 had timely strategy meetings
- 99% of monthly audited cases over the same period had expected strategy meetings that took place.

Multi-agency participation: There continues to be generally strong partnership attendance and contributions at strategy meetings. A summer 2025 audit concluded that attendance at strategy meetings was generally good, with representatives from health, education and police present at most meetings. Likewise, 87% of monthly audited files between May 2025 and March 2026 show strategy meetings with positive attendance from non-statutory partners and additional services. The significant improvement in Sunrise Hub paediatric consultants being routinely invited has led to more children receiving medical and emotional wellbeing services from the Hub compared to other boroughs in North East London. Audit noted a need to

include Probation in meetings to strengthen the focus on the adults who present a risk.

Child voice: Strategy meetings have a clear focus on the voice of the child. An audit of threshold decisions in autumn 2025 found that 97% of strategy meetings explicitly considered the child’s voice or lived experience, and discussions demonstrated professional curiosity and a child-centred focus.

Record keeping and communication: The quality of the recording of strategy meetings continues to be closely monitored. Whilst generally good, the summer 2025 audit found that the chair and minute-taker details were not always recorded: We have worked to improve this and continue to monitor practice through quality assurance and feedback. We are also working to ensure partners always receive the minutes and actions from strategy meetings, following feedback that this does not happen every time.

Outcome Most strategy meetings progress to a Section 47 investigation (68% 2025–26, slightly higher than 66% in 2024–25). An autumn 2025 audit found that in a few cases, strategy meetings progressed to Initial Child Protection Conference (ICPC) without a robust section 47 investigation, which could bypass options such as children in need plans. However, the audit confirmed that urgent cases were escalated to an ICPC in a way that was timely and appropriate – indicating strong safeguarding responsiveness.

Next steps: We will sustain good practice around the timeliness of strategy meetings, strong multi-agency attendance and a consistent focus on the child’s voice. Improvements to ensure chairs and minute-takers are consistently recorded; to guarantee timely distribution of minutes and actions to all partners; and to ensure S47 investigations are proportionate and robust before progressing to ICPC are being taken forward.

Assessments

Children are identified, assessed and get the help they need.

Overview: The number of children assessed has stayed high over the last year, part of a wider trend linked to population growth, more children moving into the borough, deprivation levels and complex need. An average of 411 single assessments were carried out each month over 2025-6, equivalent to 744 assessments per 10,000 of the population. This was the fifth highest in London for Q4 and above the average of 535. Despite this high demand, the timeliness of our response and the quality of interventions remain good, and we are working to ensure excellence is consistently embedded in practice.

Assessment timeliness: We assess children swiftly to ensure they stay safe and get the support they need. 94.5% of single assessments were completed and authorised with 45 days over 2025-26: improving on 91% in 2024–25 and outperforming the London Q4 average (84%). There is some variability between teams that we are seeking to address, with performance particularly strong in the Assessment and Intervention team (99.9%) and less strong in the Family Support and Safeguarding service (75%). Further investment in staff capacity and development is underway to help address this.

Assessment quality: Assessments should be informed by the child's lived experience, their history and research. Audits and feedback tell us that the voice of the child is at the centre of our practice and is clearly recorded. The vast majority of children have a chronology recorded (95% as of April 2026). We are now working to ensure these are consistently, continually updated for every child. Likewise, audits have found that three-generational

genograms are generally well-used but would benefit from consistently good levels of recording and detail.

Direct work tools: Since the Ofsted focused visit in 2025, we have steadily improved how consistently risk assessment tools in direct work and assessments are used – and have more to do to continue this journey.

We have invested in training for practitioners on the neglect GCP2 tool and partner training on a screening tool and a tool for unborn and newborn babies. Research and an appreciative inquiry on the GCP2 tool has confirmed its positive impact on children and families. We closely monitor how well the tool is used in assessments for children who have neglect identified as a factor: 319 children had neglect as a factor in their assessment as of 8 June 2028. Of these, 56% had a GCP2 tool completed and 4% had started this. This is a steady improvement on the April 2025 figure of 45% but shows that we have more to do. Training is being reviewed to take this forward.

Training for practitioners on the domestic abuse model Safe and Together and the DARAC tool has been provided. Again, we use audits and weekly performance reports to closely monitor how well the DARAC tool is being used in assessments where domestic abuse is identified as a factor. 544 children had domestic abuse as a factor in their assessment as of 8 June 2026. Of these, 54% had a completed DARAC tool and 5% had started this. Although there will be some instances where domestic abuse in an assessment does not require completion of the DARAC tool, we would expect the figure to be higher than currently reported and will continue to address this.

All children with a sexual exploitation 'flag' had a risk assessment completed over 2025-6, and all but one child with a criminal exploitation flag had this completed as of April 2026. A new 'signs and indicators' tool in relation to child sexual abuse was added to LAS in January 2026. Reports on how often this tool is completed will be looked at later in 2026.

Assessment decisions: Decisions from assessments are generally proportionate and well-evidenced.

- 40% of assessments progressed to tier 3 (child in need or child protection) over 2025-6, up from 33% in 2024-25.
- 18% were stepped down to early help, up from 12% in 2024-25.

This picture is in-keeping with wider trends, with a bigger focus on family help intertwined with high levels of complex need and a high proportion of families who have not previously been known to social care.

A thematic audit in autumn 2025 concluded that decisions in the Assessment and Intervention service were timely, child-focused and consistent with thresholds, and that multi-agency collaboration strengthened decision-making.



Children in need of help or protection

Effective and timely practice keeps children safe

Overview: We act quickly so that children who need help or protection are safe and get the support they need. Our response is timely, particularly in relation to assessments and Initial Child Protection Conferences (ICPC). We have seen a significant increase in child protection plans over the year, and the rate of children in need and Section 47 investigations is above the London average. Again, this is impacted by population growth, more children moving into the borough, deprivation levels, better identification of neglect and complex needs. High levels of need underline the importance of focusing on prevention and family help, and we are utilising opportunities to progress this through the Families First Partnership programme. The support available to children and families is well-regarded and effective, and child protection plans bring sustainable change that reduce risks and keep children safe.

Children in need: We have seen a steady increase in the number of children with a Children in Need (CIN) plan, but have maintained good timeliness:

- 664 children have a CIN plan as of April 2026, up from 580 as of March 2024
- 318 children in need per 10,000 of the population for Q4 2025-26, above the London average of 283 and the 14th highest in London.
- 85% of six-weekly visits and 94% of 3-monthly reviews happened within timescale over 2025-26. This is a slight reduction on 2024-25 figures (88% and 96% respectively) but remains positive.

Our Child in Need Panel continues to provide strong oversight of work in this area, aiming to improve the quality and timely ending of a plan. Most children only need to have a plan for a short time. Longer-term cases typically involve adolescents with complex risks, children with disabilities or families with no recourse to public funds.

- 55% of children had a CIN plan for 0-6 months over 2025-6
- 17 children had a CIN plan for more than 2 years over 2025-6, down from 21 the year before.

A 2025 audit of children with plans over 18 months found positive, sustained interventions, but also highlighted the need for more consistently outcomes-focused plans informed by the child's voice.

Child protection: The number of children on a child protection plan steadily increased over 2025-6, peaking in December 2025. We also have higher levels of Section 47 investigations and Initial Child Protection Conference than the London average, reflecting high need.

- 419 children had a CP plan as of April 2026, up from an average of 349 in 2024-25
- 63 children had a child protection plan per 10,000 population, compared to the London Q4 average of 38. We had the highest child protection rate in London for Q4.

In the context of increased demand, action is generally timely – but with room for improvement - and robust plans focus on the impact for children.

- 93% of ICPCs were held within 15 days of the Section 47 over 2025-6, well above the London Q4 average of 83%. This is the 8th best performance in London.
- 92% of four-weekly visits and 73% of two-weekly visits were completed on time over 2025-6. Two-weekly visit performance was in line with the London average for Q1-3 but decreased over Q4: We are working hard to address this through close management oversight and by investing in additional staff capacity in the team to reflect higher demand.

We are investing in more Child Protection Conference Chairs to support work in this area. Chairs will also provide consultations and support to social workers and managers on threshold and risk before coming to conference and will act as a critical friend in this regard.

Seeing children alone is an area of focus (59% average 2025-26, rising to 66% for children over 4 years old). Regular dip sample activity highlights there can be varying reasons children are not seen alone, for example, if they reside in a one bedroom property with multiple siblings, or the duty worker has undertaken the visit and it is inappropriate for the worker who does not know the child to see them alone, especially if they are very young. Leaders continue to monitor this performance indicator as we recognise the importance of children being given space and time to talk to the practitioner on their own.

Our Child Protection Oversight meetings provide strong scrutiny of repeat child protection plans and plans lasting over 12 months. Chronic neglect and young adolescents at risk of exploitation continue to be key themes. As with last year, we can see social workers build positive relationships with children and parents, and the positive impact of interventions.

The number of children with a child protection plan open for 2 years or more peaked in July 2025 with 20 children and reduced since then, with 6 children as of April 2026. A 2025 audit of plans lasting for 18+ months found that most were comprehensive, outcomes-focused and supported by specialist interventions, but also identified inconsistent use of risk tools and chronologies. The use and application of these tools remain areas for improvement and are being addressed through targeted training and quality assurance.

Despite pressures, there is clear evidence that child protection plans are effective in bringing sustainable change that reduce risks and keep children safe. 15.6% of child protection plans were repeats for children over 2025-6, compared with 17% in 2024-5 and below the Q4 London average of 19%.

Child and family participation and advocacy: Children and young people going to Initial Child Protection Conferences and Review Conferences are referred to the Barnardo's Advocacy service. The service received referrals for 113 children over 2025-26 to understand why their conference took place, helped them to attend if they wished to, and supported them to share their wishes and feelings. Use of advocacy has increased, and we want this trend to continue. Over the next year, we will also develop a more robust participation programme for parents in relation to children in need and child protection processes.

