



Research and analysis

Understanding children's social care sufficiency in England

Published 2 July 2026

Applies to England

Contents

- [Summary](#)
- [Main findings](#)
- [Introduction](#)
- [The index](#)
- [Availability](#)
- [Carers and practitioners](#)
- [Compatibility and accessibility](#)
- [Safety and wellbeing](#)
- [Conclusion](#)
- [Contacts](#)
- [Acknowledgments](#)
- [Glossary](#)
- [Annex: data tables for figures](#)

The [Understanding children's social care sufficiency in England](#) release also includes:

- data tables
- methodology

This work has been funded by the [Evaluation Accelerator Fund Phase 4](#).

Summary

This release covers:

- a new index for children's social care in England
- how availability, workforce, placement suitability, and safety interact to affect sufficiency

- the regional variation in children's social care provision and access to placements
- the structural and system pressures shaping where and how children are placed

Data is as at 31 March 2025 unless otherwise specified in the [methodology](#).

Main findings

- Sufficiency in children's social care (the amount of suitable accommodation available for children in care and care leavers) is shaped by a complex set of factors rather than by the volume of provision alone
- House prices are a key structural driver of the availability of children's homes
- Workforce constraints, including difficulties in recruiting registered managers and suitably qualified staff, are affecting sufficiency in children's homes provision
- A lack of available foster carers is linked with more, and younger, children being placed in children's homes
- Pressure on the social care system has increased in recent years, contributing to children being placed further from home when suitable specialist provision is not available in their local area
- Local sufficiency is affected by local authorities competing for placements, which reduces availability for local children

Introduction

Local authorities have a duty to make sure there are enough suitable places for children who need care. These places should be close to home and able to meet each child's needs. Over recent decades, the number of children looked after has increased, but in recent years this has levelled off at around 80,000 children.

[\[footnote 1\]](#)

Despite this, many children are still placed far from their home communities or in settings that are not well matched to their needs. There are now more children's homes than ever before, but children's homes are, on average, getting smaller and many operate with unfilled places.[\[footnote 2\]](#) Local authorities are spending record amounts on residential care, and there are continued pressures in recruiting foster carers and social care staff.[\[footnote 3\]](#)

These challenges highlight that sufficiency is about more than the number of places available. It is also about whether those places are suitable, where they are located, and whether there is a suitably trained workforce to meet the needs of children placed in them.

This report introduces a new sufficiency index, designed to take a more holistic view of the children's care system and how well it is meeting children's needs.

The index

We have developed an index that combines data across several key domains to provide an overall indication of sufficiency for children in care across the country.

This index provides a system-level view of sufficiency in children's social care. By bringing together indicators across availability, workforce, accessibility and safety, it highlights where pressures are most acute and how different factors interact within a local area. It does not offer a verdict on the quality of practice within individual services, nor is it intended to assess performance. Instead, it provides contextual information to support an understanding of local sufficiency challenges.

For local authorities, the index can support strategic discussions about sufficiency pressures, commissioning priorities and planning, and can be used alongside local intelligence and qualitative evidence. At a national level, the index highlights patterns and variation across areas. This can support an understanding of systemic pressures and inform policy development for the Department for Education and Ofsted.

The domains included in the model are:

1. **Availability**

Indicators in this domain assess whether a local authority has enough places for the children it is responsible for recognising that provision can appear sufficient on paper but still not be genuinely available or suitable for children's individual needs.

2. **Carers and practitioners**

Indicators in this domain assess workforce sufficiency by examining whether providers across different types of provision have enough staff and whether those staff have the appropriate qualifications.

3. **Compatibility and accessibility**

Indicators in this domain include distance from a child's home, and placement changes that are not in a child's care plan. As there is limited national data on the needs of children in care, 'compatibility and accessibility' act as a proxy for placement suitability.

4. Safety and wellbeing

Indicators in this domain assess whether children's health assessments are being carried out and include indicators of safety, for example episodes of children going missing and children's own perceptions of feeling safe, to consider how well local authorities meet their statutory duties and to understand the lived experience of children in care.

The index focuses on the 3 main types of provision used by children in care: fostering, children's homes and supported accommodation. Other forms of provision exist, but these generally support smaller numbers of children and tend to be highly specialised; therefore, they have not been included in the index. Further information about how we constructed the index is in the accompanying [methodology document](#).

For ease of interpretation, local authorities have been grouped based on their index scores. These groupings are referred to throughout this publication and are set out in Table 1.

Table 1: Index score bands for quartile groupings

Quartile name	Range of overall index score
Upper	0.555 to 0.750
Upper middle	0.510 to 0.555
Lower middle	0.430 to 0.510
Lower	0.310 to 0.430

Lower bounds are exclusive ($>$) and upper bounds are inclusive ($\leq$), except for the lower quartile, where both bounds are inclusive ($\geq$ and $\leq$). Quartiles are calculated using `pd.qcut`, which divides the index into 4 groups based on its distribution, with each group representing approximately equal proportions of the data.

The analysis presented here was complemented by qualitative research with local authority commissioning teams. This research explored the challenges facing local authorities across England and the strategies they are adopting in response to these pressures. It involved semi-structured interviews with commissioning managers working within local authorities. A total of 23 online interviews were carried out between September 2025 and January 2026, involving 25 participants from 18 local authorities. Further information about the qualitative research is in the accompanying methodology document.

Difficulties in quantifying sufficiency

In developing the index, we recognised that children's social care depends on

many linked factors, not just the number of available places. There is no single definition of sufficiency, and counting placements does not show whether they are right for each child. To reflect the decisions local authorities face, the index brings together measures showing the wider pressures on the system and how different challenges interact, as our qualitative research also highlights.

“It’s not just about the numbers of placements and the type of placements, it’s the quality of the people that are working in there.”

(Senior commissioning manager)

This research shows that sufficiency is not just about the number of placements. It also depends on whether placements are suitable for each child. Sufficiency changes over time and is shaped by workforce constraints, market behaviour, the needs and profiles of children in care, and how well agencies work together.

What this work tells us

- The index compares similar local areas across England.
- It guides local authorities in deciding where to place limited resources.
- It explores aspects of children’s social care residential provision.

