

chscp
**Annual
Report**



2025-26



Foreword

This annual report reflects a partnership that has made clear progress during an exceptionally demanding period for everyone involved in safeguarding children and young people.

Much in this report should give us confidence. Across the City of London and Hackney there is strong evidence of effective multi-agency working, committed leadership and good frontline practice. We have seen services strengthened for care leavers, positive independent assessments of practice in the City, significant reform of Family Help arrangements, innovation in early intervention and youth services, and examples across health, education, policing, social care and the voluntary and community sector where professionals have worked together to improve children's lives. There is also a growing emphasis on hearing the voice of children and families, understanding their lived experience and embedding trauma-informed and anti-racist practice.

We should recognise these achievements, but we must not allow them to obscure the challenges that remain.

Safeguarding professionals are working in an increasingly difficult context. Families are experiencing the consequences of poverty, housing insecurity and persistent cost-of-living pressures, while many services face rising demand and greater complexity. At the same time, funding is constrained, organisations are being restructured and wide-ranging national reforms are being implemented across children's social care, health, education and policing.

In parts of the safeguarding system, fewer people are being asked to do more with less. The impact is visible. The CHSCP itself delivered 36 training courses this year compared with 77 the previous year, reflecting reduced trainer capacity, restructuring and budgetary pressures. Across partner agencies, concerns remain about recruitment, retention, workload, specialist safeguarding capacity and the cumulative effect of sustained pressure on those working at the frontline. These issues matter because a healthy, skilled and stable workforce is fundamental to keeping children safe.

There are also areas where we need to do better. The report identifies ongoing challenges around disproportionality, the experiences of children with SEND, information sharing, attendance and children outside mainstream education, domestic abuse, exploitation and child sexual abuse. We must remain curious about what the evidence is telling us and prepared to ask difficult questions when progress is not fast enough.





That is why independent scrutiny matters. It means identifying what has gone wrong, but also recognising what works, testing whether improvements are making a real difference and ensuring that learning reaches the frontline. It also means being prepared to challenge systems when the expectations placed on professionals are not matched by the resources and capacity available to them.

My thanks go to everyone across the partnership, and particularly to those working directly with children and families, who continue to bring professionalism, compassion and determination to this work. Their efforts, often made in the most difficult circumstances, are what turn strategies, structures and plans into safer lives for children.

There is much to be proud of, but no room for complacency. We will continue to do what we can, where we can, to build on the progress made, support those who safeguard our children, challenge where improvement is needed and keep our collective attention where it belongs: on ensuring that every child is seen, heard and helped.



Jim Gamble QPM

Independent Child Safeguarding Commissioner
The City & Hackney Safeguarding Children Partnership



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About the Partnership





The City & Hackney Safeguarding Children Partnership (CHSCP) annual report for 2025/26 outlines the learning, challenge, impact, evidence, and improvement within our statutory safeguarding arrangements across the City of London and the London Borough of Hackney.

The core functions of the CHSCP are to:

- Provide independent leadership, scrutiny, advice, and consultation on safeguarding practices across both areas.
- Bring together senior leaders responsible for safeguarding children to ensure joined-up working in the best interests of children and families.
- Monitor national policy, guidance, and legislation changes to advise partner agencies on their impact.
- Measure how well organisations meet their safeguarding responsibilities through our Self-Assessment and staff survey processes, open to all organisations working with children.
- Deliver multi-agency training across partner agencies, voluntary, and community organisations.
- Facilitate Rapid Reviews and Local Child Safeguarding Practice Reviews when serious incidents occur to enable learning and change.
- Monitor and evaluate the effectiveness of child safeguarding services through rigorous auditing and analysis.

This report documents the CHSCP's activity across several key areas: governance and accountability arrangements, including our priorities and pledge for 2025/26; the context for safeguarding children in the City of London and Hackney, highlighting key data and partner progress; the range and impact of multi-agency safeguarding training delivered by the CHSCP; and the annual financial statement of accounts.

In line with statutory requirements, this report will be submitted to the [Child Safeguarding Practice Review Panel](#) and the Multi-Agency Safeguarding Arrangements Unit in the Department for Education.





Vision

That all children in the City of London and Hackney are seen, heard and helped; they are effectively safeguarded, properly supported and their lives improved by everyone working together.

Key Roles

OUR STATUTORY SAFEGUARDING PARTNERS

- Hackney Council
- The City of London Corporation
- NHS North East London Integrated Care Board (ICB)
- The Metropolitan Police Service (MPS)
- The City of London Police

OUR LEAD SAFEGUARDING PARTNERS

- Dawn Carter McDonald, Chief Executive of Hackney Council
- Ian Thomas CBE, The Town Clerk of the City of London Corporation
- Zina Etheridge, CEO Designate of NHS NEL / Ralph Coulbeck Interim Chief Executive Officer (Dec 2025-March 2026)
- Matt Twist, Assistant Commissioner of the MPS
- Pete O'Doherty, Commissioner, City of London Police

OUR DELEGATED SAFEGUARDING PARTNERS

- Judith Finlay, Executive Director of Children's and Community Services (The City of London Corporation)
- Jacquie Burke, Group Director of Children & Education (Hackney Council)
- Diane Jones, Chief Nursing Officer (NHS NEL)
- James Conway, Commander (Central East BCU, MPS)
- Umer Khan, Commander (City of London Police)





INDEPENDENT SCRUTINY

Jim Gamble QPM provides the Partnership with advice and independent scrutiny fulfilling the functions of an independent safeguarding children commissioner.

RELEVANT AGENCIES

Safeguarding partners are obliged to set out which agencies are required to work as part of the CHSCP's arrangements to safeguard and promote the welfare of local children. These agencies are referred to as relevant agencies and have a statutory duty to cooperate with the CHSCP's published arrangements. A defined number of relevant agencies will meet regularly with safeguarding partners through the City of London Safeguarding Children Partnership Board and the Hackney Safeguarding Children Partnership Board. Others are invited when deemed necessary and/or be included in various sub-groups / thematic groups. The relevant agencies to which the CHSCP's safeguarding arrangements apply includes all those agencies defined in part 4 of the Child Safeguarding Practice Review and Relevant Agency (England) Regulations 2018.

They include:

- Homerton Healthcare NHS Foundation Trust
- East London NHS Foundation Trust (ELFT)
- All schools (including independent schools, academies, and free schools), colleges and other educational providers.
- The Probation Service (London Division)
- Children and Family Court Advisory and Support Service (CAFCASS)
- Hackney Council for Voluntary Services (HCVS)
- London Ambulance Service (LAS)
- London Fire Brigade (LFB)
- NHS England
- All registered charities within the geographic area of the CHSCP whose staff / volunteers work with or come into contact with children and their families.

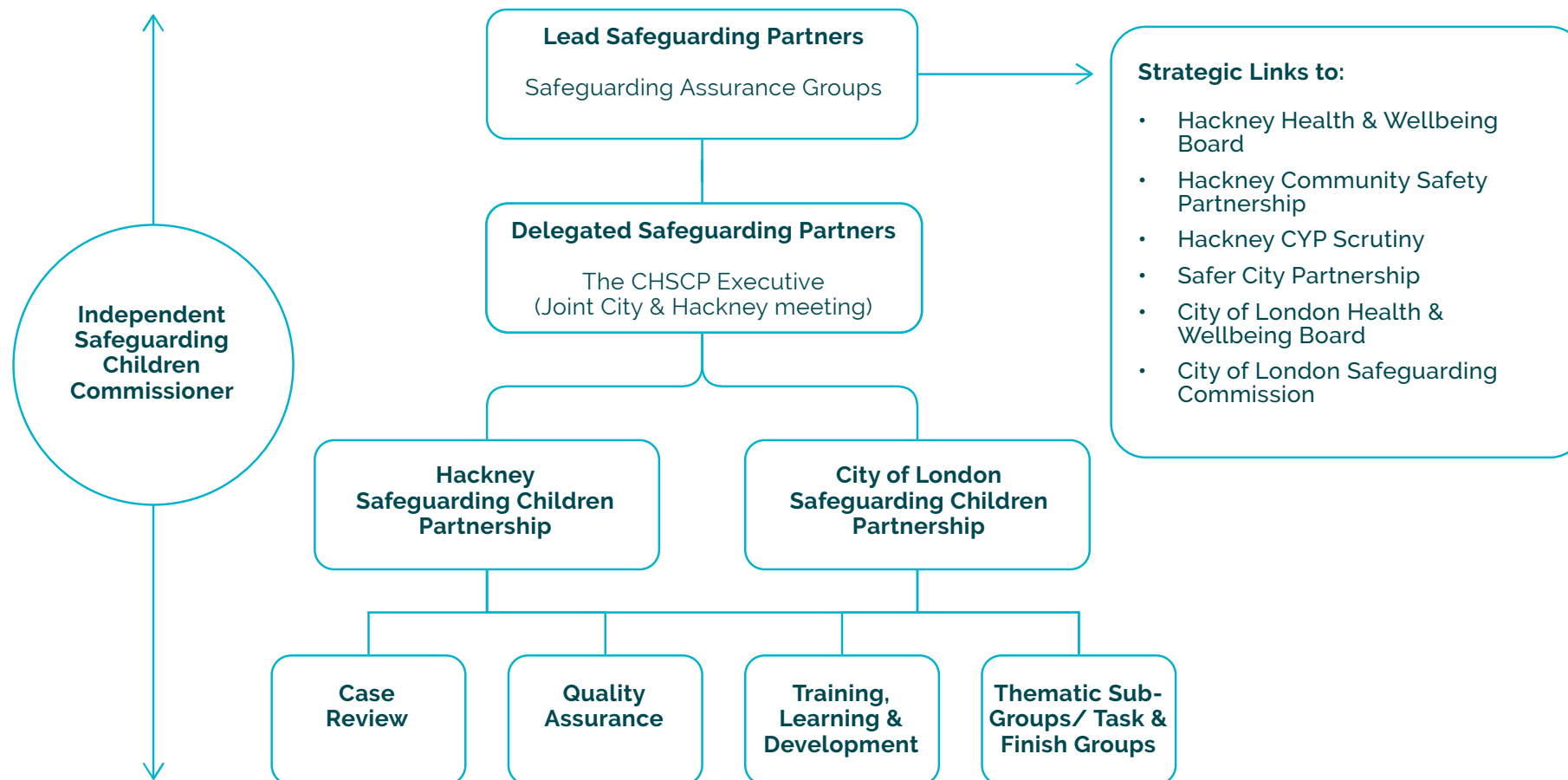
THE CHSCP TEAM 2025-26

1x Senior Professional Advisor
1x Partnership Coordinator
1x Training Coordinator





Governance



TERMS OF REFERENCE

The Terms of Reference for each CHSCP Group can be found on our website at www.chscp.org.uk/our-arrangements.



AGENCY REPRESENTATION AT MEETINGS

The Executive Group

Agency		Q1 June 25	Q2 Oct 25	Q3 Dec 25	Q4 Mar 26	Overall (%)
	Hackney	25	25	25	25	100
	City of London	25	25	25	25	100
	NHS ICB	25	25	25	25	100
	Metropolitan Police	25	25	25	25	100
	City of London Police	25	25	25	25	100





The Hackney Board

Agency	Q1	Q2	Q3	Q4	Overall (%)
CAFCASS	25	0	25	25	75
Hackney Education	25	25	0	0	50
Hackney Children & Families Service	25	25	25	25	100
Homerton Healthcare NHS Foundation Trust	25	25	25	25	100
NHS North East London (City & Hackney)	25	25	25	25	100
East London NHS Foundation Trust	25	25	25	25	100
Hackney Housing Services	0	0	0	0	0
Metropolitan Police Service	25	25	25	25	100
Probation Service	25	25	25	25	100
Public Health	25	25	25	25	100
Community Safety	-	25	25	25	75
Young Hackney	-	0	25	25	50





The City Board

Agency	Q1	Q3	Q4	Overall (%)
CAFCASS	0	0	0	0
City of London - Children's Social Care	33	33	33	100
City of London - Education	33	33	33	100
Community Safety	33	0	0	33
Homerton Healthcare NHS Foundation Trust	0	33	33	66
NHS North East London (City & Hackney)	33	33	33	100
East London NHS Foundation Trust	33	33	33	100
City of London Police	33	33	33	100
Probation Service	33	0	33	66
Public Health	33	0	33	66





CHSCP PRIORITIES 2026/27

PRIORITY 1

The Health & Stability of the Safeguarding Workforce

Outcome

Safeguarding partners, relevant agencies and named organisations attract, retain, develop, and support their workforce. A healthy and stable workforce contributes to high quality safeguarding practice that improves outcomes for children and young people.

PRIORITY 2

Active Anti-Racist Practice

Outcome

The partnership's approach to safeguarding children is characterised by active anti-racism and aligns with the CHSCP's Anti-Racist Charter. Practice that disproportionately and negatively impacts on Black and Global Majority children (and their outcomes) is identified and reduced. Children and their families are confident in challenging their experiences of racism, have mechanisms in place to escalate their concerns and tell us that they can see change. Practitioners are confident in challenging racism, and this happens.

PRIORITY 3

The Voice of Children

Outcome

Multi-agency safeguarding practice reflects the lived experience of children. The voices of children are central to all aspects of the child's journey and are used to influence service design, develop practice and improve outcomes.

PRIORITY 4

Maintaining and Building on the Foundations of Good Practice

Outcome

Multi-agency safeguarding practice demonstrates a strong foundation, continuous improvement and alignment with the national standards for child protection. Children and families are effectively supported by early, robust, timely and coordinated multi-agency help and protection.

PRIORITY 5

Strategic Vulnerabilities & Pathways to Harm

Outcome

The CHSCP identifies and develops action in response to identified strategic vulnerabilities and the pathways to harm facing children. For 2025/26, local priorities centre on Child Sexual Abuse, Safeguarding Adolescents, Neglect and Unregistered Educational Settings.

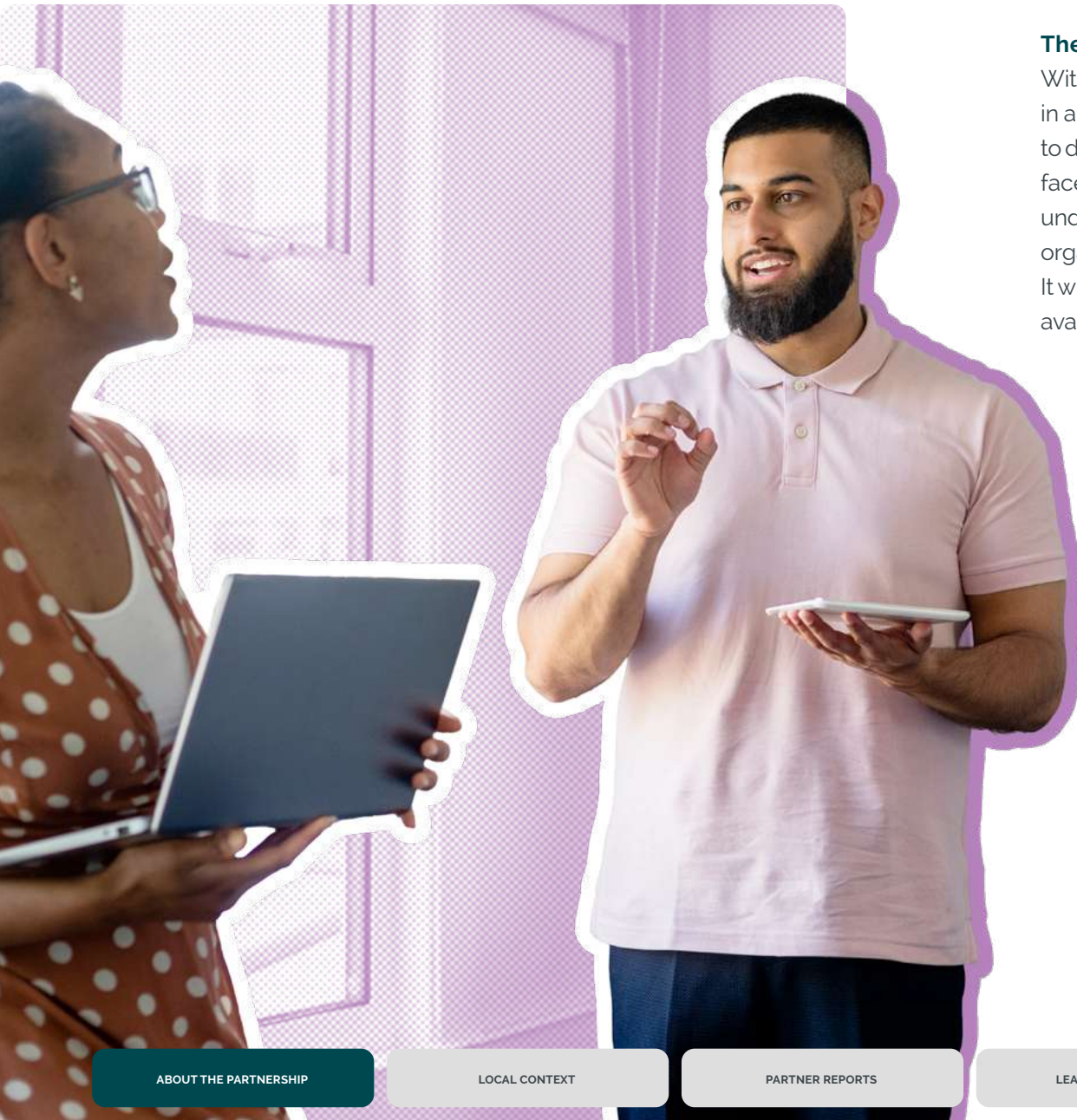
PRIORITY 6

The Appetite to Learn

Outcome

Children and young people are effectively safeguarded by professionals being actively engaged with the CHSCP's learning & improvement framework. Leaders encourage independent scrutiny, challenge performance, and embed lessons for practice improvement across their respective organisations.





CHSCP PLEDGE

The Health & Stability of the Safeguarding Workforce

Without a healthy and engaged workforce, no agency can fully participate in and support the work of the partnership. The CHSCP will therefore seek to develop a better understanding of the pressures that staff and volunteers face and the steps that can be taken to mitigate them. This work will be undertaken in the context of what we know about the current conditions – organisational change, reduced resourcing levels and increased demand. It will include evaluation of workforce stability, its capacity, and the support available to help deliver high-quality practice.

Active Anti-Racist Practice

Through our collective leadership, we will model our values and promote a way of working that puts active anti-racism front and centre. This will be seen in the strategies we develop, the decisions we take and the people we employ. Critically, active anti-racist practice will be evidenced in the behaviours of our staff and volunteers. Through a relentless focus on improvement and challenge, Black and Global Majority children and families will see, hear and feel the difference when engaged by those responsible for their help and protection.



The Voice of Children

We will support and enable a culture of working that routinely seeks out and reflects the voices of children. The lived experience of local children and their voices will be evident in the policies we create, the practice we review and the communication channels that our wider partnership creates. Importantly, it will be evident in our casework and our intervention to improve outcomes for children and their families.

Maintaining and Building on the Foundations of Good Practice

The CHSCP recognises that good practice is built upon solid foundations, and we are committed to maintaining and continuously building upon these. We will maintain focus on ensuring these fundamental aspects are embedded in our work, covering the journey of the child through the safeguarding system. This includes our approaches to family help, child protection, looked after children, and care leavers.

Strategic Vulnerabilities & Pathways to Harm

We will proactively respond to local strategic vulnerabilities and identified pathways to harm through robust and focused multi-agency arrangements. We will commit to developing our understanding of these issues and work together to implement solutions that directly support practice, improve outcomes and help tackle the root causes of harm to children.

The Appetite to Learn

We are committed to maintaining our improvement journey and to that end, we will actively seek out and embrace opportunities to learn. Our quality assurance activity remains structured on our learning and improvement framework. We will routinely revisit the action plans to ensure that identified improvements are reflected in contemporary practice. Critically, we will respect the independent scrutiny role of the Independent Safeguarding Children Commissioner, the right to 'roam', the right to ask difficult questions and the right to respectfully challenge. Whenever required, safeguarding partners, relevant agencies and named organisations will provide whatever information they can to address a relevant enquiry or concern

These core priorities and pledged commitments form the foundation of our multi-agency approach, and their practical implementation across the partnership is demonstrated in the individual agency updates detailed later in this report.



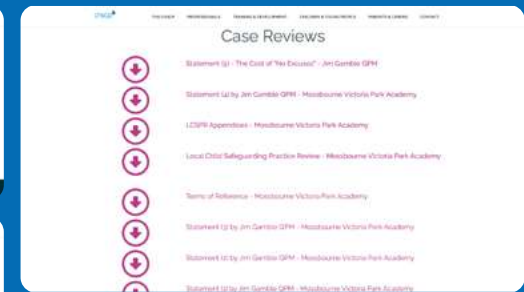
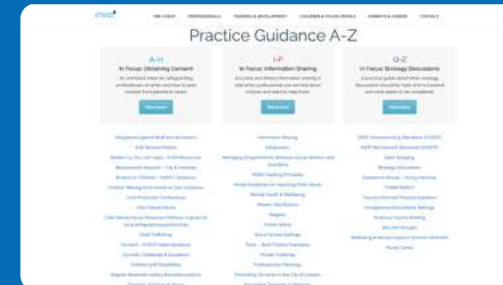
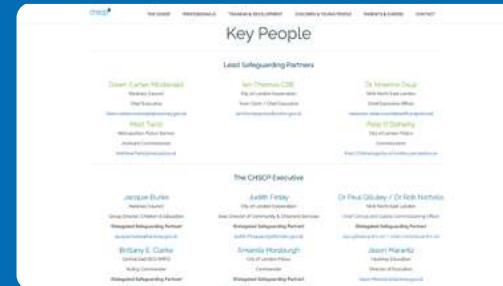


Communications

During the year the CHSCP website received 37,033 views from 20,087 active users.