Safety and contingency planning: Following the 2025 Ofsted focused visit, we have put a focus on improving safety and contingency planning. Our 'risk outside the home' (ROTH) pathway has been rolled out, and training on safety planning has been provided. We have made improvements, ensuring the voice of the child is more central, that management oversight is strengthened and that safety and contingency planning is more robust. This was echoed in an autumn 2025 audit on safety and contingency planning, and in audits on pre-proceeding pathways and pre-birth practice.

Audits have continued to find that safety and contingency plans are not always robust. As a result, in spring 2026 we developed a new safety and contingency tool to strengthen practice and recording in this area, ensuring that the approach we are taking is holistic and contained in the one document. This was launched alongside new staff guidance in June 2026 and will be closely monitored going forwards.

Pre-proceeding pathways: The timeliness of pre-proceeding pathways is improving since the Ofsted 2025 focused visit. We now have much stronger management oversight of pre-proceeding pathways, with a weekly tracker in addition to the monthly reports on numbers, trends and timescales which includes reasons when cases take longer than 16 weeks. All children nearing 12 weeks in pre-proceedings are reviewed to prevent drift.

We now see fewer children in pre-proceedings. 29 children were in pre-proceedings in September 2025, reducing to 15 as of 30 April 2026 (10 cases). As of 30 April, we had only two children (two cases) in pre-proceedings lasting for more than 16 weeks and the reasons were well understood and considered as “purposeful delay”.

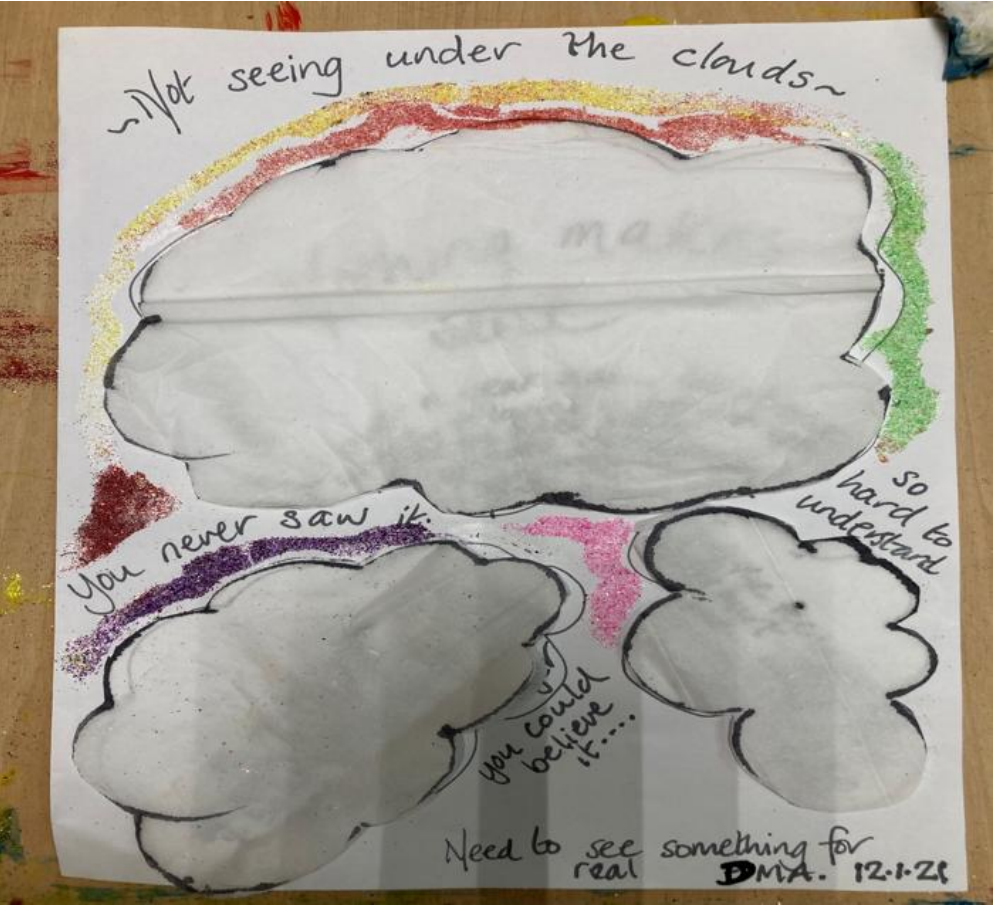
Thematic audits on pre-proceedings in November 2025 and February 2026 found clear improvement in the quality, consistency and timeliness of public law outline (PLO) work across the service. The 2026 audit highlighted that child safety and permanence outcomes have strengthened due to improved oversight and earlier family-finding, that overall timeliness has improved and the children's voices are increasingly informing decisions.

When they did occur, delays were often driven by complex assessments, the commissioning of independent assessment, family circumstances and or missed appointments, or staffing changes.

Our communication to families has improved. Letters now use clearer, more direct language following staff training, and are quality assured before being sent. Indeed, audits in 2025 and 2026 have found letters to be of a good standard. A robust process ensures pre-proceedings letters are timely, sent out within three days of the Threshold of Care Legal Planning meeting.

We are now in the process of recruiting an in-house Expert Court Assessment Service (ECAS) reduce our reliance on external experts and improve outcomes for children. The team will deliver high quality, court-ready expert parenting assessments for children subject to pre proceedings and care proceedings. Roles include Parenting Assessors and a Psychologist, for example, will further improve quality and timeliness of assessments. The team is expected to be in place by September 2026.

All families in pre-proceedings are offered a family group conference, and feedback is that this approach is well-embedded: We will continue to strengthen this through the delivery of the Families First Partnership programme.



Specialist interventions and family support

Children and families get effective support to stay together

Overview: Children and families get a range of specialist interventions that help families stay together safely and get the support they need. Audits consistently highlight our in-house Specialist Intervention Service as a real strength for families and children who need help or protection, providing high-quality, relationship-based work. Social workers value the service, and evidence shows it has a positive impact on children’s safety, wellbeing and family stability.

Therapeutic support: The therapy team in the Specialist Intervention service provides well-regarded, direct therapeutic work with children of all ages, including family, sibling and group interventions. Their contribution extends beyond direct work: they bring children’s voices and lived experiences into decision-making and support continuous improvement across the service.

We have invested in a Hidden Harm worker who supports children affected by parental substance use in an innovative and creative way. We are now looking to recruit an additional worker to support parents and carers with substance use issues.

The therapy team continually improve their own practice: For example, the team led a project to place a cultural lens on play and creative arts therapy to increase cultural consideration in practice and better support children and young people. Bi-monthly systemic team meetings with a cultural lens have been implemented on an ongoing basis to continue this learning.

Family support: The family support team provides flexible support to families and children with a child protection plan or who are on the threshold of this.

The team provide intensive support for as long as the family needs, building confidence in parenting and reducing risk – helping families stay together. The team consistently deliver between 800 – 1500 hours per week of support (1039 hours per week in May 2026), supported by a new practice model that helps families and professionals understand progress and change. The team’s work is enhanced by 42 volunteers who provide mentoring, befriending and practical help such as gardening or decluttering. This holistic, community-based approach is innovative and valued by families. We are looking to expand the number of volunteers in future.

“The constant positivity and the structure to helping me with housework routine has been brilliant and is easy for me to maintain. It will be a shame to see you go but knowing I have reached the point where I don’t need you as much now and that I can do this. The support you have put in place for me if I feel I need it is great. I’m feeling good about it but sad at the same time” – feedback on the Family Support team

Support with family networks: We focus on family networks supporting children:

- The family group conference team do this through mediation, parental support and restorative interventions.
- The family time contact team do this by supporting supervised visits between parents, wider family and children in care.
- We have also launched our Lifelong Links service, which supports children in care, care leavers and others to find and bring together positive people in their life who they want to reconnect with. More information is in the next section.

Wider partnership working: Children and families benefit from a broad range of support commissioned or delivered through the local partnership, including the voluntary and community sector. This ranges from support to young carers via the Carer Centre, to substance use support from CGL and Subwize, to mental health support and support in relation to domestic abuse from Refuge.

Child sexual abuse

Tackling child sexual abuse is a priority across our partnership, and we have made strides over the last few years to help ensure children are safe, heard and get the support they need. Our partnership with the Centre of Expertise on Child Sexual Abuse has been central to this: Staff training and best practice resources have been rolled out. We have embedded the child sexual abuse response pathway with the Centre for Expertise on Child Sexual Abuse, which is bringing clarity to responsibilities at each stage of a child's journey. Our work on child sexual abuse has attracted interest from the sector and Home Office as an example of good practice.

Staff have benefitted from the intensive 10-month Child Sexual Abuse Practice Leads training course and support excellent practice, helping ensure that children get the right response at the right time. We now have 36 practice leads with a further 10 being trained at the time of writing. Weekly 'Think Space' forums with practice leads are well-attended and welcomed by staff, as they enable practitioners to explore complex cases, access tools, build confidence and receive emotional support in this challenging aspect of practice.

Our identification of children is steadily increasing over time. Overall, 12% of children in contact with social care over the last 5 years have had sexual abuse identified at either contact, assessment or child protection stages. Research makes clear that child sexual abuse happens more often than is identified, and we are committed to doing addressing barriers and challenges in this area.

A 2025 audit highlighted sibling sexual abuse as the most common category where child sexual abuse was a factor in an assessment (29 of 132 audited) and we know that this can be a complex area. As a result, we are collaborating with the NSPCC on a two-year 'Stepping Stones' pilot project to strengthen our response and develop effective pathways for addressing sibling sexual behaviour. We currently have families being supported across different stages of the pathway, which will inform a detailed pilot evaluation. Concurrently, training on sibling sexual behaviour has been provided to the MASH service, to new staff, to schools and to the Youth Justice service to strengthen practice in this area.

We have seen an increased volume of referrals in children displaying harmful sexual behaviour and our audits identified room for improvement in this area. We have put a focus on this as a result, through bespoke staff training and our partnership with the Tiger Harmful Sexual Behaviour service run by Barnardo's.

