

Camden Safeguarding Children Partnership

Annual Report 2024-25







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This report gives you the bigger picture of how frontline safeguarding fits into Camden's wider system. Feel free to dip in and out of sections as your priorities shift—it's designed to support multi-agency practice and spark reflection. Your role has a real impact on children's lives, so use this resource to help you think, learn, and improve.

For feedback or suggestions, please visit: CSCP Annual Report





Foreword from Lead Safeguarding Partners

As Lead Safeguarding Partners, we've taken time to reflect on the progress made over the past year and the direction we're heading. Our work is grounded in strong partnerships across Camden, between the Council, health services, schools, and the police. We take a relational approach because we know that safeguarding children is most effective when it's a shared responsibility.

Our commitment is shaped by a clear set of shared values that guide how we work together:



Relational working, where safeguarding is upheld through meaningful connections and mutual accountability.



Compassionate, trauma-informed and anti-racist practice in supporting children and families.



Collaborative learning, with a focus on reflection, improvement, and shared responsibility.



Curiosity and courage, enabling us to respond to challenges and engage with Camden's diverse communities.

As Lead Safeguarding Partners, we are committed to maintaining a forward-thinking workforce focused on improving outcomes for children and families, especially those facing multiple disadvantage.

We're proud that Camden has received *Outstanding* ratings from Ofsted, HMIP, and the CQC, recognising excellence across children's social care, youth justice, adult social care, including in many of our local schools. As we respond to major reforms in health and social care, updates to *Keeping Children Safe in Education*, and embedding of the London MPS Children's Strategy, we remain focused on learning, adapting, and strengthening safeguarding practice. Further detail on governance and scrutiny is outlined in the next chapter.

Looking ahead, we will continue to deliver joined-up, responsive support tailored to local needs. Our approach is rooted in joint accountability and multi-agency collaboration, ensuring coordinated responses to complex safeguarding issues. Evidence-based practice and regular impact assessment will guide our work, ensuring Camden's experience informs national policy and contributes to improved outcomes for children and families.

Tim Aldridge

Executive Director, (DCS) Children and Learning, Camden Council



David Pennington

Director of Safeguarding North Central London Integrated Care, System



Jason Stewart

Chief Superintendent BCU Commander, Central North BCU, Metropolitan Police Service



Stephen Hall

Chief Executive Officer, Camden Learning





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About the Camden Safeguarding Children Partnership (CSCP)





Our shared vision:

All children and young people in Camden are safe, thriving, and heard.



Our mission statement:

Working in partnership to keep all children and young people safe, thriving, and heard within a community where safeguarding is a shared responsibility.

What we Do:

The Camden Safeguarding Children Partnership (CSCP) is a multi-agency statutory body established to ensure that local safeguarding arrangements are effective. In Camden, the three lead safeguarding partners are Camden Council, North Central London Integrated Care Board (ICB) and the London Metropolitan Police Service, who work in collaboration with Camden Learning to implement our model of joint strategic leadership and accountability. The CSCP sets policies, conducts reviews, and provides training to ensure that all agencies work collaboratively to protect children.

In 2024, the Camden Safeguarding Children Partnership updated its <u>safeguarding arrangements</u> to reflect the changes in Working Together 2023. The refreshed approach puts stronger focus on working closely with parents, keeping children at the centre of decision-making, and making sure that all lead safeguarding partners share responsibility for creating a joined-up and effective safeguarding system. This includes promoting a shared vision, using evidence to support learning, prioritising resources together, and encouraging inclusive multi-agency working and constructive challenge.



The Terms of Reference for partnership meetings and subgroups were also updated to reflect this stronger emphasis on joint accountability and to support delivery of the CSCP Business Plan. This includes a commitment to:

- Collaborate: ensuring decisions are based on a shared practice approach and constructive debate informed by analysis from all services;
- **Learn:** enabling teams to engage in peer learning, knowledge exchange, peer audit, group supervision, and observation;
- **Resource:** ensuring children receive holistic support by drawing on the expertise of a wide range of agencies;
- **Include:** supporting staff to identify and challenge discrimination, disparity, and negative stereotypes; and
- **Mutual Challenge:** encouraging open challenge within and across agencies and disciplines, where independent judgements are valued alongside collective decision-making.

Our <u>safeguarding arrangements</u> are published on our website and you can also find a <u>film</u> about our work and details of our objectives.

What is the purpose of the CSCP Annual Report 2024-25:

This joint annual report from the Lead Safeguarding Partners reviews the Camden Safeguarding Children Partnership's activities during 2024–25. It outlines the actions taken by safeguarding partners and relevant agencies, focusing on the effectiveness of local safeguarding arrangements and the outcomes of child safeguarding practice reviews. The report aims to:

- Hold safeguarding partners accountable
- Support future policy development through analysis
- Identify national support needs
- Inform future updates to statutory guidance

The report centres on multi-agency priorities, **learning**, **impact**, **evidence**, **and continuous improvement**. The annual report is published on the CSCP website: <u>CSCP Annual Reports</u>.

Our structure and governance chart can be found on page 19: CSCP Multi-agency Safeguarding Arrangements 2024.







Scrutiny and Governance

External governance from national inspectorates including Ofsted, the Care Quality Commission (CQC), HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS), and HM Inspectorate of Probation (HMIP) provides independent assurance through rigorous scrutiny, performance evaluation, and constructive challenge. This oversight plays a critical role in maintaining high standards and driving continuous improvement across services.

Key questions to test the effectiveness of the CSCP:

- **Multi-Agency Safeguarding Arrangements:** How effective are these arrangements in providing a clear view of single and multi-agency safeguarding practices?
- **Reflection and Learning:** Do the arrangements create space for reflection and learning from practice?
- **Impact on Lives:** How do the arrangements positively affect the lives of children, multi-agency working, and front-line practice?
- **Evidence and Analysis:** The report includes evidence and analyses to provide assurance against these questions. It aims to understand the performance and impact of the Partnership's work.

What do inspections tell us about our safeguarding arrangements?

One of the ways assurance is sought is through external independent inspectorates and this section details current status of key local statutory relevant agencies. At the time of writing this report, Camden is the only local authority in the country to achieve the highest possible 'Outstanding' ratings from all three major inspectorates, as detailed below.

Camden Council – Children's Services



Camden Council's children's services was rated 'Outstanding' by Ofsted, in April 2025.

The impact of leaders on social work practice with children and families	Outstanding
The experiences and progress of children who need help and protection	Outstanding
The experiences and progress of children in care	Outstanding
The experiences and progress of care leavers	Outstanding
Overall effectiveness	Outstanding

Summary of the key points from the Ofsted report regarding partners, police, health, education, and governance and leaders:

 Strong Collaboration: Camden's leaders work effectively with a wide range of partners, including local businesses, sports agencies, and voluntary and community sector partners, to enhance support and opportunities for children.



- **Responsive and Proactive:** Partners describe Camden as responsive, ahead of trends, and keen to be part of solutions.
- **Effective Joint Working:** There is well-developed joint working with the police, contributing to a whole-system approach to effective frontline practice.
- **Sophisticated Response to child exploitation:** The multi-agency child exploitation panel (MACE) and multi-agency risk assessment conferences (MARAC) are targeted well, assisting professionals in identifying opportunities for disruption.
- **Integrated Support:** Health assessments and support for children in care are coordinated effectively, with almost all children up to date with routine medical appointments and reviews.
- Mental Health Services: Camden has a strong and effective mental health offer for care-experienced young people, with over 20 commissioned and co-located services available.
- **Education:** Camden has high expectations for the quality and completion of personal education plans (PEPs), ensuring that the needs of children in care are a high priority.
- **Support for Schools:** School leaders value the quality of training and information they receive from Camden, expressing confidence in the decisions made by children's social care.

Most children are continuing to benefit from experienced leadership of services, good corporate and political support, a committed, well-trained workforce and resources which helps children to progress. A recent transformation of service delivery has enhanced support to staff and strengthened management oversight, so that children receive the right level of services to meet their needs. Most children benefit from timely help, with clear plans and evidence that risk is reducing

 While Camden welcomes the Outstanding Ofsted judgement, partnership meetings have focused on areas for improvement to ensure ongoing scrutiny and better safeguarding. The sections below outline these areas, with further detail provided throughout the report.



Scrutiny: Ofsted (ILACS) - Key Areas for Improvement

- **Timeliness of decision-making and escalation -** for a small number of children whose plans are delayed.
- Management oversight needs to be more impactful where plans are not progressing.
- **Permanence planning -** delays for some children, with oversight not always visible.
- Recording and consistency of management decisions in MASH and Early Help.
- Tracking progress of young carers and addressing intersecting vulnerabilities (e.g. low school attendance).
- **Contingency planning for children -** on child protection plans needs earlier focus.
- Variable practice for children on care orders - placed with parents; scrutiny is inconsistent.
- Unregistered provision Clarity needed on visit frequency and decision-making documentation.
- **Placement stability -** More focus needed on long-term planning and early intervention.





Camden Council - Youth Justice Service



Camden local authority Youth Justice Service was rated **Outstanding** by the HM Inspectorate of Probation (HMIP) (June 2025). The report highlighted:

- Camden Youth Justice Service (YJS) was praised for comprehensive and effective partnership working.
- The YIS Management Board ensures that the needs of children and families are prioritised across agencies.
- Strong links with education, health, and voluntary sector partners enable a wide range of responsive services.
- Information sharing is timely and roles are clearly defined, supporting coordinated interventions.
- The Evolve team and other partnership services support smooth transitions, especially for post-16 pathways.
- Safeguarding is embedded in all aspects of Camden YJS's work, with a clear balance between child safety and community protection.
- Practitioners demonstrate high-quality assessments and planning, identifying risks and needs early.
- The service uses a trauma-informed and restorative approach, particularly in work with victims.
- There is a strong focus on diversity and lived experience, ensuring safeguarding responses are tailored and inclusive.

Scrutiny: HMIP (Youth Justice Service) - Areas for Improvement

- Develop and implement a partnership-wide victim strategy, informed by data and victim voice.
- Improve feedback mechanisms from victims and use insights to shape services.
- Map and understand the range of victim support services available locally.
- Strengthen transition planning from youth to adult services, with better probation involvement.



Camden local authority Adult Social Care was rated **Outstanding** by the Care Quality Commission (CQC) (February 2025). The report highlighted:

- Strong collaboration between Camden Council and its partners, including the Integrated Care Board (ICB), voluntary sector, and health services.
- Camden demonstrated a co-productive approach, involving people with lived experience in shaping services.
- The borough has effective multi-agency forums that support joint decision-making and service delivery.
- There is a commitment to shared learning, with regular reviews and feedback loops between partners to improve outcomes.
- Camden has robust safeguarding arrangements in place, with clear governance and accountability structures.
- The Camden Safeguarding Adults Partnership Board plays a key role in coordinating safeguarding efforts across agencies.
- The report highlights timely responses to safeguarding concerns, with evidence of multi-agency safeguarding enquiries being well-managed.
- There is a focus on prevention and early intervention, supported by community-based services and outreach.

Health:

North Central London - Integrated Care Board

At the time of writing this report, it's important that we acknowledge the financial difficulties faced by the Integrated Care Board which are part of a broader national reorganisation of the NHS. North Central London Integrated Care Board (NCL ICB) is facing significant budget cuts, with a reduction of approximately 50% in operating costs mandated by the government. At CSCP meetings, our lead Health partner updated on ongoing discussions around future structural arrangements considering

Scrutiny and Governance



national changes and financial pressures. While no final decisions have been made, several options are being explored to ensure sustainability and continued delivery of priorities across the system. Implications to our local safeguarding delivery were openly discussed at partnership and subgroup meetings, particularly around maintaining local focus, continuity, and clear lines of accountability during any transition.

Scrutiny: The CSCP will be keen to ensure that any future changes do not dilute the local knowledge and trusted relationships that are essential to effective safeguarding, particularly in identifying and responding to local risks and ensuring timely, well-coordinated responses to child deaths, including joint agency reviews.



Care Quality Commission (CQC) ratings for the hospital trusts in the London Borough of Camden



University College London Hospitals NHS Foundation Trust (UCLH) - Overall rated as "Good".



Royal Free Hospital - Overall rated as "Good".



Great Ormond Street Hospital for Children NHS Foundation Trust - Overall rated as "Good".



Camden and Islington NHS Foundation Trust - Overall rated as "Good".



Tavistock and Portman NHS Foundation Trust - Overall rated as "Good".



Central and North West London NHS Foundation Trust (CNWL) - Overall rated as "Good".

Scrutiny: In the London Borough of Camden, there are several hospital trusts providing health services with a vital role in safeguarding and providing quality care for children and their families. Throughout the report, we have detailed single and multi-agency audits that have sought assurance on the quality and consistency of safeguarding practices in health settings across various areas. This includes efforts to ensure compliance in areas where external inspections have identified opportunities for improvement and learning within the health system.

Royal Free London NHS Foundation Trust (RFLNHSFT)

At the Royal Free London NHS Foundation Trust (RFLNHSFT), safeguarding is a fundamental component of all care provided to children, young people, the unborn and their families. The last full CQC inspection which included children's services was in 2016 and services were rated as 'good'. While there have been targeted inspections of maternity and surgical services and a rating of 'requires improvement' there has not been an updated assessment of children's services.

On 1 January 2025, Royal Free London NHS Foundation Trust merged with North Middlesex Hospital. Safeguarding teams have aligned policies and processes, with an updated safeguarding policy available. The integrated team, covering children, young people, the unborn, and adults at risk, offers consistent frontline support using a Think Family approach. Increased staffing stability has enhanced casework, training, and service development. The Trust's Integrated Safeguarding Committee, chaired by the Chief Nurse, meets quarterly with senior staff from all sites to monitor safeguarding activity and provide assurance.

North London NHS Foundation Trust

In November 2024, there was a transition from Camden and Islington NHS Foundation Trust to North London NHS Foundation Trust (NLFT) because of a merger between Camden and Islington NHS Foundation Trust (C&I) and Barnet, Enfield and Haringey Mental Health NHS Trust (BEH). The two

Scrutiny and Governance



trusts had been successfully collaborating for several years under the North London Mental Health Partnership, sharing leadership and executive teams. The merger aimed to streamline services, improve care quality, and create a more integrated mental health service across five North London boroughs. The new trust now provides all-age acute and community mental health services, as well as regional and national specialist services.

Scrutiny: Our safeguarding partners continue to maintain oversight of risks linked to the broader geographical coverage which includes, access to mental health services, possible disruption during staff changes, loss of local focus, early signs of quality issues, and clarity about how to get help.



HMICFRS Inspection of **Metropolitan Police Service** handling of the sexual and criminal exploitation of children, commissioned by the Mayor's Office for Policing and Crime

In its most recent inspection, <u>His Majesty's Inspectorate of Constabulary</u> and Fire & Rescue Services (HMICFRS) carried out an inspection of MPS response to Child Exploitation and the following accelerated causes of concern were identified:

- 1. The force should improve its investigation when children are at risk of, or harmed by, criminal or sexual exploitation;
- 2. The force needs to improve how it identifies and assesses risks, and how it responds, when children are reported missing;
- 3. The force needs to make sure its officers and staff, at all ranks and grades, understand what victim blaming is and how it affects the service they provide.

The milestone plan agreed between the Metropolitan Police Service (MPS) and HMICFRS in 2024 outlines a series of specific, measurable actions to address the accelerated causes of concern—particularly around child protection and exploitation. These milestones are part of a broader five-year Children's Strategy launched in September 2024, which includes 36 concrete actions to improve child safety, build trust, and bring offenders to justice.

Impact: HMICFRS revisited the MPS in September 2024, the senior leadership response to the concerns have been positive and there are considerable improvements in place. Our lead safeguarding partners sought assurance that all three accelerated causes of concern are now closed. Examples of some of the actions undertaken by the MPS to implement recommendations include:

- Training and cultural reform: All frontline officers to receive training on childhood vulnerability, adultification bias and safeguarding responsibilities. The training aims to embed a "Child First" approach in all interactions with young people
- 2. **Operational improvements:** Revised risk assessment protocols for missing children to ensure faster and more accurate classification of high-risk cases.
- 3. **Increased staffing in child protection teams** to improve case handling and reduce delays.
- 4. **Language and attitude shift** on victim-blaming language across all ranks. This includes introduction of new guidance and supervision to ensure respectful and trauma-informed communication.
- 5. **Performance monitoring** via regular internal audits and external reviews and use of data dashboards to monitor number of high-risk missing child cases, timeliness of response and outcomes of child exploitation investigations.
- 6. **Public accountability** through updates on progress and engagement with community



Camden Council: Camden Schools and **Early Years settings**



Ofsted ratings for Camden Schools and Early Years settings



99% of Early Years provision are rated Good or Outstanding by Ofsted.



100% of mainstream Schools are rated **Good** or **Outstanding** by Ofsted.

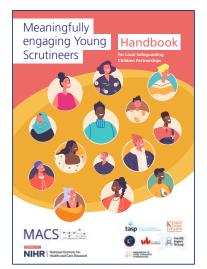
As of September 2024, Ofsted no longer gives schools an overall effectiveness grade during inspections. Schools now receive detailed feedback across four subcategories: Quality of education, Behaviour and attitudes, Personal development and Leadership and management. No Camden maintained school has been found less than good in any of these areas.

Our safeguarding arrangements promote safeguarding across Camden schools through a combination of specialist support, training, and partnership coordination to align school safeguarding efforts with borough-wide strategies.

CSCP Young Advisors

The CSCP recruits Young Advisors to advise the safeguarding partnership and Independent Scrutineer on young people's perspective. Our Young Advisors have grown up and live in Camden and have a dual role as Youth Offending Service Peer Advocates and therefore understand the lived experiences of local young people.

I would like to contribute to creating a good relationship with children to be able to understand their issues and hardships and to raise and flag any safeguarding issues that may



In 2024, the CSCP was involved in the Multiagency Child Safeguarding (MACS) Evaluation project, funded by the NIHR Policy Research Programme to share our practice in relation to engaging young people in the work of the Partnership through our Young Advisors. The full report reviews the effectiveness of Local Safeguarding Children Partnerships (LSCPs) and is available here. As part of this project, we created a handbook which is a practical guide for LSCPs to meaningfully engage young people as scrutineers. It outlines how young advisors can contribute to improving safeguarding practices by sharing their lived experiences and perspectives. The

project also included the development of a video which provides tools and strategies for involving young people in safeguarding work and the process for recruiting young people as Young Advisors within safeguarding partnerships.

By sharing our views and ideas we ensure that LSCPs stay relevant and connected to the real impact their having to the lives of local children. It is also a fantastic way to ensure our voices are heard by leaders and decision makers

Young Advisor, MACS Evaluation research Project.





CSCP Lay Member

Our lay members provide a perspective on safeguarding arrangements as local residents and hold responsibility for championing the voice of the child and maintaining a link to the local community. In 2024-25, our Lay Member led our multi-agency audit on safeguarding children who are Electively Home Educated. **Further details about the audit can be found in section 7.8.**

National social care reforms

The national social care reforms are a series of government-led changes aimed at improving the social care system, particularly in areas like funding, access, quality of care, and workforce support. The reforms will include:

- £200m investment to shift focus from crisis intervention to early support
- Includes £45m for a Pathfinder programme testing reforms in Family Networks and Family Help
- Camden received £800k one-off funding for reform transformation

Our lead safeguarding partners have sought feedback from pathfinders who have been testing these reforms shared that the biggest changes requiring culture, practice, and ways of working changes will be:

- **Establishment of Family Help** the merging of Early Help and Child in Need functions
- Establishment of Multi-Agency Child Protection Teams child protection being led by a joint team of local authority, police, education and health colleagues
- Family Network and family plan approaches greater ownership from extended family or friends at first referral, and the flexible use of funding to prop up support.

Camden's established strengths and relational approach are shaping the delivery of national social care reforms. The local authority is currently developing its Family Help offer, integrated with local services and building on the existing Family Hubs model. Alongside this, the Edge of Care

service is in early implementation, and a Family Therapy service is being developed to ensure timely access to specialist interventions.

At the time of reporting, Camden has completed the discovery phase. Between June and December 2025, the focus will shift to design, testing, and learning, with implementation planning expected to begin in early 2026. To maintain strategic oversight, the Strategic Social Care Reform Board will be chaired by the local authority's lead safeguarding partner and supported by an external critical friend to provide independent scrutiny and challenge.

Three localities will be established, aligned with Camden's five Neighbourhoods. This model will be tested by lead safeguarding partners, building on existing locality-based working in early years and family hubs. The prototype phase will also explore key themes identified during discovery, in collaboration with the Centre for Relational Practice.

Relational practice framework

Throughout this year, our lead partners have started to implement Camden's Relational Practice Framework. The framework is a values-driven approach to guide how professionals work with residents, families, and communities. It's designed to foster trusting, compassionate, and collaborative relationships that support better outcomes for everyone involved. The framework is rooted in systemic practice, which means understanding people in the context of their relationships, environments, and systems. Camden's model is unique in combining relational practice with the principle of community power, recognising that everyone has something to contribute and should be valued for it. The framework encourages:

- Check-ins and reflective supervision
- Everyday rituals and mantras to reinforce values
- Shared learning and adaptation



 A strong commitment to anti-discriminatory and anti-racist practice, recognising the impact of structural inequalities and working actively to challenge them

The practice framework is about connecting people and services so they work better together. It encourages respectful and fair relationships, and values trust, honesty, and social justice. This way of working is important because many residents face complex challenges.

Scrutiny: As Camden agencies progress with social care reforms, the practice framework will be further embedded to support consistent thresholds for help, support and protection. Lead safeguarding partners will maintain strategic oversight, ensuring the framework remains aligned with reform objectives and continues to guide effective, accountable practice.

Working with parents, carers and family members principles

In alignment with WT23, the CSCP's multiagency approach recognises that it's crucial for practitioners to collaborate with parents and carers, especially when there are concerns that a child may need support or be at risk of harm. The following multiagency principles will be developed and embedded across the partnership to help practitioners engage effectively with parents and carers, enabling them to implement necessary changes and make informed decisions to best support and protect children.

Principle 1:



Building strong, positive, trusting, and cooperative relationships with parents and carers

Principle 2:



Respectful, non-blaming, clear and inclusive communication

Principle 3:



Empowering participation in order to help, support and protect children

Principle 4:



Parents and carers are involved in designing services for them



We work with them, not do things to them. That's the destination we're aiming for

Further information on these principles and how leaders, managers and practitioners should support the families they work with can be found here: CSCP Multi-agency Safeguarding Arrangements 2024. In order to further embed this across our frontline services a video has been developed: Working with Parents Principles - Camden Safeguarding Children Partnership CSCP





Impact: HMIP Inspection of YJS 'Camden's YJS has a strong commitment and embedded approach to participation. This is reflective of the wider local authority, where participation is valued in terms of governance arrangements, as it promotes community empowerment. Members of the YJS management board include peer advocates, voluntary organisations working with children and young people in Camden, and a young adult with lived experience of the justice system.'

Independent Scrutineer evaluations on safeguarding arrangements and the quality of the annual report:

The role of independent scrutiny is to provide critical challenge and seek assurance in judging the effectiveness of multi-agency arrangements to safeguard and promote the welfare of children in a local area, including arrangements to identify and review serious child safeguarding cases. Independent scrutineers are supported in their role by the statutory regulators of services and their relevant national inspection teams. This annual report has already outlined outcomes these bodies have reached following the scrutiny that has taken place in the last couple of years, for the individual agencies that make up the Camden Safeguarding Children Partnership. This has been extensive across the period of this report, and services have been judged as outstanding in virtually every inspection and review. These inspections and reviews have also commented, on partnership working and give clear assurance that the input to the partnership and its operation is working very well.

The new role of Partnership Scrutineers was introduced in 2024. Their direct insights and experience of the operation of partnerships offers further assurance as to whether the local "multi-agency arrangements (MASA) to safeguard and promote the welfare of children" are operating well. Across the year of this report, I have attended all six of the full CSCP meetings, received four rapid review reports on serious incidents alongside the three Delegated Safeguarding Leads, and participated in the finalisation of a CSPR which has significant local and national implications for practice. I have also been able to engage with every partner service on both a practical and strategic level. This has provided a particular insight as to the operation of the MASA in Camden.