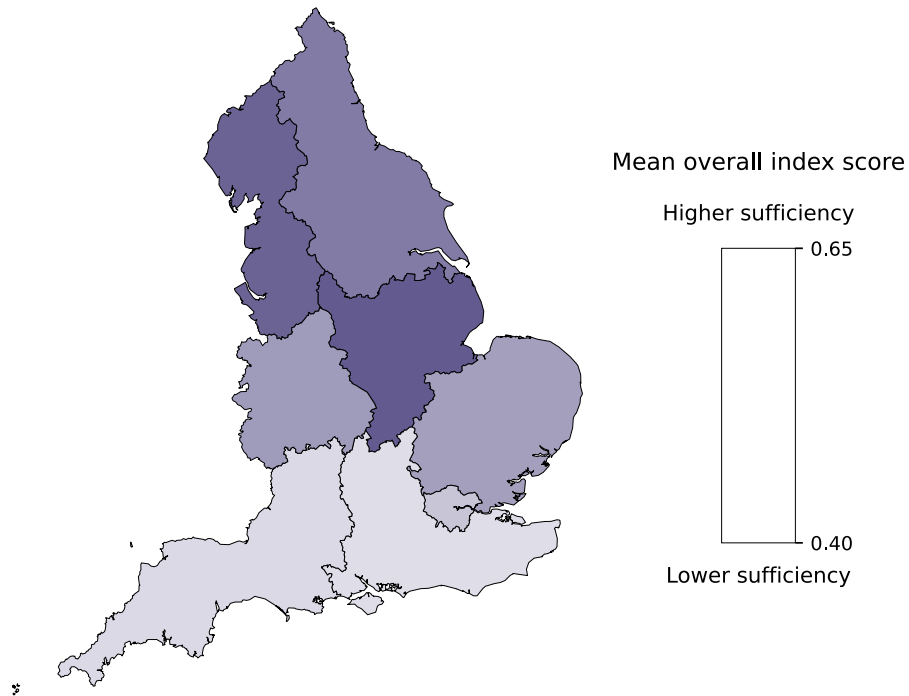
What this work does not tell us

- The index is not intended to capture the experiences of every individual child within a local area. It is area-based and reflects the overall context of the area.
- It does not reflect how dynamic the sector is – it is a snapshot as at 31 March 2025.
- It does not indicate how well a local authority is performing in practice, and the figures should not be used on their own to rank local authorities.

Regional patterns in children’s social care provision

The index shows a clear difference between the north and the south of the country in how easily children in care can access the placements they need.

Figure 1: Mean index score by region



View the [data for Figure 1 in an accessible table format](#).

Across England, regions face different challenges in balancing need and demand in children's social care. These differences reflect local population patterns, placement availability and levels of demand.

In the north of England, particularly the North West, there is a higher concentration of children's homes. This increases the likelihood that children can remain closer to home. In areas with more homes overall, we also see a wider range of placement options that have the potential to better match individual children's needs. These factors contribute to higher scores for compatibility and accessibility. Strong scores for carers and practitioners, as well as for safety and wellbeing, suggest a relatively well-established local care infrastructure.

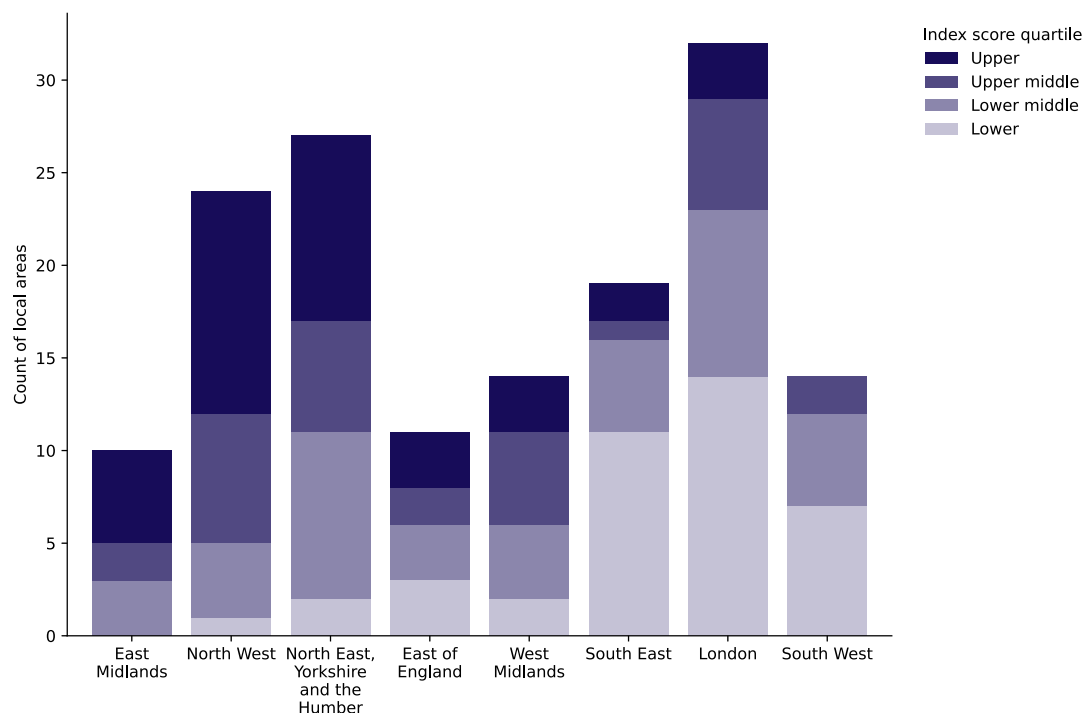
At the same time, parts of the North West also have some of the highest numbers of children in care. Although provision is extensive, the level of demand puts sustained pressure on the system. As a result, availability of placements can still be limited, reflecting demand rather than a lack of provision.

In contrast, the South East and South West have fewer children's homes. Children are often placed much further away from home, resulting in lower scores for compatibility and accessibility. These regions also have lower scores for carers and practitioners, as well as for safety and wellbeing.

The East Midlands shows a different balance between need and supply. A relatively high number of available children's homes and fostering placements, combined with strong scores for carers and practitioners, helps explain the region's higher overall ranking. This suggests that current provision aligns more closely with local demand.

London presents a distinct pattern due to its geography and care market. There are very few children's homes, which limits the choice and suitability of placements. Although children may be placed outside their local authority, shorter travel distances mean they can sometimes remain physically close to their families. There are also differences between inner and outer London, with particularly limited placement options for children from inner London. Higher rates of children going missing further influence London's overall position in the index.

Figure 2: Local area index score bands by region



The index quartile ranges are defined in [Table 1](#).

View the [data for Figure 2 in an accessible table format](#).