We routinely carry out audits and use findings to drive service improvements. For example, our Practice Improvement Lead recently provided 'Let's Talk About Sex' training to managers, following insights that this was an area some staff did not feel confident in.

The Sunrise Hub provides holistic and child-centred support for children affected by sexual abuse, offering medical assessments, emotional support, and therapeutic interventions. We host the Social Work Lead role at the Sunrise Hub, who works across North East London to support best practice and achieve seamless coordination between health and social care services. The role has been instrumental in breaking down barriers and as a result we have seen a significant rise in children getting health and wellbeing support. In 2025-26, 67 referrals to the Sunrise Hub were made by children's social care. Sunrise Hub staff were invited to 188 strategy discussions, and 71 consultations were carried out with children's social care or partnership staff. The number of referrals and strategy invitations from Barking and Dagenham is the highest of all North East London boroughs.

The identification and initial response to child sexual abuse have improved. However, we know from audits and insights that we have more to do and that practice is not yet consistently embedded across the service. We have the right foundations in place to drive this forward and have clear plans to do this articulated in our multi-agency 2026-29 Child Sexual Abuse Strategy.

Child exploitation

We are proud of our excellent practice to protect children from exploitation. Audits, feedback and insights highlight strong, tenacious practice and expertise that supports families and keeps young people safe outside the home.

A big focus over the last year has been our Risk Outside the Home (ROTH) pathway, which enables practitioners to identify and respond to extra-familial exploitation. We took learning and best practice from University of Durham to develop our approach and worked closely with Child Protection Conference Chairs before launching the ROTH pathway in summer 2025. Since then, our Vulnerable Adolescent Practice Lead has led over 20 workshops to equip staff to effectively use the pathway, and feedback and audits have found this is having a positive impact. As of March 2026, 13 children have been discussed at ROTH conferences, and learning is shared with all Child Protection Conference chairs. We were pleased that in our recent Youth Justice inspection, “inspectors saw effective assessing in relation to exploitation and risk outside the home”, supported by information sharing and multi-agency risk management forums. We will continue to embed ROTH Conferences over the next year and have started to roll out the pathway to partners and colleagues in community safety and housing so that we are working effectively as a partnership to keep children safe outside the home.

Exploitation risk assessment tools are well-used, following increased oversight of timeliness and completion by our senior leadership team. Our Vulnerable Adolescent Practice Lead authorises every risk assessment and has also seen improvements in timeliness. A single exploitation risk assessment has recently been launched to strengthen this further.

Audits have given us a richer picture and driven improvements. For example, a deep dive into global majority children with open child sexual exploitation episodes has informed ongoing exploitation training, which now has a bigger emphasis on adultification and family histories. Learning from child sexual abuse and sexual exploitation audits has strengthened joint work in this area, leading to additional training on ‘curiosity in practice’ and ‘let’s talk about sex’.

Monthly MACE meetings are effective in reducing children’s vulnerability to exploitation and improving safety and outcomes. Meetings focus on all forms of exploitation and consider victims, offenders, location and trends, leading to targeted interventions. When considering whether the child is safe enough to close their exploitation marker, insights are gathered from practitioners, children, and their caregivers: This is reviewed at MACE meetings, and insights then shapes commissioning, strategy, and practice development.

Our multi-agency NRM Devolved Decision-Making Panel is recognised nationally as one of the most successful in the Home Office pilot. Since its launch in 2021, 265 children have been considered, with almost 80% receiving positive Conclusive Grounds decisions. Meetings are well-attended and we continue to learn and evolve with the support of our NRM coordinator.

At the end of an exploitation episode, we explore with young people and families what made the difference and supported the young person to feel safe. Tenacious social workers who care and committed youth justice workers is the main theme in feedback. The same themes are reflected in audits, and we were pleased to see this reflected in our youth justice inspection report, which found “skilled and motivated practitioners” who “understood their children well and engaged them effectively in activities to achieve positive change and promote safety”.

Our multi-agency Adolescent Safety and Wellbeing strategic group drives improvement, and we have recently refreshed our Adolescent Safety and Wellbeing Strategy for 2026-31, driven by the views and experiences of children, families and staff across the partnership. The strategy commits the partnership to the eight multi-agency practice principles published by Research in Practice, with a focus throughout on early family help and inclusive, trauma-informed responses.

Neglect

We have continued to lead system-wide improvements to tackle neglect for children and families. This improvement work was launched at a partnership Neglect Symposium in March 2024. Since then, we have delivered a series of roadshows and training on how to identify neglect across our wider workforces, ensuring that neglect is identified as early as possible and responded to effectively.

Prevention is a key focus, including the links between neglect, poverty and housing. An important aim of the local authority anti-poverty strategy is to “reduce the immediate risk of neglect and improve infant wellbeing by providing early, practical support to families during the first year of life”. To strengthen this, we successfully launched our Baby Box programme in 2026 to support parents with essential items and guidance during the newborn period.

We have improved support to families in temporary accommodation by opening a local primary school at weekends for families who otherwise would have no access to cooking or laundry facilities, as well as much-needed space for children to play. Local authorities who move families to temporary accommodation here do not always notify health partners promptly, leaving families at risk of not getting the support they need. In response, regional action has been taken to improve the notification process and specialist roles in health visiting and school nursing have been created to support families in hotels and hostels. We are continuing work to strengthen information sharing and delivering rapid responses and interventions that support the bespoke needs of children and families.

To strengthen prevention, we are supporting more vulnerable young people to remain and succeed in education. The Future Frontiers programme, for example, supports young people from disadvantaged background to realise their potential at school and achieve post-16 qualifications through coaching and career guidance. Young people have reported positive outcomes, including increased confidence and motivation.

We have continued to embed best practice on neglect through use of the Graded Care Profile 2 (GCP2) tool. Training on the GCP2 tool is mandatory for new staff and is routinely offered to existing staff. In addition, training on the antenatal GCP2A has been delivered to health visitors, midwives, the Baby Intervention team and the Family Support team and will shortly be rolled out relevant partners and workers. A screening tool has also been rolled out to any other children's professionals not trained in GCP2 to use as a basis for referrals, particularly for our schools to make use of.

An appreciative enquiry report on the impact of the GCP2 found improvements for children when the tool was used. Our target is for more children referred to Targeted Early Help or Children's Social Care with neglect as a presenting factor to have the GCP2 tool completed alongside their assessment, and we are making steady progress towards this, with more to do: The tool was used with 45% of relevant assessments in April 2025, increasing to 56% as of June 2026. We are now looking at making changes to our Liquid Logic system to further embed the tool in our systems and processes.

Our Neglect Strategy sets out our future plans to tackle neglect, closely overseen by our safeguarding children partnership. Over the next year, actions include the development of a shared practice framework on neglect as part of the Families First Partnership programme, training on new toolkits including the Emotional Based School Avoidance Primary and Secondary Toolkits and continuing to learn local and national reviews, audits, feedback, and insights.

Other vulnerable groups

Domestic abuse: Domestic abuse remains a critical issue impacting children and families in the borough. Provisional data for 2025-26 indicates that domestic abuse is a presenting factor for 22% of children's social care contacts annually and 36% of children had domestic abuse as a factor identified at the end of a children's social care single assessment. The Safe and Together model is increasingly well embedded, supported by regular training and consultation from the Safe and Together Implementation Lead. This ensures practitioners maintain a strong focus on the perpetrator's behaviour and partner with survivors to keep children safe.

Weekly consultation meetings and the Implementation Lead's attendance at all strategy meetings where domestic abuse is a factor strengthen decision-making. Regular audits show progress in child-centred and multi-agency practice, while also highlighting that more work is needed to embed Safe and Together consistently across all teams. A broad range of training packages is provided by our survivor and perpetrator commissioned services: These courses were informed from domestic abuse practice review learning and are evaluated positively by our staff. 106 staff attended domestic abuse training in 2025-6.

The Domestic Abuse Risk Assessment for Children (DARAC) tool is part of our approach, and training on this was provided to all children's social care and targeted early help staff in 2025. We have made steady progress in using the DARAC tool in early help and single assessments but still have a way to go: The tool was used with 14% of relevant assessments in April 2025, increasing to 54% in June 2026. Audits similarly highlight that we have made progress and have more to do.

The Support 2 Safety (S2S) domestic abuse team in the MASH was launched in 2023 and has strengthened the quality of decisions with the needs of perpetrators being routinely considered. An evaluation in 2025 showed significant successes, with an average of two additional referrals to MARAC per week, as well as positive referrals into our domestic abuse commissioned

services. There was a reduction in 'no further action' outcomes. After a slight delay, we are now progressing plans to mainstream our pilot and recruit in-house domestic abuse practitioners into the service to continue to build excellence in practice.

A wide range of support services is available across the partnership, and we have invested in commissioned services for survivors, perpetrators and children. Perpetrator interventions are in place, including a Men and Masculinities programme run by Cranstoun. Reset works with young people displaying concerning behaviours. A Young Person's Advocate and outreach worker supports children impacted by domestic abuse. Trauma-informed therapeutic support to children and young people is available.

Earlier audits highlighted that referrals were not always timely as practitioners did not necessarily understand how to access these. As a result, we have developed SISDAS a one-stop, multi-agency referral panel that ensures children, survivors and perpetrators get the support they need. In addition, our Hidden Harm worker is able to support children alongside therapists in the Specialist Intervention Service, ensuring joined up and holistic support.

Our approach to domestic abuse is part of a wider, council commitment and Community Safety Partnership Board priority to tackle violence against women and girls. 'Healthy relationships' and 'talk consent' programmes run in schools, who have also signed up to an Inclusion Pledge to support children's rights. Training and staff development programmes are in place across education, health and the Police – raising awareness that has impacted contact and referral levels.

The Safe and Together model will continue to be embedded over the next year: We want to ensure the DARAC tool is consistently used, that patterns are consistently identified when contacts and referrals are made, and that there is a full understanding of culture and intersectionality in relation to domestic abuse.

