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Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr

Bridgend County Borough Council

Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont, CF31 4WB / Civic Offices, Angel Street, Bridgend, CF31 4WB



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Deialu uniongyrchol / Direct line /: 01656 643148 / 643694 / 643513
Gofynnwch am / Ask for: Democratic Services

Ein cyf / Our ref:
Eich cyf / Your ref:

Dyddiad/Date: Wednesday, 17 September 2025

Dear Councillor,

CABINET

A meeting of the Cabinet will be held Hybrid in the Council Chamber - Civic Offices, Angel Street, Bridgend, CF31 4WB / remotely via Microsoft Teams on **Tuesday, 23 September 2025 at 14:30.**

AGENDA

1 Apologies for Absence

To receive apologies for absence from Members.

2 Declarations of Interest

To receive declarations of personal and prejudicial interest (if any) from Members/Officers in accordance with the provisions of the Members' Code of Conduct adopted by Council from 1 September 2008.

3 Approval of Minutes

To receive for approval the Minutes of 22/07/2025

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4 Bridgend Town Centre Access

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5 Draft Outdoor Recreation Facilities Supplementary Planning Guidance

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6 Draft Houses in Multiple Occupation Supplementary Planning Guidance

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Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr Bridgend County Borough Council

Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont, CF31 4WB / Civic Offices, Angel Street, Bridgend, CF31 4WB



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7 Treasury Management Quarter 1 Report 2025-26

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8 Anti-Money Laundering Policy

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9 Social Services Representations and Complaints Annual Report 2024/25

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10 Delegated Authority Policy

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11 Outcomes Of Estyn Inspections Of Schools In Bridgend During Spring Term 2025

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12 Cabinet, Council and Overview and Scrutiny Committees Forward Work Programmes

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13 Information Report for Noting

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14 Urgent Items

To consider any items of business that by reason of special circumstances the chairperson is of the opinion should be considered at the meeting as a matter of urgency in accordance with paragraph 2.4 (e) of the Cabinet Procedure Rules within the Constitution.

15 Exclusion of the Public

The following item is not for publication as it contains exempt information as defined in Paragraphs 14 of Part 4 and Paragraph 21 of Part 5, Schedule 12A of the Local Government Act 1972, as amended by the Local Government (Access to Information) (Variation) (Wales) Order 2007.

If following the application of the public interest test Cabinet resolves pursuant to the Act to consider this item in private, the public will be excluded from the meeting during such consideration.

16 Approval of Exempt Minutes

361 - 364

To receive for approval the Minutes of 22/07/2025

Note: This will be a Hybrid meeting and Members and Officers will be attending in the Council Chamber, Civic Offices, Angel Street Bridgend / Remotely via Microsoft Teams. The meeting will be recorded for subsequent transmission via the Council's internet site which will be available as soon as practicable after the meeting. If you would like to view this meeting live, please contact cabinet_committee@bridgend.gov.uk or tel. 01656 643148 / 643694 / 643513 / 643159.

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Yours faithfully

K Watson

Chief Officer, Legal and Regulatory Services, HR and Corporate Policy

Councillors:

E L P Caparros

P Davies

M J Evans

N Farr

J Gebbie

M Jones

JC Spanswick

HM Williams

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MINUTES OF A MEETING OF THE CABINET HELD HYBRID IN THE COUNCIL CHAMBER - CIVIC OFFICES, ANGEL STREET, BRIDGEND, CF31 4WB / REMOTELY VIA MICROSOFT TEAMS ON TUESDAY, 22 JULY 2025 AT 14:30

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Present

Councillor JC Spanswick – Chairperson

N Farr
M J Evans

J Gebbie
M Jones

E L P Caparros

P Davies

Apologies for Absence

Apologies for absence were received from Cllr HM Williams and the Corporate Director Communities

Declarations of Interest

Cllr Melanie Evans declared a prejudicial interest in agenda item 15, as she was a Community Governor at Croesty Primary and Pencoed Comprehensive Schools. Cllr Evans left the meeting whilst this item was being considered.

Officers:

Jake Morgan
Carys Lord
Claire Marchant
Kelly Watson
Mark Galvin
Lindsay Harvey
Martin Morgans
Michael Pitman
Louis Pannell
Jonathan Parsons
Paul Smith
Stuart Baldwin

Chief Executive
Chief Officer - Finance, Housing & Change
Corporate Director - Social Services and Wellbeing
Chief Officer - Legal & Regulatory Services, HR & Corporate Policy
Senior Democratic Services Officer - Committees
Corporate Director - Education, Early Years & Young People
Interim Head of Operations - Community Services
Technical Support Officer – Democratic Services
Senior Strategic Planning Policy Officer
Group Manager Planning and Development
De-carbonisation Programme Manager
Climate Change Response Manager

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Matt Jenkins
Helen Pembroke
Georgina Wayman
Stephanie Thomas

Regional Integrated Services Director RCT BC
Team Manager Housing Enforcement and Pollution Control (Bridgend and Vale)
Environmental Health Officer
Early Years and Childcare Manager

495. Approval of Minutes

Decision Made	<u>RESOLVED:</u> That the minutes of a meeting of Cabinet dated 24/6/2025, be approved as a true and accurate record.
Date Decision Made	22 July 2025

496. Bryntirion Comprehensive School 3G Pitch Replacement

Decision Made	The Interim Head of Operations – Community Services presented a report which sought Cabinet approval for accepting external funding of £559,768 from the Cry First Foundation of Sports Wales for a 3G pitch development at Bryntirion Comprehensive School and to approve a management agreement with the school. He advised that the existing 2G pitch is at the end of its life, and there is increasing demand for artificial sports pitch facilities across the borough. The development of the proposed pitch at Bryntirion Comprehensive School will assist with the increased demand and the proposed facility details were set out in section 3 of the report. Councillor Paul Davies confirmed the funding is a grant, not a loan, requiring no financial input from the authority Councillor Caparros inquired about environmental sustainability in pitch materials and maintenance; the officer confirmed these would be considered during procurement. The Deputy Leader raised concerns about schools having adequate staff for managing community facilities, suggesting further discussion for external management. The Corporate Director Social Services and Wellbeing noted ongoing work with Halo regarding dual-use sites
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	<u>RESOLVED:</u> That Cabinet: 1. Considered the contents of this report and confirmed approval to accept grant funding in connection with this proposal. 2. Considered the contents of this report and confirmed approval of the project and the entering into of an appropriate management agreement. 3. Delegated authority to the Corporate Director – Communities to negotiate the final terms of the management agreement in consultation with the Chief Officer Finance and the Director Education, Early Years and Young People to enter into the management agreement and any supplementary agreements and to grant any necessary consents required on behalf of the Council.
Date Decision Made	22 July 2025

497. Bridgend County Borough Council Net Zero Strategy

Decision Made	The Interim Head of Operations – Community Services presented a report which updated Cabinet on the work undertaken to review the draft Bridgend County Borough Council Net Zero Strategy attached at Appendix 1 and sought approval to undertake a public consultation on the revised strategy attached at Appendix 2. He advised that the Strategy was reviewed to ensure that it reflected current UK and Welsh Government policy, the latest technologies and regulation, and commercial / financial options. A summary of the review was set out in section 3 of the report. The Cabinet Member for Climate Change and the Environment highlighted the dual benefit of the strategy, noting that it not only addresses environmental concerns but also provides financial opportunities. He cited an example of a £17,000 saving achieved by changing lighting and power sources within a council building. <u>RESOLVED:</u> That Cabinet: 1. Considered the Bridgend County Borough Council Net Zero Strategy review (Appendix 1 to the
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	report) and approved a public consultation on the revised Strategy (at Appendix 2); 2. Noted that a further report will be presented to Cabinet following the public consultation seeking approval of the Strategy.
Date Decision Made	22 July 2025

498. Bridgend County Borough Council Electric Vehicle Charging Strategy

Decision Made	The Interim Head of Operations – Community Services presented a report which updated Cabinet on work to develop a draft Bridgend County Borough Council Electric Vehicle Charging Strategy and sought approval to undertake public consultation on the draft Strategy. Since 2019, local authorities across Wales have delivered over 100 EV charging projects, with commercial Charge Point Operators (CPOs) delivering many times more. Within Bridgend County Borough, BCBC has already delivered a number of chargers over more than 30 sites, and there are more than 2,900 electric vehicles now registered in the County. The purpose of the draft Bridgend County Borough Council EV Strategy (Appendix 1) is to set out a vision and plans for delivering an inclusive charging network in the future, building on work to date. Further information was at section 3 of the report. The Cabinet Member for Resources asked how the strategy would ensure all residents benefit, including those in non-urban areas. The Climate Change Response Manager, explained the strategy involves working with charge point operators and using external grant funding to encourage placement in areas with less demand, ensuring diverse charge point types for on-street and off-street charging. <u>RESOLVED:</u> That Cabinet: 1. Considered the draft Electric Vehicle Charging Strategy (Appendix 1 to the report) and approved public consultation on the Strategy; 2. Noted that a further report will be presented to Cabinet following the public consultation seeking approval of the Strategy.
Date Decision Made	22 July 2025

9. Retail and Commercial Development Supplementary Planning Guidance

Decision Made	The Principal Strategic Planning and Policy Officer presented a report which informed Cabinet of the outcome of a public consultation on the draft Retail and Commercial Development SPG and sought approval to present the amended SPG to the full Council for adoption. He stated that despite wide advertisement, only two representations were received during the consultation period from March 19 to April 30. There were no wholesale objections to the guidance. Three minor changes were proposed based on the feedback and these were detailed in section 3 of the report. how the SPG will be monitored for compliance, The Principal Strategic Planning and Policy Officer responded that this would be included in the annual monitoring report for the Local Development Plan (LDP). The Cabinet Member for Regeneration, Economic Development and Housing was pleased to see that there was feedback suggested and that this was taken on board by the officers. The Cabinet Member for Resources asked about compliance monitoring. The Principal Strategic Planning and Policy Officer stated monitoring would occur annually as part of the Annual Monitoring Report for the LDP. The Leader was disappointed that Town and Community Councils did not use the opportunity to make comments on this and hoped that in the future more engagement would be seen. RESOLVED: That Cabinet: 1. Noted the contents of the report and the consultation responses received on the draft Retail and Commercial Development SPG, together with resultant amendments, attached as Appendix 2 to the report. 2. Approved presenting those final form Retail and Commercial Development SPG (at Appendix 1) to Council to seek its adoption.
Date Decision Made	22 July 2025

500. Section 19 Report for Unnamed Storm of 6th and 7th September 2024

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Decision Made	The Interim Head of Operations – Community Services presented a report which informed Cabinet of the outcome of an investigation into the flooding experienced at a number of properties within the Bridgend County Borough as a consequence of an unnamed storm on 6th and 7th of September 2024. The flooding incidents/locations with the largest impact to properties were recorded were set out in section 3 of the report. It was noted that these properties were not linked in any way other than through the storm event. The report outlined the results of investigations into the causes of the flooding at the identified locations and includes action plans and, if appropriate, interventions to mitigate against future flooding. An outline of this was provided in section 3 of the report. The Cabinet Member for Climate Change and the Environment noted that more issues may occur due to the expected increase in severe weather events as a result of climate change and therefore it was important to investigate the effects of these storms and look at the measures that can be put in place for mitigation. He noted however the difficulty in mitigating floods from unadopted or unregistered land and the need for multi-partner collaboration. The Cabinet Member for Education and Youth Services asked about identifying other vulnerable locations for future risk mitigation. The Interim Head of Operations – Community Services explained that the land drainage team uses intelligence from events and actively monitors pinch points, gullies, and culverts, collaborating with Welsh government and partners. He added that flood risk management was a multi-agency effort involving landowners, Welsh Water, and National Rail and advised residents to contact their local member with concerns. <u>RESOLVED:</u> That Cabinet noted the Section 19 report attached thereto at Appendix 1.
Date Decision Made	22 July 2025

501. Social Services and Wellbeing Recommissioning Care at Home Services

Decision Made	The Corporate Director Social Services and Wellbeing presented a report which sought Cabinet approval for Bridgend County Borough Council (BCBC) to undertake a procurement exercise to invite tenders to
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	establish a Framework Agreement of commissioned regulated care at home providers. She advised that this was the fourth such tender since 2014, aiming to secure care for vulnerable residents. A maximum six-year framework is proposed. Tenders are capped, and a fair rate of pay is determined in line with national commissioning board guidance to enable providers to pay a real living wage The Cabinet Member for Regeneration, Economic Development and Housing asked if figures could be provided for bullet point 82. The Corporate Director Social Services and Wellbeing stated she did not have those figures to hand but could provide them following the meeting. The Leader asked how varying commissioned hours would work contractually. The Corporate Director Social Services and Wellbeing confirmed no minimum packages were guaranteed, allowing flexibility, and rebalancing care with in-house or non-profit services wouldn't impact individual contracts. <u>RESOLVED:</u> That Cabinet: 1. Noted the contents of this report; 2. Approved the procurement of a Regulated Care at Home Services Framework Agreement of commissioned domiciliary care providers; 3. Delegated authority to the Corporate Director Social Services and Wellbeing to tender the Framework Agreement for the Regulated Care at Home Services Framework Agreement and noted that a further report shall be presented to Cabinet following the conclusion of the procurement of the Framework Agreement for a decision on whether to award the Framework Agreement and seek approval to enter into the Framework Agreement with successful bidders.
Date Decision Made	22 July 2025

502. Regional Partnership Agreement

Decision Made	The Regional Integrated Services Director RCTCBC presented a report which updated Cabinet on the Programme of work between other Local Authorities and recommended for approval a Regional Partnership Agreement (RPA) attached as Appendix 1. The development of an RPA means we can update the existing formal working arrangements with the
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health board for the Bridgend Community Resource Team (CRT). The intention was for the agreement to be approved by each partner in July 2025 prior to going live in its first iteration in the Autumn. Further information was set out in section 3 of the report.

The Deputy Leader explained that the Section 33 agreement enabled organizations to discharge functions to one another, avoiding task duplication. She stressed the vital role of the third sector in supporting health and social care and believed that Welsh Government were also accountable given their guidance on 20% funding allocation towards the third and voluntary sector.

RESOLVED: That Cabinet:

1. Noted the progress made towards creating an Integrated Community Care System for older people and people living with frailty;
2. Agreed the ICCS model (Figure 1) as the basis for integrated service development;
3. Approved the Regional Partnership Agreement at Appendix 1 to the report;
4. Noted the intention to seek similar approval from CTMUHB and the two other local authorities in the region within the same timescale, and in advance of commencement of the Agreement in the Autumn of 2025;
5. Delegated authority to the Corporate Director, Social Services and Well-being, after consultation with the Monitoring Officer and Section 151 Officer, to approve the final terms of the Regional Partnership Agreement, including any amendments to the terms approved there as may be necessary, and to enter into the Regional Partnership Agreement and any further deeds and documents which are ancillary to Regional Partnership Agreement.

22 July 2025

503. Substance Use Service Provision in Bridgend County Borough

Decision Made	The Corporate Director Social Services and Wellbeing presented a report which sought approval for Rhondda Cynon Taf County Borough Council to undertake procurement on behalf of Bridgend for integrated Tier 1 and Tier 2 substance misuse services across the Cwm Taf Morgannwg region.
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	She explained that current contracts end in March 2026, allowing for integrated procurement across Bridgend, RCT, and Merthyr areas. Active user involvement groups are key in developing and evaluating services. The bulk of investment is from the substance misuse action fund, with a smaller amount from the social services budget. Details of the procurement process and proposals were set out in section 3 of the report. The Deputy Leader welcomed the new structure for early intervention and prevention, particularly the "no wrong door" approach for immediate access to services. She highlighted the importance of immediate intervention for substance misuse and the critical role of SMAF funding. <u>RESOLVED:</u> That Cabinet: 1. Approved RCTCBC to undertake the procurement exercise to commission the integrated service provider for Tier 1 and 2 substance use service provision in Bridgend County Borough in accordance rule 3.2.10 of the Council's Contract Procedure Rules, with approval to award the service contract via delegated powers (under BCBC's Scheme of Delegation) once the procurement and evaluation process has been undertaken; 2. Approved BCBC entering into a regional collaboration agreement with RCT CBC to set out the responsibilities of each Local Authority for the initial procurement process and contract management of the service contract; and 3. Delegated authority to the Corporate Director Social Services and Wellbeing, in consultation with the Head of Finance and Section 151 Officer and Chief Officer - Legal & Regulatory Services, HR & Corporate Policy, to agree the terms of and enter into the regional collaboration agreement and any documents or deeds ancillary to that agreement.
Date Decision Made	22 July 2025

504. Procurement of an Open Framework for Flying Start Childcare Providers

Decision Made	The Chief Officer Finance, Housing and Change presented a report which sought cabinet approval to go out to tender for an open framework to appoint providers to deliver childcare places under the Flying Start and Flying Start Expansion program. As part of the tender process a fixed rate fee of £18.50 per session (2.5 hours) per child will be implemented for all childcare provision.
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Given the annual value of existing arrangements in the current year is in excess of £3 million, it is vital that contracts are formalised via a tender process which will be compliant with the new Procurement Act 2023. It is proposed that all existing providers are invited to tender to remain a local authority registered provider on an open framework in order to receive funding for Flying Start childcare places.