Our top ten web pages viewed are listed below.

Rank	Webpage Path	Views
1	/ (Homepage)	7,702 (20.8%)
2	/case-reviews/	7,013 (18.94%)
3	/members-and-partners/	1,903 (5.14%)
4	/early-help-in-hackney/	1,725 (4.66%)
5	/learning-improvement/	1,514 (4.09%)
6	/portfolio/local-child-safeguarding-practice-review-child-q/	1,235 (3.33%)
7	/e-learning-tools/	898 (2.42%)
8	/our-arrangements/	780 (2.11%)
9	/the-partnership/	755 (2.04%)
10	/practice-guidance/	524 (1.41%)





PRIVATE FOSTERING APP

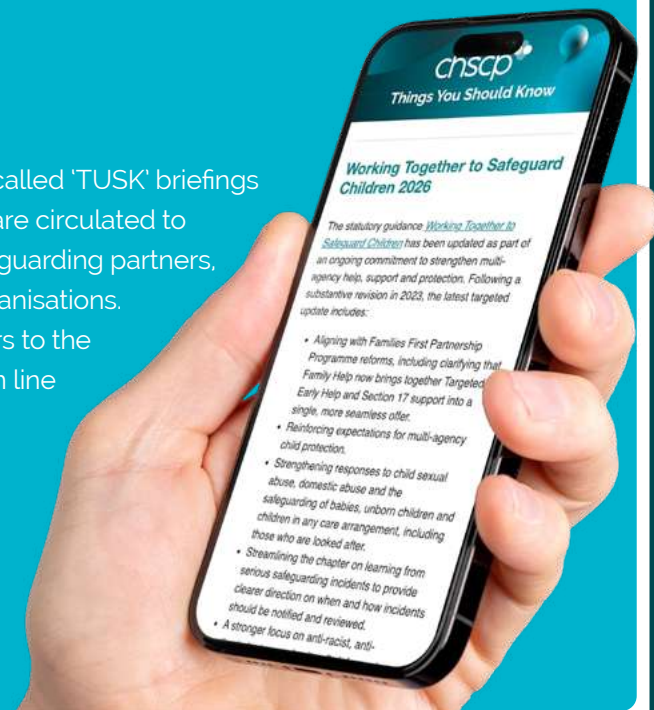
The CHSCP continues to promote its Private Fostering App. Alongside providing information about private fostering, the App includes a training module and other important advice for safeguarding professionals.



TUSK BRIEFINGS

The CHSCP produces e-briefings called 'TUSK' briefings (Things You Should Know). These are circulated to subscribers and cascaded by safeguarding partners, relevant agencies and named organisations. The average number of subscribers to the TUSK was 1407 recipients. This is in line with the previous year.

Published TUSK briefings can be found [HERE](#).



PRACTICE RESOURCES

The CHSCP maintains a comprehensive list of resources for safeguarding professionals to support their daily practice. This includes practice guidance, policy information, and thematic guidance, all of which can be accessed on our website at www.chscp.org.uk/practice-guidance.

A-H

In Focus: Obtaining Consent

An animated video for safeguarding professionals on when and how to seek consent from parents & carers.

[More here](#)

I-P

In Focus: Information Sharing

Accurate and timely information sharing is vital when professionals are worried about children and want to help them.

[More here](#)

Q-Z

In Focus: Strategy Discussions

A practical guide about when strategy discussions should be held, who is involved and what needs to be considered.

[More here](#)





YOUTUBE

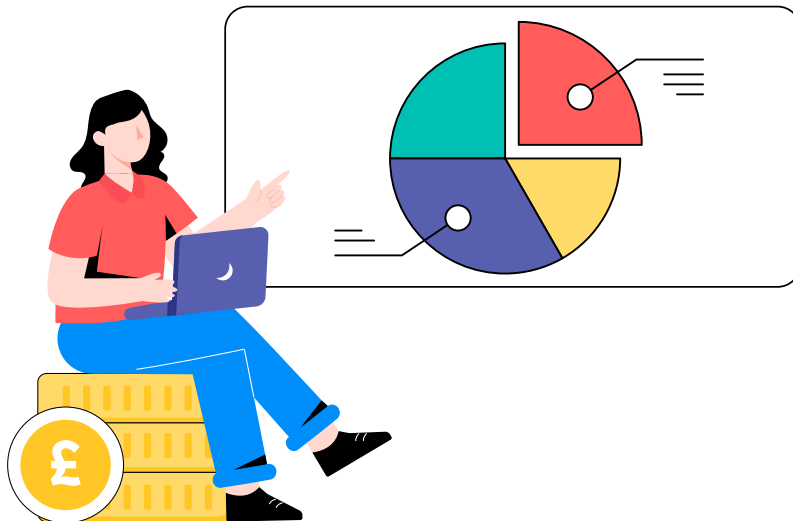
The CHSCP has produced several video guides covering a range of safeguarding topics. These can be viewed [HERE](#). These have attracted 15,961 views to date, an increase of 5,974 views in comparison to the previous reporting period.





Statement of Accounts 2025-26

Expenditure	Financial Value
Staffing and Travel	310,632
Serious Case Reviews	56,700
Training & Learning Management System	2,940
Printing, Supplies and Equipment	8,365
Venues & Miscellaneous	1,126
Total Expenditure	379,763



Income	Financial Value
Partners	
NHS North East London ICB	12,000
City of London Corporation	29,480
East London NHS Foundation Trust	8,000
Homerton University Hospital	12,000
National Offenders Management Service	3,081
Metropolitan Police Authority (MOPAC)	5,000
Hackney Education	24,480
Total Partners Income	94,041
Hackney Council	
Hackney Contribution	285,721
Total Hackney Council Income	285,721
Total Income	379,763



Local Context





The City of London Snapshot

According to Office for National Statistics (ONS) data, approximately 700 to 1,100 children (aged 0–17) reside in the City of London local authority.

Because the “Square Mile” is predominantly a commercial and financial hub, it has both the smallest overall population and the lowest proportion of resident children of any local authority in England.

Under the Mayor of London’s Universal Free School Meals scheme, every state primary school child in London receives a free hot lunch, regardless of household income.

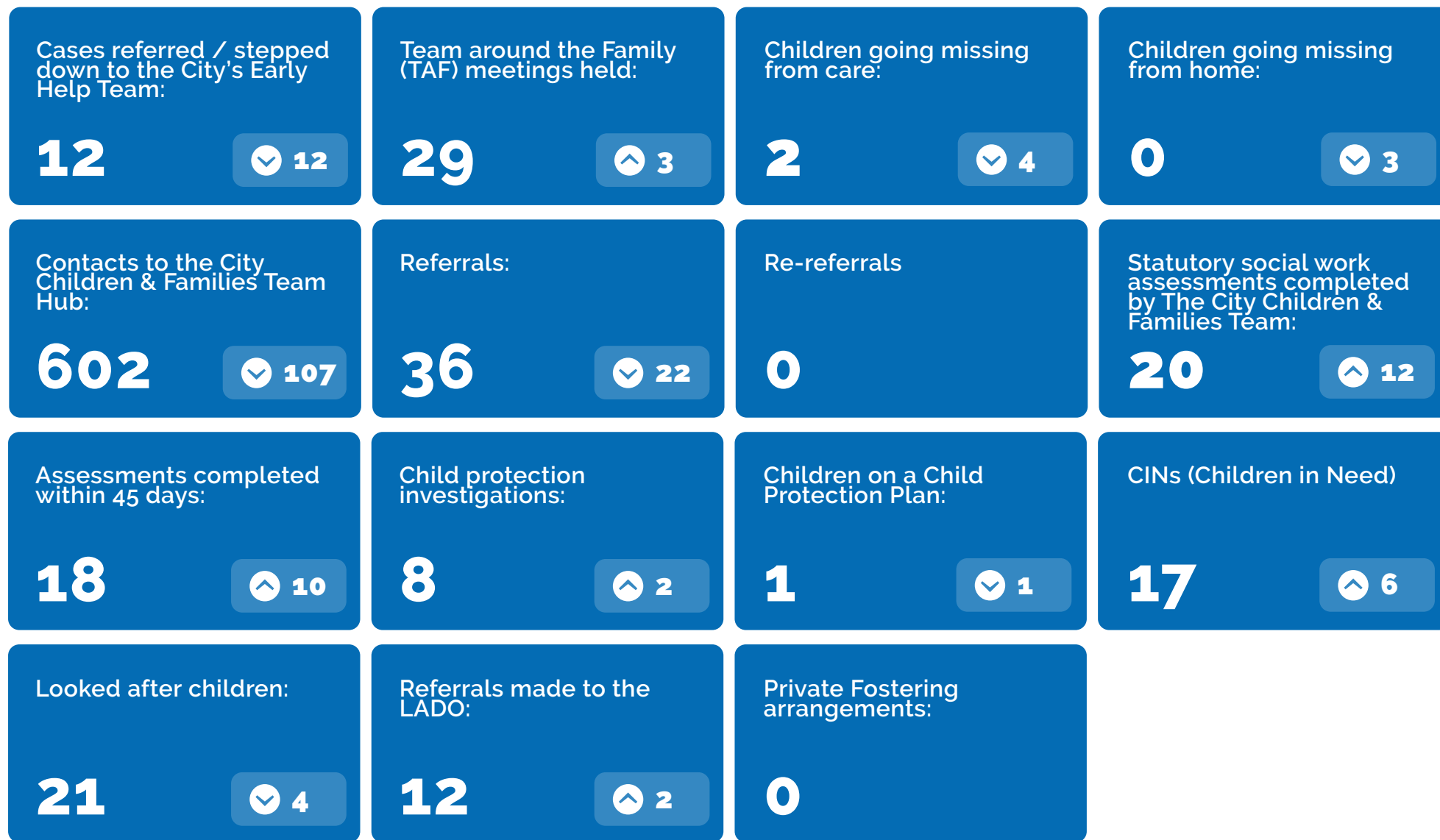
Official Department for Education (DfE) data measuring statutory eligibility based on low-income or Universal Credit thresholds lists 23.3% of pupils in the City of London authority as statutory FSM eligible. Out of the local state-funded pupil population, this equates to roughly 58 children.



CITY OF LONDON



Data to contextualise children's social care in the City:





Hackney Snapshot

The London Borough of Hackney is a vibrant, densely populated borough with a population of approximately 260,000. Historically a destination for global migration, it is renowned as one of London's most culturally dynamic areas; roughly 47% of its residents belong to Black and Global Majority groups, with distinct established communities including Black British, Turkish and Kurdish, Vietnamese, and Western Europe's largest Charedi Orthodox Jewish community.

Characterised by its youthful demographic, over half of its residents are under 35. Hackney balances deep historical roots with significant recent regeneration. It blends thriving creative and tech hubs around Shoreditch with dense residential neighborhoods and rich green spaces such as Victoria Park and Hackney Marshes.





Data to contextualise children's social care in Hackney:

Mid year estimate of child population aged 0-17:

52,052  5,239

Number of referrals made to Hackney CFS:

2702  951

16% of which were re-referrals

 4%

Number of assessments completed by Hackney CFS:

2,277  1,162

Assessments completed within 45 days:

1,998  1,131

Child protection investigations - Number of S47 investigations started

1,114  238

Children on a Child Protection Plan:

219  4

Children & Young People looked after

351  31

Number of MARAC cases

653

263 (40% of cases) had children under 18 in the family

 33

Young people who accessed universal services offered through Young Hackney

15,412  1,122

Contacts to the LADO

472  9

Children that entered care

134  1

Number of care leavers aged between 17 and 21:

304  30

Permanent school closures and mergers in Hackney in August 2025, driven by falling pupil numbers, may have led to a drop in referrals to Children's Social Care.





Partner Reports





Safeguarding Partners and Relevant Agency Reports

CITY OF LONDON CHILDREN'S SOCIAL CARE AND EARLY HELP

We have a fully permanent Children's work force which has remained stable over the last year. The impact of this is reflected in feedback received in our Annual Survey which highlighted the strength of relationships with allocated workers and high levels of satisfaction with the service received:

"My social worker is very nice. They've been helping me for 7 years. They are great."

"They help me with anything I need. I've never had any issues getting help. They are nice."

This year we have continued to see small numbers of children remaining in care as unaccompanied asylum-seeking children continue to move quickly via the National Transfer Scheme. At points for the first time in several years, we have had more City resident children in care than asylum-seekers.

Contacts have remained stable over the year with those resulting in a referral decreasing in the last two quarters. A high percentage of contacts continue to be in relation to non-City of London missing children and pregnant people. The positive trajectory of no re-referrals in the year continued demonstrating that previous intervention has remained effective and families have sustained positive change.



Over the year there was an increase in Child in Need support which had reduced by the end of the year, demonstrating that children and families get the help when they need it and are then supported to access universal, community based, and personal support networks to sustain progress made. The lack of children supported by a Child Protection Plan this year evidences the quality of preventative and early intervention work done in the City through the Early Help, Child in Need and Short Break support.

All care leavers are in contact with the service, have an up-to-date Pathway Plan, and are residing in suitable accommodation. The wait to secure a permanent housing tenancy remains a frustration for this cohort of young people and we work closely with housing to manage these tensions and keep young people updated.

"My only concern is not being clear about my permanent accommodation and when it will come through. I really need this to happen."

There continues to be strong partnership working, this was evidenced in feedback from parents in the Annual Survey:

"The plan means everyone that is important in my child's life is around the table and things can get done."

We continue to work closely with our City of London Police colleagues and have maintained our 6 monthly scrutiny sessions which continue to help develop communication, understanding and relationships between the

services. Our independent practice reviews also highlight the strength of multi-agency working relationships:

"the reviewer saw extensive evidence of effective multi-agency working to support the family. Key partners attended multi-agency meetings such as Child in Need reviews and shared information in a timely way and contribute to decision making, planning and intervention to reduce risk and address identified needs."

Over the year 14 practice reviews were completed with 8 being graded as 'Outstanding' for social work practice and the remaining 6 being graded as 'Good'

This year has seen a strengthening of our Multi Agency Child Exploitation (MACE) arrangements, scrutinising data held by agencies such as Police, Social Care, Health, Education, and Housing, in relation to vulnerability and exploitation to build the exploitation profile within the City. While City resident children are not highly represented within the data, MACE is ensuring that, when a City child does come to notice due to issues of exploitation, services are skilled and ready to respond appropriately. The progress in this area was noted in the Ofsted Focused visit which occurred in June 2026.

This year we have completed Departmental training in relation to Anti-Racist Practice and Cultural Competency, with plans next year to build on this and strengthen approaches across DCCS. This year we also





completed a Multi-Agency Child Audit in relation to disproportionality in relation to identification of Special Educational Needs and Disabilities for children from global majority backgrounds.

Committing to an action plan to tackle delays in identifying and responding to need for global majority children and recognising the need for different approaches and support to enable global majority parents and carers to access systems and services to ensure that their children receive timely intervention that meets their needs.

Our annual survey specifically asks children, young people, and families about their experiences of racism and City's responses to this. Findings were that, *"Several young people explained that, while they recognised that risks such as crime or racism exist within wider society, they did not consider these to pose an immediate threat to their own safety and did not identify any additional action that the City of London could reasonably take to improve their safety."*

However, we are cognisant of the fact that our care leaver cohort can be particularly vulnerable to issues of racism and discrimination due to their ethnicity, asylum-seeking status, verbal and literacy skills, and care experience. We offer a broad range of support to try and provide stability through immigration processes, having supportive care arrangements, longstanding trusting relationships with their social workers, a wide range of participation and community integration activities, strong education and employment support through the Virtual School, Adult Education Services, and commissioned services. Young people were asked whether they had people in their lives who cared about them. Most respondents identified at least one source of support, including family members, friends, partners, social workers, or support workers. One young person shared: *"I used to be alone and lonely, but now I do believe I have people in my life that care about me."*

I USED TO BE ALONE AND
LONELY, BUT NOW I DO
BELIEVE I HAVE PEOPLE IN
MY LIFE THAT
CARE ABOUT ME.





Family support and reunification

A baby and parent were supported by social care, early help, and health partners, following previous care proceedings, with a move back into the local area. A coordinated community support plan helped the child remain safely at home, reduced parental isolation, and connected the family to baby groups, nursery provision, and mental health support.

Strong relationship-based practice helped build trust with the parent and improve outcomes for the child. The parent was supported to rebuild confidence, explore future learning and employment opportunities, and the child is now settled and progressing well in early years provision.

Early help response to family need

A teenager and their family who had recently moved into the local area were referred to Early Help following neighbourhood conflict and police involvement. The Early Help assessment considered family context, possible discrimination, and unmet support needs.

Practitioners identified unmet neurodevelopmental and educational needs, supported the family through assessment processes, and helped strengthen communication with the school. This enabled a clearer understanding of the child's needs and improved access to appropriate support.

Early Help also identified additional needs within the wider family and coordinated therapeutic and education support. Work with the school helped ensure the children were understood in the context of their age, needs, and experiences, and supported a more child-centred response.

Family Help test and learn

A single parent with several young children, including one child with complex needs, was supported through Early Help. When family circumstances changed and needs increased, practitioners agreed that moving into child in need planning was appropriate while keeping the family's existing relationships at the centre of planning.

As part of the Family Help test and learn approach, the same practitioner continued working with the family after escalation, providing continuity, and maintaining trust. Supervision arrangements were adjusted to reflect the higher level of need while supporting reform principles around integrated and relationship-based help.





Support for a child in care

An older teenager referred to children's social care following concerns about exploitation was supported to become a child in care and access safe accommodation.

The allocated social worker quickly built a trusted relationship and collaborated with specialist partners to ensure the child was recognised as a victim of exploitation and trafficking. They were supported to access legal advice, and the criminal justice concerns were resolved.

The children settled into their new home, engaged with education, and completed an entry-level qualification before progressing to further study.

They were also supported to access therapeutic, health, and immigration-related advice, helping to stabilise their circumstances and plan for the future.

This year we have continued progress towards the Social Care Reforms and Families First Agenda. There has been good multi-agency involvement in this but there remains work to be done in relation to the development of the physical

Family Hub space and role of partners in delivering this, and the formation of the Multi-Agency Child Protection Team.

We have been using a test and learn approach with social workers completing Early Help Assessments and interventions and alternatively qualified staff continuing to work with families moving from Early Help to Child in Need support. This has been successful but has highlighted several changes required to our Mosaic system and reporting functions. These are being scoped out but will require significant capacity to implement in time for the DfE deadline of April 2027.

Whilst the National Transfer Scheme has overall been working effectively, we have recently had two children who have refused to move and subsequently will now remain in our care. However, should this become a more frequent occurrence this will have capacity implications for the service.





City of London
School for Girls

CITY - EDUCATION & EARLY YEARS

Safeguarding remains a priority for the Early Years Team, with a strong focus on ensuring that the revised 2026 EYFS safeguarding and welfare requirements are understood and embedded across all City of London early years provision. Annual Leadership and Management audits, provider forums and targeted support visits have been used to strengthen safeguarding practice, leadership oversight and compliance. The revised EYFS has provided an opportunity to further strengthen arrangements around safer recruitment, safeguarding training and supervision, whistleblowing, safer eating and sleeping, staff suitability, child absence and safer personal care.

The Early Years Team has worked closely with settings to review policies and procedures, support practitioners and address areas requiring further development. Additional support is provided to settings where specific safeguarding concerns or training needs are identified.

The Team has also strengthened partnership working with Early Help and other services to support early identification of need and children with additional needs and their families, and to contribute to the Best Start In Life and Family Hub offer. The Family Outreach Worker contacts all families with newborns to ensure needs are picked up early and appropriate support offered. This supports a preventative approach to safeguarding and ensures that concerns can be identified and responded to at an early stage.

All City early years settings are now being inspected under the revised Ofsted arrangements, which place a strong emphasis on safeguarding, welfare and wellbeing. To date, all City early years settings inspected under the new arrangements have met the safeguarding criteria. Overall, safeguarding arrangements across the sector have been strengthened, with a continued focus on leadership, workforce knowledge, safer practice and effective partnership working.



Education

During the past academic year, City of London schools have continued to implement the statutory *Working Together to Improve School Attendance* statutory guidance by updating their policies and adopting a whole-school approach to improving attendance. The School Attendance Support Team (part of the Education Team) continues to work with schools to promote regular attendance and reduce the need for formal measures such as post unauthorised absence meetings.