There are six agreed areas of "scrutiny" expected on these arrangements:

Do Lead Safeguarding Partners (LSP) and their Delegated Safeguarding Partners (DSP), enact their responsibilities with active strategic oversight of LSCP planning, implementation and review?

The arrangements and roles have been agreed and have been in place in Camden since the beginning of 2024, and the role of the Independent Scrutineer from April 2024. It was agreed that the DSPs will rotate the chair position of the partnership at each meeting, and in the year of this report there have been six full partnership meetings. The Camden Safeguarding Children Partnership has been fully compliant with the National Guidance since the beginning of 2024.

Are the wider safeguarding partners including education actively involved in safeguarding children?

The Camden Partnership had already been operating a system and structure of subgroups which were compliant with WT23. The process for Safeguarding Reviews, was also in place. Through direct involvement, I have been able to assure the partnership of their effectiveness. It is clearly evident these reviews have led to improvements in local practice. We have however yet to see the impact on national safeguarding practice.

Are children, young people and their families aware of and involved with plans for safeguarding children?

This has been particularly evidenced through the reviews undertaken on specific cases. There is also a history of engagement with Young Inspectors, although at the end of this reporting year, there is a need of further recruitment, as this cohort are moving on as they have now matured.



Are appropriate quality assurance procedures in place for data collection, audit and information sharing?

The partnership are particularly well served through regular performance reports, and during this year have received several commissioned reports on areas of concern and interest. Each of these have helpfully provided further insight to issues and supported on going planning and informed the further developments within safeguarding reforms.

Is there is a process for identifying and investigating learning from local and national case reviews?

This is a clear strength for the partnership, with both internal and externally appointed reviewers and authors. The process for reviews and the reporting and involvement of partners is well managed and structured. There is insightful interrogation and production of clear learning and improvement actions for services. This is both a local benefit but also for national practice and governance.

Is there is an active program of multi-agency safeguarding children training and workforce development?

National regulators have already evidenced the quality of training and development in individual professions; there is also a provision across the partnership with extensive links to national and regional safeguarding communities.

With the evidence provided and my direct participation in the operations of the partnership, I can offer my independent assurance that the Multi-Agency Safeguarding Arrangements for Children in Camden are both compliant and functioning well.

Looking ahead to the year ahead,

There are huge structural and financial challenges that will need to be addressed.

The saving targets across Health agencies, with impact across both in strategic functions and front- line practice. The intended merger of North Central London, and North West London ICBs will inevitably bring a challenge to the existing close partnerships, between services.

The percentage of funding received by the partnerships from the MET Police has long been seen as inadequate and not equitable. We are aware of conversations to address this, but these have yet to conclude.

Local Authorities remain challenged financially and have further expectations of system change and reform, with only initial funding forthcoming from government.

All of these concerns at a time when there is a greater demand for services and the nature of these demands are even more complex. This will require an even greater focus on relationships, to maintain and secure the effective practice outlined here in this annual report.

Robert McCulloch-Graham, Independent Scrutineer.

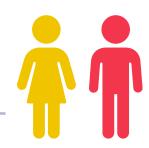




Camden - A borough of diversity and contrast



Camden - A borough of diversity and contrast on a page: This report will refer to the impact of the CSCP to the context of the borough demographic



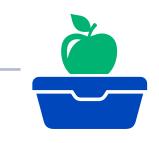
Camden's population is approximately 220,000, with around

44,000 children, who make up one fifth of the population.



In Camden, two in five

children live in poverty, after housing costs are considered.



Camden pupils are eligible for free school meals.



15% of

Camden's population are disabled compared to the national average (17%).





Religion in Camden:

34% no religion, 31% Christian 16% Muslim **5%** Jewish 2% Hindi, 9% not stated. 2% Other.



early years settings are rated **Good** or **Outstanding** by Ofsted



Disability:

15% of Camden's population are disabled and **550** children and young people with disabilities are supported by the CYPDS (aged 0-25).



The gap in between disadvantaged and advantaged students in Camden remains narrower

than London and England across all education stages



Gender identity:

47% Male **53%** Female 0.5% identify as non-binary, or different to assigned sex at birth.



70% of children achieve a good level of development.



Attendance:

1 in 4 Camden secondary school pupils missed more than 10% of sessions in 2023/24



The attainment of **children** leaving both primary and secondary education is better than the national average



LGBTO+:

17% identified as nonheterosexual orientation.



Schools are rated Good or Outstanding by Ofsted



Key Stage 4 pupils

progress to sustained education.





Achievements made against 2024-26 safeguarding priority areas

This section provides evidence of impact and developments in partnership working against each priority area.

- 1. Children Looked After and those that are Care Experienced.
- 2. Mental Health in the family
- 3. Re-engaging vulnerable children in education (including SEND)

The CSCP identifies three safeguarding priority areas to take forward biennially, which is reviewed annually. This is conducted based on:

- Emerging learning from Reviews and multiagency audits
- Trends and performance indicators in CSCP dataset
- Themes identified in multiagency subgroups/ forums and members survey to seek the views of our frontline workforce
- Work with CSCP Young Advisors and other children and parents' participation forums.





Priority	Examples of impact and progress made in 2024-25	Challenges to overcome 2025-26
Children Looked After and those that are Care Experienced	 Recognition and Inclusion: Since January 2024, 'care experience' has been formally recognised as a locally protected characteristic in Camden. This milestone ensures that care experienced individuals are considered in all equality, diversity, and inclusion efforts, embedding their needs into local policy and practice. Multiagency Commitment: The Camden Corporate Parenting Strategy 2025–28, co-developed and endorsed by multiagency partners, sets out a clear, measurable plan to address areas of need and build on existing strengths. Through discussions at the main Partnership meeting, this work focuses on developing safeguarding arrangements that ensure every care experienced child and young person feels safe, supported, and feels proud of their identity. Integrated Health and Care: Collaboration with Integrated Care Boards (ICBs) has embedded corporate parenting responsibilities across health and social care systems, ensuring a joined-up approach to meeting the needs of care experienced individuals. Mental Health Continuity: As identified in our transitional safeguarding work strand, programmes like Minding the Gap enhance mental health support for care experienced young people post-18. These initiatives ensure smoother transitions into adulthood and continued access to vital emotional and psychological support. 	 Care experienced young people mental health and transitions multi-agency audit theme for 2025-26. Collecting more qualitative data, including feedback from children and young people, to help understand challenges, what's working well, and where better support can be provided. To create a physical Hub dedicated to care experienced young people to access support, socialise with others, and participate in activities. Embed Lifelong Links- a program focused on helping young people strengthen and maintain essential relationships throughout their life. Champion intersectionality, ensuring all staff and partners understand how care experience intersects with other aspects of identity.

Priority	Examples of impact and progress made in 2024-25	Challenges to overcome 2025-26
Children	 Intergenerational Support: The Grandmentors is a multiagency community	Multiagency Corporate Parenting Board to
Looked After	initiative creating meaningful, lasting relationships between care leavers and	maintain oversight of small number of cases
and those	older mentors. These connections provide emotional support, guidance,	of unclear or delayed permanence options
that are Care	and life experience, helping young people navigate adulthood with greater	to ensure timely and clear progression of all
Experienced	confidence.	children's permanence plans.



Children
Looked After
and those
that are Care
Experienced

- **Pathways to Employment:** The CSCP Team supports tailored placements, including ringfenced internships and apprenticeships within Camden Council, to remove barriers to employment and provide care-experienced young people with meaningful pathways to economic independence.
- **Culturally Responsive Care:** Taking forward learning informed by 'social graces', an increasing number of placements are designed to reflect the cultural backgrounds of children and young people. The use of interpreters and culturally competent carers ensures that young people feel understood, respected, and supported.
- **Celebrating Success:** The annual multiagency Virtual School Award Ceremony continues to highlight and celebrate the achievements of children in care, fostering a sense of pride and belonging while strengthening community bonds.
- **Support for Reintegration:** Regular visits to care experienced individuals in custody, alongside collaboration with the National Probation Service and Youth Justice Service, are ensuring that reintegration plans are robust, personcentred, and focused on long-term stability.
- **Support for Young Parents:** Building on learning from safeguarding reviews, access to parenting programmes and peer support through family hubs has grown, helping care-experienced parents gain confidence, strengthen parenting skills, and connect with peers.

 Multiagency Corporate Parenting to have greater focus on the factors impacting long term placement stability and exploration of opportunities to intervene earlier to manage challenges.

Priority	Examples of impact and progress made in 2024-25	Challenges to overcome 2025-26	
Mental health in the family	 Data Insight: 48% of assessments identify mental health as a contributing factor—whether related to the child, parent, carer, or another individual. This high prevalence underscores the critical need to integrate mental health considerations into all aspects of safeguarding and support planning. Training Outcomes: Ongoing delivery of training on parental mental health and its impact on children through the multiagency training programme has strengthened practitioner awareness and response. The updated Level 3 Safeguarding Children training, launched by Camden & Islington NHS Foundation Trust and aligned with the intercollegiate framework, ensures consistent, evidence-based practice across the workforce. 	 CSCP has organised a workshop in September 2025 on young people suicide and self-harm which will consider learning from our recent serious incidents. Care experienced young people mental health and transitions multi-agency audit theme for 2025-26. 	



Mental health in the family

- **Practice Development:** The development of a multiagency Neglect Toolkit is actively incorporating the role of parental mental health in cases of child neglect. This tool aims to enhance early identification and intervention, promoting more holistic and preventative approaches to safeguarding.
- **Systemic Change:** The implementation of the I-THRIVE Framework across services reflects a whole-system, person-centred approach to mental health care. This model ensures that support is tailored to the needs of children, young people, and families, improving access, coordination, and outcomes across the care pathway.
- Multiagency working: Camden reports the lowest level of out-of-hours crisis service presentations within the ICB. This indicates strong effectiveness of care planning, timely access to clinicians during crises, and overall accessibility of CAMHS. These outcomes suggest that early intervention and ongoing support are successfully mitigating escalation and promoting stability.

Priority	Examples of impact and progress made in 2024-25	Challenges to overcome 2025-26
Re-engaging vulnerable children in education (including SEND)	 Strengthened Oversight and Accountability: The multiagency action plan developed following the 2023–24 audit of children electively home educated is under continuous review. This ensures that recommendations are actively implemented and that practice remains responsive to emerging needs and risks. Neglect Task and Finish Group: The partnership explored the links between educational neglect, school attendance, attainment, and young people's social connections and belonging. This informs the development of tools to support multiagency practitioners working with parents to encourage engagement in education. Improved Structural Integration: Taking forward learning from local safeguarding reviews, A recent structural change has brought the Children Missing Education (CME) and Elective Home Education (EHE) functions into a single team within Camden Learning. This integration has enhanced collaboration, enabling more cohesive responses to complex cases and improving the consistency of support for vulnerable children. 	 Plan for the implementation of a statutory children not in school register to ensure children's whereabouts are known. Utilising the improved data reporting available from View your education data (VYED) to identify children who may be absent from education. Development of CSCP Neglect Toolkit which promotes awareness of educational neglect. Strengthening early help support for schools through the development of locality-based family hubs and the piloting of a team around the school model.



Priority	Examples of impact and progress made in 2024-25	Challenges to overcome 2025-26
Re-engaging vulnerable children in education (including SEND)	 Enhanced Identification of Vulnerable Learners: Camden's voluntary EHE register has proven effective in identifying children with Education, Health and Care Plans (EHCPs) and those known to children's social care. The multiagency audit highlighted strong examples of coordinated responses to complex cases, demonstrating the value of shared intelligence and joint working. Proactive Risk Management: The introduction of vulnerability criteria into EHE tracking processes, alongside improvements to the school off-rolling notification form, has significantly strengthened the early identification of at-risk children. These measures ensure that children entering EHE are assessed for potential vulnerabilities from the outset, enabling timely intervention and support. SEND and Inclusion Service provided assurance that steps are being taken to improve inclusion and school engagement for children with SEND. The service acknowledged significant pressures, including rising numbers of children with SEND. Key developments over 2024-25 include targeted investments in school improvements, team expansion, neurodiversity support, more accessible Family Hub activities, streamlined referral pathways through integrated colocated services, and the co-produced development of a new toolkit to help schools meet predictable needs. 	 Develop an EBSA toolkit and promising practice guide for schools. Review and update local procedures and guidance. Continuing to co-design SEND services with parents to ensure they reflect lived experience and meet real needs. Recognising both the scale of financial and operational pressures and the overrepresentation of children with SEND in the safeguarding system, CSCP has kept SEND on the agenda to drive further improvements and accountability across the partnership.





6

Children and Families Contact Service

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6.1 Multiagency arrangements at the

Front Door

Scrutiny: Ofsted Children Services Inspection 2025: When children are referred into the multi-agency safeguarding hub (MASH), decision-making is timely and leads consistently to the right level of intervention. Skilled and confident social workers, supported by strong managerial oversight, gather information from many sources and evaluate historical information to determine appropriate next steps. Almost all children receive swift and decisive help to meet their needs and safeguard their welfare. Increased capacity in the EDT has meant that social workers in this service provide children with a highly effective and timely response out of office hours. This includes visiting children and holding child protection strategy meetings when needed.

Our lead safeguarding partners oversaw the publication of the new multiagency support and assessment guidance 2024 which has been revised to incorporate the work with children and families, based on the Children's Social Care National Framework to ensure we can achieve the following outcomes:

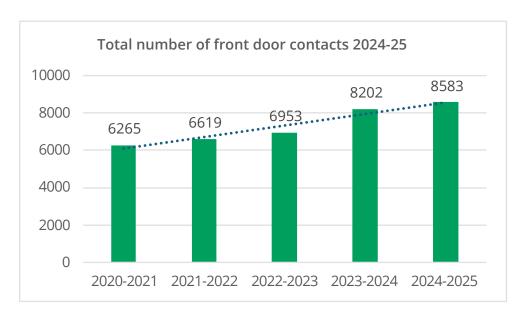
- children, young people and families stay together and get the help they need
- children and young people are supported by their family network
- children and young people are safe in and outside of their homes
- children in care and care leavers have stable, loving homes.

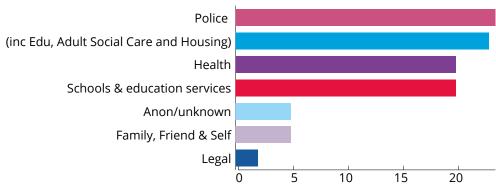
The guidance sets out the framework for all professionals to work collaboratively with good information sharing, joint assessment and integrated service delivery, with a designated lead professional coordinating the team response and acting as a central point of contact for the family and professionals.

Camden's Children and Families Contact Service (also known as the Front Door) is co-located with multi-agency partners and is responsible for making decisions on referrals and requests for services to ensure that children and families get the most suitable services and support depending on their level of need.



There were 8,583 contacts to the Children's front door in 2024-25. This is a 5% increase in contacts reported in 2023-24. This demonstrates an increasing trend over the previous five years for children and families who require additional support. Our lead safeguarding partners recognise that it is likely that the longer-term impact of the pandemic and wider societal factors such as the cost of living are attributing to the spike.





Impact: In keeping with previous years, the highest number of referrals received were by the Police at 25%. The second highest source of referrals, at 23% were from external and internal Local Authority services (a rise from 13% the previous year). Health ranked third at 20%, and Schools ranked fourth highest referral source, which mirrors the effectiveness of our lead safeguarding partner collaboration.'

Voice of the child

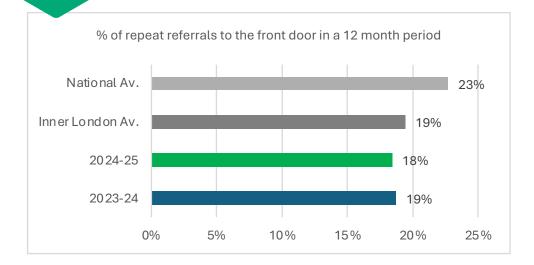
In keeping with the CSCP, mission statement: 'Working in partnership to keep all children and young people safe, thriving and heard within a community where safeguarding is a shared responsibility' referrals from family, friend and self are encouraged.

The Royal Free Hospital NHS Foundation Trust completed an audit of referrals to children's social care which noted a sustained 30% increase in 2024-25. This increase did not correlate with an overall increase in activity, indicating an increase in vulnerability and need in the community and a better awareness of safeguarding.

Seeking assurance: Following challenge from the CSCP in 2023-24, there has been a slight decrease (1%) in the repeat referral rate for 2024-25 as shown in the chart. Camden is in line with the amount of repeat referrals across inner London and below the national average.

To gain further assurance, an audit of repeat referrals in 2024-25 found that re-referrals were due to the same or similar concerns. This indicates possible chronic issues making re-referral likely, in all cases closure decisions were justified and risks clearly recorded. The findings from this audit evidence that cases are closed appropriately and children are not placed at increased risk.





6.2 Early Help

Scrutiny: Ofsted Children Services Inspection 2025: Highly effective early help services are ensuring that children and their families get the right help at the right time. Thorough early help assessments lead to bespoke plans with a wide range of multi-agency interventions for families and individuals. Work is informed by the voices of children, parents and wider family. Family group conferences are used early and throughout the child's journey, enabling families to use existing strengths to solve problems. This prompt and skilfully delivered early help is demonstrably improving children's circumstances and preventing many families from needing statutory interventions. The minority of children whose circumstances do not improve are appropriately stepped up for statutory assessments.

There continues to be a high demand for early help services which is in tandem with the recognised national demand. There were 2131 contacts progressed to the Early Help team in 2024-25. In line with Camden's vision of a "place where everyone has a chance to succeed and nobody gets left behind", Camden's safeguarding arrangements have enabled significant investment in early intervention and prevention which is embedded within community services through our 'Family Hubs'.

Impact: In keeping with previous years, the highest number of referrals received were by the Police at 25%. The second highest source of referrals, at 23% were from external and internal Local Authority services (a rise from 13% the previous year). Health ranked third at 20%, and Schools ranked fourth highest referral source, which mirrors the effectiveness of our lead safeguarding partner collaboration. Almost all children receive swift and decisive help to meet their needs and safeguard their welfare. Increased capacity in the EDT has meant that social workers in this service provide children with a highly effective and timely response out of office hours. This includes visiting children and holding child protection strategy meetings when needed.practice.

Voice of the child

Our focus on building relationships with families leads to positive feedback which highlights where services are making a difference. Our Early Help service seeks feedback from families and across 2023-24, 86% of families said that their worker was helping them to make progress toward their goals. Within Early Years Family Support 100% of families who fed back agreed that their support worker knew how to help them and helped them access other services.

Impact: Our safeguarding arrangements allow use of data and effective partnership working to target identification and support at the earliest opportunity, this has included an Information, Advice and Guidance (IAG) surgery pilot in schools which has increased schools' knowledge and confidence in responding to family's needs and reducing the need for referrals.

In June 2024, CNWL hosted a joint Safeguarding Children and Adults Conference under the theme "Challenging Stigma in Safeguarding: A Think Family Approach." The event covered a wide range of pressing topics, including the impact of gang involvement on families, gaming and gambling harms, homelessness, and learning from domestic abuse related reviews. The conference was well attended by both CNWL staff and external partner agencies, with overwhelmingly positive feedback from participants.



6.3 Effectiveness of the Multi-Agency Safeguarding Hub (MASH)

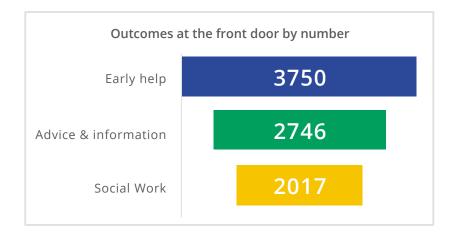
Outcome of front door contacts

In 2024-25, the most prevalent presenting factors to the front door following assessment relate to:

- domestic violence parent/carer (32%)
- parental mental health (26%)
- domestic violence child subject (20%)
- and child mental health (16%).

Although there has been an overall increase in the number of contacts to the front door, the outcome following contact has proportionally remained similar.

The graph shows that in 2024-25, 23.5% of contacts to the front door resulted in referrals to children's social care (2,017).



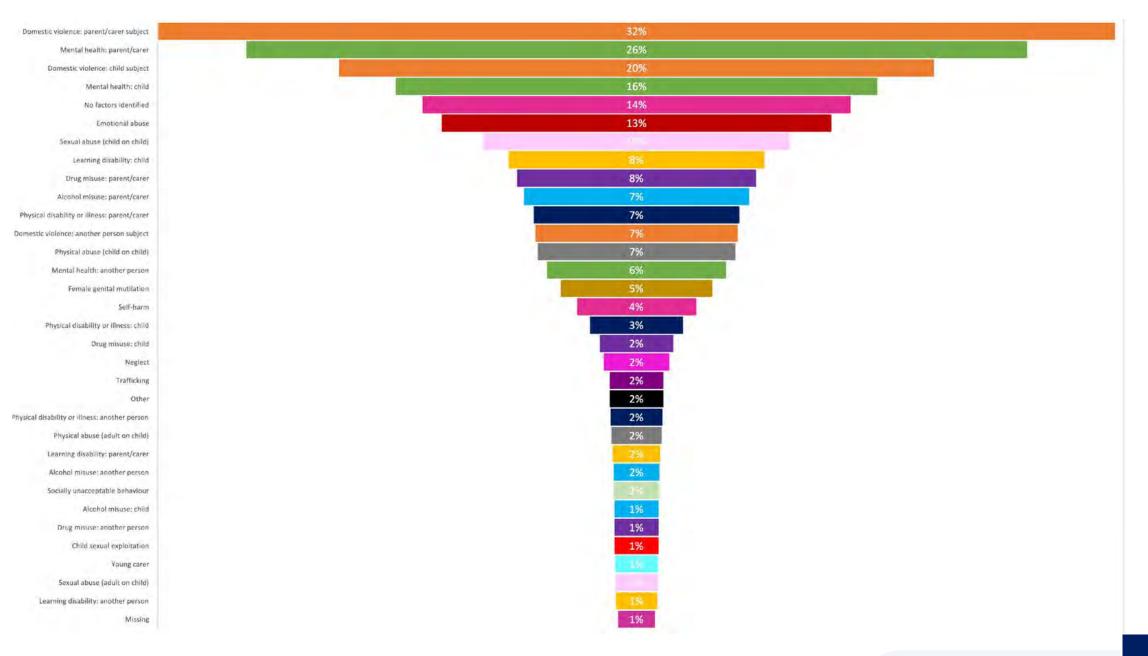
The multiple vulnerabilities recognised in social care assessments as shown in the graph below, which was used by the CSCP to seek assurance about the effectiveness of the multi-agency system's response to safeguarding concerns, in the following areas:

- Domestic violence and mental health issues among parents or carers are the most frequently identified concerns in child-related cases, highlighting the significant impact of the home environment on child welfare. Children themselves are also affected by domestic violence and mental health challenges, indicating a dual layer of vulnerability.
- The Domestic Abuse Act 2021 recognises the long lasting impact that
 domestic abuse can have on children and specifically provides that a
 child, (under 18 years old), who sees, hears, or experiences the effects of
 domestic abuse and is related to the victim or the suspect is also
 to be regarded as a victim of domestic abuse. Impact of CSCP training
 of this change could be a factor contributing to the increase in domestic
 violence child subject risk factor identified during assessment in 2024-25.
- Emotional and sexual abuse, including peer-on-peer abuse, are notable issues, reflecting the complexity of safeguarding needs.
 Learning disabilities and substance misuse, particularly among parents or carers, are also common contributing factors.
- Although less frequently reported, serious concerns such as female genital mutilation, self-harm, and various forms of exploitation have been highlighted with partners to ensure improved early identification and intervention where possible.