Children with special educational needs or disabilities: Our 2024 SEND area inspection noted that 'leaders are ambitious for children and young people with SEND' and 'have worked hard to manage the increased demand placed on services and the significant increase in children and young people arriving into Barking and Dagenham'. 240 children open to social care had an active EHCP plan, of which 36% are with the Children with Disabilities service.

We are proud to have maintained a strong culture of inclusion for children with SEND. We have pioneered the development of Additional Resource Provisions (ARPs) at scale, enabling 631 children requiring specialist provision to attend local mainstream schools. Our SEND Area Partnership continues to drive forward improvements and deliver inspection recommendations.

The support to children and families with disabilities in social care continues to go from strength to strength since the service joined children's care and support in 2023. Early help is prioritised by our Portage Team through dedicated support to families and children aged 0-5 with a new diagnosis, and via our Children with Disabilities Hub that provides valued information, advice, activities and support to children and families in one accessible location. Our 'team around the family' approach promotes multi-agency working and targeted interventions. The Hub has extended its offer to children without a school place, enabling tuition to take place alongside support with development such as motor skills, emotional regulation and potty training. Our specialist social work team supports those children where there are concerns around safeguarding, or where parents are struggling with parenting, always trying to support children to remain living safely with their families where possible.

A good short breaks and respite offer is in place to support children with disabilities and their families. This is currently being reviewed to provide children and families with a wider choice, options for overnight breaks and an increased focus on early family help that prevents crisis. The new offer is due to launch in 2027.

The transition to adulthood has improved, with more to do. A recent [Care Quality Commission assessment](#) of the local authority noted that transitions to adult social care are planned earlier than before, and that plans need to be

of a consistently good quality. A Preparing for Adulthood programme is being developed to build on this progress: The programme brings together social care and partners to introduce earlier transitions and build skills, independence and community-based support earlier in the pathway.

Young carers: Young carers continue to receive dedicated support including group activities, coaching and respite. The Carers Centre provides an accessible base for young carers and staff work closely with practitioners to safeguard young carers. Our 2025 [Care Quality Commission](#) assessment rated the local authority 'outstanding', noting that "this dedicated attention helped young carers receive early, appropriate support and reduced risks associated with hidden caring roles." Our Carers Charter sets out our commitments to young carers and has recently been co-produced with people with lived experience.

No recourse to public funds: Since the team joined children's care and support in 2023, we have put a real focus on ensuring consistently good practice. Joint working with service providers and housing and regular reviews have been strengthened, resulting in more joined up support that empowers families and ensures children get the support they need. The progress we have made can be seen in the positive feedback we hear from families.

Children at risk of homelessness: We have continued to improve support to children aged 16-17 who are homeless, driven through our Children's Homeless Strategic group.

Our dedicated Homeless Lead Social Worker supports best practice, working closely with practitioners and housing colleagues to help ensure children get the holistic support they need. Our 16-17 homeless protocol sets out a clear process and expectations that staff follow to provide effective support. A streamlined referral process has been introduced to ensure young people can access critical support faster and more easily than before. Over 2025-6, housing allocations were consistently made within 48 of referral.

45 young people aged 16-17 presented as homeless, or at significant risk of this over 2025-6, driven by multiple and overlapping needs. Of these, 26 young people were accommodated under Section 20, 14 young people were supported under Section 17 arrangements where accommodation was needed but family-linked support remained viable, and 5 young people were able to return home or access alternative outcomes.

Restorative work is introduced early and is particularly effective with parents or carers who are able to meaningfully engage. Our Specialist Intervention Service provides rapid restorative interventions and application of family group meetings. Young people can also get support from Lifelong Links, reconnecting with positive people in their lives.

Partnership work with education, CAMHS and Subsize substance use support is strong, and there is good multi-agency attendance at Joint Homelessness Assessment meetings. Partnership with commissioning colleagues led to suitable semi-independent accommodation facilities for young people who require this type of placement, including ‘short term’ crisis placements whilst an assessment take place.

Our Children’s Rights Officer supports young people to make informed decisions on their accommodation route. Advocacy is well-embedded and was taken up in 84% of cases in 2025-26, resulting in young people having a better understanding of rights and entitlements, and decisions were better-informed.

Engagement with children shapes service design. We met with young people to hear their experiences and views and heard positive feedback on the service. Young people asked for clearer information on timeframes, so we are now planning to co-design information and leaflets to improve this. Coram young ambassadors also facilitated a session with our young people and were impressed with the level of collaboration and the holistic offer for young people.

Children in contact with youth justice service: Children who are with both children’s social care and the youth justice service (46 children as of June 2026) benefit from holistic support. The Adolescent and Youth Justice teams

operate as one service with a strong focus on contextual safeguarding. Joint supervision and auditing strengthen practice. The multi-agency service includes practitioners from CAMHS, speech and language, police, youth services and education.

We have recently partnered with Skill Mill to provide employment opportunities for young people open to the youth justice service aged 16-18, and four young people who are also known to social care have joined the first programme.

“The opportunity was too good to miss. What I like so far is that learning new things from the team and working together has actually been fun” – young person who has joined the Skill Mill programme

Our recent [HMIP inspection](#) assessed our youth justice service as good with outstanding features, finding that “planning practice was comprehensive and effectively addressed children’s needs and safety”, and that “delivery to achieve positive change and keep children and communities safe was consistently of high quality, with services and support responding to children’s needs”.

Missing children: 100 children had at least one missing episode in Q3 2025-26. Most were open for less than 24 hours. Routine, timely return home interviews take place and close management oversight of these takes place. A monthly Missing Children Operational Panel reviews the most frequent or high-risk cases, ensuring multi agency oversight and planning to reduce the frequency and duration of missing episodes for the most vulnerable children in this cohort. Themes and quality of practice are shared.

Attendance and children missing education: School attendance in Barking and Dagenham is good. Overall school year attendance over 2024-5 was 94.5% compared to the national average of 93.6%. 16.3% of pupils had persistent absence, compared to 17.8% nationally.

School attendance for children in need of help and protection is closely monitored. There is detailed oversight of children's attendance, with a weekly tracker shared with social workers and schools. We are currently developing an education and social care dashboard, bringing together education data for children in social care in one place to strengthen oversight. Virtual school colleagues support social workers in helping children with good attendance, and "vulnerable hot clinics" enable issues to be addressed together with schools and early help services at an early stage.

The Aspire Virtual School tracks attendance, attainment and progress, delivers training to designated teachers, social workers and foster carers; provides consultations with practitioners on attendance and other education issues and attend strategy and other relevant meetings.

Monthly joint children's and education dip samples are undertaken, reviewing children's plans and how they address and impact good school attendance and achievement. This has led to a 3% increase in school attendance between 2023-24 and 2024-25 for children in need, with persistent absence levels that are below the equivalent national average. Attendance for children with a child in need plan as of June 2026 was 79%, and 82% for children with a child protection plan.

Elective home education: We have continued to see a rise in the number of children who are home educated. The overall figure was 660 children in May 2026, up from 480 in February 2024. 211 children have had previous social care involvement, and 19 children who are home educated are currently open to social care. Information sharing between services remains efficient and timely, enabling good joint work between education, social care and others with proactive contact with families.

Robust systems and thorough procedures to safeguard home educated children remain in place. A database is maintained of all children known to be home educated in the borough. We are currently developing a shared dataset between education and children's social care, which can support multi-agency working and provide a holistic view of each child.

Allegations against professionals: Our arrangements to manage allegations against professionals and carers are established and well-regarded. This complex area continues to be well-understood across the partnership, with the LADO raising awareness through providing multi-agency training and targeted training to schools. There was a 12% increase in contacts between 2024-5 and 2025-26 compared with the same period in 2024-25. A small proportion met the allegation threshold.

Referrers get timely, high-quality advice that supports them to ensure children are consistently safeguarded.

- 100% of referrals which met threshold received a threshold decision in 24 hours and safeguarding advice issued.
- 91% of contacts which met threshold had an Allegation Strategy Verification (ASV) meeting held within 5 days. Of those which fell outside, 6% were due to contacts received on the last day of term before a school holiday and 3% due to availability of relevant professionals. All had LADO oversight and any perceived risk managed with the purpose of safeguarding children.

Section 3:

The experiences and progress of children in care



Children in care – an overview

Our promises: We are committed to being the best Corporate Parents we can be. Our Corporate Parenting Strategy sets out clear promises to children in care and care leavers, and these guide our practice, decision-making and improvement work:

- Promise 1: To make sure you get the best care.

Promise 2: To look after you and treat you well.

Promise 3: To keep you healthy.

Promise 4: To help you get the best education.

Promise 5: To help you be successful in life.

We are currently reviewing our promises and commitments in partnership with children in care, through the refresh of our Corporate Parenting Strategy. The new strategy is due to be in place in September 2026.

Children in our care: 402 children were in our care as of June 2026. The number and rate of children in care have steadily declined from a peak of 68 per 10,000 in 2023-24 to 60 as of April 2026. Fewer children are coming into care – 193 entered over 2025-6 compared with 215 the year before, a 10% decrease - reflecting effective work to help children remain safely at home, including effective work for children with a child protection plan.

Children of a White British and children of mixed heritage backgrounds are overrepresented in care, whilst children of Black or Asian ethnic backgrounds are underrepresented. However, there are indications this is changing over time, with the profile of children entering care moving towards more proportionate representation for children of a White British and Black ethnic background.

The age of children in care is shifting slowly upwards - 41% were aged 10–15 years over 2025-6, and 32% are aged 16–17 – and is older still than national averages. This partly reflects timely, effective work with younger children,

preventing unnecessary entry into care. These trends are being used to shape sufficiency planning, inclusive practice and early help priorities.

What we are proud of: Strong, relationship-based practice and support results in positive outcomes for children in care. Family Group Conferences and family support workers are well embedded, helping children maintain and strengthen family networks. The new Lifelong Links service is having a positive impact by reconnecting young people with important people in their lives.