The Cabinet Member for Education and Youth Services emphasized the importance of the Flying Start Programme providing parenting programs as well as giving children that extra help during their development. Therefore, this procurement exercise was crucial in securing providers and formalising arrangements to ensure the services continue to run as they should.

The Deputy Leader also stressed the importance of Flying Start and asked that this be made more prominent in reports as it was not emphasized enough here. To build on the Deputy Leaders point The Corporate Director of Education, Early Years and Young People, explained That the Flying Start services provided high-quality part-time childcare, access to parenting and health support, significant help with early language development, and a targeted approach for areas of high deprivation as well as supporting Welsh medium provision.

The Cabinet Member for Climate Change and the Environment asked if there were plans to close the Flying Start provision in Caerau. The Corporate Director of Education, Early Years and Young People confirmed that there were no plans for this.

RESOLVED: That Cabinet:

1. Approved the use of the tender process in relation to private and third sector organisations providing Flying Start and Flying Start Expansion places on behalf of the local authority;
2. Delegated authority to the Head of Partnerships and Housing, to tender for the framework of childcare providers to deliver early years places under the Flying Start and Flying Start Expansion programmes in consultation with the Chief Officer – Legal and Regulatory, HR and Corporate Policy.
3. Noted that a further report shall be presented to Cabinet following the conclusion of the procurement of the Open Framework for a decision on whether to award the Framework and seek approval to enter into the Framework Agreement with successful bidders.

505. Service Level Agreements for Services being provided under the Flying Start Programme within the Children and Communities Grant

Decision Made	The Chief Officer Finance, Housing and Change presented a report which sought Cabinet approval to enter into a service level agreement (SLAs) between Bridgend County Borough Council (BCBC) and Cwm Taf Morgannwg University Health Board (CTMUHB), in providing support to children and families in respect of the Flying Start Programme. She explained that there was currently no legally binding SLAs between Bridgend County Borough Council (BCBC) and providers delivering services under Flying Start. It was therefore vital that SLAs were put in place to mitigate the risk of financial implications, service disruption and performance of the services being delivered. It is proposed that all providers delivering Flying Start services under the programme will have their own SLAs in order to deliver in line with Welsh Government grant terms and conditions. RESOLVED: That Cabinet: 1. Approved the process of entering into SLAs between BCBC and CTMUHB, delivering the Flying Start service; 2. Delegated authority to the Head of Partnerships and Housing to approve the final terms of the SLAs on behalf of BCBC and to arrange execution of the agreements on behalf of the Council in consultation with the Chief Officer – Legal and Regulatory, HR and Corporate Policy; 3. Approved any extension or amendment to the SLAs and to enter into any further deeds and documents which are ancillary to the SLAs.
Date Decision Made	22 July 2025

506. Healthy Travel Charter

Decision Made	The Chief Officer - Finance, Housing and Change presented a report which updated Cabinet on the work of Cwm Taf Morgannwg Public Services Board on a Healthy Travel Charter. The draft plan for delivering the charter includes a wide range of objectives for PSB organisations to work on, recognising that different organisations are able to respond in different ways across their staff or services. The Charter was attached at Appendix 1 to the report.
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	The Cabinet Member for Resources asked for clarification on incentives like mileage allowance for cycling for work purposes. The Chief Officer - Finance, Housing and Change explained that systems are in place for staff to claim mileage for bike use which were authorized through expenses system. As part of the promotion for this charter we will use internal communications to promote this. <u>RESOLVED:</u> That Cabinet: 1. Noted the content of this update report. 2. That Cabinet consider how to deliver the proposed activities contained within the Charter (Appendix 1 to the report).
Date Decision Made	22 July 2025

507. Capital Programme Outturn 2024-25 and Quarter 1 Update 2025-26

Decision Made	The Chief Officer - Finance, Housing and Change presented a report which updated the council on the capital outturn for the 2024-2025 financial year. She also updated Cabinet on the capital programme position for 2025-26 as at 30 June 2025 and sought agreement from Cabinet to present a report to Council for approval of a revised capital programme for 2025-26 to 2034-35. The Deputy Leader stated that there had been a number of schemes been progressed this year which was pleasing to see but noted that there was slippage of £27 million due to project delays and late government funding. However the schemes would still be progressed in the next financial year. The Cabinet Member for Education and Youth Services asked if the Empty Property Enforcement Fund could be used for town center properties, The Chief Officer - Finance, Housing and Change clarified that the fund is for residential properties only. <u>RESOLVED:</u> That Cabinet: 1. Noted the Council's Capital Programme Outturn for 2024-25 (Appendix A to the report).
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	2. Noted the Council's Capital Programme 2025-26 Quarter 1 update to 30 June 2025 (Appendix B) 3. Agreed that the revised Capital Programme (Appendix C) be submitted to Council for approval. 4. Noted the actual Prudential and Other Indicators for 2024-25 and the projected indicators for 2025-26 (Appendix D).
Date Decision Made	22 July 2025

508. Budget Monitoring 2025-26 - Quarter 1 Revenue Forecast

Decision Made	The Chief Officer - Finance, Housing and Change presented a report which detailed the revenue financial position, showing a projected net overspend of £898,000 against an approved budget of £383 million. This was a significant improvement from the previous year's overspend. She explained that the projected over spend was primarily due to ongoing pressures within the Social Services and Wellbeing Directorate, and the Chief Executive's Directorate. She alluded to Table 1 of the report which showed the comparison of budget against projected outturn at 30th June 2025 and also highlighted the outstanding prior year budget reductions as well as the monitoring of budget reductions for each directorate in 2025-26. Further details were at section 3 of the report. The Deputy Leader highlighted the importance of the monitoring and the actions that had been taken to mitigate pressures of overspends. The projected overspend this time last year was over £9million and so there had been a massive improvement in the last 12 months which should be noted. <u>RESOLVED:</u> That Cabinet noted the projected revenue position for 2025-26.
Date Decision Made	22 July 2025

509. Treasury Management Outturn Report 2024-25

Decision Made	The Chief Officer - Finance, Housing and Change presented a report which updated Cabinet on the treasury management activities of the last financial year. She stated that external borrowing was £103.8
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	million, with an average interest rate of 4.73%. Investments totaling £36.75 million earned £4.3 million in interest income. She explained that the Council's external debt and investment position on 31 March 2025 is shown in Table 1 of the report with further details found in Appendix A. The Deputy Leader was pleased with the report noting the robust management of the council's borrowing and investment activities. She highlighted that the council earned £4.3 million in interest from its investments, which she stated could be put to good use for the community. <u>RESOLVED:</u> That Cabinet: 1. Noted the treasury management activities for 2024-25 for the year 1 April 2024 to 31 March 2025. 2. Noted the Treasury Management Indicators for the period year ending 31 March 2025 against those approved in the Treasury Management Strategy 2024-25.
Date Decision Made	22 July 2025

510. Anti-Fraud Bribery and Corruption Policy

Decision Made	The Chief Officer - Finance, Housing and Change presented a report which updated Cabinet on the updated Anti-Fraud, Bribery and Corruption Policy which was attached at Appendix A. She explained that the Anti-Fraud, Bribery and Corruption Policy specifically addressed the three areas of Fraud, Bribery and Corruption outlining the procedures to be followed should any such events occur or be suspected along with the actions that may be taken. Cabinet last approved the Anti-Fraud and Bribery Policy on 19 February 2019 and there had been several amendments and updates which have been included in Appendix A. <u>RESOLVED:</u> That Cabinet approved the updated Anti-Fraud, Bribery and Corruption Policy at Appendix A to the report.
Date Decision Made	22 July 2025

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11. Bridgend Social Housing Allocation Policy

Decision Made	The Chief Officer - Finance, Housing and Change presented a report which sought approval from Cabinet to begin a public consultation on a revised social housing allocation policy, which was last updated in 2017. The draft policy, based on need, proposes priority bands for applicants and will be subject to a 12-week formal consultation. She advised that a review of the current SHAP has concluded. The key findings from the review are highlighted in section 3 of the report. The following questions were asked by Cabinet Members and responded to by the Chief Officer – Finance Housing and Change: • What are the main changes in the new policy compared to the old one? The main changes are to meet new legislation and operational needs, including putting those experiencing or threatened with homelessness into the highest priority band (Band A) and reviewing exclusion terms to avoid unfairly penalizing individuals for issues like debt. • Does the policy give priority to Bridgend residents over people from outside the borough? The council will prioritize Bridgend residents but will consider referrals from other areas on a case-by-case basis, especially for safeguarding or domestic violence issues. • What is the consultation process and how will the council ensure they reach vulnerable residents? The consultation will be widely publicized through various channels. The Deputy Leader suggested having in-person events with Officer assistance to help vulnerable residents complete the forms and get better feedback. • Clarity was sought on a concern raised about the 75% allocation rate of Valleys to Coast, which is an outlier compared to other social landlords. The 75% allocation rate for Valleys to Coast was part of a 2003 agreement. The council is working to increase this to 100% for properties funded by them and is in discussions with Valleys to Coast to amend the original document.
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	<u>RESOLVED:</u> That Cabinet: 1. Considered the SHAP (at Appendix 1 to the report); 2. Approved a 12 week public consultation on the revised SHAP; 3. Noted that a further report will be presented to Cabinet following the public consultation and seeking approval of the final SHAP prior to formal adoption.
Date Decision Made	22 July 2025

512. Panel Performance Assessment

Decision Made	The Chief Executive presented a report which informed Cabinet of the requirement on the Council to commission and organize a panel performance assessment (PPA) before the next local government elections, and the implications of this requirement. He explained that the PPA onsite work will take place in the week commencing 15 September 2025, with meetings commencing on Tuesday 16 September and concluding early afternoon on Friday 19 September 2025. The three stages of the PPA process were set out in section 3 of the report. <u>RESOLVED:</u> That Cabinet:- 1. Noted the date of the onsite work for the PPA in paragraph 3.1 of the report. 2. Considered and agreed governance proposals for PPA in paragraphs 3.9 - 3.12 (of the report). 3. Considered and agreed the membership of the panel in paragraph 3.6. 4. Reviewed and agreed the draft scoping document, with its proposed areas for focus in Appendix 1 to the report.
Date Decision Made	22 July 2025

513. Urgent Items

Decision Made	There were no urgent items
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Date Decision Made	22 July 2025

514. Exclusion of the Public

Decision Made	<u>RESOLVED:</u> The following items are not for publication as they contain exempt information as defined in Paragraphs 12, 13 and 14 of Part 4 and Paragraph 21 of Part 5, Schedule 12A of the Local Government Act 1972, as amended by the Local Government (Access to Information) (Variation) (Wales) Order 2007. Following the application of the public interest test, Cabinet resolved pursuant to the Act to consider these items in private, with the public excluded from the meeting during such consideration.
Date Decision Made	22 July 2025

515. Approval of Exempt Minutes

Decision Made	<u>RESOLVED:</u> That the exempt minutes of Cabinet dated 24/6/2025, be approved as a true and accurate record.
Date Decision Made	22 July 2025

516. Compulsory Purchase of a Long Term Empty Property

Decision Made	The decision in relation to this item is exempt (ie confidential)
Date Decision Made	22 July 2025

To observe further debate that took place on the above items, please click this [link](#)

The meeting closed at 17:10.

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	BRIDGEND TOWN CENTRE ACCESS
Report Owner / Corporate Director:	CORPORATE DIRECTOR COMMUNITIES
Responsible Officer:	DELYTH WEBB GROUP MANAGER STRATEGIC REGENERATION
Policy Framework and Procedure Rules:	There is no effect upon the Policy Framework and Procedure Rules.
Executive Summary:	The report provides a detailed update on the Bridgend Town Centre Access proposal and seeks Cabinet approval to progress with a package of measures to provide greater flexibility to town centre loading and unloading restrictions, more flexibility on Traffic Regulation Order (TRO) exemptions during times that the bollards are raised, improved access for cycling, and increased blue badge parking on Derwen Road. These measures would be on an 18-month trial basis, subject to continual monitoring.

1. Purpose of Report

- 1.1. The purpose of this report is to provide Cabinet with an update on the Bridgend Town Centre Access project and seek approval to introduce an 18-month Experimental Traffic Regulation Order (ETRO) comprising the following measures:
 - increased flexibility for loading and unloading;
 - additional exemptions to existing Traffic Regulation Orders (TROs) when protective bollards are raised;
 - improved access and secure parking for cycling; and
 - expanded Blue-badge parking provision on Derwen Road.
- 1.2 It should be noted that improved access to the town centre will not serve as a panacea for the wider challenges it faces. Meaningful regeneration will require a combination of this and other town centre initiatives. It is proposed that an update on the Bridgend Town Centre Masterplan (2021) projects be presented to a future Cabinet meeting.

- 1.3 This report also seeks delegated authority for the Corporate Director – Communities to finalise the detail design, progress the ETRO and bring it into force, establish monitoring and evaluation arrangements, and submit or accept any external funding required to deliver the scheme.
- 2. Background**
- 2.1 Bridgend town-centre pedestrianisation was completed in November 2004. Traders have subsequently indicated that the associated access restrictions are adversely affecting footfall and economic performance.
- 2.2 The Bridgend Town Centre Masterplan assessed the findings from previous Town Centre Access studies and concluded that options for improved town centre access should be explored further to account for changes in National Policy and guidance. Atkins Réalis were appointed in 2023, to look at options for improved accessibility in the Town Centre, including three access options for Queen Street, Dunraven Place and Market Street: These included the following:-
- **Option 1** – shorten the pedestrianised period while retaining delivery access outside those hours.
 - **Option 2** – allow all traffic outside a core pedestrian window while retaining the northbound one-way system.
 - **Option 3** – permit all traffic at all times while retaining the one-way layout.
- 2.3 The study concluded that Options 2 and 3 would re-introduce significant traffic volumes, alter the street typology from Pedestrian Priority to Informal and necessitate kerb upstands of at least 60 mm. Both options conflicted with national and local policy, and external funding for their implementation is unlikely to be available.
- 2.4 Option 1, supported by a complementary multi-modal package (revised pedestrian hours, cycling provision, way-finding, peripheral bus-stop enhancements and an updated parking strategy for more than 700 edge-of-centre spaces), was therefore recommended. Cabinet endorsed this approach in November 2023. Officers and consultants subsequently prepared a draft scheme focusing on extended loading and unloading, cycling access and additional disabled parking, in readiness for public engagement.
- 3. Current situation / proposal**
- 3.1 Following on from the Atkins Realis study and recommendation (2024) a town centre access scheme was refined through internal officer discussions, an independent Stage 1 Road Safety Audit (RSA) on-street traffic surveys and ongoing safety risk assessments. The RSA highlighted a potential increase in cyclist–pedestrian interactions and advised that any amendments should consider an Experimental Traffic Regulation Order (ETRO) to allow post-implementation monitoring and, if required, adjustment.
- 3.2 Public consultation was held from 4 April to 2 May 2025. It sought views on extending loading and unloading hours, permitting cycling with improved cycle parking, and introducing additional blue-badge bays on Derwen Road. The consultation was publicised via social media, the Council e-newsletter, bilingual leaflets delivered to more than 400 town-centre businesses, three stakeholder webinars, two staffed drop-in sessions at The Bridge, and paper surveys on request.
- 3.3 On 15 January 2025 Full Council endorsed a Motion, requesting Cabinet to consider a partial re introduction of traffic. Following a meeting with Cabinet and Bridgend Town Centre Councillors, the consultation questionnaire was amended accordingly to establish whether

there continued to be public demand for access to all traffic through Queen Street, Dunraven Place and Market Street. The intention was not to propose the re-introduction of general traffic as part of the current proposal, but to gauge public opinion on pursuing restoring all general traffic to the three streets in the future. The questionnaire results focus in the main on what is proposed in the Atkins Report which was previously endorsed by Cabinet. The current proposal is the first positive stage in improving Bridgend Town Centre Access. As the town centre continues to develop the proposal to re-introduced general traffic will be explored further, but currently the re-introduction of general traffic through the town centre is contrary to current planning policy. There would also be a requirement to implement significant highway engineering works to meet current design standards and ensure the safety of vulnerable users. This would be subject to detailed design and funding, noting that the lack of policy alignment would make a successful external funding bid difficult to achieve.