Impact: To improve information sharing and safeguarding within the community, Phase 2 of Child Protection Information Sharing (CP-IS) implementation has begun in CNWL which includes the implementation of CP-IS to 0-19 services, Community Paediatricians, Dentistry and CAMHS. Identified services have been mapped, and implementation will continue in 2025-26. A quarterly meeting is now in place between the named nurse for the Royal Free Hospital Trust, the MASH service lead and senior social workers, the London Ambulance service and the named professional for UCLH which has improved working relationships and enabled discussion of services developments, issues and positive practice.



Child and Family Assessment - Identified Vulnerability Factors





Key areas of safeguarding assurance



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7.1 Child in Need and Child Protection

Child in need (CIN)

The refreshed CSCP <u>Children in Need (CIN) guidance 2024</u> sets out a framework for local multi-agency joint working and service delivery. In response to **national reforms**, the CSCP has sought assurance that the local changes proposed lead to children receiving timely and effective support, and that multi-agency services are working in a coordinated and integrated manner.

Scrutiny: Ensuring the timely identification of need and support to vulnerable families is an area scrutinised by the CSCP. In 2024-25, 64% of initial visits for CIN referrals were carried out within 10 working days. The CSCP will seek assurance on social work plans in place to address this as this is an area noted for identified improvement.

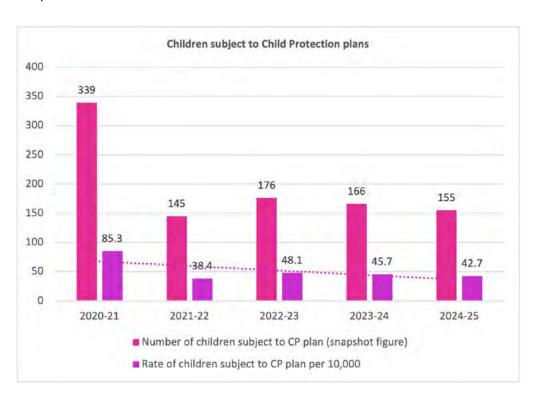
Voice of the child

In recognition of the importance of practitioners seeing children alone 77% of CIN had an up-to-date visit recorded at the end of March 2025. This will continue to be an area for scrutiny by statutory safeguarding partners and will be part of an ongoing action plan to address performance which is monitored weekly.

Ofsted inspection of Camden children services 2025: Children benefit from strong, lasting relationships with their social workers. Carefully managed caseloads mean that social workers have the time to undertake and thoroughly record creative direct work with children, enabling them to really get to know children and elicit their views. Children's voices and opinions are valued and given weight in the work undertaken and the plans made for them. Visits to children and their families are purposeful, with care taken to address concerns and to promote positive relationships. Work with families is curious about cultural difference, identity, disadvantage and unique strengths, with time taken to understand what this means for children and their

Child protection

In 2024-25, 43% of referrals to children's social care resulted in a Section 47 child enquiry to assess if the child is suffering significant harm. At the end of 2024-25, there were a total of 155 children subject to a child protection plan which shows a continuous decline from the spike in 2020-21 (339). Nationally, the number of children on Child Protection Plans (CPPs) and Children in Need has remained consistently high, with case complexity increasing. Camden's trend mirrors national patterns in terms of a pandemic-related spike and complexity, however, we have seen a gradual decline, with proactive multiagency approach taken to review and adjust CP plans.

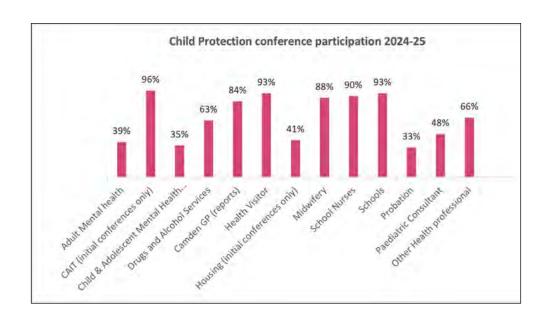




Scrutiny - Inspection of Camden children services 2025: When child protection strategy meetings are needed, these are well attended by partner agencies. Subsequent child protection investigations are timely, with appropriate outcomes and plans which support a thorough, coordinated response for children at risk of harm.

Area of mutual challenge: The commitment of the partnership is evidenced in the range of multi-agency partner contribution to child protection conferences, which is scrutinised at CSCP meetings with any dips in performance reviewed with individual agency leads. As **national reforms promote multidisciplinary child protection teams**, there is a renewed focus on developing a holistic understanding of the child's lived experience and the family's vulnerability factors. Camden's partnership will maintain close oversight of how this approach evolves within the pilot test site, ensuring continuity of engagement and effectiveness.

Impact: Camden's Relational Practice Framework and Working with Parents principles support this transition by promoting community-based, multidisciplinary child protection meetings. Further efforts are being made to enhance family engagement in child protection processes by improving the tone and accessibility of invitation letters, gathering more feedback from families on their experiences, and exploring the use of community venues to create more inclusive and supportive environments for conferences. A test-and-learn approach will be adopted in recognition of the potential challenges this shift may pose for Health and Police partners, whose safeguarding responsibilities extend across broader regional areas.

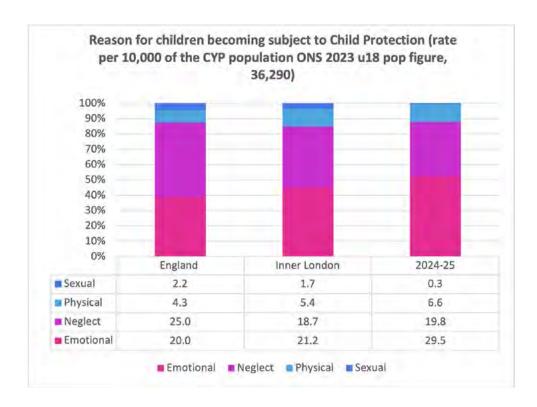


Scrutiny - Ofsted inspection of Camden children services 2025: Child protection conferences include all relevant professionals, who consider risks carefully and provide a proportionate response to concerns. Children's plans address their needs and are mostly written well. Regular core group meetings help workers ensure a joined-up approach that progresses children's plans. Most children make tangible progress through well-thought-out actions.





The chart depicts the reasons for children becoming subject to child protection plans. The most common reason in 2024-25 relates to emotional abuse followed by neglect, physical abuse and sexual abuse. This year has seen a shift from neglect being the largest category.



Scrutiny: There has been a noted decrease in the rate of children becoming subject to CP for sexual abuse which locally is lower than both inner London and National statistics. Our lead safeguarding partners will seek further assurance from our partners on their response to identifying CSA. Further analysis takes place in section 7.7.

7.2 Engaging families in safeguarding

Scrutiny: Ofsted inspection of Camden children services 2025: Social workers consistently focus on helping children celebrate their uniqueness and they recognise the importance of engaging families. Direct work includes cultural genograms devised at family events. The use of a digital platform for collating photos, videos and cards is helping to capture memories and adds to stories for later life. It is a strength that children and parents contribute to this directly.

Our partnership recognises the importance of ensuring that the voices of children and their families are integral to our safeguarding arrangements. Camden lead on the Local Authorities that form Listen Circle, a national forum to develop and share learning on participation, co-design and inclusive practice which now has over 30 local authorities taking part in a regular conversation.

Family Group Conferences (FGCs)

Family Group Conferences (FGCs) have become a cornerstone of relational safeguarding. FGCs are empowering tools that involve the extended family and significant others in the decision-making process, ensuring that the individual's voice is central, and their support network is actively engaged. This collaborative approach promotes the creation of sustainable and effective safeguarding plans by leveraging the strengths and resources of the family and community. The was a total of 260 referrals to the FGC service in 2024-25.



Click here for booklet



Scrutiny: Ofsted inspection of Camden children services 2025: Family group conferences are used early and throughout the child's journey, enabling families to use existing strengths to solve problems. This prompt and skilfully delivered early help is demonstrably improving children's circumstances and preventing many families from needing statutory interventions. The minority of children whose circumstances do not improve are appropriately stepped up for statutory assessments.

Parental Peer Advocacy

Parental Peer Advocacy in Camden (PPA) is an approach where people with lived experience of a particular issue provide support and guidance to others who are facing similar challenges. Impact of this service results in parents feeling heard, understood, and empowered, leading to more positive outcomes for families.

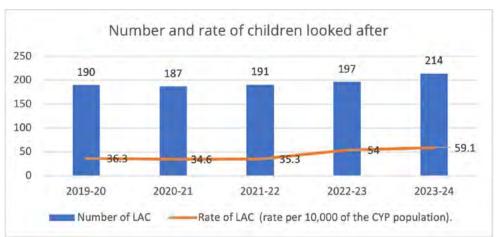
Voice of the child

Ofsted inspection of Camden children services 2025: Coproduction runs through every service, strategy and work stream, with children, young people, parents and experts by experience providing feedback and influencing service development. Children feel a part of solutions and Camden has embraced the unique, exciting perspectives, energy and opportunities that their voices bring.

7.3 Children looked after

The introduction of the new Children's Wellbeing and Schools Bill marks a significant shift in how we support children in care. For the first time, corporate parenting responsibilities are being extended beyond local authorities to include a wide range of public bodies and government departments across England. In response to this important change, the CSCP has worked with partners to engage and agree a joint Children Looked After Strategy. This strategy has been written directly to the children, in language that is accessible and meaningful to them. It reflects Camden's partnership commitment to Corporate Parenting. In recognition that children who have been in care often face greater challenges than their peers, including higher risks of poor mental health and shorter life expectancy.

Data: There has been a slight decrease in children becoming looked after in 2024-25 compared to previous years (214 children). 61% of children coming into the care of the Local Authority were aged 13 years and above.







Scrutiny: Ofsted Camden children services inspection 2025:
Children in care readily access a range of specialist support, as staff from many partner agencies are co-located in the service. These include housing support, the virtual school and mental health support. Health assessments and support for children in care are coordinated effectively and key tasks are performed well, including discharge summaries for all children leaving care, regardless of their age. Almost all children are up to date with routine medical appointments and reviews. When they are not, workers know why not, and they can clearly articulate what is being done to encourage the child to attend health reviews and appointments with dentists and opticians. Children's emotional and mental health needs are closely monitored and are addressed well. A myriad of commissioned services expedite the right support for children when they need it.

Voice of the child

Listening, hearing, and taking account of children and young people views shapes every element of our work, and enables us to understand their lived experience, and their experience of the safeguarding system. 100% of children looked after contributed to their reviews in 2024-25.

Impact: The partnership sought assurance on the number of children looked after with an up-to-date statutory visit in acknowledgement of the important role practitioners play in the lives of these vulnerable children. Successfully, 93% of visits in 2024-25 were completed within timescales.

Ofsted Camden children services inspection 2025:
Independent reviewing officers (IROs) write to children sensitively to explain decisions about their lives and to celebrate their successes. The child's voice is consistently heard and acted upon. IROs are championing things that are important to each individual child. Most children benefit from well-planned support that helps them achieve better outcomes in their lives.

Voice of the child

Ofsted Camden children services inspection 2025: Independent reviewing officers (IROs) write to children sensitively to explain decisions about their lives and to celebrate their successes. The child's voice is consistently heard and acted upon. IROs are championing things that are important to each individual child. Most children benefit from well-planned support that helps them achieve better outcomes in their lives.

Impact: Impact of our collaborative multi-agency approach to ensuring the health and wellbeing of children looked after is evidenced in 89% of children looked after receiving an up-to-date health and dental check and 78% of children looked after aged under 5 who have received an up-to-date development check for those who have been looked after for at least a year.

The CSCP has sought assurance that children and young people are supported to maintain local connections where safe to do so. 85% of children looked after were placed within 20 miles of their home address and most of our children are in foster care within Camden. Partners have focused attention on moving young people who have been placed out of borough, especially in less diverse areas back into Camden, prioritising those who are isolated and /or experiencing mental health difficulties.

Scrutiny: In line with the rest of the country, a small number of children with complex needs may experience several placement moves before a permanent placement is found for them. The Lead Safeguarding Partners noted a slight reduction in the proportion of children looked after with 3 or more placements in the previous 12 months from 13.5% in 2023-24 to 10% this year. As a partnership, we understand the complexities often the adolescent cohort can present but as a collective, there needs to remain focus on ensuring that the right help is provided at the right time.



Voice of the child

New to 2024-25 includes Camden Local Authority offering paid internships specifically for care experienced young people, aiming to provide meaningful work experience and personal development opportunities. Interns work in a supportive environment with mentoring and supervision and the programme is designed to help young people build confidence, gain skills, and explore career paths within public service.



The data highlights a persistent and troubling pattern of ethnic disproportionality in Camden's child protection system. It reveals that children from Black, Mixed, and Asian backgrounds are consistently overrepresented at various stages of intervention, while White children are significantly underrepresented.

Black children face the most pronounced disproportionality. Despite making up only 9% of the child population (2011 Census), they account for:

- 28% of Section 47 enquiries,
- 26% of Initial Child Protection Conferences (ICPCs),
- and a staggering 43% of children looked after (CLA) at the end of the year.

This trajectory suggests a systemic pattern where Black children are more likely to be escalated through the most intrusive stages of intervention. The CSCP is curious to understand and respond to the potential biases in decision-making, structural inequalities, or a lack of culturally responsive early support.

White Children: Underrepresentation Across the Board

White children, who represent **60%** of the population, are consistently underrepresented at every stage, with only **30%** at referral and even lower percentages at subsequent stages. This raises critical questions about differential thresholds for intervention, and whether the system is inadvertently applying lower scrutiny or different standards for White families.

Mixed Heritage Children: Consistent Overrepresentation

Children of Mixed heritage are also overrepresented, though to a lesser extent than Black children. Their representation peaks at the referral and assessment stages (18%) and slightly declines by the time they reach CLA (15%). This pattern may reflect complex identity dynamics, intersectional vulnerabilities, or inconsistent responses from services.

Asian Children: Early Overrepresentation, Later Drop-off

Asian children are overrepresented in the early stages (referrals, assessments), but this trend does not continue into the child protection or CLA stages. This could suggest that initial concerns are not substantiated, or that cultural misunderstandings may be influencing early referrals without leading to sustained intervention.

Development: This data demands a critical reflection on how ethnicity intersects with child protection processes. It raises urgent questions:

- Are thresholds for intervention applied equitably?
- How are cultural contexts understood and respected in assessments?
- What role do systemic biases play in decision-making?

The CSCP needs to commit to **anti-racist practice**, **data-informed scrutiny**, and **community engagement** to address these disparities.



7.4 Unaccompanied asylum-seeking children (UASC)

Unaccompanied asylum-seeking children (UASC) (inc former UASC) make up 17% of the children looked after cohort. Camden has appointed a specialist UASC lead to continue to improve our knowledge and skills in working with UASC and to ensure that age assessments are completed in a timely way.

Scrutiny: Ofsted Camden children services inspection 2025:
UAS children in Camden receive exceptional support. The prevalence and availability of skilled support embedded within the children in care and care experienced service is an important factor in helping these children recover from the trauma they have experienced. A persistent focus on access to appropriate legal representation, and on liaison with the Home Office to progress immigration status, helps to reduce children's anxieties.

Impact: Of our collaborative multi-agency approach to ensuring the health and wellbeing of children looked after is evidenced in 89% of children looked after receiving an up-to-date health and dental check and 78% of children looked after aged under 5 who have received an up-to-date development check for those who have been looked after for at least a year.

Impact: As a partnership, a cycle of continuous learning is embedded into our multiagency learning and improvement framework. In 2023-25, two serious incident notifications were submitted in relation to young adults who tragically committed suicide, one young adult was a former UASC and the other young adult had previous care experience. When reviewing a serious safeguarding incident, we remain open and reflective to foster a culture of learning.

The following overarching themes from both these tragic events were considered as part of a multiagency conference in September 2024:

- The idea of using intersectionality to inform and enhance our understanding of the experience of the child/young adult.
- The concept of transitional safeguarding with care-experience people helping us to understand the person's development and our response.
- Helping practitioners to consider how we work with the refusal or non-acceptance of help.
- How we develop our practice working with the child or young adult who is suicidal

As a result of this conference, the following commitments have been made by frontline practitioners to consider in their work with children and young people who are care experienced:

Working with young people showing non-acceptance to help:	Supporting young people through their transition to adulthood:	Working with a child or young adult who is suicidal:	Considering intersectionality in our practice:
Asking young people directly of their thoughts on what would help them, what their interests are and thinking about the best place to hold these conversations.	Work and plan with adult services prior to the child turning 18 years of age. This could include identifying a lead professional in adult services. Sharing information with professionals to create an understand of duty of care and establishing a safety plan.		To encourage reflection of intersectionality through embedding social GGRRAAAACCEESSSS.
Provide a consistent approach by creating a dynamic where the 'door is open' for a young person if they change their mind	Provide advocacy for young people and professionals having a greater awareness of the local offer.	Use lifelong links creatively to build support networks.	Use reflective supervision as a tool to understand family dynamic.
Explain clearly about confidentiality and be mindful of language used and what impact this has on the young person.	Identification of a Personal Advisor to build relationships with young people prior to them turning 18 years of age.	Provide stability where possible including professional support, housing, finance and education/ employment.	Create safe spaces for young people to share their stories without judgment and recognise that different aspects of their identity may influence how they experience care.
Be open, curious and build trusting relationships. This includes understanding the needs of the child/young person and being prepared for meetings.	Ensuring that there is mental health support available for every care experienced young person during their transition through the integrated CAMHS offer.	Create increased training opportunities to openly speak about suicide and how to respond.	Having open conversations with families about UK law and their experiences.



Impact: Lead Safeguarding Partners have contributed to scrutiny of the Camden's Corporate Parenting Strategy which highlights Unaccompanied and separated children and young people as a priority cohort. Examples of this support include:

- Providing placements that reflect the cultural background of the child and ensuring that they have interpreters when needed to feel understood and supported. Where it is not possible to provide a cultural match, the service will work with carers to understand cultural needs and help children maintain their identity.
- The service will train foster carers, social workers, and other professionals to understand the unique needs of this cohort and how trauma may have affected them.
- Continuing to work with national partners to push for faster and more transparent immigration processes, reducing the uncertainty that can cause extra stress.
- Expand the health and wellbeing offer in a way that is tailored to the specific needs of this cohort.
- Ensuring that children and young people (up to 25) can access interpreters and interpret information on our digital media platforms through applications like Pocket PA and Mind of My Own.
- Continued joint working between adult social care to create stronger working relationships, providing smoother transitions for those needing continuing support as they transition to adulthood.

Further details of our collaborative approach to supporting families seeking asylum is detailed in section 7.17.

7.5 Care leavers

Camden's motion to treat care experience as a protected characteristic was passed in January 2024 which means that those care experienced in Camden will be treated as if it were a protected characteristic, such as race or gender. There are 350 young people aged 18+ allocated to children looked after & care leavers service at the end of 2024-25. To ensure that our care experienced young people do not experience a 'cliff edge' at the age of 18 years, our Personal Advisors work with young people for extended periods of time and have routinely continued to support them up to the age of 25. Data indicates that care experienced young people are likely to start families younger. Therefore, this cohort are supported to develop relationships and parenting skills by drawing on support from early help, family hubs and providing programmes to allow a different chance to parenting.

Scrutiny: Ofsted Camden children services inspection 2025:
The progress and experiences of care leavers are outstanding.
Practice by social workers and personal advisers (PAs) is consistently strong and often exceptional. This is resulting in sustained improvement in care experienced young people's lives.

Learning from Rapid Reviews

WT2023 guidance clarifies that serious incident notifications should be made for any safeguarding issues for care leavers up to the age of 25 yrs. In May 2024, the lead safeguarding partners jointly agreed to submit a notification for a care experienced young person, who tragically died by suicide aged 18 years old whilst residing at an out of London secure mental health inpatient unit. A full rapid review took place to understand the experiences of this young adult, immediate response following the death by the network and identify areas of future learning. The following themes were noted as emerging areas of learning for practitioners to further develop practice with their work with care experienced young people:



- 1. Identity and Bias The Impact of Racism and Adultification The review highlights how racism and adultification bias shaped the way Black children and young people were perceived and treated. Instead of being seen as vulnerable, they were viewed through a lens of suspicion and maturity beyond their years. This led to harsher responses from the justice system and a failure to recognise their need for protection and support.
- **2. Mental Health and Criminalisation** Repeated forensic psychiatric assessments linked to criminal justice involvement had a damaging effect on mental health. These assessments contributed to a negative self-image, increased emotional distress, and episodes of self-harmshowing how criminalisation can deepen trauma rather than resolve it.
- **3. Placement Instability and Lack of Specialist Support –** Multiple placement changes can be an indicator of lack of sustainable and suitable care. The review points to a shortage of specialist secure provision for children with complex mental health needs, particularly for Black children, which undermines continuity of care and emotional safety.
- **4. Systemic Delays and Immigration Uncertainty –** Delays in the Home Office asylum process and the National Referral Mechanism (NRM) created prolonged uncertainty around immigration status, and young person's right to protection as a victim of modern slavery. These delays can have a serious impact on mental wellbeing, and feelings of instability and fear.

Young Inspectors project 2024

The Young Inspectors programme of inspections has been providing input to service planning and development in Camden for the past fifteen years. The approach of the Camden Young Inspectors is to listen to those with lived experiences of the services. The focus of the inspection for 2024 was on Virtual School for Children Looked After and previously Looked After Children.

Voice of the child

The young inspectors held focus group discussions with young people to learn about their experience, interviewed and held discussions with the Virtual School members of staff and researched publications relating to promoting the education outcomes of children in care.

The young inspectors made the following recommendations for the Virtual School to consider:

- 1. Social worker to discuss Personal Education Planning prior to the meeting to encourage young peoples attendance.
- 2. To use accessible language, limited use of acronyms and ensuring that an interpreter is available where necessary.
- 3. Professionals to attend Personal Education Planning meetings in person.
- 4. Virtual School to deliver training programme for foster carers to ensure that they are confident to navigate the education system.
- 5. Virtual School to provide more intensive preparation time and support with young people and education providers at key transition points.
- 6. The Virtual School to co-design resources with young people and Personal Advisors about higher education and degree apprenticeships.

Progress made on the above recommendations will be an area of scrutiny for Lead safeguarding partners in 2025-26.



7.6 Neglect

The CSCP recognises that neglect is pervasive, and its effects can have long-term consequences for the child's development and outcomes; but it can be the most difficult form of child abuse to recognise. In 2024-25, 7.2% of contacts to the children and family contact service identified neglect as a presenting issue, this increased to 12% of cases identifying neglect as a risk factor during assessment. The increase of identification following assessment evidences that practitioners are well trained with the skills and tools available to better identify children at risk of neglect. The chart shows the trends across the previous five years.

Locally, neglect makes up the second largest standalone proportion of children (19.8, rate per 10,000 of the CYP population) becoming subject of a child protection plan which is higher than the inner London average (18.7) but lower than the national average (25).

Quote from CSCP Young Advisor.

Impact: Over 2024-25 the partnership has held a multiagency task and finish group focusing on child neglect. A thorough review of existing neglect toolkits was trialled within various teams across early years – to adolescents. The family hubs have shaped this practice by using 'Day in the life of a baby' and 'Day in the life of a teenager' which has shaped work with families. A bespoke neglect toolkit is being developed and trialled over 2025-26 to support practitioners in the early identification and assessment of neglect and in recognising the impact of the cumulative harm caused by neglectful experiences on children and young people. Use of the toolkit should facilitate access to appropriate support and interventions. The toolkit is intended to be used for children and young people at all stages, from pre-birth, pre-school and school ages through to adolescents aged up to 18 years and 25 years for those that are care experienced or have disabilities. This tool can be used by all those working with children and their families across different agencies.

Poverty Aware Practice – As part of the working group, partners have begun to embed poverty-aware practice in addressing child neglect. This approach recognises the profound influence of socio-economic factors on family life and acknowledges that poverty can heighten stress and restrict access to essential resources. By adopting a poverty-aware lens, professionals are better equipped to offer compassionate, culturally sensitive, and effective support to families. It also highlights how deprivation and ethnicity can shape the identification and understanding of neglect. Practitioners are encouraged to work collaboratively with families to develop sustainable solutions and connect them with accessible resources that empower and enable positive change.