Availability

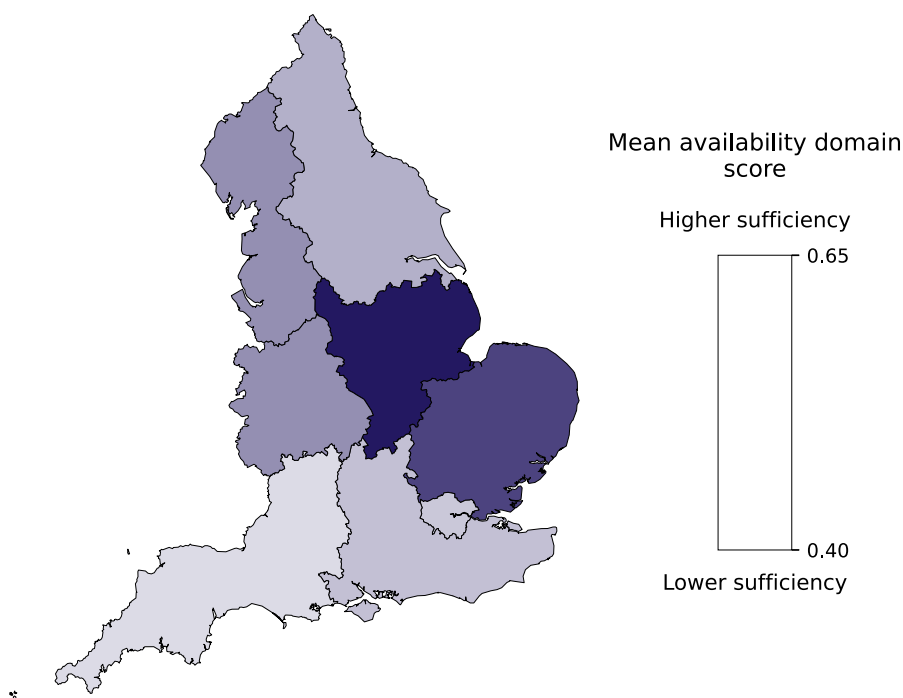
- There is a geographical split in the country, with more children's homes in the north where average house prices are cheaper.
- Areas in the North West that have a high number of children's homes also tend to have lots of children who need care.
- A lack of foster care placements may be contributing to more children aged 12 and under being placed in children's homes in recent years.

Availability focuses on whether a local authority has enough places for the children

it is responsible for. In this domain, a higher availability score indicates that a higher proportion of children in care have places available within their home local authority.

This is a key part of what makes provision sufficient in a local area. If there are enough places for children who need care, the area may be considered to have sufficient provision. However, having places on paper does not always mean they are genuinely available or suitable for the individual needs of children.

Figure 3: Mean 'availability' domain score by region



View the [data for Figure 3 in an accessible table format](#).

House prices are a structural driver of the availability of children's homes

The North West has the highest number of children's homes in the country. However, the region also has a high number of children in care, which reduces the number of available places once demand is taken into account. Data at a regional level masks variation within individual local authorities: some areas may have a high concentration of children's homes, while others have very few, even within the same region.

By contrast, the East Midlands and the East of England have higher availability when compared with the number of children in care. These regions have more places relative to local demand, leading to higher availability scores. This gives

local authorities more choice when making placements and may help more children stay closer to home.

Differences in availability are shaped not only by the distribution of children's homes and the level of demand, but also by wider structural factors within local housing markets. Areas with more expensive housing tend to:

- have fewer registered children's homes, which reduces local capacity
- place children further away from where they live, as there are fewer local options
- spend more on average for each child in care, as authorities may rely on placements outside their area or more specialist provision that comes at a greater cost

Table 2: Average house price per overall index quartile

Overall index quartile	Average house price in local authority (£)
Upper	250,000
Upper middle	298,000
Lower middle	315,000
Lower	450,000

The index quartile ranges are defined in [Table 1](#).

This is an area that has been considered in research before, but it remains an important finding.^{[\[footnote 4\]](#)} The current market structure means that provision often grows in areas where it is cheaper to operate rather than in areas where children's needs are greatest.

“How do you get a company to invest in [this LA] if they can buy a house in, you know, Blackpool for £200,000, but in [this LA] it's going to cost them £700,000. How do you get providers to set up here?”

(Director of Children's Commissioning, Resource and Performance)

This has implications for sufficiency and the distance that children are placed from home. It raises an important policy question about what steps can be taken to encourage the development of provision in the areas where it is needed, regardless of local housing costs or local economic conditions.

Declining foster care availability and its impact on sufficiency

A further concern for local authorities is the availability of foster care placements, which has declined in recent years.^[footnote 5] This is particularly significant given the government's aim to support more children to live in family-based settings, which places additional pressure on the sufficiency of foster care placements.^[footnote 6]

Commissioners we interviewed in some local authorities told us they were only able to maintain their foster carer population through consistent recruitment drives and campaigns. The decline is often associated with foster carers ageing out of the profession (the proportion of foster carers aged over 60 has increased in recent years),^[footnote 7] as well as foster carers returning to employment due to rising costs of living.

“The biggest impact on fostering has been the cost-of-living crisis that we saw post-COVID. People could no longer afford to stay at home and be foster carers and there just aren't the foster carers out there that [there] used to be ... it's as simple as that.”

(Director of Children's Commissioning, Resource and Performance)

“There's a lack of foster carers as well, so that has an impact on the kind of younger end. So, you know, I don't think anybody would have thought a 6- or 7-year-old would ever be in residential care ... particularly our local authority.”

(Commissioning Manager)

The data shows that in local authorities with relatively few foster carers, more children aged under 12 are living in children's homes. This is unlikely to be the best option for younger children and is often due to a lack of family-based options available at the time of placement.

Local provision may impact on placement decisions

Provision and placement decisions are closely linked. Local authorities with a

higher concentration of children's homes and more limited foster carer capacity tend to place a greater proportion of children in residential settings, while areas with stronger foster care availability are more likely to rely on foster placements. As a result, placement patterns largely reflect the existing local supply patterns.

“About 19% of our looked after children are now accommodated in children's homes, which is quite a significant increase. That is driven by foster care availability. So we have some children in residential children's homes that we would traditionally have been able to place with foster carers, but there just isn't sufficient capacity.”

(Assistant Director, Early Help and Social Care)

However, it is not always clear whether provision is being developed in response to assessed need, or whether the options that already exist are shaping placement decisions. In practice, this relationship tends to work both ways. For example, if there are more residential placements available than foster placements in an area, children may be placed in residential care even when fostering might better meet their assessed needs. Over time, these placement patterns help sustain the existing mix of provision and may reinforce current market conditions.

Supported accommodation

We have included data on supported accommodation in the 'availability' domain to provide a more complete picture of sufficiency across the social care system. We recognise that supported accommodation is not appropriate for all young people aged 16 to 17, and that some children may be placed in supported accommodation because suitable alternatives are not available. For this reason, higher levels of supported accommodation alone should not necessarily be interpreted as a positive outcome. The availability of supported accommodation must be considered alongside the availability of foster care and children's homes, to ensure that placements reflect children's needs and readiness for independence rather than constraints in the local market.