- 3.4 It should also be noted that the Atkins Realis report (2024) identified from a benchmarking review that there is no clear evidence that re-introducing vehicular traffic into a town centre would result in an increase in economic activity. Even so, the gathering of public views on the matter is of value to inform future decision-making, in the event of the Council deeming the potential benefits to outweigh the risks.
- 3.5 The consultation generated 760 responses (758 online, one paper and one email) and 17 attendees at the drop-in sessions. An overview of the feedback indicated the following, with a full copy of the consultation responses attached as **Appendix 1**.

- 60 per cent support for extending loading and unloading (28 per cent opposed, 2 per cent favoured shorter hours, 10 per cent unsure);
- 56 per cent support for permitting cycling within the pedestrian area, comprising 37 per cent unqualified support and 19 per cent conditional support (37 per cent opposed, 7 per cent unsure);
- 64 per cent support for introducing additional Blue-badge parking on Derwen Road (22 per cent opposed, 14 per cent unsure).

- 3.6 Taking account of the evidence and consultation feedback, and subject to completion of the external safety risk assessments, it is proposed to introduce an 18-month Experimental Traffic Regulation Order (ETRO) that would:

- (i) extend loading and unloading until 11:00 and recommence it after 16:00, with additional flexibility for facilitating emergency situations and events;
- (ii) allow cycling within the pedestrian zones, with localised restrictions if required by the design and risk assessments; and
- (iii) convert under-utilised taxi bays on Derwen Road to Blue-badge parking, with precise operational times to be established.

- 3.7 The ETRO can be implemented relatively quickly, and at low cost due to the absence of any significant engineering works, delivering early benefits while retaining flexibility. A monitoring, reporting and evaluation regime will be established to evaluate the success of the scheme and this will be reported back to Cabinet at the end of the 18-month period, with recommendations to determine the permanent way forward for the town centre.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions,

such as the development or the review of policies, strategies, services and functions. It is considered that there will be no significant or unacceptable impacts as a result of this report.

- 4.2 A full EIA has been carried out as part of the development of this strategy, policy or proposal. The full EIA considers the impact of the strategy, policy or proposal on the nine protected characteristics, the Socio-economic Duty and the use of the Welsh Language. Survey materials were available in Welsh and English, and online sessions were offered to stakeholder groups representing protected characteristics. Additional Blue-badge bays on Derwen Road will improve access to the town centre for disabled visitors. The prioritisation of active travel through the retention of a pedestrian and cycle priority zone provides an inclusive alternative to private car use.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The proposed town-centre interventions will assist in delivering the Council's Corporate Plan well-being objectives 2025-26. In particular, contributing towards well-being objective One: A prosperous place with thriving communities.
- Promote the conditions for economic growth and prosperity, by Improve sustainable and active travel choices.
 - Regenerate our town centres and Valleys.

6. Climate Change and Nature Implications

- 6.1 Any future projects progressed from the Placemaking Plans will be developed to ensure there is no negative impact on the environment and is in line with the commitment to achieve the Council's Net Zero targets. Prioritising walking, cycling and public transport accords with the sustainable-transport hierarchy set out in Llwybr Newydd – The Wales Transport Strategy 2021 and will help reduce emissions from short car trips. This also supports the Corporate Wellbeing Objective number 5.

7. Safeguarding and Corporate Parent Implications

- 7.1 Due regard has been paid to the BCBC Safeguarding Policy which seeks to safeguard and promote the wellbeing of children, young people and adults at risk of abuse or neglect and to ensure that effective practices are in place throughout the Council and its commissioned services. Given the subject matter of this report no negative safeguarding implications have been identified.

8. Financial Implications

- 8.1 Total implementation costs of the Town Centre Access improvements are £102,206. This sum covers legal drafting of the Experimental Traffic Regulation Order, new signage, carriageway markings for Blue-badge bays, secure cycle parking, and monitoring and evaluation.
- 8.2 External Grant of £89,761 (88%) has been secured from Welsh Government Transforming Towns and Shared Prosperity Funding. The match funding of £12,445 is ring fenced within a feasibility earmarked reserve budget specific to this scheme

9. Recommendations

It is recommended that Cabinet:

- 9.1 Delegate authority to the Corporate Director Communities to:-
- (i) pursue an 18-month ETRO for the extension of loading and unloading hours to 11:00 and recommence it after 16:00, with additional flexibility allowed for emergency situations and events;
 - (ii) pursue an 18-month ETRO to permit cycling within the pedestrianised area, subject to the satisfactory completion of the safety risk assessments;
 - (iii) pursue an 18-month ETRO for the conversion of under-utilised taxi bays on Derwen Road to Blue-badge parking bays.
- 9.2 Delegate authority to the Corporate Director Communities to establish monitoring and evaluation arrangements for the Experimental Traffic Regulation Order (ETRO) and to modify, suspend or revoke the Order if required, during the experimental period.
- 9.3 Delegate authority to the Corporate Director Communities, in consultation with the Chief Officer – Finance, Housing & Change and Chief Officer - Legal & Regulatory Services, HR & Electoral, to submit and accept external funding, award and enter into contracts, agreements and other legal documentation on behalf of the Council which is necessary to deliver the measures.
- 9.4 Note that a further report will be presented to Cabinet proposing a permanent position in respect of the Experimental Traffic Regulation Orders (ETRO);
- 9.5 Note that a further report will be presented to Cabinet on Bridgend Town Centre Masterplan projects.

Background Documents:

None

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Link
Transport Planning

**BRIDGEND TOWN CENTRE ACCESS SURVEY
CONSULTATION REPORT**

SEPTEMBER 2025

BRIDGEND COUNTY BOROUGH COUNCIL

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Document Control

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Digital Viewing: This report contains detailed maps that are best viewed in digital format to appreciate their full detail and clarity. We recommend accessing and reviewing this document electronically to ensure optimal visibility of these intricate cartographic elements. The digital version allows for zooming and panning features that enhance the readability and interpretation of the maps, which might not be as effective in a printed version.

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APPENDICES

APPENDIX A – PUBLIC ENGAGEMENT SURVEY FORM

1. INTRODUCTION

1.1 Context

- 1.1.1 Bridgend County Borough Council commissioned Link Transport Planning to support the consultation process for proposed changes to access within Bridgend Town Centre. The project was delivered in partnership with Sustrans Cymru and the Council's Regeneration and Public Engagement teams, ensuring a collaborative and inclusive approach throughout.
- 1.1.2 The consultation was carried out over four weeks, from 4 April to 2 May 2025. A comprehensive marketing strategy was employed to raise awareness and encourage public participation. Various communication channels were used to reach a broad audience and promote engagement.
- 1.1.3 The public survey was made available online via the consultation page on the Council's website. Paper copies could be requested directly from the project team. All versions of the survey were offered in both English and Welsh (**Appendix A**).
- 1.1.4 The consultation focused on multi-modal access to Bridgend Town Centre, following recommendations from a prior study undertaken by Atkins Realis.
- 1.1.5 The consultation sought public feedback on the following proposed changes to town centre access:
- **Extension of loading and unloading hours** within pedestrianised areas to better support local businesses and their customers.
 - **Permitting cycling within pedestrian zones**, accompanied by the introduction of improved cycle parking facilities.
 - **Enhancement of disabled parking provision** through the repurposing of underused areas along Derwen Road.
- 1.1.6 Please note that at the request of Bridgend County Borough Council, an additional survey question was included to assess public views on allowing all traffic access through Queen Street, Dunraven Place and Market Street. Although not part of the recommendations from the Atkins Realis study, which formed the basis of the consultation, the question was added in response to stakeholder feedback to inform future decision-making.
- 1.1.7 A visual summary of these proposed changes, which was included in the public consultation, is presented in Figure 1.

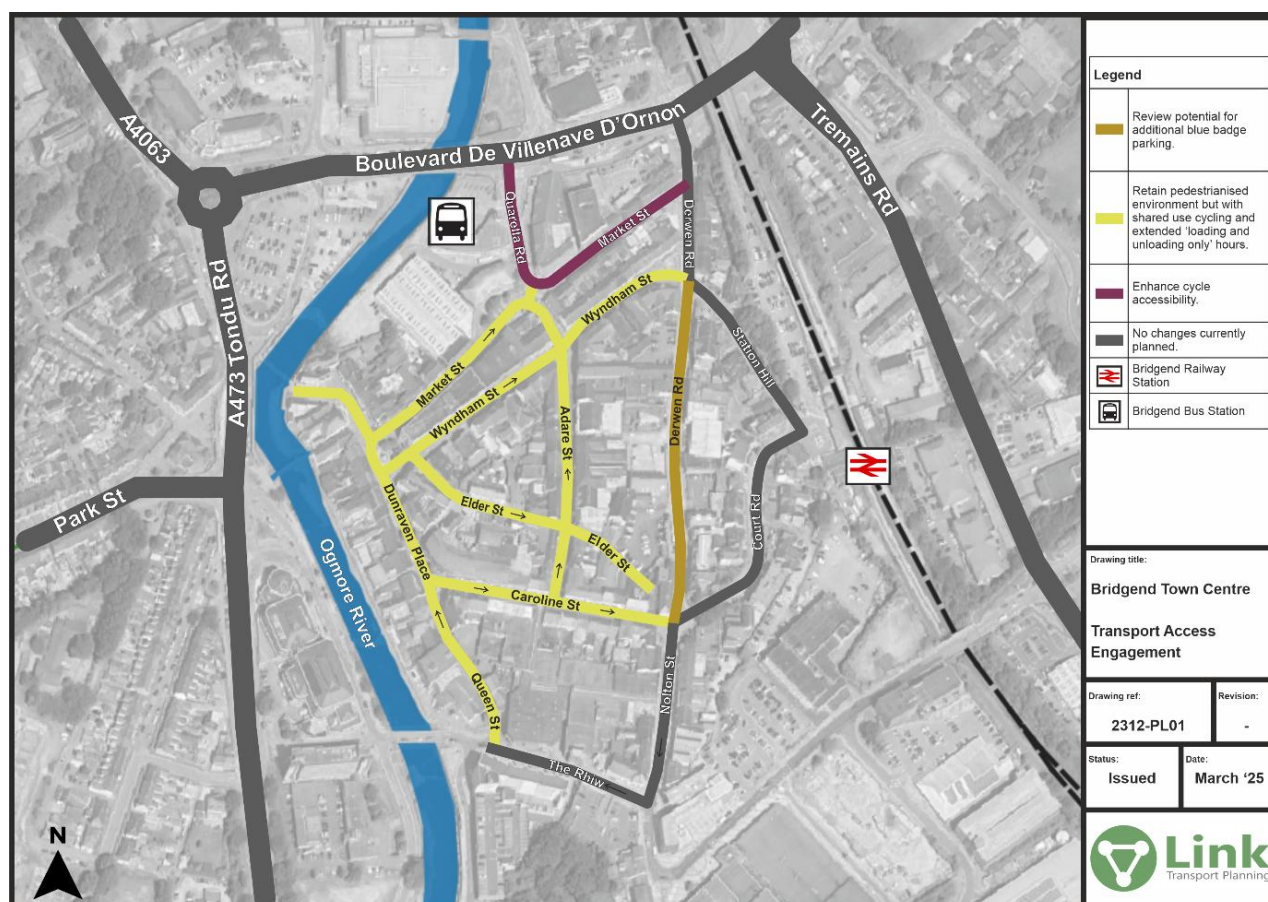


Figure 1: Overview plan for Bridgend Town Centre.

- 1.1.8 The survey included 28 questions, none of which were mandatory, with the participants given flexibility to skip questions they did not want to answer. Additionally, a standard set of equality monitoring questions was included, aligning with best practice for all public-facing surveys.

1.2 Equality Impact Assessment

- 1.2.1 A preliminary Equality Impact Assessment (EqIA) was completed before the consultation period which confirmed a requirement for a full EqIA. The full EqIA has been drafted and is maintained as a live project document. It will be updated to include the public consultation results.

1.3 Purpose

- 1.3.1 This consultation report, along with all supporting data, will be submitted to Bridgend County Borough Council to inform future decision-making.

2. ENGAGEMENT METHODS

2.1 Introduction

2.1.1 This chapter outlines all ways the project team engaged with stakeholders throughout the four-week consultation period (4 April to 2 May 2025). It also includes the response rate of these different engagement methods.

2.2 Online Survey

2.2.1 The project team developed an online survey, which was hosted on Bridgend Council's engagement platform. The online survey gave respondents the ability to respond on a variety of devices, including laptops and smartphones, and was made available in English and Welsh.

2.2.2 The surveys were accessible by visiting the council's website link directly or by following the advertisement on the various social media platforms.

2.2.3 A qualitative section within the survey allowed respondents to suggest any alternative considerations residents would like the council and consultants to review.

2.3 Key Stakeholder Groups

2.3.1 Details of the consultation were sent to several key stakeholder groups, which are included in Table 1 below.

2.3.2 Three online consultation sessions were organised and offered to stakeholders during the first week of May 2025. However, multiple organisations agreed to share the consultation details within their networks as they were unable to participate directly.

Stakeholder	Category	Status
Future Generations Officer	National Groups	Contacted – No response
Children's Commissioner	National Groups	Contacted – No response
Council for Voluntary Youth Work	National Groups	Contacted – No response
Welsh Youth Parliament	National Groups	Contacted – No response
Children in Wales	National Groups	Contacted – No response
Older People's Commissioner	National Groups	Responded – Unable to participate
Age Cymru	National Groups	Contacted – No response
Disability Wales	National Groups	Contacted – No response
RNIB	National Groups	Contacted – No response
Welsh Guide Dogs	National Groups	Contacted – No response
Leonard Cheshire	National Groups	Responded – Unable to participate
Diverse Cymru	National Groups	Contacted – No response
Ramblers	National Groups	Responded – Unable to participate
Living Streets Cymru	National Groups	Contacted – No response
Bridgend Youth Service	Young People	Contacted – No response
Bridgend Youth Development	Young People	Contacted – No response
Bridgend Youth Support	Young People	Contacted – No response
Bridgend Youth Council	Young People	Responded – Unable to participate
Bridgend Youth Mayor	Young People	Contacted – No response

BAVO (Bridgend Association of Voluntary Organisations)	Young People	Contacted – No response
Family Information Services	Young People	Contacted – No response
Age Cymru West Glamorgan	65+	Contacted – No response
Ageing Well in Bridgend	65+	Contacted – No response
U3A Bridgend	65+	Contacted – No response
Age Cymru Bridgend SHOUT	65+	Contacted – No response
African Community Centre	Race	Contacted – No response
Race Council Cymru	Race	Responded – Unable to participate
Ethnic Minorities and Youth Support Team Wales	Race	Contacted – No response
WI Glamorgan	Gender	Contacted – No response
Merched Y Waur Glamorgan	Gender	Contacted – No response
People First Bridgend	Learning Disability	Contacted – No response
Age Connects Morgannwg	65+	Contacted – No response
Older People's Commissioner for Wales	65+	Contacted – No response
Stroke Association Bridgend	Disability	Contacted – No response
The National Autistic Society's Bridgend and District Branch	Disability	Contacted – No response
All Wales Forum Parents and Carers	Learning Disability	Contacted – No response
Wales Council for Deaf People	Disability	Contacted – No response
Care and Repair Bridgend	65+	Contacted – No response
Bridgend and District Visual Impairment Society	Disability (Blind)	Contacted – No response

Table 1: Full list of Stakeholders contacted by Sustrans

2.4 Social Media

- 2.4.1 Bridgend County Borough Council actively promoted the consultation through a range of digital platforms to maximise reach and public engagement.
- 2.4.2 The consultation was publicised on three social media channels: Facebook, 'X' (formerly Twitter), and Bluesky. The first social media post was published on 'X' on 9 April 2025, with the final post shared on 30 April 2025. In total, the Council issued:
- 6 posts on 'X'
 - 1 post on Facebook
 - 1 post on Bluesky
- 2.4.3 In addition to social media activity, the consultation received further exposure via the Council's e-newsletter, with announcements published on 1 April and 10 April 2025. There were also non-council media reports that generated significant discussion and awareness.

2.5 Leaflet Drop

- 2.5.1 On 15th April, over 400 leaflets were distributed (English and Welsh) throughout Bridgend town centre to various commercial establishments to increase awareness and encourage responses to the survey. The leaflets contained information about both in-person drop-in sessions and online consultation links.

2.6 Community Engagement

2.6.1 Two public engagement sessions were held as part of the consultation process. Both events took place at The Bridge, 46-48 Dunraven Place, Bridgend. The first session was held on 23rd April from 13:00 to 19:00, and the second session on 29th April from 09:00 to 16:00.

2.7 Response Rate

2.7.1 The recorded response rates were as follows:

- 756 responses to the consultation were received in total.
 - Of the responses received, there were 754 online submissions
 - One paper version of the survey was returned at the in-person event.
 - One completed survey form was received via email.
- No comments were received by telephone call.
- The in-person engagement events attracted 17 individuals.