Conversely, the Task and Finish Group has worked closely with partners to explore how **affluent neglect** may manifest within our local context. Recognising the diverse socio-economic backgrounds across the borough, this work acknowledges that neglect is not confined to families facing financial hardship. Affluent neglect refers to situations where children in high-income households experience unmet emotional, psychological, or developmental needs despite material wealth. Through this collaborative effort, the toolkit provides practitioners with practical resources to identify, respond to, and support children in affluent families who may be experiencing neglect.

In recognition of **medical neglect**, UCLH developed a new policy, "Was Not Brought" in September 2024. A shift in language from "Did Not Attend" to "Was Not Brought" is now highlighted in the level 3 children's safeguarding training and encouraged throughout the Trust when talking about missed appointments for children, in recognition that when a children or young person are not brought to an appointment, the accountability for this often remains with the parent or guardian they are residing with rather than the child. The impact of the policy was explored through a Was Not brought audit to better understand why children may not be brought to appointments.



Educational neglect is considered in section 7.10-12 which outlines work with schools via Camden Learning and school representatives in the CSCP. It refers to a caregiver's failure to ensure a child receives appropriate learning opportunities, including access to school, support for attendance, and engagement with their educational development. Training sessions and discussions have considered indicators of educational neglect and its impact on academic attainment, social connectedness, sense of belonging, and long-term outcomes, highlighting the importance of ongoing attention to this issue.

Impact: The CSCP continues to deliver multi-agency training on Developing knowledge on emotional abuse and neglect. Impact of the training is evidenced in 100% of those who participated in the training agreed that it helped them feel more confident to recognise and respond to safeguarding concerns.

Impact: An audit was conducted on children who had received multiple safeguarding referrals from UCLH to the local authority, focusing on the impact of cumulative harm (the build-up of adverse experiences). One key recommendation was to introduce a smartphrase in Epic, enabling children, young people and maternity safeguarding team members to clearly highlight concerns about cumulative harm in safeguarding referrals.

7.7 Child sexual abuse (CSA)

In response to insights from new research and evidence from **the Independent Inquiry into Child Sexual Abuse**, we are developing our CSA multi-agency guidance and strategy. Key considerations into its multi-agency safeguarding policy and training. These elements have also been embedded into multi-agency training delivered by local experts at The Lighthouse. Key themes include:

Implementation of the Relational Practice framework: Shaping a more trauma-informed and context-aware response.

- **Clarifying definitions:** Understanding child-on-child abuse within the context of harmful sexual behaviour, while treating adult-perpetrated CSA as a distinct safeguarding concern.
- CSA as a spectrum: Recognising that CSA should not be viewed through a binary lens, but as an umbrella encompassing a range of interconnected risks influenced by unmet needs, trauma, and complex social contexts.
- Variability in harm and risk: Understanding that both the nature of abuse and the level of risk posed by those who cause harm can vary significantly.
- **CSA as an Adverse Childhood Experience (ACE):** Acknowledging its long-term impact and the need for trauma-informed approaches.
- **Distinguishing types of harm:** Differentiating between adult-perpetrated CSA and harmful sexual behaviour among children, often rooted in their own experiences of abuse.
- **Overlapping vulnerabilities:** Considering the multiple risks that increase a child's susceptibility to both harmful sexual behaviour and child sexual exploitation.

Locally, our Lead Safeguarding Partners have sought assurance on our local response to the: National review into child sexual abuse within the family environment - GOV.UK, through a multiagency action plan. We have modelled our 5-pillar approach for prevent, identify, support, disrupt & prosecute to measure impact and progress made in relation to the national recommendations:





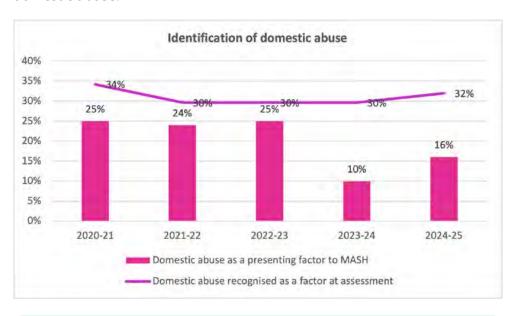
Scrutiny: The Partnership is aware that the following areas require further focus and progression over 2025-27:

- Multi-agency professionals recognise that online abuse can create pathways for grooming and manipulation. Early signs of abuse may appear undetected across digital platforms and therefore better understanding of the implications of online abuse is required to support children and young people.
- Multi-agency professionals acknowledge the over-representation of Black and Black British children in safeguarding systems and work collaboratively to address this through data-led analysis, anti-racist practice, culturally responsive interventions, and strong community partnerships that centre the voices of families.
- Multi-agency partners are increasingly reflecting on the underrepresentation of identification of boys experiencing child sexual abuse, recognising that unconscious gender bias may influence professionals' perceptions of risk and vulnerability, and are working to challenge assumptions through training, reflective practice, and more inclusive identification frameworks.
- Confidence to challenge partner agencies by fostering a culture of curiosity, underpinned by shared accountability, reflective supervision, and a commitment to safeguarding and promoting the welfare of children and young people.

7.8 Domestic abuse

Scrutiny: Ofsted Camden children services inspection 2025: Children and families who experience domestic abuse receive a tailored and comprehensive response from workers across Camden. A very good understanding of domestic abuse and a commitment to cross-council and crosspartnership responses help to ensure that support is mobilised quickly. Practitioners understand the complexity involved in working alongside both perpetrators and victims. They take the time needed to establish a clear picture of the abuse and to assess the associated risks.'

As previously described in section 6, following analysis of front door presenting issues, the most prevalent assessment factor identified in 2024-25 relates to domestic violence parent/carer (32%) and domestic violence child subject (20%). In recognition of the Domestic Abuse Act 2021, a child who sees, hears, or experiences the effects of domestic abuse and is related to the victim or the suspect is also to be regarded as a victim of domestic abuse.



Impact: The chart depicts the level of referrals made to MASH due to parental domestic abuse concerns in contrast to the increasing number of assessments which identify parental domestic abuse as an issue. This evidences the effectiveness of assessments when identifying additional safeguarding concerns which were not previously raised during initial contact.

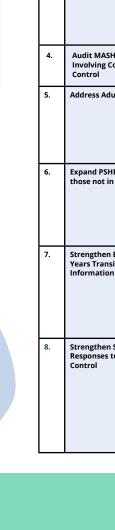
Key areas of safeguarding assurance



There has been a 96% increase in the number of domestic violence cases discussed at MARAC where there is a child in the household from 237 to 464 in 2024-25. This multi-agency approach allows for holistic safety planning ensuring that both victim and children in the household are safeguarded.

Impact: Operation Encompass continues to be embedded in 85% of Camden schools which allows information sharing between Police and Education when a domestic abuse incident has been reported to the Police and there are children in the household. In 2024-25, 132 notifications were made in relation to Camden families. New to 2025-26 includes notifications being made for all domestic abuse incidents even if the child is not present at the time.

In May 2023, a serious incident notification was submitted to the National Panel in relation to a serious domestic abuse case. Although, this did not progress to a full LCSPR, a crossboard Safeguarding Incident Domestic Abuse Review (SIDAR). The below provides an overview of progress made against the recommendations and key areas in development in Camden to strengthen our approach to violence against women and girls:



	Recommendation:	Evidence of progress and impact:
1.	Equip multiagency staff to address multiple disadvantages	Police's Children's Strategy and Camden Council's equality action plans have been established across key frontline services. Anti-racist practice and diverse governance promoted in schools by Camden Learning "Safer Together" training shows improved practitioner responses through audits—greater focus on perpetrators, survivor safety, and child impact.
2.	Embed Social GRACES in Practice and Supervision across the partnership	GRACES integrated into supervision templates and joint supervision models. Annual anti-racism workshops and global majority leader's network within Camden schools. Multiagency audit in 2025 will assess GRACES impact. As part of social care reforms, there is a proposal for domestic abuse worker to be based within family help service. Research in Practice workshop supported whole-family approaches in domestic abuse cases.
3.	Develop a Joint Domestic Abuse Strategy	Violence Against Women and Girls (VAWG) Strategy will be launched in early 2026. Updated CSCP Domestic Abuse guidance reflects DA Act 2021 and adolescent abuse and shared via CSCP lunch and learn sessions. Training and learning events delivered; new VAWG service and survivor group established. Next Steps: Child-on-parent violence and cyber stalking/abuse included in future training and service development.
4.	Audit MASH Referrals Involving Coercion and Control	MASH dip-sample audit confirmed appropriate thresholds and timely responses. Identified need to strengthen focus in MASH on post-separation abuse. Next Steps: Assurance sought on police investigation effectiveness.
5.	Address Adultification Bias	Multi-agency and mandatory training delivered across services, raising awareness of how bias affects responses to children, especially Black and global majority youth. MPS and Local Authority embedding learning into frontline practice. A new perpetrator team will support young people as both victims and perpetrators, with a focus on coercive control in young relationships in 2025–26. Next Steps: Embed learning into supervision and decision-making. Audit impact on thresholds and language used in practice.
6.	Expand PSHE access for those not in education	Healthy relationships delivered as part of a comprehensive PSHE programme in schools. Whisper me happy ever after commissioned for primary and secondary school. PSHE resources are available on Local Authority website and the Families website: Healthy relationships: Building stronger families - Camden Council. Next Steps: TIPIC training will be delivered to VCS organisations to reach young people at risk of serious youth violence. Extend PSHE delivery to youth hubs, family hubs, and NEET young people to ensure wider reach and consistent messaging.
7.	Strengthen Early Years Transitions and Information Sharing	Multi-agency workshop delivered; Operation Encompass embedded in state schools. TIPIC training extended to early years settings. Early years services updated transition processes to include social care history, improving communication between nurseries, schools, and families. SEND transition meetings ensure tailored support for individual children through improved dialogue between Key Worker and New Class Teacher. Next Steps: Extend these practices consistently to private and independent nurseries to ensure all children benefit from smooth, well-informed transitions.
8.	Strengthen School Responses to Coercive Control	Camden Safety Net (CSN) presented at the DSL Forum sharing referral routes and support services available to those experiencing domestic abuse. Tender commissioned in schools to complete work around domestic abuse. Shift to Family Help models will enable greater support for schools and families once statutory involvement has ended. Hopscotch have completed a pilot within a Camden secondary school on positive masculinity. VAWG will be leading on a half-day seminar in schools focusing on positive masculinity which will be delivered in Autumn 25. Next Steps: Use Section 11 audit on safeguarding in schools 2025-26 to refine school-based interventions and ensure consistent, trauma-informed responses to coercive control across education settings.

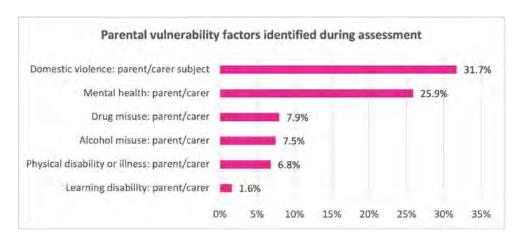


7.9 Vulnerable parents and the first

1,001 days

The CSCP <u>multi-agency pre-birth assessment guidance</u> provides a framework to those working with expectant parents to assess risks to unborn children and provide help and support. The extreme vulnerability of babies under one years is recognised nationally. Nationally, babies under one year are recognised as extremely vulnerable and CSCP partners have discussed the national <u>Panel's 2023–24</u> report to ensure safeguarding efforts remain focused safety planning involving both parents.

The chart shows the range of parental vulnerability factors identified during assessment: Camden acknowledges the need for greater engagement with fathers and male carers and is working towards embedding a 'Think Family' culture across services.



Both local and national data highlight parental mental health as a key concern, with the national report noting that it is often under-assessed, particularly for pre-school children. Substance misuse is also more prevalent nationally suggesting improving opportunities for better integration between services for vulnerable parents and children's services.

Impact: The Royal Free Hospital NHS Foundation Trust has worked with multi-agency partners to raise awareness of safer sleeping and coping with infant crying, including the development of a trust website for parents with video content. **Feedback** from community midwives has indicated that parents are able to watch the videos and have a better understanding of ICON and the risks associated with SUDI. This has been particularly apparent for non-English speaking parents and carers as the videos can be translated.

Responding to learning from serious incident notifications:

In line with previous years the largest proportion of serious incident notifications related to children under the age of two years (four serious incident notifications). Independently appointed reviewers and scrutineers have remarked that partners promote a culture of open, multi-agency reflection on serious incidents and continue to act on lessons learned. Section 9.1 outlines key themes from recent safeguarding reviews. The below is a multiagency briefing developed to share learning from one of the rapid reviews:

Impact: As a result of the spike of serious incidents over the previous six years relating to children under two years, the CSCP commissioned a bespoke multi-agency training programme focusing on *bruising in pre-mobile babies*. This has been developed with partners and will be rolled out in Autumn 2025.

Impact: Early Years staff are being trained in the Triple P (Positive Parenting Programme), an evidence-based approach that supports positive behaviour and emotional resilience in children. Two staff members will become accredited trainers to deliver the programme locally.



Ondren Part

7-minute briefing 'Baby J'

1. Case background

Baby J entered the world already facing vulnerability, born prematurely with concerns raised about his care even before birth. His mother had moved boroughs late in her pregnancy, and professionals had noted challenges in her cognitive functioning and her relationship with Baby J's father.

Soon after Baby J's birth, he was readmitted to hospital due to weight loss. This led to a Child Protection Plan being put in place under the category of neglect. Legal proceedings were considered, but the court did not grant an Interim Care Order. Instead, his mother agreed to daily visits from social workers, a compromise that aimed to balance support with oversight.

2. Serious safeguarding incident

During an unannounced home visit, a social worker observed unexplained bruises on Baby J and concerning behaviour from his mother. Both were taken to hospital later that day, where medical staff identified multiple non-accidental injuries. Baby J was placed under Police Protection, and his mother was arrested on suspicion of child cruelty.

5. Recommendations for Strengthening Practice

- Enhance information sharing during housing transitions to ensure that when families move into the borough, professionals have a full understanding of their social care history. This enables a more responsive and informed approach to support.
- Improve cross-borough coordination in maternity care, particularly for expectant mothers who move frequently. Strengthening these links can help ensure earlier identification of needs and more personalised, continuous support.
- Embed timely, multi-agency pre-birth assessments as a standard part of practice. These should be co-produced with all relevant services to ensure a holistic understanding of the family's circumstances and to plan support early.
- Ensure a consistent safeguarding response when families transfer into the borough, with clear pathways for assessing risk and mobilising support quickly to keep children safe.
- Invest in multi-agency training that equips professionals to build trust with transient and vulnerable parents, particularly those who have experienced trauma. Training should deepen understanding of the barriers care-experienced mothers may face in recognising or accepting help—especially in the context of domestic abuse.
- Keep the infant's safety at the centre of all decision-making, even when navigating complex parental needs. Practitioners should be supported to use pre-hearing discussions with CAFCASS Guardians to strengthen court presentations and secure Interim Care Orders where necessary

3. Working with vulnerable parents:

Baby J's mother had a complex and challenging history. As a care-experienced young person, she had been supported by multiple local authorities and NHS services across the UK. Her background included experiences of substance misuse, domestic abuse, and significant mental health difficulties. She had been diagnosed with emotionally unstable personality disorder and had a history of self-harm and suicidal ideation, including periods of detention under the Mental Health Act. During her pregnancy, she moved between boroughs, which disrupted continuity of care. Her relationship with Baby J's father was volatile and emotionally abusive. Despite this, she declined support from domestic abuse services, expressing that she felt safe. This case highlights the importance of understanding the lived experiences of vulnerable parents and the need for trauma-informed, coordinated support. It also raises questions about how agencies assess risk when parents decline help, and how we ensure that early concerns are not lost in transitions between services.

4. Examples of Good Practice

Professionals across four boroughs worked collaboratively to support Baby J and their family, demonstrating strong multi-agency coordination despite the challenges posed by the mother's transient living situation. Children's services acted swiftly and maintained clear, transparent communication with the family, ensuring they were kept informed throughout. When incidents of domestic abuse occurred, agencies responded decisively, completing robust risk assessments, and making a timely referral to MARAC to support cross-borough safeguarding.

The Health Visitor built a trusting relationship with Baby J's mother, offering consistent support through both home and clinic visits. She provided practical guidance on baby care and sensitively addressed issues around domestic abuse, while also helping the mother access essentials such as food vouchers and benefits. Hospital staff played a key role in safeguarding by holding discharge planning meetings and promptly sharing concerns following the serious incident. Earlier in the pregnancy, they had also taken proactive steps by referring the mother to community services to help her better understand and recognise the signs of domestic abuse.



The Quality Assurance Subgroup has reviewed upcoming EYFS safeguarding changes effective from September 2025, including:

- Stricter recruitment checks
- Follow-up on child absences and extra emergency contacts
- · Improved privacy during toileting
- Clearer safeguarding training standards
- Paediatric First Aid required for students in staff ratios

Our lead safeguarding partners will seek assurance on implementation and impact of the changes through our integrated early years service.

7.10 Safeguarding in schools

Scrutiny - Ofsted Children Services Inspection 2025: School leaders value the quality of training and the breadth of information they receive from Camden. They express a high degree of confidence in the decisions made by children's social care. Partnership working is mature and children missing education (CME) and those electively home educated (EHE) are identified and monitored well, with an effective response to safeguarding concerns.



Schools DSL Forum:

Our partnership working continues to be strengthened by the work of the Designated Safeguarding Leads/Teachers Forum which considers safeguarding themes from across all sectors and understand how learning from local and national child safeguarding practice reviews is embedded in their work. The DSL Forum is well-represented, with typical attendance of approximately 60 school representatives from various primary, secondary, special, ARP, and independent schools. Over the last year this forum has met to consider the following themes and issues:

- Review of the MPS Children's Strategy
- Multiagency Front Door data, thresholds and referrals
- National Learning 'I wanted them all to Notice' on CSA and linking this to the Centre of Expertise on Child Sexual Abuse.
- National Reforms of Children's Services, Camden's approach and vision for schools.
- Camden's Principals for Working with Parents/Carers and Family
 Members which will ensure effective partnership working, respectful
 and non-blaming, clear inclusive communication, enabling DSLs to help
 support families where possible to participate in decision making and
 helping families to be involved in designing processes that affect them.
- It's Silent': Race, Racism & Safeguarding Children ensuring the Partnership can support schools to empower staff and create conditions that enable conversations about race and identity and effectively contribute to local strategies to address race, racism, and racial bias and advocate for the children and families they work with.

In response to "It's Silent", Camden Learning is supporting school staff and governors through our Global Majority Educators Network and, in partnership with Islington, our Global Majority Governors Network. To support, encourage and develop schools' leaders and staff from global majority backgrounds.



Impact: Our lead safeguarding partners were assured that safeguarding arrangements were assessed as being 'effective' in all Camden schools during the 2024-25 academic year. All schools that were inspected by Ofsted were judged to be either 'Good' or 'Outstanding'. As a critical safeguarding partner, Camden Learning has undertaken safeguarding reviews in 16 schools. Effectiveness of safeguarding arrangements in schools is evidenced through findings from these reviews, which includes, reporting and recording systems are robust and staff awareness of the signs of abuse and neglect.

Impact: Strengthening collaboration between MASH and schools through the co-located education lead in the Children and Families Contact Service. Initiatives include hosting Camden DSLs for 'A Day in MASH' to build understanding of referral processes and enhance relationships. Additionally, the MASH education lead will partner with Camden Learning to review findings from the biannual Section 11 school audit

Voice of the child

DSLs were briefed on learning from the National Child Safeguarding Practice Review Panel on "I wanted them all to notice". This provides an opportunity to reflect and consider the key themes which includes hearing children's voices and understanding their needs, understanding parents' and carers' needs/contexts and identifying signs, understanding risk and raising concerns. Alongside learning from local child safeguarding practice reviews and collaboration with The Lighthouse to develop our bespoke training event 'Thinking the Unthinkable' for Camden Schools, this has enabled DSLs to consider how they identify concerns and respond appropriately and the continuing support they can provide to children and their families who have been impacted by Child Sexual Abuse.

7.11 Elective Home Education (EHE)

Scrutiny: Ofsted Camden children services inspection 2025: The number of children in Camden who are EHE is increasing. Leaders are acutely aware of emerging trends and are identifying underlying reasons for this increase. They have strengthened their processes for schools to record and report any vulnerabilities when a child becomes EHE. This ensures better information to support risk assessments.'

Camden ended the 2023-24 academic year with 350 children on the voluntary EHE register which mirrors a national increasing number of EHE cases. Camden Learning has an established voluntary register of children who are electively home educated which will support new expected EHE guidance, including registration and child employment, which is expected as part of the Children Wellbeing and Schools Bill in Autumn 2025.





Impact: Learning from multiagency audits: In 2024 the CSCP undertook a multiagency audit to understand if Camden's offer for children who are electively home educated provided:

- early identification of those children whose education may not be suitable,
- high-quality assessment and care for children who are electively home educated in vulnerable groups,
- direct engagement with the child and family in supporting their request for EHE
- a joined-up approach that is targeted and inclusive for children who are electively home educated

Practitioners identified areas of strength in practice which included timely assessments from social care, strong evidence of early intervention and support from agencies and regular meetings with leadership across EHE, Children Missing Education, SEND and Virtual Schools service to oversee complex and vulnerable cases. The audit highlighted that when children did not meet the threshold for statutory intervention, practitioners continue to have strong safeguarding systems in place and Early Help services continued with efforts even when parental engagement was not initially positive. Considering the findings from the multiagency audit, the following has been progressed locally:

- Strengthened Identification of Vulnerable Children through improving school off-rolling forms to capture more detailed information at EHE entry and vulnerability criteria introduced into tracking processes.
- Safeguarding screening for all new EHE cases, including termly safeguarding checks for updates.
- Enhanced Health and Welfare data collection through EHE forms requesting health and GP details.
- CME and EHE teams merged under Camden Learning (Sept 2024), fostering closer coordination.
- Voluntary EHE register tracks registered children, identifying those with EHCPs, CP Plans, or CIN Plans.

- Termly audits take place with the Virtual School to identify cases without recent contact.
- School Attendance Orders issued for high-concern cases where needed.
- There is ongoing collaboration with Pan London EHE Group to align with awaited DfE guidance via the Children Wellbeing and Schools Bill.

Educational neglect is recognised across multiple strands in this section, including children missing education, exclusions, persistent absence, attendance, and elective home education. It refers to a failure to ensure a child receives a suitable and consistent education, which can significantly impair their development and life chances. National guidance from the Department for Education highlights that persistent failure to send children to school is a clear sign of neglect, and children missing education are at increased risk of harm, exploitation, and poor long-term outcomes. The CSCP acknowledges that safeguarding concerns may arise not only from non-attendance but also from unsuitable elective home education, repeated exclusions, and chronic absence, all of which require coordinated multi-agency responses.

Scrutiny: In the 2023-24 academic year, 17.1% of primary and 26.5% of secondary children were persistently absent from school, which is higher than national averages. This has been an area of scrutiny for our lead safeguarding partners which has led to re-engaging vulnerable children into education being a priority area over the next two years.

Changes to DFE attendance coding since September 2024 has impacted reported attendance at secondary for part time timetables, tutoring, exam study leave and unauthorised absences due to lateness. Camden Learning continues to monitor data through their School Inclusion Support Officers, banding and school systems and targeted support meetings with schools.



7.12 School attendance and exclusions

There has continues to be a focus on developing and piloting attendance initiatives in schools to identify best practice for supporting vulnerable children into education. This includes development of work around Emotional School Based Avoidance (EBSA). There is currently a pilot in partnership with Family Hubs and two primary schools to support Team Around the Family attendance which is supported by practitioners in Camden's Early Help Service.



Impact: A Camden secondary school is developing an in-school unit focused reintegrating pupils experiencing EBSA. Work is underway to develop resources that can support schools to identify underlying reasons for absence.