Most children live in foster or kinship care. Recruitment and support for foster carers continues to get excellent feedback, and our investment in Mockingbird Hubs is leading the way in providing stable, nurturing networks that strengthen relationships. Hubs provide children with enriching opportunities, a chance to be part of ‘an extended family’, and foster carers feel well-supported.

Wellbeing and education outcomes show the positive impact of support to children in care. Key stage 2 and 4 results are above the national average for children in care, impacted by robust, wraparound support with education. Self-reported emotional wellbeing for children in care is likewise better than benchmarks, impacted by excellent therapeutic and emotional support.

What we are improving: Placement stability remains an area for improvement. While some moves are positive and planned, others reflect placement pressure or breakdown. We are addressing the drivers behind this, including via support to carers and therapeutic and relational interventions.

We are working to improve the timeliness of formalising plans for children to remain with their long-term foster carers by ensuring consistency in timeliness of PPM meetings and stronger management oversight.

We want sufficient local, good quality support and are committed to this through our Sufficiency Strategy. We are developing our own children’s homes to improve residential care options for the small number of children who need this, alongside a focus on preventing the need for residential care and keeping families together. Children in unregistered provision are a priority, and a detailed programme of work is in place to prevent and cease use.

Support from family networks

Children and young people are supported by their family networks

Edge of care: A key priority in our CARES Practice Framework is to keep children at home or within the family network, with people who know and love them, when it is safe to do so. We work purposefully with families and partners to prevent children entering care, working in partnership with the whole family. Family Support Workers in the Specialist Intervention Service play a critical role, offering intensive support for as long as a family needs. Audits have highlighted the positive impact workers can have in relation to neglect, by working with parents to build confidence and reduce risk. As previously noted, the team consistently deliver between 800 – 1500 hours per week of support and work closely with others to support children and families.

Family group conferences: We have a well-established approach to family group conferencing led by a team who also provide mediation, parental support and restorative interventions that help children be safe and supported by family networks. Over 2025-26, 116 children benefitted from restorative interventions and 173 families had family group conferences. The feedback we get from families on family group conferences is positive, with 95% of respondents reporting it helpful or very helpful to come together as a family. We will have a family group conference meeting for every child from March 2027.

Family time contact team: The team continue to provide good quality support that enables children to maintain safe, meaningful contact with their families. The team is an intervention service rather than just an observation service, and families have provided positive feedback that they feel supported and respected. The team enable an average of 290 hours of family time per week, at venues across the country. The team also provide sensitive 'goodbye for now' family time for children who are being placed for adoption.

Placed at home with parents: 19 children were placed at home with parents over 2025-6, compared with 31 in 2024-5. We have improved monitoring of children placed with parents and provide good wrap around support to both families and children. This cohort tend to be children in care proceedings on an interim care order where the Court has not agreed separation pending proceedings, or older adolescents who have 'voted with their feet' and returned to their parent/s care against the care plan. We recognise family circumstances change, and children can be reunited safely with the right support in place. 45% of children leaving care over 2025-6 did so due to reunification.

Kinship caring: 40 children were in kinship placements over 2025-6 compared with 50 over 2024-5. Special guardianships often involve family in the child's extended network, and 13 children had a special guardianship order granted over 2025-6.

Regular and robust support is provided to carers, including through support groups, coffee mornings, events and regular communication. Carers are part of our Mockingbird Hub model, creating an 'extended family' network with structured respite, peer mentoring, shared learning and training.

The Specialist Intervention Service support children and families in kinship care. The relationship between kinship carers and parents can sometimes be pressured or fragile. To address this, we are exploring additional family support worker and mediation roles to strengthen stability and reduce conflict. Our Family Contact team will also be supporting contact arrangements to relieve kinship carers from some of this pressure as we recognise this can often be a catalyst for arrangements becoming fragile. We are also proud to be one of the first boroughs to publish a Local Offer for Kinship Carers, improving transparency and access to support.

Lifelong Links: Our grant-funded Lifelong Links service was launched in 2025 and has quickly become a significant strength in supporting children to connect with family networks and friends. The aim is to find and bring together important positive people in the young person's life who they have identified as people they would like to reconnect with, to provide them with ongoing support. As of May 2026, we have supported 51 young people aged 11 to 21 years old. Some have reconnected and have overnight stays with family and friends, attended family events such as birthday parties, have plans to go on holiday with the people they reconnected with, and stayed in contact with important professionals such as teachers, previous foster carers and social workers when they have had to move on. We have also supported young people to explore whether they can reconnect with brothers or sisters who have been adopted or live with someone else.

Out of borough: Most children in care continue to live close to home. 84% of children lived within 20 miles of their home over 2025-6 (similar to 2024-5) enabling continuity of school, friendships and family relationships – compared with 78% for England and 82% for London. Of those 16% that are placed more than 20 miles, we know that the majority are living in surrounding areas overall, for example Essex, Kent, and other London boroughs.



Staying safe

Children in care are safe

Coming into care: 191 children entered care in 2025-26, which is an 11% reduction on 2024-5. Children aged 10-15 years and 0-4 years made up the biggest groups of children entering care (37% and 26% respectively). The right decisions are generally made at the right time, and audits including on pre-proceeding pathways have confirmed that clear legal thresholds are applied.

The breakdown of children in care by legal status over 2025-6 shows:

- 30% of children are subject to Section 20 care
- 28% of children have an interim care order (ICO)
- 38% of children have a full care order (FC)
- 2% of children have a placement order.

Police protection: Significant improvements have been made in reducing the number of children entering care via police protection. 54 children entered care via police protection in 2024-25, reducing by 35% to 35 children over 2025-6. Breaking this down further shows 3 children entered care via Police Protection between November 2025 and February 2026, with 9 children in March 2026 due to a single incident.

Close management oversight has helped address this, including notifications to and oversight from Director of Operations. We have worked closely with the police to improve our communication and take early action that avoids the need for police protection. This was echoed in an autumn 2025 audit which found improved multi-agency coordination, with progress made in how the police liaise with children's social care and the Emergency Duty Team prior to invoking powers of protection. The impact of our neglect improvement journey is also having a positive impact, enabling neglect to be picked up at an earlier stage before things escalate. A recent audit found that police protection decisions over April and September 2025 were proportionate; and the audit highlighted the need to continue to focus on prevention. We are now we are

exploring alternative settings with the Police so that children are not brought to police stations in an emergency.

Regular meetings: Social workers know their children well and continue to be significant, consistent people in their lives. Over 2025-6, 87% of children and care had an up to date six-weekly visit, increasing to 93% as of April 2026. This timeliness means any risks to safety are quickly identified and addressed, with a focus on early and holistic support. Routine practice audits continually highlight good practice in child-centred practice, hearing the voice of the child and building strong, trusting relationships.

Independent Reviewing Service: This service was highlighted as a real strength in our last Ofsted ILACS inspection and continues to do excellent work with children in care. The team is well-established, and Independent Reviewing Officers provide consistency and stability in relationships for children and young people over the long term. 97% of reviews were completed within timescale over 2025-6 (up from 95% in 2024-5), enabling issues to be addressed in a timely way. The team put a focus on the participation of children in the review process, and 90% of children aged 4 years or over participated before and during their meetings over Q1-3 2024-25.

Following the March 2026 focused visit for children in care and permanence, changes have been made to IRO midway reviews are consistently evidenced, so that this positively impacts permanence planning.

21 practice alerts (i.e. concerns) were raised by IROs on behalf of young people in 2024-25, down from 246 the year before. 10 alerts recognised good pieces of work. Drift and delay in plans being progressed and reports not being prepared in good time ahead of review meetings were the main themes arising from practice alerts that were concerns. These have been responded to individually, and we have also looked at wider learning for the service.

“What really stands out is the warmth and care you bring to your role. It’s clear how much you value the children’s voices, making sure they’re truly heard and at the heart of every decision. Not only that, but the way you also look after and support the carers who are looking after these children is just incredible. That balance of advocacy and empathy is something really special and it makes such a difference” (foster carer)

Wellbeing and Mental Health Practitioner provides consultations on how to support LGBTQ+ young people in relation to health and wellbeing. This work is helping us better understand identity, belonging and safety for LGBTQ+ children, and is shaping training and practice expectations across the service.

Unaccompanied asylum-seeking children: The number of unaccompanied asylum-seeking children that are looked after has slightly decreased from 24 in 2024-5 to 18 children in 2025-6. The figure remains below the 0.1% threshold number set out by the Pan London Rota and National Transfer Scheme, which equates to 66 children. We remain part of the transfer scheme and have taken additional children from Kent when they have reported particular pressures.

Our young unaccompanied asylum-seeking children tend to enter care later and require tailored support to prepare for adulthood. Practice guidance has been strengthened to support social workers and leaving care advisors in working with children without confirmed immigration status. Workers provide sensitive, trauma-informed support with an awareness of cultural and religious needs. Our work was recognised positively both in our last ILACS inspection and our most recent focused visit.

Understanding needs: We maintain a detailed knowledge of the needs of children in care and respond proactively to emerging issues. For example, we are currently working to improve the experiences of LGBTQ+ children in care through our LGTQ+ Social Care Action Plan, informed by national research and understanding practice and attitudes through an innovative programme of work.

Resources for staff to better support LGBTQ+ young people have been shared, including a directory for referrals, resources on LGBTQ+ terminology and a resource list for young people who are LGBTQ+ and Muslim. Our Emotional

Stable, loving homes

Children in care have stable, loving homes

Fostering: We are proud that most of our children in care grow up in family settings. 70% of children in care were in foster and kinship care over 2025-6, which is higher than the England, London and statistical neighbour averages for 2024-25 (67%, 68% and 66% respectively). 25 children started living with long-term foster carers over 2025-6. This reflects our clear sufficiency strategy and our commitment to ensuring children experience stable, nurturing family life wherever possible.