3. QUESTION AND ANALYSIS

3.1 Introduction

- 3.1.1 The consultation contained 28 questions related to the Bridgend Town Centre Access proposals. All questions were optional, so participants could choose to answer all or some of the questions.
- 3.1.2 For qualitative questions, coding was introduced. This required a review of all open-ended survey responses to identify prevailing themes. These themes were then organised into clear categories, each associated with specific keywords and phrases. Using these keywords, responses were sorted into their relevant groups.
- 3.1.3 This section details the responses to the survey (all survey types).

3.2 Support for Increased Loading/Unloading Hours

- 3.2.1 Figure 2 below shows responses from part 1, section A, question 1. This question had 748 respondents.

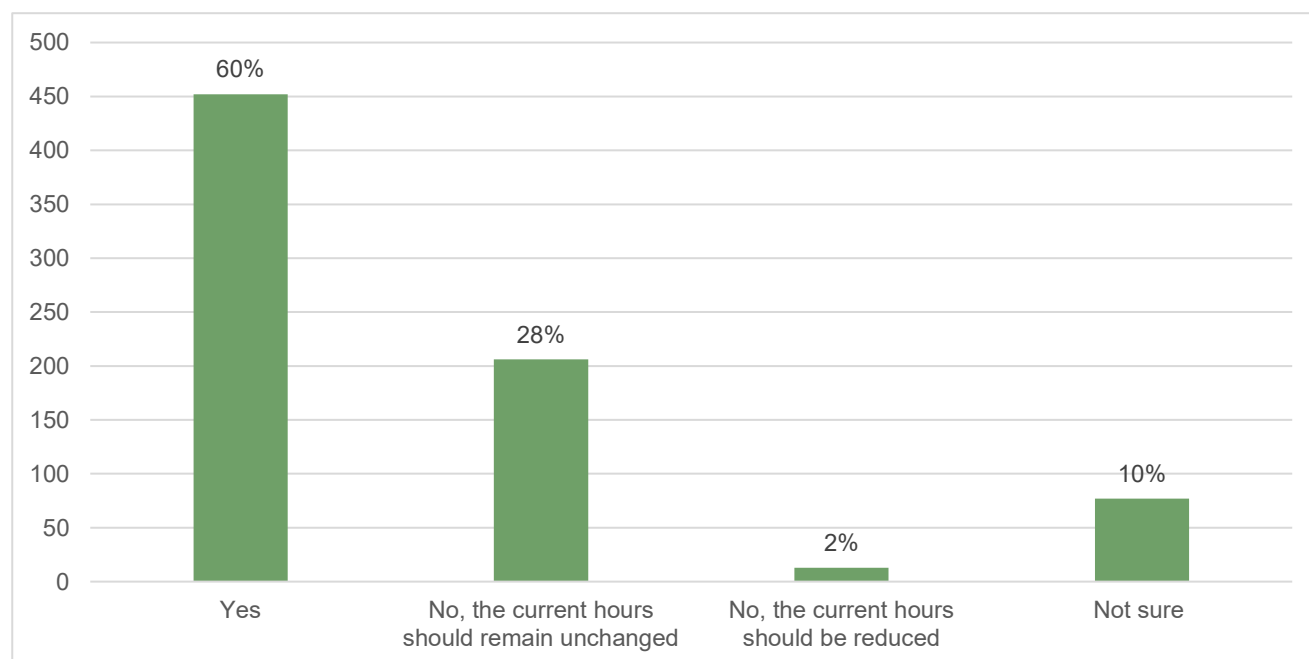


Figure 2: Do you support increasing the hours available for loading and unloading in Bridgend Town Centre?

- 3.2.2 Figure 2 shows 60% of respondents stated that they support an increase in loading and unloading hours in Bridgend Town Centre. 28% of respondents stated that they support the hours remaining unchanged.

3.2.3 Table 2 below shows responses from part 1, section A, follow-up to question 1. This question had 353 respondents.

Code	Response Count	Percentage	Description
0	47	6%	Ambiguous/Other
1	130	17%	Unrestricted access
2	137	18%	Extended access
3	26	4%	Trader support
4	1	0%	Shopper convenience
5	10	1%	No change
6	2	0%	Accessibility balance
No code	403	54%	Blank

Table 2: What loading and unloading hours do you think should be in place and why?

3.2.4 Table 2 shows that the majority of stakeholders would like loading and unloading hours to be increased in the town centre.

3.3 Support for Queen St/Dunraven Pl/Market Street being more accessible to all traffic

3.3.1 Figure 3 below shows responses from part 1, section B, question 1. This question had 749 respondents.

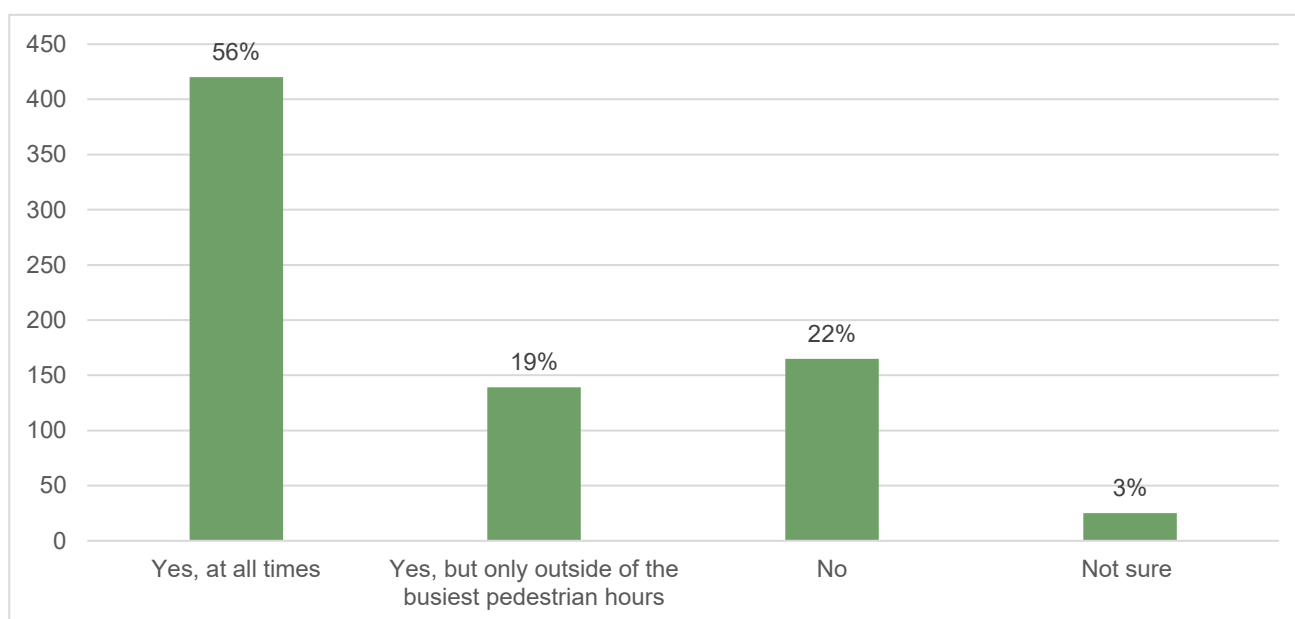


Figure 3: Should Queen Street, Dunraven Place and Market Street be more accessible to all traffic?

3.3.2 Figure 3 shows 56% of respondents stated they think that Queen Street, Dunraven Place and Market Street should be more accessible to all traffic at all times. 19% of respondents stated that these streets should be more accessible, but only outside of busy pedestrian hours. 22% of respondents stated that these streets should not be more accessible to all traffic.

3.3.3 Table 3 below shows responses from part 1, section B, follow-up to question 1. This question had 377 respondents.

Code	Response Count	Percentage	Description
0	3	0%	Ambiguous/Other
1	156	21%	Pro-pedestrianisation
2	13	2%	Traffic safety concern
3	71	9%	Accessibility/Mobility concerns
4	123	16%	Critical of pedestrianisation
5	11	2%	Traffic enforcement/Management
No code	379	50%	Blank

Table 3: What is your opinion on all traffic access to Queen Street, Dunraven Place and Market Street?

3.3.4 As shown in Table 3, stakeholder opinions regarding traffic access to these streets were divided.

3.4 Support for Cycling through the Town Centre

3.4.1 Figure 4 below shows responses from part 1, section C, question 1. This question had 750 respondents.

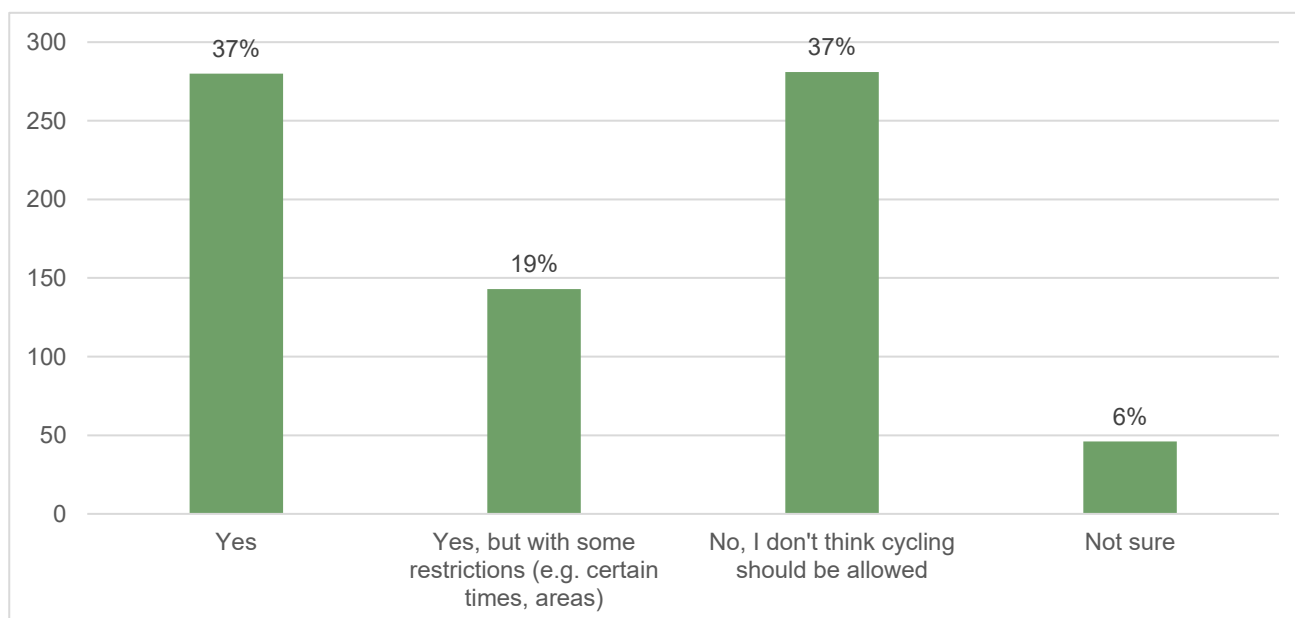


Figure 4: Should cycling be allowed in the town centre during pedestrianised hours?

3.4.2 Figure 4 shows 37% of respondents believe that cycling should be allowed in the town centre during pedestrianised hours and a further 19% of respondents stated that cycling should be allowed in the town centre, but with some restrictions. However, 37% of respondents also stated that cycling should not be allowed in the town centre.

3.4.3 Table 4 below shows responses from part 1, section C, follow-up to question 1. This question had 506 respondents.

Code	Response Count	Percentage	Description
1	387	51%	Safety/Behaviour concerns
2	31	4%	Disabled/Vulnerability concerns
3	57	8%	Positive support for cycling
4	27	4%	Infrastructure needs
5	4	0%	Misuse/Abuse fears
No code	250	33%	Blank

Table 4: What is your opinion on cycling in the town centre during pedestrianised hours?

3.4.4 As indicated in Table 4 a high proportion of stakeholders have concerns that permitting cyclists into the town centre could result in safety concerns and behavioural problems.

3.5 Support for Improved Cycle Parking in the Town Centre

3.5.1 Figure 5 below shows responses from part 1, section C, question 2. This question had 746 respondents.

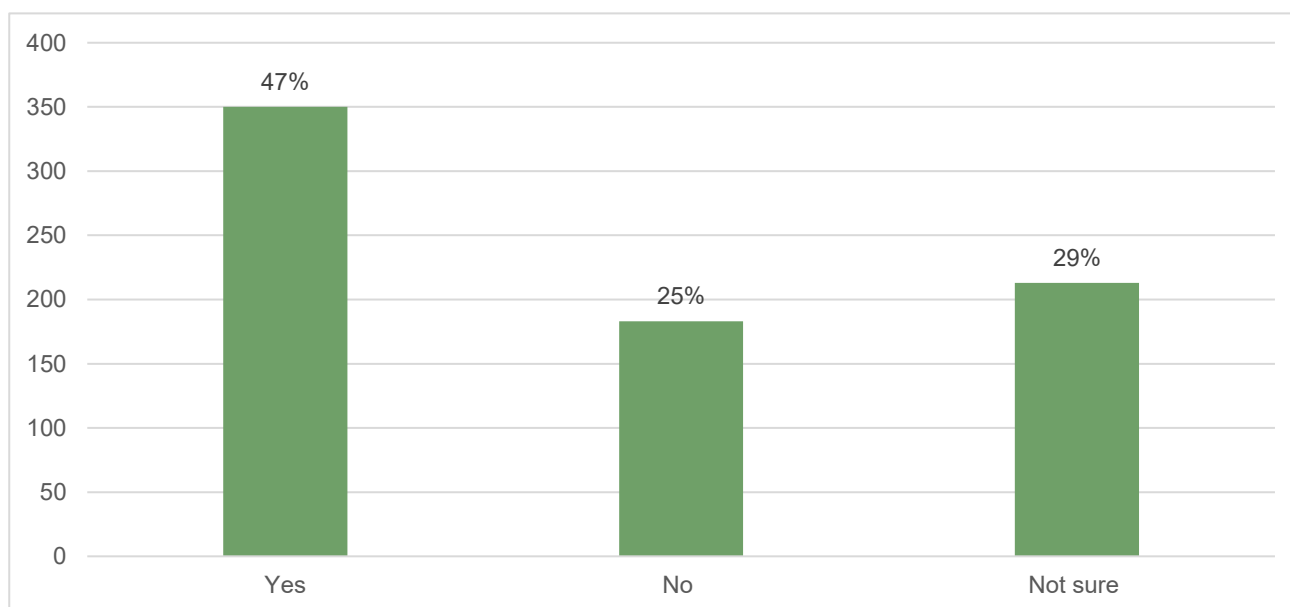


Figure 5: Do you think there should be improved cycle parking in the town centre?

3.5.2 Figure 5 shows that 47% of respondents stated that there should be improved cycle parking in Bridgend town centre. 25% of respondents stated that there should not be improved cycle parking in the town centre. There were also 29% of respondents who stated 'Not sure' to this question.

3.5.3 Table 5 below shows responses from part 1, section C, follow-up to question 2. This question had 236 respondents.

Code	Response Count	Percentage	Description
0	41	6%	Ambiguous/Other
1	6	1%	More cycle parking is needed
2	113	15%	Need secure/Covered parking facilities
3	62	8%	Suggested specific locations
4	14	1%	Current cycle parking is sufficient
No code	520	69%	Blank

Table 5: What is your opinion on improved cycling parking in Bridgend Town Centre?

3.5.4 Table 5 demonstrates that there is support for the provision of additional secure and sheltered cycle parking facilities within the town centre.