As at 31 March 2025, supported accommodation in a self-contained unit (category 1) accounted for the most premises (42%). Supported accommodation in shared or group-living settings limited to children in care and care leavers (category 2) accounted for the highest proportion of places (44%). Shared or group living in mixed-use premises (category 3) made up 21% of premises, and supported lodgings (category 4) accounted for 8%. [\[footnote 8\]](#)

Availability of supported accommodation varies across the country. Category 1 self-contained unit premises are more common in the north of the country, while

category 2 group-living accommodation is more common in London.

Local authorities in the East Midlands tend to be relatively well resourced, with higher numbers of supported accommodation premises and higher ratios of places to children in care aged 16 to 17. On average, authorities in this region have more than one supported accommodation place for every child in care in this age group.

In contrast, provision is more limited in the North East. Local authorities in this region have some of the lowest ratios of supported accommodation places to children in care aged 16 to 17. On average, there are around 2 supported accommodation places for every 3 children in care in this age range.

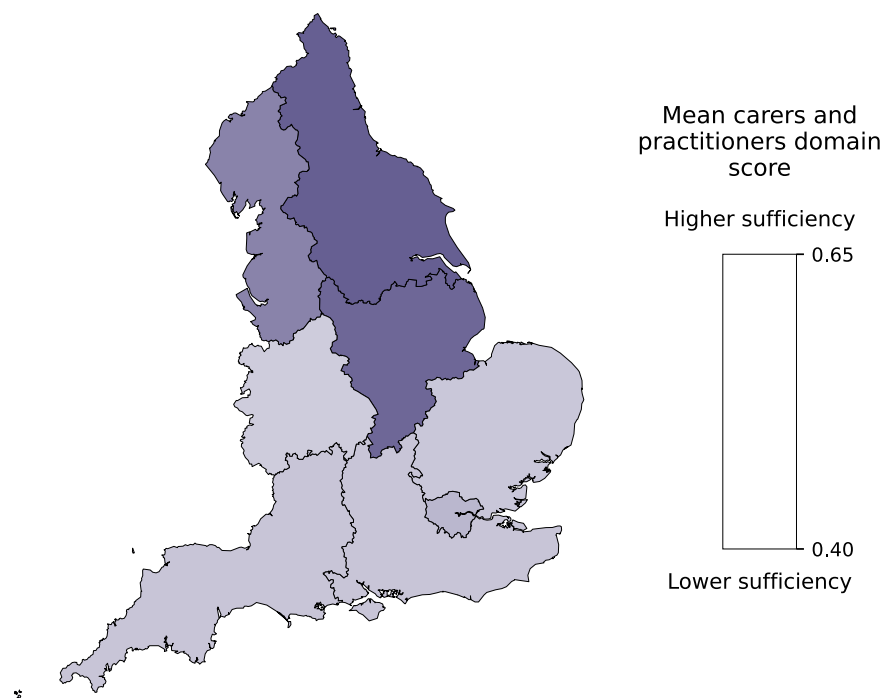
London shows a more mixed picture. Outer London is generally better resourced and, alongside the East Midlands, makes up nearly half of the top decile for availability of supported accommodation. Local areas in inner London, however, tend to have much lower levels of provision, with ratios of places to young people closer to those seen in the North East.

Carers and practitioners

- Areas that have seen a growth in children's homes in recent years tend to have a lower proportion of qualified caring staff in children's homes.
- Recruitment and retention of registered managers in children's homes is a concern in some areas.

'Carers and practitioners' is included as a domain to assess how well the sector is supported in terms of its workforce. This domain is broken down by provision type. Our aim is to determine indicators on whether providers have sufficient staff and whether those staff hold the necessary qualifications.

Figure 4: Mean 'carers and practitioners' domain score by region



View the [data for Figure 4 in an accessible table format](#).

Skills and experience challenges in the children's homes workforce

Workforce was a major concern raised by most commissioners during the qualitative research, and it is a central factor influencing sufficiency. Many described persistent challenges in recruiting and retaining staff with the skills and experience required to support children in residential care.

One aspect of this relates to the residential workforce not being suitably qualified. In areas that have seen rapid growth in the number of children's homes, expansion has not always been matched with the necessary workforce.

“Over the last 18 months to 2 years, we’ve had over 20 inquiries to set up children’s homes within [this LA] ... We’re seeing providers saying that they want residential support workers. But some of those residential support workers are coming from other industries and have no experience of supporting children ... I think it’s just a position for them to work in.”

(Commissioning Officer, Children’s Placement Team)

There are ongoing concerns about the recruitment and retention of registered managers. The proportion of children's homes operating without a registered

manager in post has remained at around 1 in 5 since 2024.^{[\[footnote 9\]](#)} In 2024–25, 1 in 4 registered managers in children’s homes left their post. While many may have remained within the sector, turnover at this level is significant and can disrupt continuity of care and leadership within homes.

This issue has been consistently highlighted by commissioners in recent years, with particular challenges reported in both attracting suitably qualified candidates and retaining experienced managers.

“Some of the things that people are really struggling with in terms of fulfilling sufficiency, I’d say are linked to things like the availability of registered managers ... a provider told me the other day that last May they put out an advert for a registered manager. They didn’t even get one applicant ... Providers are trying to grow their own obviously, but also people end up poaching from each other. So then that’s a real challenge.”

(Strategic Commissioning Lead)