CSCP Young Advisor: Educational environments need to adapt more

Learning from the Team Around the School and texting pilot approaches, alongside the EBSA initiative will be disseminated in the autumn term and used to strengthen support in Camden Schools.

Impact: Rebuilding Bridges is a support service commissioned in Camden for children and young people with SEND or mental health needs who are frequently missing education. It offers a tailored package including 1:1 mentoring through PACE, input from an Educational Psychologist, and family support where needed. The service aims to boost confidence, wellbeing, and educational engagement, while also helping families create a stable and positive home environment. Participation from both the child and their carers is essential, with a focus on building trust, setting personal goals, and working collaboratively to overcome challenges.

CSCP Young Advisor: Instead of permanently excluding a student a better way is to include mentoring scheme which allow them to understand and get help from someone who has been in the same predicament.

In 2023-24 academic year, there were 18 permanent exclusions from Camden secondary schools and none from Camden primary schools. The fixed term exclusion rate for primary schools is 0.9 and secondary schools is 10.4, which continues to be below the national averages.

Children Missing in Education (CME)

The total number of Children Missing in Education (CME) remains low in Camden. The team have supported the identification of 152 children during the academic year. Our safeguarding arrangements ensure that weekly contact is maintained will all CME cases and effectiveness of intervention is evidenced in 86% of cases being closed within 6 weeks. Advice and guidance on off rolling is carried out daily with schools to ensure that they comply with updated guidance and support is provided with tracing pupils.

Impact: Re-engaging vulnerable children in education: In 2024–25, Inspiring Inclusion supported 479 Camden pupils through mentoring and engaged over 1,100 via workshops and career events. The programme improved wellbeing, self-efficacy, and school engagement, contributing to reduced exclusions and stronger student-staff relationships. A pilot CPD on mentalisation enhanced staff support for at risk pupils. Delivery was shaped by youth voice and tailored to complex needs, including extended and gender-responsive mentoring.

This will be an area of continued scrutiny as part of our priority for **2024-26 on re-engaging vulnerable children in education**.



7.13 Safeguarding children with Special Educational Needs and Disabilities (SEND)

Camden's safeguarding strategy for children with SEND is shaped by the recognition of their heightened vulnerability and the need for inclusive, coordinated support. With 4,057 children and young people identified with SEND in the borough as of January 2024 —47% of whom have Autism as their primary need—the CSCP has prioritised re-engaging these children in education as part of its 2024–26 agenda.

Parents have raised concerns about the adequacy of SEN provision and the inclusivity of school environments, prompting the CSCP to seek regular updates on the implementation of Camden's SEND Strategy (2022–2027).

In Camden state-funded schools, there are 4,109 children with SEN, including children who live in another borough. The chart below shows educational placements for children with SEND.

Special schools

Resource bases within mainstream schools

Further Education

This is includes seeking assurance on progress made in the delivery of Camden's SEND strategy (2022-2027) by the service at CSCP meetings to offer assurance on progress to demonstrate active follow-through on these commitments to enable children and young people to reach their potential at the same time as keeping them safe.

The **Educational Psychology Service** (EPS) plays a key role in delivering multidisciplinary assessments and targeted interventions, coordinated through school SENDCos. Camden has also introduced innovative practices such as Special School **Satellite Sites**—specialist units embedded in mainstream schools—and has invested in accessibility improvements and independent travel training for children with EHCPs.

The CSCP was offered assurance that Camden adheres to the 20-week statutory timeline for EHC needs assessments, but ongoing scrutiny continues to ensure that multi-agency collaboration translates into meaningful outcomes.

The CSCP's oversight aims to ensure that children with SEND are not only safeguarded but also actively included and supported to thrive in their educational pathways.



Key areas of safeguarding assurance



Mainstream schools in Camden receive funding and training to support SEND pupils—such as through specialist teachers, reading / spelling programmes, and in-school assessors.

Camden is piloting **"Special School Satellite Sites"**: specialist provision embedded within mainstream schools.

Grants have been made available to improve accessibility and intervention spaces in schools.

Children with EHCPs (or pending assessments) may qualify for transport support—including skills training in independent travel—under Camden's home-to-school policies.

Camden follows the **20-week statutory timeline** for EHC needs assessments, with multi-agency involvement from education, health, and social care.

A **Case Coordinator** guides families, helps explain the process, and arranges annual reviews to ensure ongoing adherence and inclusion.

For children in care, **Camden's Virtual School** coordinates PEPs, ensuring educational continuity, early reviews (within 10–20 days of placement), and targeted support like PCs, tutors, and mentors.

Camden employs **multi-agency frameworks** like SCAS and Looked After Children teams, and initiatives like "Best Start for Baby" and "Kids. Talk" to identify and support SEND needs early

Despite these efforts, the CSCP recognises challenges remain in ensuring timely and equitable access to support. Notably, 66% of children with SEND are from **minoritised ethnic backgrounds**, highlighting the intersection of disability and racial inequality in access to services.

Impact: This academic year, SEND service has partnered with the Autism Education Trust to deliver autism training to school staff and other professionals. Since November 2024, 16 sessions have been delivered, aimed at parents and carers of children and young people who have an autism diagnosis.

7.13 Safeguarding children with disabilities in residential settings

The CSCP has led on progressing a multiagency action plan responding to the <u>National Safeguarding Practice Review</u> into the care of children with disabilities and complex needs in residential settings. It outlines the partnership approach to Camden's strategic and operational commitments to improve safeguarding, care quality, and oversight for children with SEND.

Below are areas progressed against the action plan over 2024-25 measured through a combination of **quantitative indicators**, **qualitative assessments**, and **multi-agency oversight mechanisms**:

1. CLA Reviews & Oversight

- Improved safeguarding through timely, well-informed, and multiagency CLA reviews.
- Greater accountability via structured midway reviews and incident tracking.
- Enhanced child voice and lived experience reflected in care planning.
- Consistent quality assurance through audits and use of standard templates.



2. LADO Coordination

- Early identification of safeguarding risks through better communication between placing and hosting LADOs.
- Improved trend analysis of concerns in residential settings.
- Clearer roles and responsibilities for safeguarding oversight.

3. Visiting Disabled Children

- Regular, meaningful contact with children in residential placements.
- Stronger multi-agency collaboration through joint visits.
- Better understanding of care quality by trained social workers.
- Clear safeguarding responsibilities for non-CLA children in residential schools.

4. Preparing for Adulthood

- Early and structured transition planning for independence and adulthood.
- Increased life skills development embedded in care and education plans.

5. Multi-Agency Collaboration

- Seamless coordination between education, health, and social care.
- Timely sharing of health and education updates in CLA reviews.
- Increased legal literacy (MCA/DOLS) among SEND and CLA staff.
- Improved educational outcomes through Virtual School engagement.

6. Commissioning & Contract Oversight

- Stronger placement quality monitoring through robust contracts and regular reviews.
- Clear financial arrangements for children in residential care.
- Responsive action to underperforming providers (e.g., OFSTED RI/ Inadequate).
- Integrated decision-making via the Complex Needs Panel.

Areas of challenge identified and actions being progressed include:

- Missed opportunities for joint visits, gaps in care planning and reviews.
 Mitigation: Clear protocols, designated leads (e.g., DSCO), and regular multi-agency meetings.
- Workforce Capacity and Training Gaps reduce quality of reviews, oversight, and responsiveness to incidents. Mitigation: Ongoing training, supervision, and recruitment strategies tailored to SEND needs.
- 3. Data and Information Sharing Barriers between of health, education, or placement data—especially for out-of-borough children resulting in Inaccurate assessments, missed safeguarding concerns, or poor planning. Mitigation: Use of trackers (e.g., DOLS), shared templates, and improved digital systems (e.g., MOSAIC).
- **Strengthening Contractual Oversight**, especially for education-led placements. Mitigation: Regular contract reviews, clear expectations, and escalation protocols.
- Strengthening audits of CLA reviews, incidents, and placement quality in order to better track progress or identify systemic issues.
 Mitigation: Scheduled dip-sampling, use of RAG ratings, and oversight by the Complex Needs Panel.
- **Strengthen** Strategic commissioning, financial planning, and policy development (e.g., pocket money) so that placement quality are carefully monitored and managed.



Getting Help

Thriving

CSCP approach and impact: To monitor risks effectively over time, CSCP has progressed as multiagency action plan. Each action in the plan is assigned a Red-Amber-Green (RAG) status, which is regularly reviewed to track progress and flag delays or issues early. Multi-agency forums such as the Complex Needs Panel (CNP) and CLA Review Meetings will serve as key platforms for reviewing progress, identifying emerging risks, and coordinating responses.

Through co-designing more robust assessment forms, over 2025-26 aim is for joint visits and midway reviews will provide real-time insights into care quality and safeguarding. Audit mechanisms, including dip-sampling of cases and monitoring visits (e.g., Reg 44, EHCP, PEP), to assess compliance with care standards and contractual obligations.

Tools like the DOLS tracker, Safe and Well templates, and contractual checklists will be used across teams to monitor specific risk areas and ensure consistent oversight. Escalation protocols for IROs and social workers to be tested for use to ensure unresolved risks or incidents are addressed promptly, with incident logs reviewed to assess safeguarding responses. Finally, senior leaders have received regular updates on progress and risks, with quarterly or biannual reviews of the action plan to evaluate overall effectiveness and adjust priorities as needed. Staff training and supervision to demonstrate through tracking and feedback, while supervision sessions will help identify knowledge gaps.

7.14 Child and adolescent mental health

Camden Child Adolescent and Mental Health Services (CAMHS) in Camden, uses the THRIVE Framework for system change which is an integrated, person centred, and needs led approach to delivering mental health services for children, young people and their families. CAMHS in Camden includes:

- Clinical Intake Team, Integrated Front Door
- Community North and South Community CAMHS

- Camden Adolescent Intensive Support Service, Camden Wellbeing Team
- Schools Mental Health Support Team
- Specialist Early Intervention Service and Mosaic CAMHS
- Integrated Whole Family Team, Whole Family Team Perinatal and Growing With You, The Hive.

Multiagency Development: The Integrated Front Door for CAMHS and Social Care supports integrated working and a streamlined single access point for referrals. This pilot that was launched in 2023 has now been rolled out to all Camden GPs ensuring that children experiencing difficulties with their mental health are supported by multiagency partners in a coordinated way.

Scrutiny: Ofsted Camden children services inspection 2025:
Camden has a particularly strong and effective mental health offer for care experienced young people, with over 20 commissioned and co-located services in Camden available to children in care and care leavers. Young people who want and need mental health support are accessing it. Provision includes diagnosis and treatment up to age 25, support for foster carers, social workers and PAs, and supported accommodation offering mental health risk assessment and direct intervention to avoid the need for hospitalisation. When care leavers are reluctant to access therapeutic support, this is kept under active review, with a recognition that the timing needs to be right around events in their lives.



In September 2024, Camden's young people chose to rename the CAHMS Children Looked After Service "Growing With You: CAMHS Children Looked After and Unaccompanied Asylum Seekers Team" as part of a coproduction project.

"The hands symbolise working together, and the tree is us growing together from the root.

"The name means someone by your side until you are an adult.



Asim

CSCP Young Advisor: Young people today face issues like anxiety, depression and stress are also increasingly common among teens, often linked to academic pressure, social media, and uncertainty about the future.



Scrutiny: Challenge to overcome: There continues to be challenge ensuring partner agencies, the Voluntary and Community Sector and families are aware of the range of CAMHS services and how to self-refer.

The safeguarding partnerships Vulnerable Adolescent Strategy Group continues to consider and examine the structural framework in relation to mental health support for children and young people in a variety of settings and together have:

- Discussed review of family work and youth work in Camden (Family hubs and youth hubs) sitting under the national review of social work, considering if this meets the needs of young males/ those from global majority communities.
- Considered staffing changes and changes to resources within CAMHS Growing With You team which includes a full-time Psychotherapist and full-time nurse joining the service.
- Named Dr for safeguarding at the Tavistock and Portman has recently presented to GPs on referral pathways and is developing a one-page pathway referral document to enable clarity for multiagency partners on services and self-referral.
- CAMHS Pilot at the Hive on preventative work with young men and linking with mental health services.
- Kooth, the free, anonymous, NCL- wide online counselling service for children and young people aged 11-25. The service achieves positive results with young people and locally there is high take up among young people from global majority communities. They offer inclusive and accessible online activities which support the development of resilience and wellbeing with access to a qualified therapist and peer to peer support forums.
- Continued development work between Tavistock and Portman Trust and VCS organisations on identifying mental health support pathways in the borough.



Scrutiny of local performance - In 2022-23, 15% of referrals to children's social care, featured child mental health as a factor, this has remained stable over the past 4 years.

Learning from Reviews:

Following the tragic suicides of Care Experienced young adults, there continues to be a focus from the partnership on understanding the challenges faced by Unaccompanied asylum-seeking children in relation to their mental health.

Multiagency partners continue to explore and respond to transitional safeguarding for care-experienced young people, understanding development and responses to this cohort of children, helping practitioners to consider how to work with the refusal or non-acceptance of help of children and young people and further developing practice on working with children who experience suicidal ideation.

I enjoyed the environment this has put me in as I grew closer with other people, I'm more aware of different feelings and emotions people might be going through. The sessions helped me understand how to support someone who might be struggling with their mental health and how to access different resources to help them

Peer Mentoring | FYA

Impact: To strengthen our partnership approach to supporting children and young people's mental well-being, CAMHS continues to work to further embed services within the community. This includes:

• Co-location of CAMHS for over 5's provision within the Family Hubs in Camden.

- Camden's Minding the Gap mental health transition service helps young people aged 18-24 who have mental health difficulties and are moving on from Child and Adolescent Mental Health Services to adult mental health services or need additional support to engage with professional help.
- Further expansion of the Tavistock and Portman NHS FT Creative Arts Therapy Service, which is a dedicated, accessible art therapy service offering:
- Early intervention and preventative therapy, as a complementary but separate route from CAMHS.
- Support for children who may struggle with talking therapies due to neurodivergence, language barriers or preference.
- School-based delivery, helping reach young people with minimal disruption to learning.

"CAMHS to the Community" - Fitzrovia Youth in Action continues to provide a peer mentoring programme which has been co-designed in partnership with the Tavistock & Portman NHS Foundation Trust and Mind in Camden. The programme content has been informed using evidenced based models to develop a programme, co-designed and co-delivered by young people, to support children discharged from CAMHS.

Children experience the opportunity to:

- Train as a peer mentor to support themselves and others.
- Improve their general wellbeing.
- Create wellbeing sessions together.
- Take part in discussions to support their mental health.
- Build a 'toolbox' for self-care.
- Receive AQA accredited certificates



"My son also got an ADHD assessment through the educational psychologist who is continuing to work with him on a voluntary basis now he's finished.

HMIP Inspection of Camden's YJS reports that 'There were references to the support received to access health provisions and the specialist assessments provided by the YJS seconded staff, as well as children being linked into positive activities they were interested in.' Inspection of YJS Camden

Trauma-informed practice in Camden (TIPiC):

Camden embed the Trauma-Informed Practice Model to all schools, including the Virtual School, Youth Offending Services, CAMHS, Early Years Team, Safer Schools Officers and local voluntary and community sector. Lead Safeguarding Partners recognise the vital role positive child and family mental health plays in safeguarding, overall well-being, and school engagement. The 2024-26 priorities emphasise that addressing these cross-cutting priorities with a relational approach to safeguarding could significantly enhance outcomes for our children and families.

7.15 Female Genital Mutilation (FGM)

Our safeguarding arrangements recognise that FGM is a form of child abuse and a criminal offence. Camden promotes the use of FGM Protection Orders to prevent girls from being taken abroad or coerced into undergoing FGM. Access to specialist NHS services is available, including clinics and gynaecological care for survivors. Camden runs seasonal awareness campaigns, particularly during school holidays, to highlight the risks and signs of FGM and community outreach aims to challenge cultural norms and promote protective behaviours.

Professionals are trained to identify and report risks of FGM through our multiagency training programme and Camden's Children and Families Contact Service acts as a central point for safeguarding referrals. Our arrangements promote multi-agency working to ensure coordinated and effective responses.

Impact: As part of a wider awareness campaign, Camden aligned its efforts with the global theme: "Stepping Up the Pace: Strengthening Alliances and Building Movements to End FGM and Great Ormond Street Hospital delivered awareness raising activity to mark International Day of Zero Tolerance for FGM in February 2025. Addressing FGM remains a key safeguarding priority for CNWL, with ongoing efforts to raise awareness among frontline services most likely to encounter affected women and girls staff and provide targeted support through risk assessment.

Scrutiny of local performance: Awareness-raising on FGM continues to be important, as despite Camden's diverse population, which includes communities where FGM is known to be practised, the number of cases identified as a risk factor in social work assessments remains too low to report. This persistent underidentification is a key area of scrutiny. However, the CSCP recognises that this trend aligns with national patterns, where in 99% of cases, FGM is only identified in adulthood, typically during maternity or obstetric care. This reinforces the need for continued vigilance, professional curiosity, and culturally competent practice across all agencies.

7.16 Private fostering

The CSCP continues to promote Private Fostering reporting requirements through our social platforms and <u>film</u> developed to raise awareness. In addition, a <u>Podcast</u> with Voluntary Action Camden has enabled community organisations to be reached, with positive feedback received.

Area of scrutiny: In 2024–25, the number of Private Fostering notifications remained small. A deep dive conducted in March 2025 provided assurance to the CSCP that children in both current and historical Private Fostering arrangements had been assessed promptly, with social workers visiting the child within seven days of the notification to talk to the child, with offers of help and support. There was consistent evidence that decisions were appropriate and timely.



As numbers remain small, in 2025, the Private Fostering campaigns were updated and refreshed to boost awareness. This included:

- Updating and sharing the Statement of Purpose and redesigned leaflets with new branding and contact details.
- Publishing materials online and promoting them via GP newsletters and the NCL ICB website.
- Continuing multiagency training through the CSCP to keep partners informed and engaged.

Development: Taking learning from Report published: <u>private fostering survey 2024 – findings and analysis</u> | CoramBAAF responsibility for Private Fostering was integrated into the Children in Need service to ensure consistent monitoring and assessment of the welfare of privately fostered children, and to enable timely and appropriate intervention when necessary.

7.17 Supporting asylum seeking families

Our lead safeguarding partners have maintained oversight of asylum-seeking and refugee families in procured hotels and dispersed accommodation in the borough. The children of asylum-seeking families are potentially some of the most vulnerable and therefore, a pan London steering group has been established to ensure that hotels for asylum-seeking families have appropriate safeguarding arrangements for children. These hotels, used due to rising asylum numbers and processing delays, have been criticised for overcrowding, poor conditions, and lack of child-appropriate support.

Across the collective London Safeguarding Children Partnership, key concerns include:

- **Mental Health Impact:** Exposure to unstable environments and criminal justice assessments worsens trauma and emotional distress.
- Adultification and Racism: Black children are often misperceived as older and less vulnerable, leading to inadequate safeguarding responses.

- **Placement Instability:** Frequent moves and lack of specialist care undermine continuity and emotional safety.
- **Immigration Delays:** Prolonged uncertainty around asylum claims compounds mental health risks.
- Accountability: Lack transparency about use of public funds and child welfare priorities.

Locally in Camden: In 2024–25, Clearsprings introduced a new subcontracted organisation to manage hotel-based asylum accommodation. While lead safeguarding partners have been assured that Level 3 safeguarding training, including local procedures and referral pathways is being delivered to all hotel staff, concerns remain. Clearsprings retains overall safeguarding responsibility, with designated leads in Camden hotels. However, given past inconsistencies in safeguarding practice and service user welfare, this area will require ongoing scrutiny throughout 2025–26 to ensure that training translates into effective, trauma-informed safeguarding on the ground.

Displaced and Refugee Families Team – Camden: Over the past year, the team has developed targeted outreach support for families accommodated by the Home Office in hotels and dispersed housing. Collaborative working practices have been established to address early help and safeguarding concerns for both families and vulnerable adults. The team works closely with Clearsprings (Home Office accommodation provider) and the Home Office to respond to safeguarding issues and promote the health and wellbeing of service users in Camden.

Impact: Safeguarding meetings are held every three weeks with key partners to support multi-agency planning. Camden currently has two mixed-occupancy hotels, where 131 families have been supported to access education, health, SEND services, and local support, with all children now in school or nursery. Early Help works with housing teams to assist families moving out of asylum accommodation. Addressing FGM remains a priority for CNWL, with continued awareness-raising and targeted support for affected women and girls.



Safeguarding vulnerable adolescents



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8.1 Child exploitation

The CSCP's Vulnerable Adolescents – Risk and Exploitation Strategy Group overseas and coordinates the multi-agency response to risks facing young people and young adults in Camden. This work area has maintained its prominence with the consistent chairing by (Lead Partners) the Executive Director, Children and Learning and Detective Superintendent, Central North Basic Command Unit of the MPS. The strategy group is also attended by our health and education deputy statutory partner representatives. This is a unique group that brings together the work of frontline practitioners and strategic leads. A robust multi-agency strategy and action plan supports the workforce in developing knowledge and skills in safeguarding children and young people at risk of extra-familial harm.

The Vulnerable Adolescents Strategy Group are responsible for the implementation of the strategy and action plan, which has a 5 pillared approach; Prevent, Identify, Support, Disrupt and Enforce/Prosecute. The work of the group is across three key areas of exploitation which is mirrored in the Vulnerable Adolescents Strategy, which includes:

- harmful sexual behaviour and child sexual exploitation (CSE);
- youth violence, child criminal exploitation (CCE) including trafficking/ modern slavery;
- radicalisation and forms of extremism leading to terrorism

The CSCP's multi-agency guidance <u>Safeguarding children at risk of extra-</u>familial harm and child exploitation provides a framework for multi-agency

working so that professionals working with children can recognise extra-familial harm and forms of child exploitation, identify the children who are vulnerable to and experiencing harm and exploitation and the actions to be taken to ensure children are afforded the protection they need.



Impact: Our Vulnerable Adolescents Strategy Group were briefed on the new Violence and Exploitation Support Service which is being commissioned by MOPAC. Violence and Exploitation Support Service (VESS) provides holistic support to children and young people in London (up to 25) impacted by violence and exploitation. The service aims to provide comprehensive support to young Londoners tailed to their individual circumstances ensuring they receive the right support at the right time. VESS offers one-to-one support to young Londoners living in any London borough, aged up to 25 who are directly impacted or at significant risk of violence and exploitation. Caseworkers deliver support in places that are safe for that young Londoner. The service may support a young Londoner long term for several years.

Camden utilises **bespoke Child Sexual Exploitation (CSE) and Child Criminal Exploitation (CCE) risk assessment tools** to support practitioners with identifying indicators of exploitation. To ensure consistent identification of child exploitation risk across services, these tools are used by lead professionals. Our lead safeguarding arrangements stipulate, that when the threshold is met, a Child Exploitation response meeting is triggered with police and key partners to identify the contextual factors impacting on the child's exploitation, and to develop a tailored CCE or CSE plan to reduce the risk to the child.

Child Sexual Exploitation (CSE)

As with the year previous, 48 children received a CSE risk assessment in 2024-25. These assessments were distributed across

85% female and 15% male

compared to 96% female and 4% male the previous year. This increase demonstrates our proactive approach to challenging unconscious bias and recognising the vulnerabilities of gender in terms of sexual exploitation.



Impact: Of our multiagency approach is evidenced in **68% of children** who received a review risk assessment reflected a reduction in risk score.

Area of challenge: Online exploitation has been identified as the most prevalent model of exploitation in CSE assessments. 2024/25 has also seen further implementation of the Online Safety Act including assurance from Ofcom that service providers in the UK will need to evidence that they are taking precautions to keep children safe and removing illegal content from children's social media feeds. This work will be further developed over the next year.

Child Criminal Exploitation (CCE)

For Criminal Exploitation, **104 children received** a CCE risk assessment compared to **93** in the previous year.