3.6 Support for the creation of more disabled parking in place of taxi or loading bays

3.6.1 Figure 6 below shows responses from part 1, section D, question 1. This question had 748 respondents.

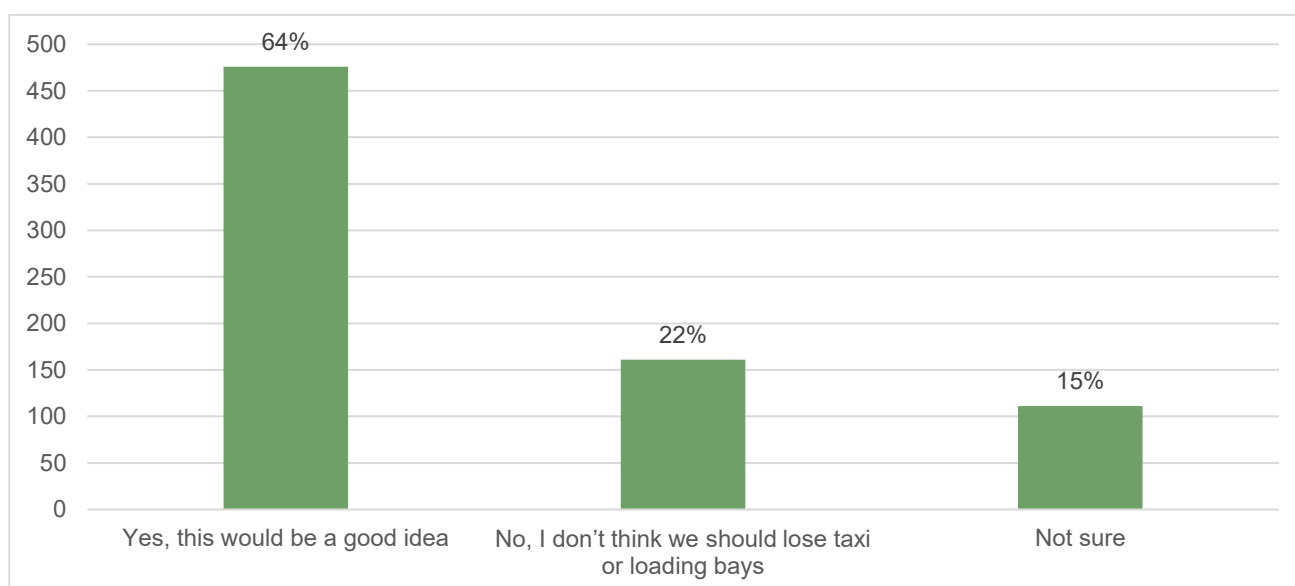


Figure 6: Do you think that we should create more disabled parking spaces in place of taxi or loading bays that are not regularly used?

3.6.2 Figure 6 shows that 64% of respondents stated that it would be a good idea to create more disabled parking spaces in place of taxi or loading bays that are not regularly used. 22% of respondents stated that they do not think taxi and loading bays should be lost to create more disabled parking spaces. There were also 15% of respondents who answered 'Not sure' to this question.

3.6.3 Table 6 below shows responses from part 1, section D, follow up to question 1. This question had 748 respondents.

Code	Response Count	Percentage	Description
0	3	0%	Ambiguous/Other
1	476	61%	Support creating blue badge spaces in taxi and loading bays
2	272	35%	Oppose replacing taxi and loading bays
3	13	2%	Conditional/Mixed views
4	4	1%	Current disabled parking is sufficient
No code	8	1%	Blank

Table 6: What is your opinion on creating more disabled parking in place of taxi and loading bays in Bridgend Town Centre?

3.6.4 As indicated in Table 6, the majority of respondents support converting currently under-utilised taxi and loading bays into Blue Badge parking spaces.

3.7 Insights on Ancillary Data

3.7.1 Figure 7 below shows responses from section D, question 2. This question had 744 respondents.

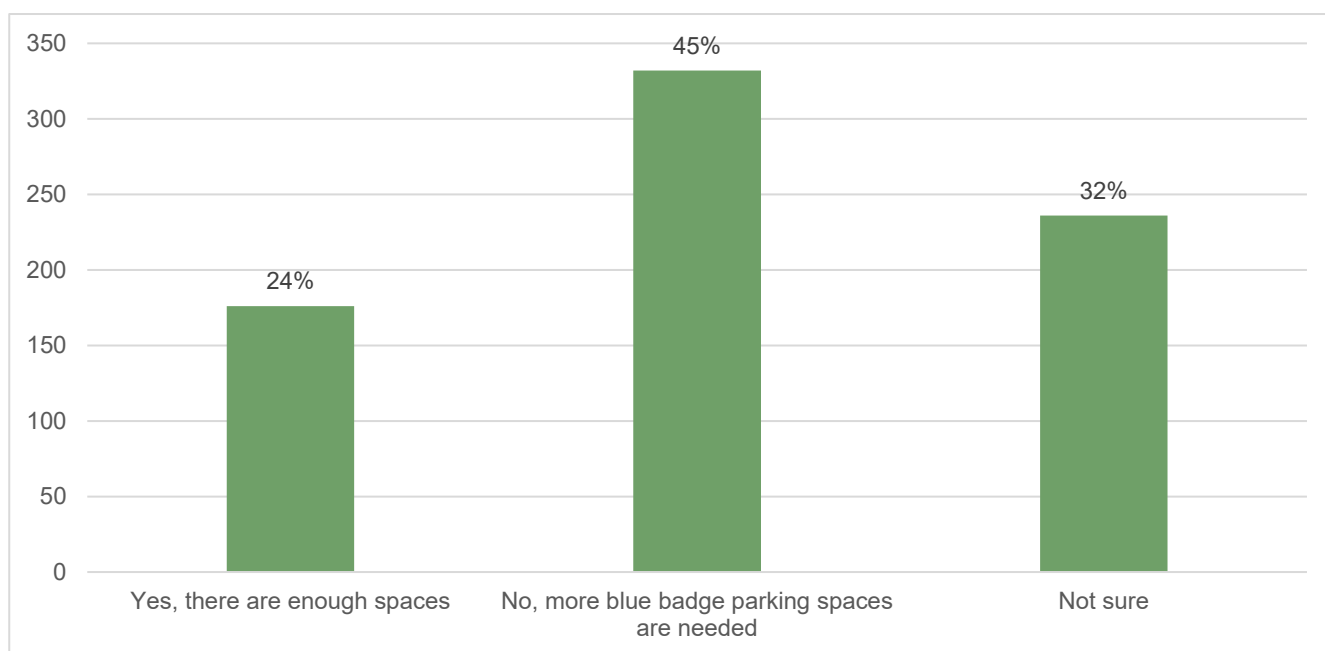


Figure 7: Thinking more widely, do you think there is enough disabled parking available to allow access to the town centre?

3.7.2 Figure 7 shows that 45% of respondents stated that more blue badge parking spaces are needed in Bridgend town centre, 32% of respondents answered 'Not sure' to this question. There are also 24% of respondents who believe there are enough blue badge parking spaces in the town centre.

3.7.3 Figure 8 below shows responses from part 2, section A, question 1.

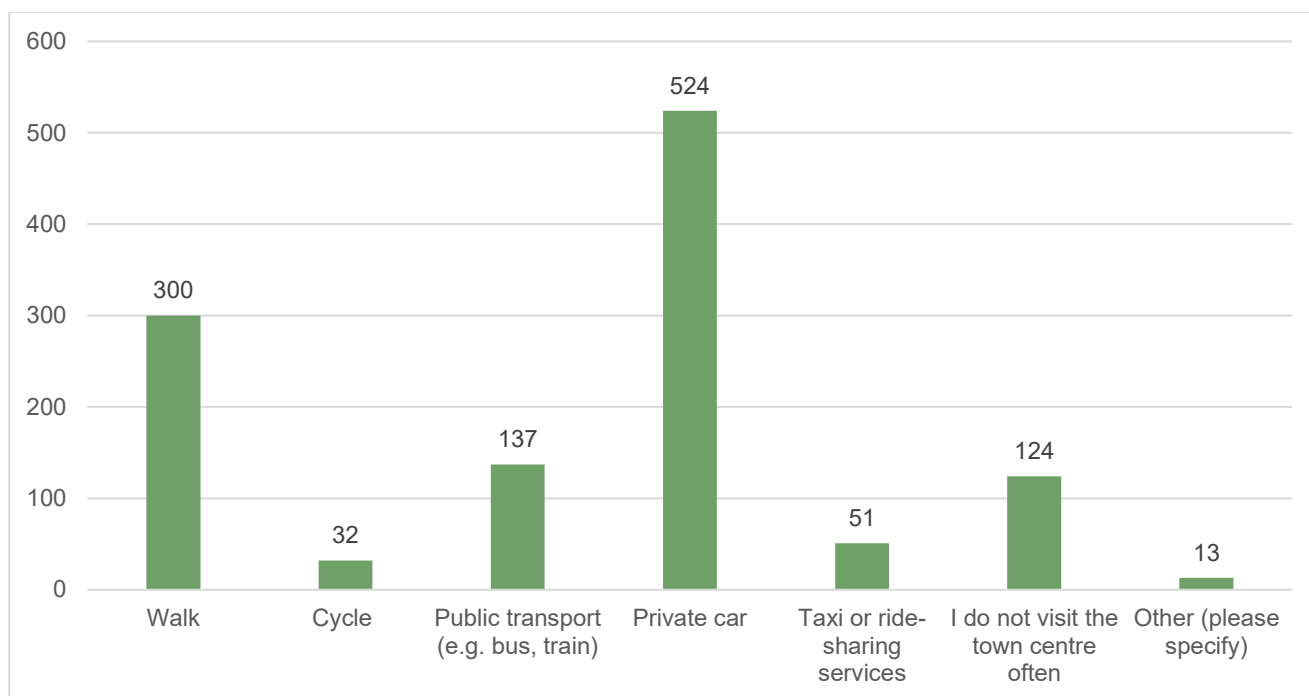


Figure 8: How do you usually travel to the town centre? (select all that apply)

3.7.4 Figure 8 shows that the most popular mode of transport for travel to the town centre is via private car, followed by walking. Cycling, taxi, or ride-sharing are amongst the least popular modes of transport.

3.7.5 Figure 9 below shows responses from part 2, section A, question 2. This question had 751 respondents.

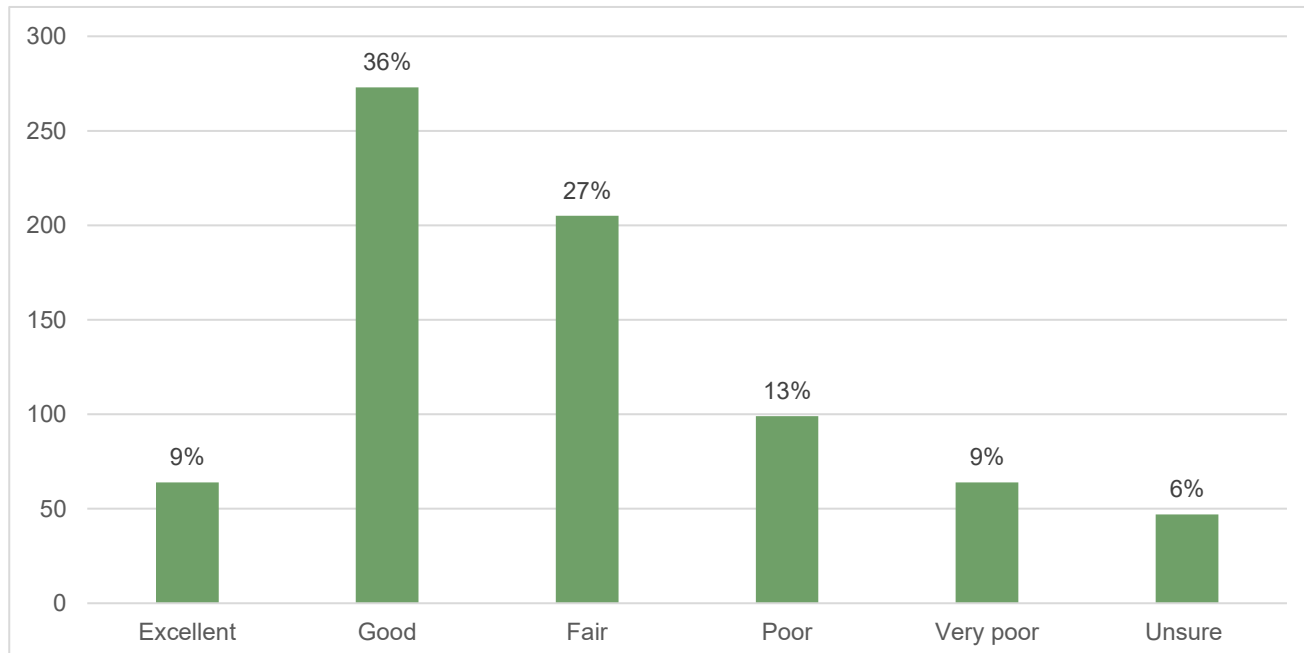


Figure 9: How would you rate the ease of town centre access for walking, cycling or public transport?

3.7.6 Figure 9 shows 36% of respondents stated that there is 'good' access to the town centre via walking, cycling and public transport, 27% of respondents stated that there is 'fair' access to the town centre.

3.7.7 Figure 10 below shows responses from part 2, section A, question 3. This question had 753 respondents.

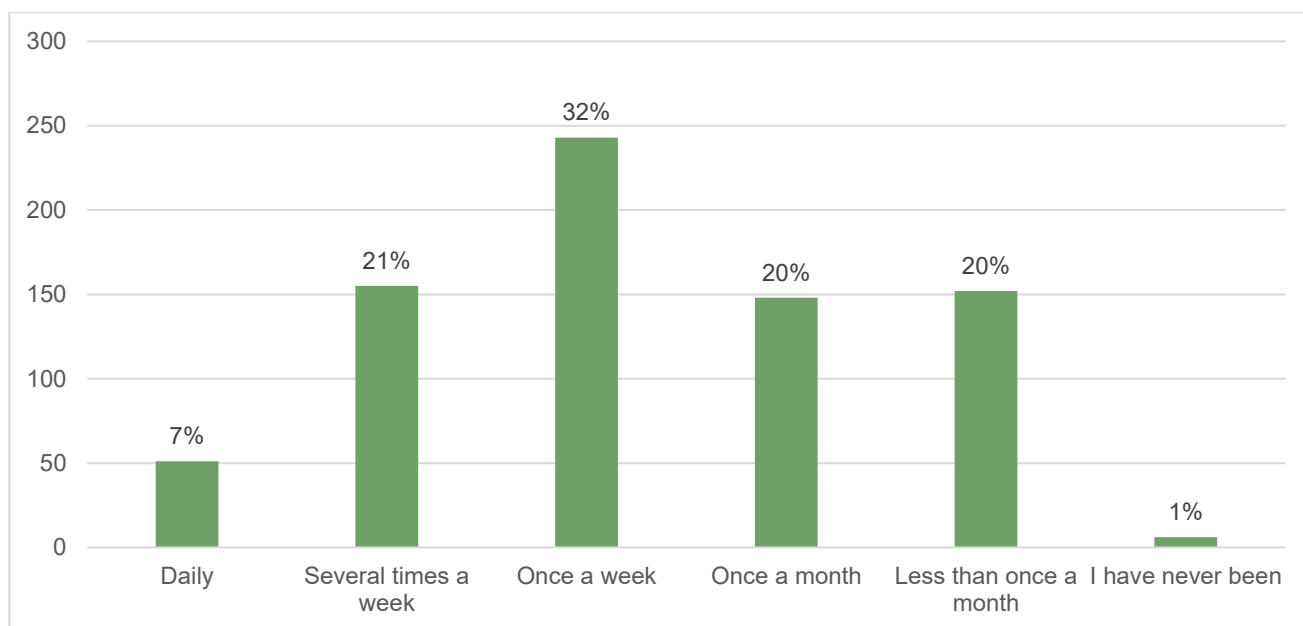


Figure 10: How often do you visit the town centre?

3.7.8 Figure 10 shows that 32% of respondents visit the town centre once a week, 21% visit several times a week, 20% visit less than once a month and 20% visit once a month.

3.7.9 Figure 11 below shows responses from part 2, section A, question 4.

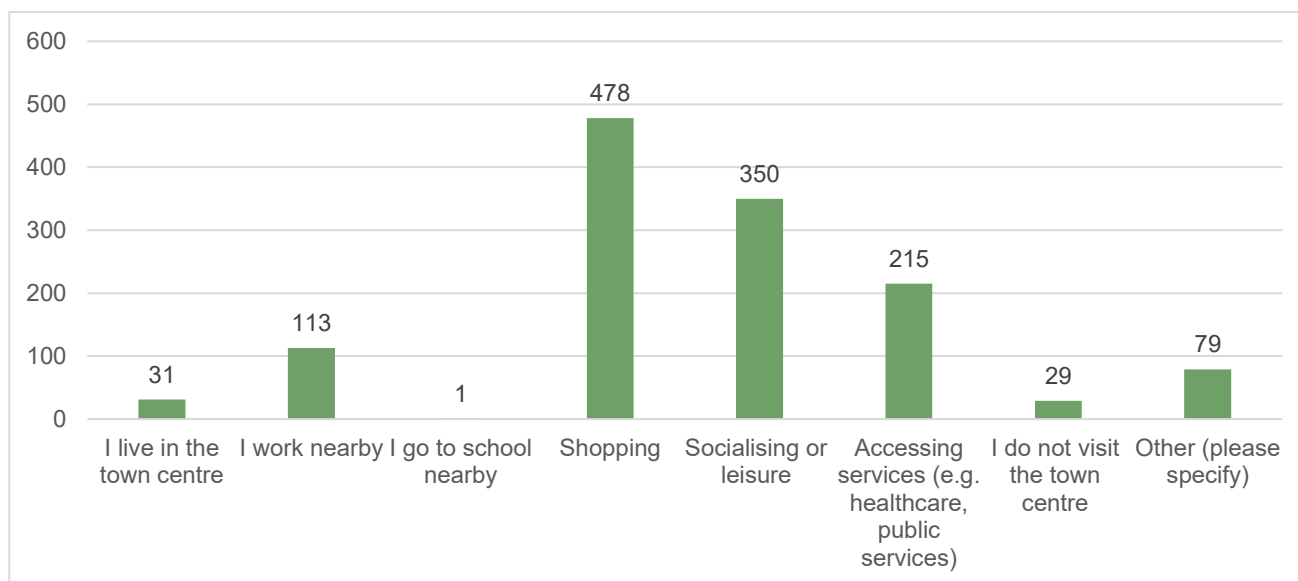


Figure 11: What is the main reason for your visits to the town centre? (select all that apply)

3.7.10 Figure 11 shows that the most popular reasons to visit the town centre are shopping, socialising or leisure and also access to services. Some of the least popular reasons for visiting are living in the town centre, school nearby and working nearby.