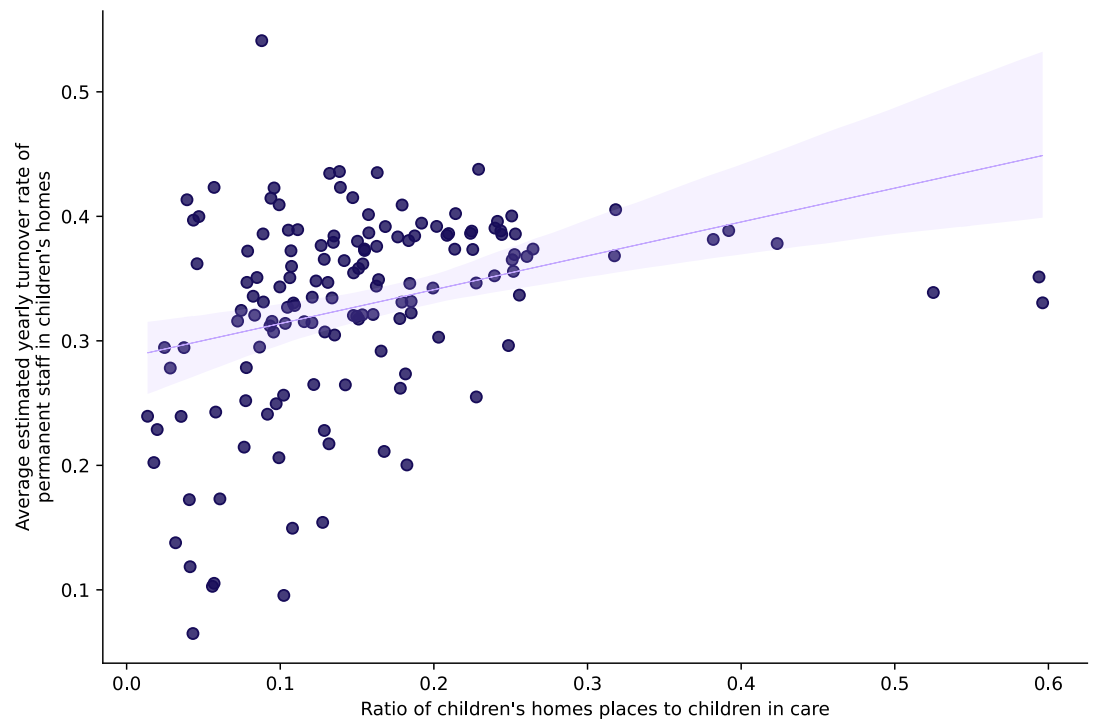
“[This LA] has the highest number of agency children’s homes anywhere in the country ... and I really worry, it’s really difficult to be able to recruit registered managers, to retain and recruit good-quality staff and that problem is just going to get worse because more and more homes keep opening.”

(Senior Commissioning Manager)

Retention of staff in children’s homes

We examined the relationship between staff turnover and the availability of children’s homes and found a positive association. Areas with a higher number of children’s homes tend to experience greater staff turnover, suggesting weaker retention in these locations. This may be because there are more opportunities for staff to move between homes.

Figure 5: Staff turnover in children’s homes compared to the ratio of children’s home places to children in care



Description for Figure 5: the scatterplot has 'Ratio of children's homes places to children in care' on the x-axis, with values of 0 to 0.6, and 'Average estimated yearly turnover rate of permanent staff in children's homes' on the y-axis, with values of 0 to just over 0.5. Each local authority is represented by a point on the chart. Most points are in the left half of the chart, where they are quite spread out across the height of the y-axis, with the highest concentration between about 0.3 and 0.4. There are 8 points in the right half of the chart, all in the upper-right quadrant. A regression line is overlaid, with a shaded band representing the 95% confidence interval. The regression line has a gradient of 0.27 and a y intercept of 0.29. The chart shows that the ratio of places to children correlates positively with staff turnover rate in children's homes.

Note: line shows an ordinary least squares linear regression. Shaded band is a 95% confidence interval for the mean prediction, estimated via nonparametric bootstrap resampling (1,000 draws), as implemented in [seaborn.regplot](https://seaborn.pydata.org/regplot.html).

Relationship between provision availability and workforce capability

We also see an interaction between the availability and workforce domains. A shortage of foster care places may mean that more children whose needs could best be met in foster care are instead placed in residential care. Some commissioners discussed how this could contribute to a reduction in skills within the residential workforce.

"If you're not really careful, you end up deskilling your really good workforce in residential because they've become used to the needs of young people that should be in foster care ... it really impacts on the sustainability of the staff team within the residential home and the kind of

willingness to see behaviours that would probably be ... the norm in residential. They then become very challenging behaviours because that's not what they've been used to."

(Senior Commissioning Manager)

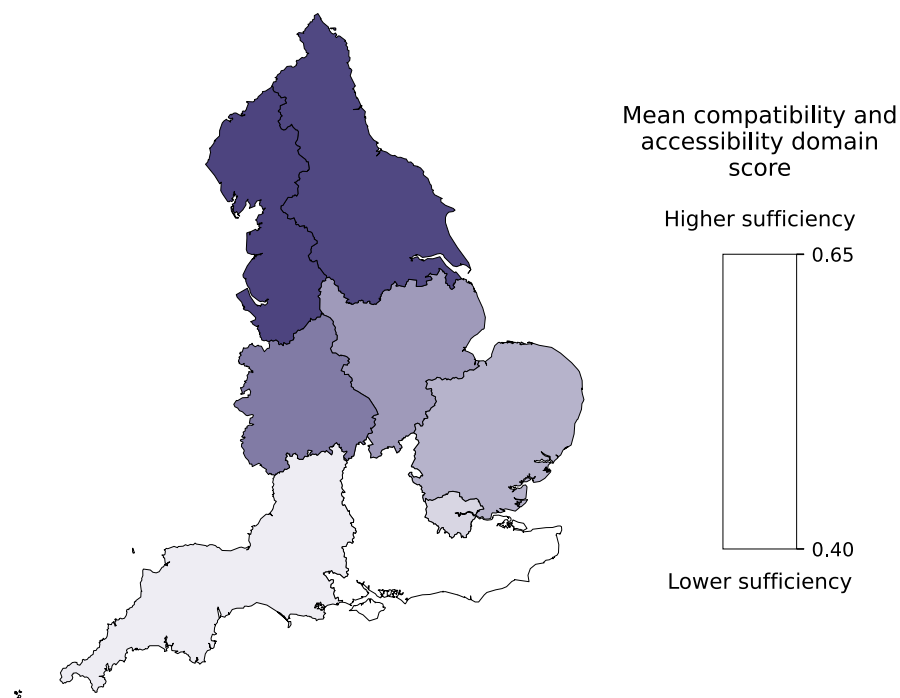
This relationship illustrates the interconnected pressures that shape the sector. Changes in one part of the system can create knock-on effects in another, which then influence overall sufficiency.

Compatibility and accessibility

- There is a geographical split between the south and north, influenced by the availability of provision.
- More affluent areas are more likely to place children further from home, due to the lack of availability of children's homes.
- Increasing complexity of needs of children and a lack of suitable local provision can lead to children being placed further away from home.
- Areas that place children further away from home are more likely to spend more on each child in care.

The 'compatibility and accessibility' domain includes data that serves as a proxy for assessing whether the placements made within a given area are suitable for those children. While ideal indicators would capture whether each child is in the most suitable placement for their specific needs, detailed data on individual child assessments and placement decisions is not available to us. Instead, we use indicators such as the number of placement changes that were not in a child's care plan within each local authority. We also consider how far children are placed from home.