86% of assessments were completed with males

and 14% with females



Exploitation through youth violence (38% of cohort) has been identified as the most prevalent type in CCE risk assessments, closely followed by drug related exploitation (37% cohort) and forced theft/robbery (27%) Changes to risk assessment tools have allowed partners to understand more about what types of CCE are experienced locally. For all forms of exploitation, focus is given to supporting communities to identify vulnerabilities to enable the 'prevent' element of our strategy to be implemented. This has included increased work around PSHE curriculum and Healthy Relationships to support all children, as well as outreach work within schools and communities. MACE is our tactical response to child exploitation in Camden, considering barriers to engagement,

safety planning, people of concern, contextual safeguarding, transitional safeguarding, supporting police investigations and raising awareness of emerging trends. Through the VOLT model, MACE explores tools to disrupt exploitation and reduce risk for all children. Tools utilised in 2024/25 includes

- Child Abduction Warning Notices
- ASB Legislation ASB Warning notices for adults in targeted areas
- Letters of concern
- Achilles heel tactics
- Ongoing police investigations

Our joint approach to child exploitation has noted the following vulnerability and presenting factors:

- **Substance misuse:** children using drugs or alcohol may be more easily manipulated or coerced, especially if substances are provided by exploiters as part of the grooming process and/or through debt bondage
- **Decline in school attendance:** Time away from school increases unsupervised periods, making it easier for exploiters to make contact and build relationships. In addition, school can provide children with a sense of belonging, achievement and value which increases vulnerability to these needs being exploited when they are away from education.
- Mental health: Children struggling with anxiety, depression, trauma, or low self-esteem may be more vulnerable to manipulation and may seek validation or affection from unsafe sources.
- **Neurodiversity:** Neurodivergent young people may struggle with social cues, boundaries, or understanding risky situations.
- **Missing episodes:** Going missing, even for short periods, can increase a child's risk of experiencing harm. Exploitation may act as a pull factor which drives a child into missing episodes, as well as increasing risk for children whilst missing.



Scrutiny: June 2023, HMICFRS carried out an inspection of MPS response to Child Exploitation and the following recommendations were identified:

- The force should improve its investigation when children are at risk of, or harmed by, criminal or sexual exploitation;
- The force needs to improve how it identifies and assesses risks, and how it responds, when children are reported missing;
- The force needs to make sure its officers and staff, at all ranks and grades, understand what victim blaming is and how it affects the service they provide.

HMICFRS revisited the MPS in September 2024, the senior leadership response to the concerns have been positive and there are considerable improvements in place. Our lead safeguarding partners sought assurance that all three causes of concern are now closed. The new Local Missing Hub will be live from September 2025. There will be no restricted staff on the teams with all officers trained. There will be a 24/7 shift pattern to enable a consistent approach to missing investigations (see section 8.5 for further details). The teams now also investigate modern slavery investigations and there is more drive to pursue lines of enquiry to trace offenders. Additionally, all officers have received victim blaming language mandatory training and impact is evidenced in the feedback following the HMICFRS revisit. The full report can be found here.

8.2 Modern Slavery

The Modern Slavery Act places a statutory duty on Local Authorities as 'first responders' to identify potential victims of Modern Slavery through the National Referral Mechanism (NRM).



Impact: In 2021, Camden was successful in securing a joint bid with London Borough of Islington to become one of the first adoption sites for devolved Home Office National Referral Mechanism (NRM) decision making. This has resulted in a cross-borough multi-agency panel assessing potential child victims of Modern Slavery. This has positively impacted children by significantly reducing the decision-making time, with lead professionals sharing the child's lived experience. The impact of an NRM referral includes consideration of Modern Slavery as part of Court matters which allows increased access to specialist support.

There were 30 NRM referrals received by the panel in 2023-24 which is a decrease from 36 the year previous. Majority of referrals were completed for males (80%) compared to females (20%). CCE is the most frequently identified type of exploitation (53%), with CCE the clearest type of exploitation to objectively evidence for the NRM threshold, due to the presence of police arrests and investigations. Victims were also referred due to experiencing forced labour (30%) and CSE (17%).

Scrutiny: Our lead safeguarding partners were assured that the Child Exploitation Teams within the MPS will now investigate modern slavery investigations and there is more drive to pursue lines of enquiry to trace offenders following the HMICFRS inspection of MPS response to Child Exploitation.

8.3 Missing children

In 2024-25, 127 children were reported missing 870 times with 79.4% of missing episodes lasting 24 hours or less. To further understand the lived experience of the child an adapted safeguarding arrangement for Camden's children missing service, offers internal return home conversations to children reported missing since December 2022.



Impact: Our Missing service continues to offer children the opportunity to explore their missing episode in the places and spaces they feel most comfortable. This may be within their homes or placement, at school, virtually or within the community. All children reported missing are offered a Return Home Conversation (RHC), with 78% of children receiving a successful RHC across 66.5% of episodes. Increased missing reports in 2024/25 has identified the need for further resource within this service, with funding now confirmed to provide this support in 2025/26.



Impact: The Exploitation and Missing team have delivered bespoke training with Camden's foster carers to support them with responding to missing episodes and have reached out to youth hubs as part of a youth safety mapping project.

Impact: In 2025, the organisational structure for the MPS missing person hub is changing and will be absorbed within the Public Protection strand. Central North BCU is the second lowest borough across the Met for missing episodes (8,995 missing episodes). There are aims to reduce the figure further through sharing of information and early engagement with children and young people. There are daily reports of children in custody or have been in custody within the previous 24 hours.

This leads to accurate date, planning for next steps, early engagement and partnership working. Joint planning took place to review our local protocols to align with the MPS changes. The missing service being brought into the same chain of command and specialism in public protection is a strength. This was a key area of concern for HMIC, and the changes have enabled movement out of engage phase.



Understanding the child's lived experience:

Children have shared the following push and pull factors impacting on their missing episodes:

- Wanting to see their friends and family and often stay overnight.
 This is the most common pull factor for children who are missing.
 Recognising this pull factor and enabling opportunities for children to spend time with people important to them in a positive way is a key tool to reducing missing episodes.
- Inappropriate or unknown friendships. Some children share that
 they are visiting or staying with friends who they do not wish
 to provide further information about. This can be because they
 want to retain a sense of independence or control over their lives,
 because they don't want these people to be contacted or due to
 wider extra familial risk. This reflects the importance of building
 trusted relationships with our children, whilst also recognising
 indicators or vulnerabilities which may be indicative of extra
 familial harm.
- Exploitation and extra-familial harm. Within RHCs children have shared information with is indicative of exploitation or an exploitative relationship. It may relate to themselves or their friends and peers. Children are less likely to view themselves as victims within these contexts, but any information is shared with lead professionals to inform an appropriate multiagency response.



- Missing 'home time' at their home or placement. Children are
 encouraged to keep in touch with their placement when they are
 running late for their home time so that placements can make an
 informed decision on whether a child should be reported missing.
 Children sometimes reference not having access to their phone,
 including limited battery or data. Access to phones is key to ensure
 children can contact professionals if they feel unsafe.
- Not liking their home or placement this can include the location, the professionals supporting them or their living arrangements.
 Some children who are placed outside of Camden have been drawn back to the communities and services they are familiar with.
 Others have found it difficult to settle into a new placement.
- Conflict or difficulties they are experiencing in their life for example disputes with family/friends or feeling bullied at school. Children's voices shared within RHCs can be used to inform their plan and implement appropriate support.

Scrutiny: Our statutory safeguarding partners recognise that there is a disproportionate number of children (52% of the missing cohort) from Black Ethnic communities in Camden being reported missing. This disproportionality is impacted by the number of Children Looked After who are reported missing, as well as a cohort of our Unaccompanied Minors who are at increased vulnerability to missing episodes. Children are more likely to be reported missing from care, due to protocols in place, compared to children living at home. The Reducing Criminalisation of CLA protocol and the Philomena Protocol both drive our work to address disproportionality for missing children, centred on the development of trusted relationships. Children at risk of exploitation also continue to be at increased vulnerability of missing episodes. Moving forward partners continue to advocate for children to ensure that missing procedures are used effectively and that push and pull factors are used to reduce the risk of future missing episodes.

8.4 Serious youth violence

HMIP Inspection of Camden's Youth Justice Service

In April 2025, Camden's Youth Justice Service (YJS) was inspected under the new framework and the focus on victims was a new area being considered as part of the inspection. The final rating was graded as 'Outstanding', the full report can be found here: An inspection of youth justice work with children and victims in Camden – HM Inspectorate of Probation. The findings identified the following outcomes and strengths:

- Practitioners develop meaningful and trusted relationship with children and families, recognising it as a foundation to achieving positive change and safety.
- Practitioners are skilful at identifying and analysing risks and protective factors in a nuanced way as well as understanding underlying contextual factors and their impact.
- Diversity practice is impressive and a particular strength –identifying individual needs and understanding intersectionality.
- There is consistently high-quality work with children, with delivery to achieve positive change particularly impressive.
- Work is reflective of the relational practice model and typifies the culture of authentic care and compassion for children and families.
- There is a genuine and authentic commitment to ensure victim work is strengthened and embedded within the YJS and wider partnership.
- There is very effective management oversight, which is strengthened by the partnership.

Voice of the child

As part of the inspection, frontline visits with inspectors took place to services established to support young people and help young people into employment. Excellent feedback was shared by young people which was heartfelt and warming to hear about the positive impact services and practitioners have had on improving young people's lives.



Scrutiny: The following further areas for development were identified from the Inspection which will be monitored and overseen through the lead safeguarding partners and YJS:

- The Camden Youth Justice Service Management Board should: Implement the planned development of the partnership victim strategy. This should be informed by the collation and analysis of comprehensive partnership data, including the protected characteristics and diversity needs of victims, as well as seeking input from victims and hearing their voice.
- The Camden Youth Justice Service should: Continue to develop and improve how it gathers and analyses the feedback from victims and then use this to shape and enhance service delivery. Develop an understanding of the range of services supporting victims within the borough, so as to enhance the victim offer and ensure it is responsive to victim's needs.
- The Probation Service should: Work with the YJS Management Board to improve its involvement in the transitions of children to adult services to ensure they are more effective. This should include the appointment of a YJS seconded probation officer. Conversations have taken place about the Probation Officer role which will be established.

To strengthen our work with victims, the following will take place over 2025-26, which will be overseen by our lead safeguarding partners:

- Peer support and group supervision for all staff in terms of victim work.
- Increase recording and data for victims
- Training and induction review of process and expectations
- Develop interventions for children affected by serious youth violence
- Development of a YJS Victim Strategy

Joint Targeted Area Inspection - Serious Youth Violence

In 2025, the Vulnerable Adolescent Strategy Group sought assurance on overall findings from national Joint Targeted Area Inspections (JTAI) on serious youth violence. The interim report published Nov 2024, provides a steer on emerging learning and themes.

- 1. **Disproportionality children and young people with SEND and those from particular ethnic groups** significant work has been undertaken within YJS to think about how our early help services are responding and identifying families who are impacted to change their long-term trajectories.
- 2. **Early identification and initial responses -** a self-evaluation to the JTAI criteria and inspection framework has been completed by partners. Further analysis of evidence will support identification of areas of learning to consider within an action plan.
- 3. **Working with children & families -** When multi-agency work is effective, all professionals engaged with, and took time to understand, the whole family and raised that the role of education is vital.
- 4. **Panels & Partnerships -** multi-agency panels worked well when roles, responsibilities and representation, and communication between panels, is clear.





Scrutiny: A detailed briefing on our local response to JTAI learning was shared through the Violence Reduction Unit Partnership Reference Group. A central government mission is to create 'Safer Streets' which aims to cut violent crime by half through various strategies including Prevention Partnerships and Young Future Hubs. The JTAI findings noted inconsistency in the way Local Safeguarding Partnerships keeps agencies focussed on safeguarding children harmed by serious youth violence. Our lead safeguarding partners sought assurance on our local governance mechanisms for serious youth violence which includes:

- Direct work and feedback from children, young people and families

 audit activity is taking place within Youth Justice Service and Kady's
 Dream to complete interviews with high-risk children who have escalated within the system.
- Learning reviews and collaborative work with partners in taking forward recommendations
- Multi-agency audits evidencing robust partnership working and oversight
- Youth safety partnership
- Collective response to serious youth violence work has also taken place with community safety around improving offer to 18–25-yearolds
- Improvements around data collection and analysis to reflect the issues of youth violence in the borough and other offences which impact/ contribute to violence.

Voice of the child

Our safeguarding arrangements focus on the need for protecting the most vulnerable children in the borough however, there is also a need for opportunities to celebrate young people's achievements and have fun. There were four well-attended events delivered as part of a week of celebration in December 2024. Throughout the week, Camden celebrated youth voice, creativity, and leadership with a series of powerful events. Highlights included the Youth Safety Multimedia Competition showcasing young people's interpretations of safety through diverse media; the first youth-only Youth Mission event fostering discussion and fresh ideas; and a youth-led assembly uniting against violence towards women and girls, co-designed with boys as allies. The week concluded with the Youth Celebration Awards, recognising the dedication of staff, partners, and the achievements of over 3,700 engaged young people, more than 1,000 of whom gained external awards, underscoring the incredible impact of Camden's youth sector.

Our CSCP safeguarding arrangements allow an understanding of the local contexts of youth violence in Camden which is vital to prevention and support to those affected. The CSCP continues to develop understanding of the relationship between serious youth violence and criminal exploitation, whilst continuing to identify other underlying causes and triggers.

Impact: Joint working arrangements and information sharing between both statutory and non-statutory partners allow this response to be both child-first and child-centred; every response is bespoke to each individual child, young person, community and situation. This will be central to the development of an overarching approach to support adolescent safeguarding and promote safety in the community.



Area of challenge: Online exploitation has been identified as the most prevalent model of exploitation in CSE assessments. 2024/25 has also seen further implementation of the Online Safety Act including assurance from Ofcom that service providers in the UK will need to evidence that they are taking precautions to keep children safe and removing illegal content from children's social media feeds. This work will be further developed over the next year.

- The impact of the **cost-of-living** crisis is still felt across the borough, increasing vulnerability to CCE.
- **Bullying and peer-group conflict** can lead to violence that is unrelated to criminal exploitation
- Changes to models of exploitation and the apparent structures of criminal groups have impacted group relationships and tensions
- The **night-time economy** continues to be an important context for violence involving young people

Theft and robbery continue to be model of offending and exploitation impacting the risk of violence for children and young people. **Drug supply**, often involving the exploitation of children and vulnerable people, has become increasingly apparent in recent years. Criminal groups, including 'Gangs', remain central in this exploitation. However, there appears to be a greater prevalence of smaller and more fluid criminal groups, suggesting a key change from our previous, more static, understanding of Gangs in the borough.

Impact: Contextual Response Plans have been developed and used when contextual safeguarding concerns are identified. These plans ensure that the needs of children and the community are considered by using a multi-agency response, which has included local youth services, schools and neighbourhood Police teams.

MOPAC knife crime with injury (excluding domestic abuse) data is used to measure community-based violence against children and young people.

Whilst the number of adolescent victims fluctuates from month to month, the overall trend remains positive. There were 26 victims aged 10-24 in 2024, compared with 45 in the previous year. The pandemic had a notable impact on this measure throughout 2020 and the following years and Camden remains well below the peak of violence in 2017-18.

Scrutiny: Redthread, a national charity providing youth work in health settings, ended its service at UCLH's emergency department in March 2025. Redthread ensured a safe transition for the young people they supported, including referrals to external partners where needed. While no direct replacement has been commissioned, clinicians have been given information on alternative support services. Safeguarding referrals will continue for children and young people at risk of exploitation or violence. This will be an area of oversight for our lead safeguarding partners in 2025-26.

8.5 Youth Early Help

Scrutiny: The CSCP was curious to understand that in 2023–24, Youth Early Help worked with 885 referrals, with 53% initiated by police, highlighting a potential reactive rather than preventative safeguarding approach. 21% progressed to meaningful engagement, while 58% received advice only, raising questions about the depth of support provided. Further exploration of the low uptake of specialist services like Youth Diversion (9%) and FWD substance misuse (9%) is needed to understand reasons for underutilisation or access barriers. CSCP meeting noted the efforts to understand the lived experience of the child, with presenting needs monitored at referral and assessment stages. However, the data revealed complex challenges. Vulnerabilities noted in the cohort include; 20% with SEND, 10% with mental health needs, 12% with parenting issues, 10% problematic behaviour, and 8% children missing education, which raises broader systemic vulnerabilities that CSCP felt requires multi-agency coordination.



Impact: In the year 2024-25, there were only two returning cases to Youth Early Help evidencing the effectiveness of the work with families to encourage meaningful and lasting change.

Impact: UCLH has dedicated adolescent social workers supporting inpatient and outpatient teams, alongside a Trust-wide Senior Social Worker who covers safeguarding for adolescents outside the Paediatric and Adolescent division, and adults with children. The safeguarding team is increasing its visibility across the Trust to ensure equitable safeguarding for all under-18s, with a strong focus on transitional safeguarding for those turning 18. Adolescent-focused safeguarding staff contribute to complex discharges, deliver tailored training, and actively participate in multi-disciplinary meetings to support joined-up care. In response to rising referral numbers and increasing case complexity, the Adolescent Safeguarding Team is piloting a new complexity tool. This tool aims to provide a measurable, consistent, and fair method for assessing and managing complex cases.

Youth hubs and engagement

There are three Youth Hubs in Camden which continue to deliver variety of programme of activities to young people. All youth hubs offer accredited programme and volunteering opportunities for young people. At the time of writing this report there are four level 3 Youth work apprentices who will soon be completing their programme.

Engage Youth Diversion programme

ENGAGE is a partnership between the Met Police and Islington, funded by the Violence Reduction Unit, aiming to divert young people in police custody toward positive pathways like education, employment, or training. In 2024–25, ENGAGE made 325 initial contacts with 302 individual children across local police custodies. Of the 89 Camden children, 70% were in education, while 6% were NEET and referred to Camden Connexions and Carer services. At first contact, 64% of Camden children weren't open to any services, however, ENGAGE shared information promptly with professionals for those already known to social care, Early Help, or YJS.

Impact: 11% of the ENGAGE cohort reoffended within 12 months which is a key metric used to assess the programme's effectiveness.

8.6 Adolescent substance misuse

In Camden, a multi-agency approach to reducing substance misuse is undertaken through a borough wide drug action plan. FWD is Camden's specialist, young people's substance misuse service. Based within the multi-disciplinary settings, FWD offers information, advice, guidance and tailor-made support and interventions targeted at children and young people who are using or at risk of substance misuse or who may be affected by parental and peer substance use. FWD also offers training to parent and professional working with young people.

The CSCP offers **multi-agency training** on adolescent substance misuse and FWD referrals. Impact of the training is recognised in the variety of referral sources to the service. In 2024-25, FWD received 306 new referrals (increase of 24.7% from 2023-24). Impact of effective work with between FWD and young people is evident in no re-representation of children accessing support from FWD in 2024-25. The highest referrer to the service included Children and Family Services, Housing and Universal Education Settings.

Impact: FWD deliver an educational awareness workshop on substance misuse with young people and families in Camden. Successfully, 662 Young people and Parents access FWD workshops and 100% of young people and parents were satisfied with the workshops delivered.

Impact: Most commons substance amongst Tier 3 cohort in Camden is cannabis 77% followed by Alcohol 41%. Impact to children includes 42% reporting a reduction in substance misuse which compares favourably to national reduction of 28%. By the time of treatment exit, young people's satisfaction score improved from 5.8 to 6.6.



Emerging themes for lead safeguarding partners to be aware of in terms of safeguarding risk and FWD response includes:

- **Ketamine Awareness:** FWD deliver targeted workshops to secondary aged students and engaged parents to raise awareness of rising ketamine use.
- **Adulterated Vapes:** FWD is informing professionals and parents about the risks of vapes mixed with illegal substances, in collaboration with public health teams.
- **Opioid Risk Response:** FWD is working with Change Grow Live to deliver naloxone training and introduce fentanyl strip testing to reduce harm.
- **Professional & Parent Training:** Being strengthened through harm reduction training for those supporting young people.

8.7 Safeguarding children from radicalisation and extremism

Strategic oversight of Prevent has been embedded within Camden Council, with governance led by the Vulnerable Adolescent Strategy Group and the Community Safety Partnership Board. This ensures joint scrutiny and a strong focus on safeguarding beyond statutory duties.

Most referrals involving under-25s relate to complex ideologies that overlap with mainstream grievances. Many do not meet the Channel Panel threshold, highlighting the need for early intervention and tailored support.

Impact: Camden Council has worked with the Police and the DfE to identify local priorities based on current risks. All activity is focused on reducing the risk of radicalisation:

- 1. **Local and National Influences:** Issues with emotional impact, locally and nationally, can fuel divisive rhetoric and extremist views.
- 2. **Online Radicalisation:** The internet and social media continue to be key tools for spreading extremist and harmful content.
- 3. **Youth and Vulnerability:** Individuals under 25, especially those with mental health needs or neurodivergence, may be more vulnerable and require tailored support.
- 4. **Evolving Ideologies:** Extremist narratives are increasingly diverse, often blending grievances to promote division and violence.
- 5. **Trauma and Risk:** Adverse childhood experiences can increase vulnerability, highlighting the need for trauma-informed approaches that consider radicalisation risk.
- 6. **Permissive Environments:** Spaces where extremist views go unchallenged can allow harmful ideologies to grow and spread.

The following is available to support practitioners in their approach to safeguarding against radicalisation:

- CSCP Parent leaflet and professionals guidance
- Prevent has newly been included in Camden's annual mandatory safeguarding training
- Additional <u>Training from the Home Office</u> is regularly shared with relevant professionals
- Multiagency training delivery on preventing radicalisation and extremism.



Development: The activity of risk of being drawn into radicalisation in Camden is higher than average with the additional risk across a broad range of ideologies. In 2024-25, a new group was formed which is Chaired by Community Safety with cross department representation to understand and mitigate emerging issues in the borough.

Scrutiny: Looking ahead to 2025–26, a key area of development will be strengthening collaboration and aligning priorities between the Camden Safeguarding Children Partnership (CSCP) and the Community Safety Partnership Board to enhance joint responses and early intervention.

8.8 Transitional Safeguarding

In Camden, we have recently redefined our commitment to transitional safeguarding as: "A person-centred approach to ensuring that where needed, young people have the foundations, relationships and protections they need to move positively into adulthood and independence... It means being creative in how we work together to support young people, innovating where it is truly beneficial whilst always prioritising getting the basics right".

Our partnership has been on a journey since the first Transitional Safeguarding Conference in 2020. Over 2024-25, the CSCP along with partners in Adults Services, evaluated our approach through a **Pilot Transitional Safeguarding Forum, to review the current offer and identify opportunities for development.** This includes:

- Support for young people with a learning disability from Camden's Children and Young People's Disability Service and the Camden Learning Disability Service work closely together to support young people with a learning disability who need continuing support.
- Minding the Gap provides robust and **community-based support** for young people moving from children's to adults' mental health support.

- Evolve is a specialist service providing 1:1 support for **young adults affected by or at risk from youth violence and exploitation**, including younger people who are transitioning into adults' services.
- Our Integrated Youth Services work with young people 18+ through initiatives including our FWD service tackling substance misuse; our Youth Justice Service supporting transitions to probation; our Summer University and our Count Me In project.
- When transferring those who need continuing support to the Adult Mental Health Service, CAMHS and EIS (Early Intervention Service for Psychosis) ensure smooth transition by providing a period of joint intervention.
- Transition of young people into Adult Social Care neighbourhood teams is promoted by early identification of young people who may require support, including young people who are care experienced or who are Autistic.
- Adult Social Care's Carers Action Plan and Young Carers Action
 Plan focus on supporting Young Adult Carers. A joint operational protocol for young carers transition is in place and undergoing further development.

CSCP Young Advisor: Young people need mental health support, financial management, life training skills, and mentoring schemes which can boost their knowledge and confidence and help them decide.