3.7.11 Figure 12 below shows responses from part 2, section A, question 5.

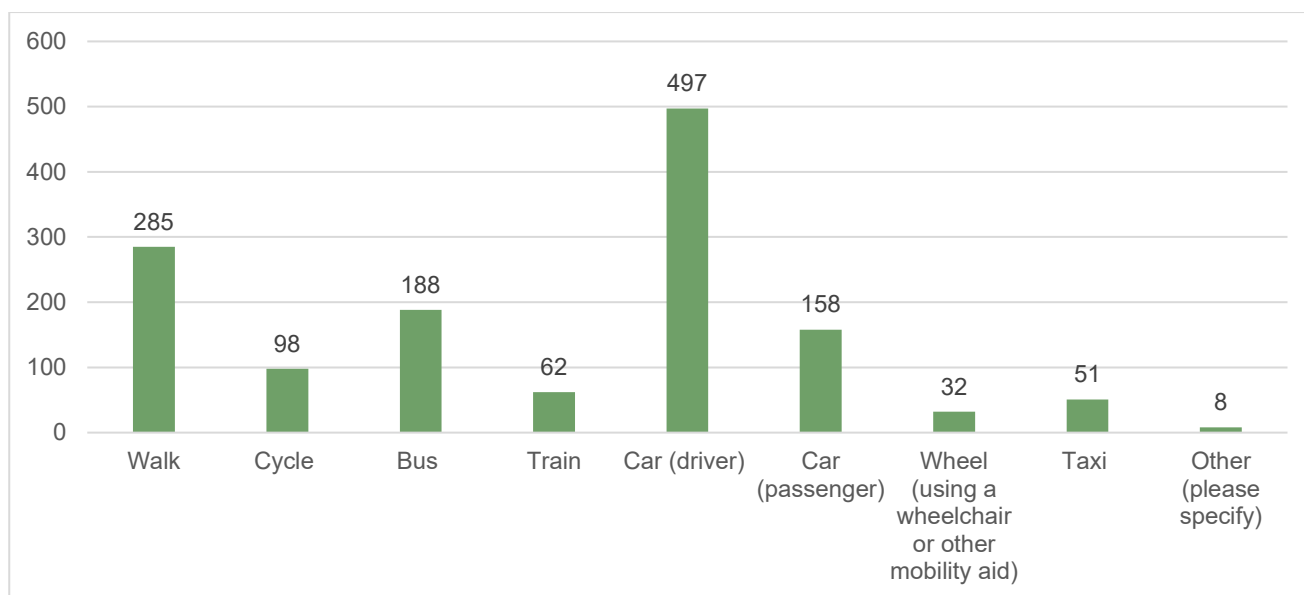


Figure 12: How would you like to travel to Bridgend Town Centre?

3.7.12 Figure 12 shows that the most popular way respondents would like to travel to the town centre is by car, followed closely by walking and bus.

3.7.13 Figure 13 below shows responses from part 2, section A, question 6.

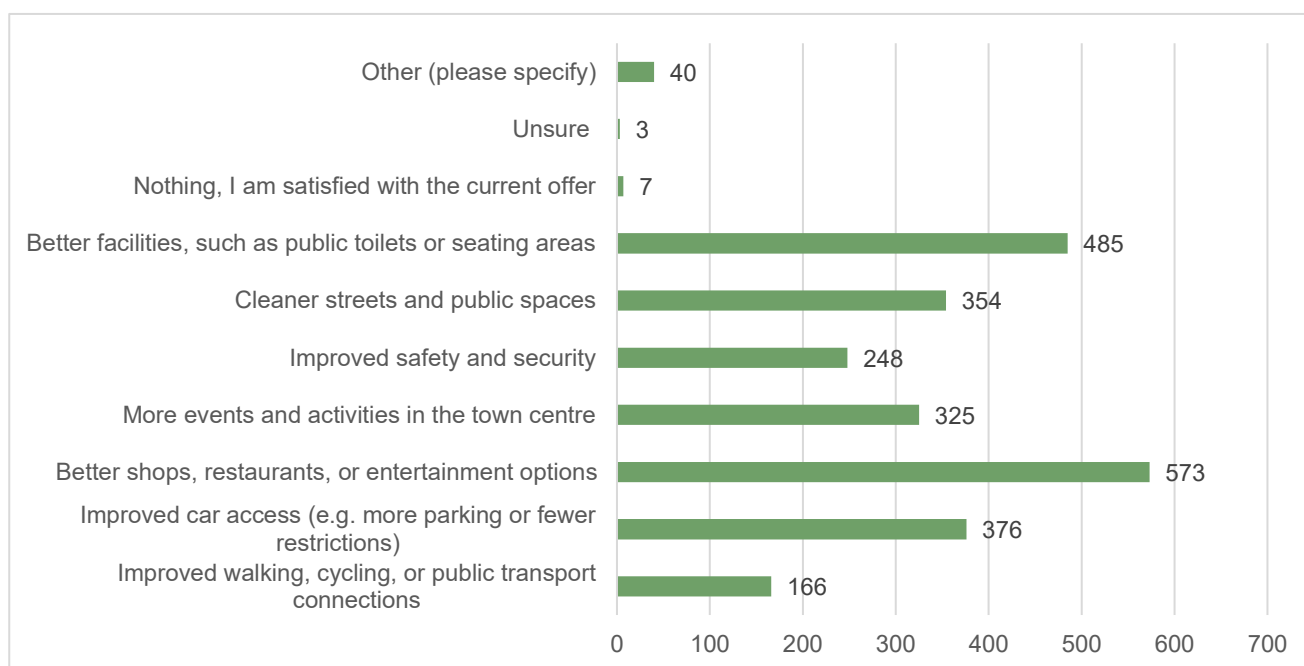


Figure 13: What would encourage you to visit Bridgend Town Centre more often? (select all that apply)

3.7.14 As shown in Figure 13, respondents believe that better shops, restaurants, or entertainment options as well as better facilities, like toilets and seating areas and cleaner streets and public spaces, will encourage respondents to visit the town centre more often.

3.8 Equalities Monitoring Questions

3.8.1 Figure 14 below shows responses from part 2, section A, question 7. This question had 787 respondents¹.

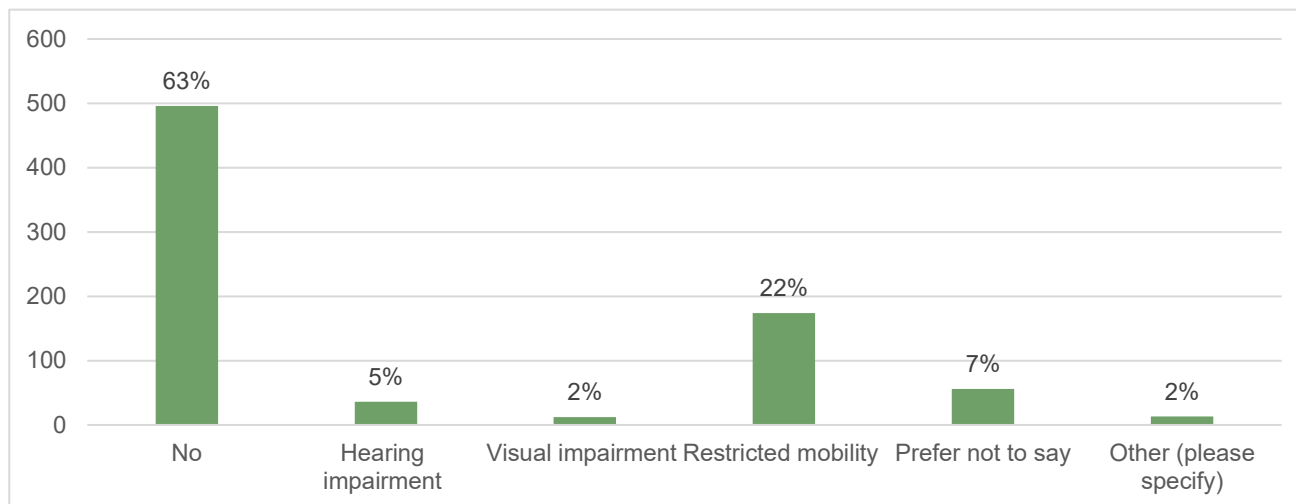


Figure 14: Do you have a health issue that affects your mobility?

3.8.2 Figure 14 shows that 63% of respondents do not have a health issue that affects their mobility, 22% of respondents have restricted mobility, 5% of respondents have an audio impairment and 2% of respondents are visually impaired.

3.8.3 This question had 507 respondents.

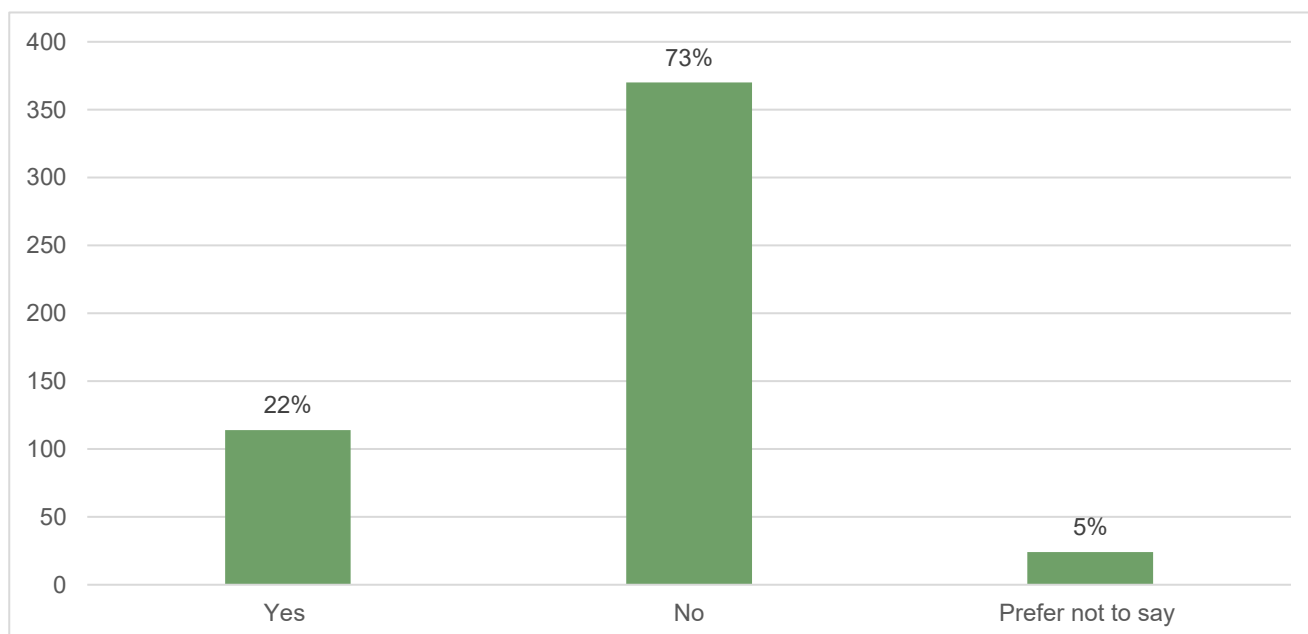


Figure 15: Do you consider yourself disabled?

¹ Note that this is higher ~~that~~ than the total survey completions due to this question allowing multiple responses. answers

3.8.4 Figure 15 shows that 73% of respondents stated that they are not disabled and 22% of respondents consider themselves disabled. 5% of respondents preferred not to answer this question.

3.8.5 This question had 511 respondents.

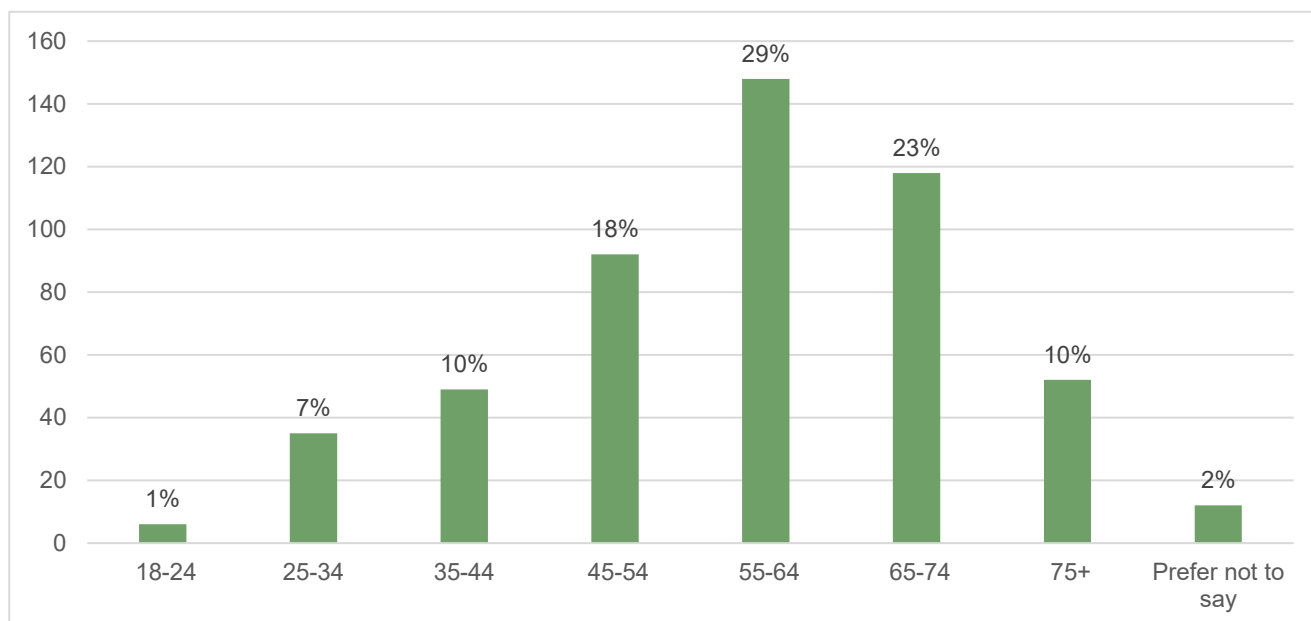


Figure 16: Please select your age category

3.8.6 Figure 16 shows that 29% of respondents are in the age range of 55-64, followed by 65-74 with 23% of respondents and then 45-54 with 18% of respondents. The age ranges with the least number of responses are 18-24 with 1%, 25-34 with 7% and 35-44 with 10% of respondents.

3.8.7 This question had 510 respondents.

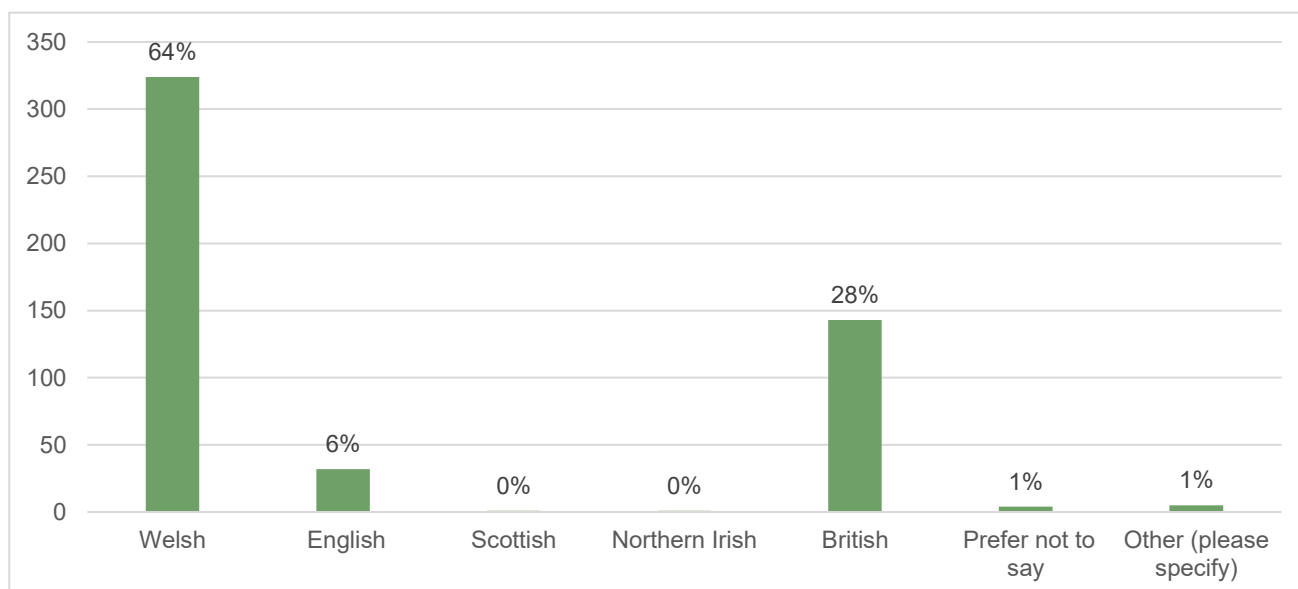


Figure 17: How would you describe your nationality?