Figure 6: Mean 'compatibility and accessibility' domain score by region

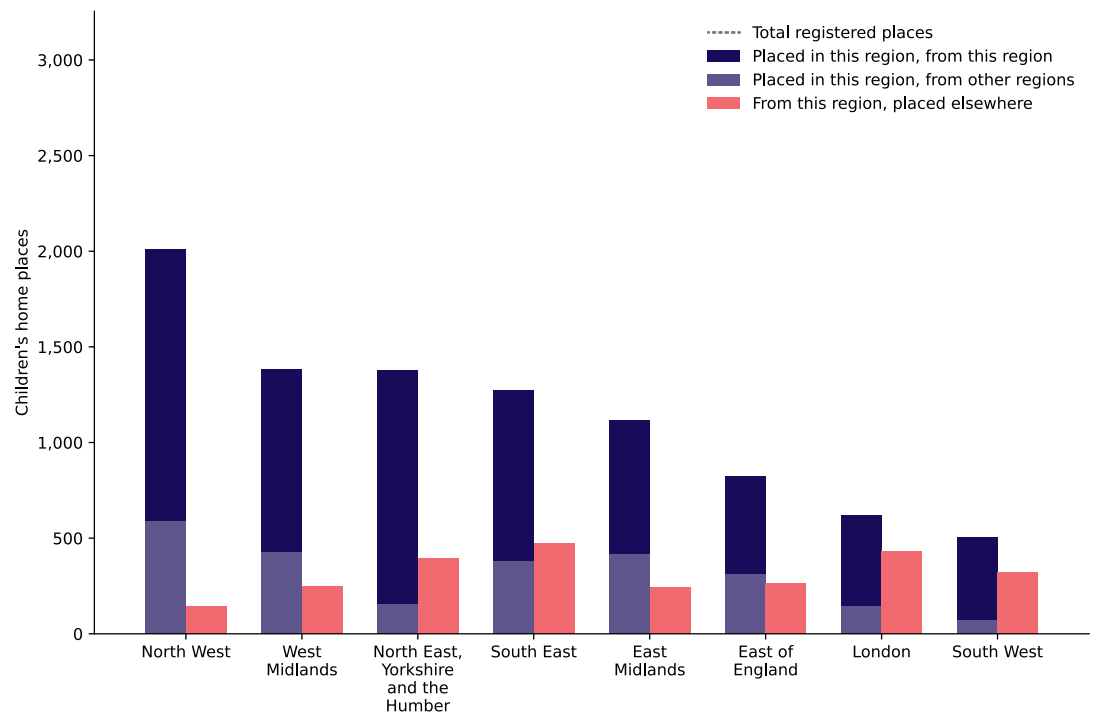


View the [data for Figure 6 in an accessible table format](#).

Children's homes availability and proximity of placements

The availability of placements influences how far children are placed from home. Regions such as the North West, which have a large number of children's homes, are able to place more children within their home region than areas such as the South East.

Figure 7: Children in care in children's homes placed in or out of region as at 31 March 2025, by region of home local authority



View the [data for Figure 7 in an accessible table format](#).

Again, local housing markets also play a significant role. More affluent areas, where house prices are higher, tend to place children further away from home, likely because fewer children's homes operate in these locations. These patterns show how structural factors can combine to create uneven experiences for children, where geography and local market conditions shape the options available.

"We really struggle with placing children in residential placements within 20 miles of [this LA]'s borders because of the cost of, everything, in [this LA]. Because of the house prices in [this LA] we are very reliant on the external market."

(Director of Commissioning)

We have also used travel time from a child's placement to their home to look beyond local authority boundaries and consider where children are placed. The longest average travel time is in the South West, and the shortest is in the North West. These patterns again follow the availability of placements, particularly children's homes.

Table 3: Average estimated travel times from home (before entering care) to placement for children looked after in children's homes as at 31 March 2025, by region of home local authority

Region	Average estimated travel	Average distance
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	time (minutes)	travelled (miles)
South West	157	69
South East	116	49
London	104	42
East of England	98	41
North East, Yorkshire and the Humber	71	28
East Midlands	67	26
West Midlands	64	24
North West	50	18

1. Travel time and distance have been calculated using the mean with outlier removal.
2. See the [methodology document](#) for further information about how we have calculated travel times.

Pressure on placements due to competition between local authorities

There may also be a knock-on effect when local authorities place children outside their boundaries because they do not have the right type of provision locally. When a child is placed in another area, they take up a placement that might otherwise have been available for a child who lives there. This can reduce local availability which, in turn, increases pressure on neighbouring authorities, making it harder for both the local authority of the placement and its neighbours to meet the needs of their own children.

“Sufficiency isn’t a problem in [region]. We actually have plenty of beds and the number of beds we have are equivalent to the number of children in [region] who need them ... the problem is that in London and the Southeast, they don’t have anywhere near enough beds and so they pop their children up the motorway to come and stay in [region] ... we need to work together ... But we don’t, because [we are] ultimately responsible for local priorities and ... there’s a bit of competition against ourselves.”

(Corporate Parent Chief Officer)

As a result, an area may appear to have enough provision on paper, yet the

capacity is not genuinely available for the children who live there. This is not something we can investigate using our data, but it is an important point that would merit further exploration in a future project.

Rising complexity of needs among children in care

The distance a child is placed from home is shaped by both the availability of placements and the needs of the child. This is a limitation of the model, as we are not able to determine what the correct type of provision should be for each child. However, our qualitative research highlighted a significant increase in the complexity of children's needs, particularly since the COVID-19 pandemic. We have also explored this in previous Ofsted research.[\[footnote 10\]](#) In this context, complexity refers to children and young people who have multiple, intersecting needs or who are involved with several care systems at the same time. Interviewees described combinations of neurodivergence, mental health needs, physical or learning disabilities, behaviours that challenge, and violent behaviours.

“We ... have no provision in [county] to meet those needs. So those are the young people that I'm having to place in Lancashire or wherever it is, Blackpool, all over the country and it's incredibly hard to find placements for those young people.”

(Assistant Director, Commissioning and Transformation)

These rising levels of complexity create additional pressure on local provision. A child may require a specific type of placement, which limits the number of suitable options within their home area. When that provision does not exist locally, or is already full, children are placed further from home.