Scrutiny: Although assured of the breadth of our current offer, it was acknowledged that senior leadership buy-in is needed to maintain momentum and develop this area further. Our lead safeguarding partners aim to shape our existing range of support into a more cohesive offer which is well understood. Key principles of our local approach, informed by national research includes:

- Evidence-informed: shifting practice when new evidence emerges
- **Contextual:** understanding the range of places and spaces where young people live their lives

Streen Partnership

- **Transitional:** taking a developmental perspective, nuanced judgement and being fluid over time
- Relational: person-centred, trauma informed
- Participative: young people as equal partners in system redesign
- **Equality-informed:** Attends to questions of equality, diversity and inclusion

In 2024-25, CSCP supported the launch of a new **Transitional Safeguarding Forum**, which brings professionals from Children's and Adult's services together to respond to young people's needs. It is a strategic, multi-agency case decision-making forum to respond to young people's needs. Early meetings have taken place, and a detailed protocol has been developed for the forum. Upcoming meetings of the Transitional Safeguarding Forum will be reframed as steering group sessions, with mandated attendance from key representatives who hold the right knowledge and influence.

Development: A data review will support the steering group in making informed decisions on key operational aspects, including: (a) identifying the cohort of young people the forum should prioritise, (b) establishing a clear and consistent referral pathway, and (c) determining appropriate forum membership. The impact and effectiveness of the steering group will be subject to ongoing review throughout 2025–26, ensuring clarity around the intended outcomes of the focus groups. This process will also help define measurable indicators of success and identify areas where further support or intervention is required within the pathway.

8.9 Gender Identity Service

The Tavistock Gender Identity Development Service (GIDS), based in Camden, was established in 1989 and closed in 2024 when the children and young people's gender service was transferred to Great Ormond Street Hospital for Children NHS Foundation Trust who provide the safeguarding oversight for the London regional service. In 2025, the new service presented to the CSCP outlining its establishment to oversee the original cohort of young

people previously on the Tavistock waiting list, while also extending support to children on the national waiting list. The service highlighted a significant rise in demand between 2009 and 2014, alongside notable shifts in the demographics and presenting age of young people accessing support. In response, a provider network has been developed to create hubs of expertise and key locations for delivering care, ensuring a more coordinated and accessible approach to meeting the needs of this evolving population.

The Cass Review was commissioned by NHS England in 2020. It was an independent review, focusing on NHS gender identity services for children and young people in England. The final report and recommendations of the Cass Review were published in April 2024.

Scrutiny: Due to the high numbers on the service's waiting list, it is recognised that some children are accessing hormones privately which is a concern, which was also escalated by our Named Doctor. Practitioners are working closely with paediatric and CAMHS services to provide support and have shared assurance that safeguarding is considered in every initial consultation and various pathways of treatment. It was recognised that a high proportion of young people on the service's waiting list also experience neurodiversity.

The service has a dedicated safeguarding team established with a support structure to manage safeguarding concerns effectively. The safeguarding service provides comprehensive support including referral assessments, child protection system checks (CP-IS), and representation in multidisciplinary teams, with strategic oversight from experienced safeguarding advisors and a named doctor. It also includes supervision, national MDT support, governance monitoring, liaison with hub teams, and collaboration with GOSH Trust for complex cases. Impact of the service and support for young people on the waiting list will be an area of governance through the lead safeguarding partners.

Impact: The CSCP continues to deliver Safeguarding LGBTQ+ children and young people multiagency training. Impact is evidenced in 100% of delegates who attended agreed that the course met the identified aims and objectives and feedback includes "The course has given me the confidence to work with young people and not use any stigmatising language and have more of an awareness of what a young LGBTQ person will be going through."



9

Learning from local safeguarding reviews

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9.1 Aggregated learning from local Rapid Reviews and Practice Reviews

Shared leadership and accountability: Camden Lead Safeguarding Partners and deputies discuss serious incident notifications (SINs) and rapid reviews, deciding on further actions like Local Child Safeguarding Practice Reviews (LCSPRs). The lead safeguarding partners report to the Partnership on SINs, Rapid Reviews and LCSPRs to ensure all partners have oversight of initial identified good practice and learning.

Oversight and Governance: The QA and LCSPR Subgroup ensures quality and timely progress of reviews, with an independent scrutineer involved at every stage for transparency and accountability.

Voice of the child

All reviews involve children and families to reflect their experiences, with feedback from the multi-agency workforce.

Quality assurance: Multi agency working groups analyse and evidence improvements from SINs, rapid reviews, and LCSPRs, with key themes and recommendations highlighted in 'Learning from Review' textboxes.

Impact: Following feedback from staff development of <u>child-or-parent-death-protocol.pdf</u> and CSCP guide to serious safeguarding children incidents.

London Rapid Reviews Analysis Report

Consideration is given by the CSCP to national learning, in April 2025 our Quality Assurance Subgroup reflected on learning published in London Rapid Reviews Analysis Report which provides analysis of London Rapid Reviews 2023-24 (79 rapid reviews across 25 LCSPs in London). Themes of the Rapid Reviews were reflected locally and included:

- **Intra-Familial Harm:** Neglect was a significant theme, with concerns about medical neglect and low school attendance.
- **Extra-Familial Harm:** Mostly related to physical harm, with stabbings being common. Black children were significantly overrepresented.
- **Suicide/Attempts:** Reviews highlighted issues with placement instability and difficulty finding placements for children with complex needs.
- Other Types of Harm: Included sexual abuse, emotional abuse, harm caused by professionals, and accidents.





In 2024–25, Camden LA (on behalf of CSCP) submitted six Serious Incident Notifications, leading to five Rapid Reviews and one new LCSPR. All reviews included engagement with children and/or their families to ensure their experiences were reflected. The aggregated themes below are shared for strategic scrutiny to support systemic and practice improvement.

Serious Incident	Local strengths in practice	Local learning	National context and recommendations
An infant, who was under the care of a care-experienced mother, had significant underlying medical conditions and presented late to medical services, which was thought to have contributed to the development of a life-threatening condition requiring hospitalisation.	Continued professional tenacity and partnership working to work with parents, including through securing an ICO for the children and progressing legal planning in a timely manner. Good joint working to ensure parents were supported to attend medical appointments, administer medical and feeding regimes for the baby and provide her and her siblings with care. Strong evidence of a respectful, trauma informed approach by the Children Looked After Service to help mother, who was care experienced, understand her parenting and consider the care her children needed. Good joint working and communication between Camden Police and Camden Children's Social Care in communicating concerns and acting on information received.	Ensuring that the appropriate balance is achieved between safeguarding and adopting a trauma-informed approach, which respects parents' autonomy in decision making and caregiving especially during parenting assessments. Acknowledgement of the challenges faced in cross-borough working with multiple NHS Trusts. Including ensuring clarity regarding Parental Responsibility which was relevant given the complexity of healthcare needs. Continued effective communication to bridge gaps and continued curiosity and seeking clarification on terminology and consider its implications in how services work with both parents and children. The importance of ensuring good information sharing, escalation and resolution of challenges to deliver better care and support for the children of vulnerable parents. Health recording systems between acute and community health settings continue to experience challenges impacting information sharing, multi-agency collaboration and accessibility to those caring for vulnerable infants. Initial Health Assessments (IHA) for Children Looked After and reporting of delays to enable NHS England to understand if issues are systemic.	The following reviews and guidance were also cited in the Rapid Review discussions: Promoting the health and well-being of looked after children Aug 22 Childrens Social Care - Stable Homes Built on Love Child Safeguarding Practice Review panel guidance Childrens Social Care Independent Review Final Report London Safeguarding Children Procedures



Serious Incident	Local strengths in practice	Local learning	National context and recommendations
An 18-year-old care-experienced young person tragically died by suicide, following a suspected overdose while detained in a secure unit located outside their home borough.	Multiple examples of strong engagement, information sharing and interagency working. Evidence that most risk assessments worked, as previous medical emergency crisis intervention were successful. The very high level of support meant quick action was taken when the young person attempted to harm himself. Regular review of mental health and treatment plans which were successful is engaging the young person in various therapeutic activities and even commence trauma focused psychology sessions. Exemplary work from a number of colleagues who maintained trusted therapeutic relationships with the young person. Including continuity from his Personal Advisor, who despite changing her role, remained as his key contact, in order to offer continuity as a trusted person in his life. The young person was supported by Camden's virtual school to achieve 5 GCSEs (A-C grade) in just four short months, despite a disrupted education and traumatic childhood experiences. Professional advocation for reasonable adjustments to allow engagement with legal processes and hearings.	Impact of racism and adultification bias for care experienced young people. Consideration to the experiences of racial bullying, and abuse as a newly immigrant child which continued into adolescence. The review also considered how vulnerability and mental capacity was perceived and how criminality was responded to by the justice system. This included how assessments affected self-perception, contributed to mental health deterioration, and led to further episode of self-harm. The review considered placement sufficiency and stability for black children in care, including limited specialist secure provision to support those with complex mental health needs. The review looked at immigration status and impacts on mental health and the two-year wait for a positive conclusive NRM decision which had significant implications impacting mental well-being but also affecting safeguarding further risk of harm.	The following reviews and guidance were also cited in the Rapid Review discussions: Childrens Social Care - Stable Homes Built on Love Child Safeguarding Practice Review panel guidance Childrens Social Care Independent Review Final Report Toolkit for supporting care leavers in custody Camden and Islington Suicide Prevention Strategy and Action Plan





Serious Incident
Concerns were raise
regarding an infant
where suspected
neglect and physical
emotional abuse
were identified, with
medical professional
reporting injuries
consistent with non-

accidental harm. The

challenges including

and ongoing mental

health and substance

mother, who was

care-experienced,

faced multiple

past trauma,

domestic abuse,

misuse issues.

Local strengths in practice

Strong evidence of **cross borough working** and good case recording, with **statutory processes** taking place in a **timely way** with family kept **informed** with each decision.

DARA risk assessments were completed and a further MARAC to MARAC referral was submitted to ensure cross-borough partners were notified of domestic abuse concerns.

Evidence of **multiagency working** by health visiting with support in accessing food vouchers, safe formula feeding, Clare's Law, benefits and advice regarding rent arrears. **Domestic abuse** was regularly **discussed and documented** during HV visits.

Timely communication of concerns from the clinical team with children's social care and Police's CAIT Team.

Comprehensive care for Baby PC's mother during late pregnancy, which included referrals to **community services** to help with understanding of domestic abuse.

Local learning

Working together and information sharing when working with vulnerable expectant mothers with complex histories who are supported by family across geographical boundaries.

Working in a **trauma-informed way** with care experienced expectant mothers experiencing **domestic abuse** who may experience further barriers in recognising this or accepting support.

Consideration of the obstacles encountered in presenting **parenting capacity** to the court due to the transient nature prior to birth and **complex history of mother**. This included temporary support by wider family members in another part of the country. This reinforced the importance of how **information is shared** with the **Court** to enable them to make decisions.

National context and recommendations

The following reviews and guidance were also cited in the Rapid Review discussions:

https://www.gov.uk/government/publications/ safeguarding-children-under-1-year-old-from-nonaccidental-injury

Childrens Social Care - Stable Homes Built on Love

Child Safeguarding Practice Review panel guidance

<u>Domestic Abuse: statutory guidance (accessible version) - GOV.UK</u>



Baby sadly found unresponsive by his mother, in care of young mother is care experienced and has a complex history. Baby's death is currently understood to be unexplained, but further investigation is taking place. A LCSPR is underway is being progressed.

Timely handover and transfer in visit arranged to enable a **robust handover of information** to another borough outside London.

Regular home/clinic visits to monitor the children's health and development. Safe sleep was discussed, and safeguarding notifications were actioned promptly.

Active supervision of repeat medication of controlled drugs by GPs. There were repeated efforts to engage and enable identification of concerns around prescribing medication while living out of the area.

Ensuring adequate consideration of **parenting capacity** and **risk assessment** for children who may be residing **out of borough** at times, particularly when domestic abuse and substance misuse are factors.

How **cross-borough working** impacted on parenting assessment and decisions to step down given **ongoing concerns** about domestic violence and its risk to children in the household.

Limited understanding about fathers early life and wider support network.

The Review explored multiple, overlapping disadvantages, such as racial discrimination, poverty, and the lasting effects of childhood trauma, and how professionals considered these in their support and decision-making.

The following reviews and guidance were also cited in the Rapid Review discussions:

Childrens Social Care - Stable Homes Built on Love

<u>Child Safeguarding Practice Review panel</u> <u>guidance</u>



Serious Incident

A care-experienced young adult (who formerly an unaccompanied asylum-seeking child), tragically died by suicide while detained in a prison located outside of their home borough.

Local strengths in practice

Collaboration between Critical Care Medical Team and Nursing Staff with multi-agency professionals and family members. Continuing to maintain rights and dignity and providing support to family members.

Consistent support from a PA from the age 18 until his death. The Care Experienced Service **visited and advocated** for family visits until his death.

Social Workers **acceptance of age** and **advocated** for with the Home Office, achieving age acceptance in July 2023.

A **referral to CAMHS** due to trauma suffered and continued mental health struggles.

Practitioner support to locate family members via the Red Cross Family Tracing Service ensuring a **renewed sense of community** and belonging via local Sudanese **community offer**.

Local learning

Legal framework for Care Experienced young adults and the meaning of corporate parenting responsibility given the **unique trauma and vulnerability** of former UAS Children.

Understanding how the wider family network is able to support during serious incidents and to offer bereavement support for care-experienced young adults who are former unaccompanied UAS Children.

Understanding **complexities of transitioning to adulthood**, especially for UAS Children. Understanding and acknowledging that vulnerability to exploitation remains a significant local and potentially national challenge.

Reflection on the care around **historical physical injuries** and how unresolved issues **perpetuated trauma** from the journey to the UK.

Continued opportunities to understand how age, culture, language barrier, might have influenced access to mental health care including cultural stigma around mental health.

Critical issues in care history, highlighting the difficulties encountered across agency **records and information systems** in recognising UAS Children's care-experienced **background and vulnerability**.

Impact of **pervasive loss** for former UAS Children care experienced people. Each of these losses reinforce the **immense challenges** faced by UAS Children and highlighted the urgent need for **comprehensive support systems** for them as care experienced young adults.

National context and recommendations

The following reviews and guidance were also cited in the Rapid Review discussions:

<u>Children_s_Social_Care_Stable_Homes_Built_on_Love_consultation_response.pdf</u>

<u>Child Safeguarding Practice Review Panel</u> guidance for safeguarding partners (2022)

Race_Racism_Safeguarding_March_2025.pdf





9.2 Taking forward learning from Child Death Overview Panel (CDOP)

All Local Safeguarding Children Partnerships are required to have a Child Death Overview Panel (CDOP) to improve the health, safety and wellbeing of children and find ways to prevent further child deaths. We know that every death of a child is a tragedy that deeply affects their families, friends, and the communities in which they lived. Purpose of CDOP is to:

- Identify any lessons that can be learned to improve the health, safety, and wellbeing of other children.
- Determine if a death was preventable, by looking at any modifiable factors.
- Recommend actions that could help prevent future deaths.
- Spott patterns or trends in local data and share findings with the safeguarding partnership to recommend changes and improvements.

North Central London Child Death Review Partners have completed their fourth annual report of the Child Death Overview Panel (CDOP). The panel reviews every death of a child and young person aged up to 18 years of age, resident in Barnet, Camden, Enfield, Haringey, and Islington boroughs. The CDOP has established network groups with LSCPs, LADOs, Education Leads, and QA Managers in Children's Services to support the dissemination of learning from CDOP.

Key findings: NCL Child Death Overview Panel were notified **of 449 child deaths** (1 April 2019 – 31 March 2024):

- 1 in 3 deaths occurred in the first 27 days of life
- 1 in 3 deaths occurred in children living in areas amongst the 20% most deprived in England
- Males had a significantly higher child death rate than females
- Top three causes of child deaths: 1) Chromosomal, 2) genetic and congenital anomalies; 3) Perinatal/neonatal event/ Malignancy

- Children from a White Other, Black or Black British, and Asian or Asian British ethnic group had a significantly higher death rate than those from a White British or Irish ethnic group.
- 19% of reviews identified one or more modifiable factors.

Notifications: In 2024-25, NCL CDOP received **88 notifications of child deaths**. Of these cases (16) were for Camden children, with a further 3 children normally resident outside of Camden. Statutory guidance defines an unexpected death as the death of a child that was not anticipated as a significant possibility 24 hours before the death. There were 6 JAR meetings in Camden in 2024-25.

Key learning areas taken forward and reported to CSCP include:

- The consistent use of interpreters
- Consistent recording of social risk factors
- Intersectionality between complex social factors and child deaths
- Starting pregnancy at a healthy weight
- Information sharing within and between agencies
- Recording of consanguinity and referral for genetic counselling
- Barriers to engaging with health care

These findings are being actively monitored and addressed through structured reporting within the safeguarding children partnership. Action plan has been developed in response to CDOP learning, which includes initiatives such as the 'Navigating the NHS' resources, a 'making every contact count' approach focusing on smoking cessation, vaccinations, healthy weight, and safe sleeping, as well as improved information sharing between private and NHS mental health services. Progress and impact are tracked, while multiagency CDOP representatives within the Quality Assurance and LSCPR subgroups help drive actions forward and report on outcomes and effectiveness.



Scrutiny: Disproportionality and health inequalities in child mortality have been raised as key concerns across CSCP meetings and subgroups. In response, Camden Public Health partners are actively working to better understand and respond to trends affecting specific ethnic and socioeconomically disadvantaged groups. This work aims to identify and address disparities in outcomes for children and families. Local initiatives—such as safer sleep awareness, mental health support, and accident prevention campaigns—have been developed in collaboration with the Integrated Care Board (ICB). These efforts are part of a broader commitment to reducing inequalities and improving outcomes for all children, regardless of background.

Parent feedback: The below shares some examples of good practice shared by families who have tragically experienced the death of a child:

Support services

- Services like Life Force and Noah's Ark were repeatedly commended
- Referrals made for other needs like mental health or developmental delays in other children
- Critical importance of providing language support
- Numerous examples of excellent care

Communication

- Excellent communication with family about treatment options and palliative care
- Strong multidisciplinary team working and communication between services

Parent-centred

- Consistency and continuity is valuable for families
- Acknowledgement of strong parenting: child well-prepared and wellsupported
- Value of support with memory making activities
- Parents felt informed
- Importance of extended family which enabled parents to care for unwell child

Holistic support

- Enabled child to die at home
- Palliative care delivered in place of choice
- Support for funeral planning
- School commended for good care of child before death
- Good end of life care allowed child to die with dignity





Impact: In June 2024, a Sudden Unexpected Deaths in Infancy (SUDI) Panel took place and identified several learning points including the impact of the Covid – 19 pandemic and delayed contact with primary health care. A key theme that emerged related to safer sleeping and highlighted the need to ensure that relevant services:

- Include where the baby sleeps as a risk factor in assessments.
- Ensure all family members caring for an infant overnight are reminded of the dangers of co-sleeping and taught safer sleeping.
- Provide clear safety guidance to parents who choose to co-sleep.

The panel recognised there was also several of the known risk factors for SUDI including prematurity, parental smoking, and alcohol use, along with parental mental health.

A panel looking at Serious Youth Violence was held at the beginning of July 2024. The panel discussed seven cases and was used as an opportunity to trial a screening tool that could be used across London to look at common risk factors in an attempt to identify trigger factors for early intervention. Shared themes were identified across the children's lives including adverse childhood experiences, bereavement, and exposure to domestic violence in infancy. Members of the panel have agreed to reconvene to consider how the learning will be taken forwards.

Regional Learning: Thematic panels

Our local safeguarding arrangements encourage both national and local learning and reflection. In 2025, CDOP informed the lead safeguarding partners of three themes which have arisen from child deaths across North Central London. The learning identified is systemic, in that it has been identified in more than one case, although there are some exceptions to this. Children and young people's mental health was identified as a contributory factor in a number of avoidable deaths and in Camden we're taking forward the learning from this theme with local and

regional partners. Details of how our local safeguarding arrangements are responding to other themes include:

Holistic Multi-Agency Assessments

A recurring theme across NCL CDOP reviews is the importance of holistic, multi-agency assessments that consider the parent-child relationship within the context of the family's history and vulnerabilities. Camden has responded to this by refreshing the CSCP-multi-agency-support-and-assessment-guidance-2024.pdf. The transition to Family Help and the formation of multi-agency child protection teams, as part of national social care reforms, are expected to further strengthen this approach.

Housing and Environmental Conditions

Ensuring that housing conditions and equipment are suitable for children with learning disabilities and complex health needs remains a priority. Camden has taken steps through the implementation of its <u>2024 Damp and Mould Policy</u>, which adopts a zero-tolerance approach to poor housing conditions. Learning from national reviews and local serious incident notifications (SINs) has highlighted the need for professional curiosity around overcrowding and its impact on infant safety. A housing restructure is underway to improve prevention and service delivery, supported by initiatives such as the CSCP's Free from Falls campaign.

Safer Sleeping and Infant Safety

Children under two have historically made up the largest proportion of local serious incident notifications, prompting the CSCP to commission bespoke multi-agency training on safer sleeping and infant safety. This training has shown strong impact, with 100% of participants reporting improved ability to identify and respond to safeguarding concerns. Ongoing efforts include consistent safer sleep messaging across universal services, ICON training embedded in neonatal discharge processes, and clear follow-up protocols in hospitals. A dedicated CSCP webpage and resources from the Lullaby Trust further support professionals and families in reducing the risk of SUDI.



Local Authority Designated Officer (LADO)



Scrutiny: Ofsted Children Services Inspection 2025: "The few areas of improvement at the last inspection are now areas of strength. The local authority designated officer (LADO) arrangements are now highly effective".

Camden has a social work qualified dedicated Local Authority Designated Officer (LADO) who is responsible for responding to safeguarding concerns about staff and volunteers who work with children in Camden. Camden has a named detective sergeant responsible for LADO which ensures that information sharing is effective, and prompt decisions are made regarding abusive adults. The operational LADO continues to participate in the London LADO network meetings and maintains close links with the neighbouring boroughs. The CSCP webpage provides advice and information on managing allegations about staff and volunteers including policies for local partners and referral details.

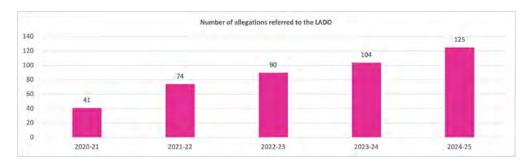
Impact: CNWL continues to work closely with Local Authority Designated Officers (LADOs) to ensure robust responses to safeguarding concerns involving staff. The organisation has implemented a refreshed Allegations Against Staff policy, designed to support safeguarding practice and reassure our commitment to safer staffing. Ongoing work is focused on addressing disparities in LADO referrals and improving the consistency of staff support when allegations arise.

Engagement in safeguarding arrangements: Consultation and referrals from agencies

Our local arrangements enable informal consultations to take place prior to making a formal LADO referral to enable advice to be sought. In 2024-25, 178 consultations took place with 10% progressing to a formal LADO referral. Most consultations were carried out with schools, nurseries and health settings.



2024-25 saw a continued increase in the number of referrals made to the LADO with 125 referrals compared to 104 the year prior.



As shown in the chart, the most prevalent alleged abuse category related to physical abuse followed by sexual abuse, emotional abuse and neglect. This year saw an increase in the proportion of referrals which identified neglect as a concern from 2.8% the year previous.



period include (some referrals had multiple outcomes):

- 55 cases escalated to an Allegations against Staff and Volunteers (ASV) meeting.
- 31 cases resulted in referrals to the Police
- 19 cases resulted in disciplinary proceedings/ referrals to professional bodies.

- 9 cases were found to be complaints and were referred to other services
- 9 cases were referred to children social care
- 6 cases were referred to the Disclosure and Barring Service
- 70 cases resulted in no further action

Scrutiny: Improving the timeliness of investigations is a key focus for the LADO Service Manager and Police Lead, including efforts to enhance meeting attendance and streamline investigative processes. Regular audits of the LADO will continue, alongside peer audits to ensure consistent thresholds and high-quality recording. This will be an area overseen by our lead safeguarding partners.

Impact: The CSCP multiagency training programme includes a bespoke managing allegations about members of staff training session which is facilitated by Camden's Designated LADO.