The School Attendance Support Team uses VYED (View Your Education Data), provided by the Department for Education as well as information sharing, monthly CME monitoring, school meetings and targeted absence tracking to identify children needing support and enable timely multi-agency intervention. Guidance on reduced timetables and education for children with medical needs promotes suitable education and reintegration, supported by personalised plans, multi-agency assessments and emotional and mental health provision, including City Chorus and Hackney Health.

Using data from the School Tracker and the DfE's VYED system, the Education Team has identified City-resident children attending 68 schools across 20 local authorities during the 2025-26 academic year.

The team has identified and contacted all out-of-borough schools where City-resident pupils have been identified as persistently absent. Schools have

been reminded that the Education Team is available to support schools and families in addressing barriers to regular attendance and improving attendance outcomes.

During 2025/26, the Education Team also contacted all independent schools identified as having City of London-resident children on roll. While most schools engaged with the request, some independent schools chose not to provide attendance data. These schools advised that they already provide attendance information to the local authority in which the school is located and were therefore reluctant to provide the same information to the City of London Corporation.

A Multi-Agency Strategic Attendance Group has been established, bringing partners together to review data, share intelligence and agree priorities. This newly established group, made up of education, health and social care leaders provides a clear governance framework for prevention, early intervention, targeted support and escalation.

To safeguard children in employment, the Education Team is supporting a Modern Slavery Working Group campaign that informs City businesses about work permit requirements for 13-16-year-olds. The team also continues to ensure safeguards are in place for children involved in performances by visiting production sets and working closely with venues such as the Barbican.





SEND

SEND is always a priority and the Service, along with the area partnership is committed to ensuring that The City of London is a place where children and young people feel safe, have good mental health and wellbeing, fulfil their potential and are ready for adulthood whilst growing up with a sense of belonging.

The partnership maintains high aspirations for every child and young person, ensuring education and support are tailored to individual needs so they can achieve their full potential. The Area SEND inspection's "Outstanding" judgement demonstrates the high quality of support provided to children and young people with SEND.

Towards the end of the 2025-26 academic year, the SEND Team commissioned an independent quality assurance report to further strengthen its auditing of its Education, Health and Care Plans to see if there is anything more that could be done to improve to support City of London children and young people with SEND and their families.

The Educational Psychology Service partnership with Hackney Education has been fully implemented and was judged successful in its first year, strengthening access to expert advice and collaboration with Hackney colleagues. A joint SEND Across the System presentation at a Paediatric Grand Round also helped Homerton Hospital paediatric staff understand the SEND system and how agencies can work together more effectively.

The quality assurance process for alternative provision (AP) has been fully embedded within the SEND & AP Panel process. Termly reviews are taking place to ensure that provision is of good quality, meets identified needs and supports planning for a return to mainstream education. Further work is required to strengthen quality assurance of off-site AP provision.

As part of ongoing quality assurance, the SEND team took part in a multi-agency case file audit commissioned by the CHSCP to assess whether children and young people identified as having SEND are identified and supported equitably. The audit found no immediate concerns about the support provided to City of London children and young people, including those with EHC plans and those from global majority backgrounds. These findings are consistent with previous audits and external reviews, including work undertaken by the City and Hackney Safeguarding Children Partnership and the recent Area SEND Inspection.

The SEND Team is progressing with the requirements as part of the national SEND reforms this includes recruiting Experts at Hand. This will include Educational Psychologists, Speech and Language Therapists, Occupational Therapists and specialist teachers. This will enhance the support that settings receive to support children with SEND and will cover The Aldgate School, the seven City of London early years settings, post-16 City SEND, the family hub, and children and young people not on school roll. This will ensure early and effective intervention for supporting those with additional needs. Plans around this are still in progress.





The City has commissioned the City and Hackney Speech and Language Service to support City children and young people with EHC plans who attend schools and settings outside the borough. This resolves previous gaps that required families to use private provision. From the 2026/27 academic year, there will be no barriers to all City children and young people with EHC plans accessing speech and language provision.

Education

The School Attendance Support Team coordinated multi-agency meetings for a primary aged child with significant barriers to school attendance arising from a complex medical condition. The meetings improved information sharing, strengthened partnership working, and helped ensure that support plans reflected both medical advice and the family's concerns.

Potential safeguarding concerns were identified from a recent meeting and appropriately raised with Children's Social Care to ensure wider family needs were considered.

Positive feedback was received from health professionals regarding the organisation and facilitation of the meetings, which supported a coordinated approach to improving the child's wellbeing and access to education. Whilst attendance remains a challenge, coordinated interventions such as psychology support and specialist advice have been implemented to facilitate improvements and engagement with education.





SEND & Early Years

The SEND Team and Early Years Team worked closely with Children's Social Care to provide coordinated and responsive support to a family with two young children who have significant special educational needs and disabilities (SEND). Through strong multi-agency collaboration, the family received tailored support to help both children access appropriate services and interventions at an early stage.

While one of the children had not started at nursery provision yet, the SEND Team commissioned specialist Teacher of the Deaf support to work directly with the child and family. This ensured that her hearing impairment needs were understood and addressed, while providing the family with practical advice and guidance to support her development at home.

The Early Years Team worked alongside the family to explore suitable nursery placements. Due to the complexity of the child's needs, the family felt that a specialist environment would best support her development. In response, the SEND Team arranged an assessment placement at the nursery attached to a local special school. Following the start of this placement, an Education, Health and Care (EHC) Needs Assessment was initiated, enabling a coordinated and holistic approach to identifying and meeting her needs.

The family's younger child has since been identified as presenting with similar needs. The Early Years Team has supported the family to explore appropriate early intervention services, including Portage and sensory impairment support. This work remains ongoing to ensure the child receives the right support at the earliest opportunity.

The combined involvement of the Early Years Team, SEND Team and Children's Social Care has provided the family with a high level of coordinated support across both children's needs. This partnership approach has improved communication between services, reduced the burden on the family of navigating multiple systems, and ensured that both children are able to access appropriate assessments, interventions and specialist provision to support their development and outcomes.

Early Years

Maintaining consistent safeguarding practice across all Early Years settings, ensuring the revised 2026 EYFS requirements remain embedded despite workforce turnover, varying levels of experience and emerging safeguarding risks. Continued leadership oversight, training, targeted support and partnership working will be essential. Strengthening joint working with Family Hub teams and the Best Start In Life programme will also be important to ensure a coordinated, preventative approach to supporting children and families.





Education

A continuing challenge for Education is ensuring that safeguarding risks linked to attendance, exclusion, elective home education and children missing education are identified early and responded to consistently across all settings, including where children attend schools outside the City. The small resident pupil population, spread across a wide range of schools and local authorities, means that effective oversight depends on strong data systems, timely information sharing and sustained engagement with partner agencies. A focus on accessing attendance data for City pupils at independent schools out of borough not wishing to share will be actioned.

Sustaining this focus will help ensure that vulnerable children remain visible, receive appropriate support and access suitable education. This work will be guided by the new Attendance Strategy and Action Plan, overseen by the Multi-agency Strategic Attendance Group. The established City of London Safeguarding Education Forum will also remain central to engaging all schools across the City as one community.

Ensuring currency of PREVENT training undertaken by all education settings in the City will be ongoing.

SEND

There are a number of uncertainties around the upcoming SEND reforms and what this will mean for how children and young people with SEND are supported. There are a number of reforms ongoing at once and there are risks around how these are joined up together. A number of LAs are experiencing an increase in requests for EHC needs assessments as a result of the SEND reforms. The City is yet to experience this but is mindful that this may happen and will impact on capacity.

A growing number of young people with higher levels of need are transitioning to post-16 education. As university may not be a suitable option, they face a significant risk of becoming NEET. Enhanced support is in place and will continue to help prevent this. Alongside this, an employers' forum is being developed to encourage local companies and businesses to take a more active role in creating opportunities for young people with SEND.

The number of EHCPs has increased by 17% over three years, placing growing pressure on our limited resources and staffing capacity. 26% access independent or non-maintained special school placements or alternative provision, with associated financial pressures for the local authority.

Securing special school placements for children and young people with SEND remains challenging, requiring ongoing collaboration with neighbouring local authorities to maintain access to suitable places.





CASE STUDY SUMMARY: CHILD E

Background

E is four years old and lives in a bilingual Spanish and English-speaking family. From May 2024, assessments identified significant expressive and receptive language delay, differences in social communication, sensory preferences and difficulty with shared attention and changes to routines. E communicated mainly through vocalisations and gestures and preferred repetitive sensory play. She was described as happy and affectionate, with a strong attachment to her parents.

Coordinated support

The family was experiencing overcrowded housing and wider pressures. Earlier Child Development Team referrals had been declined because there was insufficient multidisciplinary evidence. From November 2024, a coordinated response brought together Early Years, nursery staff, the SENCO, Speech and Language Therapy, Educational Psychology, Health Visiting, Family Outreach and Housing. A Team Around the Child process agreed shared outcomes and monitored progress.

- Regular observations across childcare and nursery, with strategies reviewed every six to eight weeks.
- Visual supports, simple language, sensory and parallel play, consistent routines, co-regulation and extra help with transitions.
- Home visits from Speech and Language Therapy, supported by a Spanish interpreter, to ensure consistency between home and nursery.
- Practical help for the family with school admissions, Disability Living Allowance application, housing and wider family support.
- Early Years Inclusion Funding was secured and, Educational Psychologist's assessment formed part of evidence gathered for an Education, Health and Care Needs Assessment.

Impact

Over two years, E became increasingly settled and engaged in nursery. She sustained preferred activities for longer, accepted familiar adults joining her play, responded to simple language and social games, and showed greater awareness and tolerance of peers. Consistent support reduced her anxiety and helped her recover more quickly when distressed. E also developed a closer relationship with her younger sister and increasingly communicated her preferences non-verbally.

In March 2026, the school's request for an Education, Health and Care Needs Assessment was accepted, and E's EHCP was finalised on 3rd August 2026, securing specialist support for her transition to Reception. The family was allocated a move by the Housing Team, and E's father began receiving mental health support.

Family experience and key learning

Trust developed through regular, accessible and consistent communication. Despite language barriers, housing pressures and an often-overwhelming assessment process, E's parents became active partners in planning and reported improvements in her happiness, confidence, communication and emotional wellbeing.

Key learning: sustained multi-agency working, consistent strategies across home and education, strong family relationships and practical support can overcome barriers, strengthen assessment evidence and secure timely, coordinated provision for a child with SEND.



CITY OF LONDON POLICE

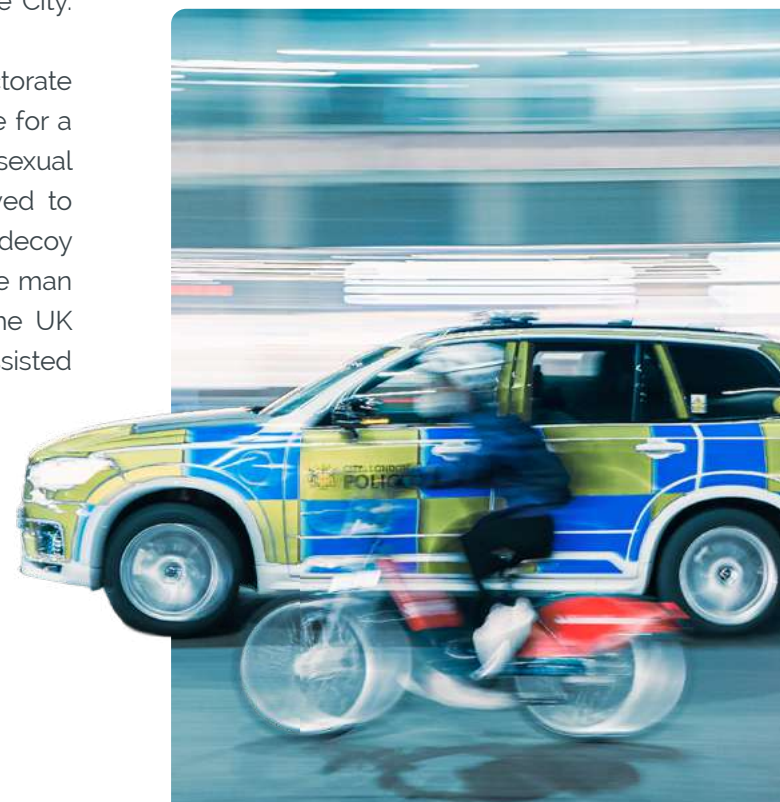
City of London Police are due an inspection by the His Majesty's Inspector of Constabulary and Fire and Rescue Services in the coming months, and this is expected to cover the thematic area of Child Protection. This has meant the CoLP have taken the opportunity to go through some extensive self-assessment exercises, benchmarked against other police forces and what good practice has been assessed as. These reviews have had broadly positive outcomes and show the CoLP ought to present well to the Inspectors.

There has also been a successful move towards involving the child and youth specialists within the neighbourhood policing Multi-Agency Prevention Team in the review of Public Protection Notifications ('PPN'; the method whereby frontline officers record when a child has come to police notice) which has meant that officers from this team can start to operate in the prevention/early help space whilst the Child Abuse specialists within the Public Protection Unit focus on more acute safeguarding/abuse cases.

This work is all in support of the force progressing towards the creation of a delivery plan to support the strategic priority it has set itself to embed 'Child Centred Policing'.

- 1) An example of the benefits of the MAPT being involved in the review of PPNs was the identification of a young female from Norfolk who was repeatedly going missing from her care setting, travelling to London and coming to police notice. Following her latest missing episode, officers from the MAPT actually travelled to the child's home address and engaged successfully with her and her carers, established what was drawing her to the City and came up with some resultant interventions which have so far prevented further missing episodes in the City.
- 2) A really good example of cross-directorate working resulted in a three year sentence for a Portuguese national who had engaged in sexual communication with someone he believed to be a 14 year old female, but was actually a decoy from an online predator hunter group. The man had committed the offences whilst in the UK on business, and intelligence teams assisted in identifying when the suspect was returning to the UK in order that he could be arrested. The case was so strong he pleaded guilty immediately at court. He will be deported on release from his prison sentence.

A constant challenge for the City of London Police is maintaining operational experience amongst child-protection trained officers due to few crimes of this type in the local area. Plans are afoot to design and deliver a programme of CPD, but also to reach out to Child Abuse Investigation Teams in some of the neighbouring boroughs in the MPS to request attachments/secondments to expose CoLP officers to more CA offences.





Hackney Service Centre

HACKNEY CHILDREN & FAMILIES SERVICE

DfE's Families First Partnership Programme

There have been significant changes to the structure of the Children and Families Service in the year 2025/26 connected to the implementation of the Families First Partnership Programme. These DfE mandated reforms must be implemented by March 2027 and mark the introduction of a proactive, inclusive and relationship-based model of providing support to children and families. The work to implement these has to date included:

Establishment of a Families First Partnership Programme Team in Summer 2025

This Team began by launching several individual workstreams which, in this initial 'set up' phase, brought together leads from relevant agencies. Throughout the autumn and winter of 2025/26, the Team undertook co-design work with colleagues, bringing together staff from across the service and supporting them to develop job descriptions for new roles, proposed structures for new teams and templates for new pieces of work.



Launch of new single neighbourhood-based Family Help Service in May 2026

This launch was supported by updated case management processes that went live on our Mosaic system in June. Following a formal restructure, staff were reorganised into new teams made up of both qualified Social Workers and Family Help Practitioners whose qualifications are other than in social work, based across Hackney's four local Children and Family Hubs, working alongside colleagues who are taking forward our response to the DfE's Best Start in Life agenda.

In addition to our neighbourhood Family Help teams, a specialist team based within our Youth Justice Service has been established to provide Family Help support to our children who are most vulnerable to extra-familial harm. Following consultation with children and families, this team has been named the Safer Paths – Preventing Harm Outside the Home Team. It is set to achieve full staffing by October 2026. Work is also underway to incorporate a Family Help approach within our existing Disabled Children's Service through the expansion of criteria to support children and introduction of new Family Help Practitioner roles.

The Family Help Service also includes our Keeping Families Connected Team, which is our edge-of-care service to keep children at home and support family togetherness during times of critical or acute crisis. Our new Hackney Central Team, a centralised team of newly qualified Social Workers undergoing their assessed and supported year in employment (ASYE) established in January 2026 as an 'invest to save' initiative to develop and retain staff, thereby reducing recruitment costs.

The MASH continues to serve as the initial point of contact for consultations and new support requests, its full title has been updated from Multi-Agency Safeguarding Hub to Multi-Agency Support Hub. This change aims to present a less intimidating entry point and better reflect the diverse range of services available to families from their very first interaction.

Launch of Child Safeguarding Team in August 2026

This new team works in partnership with Family Help teams whenever a child protection response is required, leading all Section 47 Child Protection Enquiries. The team is made up of Child Protection Leads (our simplified local name for the qualified Social Workers with safeguarding expertise referred to within Families First as Lead Child Protection Practitioners), and safeguarding experts from within local Police, Health and Education services. The Police contribution is provided by the Child Abuse Investigation Team's referrals desk, the Health Lead role has been funded by the local authority through a Direct Award on an 18-month fixed-term basis, and colleagues in our Virtual School fulfil the Education duties. Arrangements for multi-disciplinary supervision for the Child Safeguarding Team are being developed.





Future launches

A new parental advocacy offer will be established in October 2026 and will focus on providing support for families at Child Protection Conferences alongside our existing advocacy for children for their Child Protection Conferences. The goal is to ensure this service is culturally competent by offering advocates who share the same cultural backgrounds as the parents they support. This is particularly important in Hackney, where Black and Global Majority families are disproportionately represented at Child Protection Conferences. Through building relationships with our voluntary and community sector (VCS) partners, we have been able to think together about these plans and now have a culturally diverse team of ten VCS partners undergoing training as advocates for this new approach. The cohort of advocates will be supported by two Parental Advocacy Co-ordinators (one leading on Child Protection and a second leading on Education).

Our new in-sourced family-led decision-making team, which we have named the Family Meeting Service, launched in September 2026 and will have a role both in facilitating family-led decision-making directly and in supporting allocated practitioners to facilitate family-led decision-making when they already have a strong relationship with a family. The team consists of three Family Meeting Facilitators, one Senior Family Meeting Facilitator and two Business Support Officers. The development of our family-led decision-making service has been supported by external consultants, Relational Activism, led by Tim Fisher, who spent many years leading Camden's Family Group Conference offer.

In alignment with Families First guidelines to embed children's and families' voices into service redesign, we have actively worked to engage a wide variety of communities, fostering cultural competence throughout our co-design initiatives. With the support of our voluntary and community sector partners, we have held focus groups within specific communities, including the Traveller,

Turkish and Kurdish, Bangladeshi and Black African communities. Together with our voluntary partners within the Charedi Jewish community, we have held 1:1 sessions with parents, rather than focus groups, due to possible barriers around confidentiality and the stigma within the community about having involvement with Children and Families services. Following the short-term focus groups, a new long-term women's Parental Advisory Group has been established and meets six-weekly. We are looking forward to launching our men's Parental Advisory Group in the near future. Working closely alongside our voluntary partners, our goal is to ensure representation across as wide a range of communities as possible. Sessions with children in focus groups have also started, to ensure their views and experiences are heard and that they are directly involved in shaping the services they use.

The Families First Partnership Reforms require us to develop a whole partnership approach to practice. The City and Hackney Children's Partnership Board has endorsed our Families First Programme Board recommendation for a Trauma-Informed and Anti-Racist Approach to practice. Consultant Maria Takendisa has been commissioned to support us in this endeavor at a leadership level, and a 5-year strategy and plan will be developed by March 2027 to take this forward across the partnership at leadership and practice levels.

While it is too early to reliably measure the impact of the changes made so far, the progress of our implementation has been timely, and we are on track to meet the Department for Education's requirement for structural changes to be completed by March 2027. An evaluation framework has been developed, with scrutiny and oversight to take place at the Improving Outcomes for Children Board, Families First Partnership Board, Children's Social Care Reform Board and City and Hackney Safeguarding Children Partnership Board.





Ofsted Focused Visit on Leaving Care Service

In June 2026, Ofsted conducted a focused visit to Hackney Children and Families Service, concentrating specifically on the progress and experiences of care leavers. We had anticipated that this service area would be selected for inspection, as it was the sole judgement category graded as "Requires Improvement" in the 2024 Full ILACs inspection, where all other areas achieved a "Good" rating.

Following the 2024 Full ILACs inspection, a significant amount of work was undertaken to improve the experiences and progress of Hackney care leavers.

The outcome of the visit in June was overwhelmingly positive. Ofsted concluded *"Leaders have strengthened services for care leavers since the last ILACS inspection in 2024. Leaders are ambitious for care leavers and understand that improving their experiences requires effective partnership working and sustained corporate commitment"*. Ofsted also noted that *"Leaders have established a strong relational culture that is underpinned by the authority's systemic, trauma-informed and anti-racist approach."* We are delighted this reflects the hard work and commitment undertaken by both CFS and the wider council to improve services on offer to our care leavers.