Local authority expenditure on children looked after

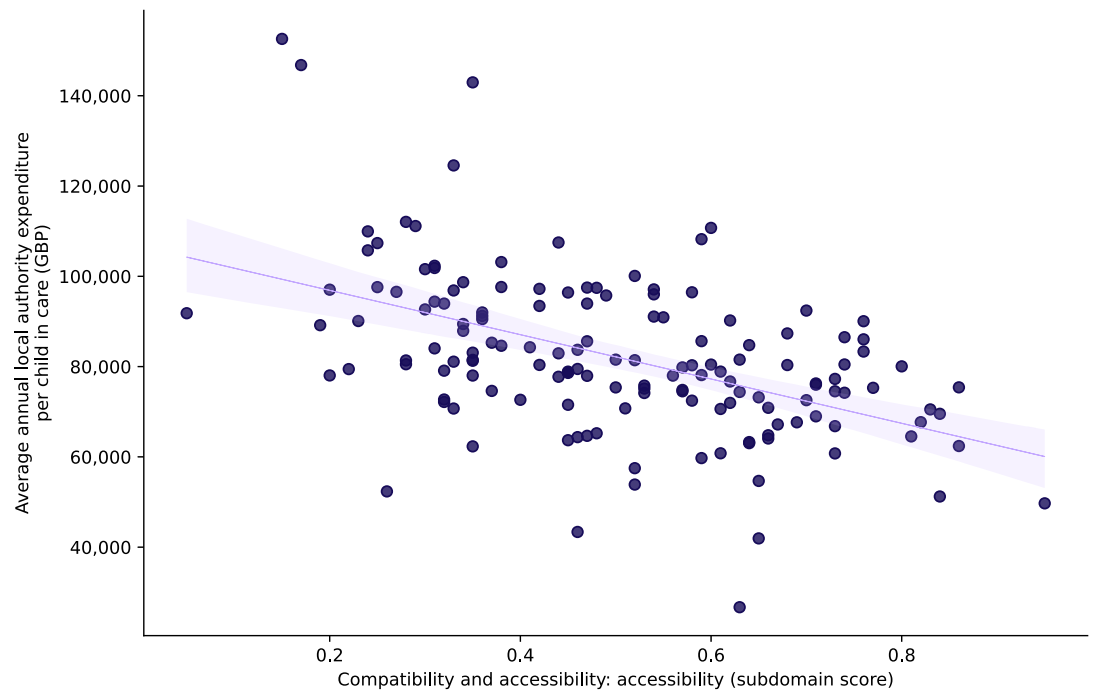
We also see links between average travel time from home to placement for each child and average spend on children in care. Authorities that place children further from home tend to spend more per child. This may reflect the need for specialist provision that is located outside the local area, or the availability and willingness of providers to accept a referral, as well as the impact of limited availability of placements in some regions, which can drive up prices.

“So you're holding a young person that's in a really dysregulated place, because of the unmet need of CAMHS [child and adolescent mental health services], health, education ... if any of the partners had intervened or seen

those flags and intervened more effectively, we would have prevented the escalation, but then it's escalated and we've then ended up in a high-cost residential, sometimes placed at distance."

(Corporate Parenting Chief Officer)

Figure 8: Average annual local authority expenditure per child in care compared to subdomain score for 'compatibility and accessibility: accessibility'



Description for Figure 8: the scatterplot has 'Compatibility and accessibility: accessibility (subdomain score)' on the x-axis, with values of 0 to 1, and 'Average annual local authority expenditure per child in care (GBP)' on the y-axis, with values from 26,700 to 153,000. Each local authority is represented by a point on the chart. The points are quite spread out across the width of the x-axis. The data in the left half of the chart is slightly higher and the data in the right half is generally lower. A regression line is overlaid, with a shaded band representing the 95% confidence interval. The line has a gradient of $-49,100$ and a y intercept of $107,000$. The chart shows that there is a slight negative correlation between spend per child in care and the accessibility subdomain score in the compatibility and accessibility domain.

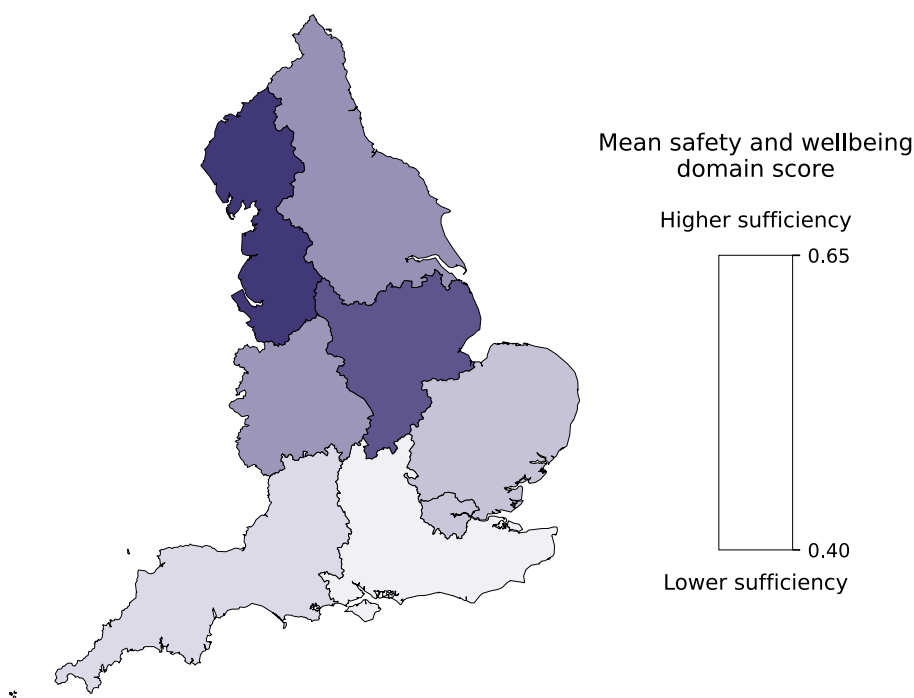
Note: line shows an ordinary least squares linear regression. Shaded band is a 95% confidence interval for the mean prediction, estimated via nonparametric bootstrap resampling (1,000 draws), as implemented in [seaborn.regplot](https://seaborn.pydata.org/plotting/regplot.html).

Safety and wellbeing

- Lack of timely access to CAMHS creates challenges for children.
- London has the highest proportion of children going missing from their placement.
- Local authorities in the North West are most likely to have carried out the required health assessments for children in care.

‘Safety and wellbeing’ considers whether the health assessments of children in care are carried out. It also tracks indicators of safety through episodes of children going missing, and through children’s own perceptions of feeling safe. This domain is important in considering whether local authorities are meeting their statutory duty when providing for children in care, as well as bringing in the child’s perspective of how they feel within their placements.

Figure 9: Mean ‘safety and wellbeing’ domain score by region



View the [data for Figure 9 in an accessible table format](#).