3.8.8 Figure 17 shows that 64% of respondents describe their nationality as Welsh, another 28% of respondents describe their nationality as British.

3.8.9 This question had 511 respondents.

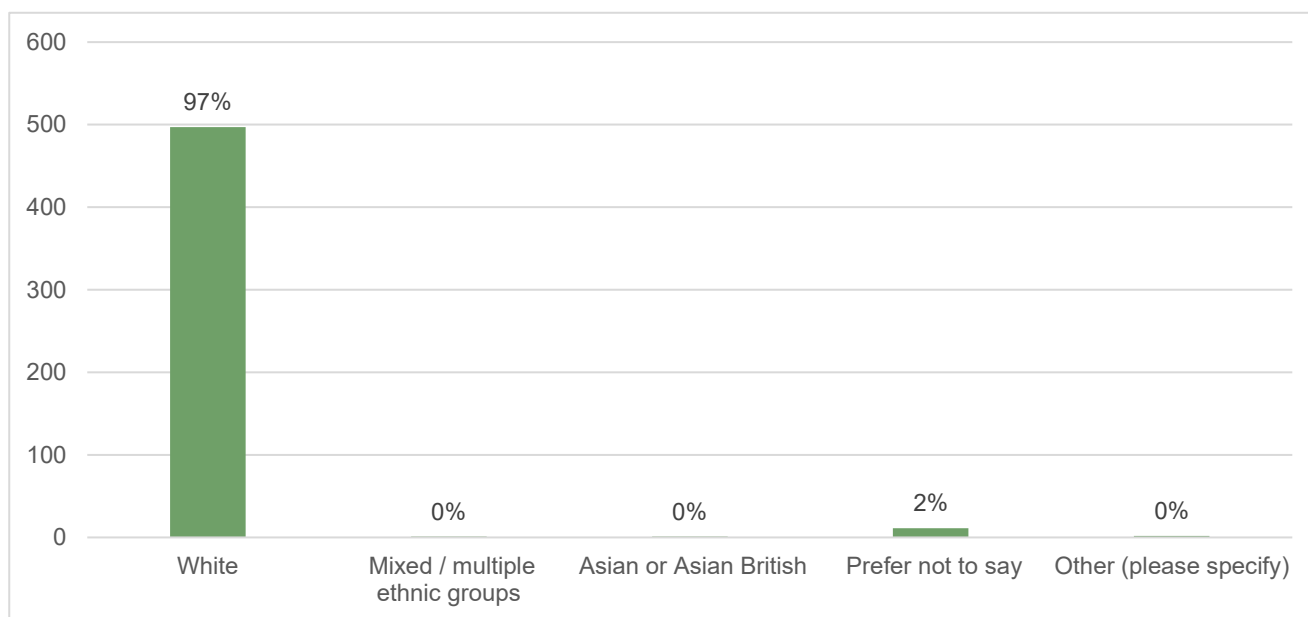


Figure 18: What is your ethnic group?

3.8.10 Figure 18 shows that 97% of respondents are 'white' ethnically and 2% of respondents answered 'Prefer not to say'. The remaining 1% falls within the other categories.

3.8.11 This question had 505 respondents.

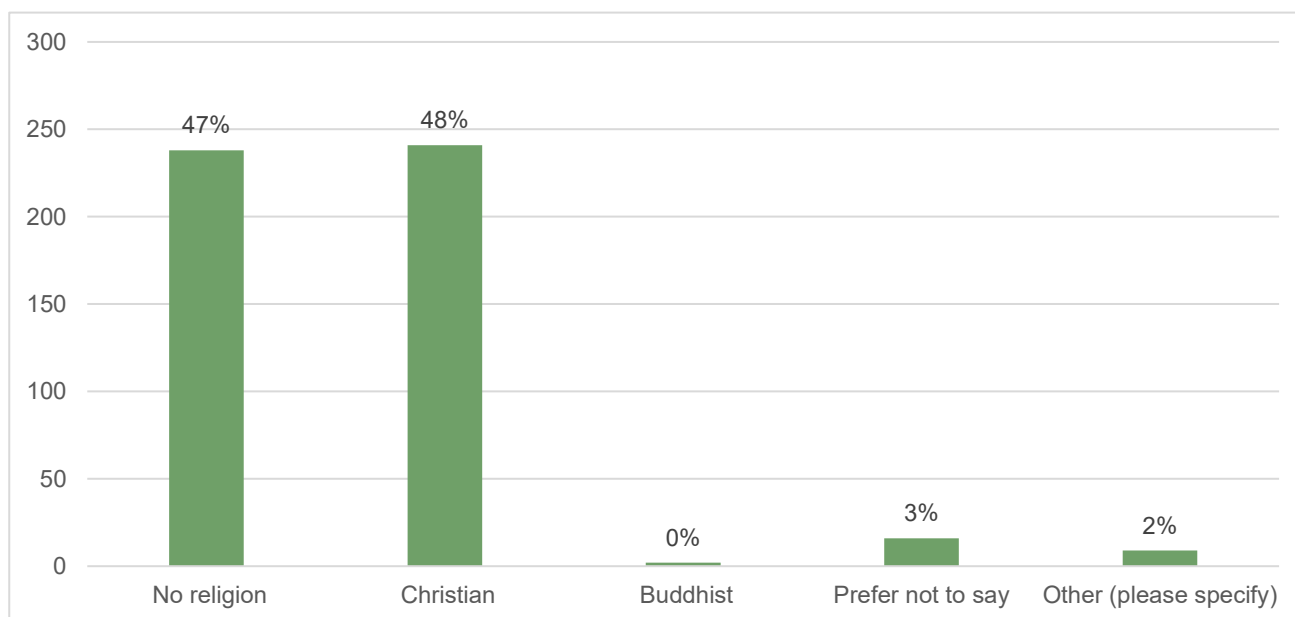


Figure 19: What is your religion or belief?

3.8.12 Figure 19 shows that 48% of respondents identify as Christian, and there are also 47% of respondents who do not identify with a specific religion.

3.8.13 This question had 509 respondents.

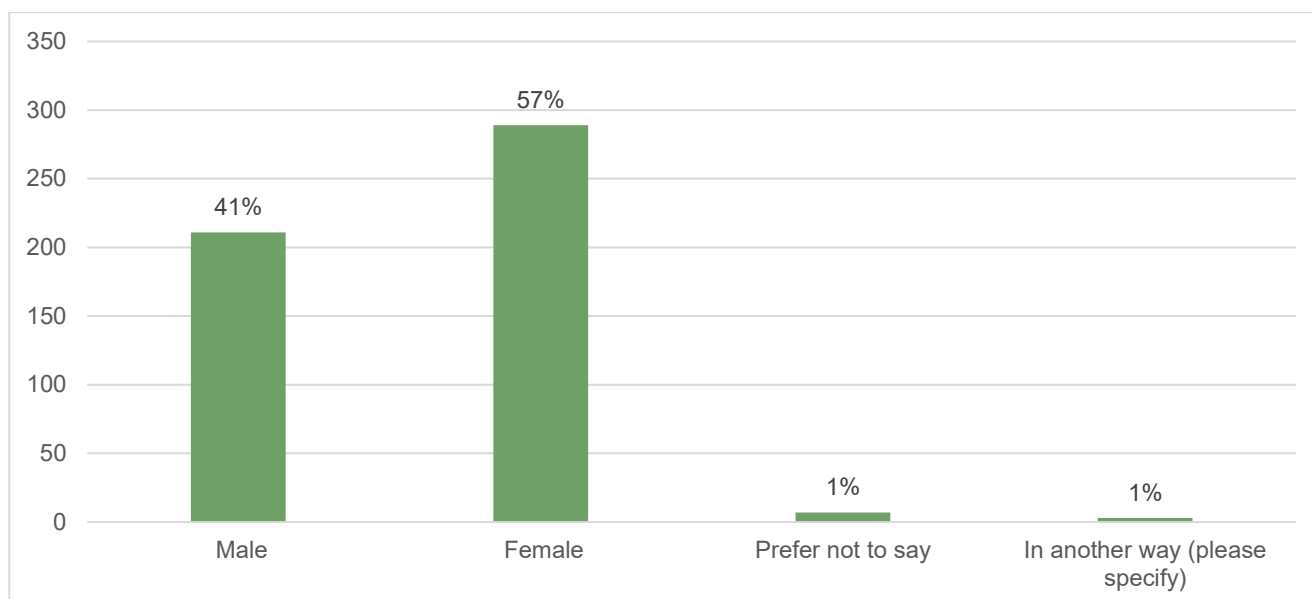


Figure 20: How do you describe your gender?

3.8.14 Figure 20 shows that 57% of respondents describe themselves as female and 41% of respondents describe themselves as male. There was 1% of respondents that answered 'Prefer not to say' to this question and 1% of respondents that describe their gender 'in another way'.

3.8.15 This question had 494 respondents.

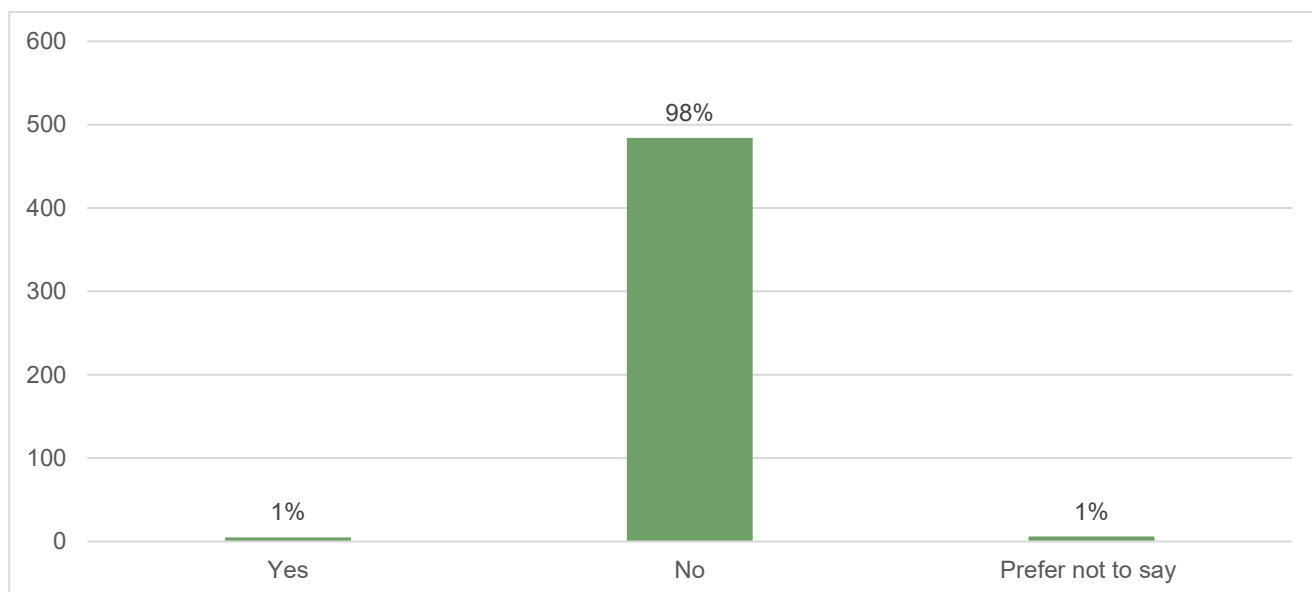


Figure 21: Have you given birth in past 26 weeks?

3.8.16 Figure 21 shows that 98% of respondents have not given birth in the past 26 weeks, 1% of respondents answered both 'Yes' and 'Prefer not to say' to this question.

3.8.17 This question had 506 respondents.

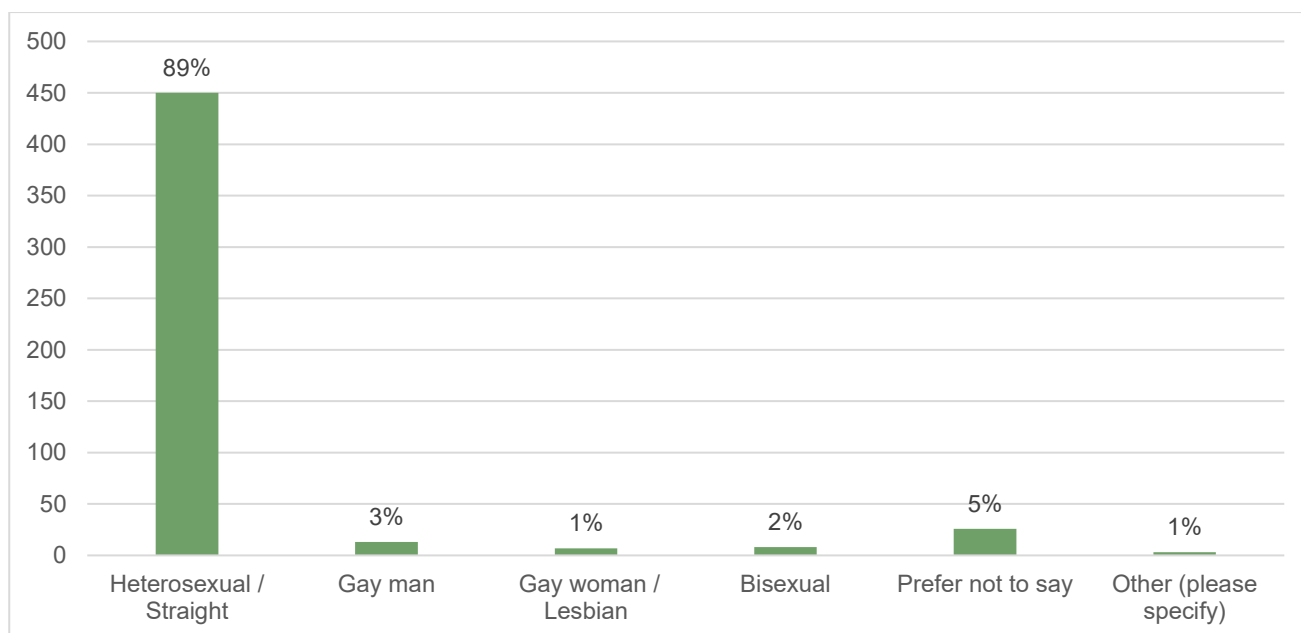


Figure 22: What is your sexual orientation?

3.8.18 Figure 22 shows that 89% of respondents are heterosexual/straight in terms of sexual orientation, 5% of respondents answered 'Prefer not to say' for this question.