Ofsted also confirmed the inspectors saw that care leavers have *"warm, trusting and purposeful relationships with practitioners who are ambitious for them and committed to helping them achieve positive progress into adulthood"* and that our practitioners' know young people well and work collaboratively with partner agencies to ensure that care leavers receive practical, emotional and therapeutic support that responds to their individual needs".

CARE LEAVERS HAVE...

"WARM, TRUSTING AND
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WITH PRACTITIONERS WHO
ARE AMBITIOUS FOR THEM
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THEM ACHIEVE POSITIVE
PROGRESS INTO ADULTHOOD"





Learning Conversation Scored audit on CSA in Family Environment (completed January - March 2026)

Between January - March 2026, Learning Conversations exploring practice for children impacted by Child Sexual Abuse in the Family Environment were completed.

- Overall, 18 learning conversations were completed, scoring practice as 33% Outstanding (6 audits), 33% Good (6 audits), and 33% Requires Improvement (6 audits), with 0 audits rating overall practice as Inadequate.
- Good and Outstanding practice included prioritisation of children's voices and maintaining protective stances when faced with conflicting police decisions or significant judicial delays; good frequency of visits; good utilisation of CSA consultations and their recommendations; and exploration of intersectionality of identities. Effective support included four mothers who were supported to attend parenting courses. In addition, effective interventions for two children led to a decision to cease involvement in one case and to de-escalate from child protection to a Child in Need Plan in the other. Auditors commented that many social care interventions successfully lowered immediate risks of sexual harm, removing perpetrators from children's immediate surroundings, and making children feel safer.
- Areas for improvement were identified where practice showed practitioners had not been clear with children that they were open to children's services due to risk of sexual harm and where it had been challenging to engage perpetrators of abuse where denial of concerns limited the extent to which risk could be assessed and intervention could take place. Supervision had met required Practice Standards in 11 of the 18 (61%) files audited. In five audits (28%) there were gaps of between 3 and 6 months in supervision at some point during the previous 12 month period and in insufficiently clear and reflective recording of supervisions in four (22%) of the files audited. In addition there was inconsistent evidence of anti-racist approaches to practice, including in CSA consultations.

Recommendations included:

- CSA consultations to have an agenda item around discussing CSA with children
- CSA consultations to have an agenda item around a trauma-informed approach to working with protective adults
- All CSA consultations must have an agenda item where anti-racist practice and identity is explored
- Systematic monitoring through data that a child sexual abuse consultation takes place for any child about whom there are concerns about sexual abuse
- Individual case actions on supervision frequency and recording where relevant and examples of effective reflective supervision recording added to policy and procedures

Additional professional development in this area of work is being facilitated by participation in the Child Sexual Abuse Practice Leads Programme. This Programme is a key recommendation of the national Child Safeguarding Practice Review Panel and involves 12 days of specialist learning for 10 qualified social work practitioners. The Programme commences in October 2026.





Summary of learning from Practice Fortnight (June 2026)

We are undertaking twice-yearly practice observation weeks. In our most recent Practice Fortnight in June 2026, senior leaders completed 36 observations of practice with families, including, for example, meetings and home visits.

Observations noted that practitioners consistently demonstrated empathic and warm interactions accompanied by a "doing with" approach that empowered families to contribute their views; and made decisions that were timely, child-centered, and proactive. Observers noted the value and importance of

our continued commitment to training and consultation to further embed our Systemic, Trauma-informed and Anti-Racist approach to working with families and to continually improve practice in this area of our work.

Families told observers they valued supportive, consistent relationships with practitioners and having clear information on who to contact if their own practitioner is unavailable. Practitioners have been reminded to ensure they let families know who they should contact during any period of absence.





Hackney Council's Financial Challenge:

In Hackney, we continue to face the ongoing pressures of service demand and the reduction of funding. This is due to:

- Cost of living crisis and increasing costs
- Growing demand
- Lack of clarity about long-term funding arrangements

Estimates indicate a budget gap of £10m over the mid-term financial plan up to 2029/30.

There is therefore an action plan to reduce expenditure within each Directorate.

As the cost of living crisis continues, Hackney families continue to face poverty, homelessness and hunger. 'Evidence suggests that poverty is a key factor influencing why children enter care (Bennett et al., 2022; Bywaters et al., 2020; Elliott et al., 2019)' (Elgee, 2024), and 'growing up in poverty or destitution can negatively impact a child's educational, cognitive and social outcomes, as well as placing them at risk of criminal exploitation, abuse or neglect (Jay, A. et al, 2024; Wickham et al, 2016; Bywaters and Skinner, 2022)' (NSPCC, 2024). Thus, supporting families with the cost of living at the earliest stage possible is of key importance.

The Government started a [Child Poverty Taskforce](#) in 2024 in recognition of the issue, their strategy can be found [here](#).

Hackney Council is undertaking a range of activity in response to this crisis, including the adoption of the Poverty Reduction Strategy 2022-2026. This includes, for example:

- Free school meals for all primary school children in state-funded schools during 2025/26. Provision of food vouchers and school uniform grants for children identified as struggling (eg those receiving free school meals or identified by local providers of support to families)
- Funded 2 year nursery places (including families with NRPF): 15 hours a week for 38 weeks a year. Provision of support to families who are identified by Early Help, MASH, Children's Centres, Youth Hubs, voluntary sector support providers. This may include provision of various food vouchers, free activities by providing food vouchers



One of the main areas of financial pressure for Children and Families Service continues to be in relation to care arrangements for looked-after children and care leavers. This is largely linked to the complexity of care needed for children coming into the service, with an increase in the number of children needing high-cost bespoke packages. In addition, the cost of residential care and semi-independent care arrangements are increasing due to rising inflation and the cost of living crisis. The following mitigations have been identified; these include:

- A Panel process to review the top 30 high-cost care arrangements, resulting in reductions in the number of high-cost placements.
- A Foster First approach, which means all children under the age of 16 are to be offered a foster placement as a first option. Seventy percent of our children in care live in foster homes, and 46% of these live with in-house foster carers.
- 3 Hackney Villages constellations of linked foster families which promote the stability of foster care arrangements.
 - In 2025/26, 75% of our children who had been in care for at least 2.5 years had been in their current homes for more than 2 years.
 - The proportion of children who experienced three or more moves in the year was 9% in 2025/26.
- In April 2025, we launched our Kinship Strategy and Kinship Local Offer, which outlines the support available to all our kinship carers, including special guardians, connected carers and private foster carers.
- In January 2026, we published our Corporate Parenting Sufficiency Strategy for 2026-28, which sets out how Hackney intends to meet the accommodation needs of current and future Children Looked After and Care Leavers.
- We are moving closer to opening two new, small children's homes in the borough, scheduled to open at the end of 2026.

Hackney CFS has also successfully delivered a number of restructures (Young Hackney, Children's Social Care and the Clinical Service) which have reduced spending while maintaining a focus on frontline practice. In 2025/26 Hackney CFS came in under budget.





Recruiting and retaining social workers

Nationally, there continues to be high staff turnover, and challenges in recruiting and retaining social workers, resulting in high caseloads. Where we have recruited staff, they may be less experienced (eg. undertaking their first Assessed and Supported Year in Employment), and require increased support from managers to ensure high-quality practice.

We have implemented a number of incentives to recruit and retain staff. These include a retention bonus, strengthening practitioner career pathways, streamlining the process for agency social workers to progress to permanent roles, strengthened our induction and training offer, and improved our support and oversight for students and ASYEs. In 2025-26 we saw a reduction in agency-related spend.

The change to statutory guidance, stipulating that agency social workers need a minimum of three years' post-qualifying experience in children's services in an English local authority, has contributed to an increase in agency workers taking permanent social work roles in Hackney.

As part of the Workforce Strategy 2025-2028 four workstreams were created. One of these workstreams focuses on improving recruitment and retention of staff.

In 2025/26, Hackney CFS had a more stable workforce with a higher percentage of permanent staff.

Responding to reforms to Children's Social Care, including the Children's Wellbeing and Schools Act

- A briefing summarising all social care reform across the sector, including that included in the Children's Wellbeing and Schools Bill, has been shared with leaders.
- All social care reform activity across the Children and Families Service will be tracked and monitored by the Children's Social Care Reform Board.
- A substantial amount of work is already underway across CFS. This includes:
 - Families First Partnership Programme work, including establishment of the Family Help Service, Child Safeguarding Team and a Family Led Decision Making Team (based in the Family Help Service this team will focus on encouraging and enabling full involvement of all family members to find the best solutions for their families) Family Group Decision Making team.
 - Kinship Local Offer published.
 - Pan-London Regional Care Cooperative being set up
 - Reviewing the Local Offer for Care Leavers
 - Preparing for the replacement of the ASYE system
- We continue to monitor ongoing developments in relation to all other areas of social care reform such as bringing in a single unique identifier for every child, reviewing Kinship national standards, expanding the role of the Virtual Head and expanding the Staying Close scheme for care leavers. In many of these areas the DfE are currently running pilots or consultations and are due to publish further guidance for local authorities and partners.





YOUNG HACKNEY

Young Hackney is the Council's Integrated Youth Service for children aged 6-19 years old and up to 25 years if the young person has a special education need or disability. The service is the key mechanism through which Hackney meets the statutory duty to provide educational, recreational and leisure time activities, and sufficient facilities for such activities.

The Service works with children to support their development and transition to adulthood by intervening early to address adolescent risk, develop prosocial behaviours and build resilience. Young Hackney workers ensure the voice of the young person and 'think family' are at the centre of practice, and are considerate of the strengths and needs of parents and carers as individual assessments and plans are developed. The Service commissions a wide range of complementary youth provision through the local VCS.

The restructure of Young Hackney was implemented from April 2025. The remit of Young Hackney continues to focus on early help and prevention; maintaining universal open access delivery alongside targeted support for those who are vulnerable and at risk of poor outcomes. The service is aligned with the four neighbourhoods of the Child and Family Hubs and Family Help Service. Within each locality the Young Hackney offer combines direct and commissioned delivery with partnerships and funding into a coherent single offer to meet the needs of local young people. The revised structure now includes a Detached Outreach Team to engage young people who may be unaware of local opportunities and/or vulnerable to exploitation and harm in the community.

As part of the restructure, the age profile for youth services was refocused towards adolescents aged 10 – 19 (and up to 25 years with SEND). This change reflected the desire to intervene in adolescence and to address key transition points. During Summer 2026 the age range was relaxed back to 8+ for universal youth provision, reflecting the high demand for youth provision and feedback from families.

The staff resource has also been reconfigured to re-establish a detached outreach team. The Detached Outreach Team began delivery in June 2025 and has had success in engaging with 14-18 year olds. The Team deliver 8-10 detached outreach sessions per week outside school hours, and have contributed to targeted interventions with groups of young people, in key locations identified in partnership with Community Safety colleagues. A key partnership has been developed with 'Your Stance'; delivering Emergency First Aid and bleed response training to young people. Alongside detached outreach sessions, the team delivers a weekly young women's group at the Eastway Sports Hub and a young women's football session in Haggerston. The Team also holds a caseload of one-to-one targeted support for individual young people.

Health Services for young people in City and Hackney have been reconfigured into a new integrated service called Young Hackney Health. This brings together substance misuse support and treatment, health and wellbeing, PSHE and RSE in education settings, condom distribution and some of our sport and physical activity provision. A new whatsapp number now acts as a digital access point for young people to receive information and advice about their physical, mental or sexual health. The line is monitored Monday-Friday between 9am-5pm and young people can expect a reply within 24 hours.

An estimated total of 15,412 individual young people accessed universal services offered through Young Hackney during 2025/26, with 126931 daily attendances named and anonymous attendances.

Young Hackney delivered targeted support to 1009 young people in 2025/26.





Case Study 1: Targeted Early Help

R is 15 years old and lives with his mother and four siblings. Diagnosed with Autism Spectrum Disorder, Ataxia, and other medical conditions, R manages significant developmental and physical health needs. R was sexually assaulted in primary school by a fellow pupil, and the family are currently navigating profound grief following the sudden death of R's father.

R presents with emotional dysregulation that has resulted in violent outbursts at home and school. Escalating behavioral challenges, limited social interaction and recent concerns regarding harmful sexualised behaviors (HSB) led professionals to seek targeted intervention.

Young Hackney initiated a targeted intervention plan to stabilise the household and address risk factors, including:

- **Direct School-Based Work:** Delivering structured, Autism-friendly 1:1 sessions at school focusing on emotional regulation and HSB awareness.
- **Clinical Consultation:** Partnering with clinical specialists to adapt therapeutic tools to R specific neurodivergent profile.
- **Mentoring & Multi-Agency Alignment:** Exploring a male mentor match for positive role modeling while coordinating with School, CSC, and Short Breaks services.
- **Community Engagement:** Identifying local community activities and positive youth provisions tailored to R's interest to prompt safe social interaction and inclusion.

Impact & Feedback:

Through the coordinated multi-agency approach and targeted 1:1 sessions, early outcomes indicate a stabilisation of emotional dysregulation episodes for R as well as engagement in local community provisions that are beginning to foster safer social interactions. The integration of recommendations and resources provided through the clinical consultations also equipped professionals with tailored de-escalation techniques.

The family has expressed appreciation for a mentor that matches R's religious background, noting that it provides culturally sensitive guidance and a positive role model for R. The coordinated support across services has offered the family much-needed reassurance and stability during a challenging period of bereavement and adjustment.





Case Study 2: Targeted Early Help

AB is a 16yr old Black Caribbean boy. He enjoys learning, and has a passion for music production.

The support from Young Hackney was offered following a self referral made by Mum, who raised concerns around AB's understanding and feelings around a recent diagnosis of ADHD and ASD. There were further concerns raised around his engagement in education and the impact this was having on his health and wellbeing.

Support provided by Young Hackney included weekly 1:1 sessions exploring AB's mental health and emotional regulation, his experience around neurodivergence, ASD and ADHD, safety in the community, job seeking and preparing for work discussions. Further support was also offered around advocacy for access to support for his GCSE exams and linking Mum in with SENDIAGs. The application for an EHCP was declined, and Mum was supported in progressing an appeal around this.

Creative methods were implemented to support engagement with AB, including activities such as table tennis, walks in the park, creating joint art pieces and attending local food places. Using a trauma informed and child led approach, the YH worker facilitated discussions around his lived experience, identity and family, and explored shared experiences and interests to build a trusted relationship.

AB was supported to become a Youth Volunteer at a local Youth Hub, and completed a number of volunteering days over the summer holidays. AB developed and successfully delivered a music production project. He will continue with this project going forward as a peer mentor.

AB's increased confidence has also led to improved relationships with friends, and he now has a group of friends. AB achieved a number of GCSE's and successfully secured a college place on a Music course. AB has also secured part time employment doing sound/voiceovers in animated television.

Family feedback

'[the Young Hackney worker's] approach has been nothing short of transformative. He has built a deep level of trust and safety with AB, providing the stable anchor AB needs to heal and look forward.'

... His trauma-informed, neurodiversity-affirming approach has given AB safe, practical strategies to manage these intense feelings.

...By exploring volunteer and work readiness pathways in a low-pressure way, [YH worker] is helping AB see a future for himself that is not defined by his past school experiences.





Case Study 3: Health Spot City & Hackney

Health Spot City & Hackney has been piloted as a youth-centred, integrated health and wellbeing model delivered within the Forest Road youth hub setting. The pilot aimed to improve young people's access to health and wellbeing support, enable earlier intervention and prevention, and strengthen collaboration between youth services and health providers. An evaluation conducted by Fiveways NP Ltd shows particularly strong findings in relation to access, engagement, and experience of care for young people, alongside improved confidence and collaboration among professionals. The evidence suggests that Health Spot supports earlier help-seeking and intervention, particularly in relation to mental health and wellbeing.

The report concludes that Health Spot is successful in reducing barriers to access and supporting young people to engage independently with services. Young people surveyed consistently described the service as easy to access, welcoming, and designed for them. Timely access to appointments - often on the same or next day - was a decisive factor in choosing Health Spot rather than other services. The findings from young people show high levels of agreement that the service was accessible, youth-friendly, and non-judgemental. The youth-centred environment plays a critical role in reducing anxiety, stigma, and embarrassment associated with accessing care. Interview evidence demonstrates that young people were more willing to seek help, return for follow-up care, and recommend the service to peers. Young people reported increased emotional awareness, improved confidence in managing their health, and positive changes in routines and self-care. The youth hub setting and informal routes into care supported autonomy, particularly for those who had previously delayed or avoided accessing support. Youth workers added distinct value through relational practice, advocacy, and continuity, which supported engagement and improved how clinical services were experienced by young people.

The Service faces challenges with respect to coordinating the local youth offer, as many funding streams (including from the Mayor of London) do not engage with or consult local authorities on local needs and gaps.



image © <https://www.younghackney.org/forest-road/>





HACKNEY EDUCATION

Hackney Education's Education Safeguarding and Wellbeing Service has been restructured and is fully operating as Hackney Education Alternative Learning Service (HEALS) as of September 2026. HEALS a cohesive response to children experiencing barriers to education, designed to see those children, to hear them and understand their context, and to work together as a partnership to dismantle those barriers and put safeguards in place when necessary.

HEALS has been designed in collaboration with our partner agencies, and is informed by a safeguarding first, local neighbourhood model that facilitates a gradual exposure pathway to reintegrating children into mainstream settings when it is safe and advantageous to the child to do so.

HEALS has a safeguarding team which has a daily presence in MASH as well as at the HEALS Hub via a rotation system. This consistent co-location allows us to share information quickly and to respond to changes in context for children promptly.

Children and Family Hubs - Early Help and Early Intervention and Prevention.

Up until June 2026 Family Hubs continued to deliver MAT targeted Early Help alongside Universal preventative services.

From April 2025-March 2026 the service reached over 27000 individuals equating to over 11,000 families across MAT Targeted Early Help and Universal preventative services.

Of those accessing 24% identified as Other white (largely attributed to the Orthodox Jewish Community) 24% White British, 21% ethnicity was not collected, 8% were Black African, 7% Mixed Background, 7% Mixed Background, 4% Caribbean. 5% others

Of these 1034 children (487 families) were supported via MAT early Help. Presenting vulnerabilities for families accessing this service remained static, the highest proportion experiencing parental mental ill health or emotional challenges, child emotional health challenges, housing, and financial impacts as well as the capacity to parent. Only 13% of families accessing MAT early Help identified as White British demonstrating that Black and Global Majority families continue to be over represented within targeted early Help services.

There was a higher proportion of families requiring support in the north of the Borough; Springfield Park and Woodberry Wetlands made up 40% of the families supported followed evenly with 21% in London Fields and Shoreditch Park, 20% in Hackney Marshes and Wellstreet Common, 19% in Hackney Downs and Clissold Park.





The Families First reforms prompted a restructuring of Targeted Early Help, (MAT) under Hackney Education Family Hubs governance and transitioned to the Children Social Care. Although conducting this restructure alongside social care presented challenges and created workforce uncertainty, the outcome was relatively successful. Many targeted early help staff secured new roles within Family Help, ensuring continuity of care for families. A total of 52 families transferred with their workers to the family help teams.

Whilst driven by DfE mandates, this transition disrupted the structured multi-agency team (MAT) model, which had provided support to families with children under six since 2009. The core model of delivery evolved from its former structure. While Early Help remains integrated within the new Family Help framework, the nature of this service differs from the previous multi-agency, multi-disciplinary provision focused on pre-school children.

Transitioning Early Help to the Children's directorate has enabled Family Hubs to sharpen their focus on parenting support and early intervention, aligning with Best Start Family Hubs ambitions. This strategic shift has successfully retained Early Help staff expertise while bolstering partnerships with schools serving children aged 0–11. In June 2026, these efforts culminated in the launch of a new parenting service structured around three core pillars: short-term interventions (up to 12 weeks), evidence-based parenting programmes, and coordinated school outreach in collaboration with HEALS. Although the service is new, it has already generated nearly 100 referrals as of September 8, 2026.

As part of the Families First reforms, Family Help teams are now partially co-located within Family Hubs. The hubs have provided hot-desking space and IT infrastructure to meet the increased demands of the new Family Help Teams. There is a mixture of success in terms of integrating these teams, this is continued to be monitored by the family help teams and the children and family hub managers.

This arrangement improves access to a wide range of universal services for families currently under Family Help or Child Protection Plans. Families are already benefiting from this initiative, as Hub Family Navigators connect them to additional support services alongside their primary Family Help care. Despite a positive start, child protection conferences have been trialled in two of the hubs, though this has been met with mixed reviews, including citing IT issues and noisy environments for families. It has been agreed that reviews and Family Help meetings will continue in the hub buildings, but CP conferences will be reviewed.

Leadership is currently addressing the logistical challenges associated with this transition.