Incidents of children in care going missing

Children looked after by London local authorities are more likely to go missing than those in other parts of the country. [\[footnote 11\]](#)

Our analysis shows a link between placement compatibility and safety. Areas

where children are more often placed further away from their home local authority tend to have lower safety scores. This does not necessarily mean that distance causes poorer safety outcomes. However, limited local availability of suitable provision, combined with high levels of need and demand, can lead to more out-of-area placements. For some children, being placed further from home can increase risk and may contribute to a higher likelihood of going missing.

Meeting the health needs of children in care

We also included data on the completion of health assessments for children looked after, as this is a core statutory responsibility for local authorities. Overall, most authorities meet their duties in this area. The North West performs particularly well, which suggests that routine health assessments for children in care are being addressed consistently in this region.

One area that could not be incorporated into the model due to limitations in available data was access to CAMHS. This issue was explored in depth through the qualitative research. Commissioners consistently raised concerns about the lack of timely access to CAMHS for children with significant mental health needs. These challenges were linked to limited mental health provision, poor integration between children's social care and health services, and thresholds that exclude children whose needs are high but not always deemed acute enough for specialist support.

“ICBs have looked to close a lot of tier 4 mental health provision across the country, but those children still exist. And whilst all of us would recognise that kind of old-fashioned mental health units are not sometimes the best places for children, actually what's happened is that pressure has come on to children's social care, and we don't have yet the integrated commissioning frameworks with our health services to deliver integrated support.”

(Assistant Director, Early Help and Social Care)

The absence of appropriate mental health provision can put additional pressure on placements and contribute to further sufficiency pressures in the sector.

Conclusion

This work shows that sufficiency in children's social care is shaped by a complex set of factors rather than by the volume of provision alone. Availability of placements, workforce capacity, affordability of housing, the growing complexity

of children's needs and the functioning of wider systems such as health all influence whether children can be given placements that are safe, appropriate and close to home.

The index highlights clear variation between regions. Structural drivers such as house prices play a significant role in where provision develops, while qualitative evidence illustrates how misalignment across the system can create cascading pressures that affect sufficiency.

Together, these findings demonstrate that improving sufficiency requires coordinated action and collaboration across local and national systems, with a focus on aligning provision, workforce and support services to respond to children's needs at the point when placements are required.

Contacts

If you are a member of the public and have any comments or feedback on this publication, please contact Rebecca Vincent socialcaredata@ofsted.gov.uk.

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Glossary

Definitions of terms are in the [statistical glossary](#).

Annex: data tables for figures

This section contains the underlying data in an accessible table format for figures, where relevant. For Figures 5 and 8, a text description has been provided instead of an accessible data table.

Data for Figure 1: Mean index score by region

Region name	Mean index score
East Midlands	0.5680
East of England	0.4991
London	0.4597
North East, Yorkshire and the Humber	0.5367
North West	0.5604
South East	0.4353
South West	0.4400
West Midlands	0.5029

See [Figure 1](#).

Data for Figure 2: Local area index score bands by region

Region name	Lower quartile	Lower middle quartile	Upper middle quartile	Upper quartile
East Midlands	0	3	2	5
North West	1	4	7	12
North East, Yorkshire and the Humber	2	9	6	10
East of England	3	3	2	3
West Midlands	2	4	5	3
South East	11	5	1	2
London	14	9	6	3

South West	7	5	2	0
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See [Figure 2](#).

Data for Figure 3: Mean availability domain score by region

Region name	Mean availability domain score
East Midlands	0.6370
East of England	0.5927
London	0.4572
North East, Yorkshire and the Humber	0.4819
North West	0.5158
South East	0.4653
South West	0.4371
West Midlands	0.5157

See [Figure 3](#).

Data for Figure 4: Mean carers and practitioners domain score by region

Region name	Mean carers and practitioners domain score
East Midlands	0.5560
East of England	0.4582
London	0.4750
North East, Yorkshire and the Humber	0.5641
North West	0.5279
South East	0.4600
South West	0.4600
West Midlands	0.4529

See [Figure 4](#).

Data for Figure 6: Mean compatibility and accessibility domain score by region

Region name	Mean compatibility and accessibility domain score
East Midlands	0.5040
East of England	0.4782
London	0.4422
North East, Yorkshire and the Humber	0.5878
North West	0.5921
South East	0.4005
South West	0.4193
West Midlands	0.5350

See [Figure 6](#).

Data for Figure 7: Children in care in children's homes placed in or out of region as at 31 March 2025, by region of home local authority

Region name	Total registered places	Placed in this region, from this region	Placed in this region, from other regions	From this region, placed elsewhere
North West	3099	1420	591	144
West Midlands	2033	956	430	247
North East, Yorkshire and the Humber	2017	1222	157	397
South East	1795	890	382	472
East Midlands	1569	697	418	241
East of England	1300	508	313	262

London	1033	475	144	429
South West	720	429	77	320

See [Figure 7](#).

Data for Figure 9: Mean safety and wellbeing domain score by region

Region name	Mean safety and wellbeing domain score
East Midlands	0.5740
East of England	0.4618
London	0.4591
North East, Yorkshire and the Humber	0.5122
North West	0.6005
South East	0.4163
South West	0.4386
West Midlands	0.5071

See [Figure 9](#).

1. [‘Children looked after in England including adoptions: Reporting year 2025’](#), Department for Education, November 2025. ↵
2. [‘Financial sustainability of children’s care homes’](#), House of Commons Committee of Public Accounts, January 2026. ↵
3. [‘LA and school expenditure: Financial year 2024–25’](#), Department for Education, December 2025. ↵
4. B Goodair et al., ‘Commercialisation and care sufficiency: the privatisation of children’s homes in England’, in ‘The Lancet Public Health’, Volume 11(2), pages e129 to e136. ↵
5. [‘Main findings: fostering in England 1 April 2024 to 31 March 2025’](#), Ofsted, November 2025. ↵
6. [‘Renewing fostering: homes for 10,000 more children’](#), Department for Education, February 2026. ↵
7. [‘Main findings: fostering in England 1 April 2024 to 31 March 2025’](#), Ofsted,

November 2025. ↵

8. '[Main findings: children's social care in England 2025](#)', Ofsted, July 2025 (updated August 2025). ↵
9. '[Regulatory activity in all types of children's homes and supported accommodation providers between 1 April 2024 and 31 March 2025](#)', Ofsted, July 2025. ↵
10. '[Good decisions: children with complex needs in children's homes](#)', Ofsted, January 2024. ↵
11. Based on children with at least one missing episode lasting over 24 hours. Comparisons across local authorities should be treated with caution due to variation in recording practices and data quality. See methodology and DfE, [Children looked after in England including adoptions \(methodology\)](#), for further detail. ↵

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