Impact: The impact of the training is evidenced in the higher number of referrals. In 2024-25, 100% of delegates who attended the training, indicated that the training had supported them in feeling more confident to recognise and respond to safeguarding concerns. Over the past year, the LADO team has delivered 15 workshops to a diverse range of audiences including charities, schools, healthcare professionals, and faith groups, reaching more than 150 attendees. This year's training has expanded to include greater engagement with faith communities, non-English-speaking organisations, and groups within the voluntary sector.



Communication Strategy



11. Communication Strategy

As a partnership, we recognise that effective communication is key to sharing our vision across Camden and strengthening our multi-agency safeguarding workforce. This includes everyone from strategic leaders to frontline practitioners working with children, young people, and families. Our communication and engagement strategy supports information sharing, learning, and policy development, including training.

In 2024–25, our training programme reached 676 multi-agency professionals, supporting the development of safeguarding practice across the borough. The interconnectivity between the CSCP's Learning and Improvement Framework and its training strategy ensures a broad, high-quality programme that is responsive to emerging needs.

We continue to share strengths and areas of improvement identified through recent inspections, to enhance safeguarding outcomes. This approach has also helped socialise the multi-agency network around major changes, including the national social care reform programme, updates to Keeping Children Safe in Education (KCSIE), and the Metropolitan Police Service's revised Children's Strategy for London.

The methodology for delivering key messages to multi-agency frontline leaders, middle managers, and the wider workforce is structured around a cycle of quality assurance, dissemination, and impact evaluation. It begins with gathering insights from audits, inspections, feedback from families and professionals, and data analysis. These insights inform a range of dissemination methods including training, briefings, workshops, forums, and digital communications. The impact is then measured through performance indicators, feedback, and observed improvements in practice, ensuring that safeguarding messages are effectively embedded across all levels of the partnership.



Cycle of quality assurance, dissemination, and impact evaluation

Quality Assurance - Input



- Single / Multi-agency audit activity
- Feedback from national, regional and local workforce surveys
- Evaluation by Independent Scrutineer and Young Advisor
- Feedback from families and young people
- Multi-agency Dataset
- Single and Joint Inspections
- Serious Incident Notifications, Rapid Reviews and LCSPRs
- LSCP self-evaluation: Annual Report and Business Plan
- Training need analysis
- Multi-agency escalation of professional differences

Mode of Dissemination



- Single and multi-agency training
- 7-minute briefing
- Multi-agency workshops/ focus groups
- Regional conferences (London or North Central London)
- Speaking at Forums and Service meetings (DSL, GPs and Children's Services)
- Partnership and Subgroups meetings (linking strategy and operation)
- Lunch and Learn Sessions
- Voluntary Action Camden Commission of safeguarding awareness raising in community settings
- Website, e-newsletter and social media/ X
- Films/ Recordings
- Sector-Led Improvement

Impact Evaluation



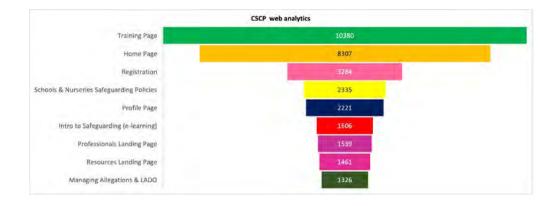
- Safeguarding thresholds maintained
- Statutory partners lead local safeguarding arrangements
- Outcomes for children and families
- Multi-agency Dataset
- Key Performance Indicators
- Feedback from families and young people
- Feedback from multi-agency partners/ workforce
- Development of practice seen in audits, serious incident notifications, Rapid Reviews, and LCSPRs
- Involvement in national reform research
- Training Evaluation Feedback



Insights from Website Analytics (2024–2025): www.cscp.org.uk

Web analytics is a powerful tool for the CSCP website, offering valuable insights into user interests, learning needs, and the effectiveness of our communication and training approaches.

Impact: Engagement Depth: Between April 2024 and March 2025, the website recorded 74,491 page views and 15,163 unique visitors, with users viewing an average of five pages per visit. This level of engagement reflects a healthy interest in our content and suggests that users are actively exploring the site to access information and resources.



These insights help us better understand the reach and impact of our safeguarding arrangements across both statutory and voluntary sectors. They also enable us to target communications more effectively, ensuring that key messages and resources are reaching the right audiences. Furthermore, the data informs how we structure and prioritise content to meet the evolving learning needs of our multi-agency workforce.

Content Demand

- The **Training Page** was the most visited (10,380 views), highlighting strong demand for This insight allows the CSCP to target our communication more effectively.
- High views for safeguarding policies and managing allegations pages suggest users are actively seeking compliance and procedural guidance.
- Lower engagement with landing pages (e.g., Professionals, Resources) may indicate a need to enhance navigation or content relevance.
- Our website is predominantly UK-focused, which aligns with CSCP's remit, but has 14% global reach (notably from the USA, Netherlands, Ireland, Germany, and Finland).





12

CSCP Multi-agency training 2024-25

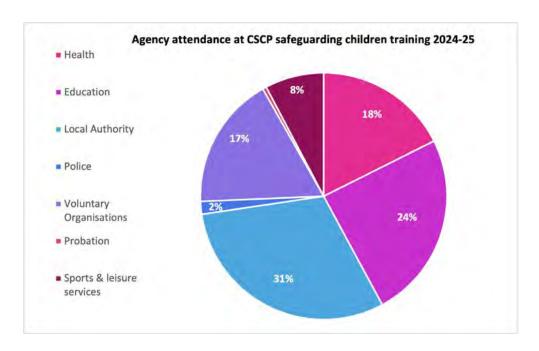
Leadership: Inter-connectivity between quality assurance and training

The inter-connectivity between the CSCP's Learning and Improvement Framework and its training strategy supports our aims to ensure provision of a broad and high-quality programme of learning and development for multi-agency staff. The purpose of our varied safeguarding training programme is to upskill staff and volunteers working in Camden to strengthen their ability and confidence to identify and support children at risk. The Learning & Development Subgroup is responsible for ensuring that safeguarding training needs are identified, and an effective training programme is delivered, in accordance with our Training Needs Analysis.



Impact: CSCP multiagency safeguarding training delivery 2024-25

The CSCP held 32 safeguarding children training courses and learning events in 2024-25, training 676 multi-agency professionals. **This year, the reach of the CSCP safeguarding children training programme has increased by 21%**.



Both virtual and in person training was delivered. Trends in the proportion of agency attending training has remained similar over the years mirroring our safeguarding arrangements.



Scrutiny: Our lead safeguarding partners have identified that low take up of multi-agency training from Police colleagues requires increased focus as this has been identified as a recurring theme. Assurance has been sought that the MPS have a robust safeguarding training programme, however, the importance of collaboration in multi-agency training forums is important to build relationships and understand wider issues across multi-agency services.

Impact of our training offer: How we deliver against our training needs analysis Throughout the report, each section shares detailed information of our varied safeguarding children training opportunities and the impact this has on frontline practice. The CSCP's child safeguarding training programme is constantly reviewed and amended to meet local needs. A proportion of training courses are routinely commissioned and included on the training programme each year.

Impact: Workshops are also organised throughout the year to ensure frontline professionals are up to date on emerging issues and themes arising from serious safeguarding incidents. Workshops allow the opportunity for multi-agency professionals to gain a better understanding of the challenges faced by services and plan ways of collaborative working.

Due to evolving training needs, the following provides some examples of learning opportunities which were identified through the training needs analysis and delivered in 2024-25:

Learning from	Commissioning CSCP multi-agency training:	Outcome
Learning from Serious Safeguarding Incidents: Safeguarding Incident Domestic Abuse	CSCP multi-agency learning event: Safeguarding Incident Domestic Abuse	This event was attended by 35 frontline practitioners to gain further insights into learning from our local serious incidents relating to domestic abuse and broader themes from domestic abuse reviews. The event considered the new Joint Targeted Area Inspections (JTAI) theme 'child victims of DVA'. 100% of delegates who attended the course rated the course content and materials as good or excellent.
Learning from Serious Safeguarding Incidents: Supporting children looked after and care experienced young people	CSCP multi-agency learning event: Working with Care Experienced People in relation to their mental health	The following overarching themes were considered as part of a multiagency conference in September 2024: Intersectionality and enhancing understanding of experiences, transitional safeguarding with care-experience people, working with the refusal or non-acceptance of help and how we develop our approaches when working with young people experiencing mental health.



Learning from	Commissioning CSCP multi-agency training:	Outcome
Learning from Local Child Safeguarding Practice Review: Mental health and children services joint working	CSCP lunch & learn: Supporting joint working between children's services and adult mental health services in Camden	Our joint working protocol between children services and adult mental health was refreshed and developed to ensure effective joint working between the services whenever parental mental ill health is impacting negatively on a child's safety, welfare and development or when those families affected need extra support to meet their children's needs. This session was used to highlight the joint working protocol, changes made and strengthen collaborative working. 30 frontline practitioners across the services contributed to the event.
National Learning: Information Sharing	CSCP multi-agency workshop: Empowering information sharing and joint working	This lunch and learn was organised to provide professionals with the legal framework around information sharing and to increase professional confidence. It supported multi-agency working, understanding of challenges and empowered professionals to use information sharing tools.100% of participants agreed that the session met the identified aims and objectives.

Impact: Following Royal Free Hospital NHS Foundation Trust participation in local safeguarding practice reviews, they have developed safeguarding children training relating to children who are hidden from services, and raising awareness of safeguarding risks posed by trans, non-binary and gender querying young people. In response to the national report 'I wanted them all to notice' they also developed a specialist seminar to support staff in recognising and responding to child sexual abuse, particularly within the family environment.

Evidencing impact on safeguarding practice

The CSCP evaluation model consists of a three-stage process to evidence impact on practice.

Stage 1

A baseline for each participant's level of knowledge pre-attendance

Stage 2

End of course evaluation form demonstrates what the participant has learnt from the training session

Stage 3

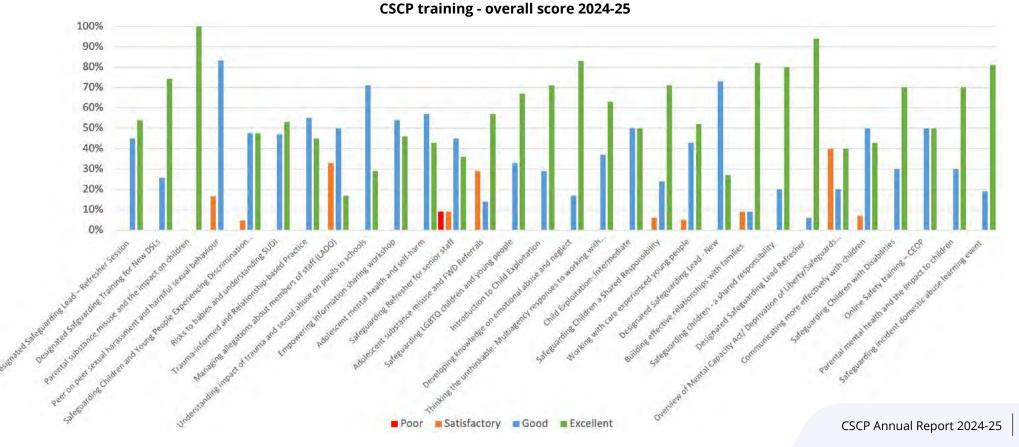
To ascertain whether the course has had impact on their work



Impact: Through the three-stage evaluation, it is evidenced that a high proportion of delegates sustain a good level of knowledge and confidence 6-8 weeks after the course and can evidence on how attending the training session has impacted their work with children and families. 95% of CSCP training courses are evaluated as good or excellent, evidencing that safeguarding training delivered to multiagency professionals is delivered at a high standard and reflects local and national learning.

When a 'satisfactory' or 'poor' rating is provided for a course, the Learning & Development Subgroup reviews delegate feedback to suggest improvements to the trainer to consider and implement in future training being delivered. This ensures that all CSCP safeguarding training:

- Is in line with best practice, current research and local knowledge
- Meets required standards and local needs
- Supports the CSCP Business Plan objectives and priorities
- Enables the development of a skilled and competent multi-agency children's workforce





Impact: The work of CSCP takes an intersectional approach to ensure our work is based on the understanding that individuals and communities have dynamic, fluid identities and diverse circumstances. This includes actively tackling racism, thinking about what anti-racist safeguarding practice means in partnership working, relational safeguarding and tackling the drivers of family vulnerabilities. To achieve this, our local demographics are shared with our CSCP trainers to ensure that training content and case studies are reflective of Camden's population. Throughout our evaluation model we seek feedback on how each course has effectively promoted equal opportunities and anti-discriminatory practice, in 2024-25, 99% of delegates agreed that CSCP training promoted this.

Feedback from frontline practitioners: Example feedback from delegates on the impact of CSCP training:

Increased my confidence as DSL which will hopefully come into play if any safeguarding issues arise. It will feed into my next annual review of our policy and procedures in June 2025.

The training was helpful to think about the referral process and to think about the different roles of professionals and meet different colleagues.

It has increased my awareness of risk factors for exploitation and to keep it in mind when doing my assessments.

The trainer was amazing, so naturally passionate and engaging, I really enjoyed and learnt so much from the session.





This was very informative and helpful for my practice.
The course helps me to identify risk group and take action where necessary.

I have followed up a safeguarding concern with a school for a vulnerable child and there is now a professionals meeting arranged, and further information shared with CAMHS.

Excellent communication, passionately delivered from a perspective of clear expertise. Really helped me to top-up my confidence on how to be an effective DSL. Really enjoyed it.

I will think much more deeply about the family's background and what their experiences may have been as a result of this.

I will speak more overtly about race, and consider this with all of the families I work with.

Governance: Auditing the local safeguarding training offer

Scrutiny: Our safeguarding arrangements ensure that our safeguarding children training offer remains up to date and reflective of local needs and therefore CSCP training courses are subject to audit. Following focus from the partnership on a particular theme, the associated courses are identified for auditing to ensure that learning from the exercise is incorporated, ensuring that key messages reach wide-ranging frontline staff.

Engaging the community in safeguarding children training

Voice of the community

Voluntary Action Camden (VAC) has a long-standing partnership with the CSCP and has been at the forefront of tailor-made safeguarding training and support which is flexible to the needs of our local communities for the last 17 years. This demonstrates Camden's commitment to culturally competent practice and equipping all communities with the knowledge and resources to ensure the safety, welfare, and inclusion of all children. The project continues to evolve in accordance with the needs of the sector; responding with innovative, adaptive, and preventative training solutions and support to improve the lives of children and their families in Camden. This has been achieved by being a critical friend and conduit in channelling information from statutory service providers to BME (black, minority and ethnic) community leaders, micro-community organisations and faith groups. This enables communities to have a safe space to deconstruct narratives which subsequently allow help to be asked for earlier.





Impact: The Community Safeguarding Partnership Project listens to the voices that emerge from Camden's Voluntary sector communities and takes a solution focus approach to supporting them with their safeguarding challenges. It examines the specific vulnerabilities and contextual factors affecting children from minoritised cultural and ethnic backgrounds, and aims to deliver services that recognises potential barriers to accessing support with delivery alongside community organisations.

A total of 298 community sector/ leaders have been trained over 51 safeguarding children training sessions. Themes of the training sessions have included:

- Introduction to safeguarding children
- Safeguarding advanced refresher
- Safeguarding Children and Dementia Awareness (In partnership with **Bluebird Health Care**)
- Safeguarding and good mental health (In partnership with **Reach Out Camden**)
- Who cares for the carer? Safeguarding young carers in the community. (In partnership with **Camden Carers**).
- Women and Girls Personal Safety (In partnership with the Safeguarding Foundation).
- Safeguarding black and ethnic minority children. (In partnership with AFRUCA Safeguarding Children).
- Healthy Relationships 1: Understanding domestic abuse and coercive control (In partnership with Hopscotch Women's Centre)
- Healthy Relationships 2: Bullying, harassment, stalking and disclosures. (In partnership with **Tender**).
- Understanding Gaming and Gambling harms. (In partnership with YGAM)

Effectiveness of single agency safeguarding training

The Learning and Development Subgroup ensures that all agencies are providing regular and good quality single agency safeguarding children training. Each year, CSCP partners complete an exercise to provide an overview of their safeguarding children training programme, priorities, and compliance figures to provide the CSCP with assurance that high quality safeguarding training is available within single agencies. Impact of this sharing of information allows single agencies to compare training programmes, identify any gaps in training provision and support the commissioning of additional courses. Assurance was received that a high proportion of staff across the network were safeguarding training complaint, and those that weren't, evidenced plans that were in place to address this.

Scrutiny: In 2024-25, the CSCP encouraged partner agencies to develop a clear and effective training metric and training needs analysis to provide:

- Identification of safeguarding children training needs and the courses available which respond to these needs.
- Evidence of local and national learning being incorporated into safeguarding training.
- Monitoring and adequate reporting systems of safeguarding children training compliance
- Impact of safeguarding children training and how this is monitored.

Progress made will be monitored by the Learning & Development Subgroup which will provide opportunities for peer learning and development.



Impact: To maintain connectivity with Camden schools and ensure a consistent level of safeguarding awareness, CSCP commissions Designated Safeguarding Lead (DSL) training. This includes both refresher courses for those DSLs requiring a biannual training update and a full session to provide new DSLs with the skills and knowledge to become an effective safeguarding lead within their setting. By providing this unique offer, the CSCP is assured that education settings understand local needs, trends and learning from incidents are widely shared. In 2024-25, the CSCP trained 146 education professionals ranging from early years providers to further education settings. Impact of this training is evidence in 100% of delegates agreeing that the training has helped them to recognise and respond to safeguarding concerns.

Feedback from frontline practitioners: Feedback on impact from a delegate: 'This course has highlighted some very important areas in our workplace regarding staff inductions that I will be reviewing and implementing if not already in place.'

Impact: In 2025, North London NHS Foundation Trust reviewed their Level 3 safeguarding children module and benchmarked against the intercollegiate guidance. As part of their training programme, they added domestic abuse and harmful practices all age modules to align with their approach to safeguarding vulnerable children living in households with parents who experience mental health.

Impact: UCLH provides context-specific safeguarding training for hospital staff working with children and young people, addressing unique clinical challenges and specialist areas like Neonates, maternity, and adolescent care. While Levels 1 and 2 consistently meet the 85% compliance target, Level 3 remains a focus. To improve uptake, the Trust offers flexible training options (e-learning, virtual, bespoke), sends monthly reminders, and allows advance booking. In 2024–25, UCLH partnered with Great Ormond Street Hospital to pilot Level 4 safeguarding training for Named Professionals across North Central London, reinforcing regional commitment to safeguarding priorities.

Impact: In 2024-25, the Tavistock & Portman commissioned a bespoke Safeguarding Knowledge & Skills course to support the safeguarding supervision requirement outlined in the Intercollegiate Document 2019. This has seen quarterly safeguarding supervision rolled out to all teams working directly with families and has led to the development of a database to monitor safeguarding supervision compliance across the service with improved recording and documentation on the child's electronic record.

Impact: Since April 2024, Great Ormond Street Hospital have introduced monthly for internal and external participants on key safeguarding themes to ensure that learning is widely disseminated and shared. The Trust also marked their three-year anniversary of their new safeguarding training programme with 91% compliance April 2022 to March 2025.







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CSCP financial arrangements

Partnership funding by Local Authority, Health, Police and national Probation Service has maintained similar levels to previous years.



Camden local authority contributed to 66% of the income, with ICB contributing 13% and the Police 2%. Partners have continued to contribute resource through their engagement at multi-agency safeguarding subgroup, assurance meetings, audits, learning reviews and through the and the delivery of CSCP training and workshops.

At the time of writing, the North Central London Integrated Care Board (NCL ICB) is undergoing significant financial restructuring, with government-mandated reductions in operating costs. These pressures are part of wider NHS reforms. Camden's lead health partner has updated the CSCP on ongoing discussions about future structural arrangements. While decisions are pending, options are being explored to safeguard service continuity, local accountability, and delivery of safeguarding priorities.

The CSCP is committed to delivering value for money by ensuring that partnership resources are used efficiently, effectively, and equitably. This includes:

- **Efficiency:** Commissioning and procurement aligned with market standards and quality.
- **Effectiveness:** Clear outputs and impact-focused delivery, monitored through audits and reviews.
- **Evaluation:** Regular measurement of outcomes to assess impact and inform improvement.
- **Equity:** Ensuring safeguarding efforts reach all communities across Camden.

Financial Arrangements



Breakdown of partner contributions and expenditure:		
Description £		
Description	Expenditure	
Staffing cost: 1 CSCP Manager, 1.6 CSCP Development Officer, including maternity costs and CSCP Young Advisors x 2 (casual hours).	£181,823	
Fees for Professional Services: LCSPR Independent, Reviewers , Independent Multi-Agency Auditors and Independent Scrutineer and temp/P/T Project Officer to develop arrangements.	£49,615	
Multi-agency safeguarding training	£18,421	
Other: Provisions for website hosting, development, membership to TASP maintenance, digital publications and IT software/hardware purchases – including one-ff NIHR funded project.	£23,382	
Total Expenditure	£273,241	

Income and Contributions	
Camden Local Authority	£220,283
NCL ICB	£33,450
MOPAC	£5,000
National Probation Service	£1,000
NIHR Funding for development of Multiagency Safeguarding Arrangements – Camden's Young Scrutineers model	£13,508
Total	£273,241



Camden Safeguarding Children Partnership membership 2024-25



Camden Safeguarding Children Partnership membership 1 April 2024- 31 March 25		
Lead safeguarding partner representatives		
Agency	Job title	
Camden Council	DCS and Exec Director for Children and Learning	
NCL Integrated Care Board (ICB)	Director of Safeguarding and Looked After Children	
MPS Central North – Camden & Islington	Chief Superintendent	
Camden Learning	CEO Camden Learning	

Delegated safeguarding partners and designates	
Camden Council	Director of Children's Prevention, Family Help and Safeguarding
Camden Council	Director of Relational Practice
NCL Integrated Care Board (ICB)	Designated Nurse for Safeguarding
MPS Central North – Camden & Islington	Detective Superintendent
Camden Learning	Senior Adviser Safeguarding & Inclusion, Camden Learning



Relevant agencies		
Camden Local Authority Departments		
Agency	Job title	
Camden Council	Head of Violence Against Women and Girls Lead	
Camden Council	Director of Public Safety	
Camden Council	Head of Integrated Youth Services	
Camden Council	Head of Neighbourhoods	
Camden Council	Head of Children's Quality Assurance	
Camden Council	Head of SEND and Inclusion	
Camden Public Health	Director of Health and Wellbeing	
Camden Public Health	Director of Health and Wellbeing	

Camden Health NHS Trusts and Services		
Agency	Job title	
NCL Integrated Care Board (ICB)	Designated Doctor for Safeguarding	
NCL Integrated Care Board (ICB)	Named GP Child Safeguarding	
North London Mental Health Trust (Camden and Islington)	Named Doctor	
North London Mental Health Trust (Camden and Islington)	Deputy Associate Director	
Central North-West London NHS Trust	Head of safeguarding	
Great Ormond Street Hospital	Chief Nurse	
Great Ormond Street Hospital	Named Nurse	
Great Ormond Street Hospital	Nurse Consultant Safeguarding & Named Nurse	
Tavistock & Portman NHS Foundation Trust	Interim Safeguarding Children Lead	
Tavistock and Portman Trust	Named Doctor, Consultant Child Psychiatrist	
University College London Hospital	Lead for Children & Young People's Safeguarding	
University College London Hospitals	Named Doctor for Child Safeguarding	

Schools		
Agency	Job title	
Fleet & Rhyl Primary School	Executive Headteacher	
William Ellis Secondary School	Headteacher	

National Probation Service		
Agency	Job title	
National Probation Service	Head of Service	

Independent Scrutiny	
Agency	Job title
Independent	Independent Scrutineer
Independent	Young Advisors x 2
Independent	Lay Members x 1
Camden Council Cabinet Member	Councillor for Best Start for Children and Families