Some feedback that HEALS has received in our pilot term (April-July 2026):

A parent of a Y11 child who was experiencing emotionally based school non-attendance, who received support and teaching from HEALS:

*"Last Thursday **** went into school (a huge win in itself!) to collect her results, and has stunned herself and us by smashing her exams, passing all she needed and even getting a Grade 9 in English.*

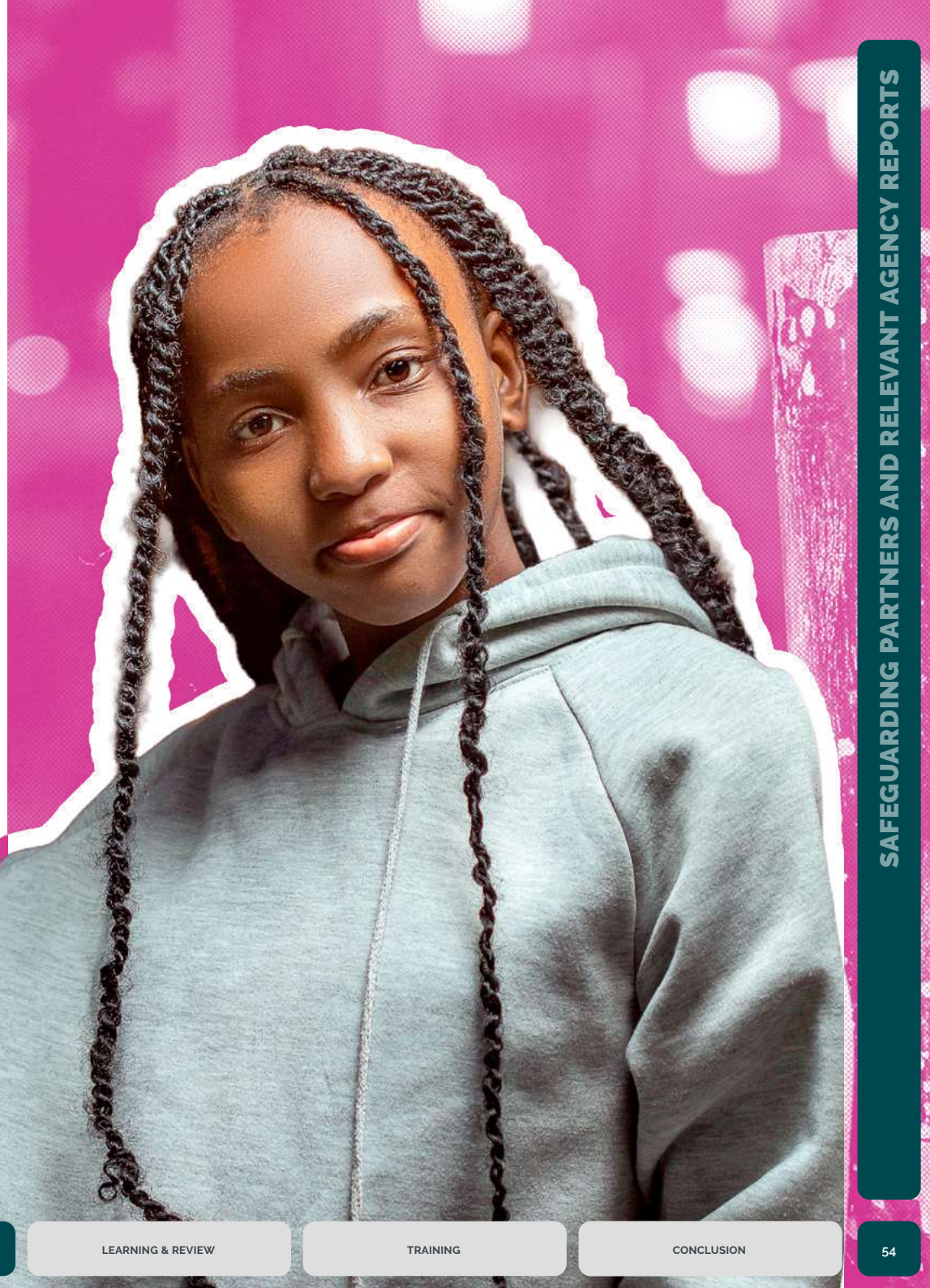
"She starts at Big Creative Academy in Walthamstow next week, studying a Level 3 in music Performance.

*"I just wanted to let you know that finally there is a light at the end of this very long tunnel, and that the way you stepped in and advocated for us and for **** made a massive difference to her life."*

Feedback from a parent of a child who had experienced exclusion from their school, and who had been supported by HEALS

*"I genuinely believe you are part of the difference between **** coming out of this experience hating school forever and **** coming out of it believing that education can still be a positive place for him.*

"What happened could so easily have changed the way he saw school, adults in education and, most importantly, himself."





Children and Family Hubs

As part of Family Hubs development Hackney worked with 12 London LA's and co-authored a new outcomes Framework known as FHAB (Family Hubs and Beyond). This Framework now referenced by the DfE and threaded through our Best Start in Life Plan intends to bring shared language, indicators and metrics to all outcomes for Babies, Children and Young People and their Parents and Carers. Ensuring outcomes across the 5 domains Happy Healthy Learning Engaged and system wide. Analysis identified a lack of data around happiness and engagement and as such evaluation tools are currently being explored to determine how best to capture this information.

A key outcome for Children is the Good Level of Development (GLD) measure at age 5. Provisional data suggests that there has been an increase from 68% (2025 data) to 71% of Hackney children achieving a GLD. The indicative data demonstrates that Black African and Black Caribbean Boys, Turkish/Kurdish Boys, Bengali boys and Charedi children are performing below their peers and remain a key focus of our work.

357 families accessing family hub services completed impact evaluations during 2025/26 where they were asked what difference accessing Family Hub services had made to their family, results were overwhelming positive:



For those accessing MAT targeted early help 91% saw reduced or non escalated risk codes and 9% were stepped up for statutory assessment.

A Best Start In Life impact report detailing outcomes for 2025/26 across Family Hubs has drawn together a number of impact measures. Indicative data shows improved parent infant relationships, improved breastfeeding initiation rates and improved early language in the home support.





HEALS is due to open a HEALS Hub which will offer a high quality curriculum delivered in a therapeutic learning environment in the autumn term of 2026. This is an innovative approach to meeting our statutory duties as a local authority education department; it involves significant coordination and redirection of resources, which in a time of consistent service transformation and budget constraints, poses a big challenge. The service this would provide to our Hackney children would be transformational and we are committed to getting it done.

Partner agencies (health visiting, midwifery, speech and language and Charedi Family Support Commission services) report a loss of information sharing and partnership working since the cessation of MAT, reporting they do not feel as connected and informed of joint case working since cases transferred to Family Help. Future development will focus on establishing multi-agency communities of practice to sustain established trusted relationships and ensure the holistic needs of the families we support remain a priority.





HACKNEY COMMUNITY SAFETY PARTNERSHIP

The Hackney Community Gangs Partnership continues to advance local safeguarding arrangements by integrating the Families First framework directly into daily multi-agency operations. Rather than treating vulnerable young people in isolation, the partnership actively engages families and wider community networks to build resilience against extra-familial harm and criminal exploitation. A primary example of this integrated approach is the delivery of Parents Voice, a free, non-judgemental support initiative run by local charity

The Crib Youth Project in collaboration with the Community Gangs Team. By offering structured awareness sessions, the project empowers parents to recognise early indicators of gang involvement and protect young people within the household. Concurrently, targeted specialist mentoring is combined with practical pathways into paid employment through Department for Work and Pensions initiatives. Multi-agency operations further embed this collaborative approach, most notably through weekend deployments under Operation Poros, funded by the Home Office Knife Crime Concentrations Fund. Operating in high-density night-time economy locations around Old Street, Curtain Road, Tabernacle Street, and Great Eastern Street between midnight and five in the morning, partner agencies focus on robbery disruption, weapon recovery, intelligence sharing, and environmental risk analysis. In tandem, Change in Youth Community Interest Company executed a ten-week detached youth outreach programme across Pembury, Hackney Downs, and Nightingale alongside football sessions by Undefeated Minds, engaging hard-to-reach cohorts directly within estate environments to build trust and identify unmet needs.

Close operational integration between the Community Gangs Team and Young Hackney serves as a cornerstone of this integrated safeguarding approach. Through closely coordinated outreach operations, both services combine resources to maximise community presence and maintain consistent engagement with at-risk cohorts. Demonstrating the strength of this partnership, the Community Gangs Team and Young Hackney have jointly secured dedicated Mayor's Office for Policing and Crime funding specifically aimed at reducing street robbery. This investment powers enhanced, community-based activities for young people delivered precisely during high-risk windows, including school ingress and egress times as well as throughout school holiday periods. By providing structured, safe, and positive alternatives when young people are most vulnerable to peer victimisation or exploitation, this joint funding initiative significantly strengthens neighbourhood safety.

This whole-system model has delivered meaningful systemic progress and positive early outcomes when evaluated against rolling Metropolitan Police crime statistics to the end of July, 2026. The partnership remains committed to achieving its three core priorities: a one percent reduction in Knife Crime with Injury, a one percent reduction in Street Robbery, and a one percent reduction in Violence with Injury. Operational delivery throughout the reporting period has yielded significant community reach, with Community Gangs Workers providing outreach to four hundred individuals, conducting twenty hotspot deployments, and leading five group mediation sessions to calm active gang rivalries. Early intervention in schools has been strengthened through





Mentivation Services, which completed eight structured six-to-twelve-week workshops alongside bespoke presentations, while twelve additional group and one-to-one sessions directly addressed youth disaffection, low self-esteem, and vulnerability to criminal exploitation.

Systemic alignment across the partnership has been further bolstered following the successful completion of the Community Gangs Team restructure and investment into the Community Delivery Coordinator post. With this key community leadership capacity secured, the team is actively implementing targeted, place-based contextual safeguarding interventions across London Fields, Manor House, and Homerton. Building directly upon the groundwork of the former Empowering London Fields (ELF) project, these localisations address environmental drivers of exploitation while joint working with the Youth Justice Services ensures dedicated diversionary provision during major events such as the Notting Hill Carnival.

Additionally, following a recent incident at Towpath Walk in Eg, the team executed a robust Critical Incident Plan incorporating member briefings, resident reassurance communications, and a successful Community Impact Fund application. By pairing enforcement under Operation Poros with joint Young Hackney MOPAC initiatives, estate-level outreach, parental empowerment through Parents Voice, and place-based interventions, the partnership maintains a unified strategy to protect young people across Hackney.





PUBLIC HEALTH

Commissioning

Safeguarding is a standing item on quarterly commissioning focused PHSMT meetings

As part of our contract monitoring responsibilities, risk assessment and safeguarding is an agenda item. Commissioned service providers are required to discuss safeguarding concerns that occurred at each quarter and keep updated records of risk registers.

Internal Audit

An internal audit was completed of safeguarding provisions within contracted services. The report concluded that the level of assurance was significant and that 'a sound system of governance, risk management, and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.'

Training

Previously all staff were required to complete Level 1 children and adults safeguarding training via the elearning for health website. We have amended this requirement so that all public health staff complete level 2 children's and adults safeguarding training. All front-line public health staff (Pause, STEPS, community wellbeing team) will complete Level 3 training.

System leadership

Public health continues to lead work relating to the needs of Families in Temporary Accommodation. This includes leading the development of a set of strategic recommendations, the implementation of which will be overseen by the Families in Temporary Accommodation Strategic Group.

Intensive improvement work was carried out in partnership with Homerton to ensure that the Enhanced Health Visiting Service is effectively supporting the most vulnerable families locally and preventing needs escalating. This included:

- A re-review of the evidence base to ensure alignment with the service model
- A deep dive into service performance data
- A focus on developing outcomes to monitor service impact
- Qualitative feedback from service users
- Peer learning from the Pause Service (Pause worked with extremely vulnerable women that have had children removed from their care).

Ensuring public health commissioned services align with and support key transformation programmes including neighbourhoods (particularly the development of Integrated Neighbourhood Teams) and Families First.

ICB changes have led to a regression with regards to partnership and integrated working across the system - in particular relating to maternity, immunisations and children's health services. As new team, governance and work plans become established, work is required to re-build these partnerships and ensure partnership working on shared priorities continues.

Uncertainty regarding ICB funding for services (IRIS and DAIS) supporting front-line practitioners to identify and support service users experiencing domestic violence and abuse continues. This places these services at ongoing risk of ending.





NHS NORTH EAST LONDON ICB

Hackney Trauma Informed Multi-Agency Practice: Responding to Child Victims of Domestic Abuse: A Partnership Steering Group was established to review and identify good practice already happening within services across the partnership, and to develop a whole-system trauma informed response across universal and targeted services to child victims of domestic abuse. A [Guidance Doc](#) for Trauma Informed Support for Children and Young People was developed which provides organisations and professionals with approaches and resources relevant to their agencies to advise and support child victims of domestic abuse.

Sudden Unexpected Death in Infancy (SUDI): Work has continued following the SUDI Conference in March 2024 utilising a NEL wide approach to review and focus on SUDI reduction. This work is ongoing and involves a number of key partners and CDOP colleagues to engage in quality improvement work with identification of key data interrogation. The Child Death Review Nurse has undertaken a number of quality assurance projects to review parent and staff understanding of safer sleep.

The Tree of Life: For the past four years, the Tree of Life in Schools Programme in City and Hackney has been providing African, Caribbean, and mixed heritage young people with a unique form of culturally attuned mental health support.in collaborative partnership between local schools, NHS Mental Health Support Teams, and voluntary sector organisations. Partners included Child and Adolescent Mental Health Services (CAMHS) East London NHS Foundation Trust, Hackney CVS, NHS North East London ICB, Wellbeing and Mental Health in Schools Service (WAMHS), Hackney Council and the City of London Corporation. Recurrent funding for this pathway has been identified from ICB resources.

City and Hackney Childhood Adversity, Trauma and Resilience Programme (ChATR): ACEs and Trauma-informed Practice (TIP) Training is now available on the City and Hackney Children Safeguarding Partnership (CHSCP) Training Platform. In collaboration with the Trauma Services Lead at Tavistock & Portman FT, a Train the Trainer model for training of facilitators was developed to deliver the ChATR ACEs & TIP Training. The ChATR Online Resource Portal has been relaunched to align it with the ACEs and TIP Training. The ChATR portal includes a range of practice tools, academic research and video resources.

In **WAMHS (Wellbeing and Mental Health in Schools) / MHST (Mental Health Schools Team)**, a new MHST team has been established which will increase the coverage of schools for early intervention mental health services directly into schools. It is anticipated that full coverage of schools will be achieved by 2030.

Perinatal Mental Health: Joint work has strengthened Perinatal Mental Health pathways across Health and Local Authority to ensure services are available to support residents with mild to severe needs.





The Named GP in City and Hackney: The Named GP for Safeguarding Children in City & Hackney has provided strategic leadership and a clear GP voice within the City & Hackney Safeguarding Children Partnership. This has included coordinating GP engagement with multi agency audits, contributing to partnership quality assurance and training sub groups, and representing primary care at safeguarding boards, case review meetings and child death forums. The Named GP has represented general practice within Child Death Overview Panel (CDOP) activity, Child Death Review Meetings (CDRM) and Joint Agency Reviews (JARs), supporting practices following unexpected or traumatic child deaths and ensuring learning relevant to primary care is identified and shared. Alongside this strategic role, the Named GP has led and coordinated safeguarding education for Hackney GPs, including Level 3 safeguarding children training and reflective learning sessions.

Over 150 GPs, practice nurses and physician associates have attended safeguarding training, with more than 80% rating sessions as very useful and relevant. Feedback highlighted the value of interactive delivery, real Hackney based case discussion, and practical exploration of thresholds, pathways and decision making in general practice. Reflective learning sessions for GP safeguarding leads have been well attended and have supported peer learning, professional challenge and feedback into the safeguarding partnership. Through both casework and education, the Named GP has identified and challenged system gaps in information sharing, including inconsistent communication with GPs regarding Child in Need and Child Protection plans, supporting quality improvement and the development of clearer guidance and pathways across City and Hackney primary care.

The Interim Designated Doctor for Safeguarding children (SGC): This is a fixed term role until a permanent post is established. This role includes collaborating with the community and hospital Named SGC doctors in drafting an all-age clinical guideline for Non-fatal Strangulation across all ages (still ongoing). It also provides an oversight and liaison with local primary care, private and hospital care for assuring the quality of safeguarding processes and ensure better coordination and seamless communication and information sharing, including regular statutory supervision for the community and hospital Named SGC doctors. The role contributes to the CDR and the Safeguarding Children Partnership Board meetings alongside the Designated SGC Nurses.

To support the roll out of the CPIS (Child Protection Information Service) PHASE 2 across NEL ICB with NHS Digital and placed based delivery partners: Letter sent to the NEL Integrated Care System (ICS) and Partners from NEL ICB Chief Nursing Officer on 26th September 2025, introducing the mandate of phase 2 across the wider health system. NEL Designated Nurses leading the roll out of phase 2 across the NEL footprint. Designated Nurses and Named GP have met with NEL ICS and partner colleagues, NHSE supporting rollout, expected to go live before December 2026.

NHS NEL ICB to secure funding for IRIS to continue to be offered across city of London and Hackney following Public Health's withdrawal of funding of this programme (funding secured until 2026). A business case was put forward to the ICB early 2026 which was successful and funding has been agreed until March 2027. The Designated Nurses and Integrated Commissioning team also secured funding required to support the Domestic Abuse Intervention Service (DAIS) for another year.





ELFT

KEY ACHIEVEMENTS	WHAT WE DELIVERED	IMPACT
Strengthening multi agency safeguarding practice	Attended and contributed to SARs, CSPRs and DHRs and chaired the sub-groups.	Brought ELFT's voice and learning into every multi-agency review, helping shape stronger responses for children and adults at risk. Discharged statutory duties under Section 11 and the Care Act 2014; positioned ELFT as a trusted system leader in multi-agency learning.
Early identification of domestic abuse	Rolled out Routine Enquiry into Domestic Abuse across Mental Health services.	Supported staff to ask the right questions, enabling early help for people experiencing abuse, enabling them to feel seen, heard and supported sooner. The ELFT Routine Enquiry framework was subsequently adopted by Tower Hamlets Adult Social Care and added to their care and support needs assessment framework. Earlier identification of domestic abuse in a high-risk, under-recognised cohort, which evidences ELFT's discharge of Domestic Abuse Act 2021 duties.





KEY ACHIEVEMENTS	WHAT WE DELIVERED	IMPACT
Workforce capability and "Think Family" practice	Rolled out Integrated Safeguarding Level 3 training for staff across the Trust.	Built a more confident, joined-up workforce that recognises safeguarding risks across the whole family. Greater alignment with SCP priorities on ensuring the voice of the child is considered and whole-family assessment undertaken. Stronger recognition of neglect, CSA, and exploitation risks. Embedded a Think Family approach aligned to the Intercollegiate Documents and SAAF, reduces duplication and supports CQC well-led assurance.
Workforce capability and "Think Family" practice	Rolled out joined safeguarding adults/ children supervision for staff across the Trust, embedding a Think Family approach.	Created space for reflective, whole-family conversations helping staff see the bigger picture and respond to the needs of adults, children and carers together. Closed the gap between strategic learning and frontline practice change; provides documentary assurance for ICB Safeguarding Commissioning and Assurance Toolkit S-CAT and Section 11 audits.
Embedding learning into frontline practice	Introduced a 'Let's Change Practice' safeguarding bulletin to cascade learning from local and national reviews.	Enabled learning from reviews to be directly cascaded to frontline staff, enabling insight into any required practice change. Closed the gap between strategic learning and frontline practice change, provides documentary assurance for the ICB Safeguarding Commissioning and Assurance Toolkit S-CAT and Section 11 audits.





KEY ACHIEVEMENTS	WHAT WE DELIVERED	IMPACT
Embedding learning into frontline practice Early identification of domestic abuse (linked to neglect and mental health priorities) Strengthening multi-agency collaboration	Delivered a multi-agency Domestic Abuse and Neglect Conference attended by partner agencies	Strengthened partnerships across the system and enabling a shared understanding of how to keep people safer together. Strengthened multi-agency relationships across the NEL and BLMK (now known as NHS Central East ICB) footprint and showcased ELFTs good practice to commissioners and statutory partners.
Workforce capability	Achieved over 90% compliance for Basic PREVENT Awareness Training Level 1 and 3	Increased staff confidence and ensured consistency in safeguarding and PREVENT practice across the Trust. Meets the PREVENT training and competencies framework and SAAF workforce thresholds, benchmarks favourably against peer mental health trusts and supports the BAF.
Strengthening multi-agency collaboration	Progressed CP-IS implementation, Trust-wide go-live in June 2026.	Will provide our clinicians real-time visibility of children at risk closing a long-standing safety gap. Closes a known child protection visibility gap cited in CSPRs and aligns ELFT with the NHSE national CP-IS rollout target.





Case Study: Think Family and Multi-Agency Safeguarding

(Names and certain details have been anonymised to preserve the confidentiality of those involved)

Situation:

David (aged 40) was referred to the Home Treatment Team following disclosure to his GP of a suicide attempt six weeks earlier. He presented with recurrent depression, anxiety and concerns regarding possible personality disorder. David had a long history of mental health service involvement and reported significant social isolation, financial stress, unresolved childhood trauma, and ongoing difficulties managing anger.