An average of 120 fostering households were active over 2025-6. We maintain a continual focus on recruiting and retaining high-quality foster carers. We want to ensure that foster carers match the changing profile of the borough and have invested in a permanent foster care recruitment manager to help with this. Foster carer recruitment activity has been shaped by joint work with Skittlz (our children care council) who emphasised the importance of foster carers being motivated by values rather than money earned.

Our Mockingbird Hub model is leading the way in how foster carers and children are supported. Nine hubs are operational, each supporting approximately 10 families, creating an ‘extended family’ network with structured respite, peer mentoring and shared learning. Alongside this, foster carers access a high-quality training programme, including therapeutic input and monthly “creative clinics” focused on emotional wellbeing. Carers report feeling trusted, valued and well supported, and this is reflected in stable retention rates.

“As new foster carers, Mockingbird meant that we had a group of carers with vast experience supporting us, advising us, helping us and giving us a break when we needed it. I believe we became the carers we are because we learnt from them” (foster carer)

Private fostering: There were 5 private fostering arrangements over 2025-26. We keep close oversight of arrangements and see children regularly (100% of visits were within timescales as of April 2026) to understand their experiences, wishes and feelings.

Adoption: We continue to be an active partner in the Adopt London East group, which supports adoption across Barking and Dagenham, Havering, Tower Hamlets and Newham. There were 16 adoptions in 2025-26, up from 8 in 2024-25. This is 7% of all children leaving care, above the London average of 5%.

Timeliness is challenging and reflects national pressures. The three-year rolling average for 2023-26 between entry to care and placement is 759 days. Parental challenge of placement orders and time to find a family for children with additional needs continue to be themes that can impact timescales.

ALE continues to offer strong support to our social work teams, children and families. We see some wonderful matches between our children and their adoptive parent’s where children’s cultural needs and personalities have been carefully considered and matched

Residential care: We use residential care appropriately for children whose needs cannot be met in family settings. The number of children in residential care has slowly reduced over the last five years and is below benchmarks, reflecting positive work to keep children in family settings.

- 45 children were in residential care in 2025-26, down from 54 children in 2020-1
- 11% of all children in care were in residential care in 2025-6, compared with the national and London 2024-25 average of 13%

There is strong senior oversight. Our Director and DCS reviews all requests for residential care and ensures that proposals have input from the Independent Reviewing Service, virtual school, CAMHS and placement team.

The placement team work hard to find the right residential care provision for each child. We want to make sure that the small number of children in residential homes get the best quality care in the borough. However, challenges remain with the external residential market, particularly around cost, quality, sufficiency and distance from home. For that reason, we applied and have secured £5m funding from the Department of Education to develop our own children's homes. Delivery of this programme is a priority, intended to improve quality, reduce distance placements and strengthen oversight.

Unregistered placements: Addressing use of unregistered provision is a top priority. Rigorous processes and oversight are in place for children in unregistered provision, and detailed plans are being delivered to prevent and avoid use in future.

An extensive registered residential search is undertaken for children who need this. Unregistered placements are only considered in urgent and exceptional circumstances when no suitable regulated provision is available. As of 20 June 2015, three children with complex needs were living in unregistered provision, aged 15, 16 and 17 years. Robust and effective arrangements monitor the welfare of children whilst they are living in unregistered provision.

Persistent efforts are undertaken to move children on to registered children's homes; and to support providers to register with Ofsted. The number of 16–17-year-olds in unregistered provision has reduced from 25 young people in April 2025, when a significant proportion of supported accommodation were in the process of Ofsted registration. We are now continuing our trajectory towards zero children living in unregistered provision.

Every placement is reviewed and authorised by the Director of Operations and DCS, who seek assurance that every other viable and safe option has been exhausted and that detailed checks and risks assessments have been carried out. Detailed arrangements have been further strengthened to monitor the welfare of children whilst they are there. The frequency of social worker visits has increased since our Ofsted focused visit in March 2026, with expectations set out in our refreshed staff guidance. Regular reviews and visits to care settings from our Provider Quality and Improvement team are carried out.

Continual visits, safety plan updates and provider updates take place and are reviewed. Persistent efforts are taken throughout to identify alternative placements and to support providers to register with Ofsted.

Our already strong management oversight of children in unregistered provision has been further strengthened. Our 'tracker' has been updated to reflect our refreshed staff guidance, providing a holistic view of decision-making, each child's welfare and future plans. This is reviewed and discussed weekly by the DCS and Directors at a 'gold' meeting.

Children in unregistered provision or at risk are discussed by managers in fortnightly Permanence Panel meetings. Actions and timescales for regulated placements and permanence are driven forward. Fortnightly Children's Placement Review and Analytics meetings enable social work and commissioning managers to track children's progress, identify alternative placements, support registration and drive placement availability.

To date, the tracker and in-depth audits show generally good compliance with guidance. An audit in early 2026 found strengths around the quality of social work visits to children. Consideration of special circumstances and risks were identified and addressed in all cases, and both IRO and management oversight was strong. The audit found that consistency was needed on compliance with timescales and provider oversight, which has since improved.

Actions are being delivered to strengthen sufficiency, described more in the next section. We have also accelerated plans to prevent further use of provision. Alongside our ongoing focus on foster carer support to strengthen stability, we are:

- Progressing our collaboration with Reset to support children with complex needs. This brings a different approach to reduce the risk of the need for Deprivation of Liberty orders and get more children back to a family arrangement where possible.
- Recommissioning short breaks for children with disabilities and their families, with a view to increasing options for overnight breaks and supporting children to remain at home.

- Commissioning a thematic review into girls who experience or are at risk of significant harm. We anticipate this will include learning on the prevention of residential care use.
- Organising partnership workshops following a Safeguarding Children's Partnership Board discussion, with a view to strengthening CAMHS and partnership support to prevent and address use of unregistered provision.

Overall, strategic oversight of work to address unregistered provision is held at monthly improvement meetings, the Children's Improvement Board, which reports to the Corporate Assurance Board.

Sufficiency: We have recognised the need to strengthen sufficiency to prevent the need for unregistered provision. Following the Ofsted focused visit in 2026, we have agreed short- and medium-term actions in our Children's Care and Support Improvement Plan. These are underway and include:

- Reviewing policies and current planning arrangements.
- Plans to pilot test-and-learn bespoke solutions for children at risk of breakdown.
- Improving relationships with local providers.
- Looking into procurement for a pilot development to 'block book' a home to avoid emergency placements.
- Work with housing to look at internal, alternative options.
- Input from partners, including CAMHS, to meet complex mental health and associated needs for children in or at risk of unregistered provision.

Our longer-term plans are set out in our refreshed 2026 Sufficiency Strategy. The development of our own children's homes forms a key part of this, the first of which is due to open in 2028.

Stability: We want more children living in long-term stable homes. We have more to do in this area, although the picture is complex. A deep dive in 2025 identified that that challenging behaviour, complex needs or foster placement breakdowns are themes impacting this; and that positive reasons are also in

- play, including moves to be reunified with brothers and sisters or stepping down from residential to foster placement.
- 62% of children in care were living in long-term, stable homes over 2025-26. This was 60% in 2024-25, below England and London benchmarks of 69% and 68%.
 - 14% of children in care had three or more placements over 2025-26. This was similar to the 13% in 2024-25 and is slightly below the England and London benchmark of 10%.
- Children in our care are generally older than the national profile, pointing to the need for care than meets the needs of older children. We are progressing plans with this in mind, including our refreshed Sufficiency Strategy.

Permanence: We are committed to ensure that all children have safety, security and stability. 137 children (33%) of all children currently in care had achieved permanency as of June 2026, up from 129 in February. Permanence plans are robust, and almost all children have them. The one child who did not – as of April 2026 – had entered care that month and planning was underway.

We recognise that Permanence Planning Meetings (PPMs) were not always timely over 2025-6 and that this impacted the timeliness of formalising plans for some children to remain with their long-term foster carers. Overall, 56% of children over 2025-6 tracked for regular PPM's did not have an up-to-date meeting in accordance with our Permanence Protocol. This was reflected in our 2026 Ofsted focused visit, and we have since made improvements by:

- Refreshing our Permanence Planning Meeting tracker to enable better management oversight and action. The tracker is reviewed fortnightly by our Head of Corporate Parenting and Permanence and IRO lead.
- Refreshing our Permanence Protocol, with clear expectations on timeliness and quality.
- Moving to Permanence Planning Meetings being chaired at Service Manager level to improve oversight and assurance.

This work is overseen by our Permanence Taskforce, who scrutinise all children without confirmed permanence.

Supporting health and wellbeing

Children in care are supported to thrive

Life story work: We are committed to ensuring children understand their history and identity. Therapeutic life story work is part of this commitment, so children are supported to make sense of their past and understand how it impacts on their present. In-house training for social workers and foster carers over the last three years has strengthened practice. An audit earlier in 2025 found some outstanding practice, with a positive impact on children and young people. Life story work is complemented by the work of the therapeutic team, the Lifelong Links service and the Caring Life app – supporting children to understand their family story and their journey through care. A follow-up audit in early 2026 found clear examples of strong-trauma informed life story practice using creative tools, but inconsistent implementation, oversight and evidence of some delays. To strengthen our approach, we have committed to training 140 additional social workers in life story work over spring and summer 2026 using the model developed by Richard Rose: This will equip more social workers with excellent practice skills to support children's across children's care and support.

Mental and emotional wellbeing: The mental and physical health and wellbeing of children in our care continues to be an area of focus, with particular progress on mental health over the last year.

The Strengths and Difficulties Questionnaire is an indicator of the emotional wellbeing of children in care. The score for children in care in Barking and Dagenham is consistently below benchmarks and is improving, indicating better emotional wellbeing.

- 10.1 score over 2025-26 – a steady decline from 2023-24.
- 14.7, 13.8 and 13.7 scores in 2024-25 for England, London and statistical neighbours respectively.

Our investment in our Emotional Wellbeing and Mental Health Worker role continues to provide excellent support to young people aged 16-25 years and supports staff with best practice in this area. Therapeutic interventions for children, teenagers and sibling groups are available via our therapy team in our Specialist Intervention service, positively impacting the stability of children in care.