During assessment, David disclosed a history of serious domestic abuse towards his wife, Amy, including repeated sexual assaults and an incident of non-fatal strangulation approximately ten years earlier. He also disclosed physically assaulting his son, Junior, when Junior was approximately four years old. Concerns were heightened by reports that Junior, now aged nine, flinched when David moved suddenly, raising questions regarding the impact of previous abuse and potential exposure to domestic abuse within the family.

Further assessment identified escalating suicide risk, including a recent suicide attempt, access to means whilst working away from home, feelings of hopelessness, and disclosure that he had suggested to Amy that ending the lives of his family before taking his own life might protect them from the impact of his suicide. Although David denied any intent to harm Amy or Junior, the disclosure raised significant concerns regarding risks to both himself, and his family.

Task:

The primary challenge was balancing David's right to confidentiality and access to mental health treatment with the need to protect Amy and Junior from potential harm.

Professionals were required to:

- Assess and manage a high risk of suicide and self-harm.
- Evaluate risks to Amy and Junior arising from historical and potential current domestic abuse.
- Consider the impact of David's mental health on his parenting capacity.
- Ensure Junior's voice and lived experience remained central to assessment.
- Coordinate a proportionate multi-agency response despite incomplete information regarding current family dynamics and risk.
- Apply a Think Family approach, recognising the interrelationship between adult mental health, domestic abuse, child safeguarding and family wellbeing.





Action:

The Home Treatment Team undertook a comprehensive biopsychosocial and safeguarding assessment, exploring both David's individual needs and the wider impact on family members.

A Think Family approach was adopted throughout. Rather than viewing David solely as an adult mental health patient, practitioners considered the implications of his mental health presentation, domestic abuse history and suicidal ideation on Amy and Junior.

Key actions included:

- Undertaking an immediate suicide and violence risk assessment.
- Exploring the historical disclosures of domestic abuse, non-fatal strangulation and physical abuse towards Junior.
- Sharing safeguarding concerns with Children's Social Care in line with statutory safeguarding responsibilities.
- Liaising with Police and safeguarding professionals to establish a coordinated risk management plan.
- Conducting a Mental Health Act assessment when David withdrew consent for informal admission and continued to present with significant risk.
- Detaining David under Section 2 Mental Health Act following multi-disciplinary assessment.

When David absconded whilst being escorted to the inpatient unit, swift multi-agency communication took place. Police and Children's Social Care were immediately informed due to concerns regarding potential risks to Amy and Junior.

A dynamic safeguarding plan was implemented, including:

- Immediate protective actions for Amy and Junior.
- Police support to relocate Amy and Junior to a place of safety.
- Ongoing information sharing between mental health services, Children's Social Care and Police.
- Consideration of domestic abuse risks alongside mental health risks.
- Planning for future contact arrangements between David and Junior.
- Discussion regarding alternative accommodation options to reduce risk upon discharge.

The case required practitioners to balance several competing risks:

- Risk of suicide and self-harm.
- Risk of harm to others.
- Historical abuse versus current risk.
- The need to maintain therapeutic engagement whilst taking protective safeguarding action.
- Respecting David's views whilst prioritising the welfare of Junior.
- Result





Later the same day, David contacted Amy and, following encouragement, voluntarily returned to hospital where he was admitted to the inpatient unit.

At the time of reporting:

- David remained an inpatient receiving mental health treatment.
- Children's Social Care had been informed and engaged in ongoing safeguarding planning.
- Police had supported immediate safety measures for Amy and Junior.
- A safeguarding plan remained in place.
- David was advised not to have unsupervised contact with Junior.
- Work was ongoing to identify alternative accommodation arrangements and reduce future risks.

Learning and Good Practice:

This case demonstrates how safeguarding concerns can emerge through routine mental health assessment and highlights the importance of professional curiosity when individuals disclose historical abuse.

Key learning points include:

- **Think Family practice:** Adult mental health assessments should routinely consider the impact of mental illness, suicide risk and domestic abuse on children and family members.
- **Professional curiosity:** Historical disclosures can remain highly relevant to current safeguarding risk assessment.
- **Multi-agency working:** Timely information sharing between Mental Health Services, Children's Social Care and Police enabling coordinated decision-making and protective action.
- **Balancing risk:** Practitioners successfully balanced therapeutic engagement with safeguarding duties, recognising the need to manage risks to both David and his family.
- **Voice of the Child:** Junior's experiences, including evidence of fear responses and potential exposure to domestic abuse, remained central to safeguarding decision-making.
- **Whole-family safeguarding:** The case illustrates how adult mental health, domestic abuse, child protection and suicide prevention are interconnected and require coordinated intervention rather than single-agency responses.

This case is a strong example of effective multi-agency safeguarding practice, demonstrating how a Think Family approach can support both patient care and the protection of vulnerable family members.





KEY SAFEGUARDING CHALLENGES AND CORPORATE SAFEGUARDING TEAM ACTIONS FOR 2026-27

Safeguarding pressures across East London NHS Foundation Trust during 2025-26 reflected a system operating within increasing complexity rather than increasing volume alone. The year demonstrated that safeguarding risk rarely presents in isolation. Mental ill-health, domestic abuse, exploitation, neglect, poverty, self-neglect, online harm and family adversity increasingly overlap within the same individuals, families and communities.

The following challenges represent the most significant safeguarding priorities identified during 2025-26 and set the direction of travel for the Corporate Safeguarding Team during 2026-27.

Challenges and next steps

- Increasing complexity of safeguarding need: Safeguarding concerns rarely occur in isolation. Mental ill-health, domestic abuse, exploitation, neglect, poverty, self-neglect, online harm and family adversity increasingly intersect, requiring continued embedding of a Think Family approach across services.
- Domestic abuse identification and recording: Accurate identification and recording of domestic abuse remains an area for improvement. Ongoing workforce development, supervision and data quality assurance will support more consistent practice and oversight.
- System visibility and safeguarding assurance: Fragmented data across multiple systems can limit organisational oversight. The implementation of CP-IS and development of a Trust-wide process for monitoring Child in Need, Child Protection Plan and Looked After Children activity will strengthen governance, multi-agency coordination and strategic safeguarding assurance.
- Maintaining the Voice of the Child: Further work is required to improve recognition of young carers, strengthen the visibility of children within adult services, and ensure the voice and lived experience of the child remain central to safeguarding assessment, planning and intervention.





Conclusion

The safeguarding challenges identified during 2025-26 reinforce a central lesson from both local and national reviews: safeguarding risk does not sit neatly within organisational structures, professional boundaries or individual incidents. Effective safeguarding therefore depends on the Trust's ability to connect information, sustain professional curiosity, strengthen partnership working and maintain visible organisational oversight.

The actions set out for 2026-27 are intended not only to improve compliance and governance, but to continue developing a safeguarding culture capable of recognising complexity early, responding proportionately, and learning continuously across the organisation.

2026-27 priorities:

Improved population health outcomes

By using safeguarding to identify and address abuse, neglect, and exploitation early, preventing long-term harm. Embed safeguarding within wider health and social care systems to reduce health inequalities and protect the most vulnerable.

Improved experience of care

By ensuring safeguarding process are person-centred, trauma-informed, and respectful of individuals' rights and dignity. Strengthen multi-agency collaboration to provide timely, coordinated support that builds trust and empowers those at risk.

Improved staff experience

By providing clear safeguarding procedures, supportive supervision, and regular training to build confidence and reduce anxiety in managing concerns. Foster a culture of psychological safety where staff feel valued, heard, and supported when raising or responding to safeguarding issues.

Improved value

By embedding safeguarding into all levels of care, leading to earlier intervention, reduce harm, and more efficient use of resources. This enhances outcomes for service users, supports staff confidence and retention, and strengthens the organisation's reputation and accountability.





HOMERTON HEALTHCARE NHS FOUNDATION TRUST

Introduction

Ensuring that children are seen, heard and supported is central to safeguarding practice at Homerton. The Trust is committed to delivering trauma-informed, anti-racist and inclusive services. Its strategic priorities, "Integrated care: delivered seamlessly across home, hospital and community", "Better value; better care" and "Innovation that transforms care and improves lives, have been aligned with the CHSCP Pledge and Priorities: the Health and Stability of the Safeguarding Workforce; Active Anti-Racist Practice; the Voice of Children; Maintaining and Building on the Foundations of Good Practice; Strategic Vulnerabilities and Pathways to Harm; and the Appetite to Learn. These priorities are also aligned with the CQC assessment domains of Safe, Effective, Caring, Responsive and Well-led. This work is being progressed through the 2026/27 Safeguarding Children Work and Audit Plan.

Safeguarding activity

Activity remains consistently high, with Hackney accounting for the majority of statutory safeguarding work. Although the volume of City of London cases is low, these cases continue to require proportionate oversight.

Injury-related admissions

A 33% increase may indicate rising complexity and safeguarding risk. A detailed review of the data is required to understand the underlying factors and determine any necessary action.

Referral profile

Emotional abuse accounts for more than 50% of referrals as opposed to physical abuse for Hackney. In addition, 30% of cases involve children placed out of borough, creating cross-boundary pressures and implications for information sharing, threshold decisions and continuity of care.

Patient experience

Feedback is highly positive, with 97% of respondents reporting a positive experience. As responses relate only to services from which feedback was received, the findings cannot be generalised across all services. Nevertheless, they provide a level of assurance in the context of sustained operational demand.

Child Protection Medical Examinations and the Child Wellbeing Clinic:

Declined consent remains a barrier to completing safeguarding medical pathways. Children who are assessed are presenting with increasing complexity and higher levels of need. This represents a potential safeguarding risk and may require multi-agency escalation or a review of relevant policy and pathways.





Good Practice Highlights

The following examples show how systemic, individualised safeguarding practice has improved outcomes for children, families and practitioners. Turning learning into practice: Homerton strengthened how learning from safeguarding reviews and audits is embedded in frontline practice, supported by clearer action tracking and governance oversight.

Strengthening safeguarding supervision

Supervision was expanded and enhanced, in community services with greater emphasis on children's lived experience, professional curiosity, equality, family context, and the roles of fathers and significant men. Advancing equity-informed and anti-racist practice: An EDI safeguarding simulation explored colourism, adultification, disability, faith, and bias in professional decision-making

Improving responses to child sexual abuse

Multi-agency learning promoted trauma-informed practice, effective escalation, and stronger cross-agency working.

Improving support for children with SEND

The SEND audit resulted in six agreed actions, including improved interpreter access, identity-informed practice, better coordination, and stronger inclusion of the child's voice.

Building staff knowledge and confidence

Eight Safeguarding Hot Topics lunch time sessions embedded learning from reviews into everyday practice across acute and community services.

Case Study: School-Based Health Service Delivery and feedback

A positive journey...

A young person was referred to SBHS due to concerns about low confidence, attendance and managing health needs. Working closely with the young person, family and school staff, our School Nurse provided health advice, regular wellbeing reviews and practical support.

Over time, the young person's attendance improved at school, their confidence grew and the family reported feeling better supported. This highlights the impact of early intervention, partnership working and trusting relationships.





Homerton Children's Therapists delivered three "Hear My Voice" sessions as part of the CHSCP safeguarding training programme. Participant feedback was consistently positive, highlighting the quality, relevance and practical value of the training. Attendees described the sessions as "fantastic", "very useful" and exceeding expectations. They particularly valued the interactive approach, the facilitators' expertise, and the effective balance between theory and practical participation.

Impact

The training strengthened practitioners' awareness of child-centred safeguarding, improved engagement with children's perspectives, and supported more reflective and effective practice across partner agencies.

Homerton Mandatory Safeguarding Training:

Level 2 compliance increased by 1.35%, while Level 3 compliance decreased by 2.04% against a backdrop of increasingly complex safeguarding needs. Targeted and bespoke training sessions are being delivered, alongside focused action to improve Learning Passport completion. Training content has also been aligned with the updated RCPCH competencies.

The safeguarding landscape remains challenging due to ongoing national and local system reforms, with the full impact of changes to NHS England and Integrated Care Boards on provider organisations still unclear. Workforce capacity across specialist safeguarding and children's services remains fragile, while increasing small numbers of vulnerable children continue to present in mental to ED in health or behavioural crisis, often with limited access to regulated specialist community based placements.

Additional challenges include poor digital interoperability in and between organisations using different IT systems, which can hinder effective information sharing and safeguarding oversight. Early feedback suggests that the national children's social care reforms have not significantly affected hospital referral pathways; however, community services report increased workloads, uncertainty about professional responsibilities, and concerns about the sustainability of delivering long-term, family-centred support. Overall, these pressures reinforce the need for strong partnership working, effective information sharing, and continued investment in specialist safeguarding capacity.





METROPOLITAN POLICE

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METROPOLITAN POLICE

The Metropolitan Police Service (MPS) continues to build on the MPS Children's Strategy, which has remained fully embedded since implementation in 2024. This strategy was developed with input from children and partner agencies, and has resulted in a formal introduction of the Child First Approach and the training of 21,000 MPS officers and staff. The MPS-wide reduction in child homicide (45% reported in December 2025), together with the London Policing Board's assessment of 'clear commitment, maturity and early indicators of impact', demonstrates the organisational effectiveness of the strategy.

Central East BCU, which covers the London Borough of Hackney, has led on local innovation by bringing together the Local Missing Hub and Child Exploitation policing teams under a single Detective Inspector, recognising the overlap in vulnerability and risk presented to young people across these areas. The synergy and shared Child-First priority between the teams has seen fluid joint working and implementation of repeat missing strategies. The results of this innovation have contributed to Central East BCU missing persons accounting for less than 5% of London's total, and a 98% success rate of finding missing people within 72 hours of reporting.



Operation Jigsaw – the MPS programme for monitoring registered sexual offenders (RSO) – continues to safeguard Londoners through whole-partnership working under MAPPA provisions. Central East BCU Jigsaw continues to deliver a 96% rate of RSO assessment and monitoring activity, above the national target of 92%-95%. Central East BCU Jigsaw utilises robust enforcement tactics against RSO's who breach their notification requirements, with 55 criminal charges and 16 out of court disposals delivered in the last 12 months. Only 2% of the MPS wanted or 'at large' RSO's are managed by Central East BCU. The safeguarding focus and leadership demonstrated in this high-risk area continue to raise safeguarding standards for Hackney residents.

The MPS are developing internal data dashboards in respect of CAIT performance, and in 2026 the Central East BCU CAIT remains the highest-performing unit in the MPS for detected and solved offences. To ensure high ethical standards and a safeguard against over criminalisation in this space, the data dashboards monitor MPS compliance to single agency: joint agency ratios.

Tackling VAWG remains one of the MPS's principal safeguarding priorities. Through the V100 programme, which combines proactive policing and data analysis, over 100 convictions have been secured against offenders identified as posing a safeguarding risk to vulnerable people.

During 2025/26, the MPS also reported that arrests and charges for rape and serious sexual offences (RASSO) have more than doubled since the implementation of Operation Soteria, a programme of enhanced investigative training and closer partnership working with the Crown Prosecution Service. This safeguarding progress is replicated in the wider crime prevention picture.

In July 2026, MPS data confirmed that theft, personal robbery, and vehicle offences have fallen across London following targeted enforcement on a cohort of prolific offenders and crime hotspots. A 14% reduction in these offences equates to more than 35,000 fewer offences reported across London, and specifically includes:

23,311
fewer thefts from person

▼ 23%

2,943
fewer personal robberies

▼ 11%

8,737
fewer vehicle offences

▼ 9%



Continued success in VAWG, RASSO and neighbourhood crime reflects a sustained focus on strategies targeting offenders who cause the greatest harm within our communities. Specific successes are outlined in the below case studies.

In March 2025, a vulnerable child made a disclosure to a school CAMHS worker of intra-familial sexual assault. Specially trained CAIT officers from Central East BCU spent several weeks engaging with the family to build rapport and trust in order to overcome initial denials. In due course, additional family members disclosed other sexual offences against the suspect, and provided video recorded interviews which detailed their experiences.

In November 2025, a Hackney prolific sexual offender was sentenced to 18 years imprisonment following MPS investigators uncovering commercial-scale sexual offending against young teenage boys. The perpetrator was identified despite his use of sophisticated and previously unknown online methods. In December 2025 Central East BCU received a reported concern of a teenage daughter wearing expensive clothing not purchased by family.

The CAIT engaged with the child and came to believe that she was in a sexual relationship with a school teacher, who had since moved to a new school. Financial enquiries, followed by forensic examination which identified the teacher's DNA at a location where the victim reported sexual activity, led to the teacher being charged with sexual offences and suspended from the school.

In May 2026 an investigation initially led by Central East BCU resulted in a suspect being imprisoned for 20 years for a series of sexual assaults committed over a number of years. The investigation was complicated by the suspect's status as a religious community leader. Following the convictions, one victim publicly paid tribute to the MPS for the determination and compassion shown by investigators.

In August 2026 detectives from the local police CAIT secured 27 intra-familial sexual offence charges, including offences of the utmost severity, where the victim was a vulnerable child. The victim was able to use a short time away from her family to make a disclosure, and communication difficulties were overcome by specially trained police officers. Initial CPS reluctance to charge was overcome by tenacious

and effective detective work by the OIC and their supervisors.

In September 2026 a stranger rape was committed on a sex worker with addiction issues. The assault was physically violent and drew the attention of passing members of the public. The public trusted police sufficiently to report to police, and the emergency response tracked the suspect immediately. The victim was unable to engage with police. A review of the suspect's MO linked him to another incident, leading to a charge and remand of the suspect within 36 hours of the incident occurring.

Also in September 2026, the MPS and private security worked in partnership to identify and arrest a suspect who had sexually assaulted a lone female in the Canary Wharf area. This immediate intervention led to the suspect being charged with the offence, and led to media reporting of criminal charges for general violence against women and girls rising by 71%.

The Mayor's Office 2026 analysis has identified that to meet the demands of policing





London, the MPS require 38,000 officers and 19,00 civilian staff. Following budget cuts, officer strength is now 31,000. The MPS is shrinking, with prioritisation an inevitable future consequence.

In the face of reduced numbers, the operational picture becomes ever more complicated. Traditionally simple investigations are complicated by digital enquiries, the criminal justice system challenges are hindering investigation progress, and public order demands on uniform colleagues are at an unprecedented high, often complicated further by emotive social issues and contentious public reporting.

The falling resources and rising demand challenge continues to be met by MPS officer's resilience and endeavour. The consequence of this solution is that cancelled rest days for police now total three quarters of a million days nationally. Staff welfare is therefore a significant challenge to MPS managers as the relentless demands continue.

Despite these challenges, MPS determination to deliver high safeguarding outcomes is high, with notable successes and positive cultural change being secured throughout the 2025/6 reporting period.





YOUTH JUSTICE

The Youth Justice Service is part of the Children and Families Service and works with young people in Hackney, aged 10 - 17, who are arrested or convicted of crimes. The service undertakes youth justice work including bail and remand supervision and supervising young people who have been given community or custodial sentences. A 'child first' and strengths based approach across the youth justice system in line with our Systemic, Trauma Informed, Anti-Racist (STAR) and restorative practice model.

The 2025/26 First Time Entrant (FTE) outturn shows a reduction on FTE from the last financial reporting period, but slightly above the 2023/24 figures. There were 60 first time entrants (FTEs) in 25/26 as against 68 in 24/25. This follows a year-on-year-decrease seen in the number of FTEs from 2015-16 to 2023-24, with the exception of FTE in 24/25 (68) as an outlier.

Our First Time Entrants remained mostly drawn from children of Black and Global Majority backgrounds. The total numbers of children of Black & Global Majority show a 12.2% decrease from previous year with a 18.2% decrease of White children becoming a First Time Entrant respectively. The median age of a child becoming a FTE in Hackney remains 15.5 years of age. In the last number of years the age spread of our FTEs has changed, skewing towards older children and young people. Over the years there has been an almost equal split in First Time Entrants

between pre & post-court disposal, however the last 3 years has seen a significant increase in post court first time entrants. In 2025-26, 71.8% of First Time Entrants were post court outcomes. Hackney has often had slightly more post court FTE and the Service is now working on an improvement plan with an overall aim to reduce the number of First Time Entrants.

In 2025/26, 9 children were sentenced to custody in 2025/2026, resulting in 13 custodial outcomes, with 4 children being convicted more than once. Our Custody baseline has increased from 0.42 to 0.51, exceeding London (0.16) and National (0.09) averages. An improvement plan has been developed.

Despite the reduced cohort size and seriousness of offences, fewer Hackney children experienced custodial remands in 2025/256 compared to 2024/25. The average number of nights spent remanded to YDA decreased by 40%. In 2024/25 Hackney children spent on average 136 nights in custody on remand in comparison to 97 in 2025/26. This reduction has been driven by a strengthened local offer including Bail Support, Jonah House Local Accommodation Pathfinder, RiLAAs, and social care integration. 6 children were remanded in custody in 2025/26 and 10 children in 2024/25. However despite overall reductions, Black and Global Majority children remain highly disproportionately represented among those remanded.

Young Hackney Prevention and Diversion Team delivers all out of court interventions for young people who have come to the attention of the Police for





lower gravity offences (Community Resolutions, Triage, Youth Cautions and Youth Conditional Cautions). The Team also supports in running grant funded Engage and Turnaround projects. During 2025-2026, we exceeded our Turnaround target of 28 children and worked with 35 children. Triage disposals with YJS intervention delivered in 2023-24 are tracked forward 12 months. From this cohort 3 children went on to become a first time entrant (FTE). This shows a conversion rate of 17.6%, and success rate of 82.4%. The development and implementation of Outcome 22/Deferred Prosecution has been underway over 2025/26. This type of resolution has been offered to 6 children.

Our Youth Justice Plan has focussed on improving the educational outcomes of children open to Youth Justice. In 2025/26 we saw an increase in numbers of children in full time Education, Training and Employment (ETE). Of the 79 young persons on an order ending in 2025-26 49 were in ETE. 73% of cases with young persons of statutory age were in ETE with 58% of those above statutory age. There is still more to do to achieve the target of at least 80% children attending full time at the end of their order. We have increased the resource of an extra education worker provided to the YJS by the Virtual School and have commissioned Skill Mill to facilitate this.

During 2025/26 our Integrated Health Team made progress against key goals for our YJS Nurse Pilot, this has included the development of a "Health Passport" for all children accessing the YJS. This has allowed

children to have easy access to their key health information from a range of health services and demonstrated the joint working between our key health partners, including our Speech, Language and Communication Team.

Our Speech Language and Communication Team continue to run the Youth Court project providing continued SaLT presence to focus on developing communication friendly spaces within the Court setting.

YJS has worked to embed the Victim Code, alongside victim voice within everyday practice. Over the past year the service has developed its own Victim Strategy and Victim Practice Guide, to support us in ensuring our service to victims alongside our victim impact and Restorative Justice Interventions.

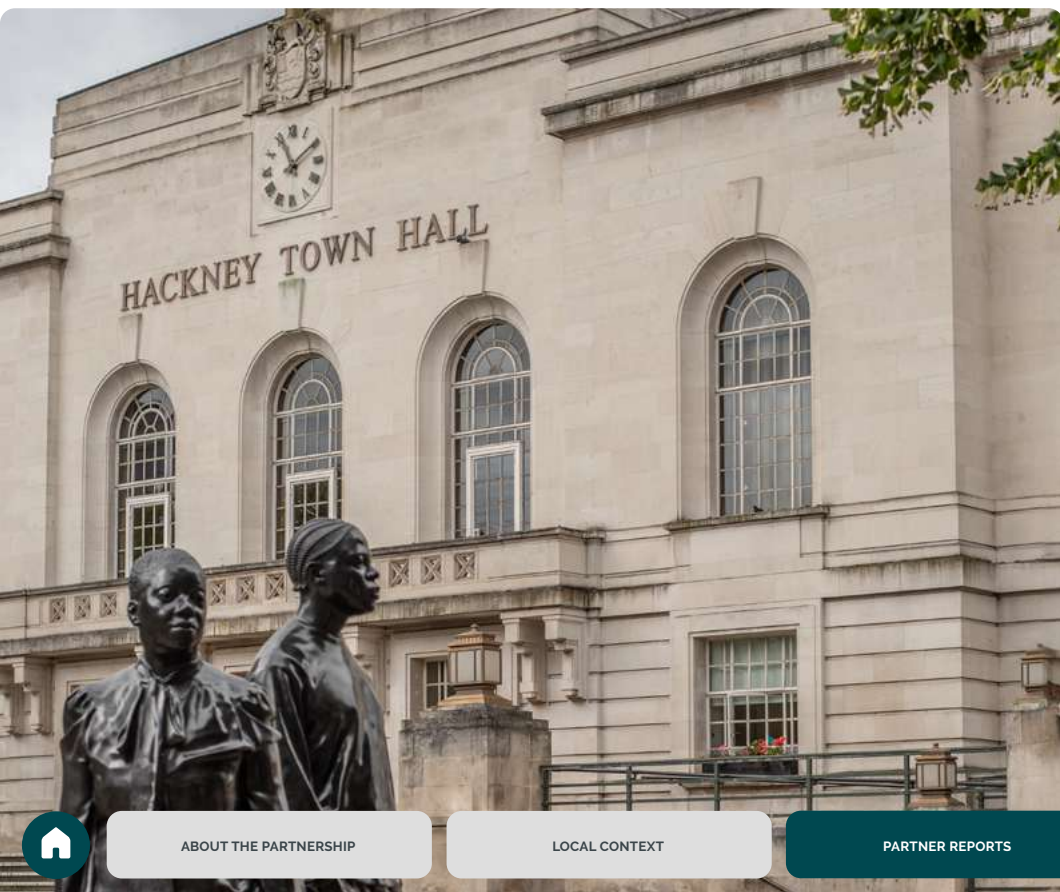
Throughout 2025/2026 there have been a number of participation events for young people and parents/carers working with the YJS, these have included, Stop & Search Ask me Anything, The Fostering Circle, Urban Dictionary with our Speech and Language Team, Carnival Diversion Activity in conjunction with our Community Gangs Team, Parent Empowerment with Education Specialists and You Said I Did sessions with YJS young people forming a consultancy group and working with Middlesex University and Families First.

Recognising that Notting Hill Carnival can be a time where children working with the YJS may experience disproportionate outcomes, the YJS has worked in conjunction with our Community Gang Team to offer alternative activities over this weekend. This included taking children and their families on a beach





trip and taking children on a horse riding activity. Alongside this our Speech, Language and Communication Team supported our Community Gang Team and Police colleagues with the creation of a child and communication friendly letters about the carnival weekend and diversion activities. During the carnival weekend, Hackney YJS experienced no arrests of children working with the service. Following the joint working around Carnival Weekend, Hackney YJS is continuing to work with our Community Gangs Team to offer diversion activities throughout the year as part of ongoing work to reduce violence and robberies within the borough.



'You Said We Did' Participation Project

Throughout 2025/2026 there have been a number of participation events for young people and parents/carers working with the YJS, these have included, Stop & Search, Ask me Anything, The Fostering Circle, Urban Dictionary with our Speech and Language Team, Carnival Diversion Activity in conjunction with our Community Gangs Team, Parent Empowerment with Education Specialists and a youth consultancy group activities with Middlesex University and Families First.

In early 2026 there was a participation focus on improving understanding between institutions and supporting them to understand and hear child voices. This has supported young people working with the YJS to participate in the wider Hackney Council Safety Matters week. In turn this has allowed for real child voices and experiences to be heard. Alongside this, the YJS participation lead is continuing to develop planned and integrated child voice feedback throughout different stages and aspects of their Court Orders. The service is also creating greater opportunities for members of the strategic board to experience YJS work and engage with YJS service users, this has included 'practice fortnight'; allowing strategic board members to shadow everyday YJS work and opportunities to visit key areas such as the London Accommodation Pathfinder and Oasis Restore Secure School



In 2024/25, fewer Hackney children experienced custodial remand. This reduction has been attributed to a strengthened local offer, including Bail Support, the Jonah House LAP project, RiLAAs, and work with Hackney Social Care. The service has implemented a Remand Rescue process, the goal is to ensure viable bail packages or remand into local authority care conditions are in place to support a successful application against remand to Youth Detention Accommodation. These are multi-agency meetings to include the core professionals working with the child alongside our placement team and are completed within 7 days of any child being remanded. We have also developed a critical reflection session that will be used to audit for each child who has been sentenced or refused bail / RILA. The aim of this is to ensure we are critically reflecting and learning for each custodial remand/ sentenced child.

As with regional and national trends, the rate of first-time entrants in Hackney has been in decline. However, the rate in Hackney remains above both the London and national rates. It is hoped that the introduction of the Deferred Prosecution Scheme will continue to support in reducing first time entrants receiving substantial court outcomes.

Hackney has developed an improvement plan to address both First Time Entrant and Custody numbers with oversight from the Safer Young Hackney Board and Youth Justice Board.

The over representation of black and global majority children at all stages of the Youth Justice System is a persistent issue that requires the support of all partner agencies.





PROBATION

Evidence, Impact and Learning

During 2025/26, Probation has maintained a strong focus on safeguarding and public protection while implementing changes arising from the Sentencing Act, including the management of individuals released earlier from custody and those considered for early termination of supervision. To support safe decision-making, Probation has worked with partners to ensure police intelligence and safeguarding checks are prioritised across all relevant cases, enabling information relating to victims, children, vulnerable adults and community safety to be incorporated into risk assessments, licence conditions and risk management plans.

Staff continue to receive safeguarding and risk management training, including learning delivered through the Our Future Probation Service (OFPS) programme. Effective multi-agency collaboration remains central to this work, with strengthened information-sharing arrangements across Hackney contributing to the earlier identification of safeguarding concerns, improved risk management and more timely interventions.



Case Study: Early Identification of an Unborn Child

A female service user with a history of substance misuse and offending, whose previous children had been removed from her care, was believed by police and probation to be pregnant. Despite her disengagement from services and approaching the end of probation supervision, agencies maintained effective information sharing and promptly escalated concerns to Children's Social Care and health partners.

This enabled the pregnancy to be identified within safeguarding systems and triggered a multi-agency pre-birth safeguarding response. Partner agencies were able to assess risks, share relevant intelligence, implement a pre-birth safeguarding plan and coordinate support prior to the child's birth.

Impact: Early identification ensured the unborn child was visible to safeguarding services at the earliest opportunity, enabling timely assessment, planning and intervention. This case demonstrates the value of professional curiosity, effective information sharing and strong partnership working in safeguarding children and supporting vulnerable families.

Learning: This case reinforced the importance of professional curiosity, proactive information sharing and effective multi-agency collaboration in identifying and responding to safeguarding concerns at the earliest opportunity. It demonstrated how strong partnership working can maintain visibility of risk, even where individuals are disengaged from services or approaching the end of statutory supervision. Timely information sharing enabled agencies to assess risk, coordinate intervention and implement safeguarding measures before concerns escalated, supporting improved outcomes for children and families.

Key Challenges

- **Managing increased operational demand** resulting from changes introduced through the Sentencing Act, including higher volumes of releases and associated safeguarding enquiries.
- **Completing timely safeguarding and intelligence checks** within compressed release and review timescales to support safe and informed decision-making.
- **Maintaining effective oversight of complex and high-risk individuals**, particularly where there is disengagement from services, substance misuse, domestic abuse, mental health concerns or safeguarding vulnerabilities.
- **Ensuring timely and effective information sharing** across partner agencies to support robust risk assessment, safeguarding activity and public protection arrangements.
- **Sustaining a strong multi-agency response** to emerging risks affecting children, vulnerable adults and victims, while embedding consistent safeguarding practice and adapting to evolving service demands.





Learning & Review



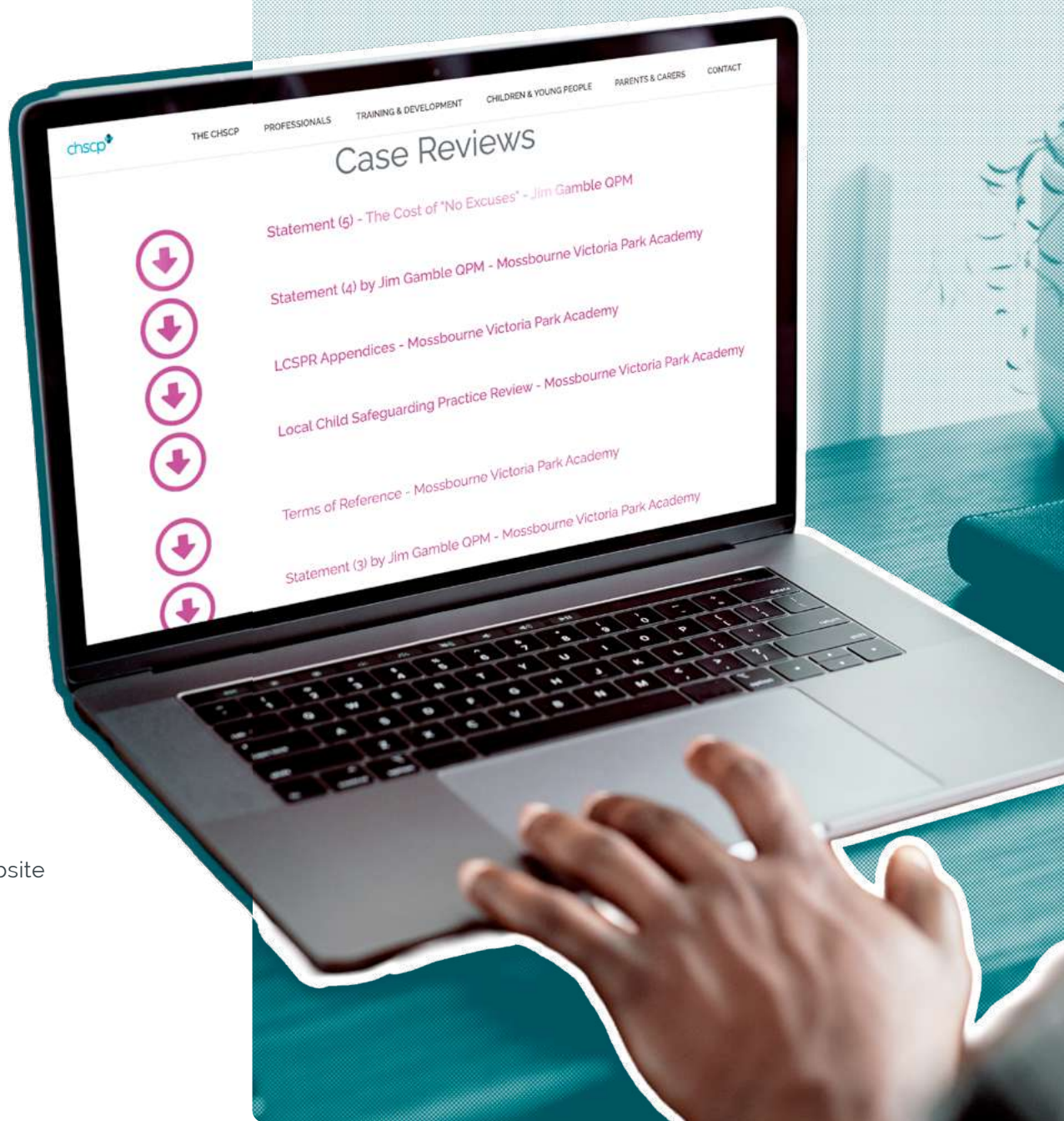


Practice Reviews

Local Child Safeguarding Practice Reviews are undertaken on 'serious child safeguarding cases' to learn lessons and improve the way in which local professionals and organisations work together to safeguard and promote the welfare of children. These reviews were previously known as Serious Case Reviews (SCRs) and were transitioned to this alternative model in July 2019. As set out in statutory guidance: 'Reviews should seek to prevent or reduce the risk of recurrence of similar incidents. They are not conducted to hold individuals, organisations or agencies to account, as there are other processes for that purpose, including through employment law and disciplinary procedures, professional regulation and, in exceptional cases, criminal proceedings.'

CHSCP had 0 serious incident notifications and 0 rapid reviews took place during 2025-26.

Previously commissioned reviews can be viewed on our website at www.chscp.org.uk/case-reviews.





Audits and Inspections

CITY OF LONDON

Between March and November 2025, independent Aidhour Associates and City of London Children's Services staff conducted eight Practice and Impact Reviews evaluating social work practice quality and child outcomes against the Ofsted Inspection of Local Authority Children's Services (ILACS) framework. An additional four reviews were conducted to inform the SEND Multi-Agency Case Audit.

Key Performance & Quality Judgements

- **Social Work Practice:** 100% of reviewed practice was rated as Good (25%, 2/8) or Outstanding (75%, 6/8).
- **Outcomes for Children & Young People:** Graded as Outstanding in 37.5% (3/8) of cases and Good in 62.5% (5/8).
- **Service Standards:** Unlike the previous review period, no practice or child outcomes were identified as requiring improvement, and zero high-risk alerts were raised.

Primary Strengths

- **Child Journey & Voice:** Timely and proportionate interventions across Early Help, Child in Need, and Care Proceedings, with high-quality direct work capturing children's lived experiences and wishes.
- **Management Oversight & Supervision:** Consistent, high-quality management direction grounded in systemic principles and professional curiosity, directly influencing positive case outcomes.
- **Multi-Agency Collaboration & Identity:** Strong cross-agency partnership with health, education, and SEND services, with identity, culture, and Social Graces actively utilised as protective strengths.

Strategic Areas for Development

- **Administrative Precision:** Ensuring full compliance in updating core demographic details, such as a child's religion, across all electronic records.
- **Contingency Planning:** Moving from generic safety plans to personalised, highly specific risk management strategies.
- **Management Action Tracking:** Ensuring tracker meetings and supervision logs record clear, SMART follow-up actions with defined ownership.
- **Anti-Racist Practice:** Explicitly translating anti-racist practice standards into routine case documentation.





HACKNEY

Hackney's Ofsted and CQC report following the local area SEND inspection was published in November 2025.

The inspection concluded that the local area partnership arrangements lead to inconsistent experiences and outcomes for children and young people with SEND. The report was fair in its assessment of Hackney's activity. Importantly, the areas highlighted for improvement were already recognised in Hackney's self-assessment, and plans to address them were already in motion.

The inspectors recognised that a lot of progress has been made to improve the experience and the outcomes of Hackney's children and young people with SEND, who achieve well and have higher school attendance than average.

They also praised leaders' knowledge of Hackney's needs and its diversity, and the way services are co-produced and commissioned with the local communities in culturally sensitive ways, providing tailored support, building trust and removing barriers. Leaders welcome children and young people's views, and the Parent Carer Forum is recognised in its role as a strategic and valued partner.

They noted that children with complex needs and health disabilities benefit from seamless pathways, having access to a comprehensive, tailored offer. In early years, children's potential SEND are identified quickly and carefully, and they receive effective support.

The report also acknowledges many of the initiatives in place, that are currently in their infancy, but will address many of the issues raised in the report. This includes the new [Education Strategic Plan](#) and the [SEND and Inclusion Strategy](#) for 2026-2029, both approved in December 2025.

Inspectors offered a series of recommendations on areas of improvement that mirror those already identified in Hackney's November 2025 [SEND self assessment](#), including extending the current use of dashboards to include key performance indicators, building on the partnership with secondary schools to reduce exclusions and suspensions, improving the [local alternative provision offer](#) and the post-16 offer to prevent young people from becoming NEET (not in education, employment or training).

Inspectors noted that the local area partnership needs to further improve the timelines and quality of education health and care plans (EHCPs), with a key focus on having more multi-disciplinary input into the plans.

Hackney continues to have a large EHC Plan cohort compared to both statistical and England averages. There are currently 3,839 children and young people with an Education, Health and Care Plan in Hackney, double the number from 2019. While the Council has invested in additional posts to help improve the timeless and quality of the plans, with some positive outcomes already visible, the financial constraints of recent years, doubled by the high demand, mean that there are still barriers in ensuring there are sufficient council officers to coordinate the process of assessing, creating and maintaining EHCPs. Leaders are committed to continue to work to further improve the EHC needs assessment process and ensure this becomes a consistently positive experience for all involved, especially children and their parents.





Training





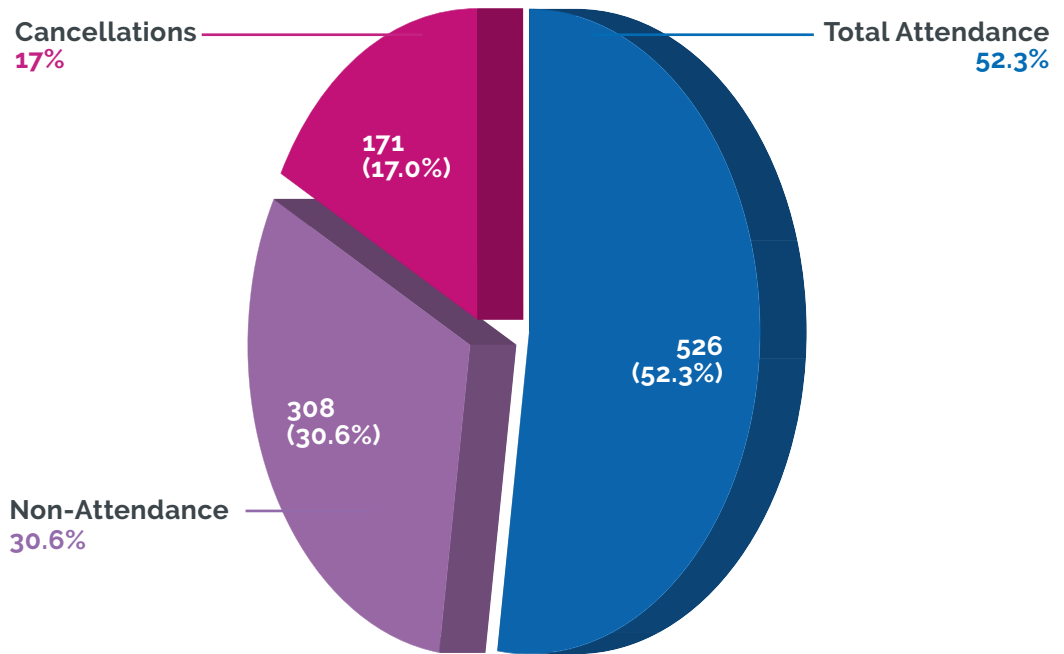
Training and Development

The training opportunities offered by the CHSCP are designed to meet the diverse needs of staff at different levels within the wide range of organisations that work with children, young people, or adult family members. Sessions range from those that raise awareness about safeguarding and child protection to specialist topics aimed at more experienced staff. The training programme focuses on areas of practice prioritised by the CHSCP, with learning from local and national case reviews integrated into the training material.