A pilot across North East London to support unaccompanied asylum-seeking children in a more holistic, trauma-informed way has continued. This pilot involves children get a holistic health assessment that includes mental health and universal infectious diseases. It has received positive feedback, although health assessments can sometimes be delayed due to medical staff availability.

Health checks: The vast majority of children have had an up-to-date health assessment: 92% over 2025-6, up from 86% in 2024-5. Some focused work took place to reach out to children not engaging with health assessments, which has had a positive impact.

The timeliness of initial health assessments (IHA's) when children come into care continues to improve (from 48% in 2024-25 to 61% in 2025-6) but should still be better, and we are working hard to improve this. Careful tracking and analysis at the health zoning meeting and Corporate Parenting sub-group means we understand the reasons for delayed IHA's, which include delays in receiving written consent from parents. This understanding enables us to better address issues. The quality of health assessments has improved through co-production with care-experienced young people.

Improvements are still needed to increase the number of children in care who get dental and eye checks. 56% of children had an up-to-date dental check in 2025-26, and 61% had an up-to-date eye check. A new dental training clinic is opening in Barking in autumn 2026 and seeing care experienced children is one of their commitments.

Participation: We actively listen to children in care, value their views and ensuring this influences decisions, as part of our commitment to ‘no decision about me, without me’. The approach is embedded across the service and continues to go from strength to strength.

Good communication is the bedrock of good participation: As a service, we have improved this by continuing to grow the CareNet platform on Instagram so children can get information, give feedback and connect with others, and by regular newsletters for younger and older children.

The work of the Corporate Parenting Board is co-produced with care experienced children and young people. In spring 2026, we started work to refresh our Corporate Parenting Strategy in partnership with children in care so that the promises, priorities and actions are driven by the lived experience of children and young people.

The Skittlz care leavers group in particular work closely with the Board, as described in the next section. Corporate Parent Board meetings include “you said, we did” updates, providing clear accountability and clarity on how feedback has been acted on.

Our investment in our participation and engagement team, who themselves have lived experience of care, has resulted in excellent work to expand the ways in which children in care can participate and give feedback. This includes getting involved in the recruitment of children’s social care staff and giving feedback in meetings and surveys.

Activities: Children in care and care leavers have wonderful activities and events to take part in, co-designed with them. We utilise all the opportunities that come from being a London borough and give children opportunities to spend time outside the city. Attendance and engagement are high. Activities over the last year have included:

- A four-day residential trip to Wales
- A backstage tour of Royal Albert Hall
- A summer trip to Lightbox London fashion history show and to Fairlop Waters for Aqua Action.
- A Black History Month Celebration
- A trip to Big House Theatre to see a production acted by care leavers
- Monthly cooking sessions for young people at the Vibe.
- A care leavers flag raising ceremony at the Town Hall
- Film nights, Iftar, summer BBQ, Halloween and festive parties attended by over 150 people

We continue to hold our annual Children in Care awards, planned and co-run with care experienced young people, to celebrate achievements and aspiration. We were also delighted that three members of the Skittlz group were Jack Petchy award winners in 2024-25. The award scheme recognises outstanding young people aged 11-25 years across London and Essex.

Supporting education, training and employment

Good support to children in care is leading to positive outcomes

Education outcomes: Education outcomes are a clear strength. In 2025, children in care outperformed national children in care averages across all Key Stage 2 measures and achieved higher Attainment 8 and subject scores at Key Stage 4 than national comparators. The Aspire Virtual School continues to provide excellent support for children in care and those transitioning on to further education, employment, and training post school age.

Key stage 2, 2025 - % of children who achieved the expected standard (and the higher standard)	Barking and Dagenham children in care	London average children in care	National average children in care
Reading	63.6% (36.4%)	56% (20%)	52% (17%)
Writing	63.6%	47%	45%
Maths	54.5% (18%)	48% (11%)	47% (9%)
Grammar, spelling & punctuation	54.5% (18.2%)	48% (13%)	48% (12%)
Reading, writing & maths	54.5%	38%	35%

Key stage 4, 2025	Barking and Dagenham children in care	National average children in care
Overall attainment (attainment 8)	26.8	22.8
English	5.4	5.2
Maths	5.2	4.8
Ebacc	7.7	6.2
Other	8.6	6.7

Young people at key stage 5 (aged 16 to 18 years) similarly achieved some great outcomes over 2024-25. Nine young people progressed to university or apprenticeships, with five entering higher education and four starting apprenticeships. A further two young people in Year 12 were already taking part in an apprenticeship. Outcomes for 2024-25 were an improvement on the year before and show positive outcomes for young people in care. Some of the Universities that the young people progressed to include University of East London, Arden University, Bournemouth University, University of Essex and more.

We make sure these achievements are celebrated with children, including through our annual Virtual School Awards.

Education support: We have maintained generally good performance with Personal Education Plans, with 93% of children in care having an up-to-date plan over 2025-26. The Virtual School runs regular, well-attended training for social workers and designated teachers on Personal Education Plans, and the New to Care Advisory Teacher continues to oversee this for children entering care.

Children start in good or outstanding-rated schools wherever possible. EdClass remote tuition was launched in February 2025, to support children waiting to start at a school or not able to attend. In addition, investment in an online library for children in years 1 to 9 helps promote reading for pleasure and reading skills. Both platforms have had positive feedback from children and schools. The Aspire Virtual School also supports foster carers to support children with their education, including through education training and informal coffee mornings. Feedback has been consistently positive, including that training sessions were “interactive, different to usual training, enjoyable and informative” and “brilliant, insightful and inclusive”.

Designated teachers champion the education of children in care within schools. Termly Designated Teachers Network Forum meetings provide training, guidance, and professional support.

Support with further education, training or employment: We work closely with the Aspire Virtual School and partners to support young people in care with further education, training or employment. Our partnership with the London School of Management Education provided tutoring support, which has been particularly helpful for young people aged 18 years or over who want to re-sit their GCSEs or improve their qualifications.

Our ‘Future Frontiers’ programme provides in-person careers mentoring, supporting young people in years 9 to 11 to raise aspirations, build confidence and make informed decisions about their futures. The first group completed their GCSEs in summer 2025, and an initial evaluation has shown it led to increased focus, motivation and engagement with learning for participants.

Therapeutic mentoring support and work experience opportunities are available through the ‘Transformed You’ programme. Targeted mentoring is also available for young people not in education, employment or training, alongside entrepreneurship coaching and supported work experience opportunities. Collectively, this effectively supports young people to prepare and progress through further education, training, and/or employment.

Visits to universities and career networking events are also regularly run, alongside our Aspire Higher Programme that supports young people with strong academic potential to stay on track through academic support and co-curricular enrichment.



Section 4:

The experiences and progress of care leavers



Care leavers – an overview

Our promises: We are ambitious for our care leavers and hold high expectations for their futures. The promises in our Corporate Parenting Strategy, set out in the last section, are for both care leavers and children in care, as part of our commitment to providing excellent support.

As noted previously, we are currently reviewing our promises and commitments in partnership with care experienced young people, through the refresh of our Corporate Parenting Strategy. The new strategy is due to be in place in September 2026.

Young people leaving care: We have created a culture where young people want to keep in touch. The number of care leavers is currently the highest it has ever been, with 344 care leavers supported as of April 2026, as more young people choose to remain connected to services into adulthood. A fifth of our care leavers are former unaccompanied asylum-seeking children. The rate at which young people are leaving care is relatively steady: An average of 16 young people left care each month over April to February 2026, compared with 18 in 2024-25.

There is a slight overrepresentation of males and children of a White British, White Other or mixed heritage ethnic background for care leavers.

What we are proud of: Quality, timely support results in positive outcomes for care leavers. Care leavers contribute meaningfully to service development, and we are proud of the co-production that takes place at the Corporate Parenting Board. Over the last year, we have worked together to improve information and advice to care leavers, the Leaving Care Grant and the Enhanced Local Offer. “You said, we did” reporting demonstrates how feedback directly influences policy, offer and practice.

Education, employment and training outcomes show the positive impact of support for care leavers. Effective pathway planning and support from the Aspire Virtual School and our Employment, Education and Training coordinator has resulted in more work experience and apprenticeship opportunities, university placements and permanent job offers. A greater proportion of care leavers in Barking and Dagenham are in education, employment or training compared to the national average.

The pathway for care leavers into stable, safe, local homes is now well-established. As a result, the proportion of care leavers in suitable accommodation is higher than the national average.

We continue to be proud of the achievements of our care leavers. Our annual awards ceremony and range of activities continually celebrate this.

What we are improving: For the coming year, we will continue to build on our successes and support care leavers to thrive. Skittlz – our children in care council – are working with us to improve the areas they said are important to them. These areas are:

- Improving young people’s attendance at university
- Preparing for ‘stepping back’ for 21–25-year-olds and transitioning to adult social care
- Employment for care leavers
- Running and maintaining a home.

Relationships and participation

Good relationships with care leavers drive positive outcomes

Relationships: Leaving Care Advisors continue to successfully build nurturing and trusting relationships with care leavers, confirmed in audit findings and echoed in our last Ofsted ILACS. More young people are choosing to get support into early adulthood, reflecting the quality of support and the positive impact it has on people’s lives.

Care leavers are supported to build and maintain relationships with the people who are important to them. Our Lifelong Links service, described earlier, supports young people who want to reconnect with people who played a positive role in their lives. In addition, enrichment activities and support provide opportunities for young people to connect with others. As summarised in the last section, this ranges from regular local activities to events both inside and outside the capital city. A range of partnerships including with the Royal Albert Hall and Big House Theatre Company provide excellent opportunities for our young people.

Participation: Care leavers influence the design of services, and we are proud of co-production that takes place at the Corporate Parenting Board. Every September, Skittlz members agree themes for the Board to focus on. In September 2024, three topics were agreed, discussed and improved with care leavers – described opposite. The themes agreed in September that were agreed and are currently being addressed are:

- Improving young people’s attendance at university
- Preparing for ‘stepping back’ for 21–25-year-olds and transitioning to adult social care
- Employment for care leavers
- Running and maintaining a home.