The CHSCP training programme for 2025/26 has continued to play a vital role in equipping the local multi-agency workforce with the essential knowledge and skills needed to safeguard children and young people across City & Hackney. Despite the challenges of delivering a reduced programme comprising 36 courses, compared to 77 in the previous year, the impact on front-line practice remains significant and overwhelmingly positive.

Metric	2025/26
Total Courses Held	36
Total Delegates Trained	526
Total Attendance	526
Non-Attendance	308
Cancellations	171

2025/26 - TRAINING ATTENDANCE



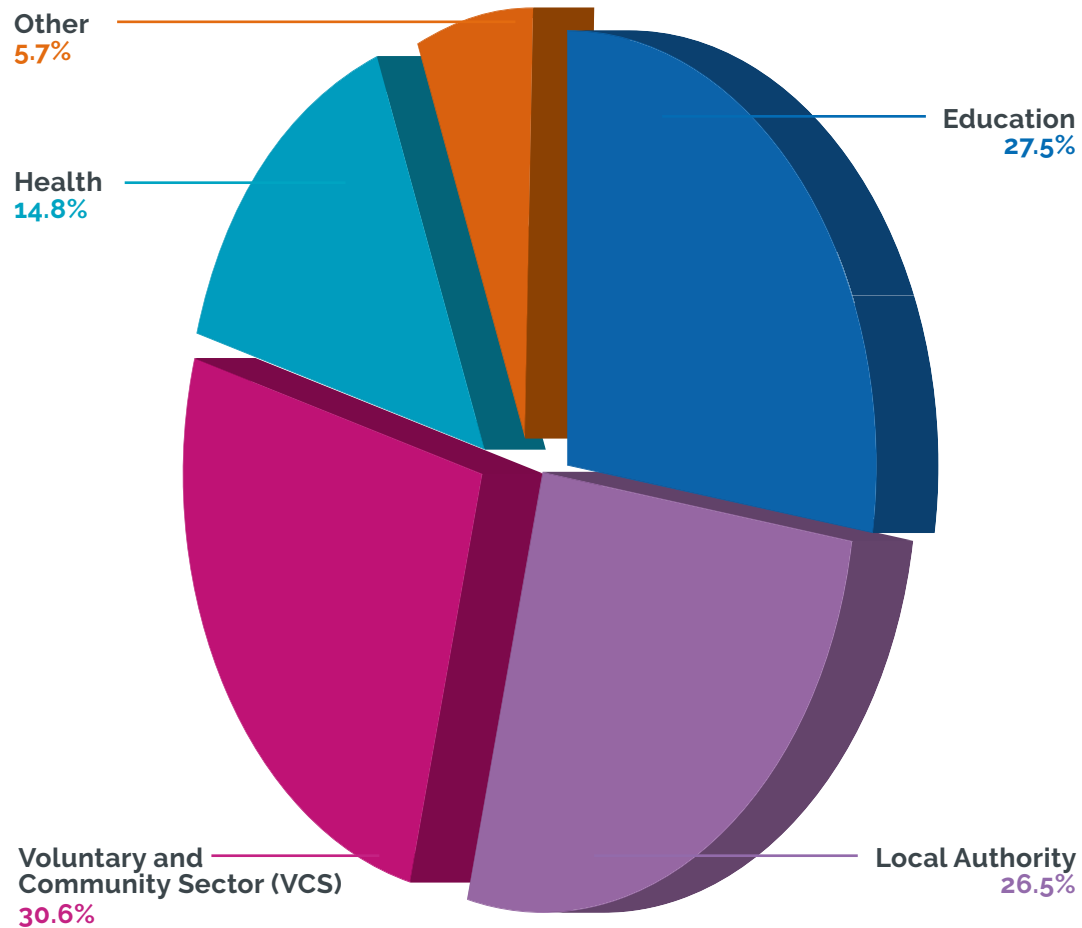
The significant reduction in courses delivered during 2025/26 was due to three primary factors:

- **Reduced internal trainer capacity:** There was limited capacity for internal trainers to provide provision. This was partly influenced by a number of departmental restructures across the partnership.
- **Reduced enrollment:** There was a decrease in delegate enrollments for longstanding courses.
- **Budgetary constraints:** Funding limitations restricted our ability to procure external training, placing additional pressure on already overextended internal trainer capacity.





TRAINING ATTENDANCE BY SECTOR

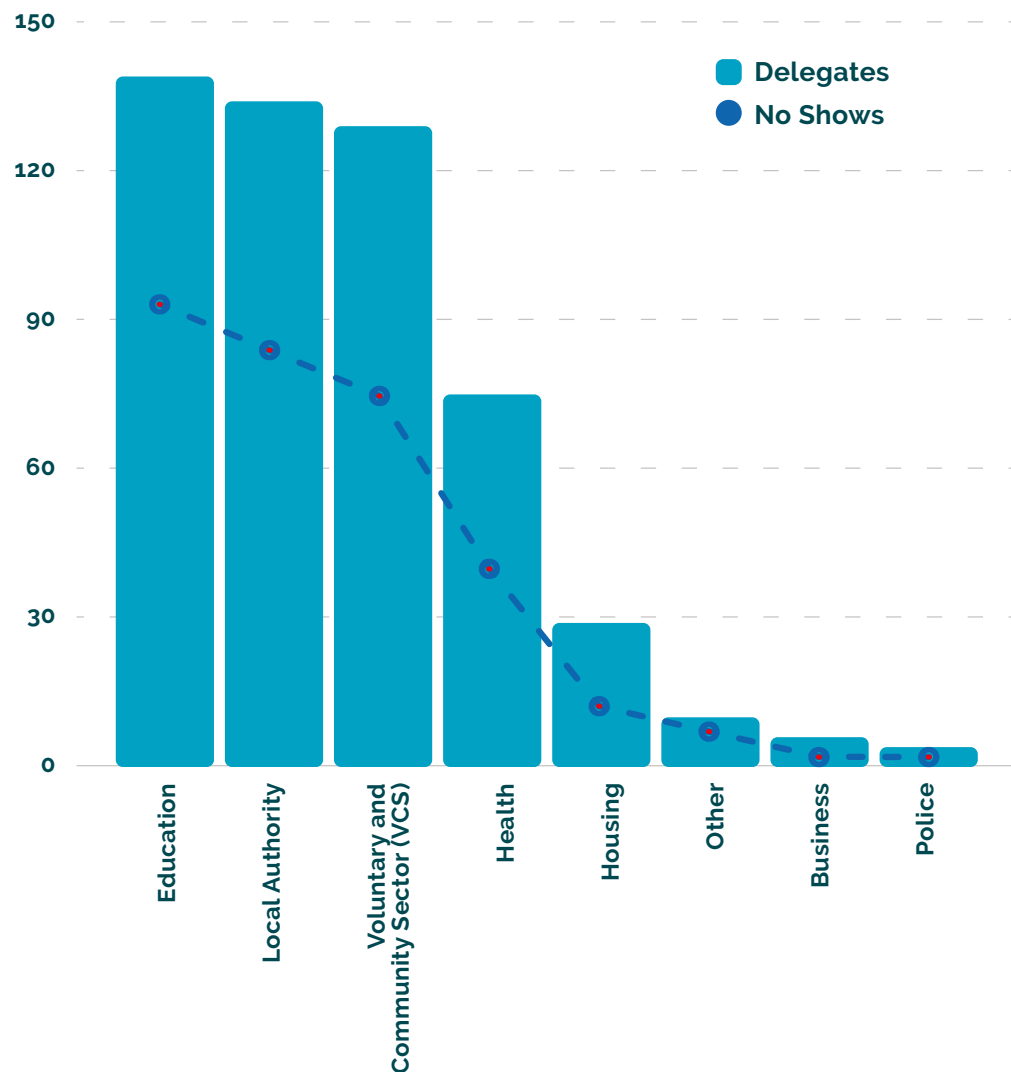


Sector	Number of Delegates	Percentage of Total
Education	139	26.4%
Local Authority	134	25.5%
Voluntary and Community Sector (VCS)	129	24.5%
Health	75	14.3%
Other	29	5.5%
Housing	10*	1.9%
Business	6*	1.1%
Police	4*	0.8%
Total	526	100%





NON-ATTENDANCE BY SECTOR



Sector	No of Bookings Made	Actual Attendance	No Shows
Education	230	139	91
Local Authority	216	134	82
Voluntary and Community Sector (VCS)	202	129	73
Health	114	75	39
Other	41	29	12
Housing	17	10	7
Business	8	6	2
Police	6	4	2
Total	834	526	308

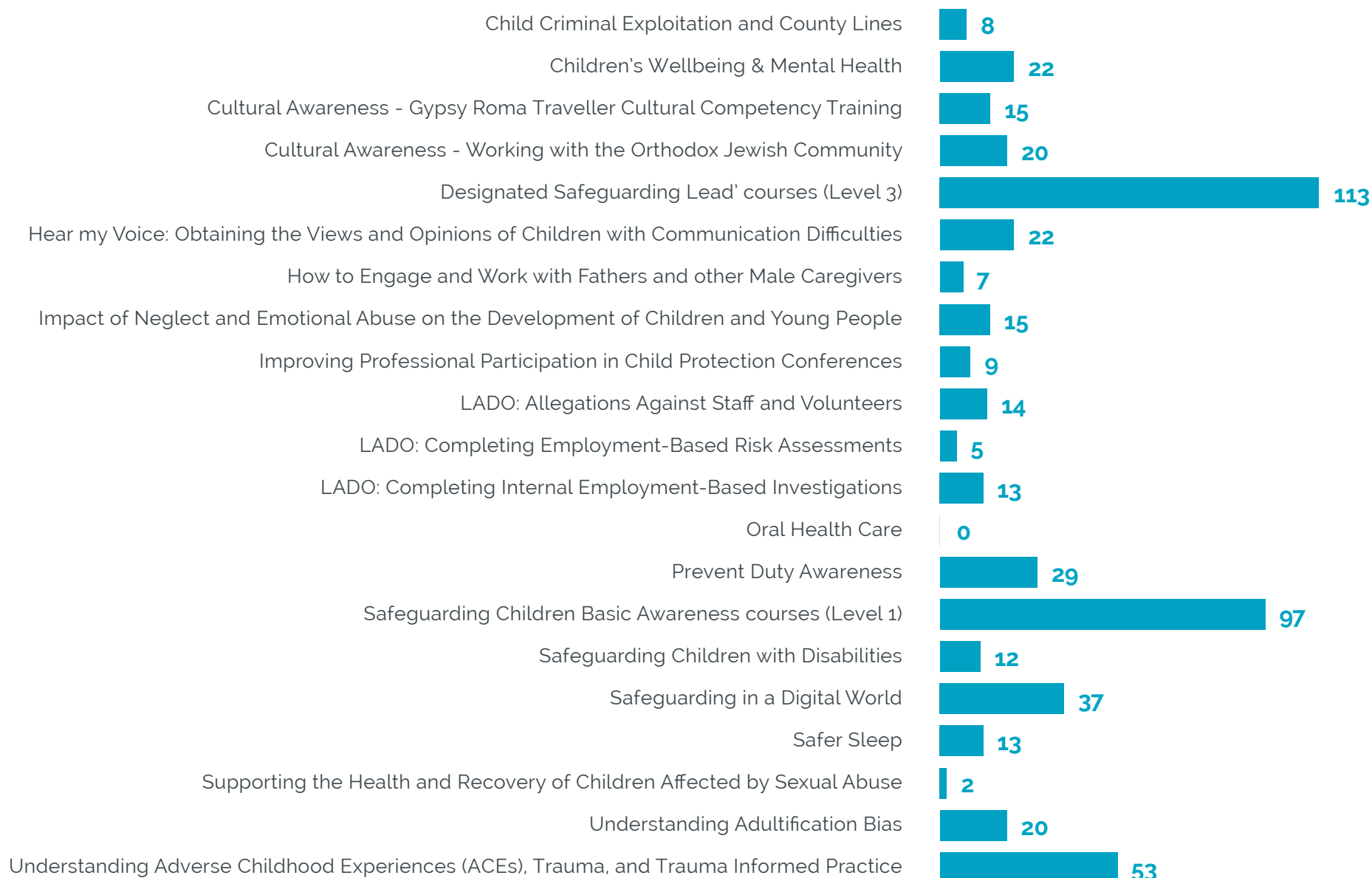
Barriers and factors contributing to non-attendance included:

- **No Consequences:** There are currently no penalties in place for non-attendance and late cancellations.
- **Structural Changes:** Recent restructures within the Local Authority have resulted in a decrease in the number of staff across several services, which is likely contributing to the sharp increase in non-attendance.
- **Workforce Pressures:** Many cancellations are attributed to 'work commitments.' When agencies are under-resourced and require staff to provide essential cover, training sessions often become a lower priority.





NUMBER OF DELEGATES TRAINED BY COURSE





Training, Learning and Achievements

Despite the setbacks, the training programme this period recorded several key achievements and impacts

- **High Satisfaction and Professional Confidence:** Delegate feedback reinforces the efficacy of the programme, with 96.7% of attendees reporting they felt better equipped to safeguard children following their training. Furthermore, 95.8% of delegates confirmed that the courses met their expectations, demonstrating the continued relevance and quality of the curriculum.
- **Quality of Delivery:** The expertise of our trainers remains a cornerstone of the programme's success. An impressive 83.6% of delegates rated the facilitation skills of trainers as 'Excellent' or 'Very Good'.
- **Enhanced Practitioner Knowledge:** The training has successfully bridged knowledge gaps, with 71.6% of delegates rating their knowledge as 'Very Good' or 'Excellent' post-training, marking a positive improvement from pre-course self-assessments.
- **Practical Application:** Qualitative feedback highlights how the training directly informs daily practice. Practitioners have noted the practical value of sessions on complex issues such as child criminal exploitation, parental conflict, and engaging with fathers and male caregivers. This learning is being directly applied in critical areas, such as screening referrals through the MASH and improving participation in child protection conferences.

Although the CHSCP is pleased with its training achievements this year, it has also received constructive feedback from training evaluation forms that highlight areas for improvement. Notably, instances of passive participation were observed for online courses in the 'Safeguarding Children - Basic Awareness' course, where some attendees were hesitant to engage. Furthermore, virtual engagement barriers were noted during the 'Child Criminal Exploitation and County Lines' training, as some attendees kept their cameras off and did not participate in focus groups, which made it difficult to facilitate meaningful discussions. The Training and Development Sub-group aims to address these concerns in the next training period.

LEARNING MANAGEMENT SYSTEM

The partnership has leveraged the Phew Learning Management System (LMS) to enhance the training experience. Recent innovations, such as restricting the release of certificates until post-course evaluations are completed, have ensured that we capture richer data on the long-term impact of our training. The CHSCP continues to work with the provider to improve user experience and reporting tools.





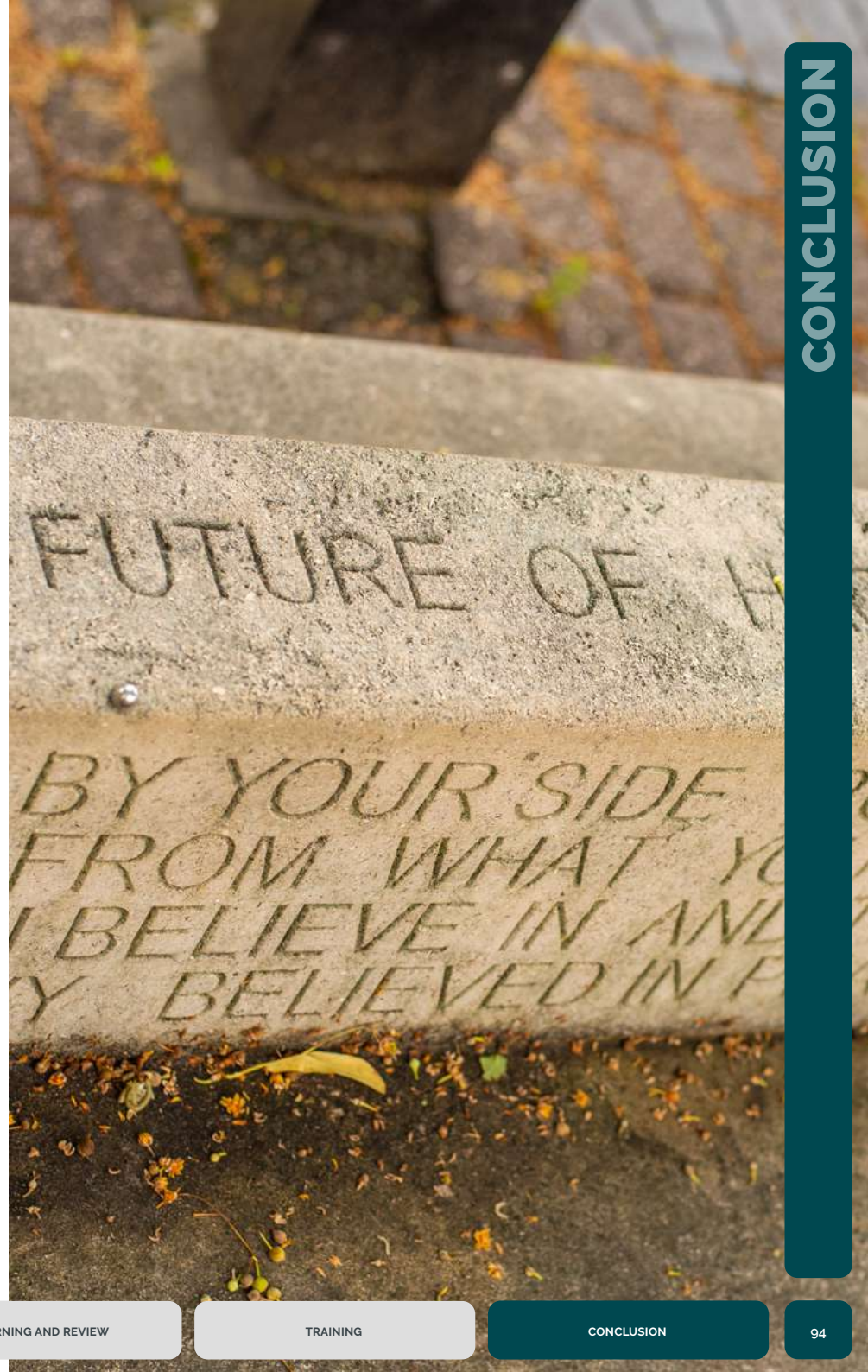
Conclusion





As we reflect on the 2025/26 reporting year, the City & Hackney Safeguarding Children Partnership (CHSCP) has demonstrated unwavering commitment to improving outcomes for children and young people across both local authority areas. Through multi-agency collaboration, significant progress has been made in implementing systemic reforms, such as the Families First Partnership Programme, the launch of neighbourhood Family Help services, and the embedding of trauma-informed and anti-racist practice. Across our statutory and relevant partner agencies, including local authority children's services, health, education, police, youth justice, probation, and the voluntary and community sector, our collective efforts have been guided by our six core priorities: nurturing the health and stability of our safeguarding workforce; advancing active anti-racist practice; elevating the authentic voice of children; maintaining solid foundations of good practice; proactively addressing strategic vulnerabilities and pathways to harm; and fostering an enduring appetite to learn.

Looking ahead to 2026/27, we remain clear-sighted about the persistent challenges facing our system, including budget constraints, rising service demand, complex extra-familial risks, and workforce pressures. However, these challenges only reinforce our resolve to deepen our multi-agency integration and maintain robust independent scrutiny. As we continue our systemic, trauma-informed, and anti-racist journey, the CHSCP will remain relentless in its mission to ensure that every child across the City of London and the London Borough of Hackney is seen, heard, helped, and effectively protected in a safe and supportive environment.





SAFEGUARDING CONTACTS

If you are concerned about a child please contact:

Hackney Multi Agency Support Hub (MASH):

0208 356 5500 / MASH@hackney.gov.uk

For out of hours (5pm – 9am), please contact the Emergency Duty Team:

0208 356 2710

City of London Children & Families Team:

020 7332 3621 | 9am to 5pm | Monday to Friday

Children's Emergency Duty Team:

020 8356 2710

If you think a child or young person may be in immediate danger, call 999.

Office Address:

CHSCP
Hackney Service Centre
3rd Floor, 1 Hillman Street
London
E8 1DY

chscp@hackney.gov.uk
020 8356 4183

Authored by: The City and Hackney Safeguarding Children Partnership

Date: September 2026





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Website: www.chscp.org.uk
Email: chscp@hackney.gov.uk
Phone: 0208 356 4183
Twitter: [@lscp_chscp](https://twitter.com/lscp_chscp)

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