In addition, our care leavers participate in a wider range of activities to drive the design of support for children and young people. Care experienced young people are now getting involved in our ‘Young Safeguarders’ scheme to gather and insights on safety and safeguarding, providing feedback and recommendations for the Safeguarding Children Partnership to take forward.

Co-production with Skittlz, our children in care board:

1. Skittlz asked for better information shared with young people about their rights and entitlements. As a result, have developed a set of films with care experienced young people, to explain different parts of the care journey:
 - [Coming into care](#)
 - [Emotions and mental health](#)
 - [Contact](#)
 - [Introduction to workers](#)
 - [Things you are entitled to](#)
 - [Emotional support](#)
 - [Semi-independence and staying put](#)
 - [Independent living](#)
2. Skittlz wanted to improve the Leaving Care Grant for care leavers. As a result, we started to review and improve the process with Skittlz to be clear on what ‘essential’ for a new home means, and to make sure care leavers have more choice and control over what is purchased.
3. Skittlz wanted to improve the Enhanced Local Offer, which explains the support available young people in care approaching adulthood. We worked with Skittlz to improve and update this, redesigning the local offer so that it has the right information presented in an engaging way. The [final version](#) was agreed in November 2025 and has received positive feedback.

Health and wellbeing

Care leavers are supported to have good health and wellbeing

Mental and emotional wellbeing: Care leavers are supported with their mental and emotional wellbeing. Practitioners are trained in trauma-informed practice, and as previously noted, we are making a further investment in life story training to help ensure that all children and young people benefit from this. Our Mental Health and Emotional Wellbeing Worker supports young people up to the age of 25, providing additional flexibility and support when young people become ineligible for support from CAMHS.

Health histories: We ensure that care leavers have consistent access to their health histories. Over the last year, we have worked with Skittlz on the Care Leaver Health Summary after feedback that the NHS app was not always user-friendly. Care leavers now get health summaries in a more timely way, as we addressed the backlog of people waiting. We have also seen an increase in the number of care leavers who agree for their health summary to be shared with social care, enabling more holistic support to be provided.

Prescriptions: We continue to promote the free prescriptions scheme, and 16 care leavers have accessed this since October 2024. Take-up is impacted by some care leavers being eligible for free prescriptions for another reason and so not needing the care leaver scheme. We want to make sure everyone who might benefit from the scheme is using it, so are promoting this with Care Leaving Advisors and care leavers.

Support into adulthood

Effective support into adulthood leads to positive outcomes

Pathway plans: Trusting, stable relationships with Leaving Care Advisors enable care young people to effectively prepare for adulthood at an early stage. Children are supported by both a social worker and leaving care advisor when they are 17 years old, enabling the Leaving care advisors to get to know young people before they become adults. This can be younger where needed and for children with more complex needs.

We have worked closely with young people leaving care to improve the pathway planning process. The plan now includes a section where the young person and professional ‘rate’ particular topics, to identify priorities and different perspectives. Pathway plans are effective and regularly reviewed. 90% of children aged 16-17 years had an up-to-date pathway plan over 2025-6, rising to 92% for young people aged 18 years or over.

Support to stay safe: Leaving Care Advisors work closely with care leavers to be safe in and outside their home. Care leavers are included in the oversight of exploitation at the monthly Missing and Child Exploitation (MACE) meeting as we recognise turning 18 does not negate risks outside the home being prevalent in their lives.

There is a good understanding of how race, sexual orientation, disability and identity can intersect with care experience, and a strong corporate and partnership commitment to address the prejudice and discrimination care leavers can experience. We are looking into revisiting whether young people want us to formally pursue recognising care experience as a protected characteristic across the local authority. To date, care leavers have told us that they would prefer it not to be, and we continue to keep this under review.

There is a disproportionate representation of children in care and care leaves in the criminal justice system. We have developed a protocol on how to avoid the criminalisation of children in care and care leavers to help address this.

The protocol encourages different organisations to collaborate more, with staff who have a better awareness of trauma and behaviour.

Housing: Care leavers continue to be supported through a now well-embedded pathway to access stable, good quality homes. Barking and Dagenham has developed new and regenerated areas. Through the inclusive growth agenda, care leavers can access newly built, local social rent tenancies in the borough – so many of our care leavers have moved into long-term homes. 85 care leavers moved into independent accommodation in 2025-6, including 26 who moved into social housing. A further 27 moved between April and June 2026. A monthly multi agency Resettlement panel has oversight of all children and care leavers in custody. The partnership, which includes the probation service, ensures robust planning is in place to support smooth transitions when the young person is released in order that they are not homeless, have some form of education and training lined up and a known support network. Since the setting up on the panel there have been no escalations by the Howard league.

Overall, 90% of care leavers lived in suitable accommodation over 2025-26, which is above national, London and statistical neighbour benchmarks (89%, 88% and 89% respectively).

Independent living skills: Young people are supported with the skills and confidence they need to become independent adults. One of the messages we have heard from Skittlz last year is the importance of supporting care leavers to manage money effectively and independently. As a result, we partnered with Beam in 2025 to support 60 young people leaving care to increase their financial stability. This 13-week support programme supported young people with their financial wellbeing, to helping young people to feel confident and able to manage their money. We are now planning ongoing workshops on budgeting in partnership with care leavers.

In autumn 2025, we also started regular cooking classes for young people to develop their independence and life skills.

In January 2026, we started new regular workshops with activities are shaped by what young people want. To date, this has included education, employment and training guidance and support, social engagement activities, pizza making and creative arts.

We are currently developing a Next Steps Summit with and for care-experiences young people to support further work in this area. Following feedback from care leavers, we are also now improving the information we give to care leavers about transitions and the 'stepping back' process.



Employment, education and training

Employment, education and training outcomes: 60% of care leavers were in education, employment or training over 2025-26, similar to 2024-5 and above national, London and statistical neighbour benchmarks (54%, 58% and 52% respectively). 20 young people are studying at university and 10 are in apprenticeships (as of June 2026) and a number of care leavers have secured or maintained permanent employment.

Education support: The detailed education support provided by the Aspire Virtual School – described in the last section – is available to and benefits care leavers, through tutoring, mentoring and a range of other initiatives. In addition, we have invested in a specialist Employment, Education and Training coordinator who has supported many care leavers to attend college and university open days, and to submit applications and access funding. In recent months, this has included a university tour at Queen Mary University (with 15 young people) and University of Greenwich (with 5 young people).

Following feedback from Skittlz, training for social care staff has been delivered on university processes and the support available to young people to raise awareness of this. Our Virtual School is also commissioning an app with information on university and post-16 pathways that will be rolled out shortly.

We are proud of the achievements of our care leavers in this area, which in the last year includes a young person accepted to Queen May University studying Zoology, and a young person graduating from University of Westminster with a 1st in English language and linguistics.

Training: Care experienced young people have been supported to access training that support pathways into the careers that are right for them:

- Young people now have access to over 70 online courses to broaden learning opportunities in many areas of employment.

- Four young people completed the Construction Skills Certification Scheme over 2025-6 to prepare for work in construction, and another participated in a 10-week construction study programme.
- Four young people took part in the King's Trust short courses, building confidence and employability.
- Young people with convictions are supported by Bounce Back through mentoring and employability support.

Work experience and employment: Investing in an Employment, Education and Training coordinator role has resulted in invaluable, specialist support to young people to access employment opportunities. This includes:

- 1:1 support with CV writing, application forms and interview preparation.
- Coaching and support before and during employment, and regular workshops on relevant issues.
- Coordinating Care Leavers Job Fairs and Careers Networking Shows
- Support into internship schemes. For example, one young person joined the Civil Service internship scheme last year and 4 have applied this year.
- Support with work experience, including 5 young people getting work experience at Liberty London and the John Lewis partnership.
- Running events on apprenticeships and careers, such as in the legal sector, army and in construction.
- Setting up new apprenticeship and work experience opportunities, including the council legal department and employment support service.
- Support from Connect to Work to access employment opportunities
- Mentoring and work experience opportunities have been facilitated through the Found Project with Catch22
- Young people have taken part in MACE work experience via Become Charity.

One care experienced young person secured permanent work within children's care and support following an apprenticeship role and currently three are completing their apprenticeship in the service, while others have started with employers ranging from Bank of American to the London Ambulance Service.

Summary

- We are a council tackling deep-rooted challenges for children and families with passion and purpose, ‘punching above our weight’.
- Our CARES approach shapes practice, supports strong and enduring relationships, and drives timely, meaningful change so that children are safe and receive the right help at the right time. It is owned at all levels – political, strategic and operational.
- We have strong foundations in place. Leaders drive conditions for effective practice. The workforce is stable equipped and effective. Multi-agency working is prioritised and effective, and together we are outward looking and aspirational for children.
- In a context of rising demand and complex needs, children who need help or protection get timely, effective support that helps keep them safe. We have made significant progress against Ofsted improvement recommendations.
- Children in care and care leavers are supported to thrive and achieve the outcomes that are important to them, in family placements, close home and achieving positive education, housing and emotional wellbeing outcomes.
- We know ourselves well. We have a rich, detailed view of children and families and their safety, wellbeing and experience of support. Our understanding is underpinned by robust quality assurance, drawing on expert advice, and energy and drive to achieve excellence.
- Over the next year, our continuous improvement will focus on the Families First reforms, a continued strengthening of early help, prevention, addressing use of unregistered provision and ensuring excellence as standard across all areas of practice in line with our improvement plans.

“You know the family is put first”

“I would like thank everyone for making a difficult time easier and I’m grateful for your patience, understanding and all the support provided.”

“She [my social worker] has been understanding, consistent, and genuinely helpful during a very stressful time. I really appreciate everything she has done for my family.”

“Our family support worker was amazing and helped my daughter with anxiety to get back into mainstream school”