3.8.19 This question had 507 respondents.

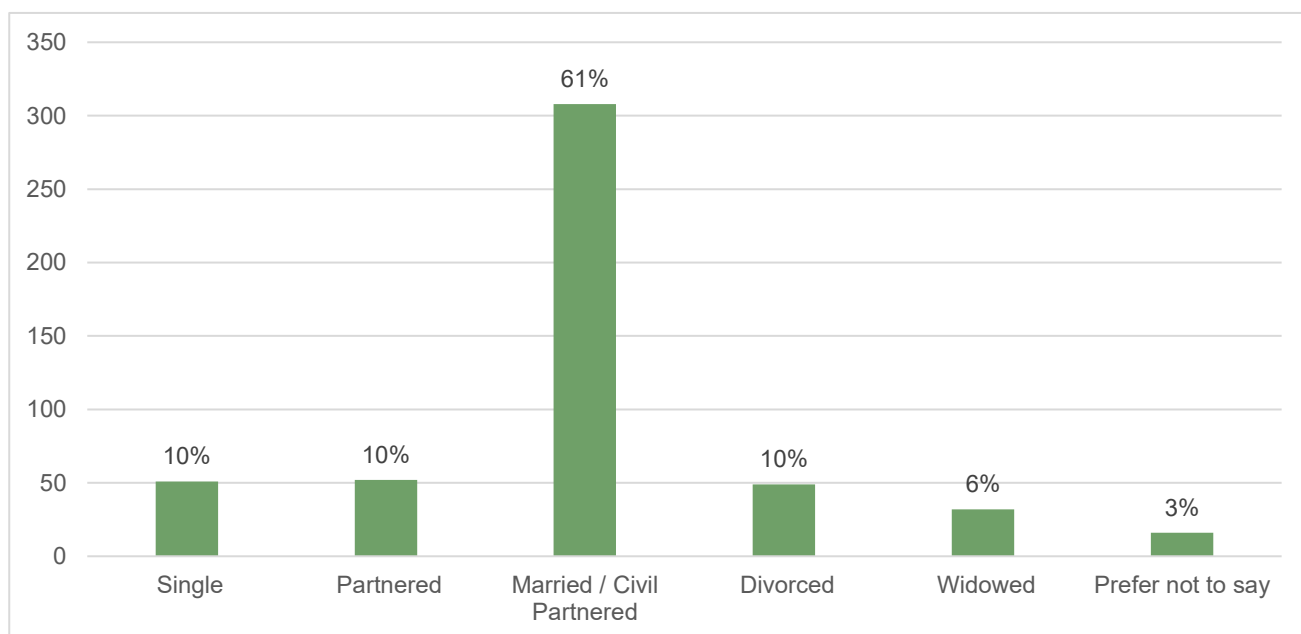


Figure 23: What is your marital status?

3.8.20 Figure 23 shows that 61% of respondents who answered this question are married or in a civil partnership, 10% of respondents are both single and partnered. Followed by 10% of respondents that are divorced, 6% are widowed and 3% of respondents answered 'Prefer not to say'.

3.9 Welsh Language

3.9.1 'Are you able to speak Welsh?' had 510 respondents.

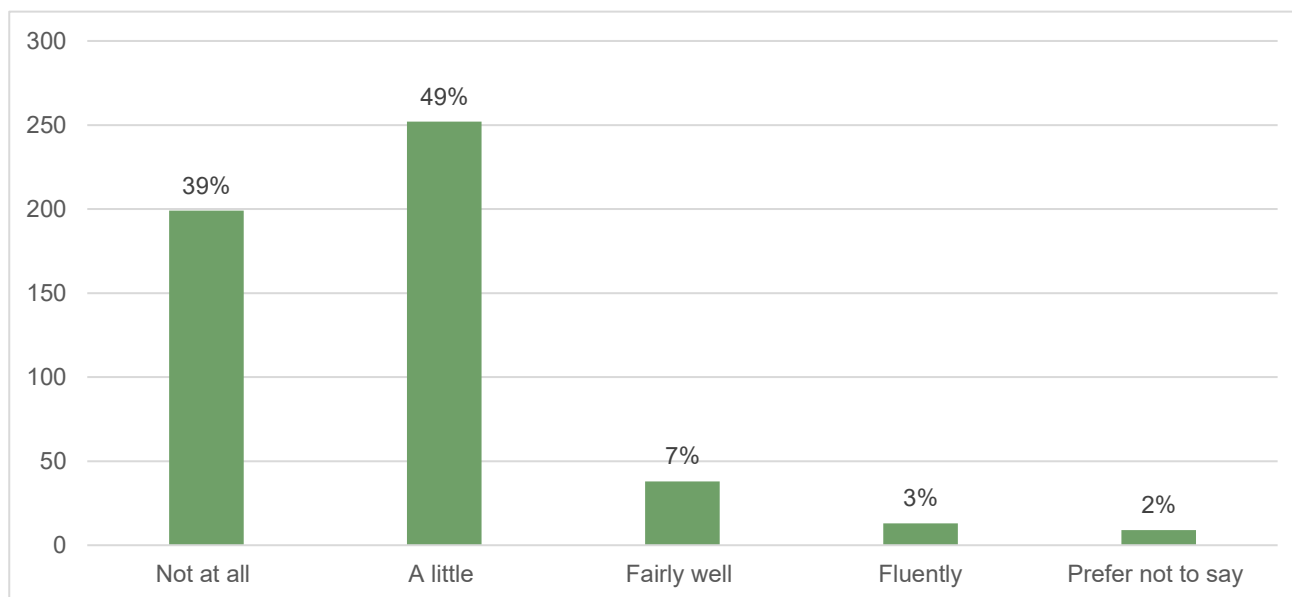


Figure 24: Are you able to speak Welsh?

3.9.2 Figure 24 shows that 49% of respondents are able to speak 'a little' Welsh, 39% of respondents are not able to speak any Welsh. 7% are able to speak Welsh 'Fairly Well' and 3% can speak Welsh fluently.

3.9.3 'Are you able to read Welsh?' had 507 respondents.

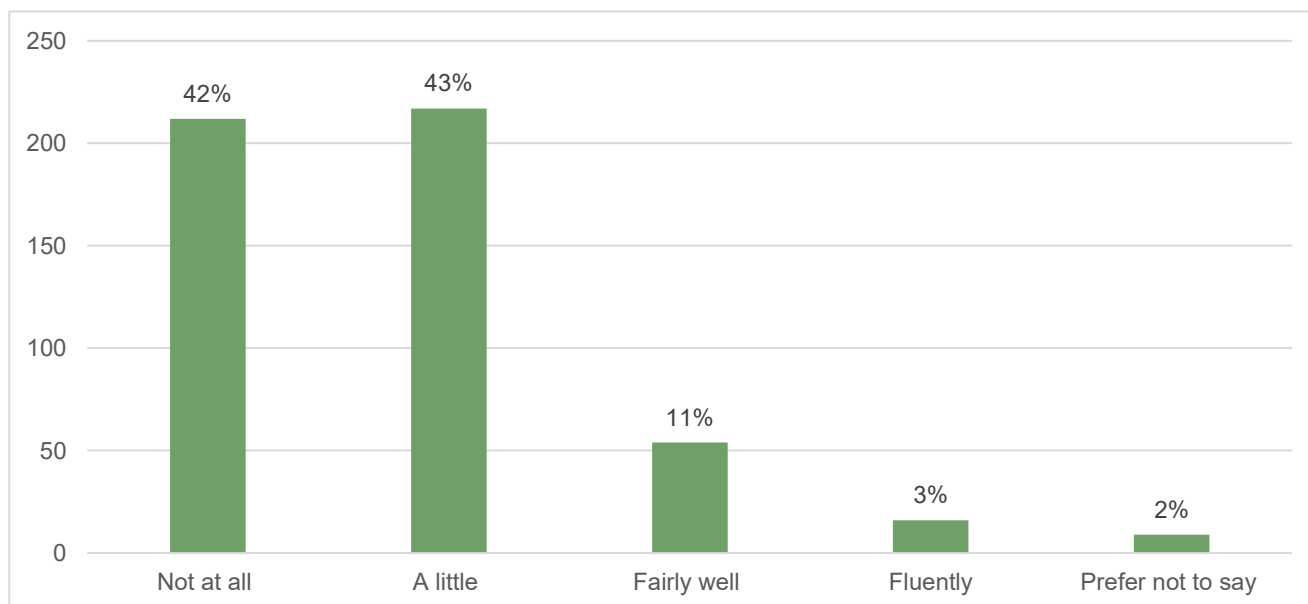


Figure 25: Are you able to read Welsh?

3.9.4 Figure 25 shows that 43% of respondents are able to read 'a little' Welsh, 42% of respondents are not able to read any Welsh. 11% are able to read Welsh 'Fairly Well' and 3% can read Welsh fluently.

3.9.5 'Are you able to write Welsh?' had 506 respondents.

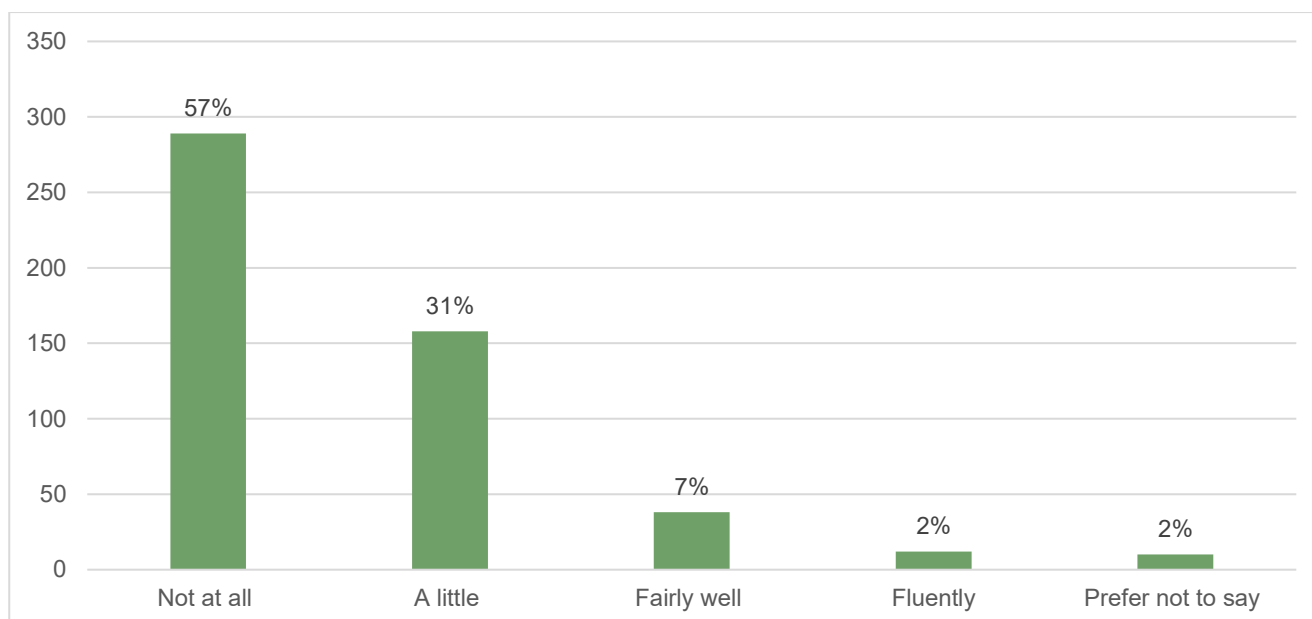


Figure 26: Are you able to write Welsh?

3.9.6 Figure 26 shows that 57% of respondents are not able to write any Welsh, 31% of respondents are able to write 'a little' Welsh. 7% are able to write Welsh 'Fairly Well' and 2% can write Welsh fluently.

4. GROUPS WITH PROTECTED CHARACTERISTICS

4.1 Introduction

4.1.1 This Chapter explores views from groups with protected characteristics, including audio, visual and physical impairments.

4.2 Audio impairments

4.2.1 The following shows views by respondents who consider themselves to be audio-impaired. This Figure shows responses to part 1, section A, question 1. There were 33 respondents who consider themselves to have an audio impairment.

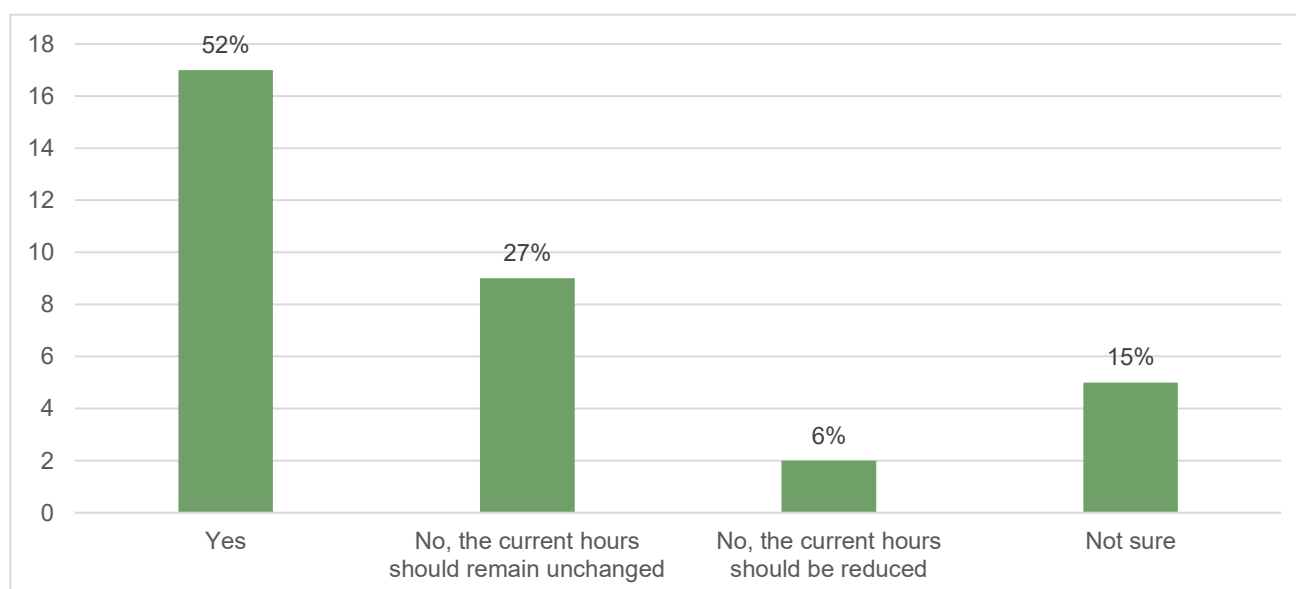


Figure 27: Do you support increasing the hours available for loading and unloading in Bridgend Town Centre?

4.2.2 Figure 27 shows that 52% of respondents support the increase of loading and unloading hours in Bridgend Town Centre. 27% of respondents think that the hours should remain unchanged.

4.2.3 Figure 28 below shows responses from part 1, section B, question 1.

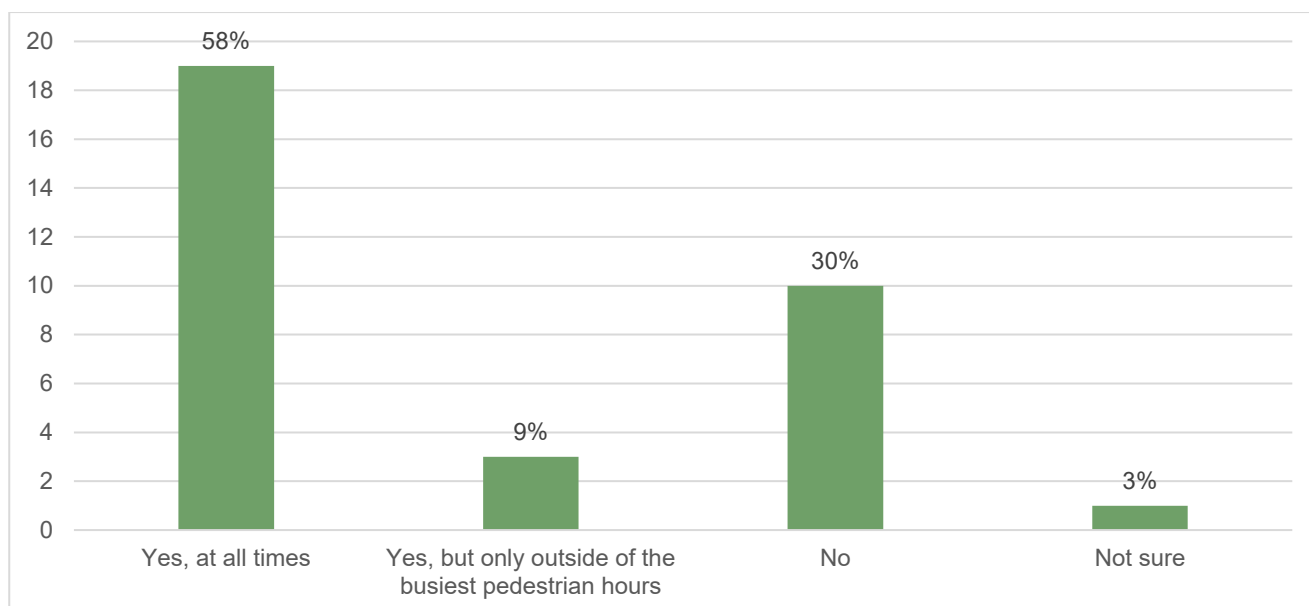


Figure 28: Should Queen Street, Dunraven Place and Market Street be more accessible to all traffic?

4.2.4 Figure 28 shows that 58% of respondents support opening Queen Street, Dunraven Place and Market Street to all traffic. A further 9% support opening these streets to all traffic but only outside of the busiest pedestrian hours. 30% of respondents believe that these streets should not be more accessible to all traffic.

4.2.5 Figure 29 below shows responses from part 1, section C, question 1.

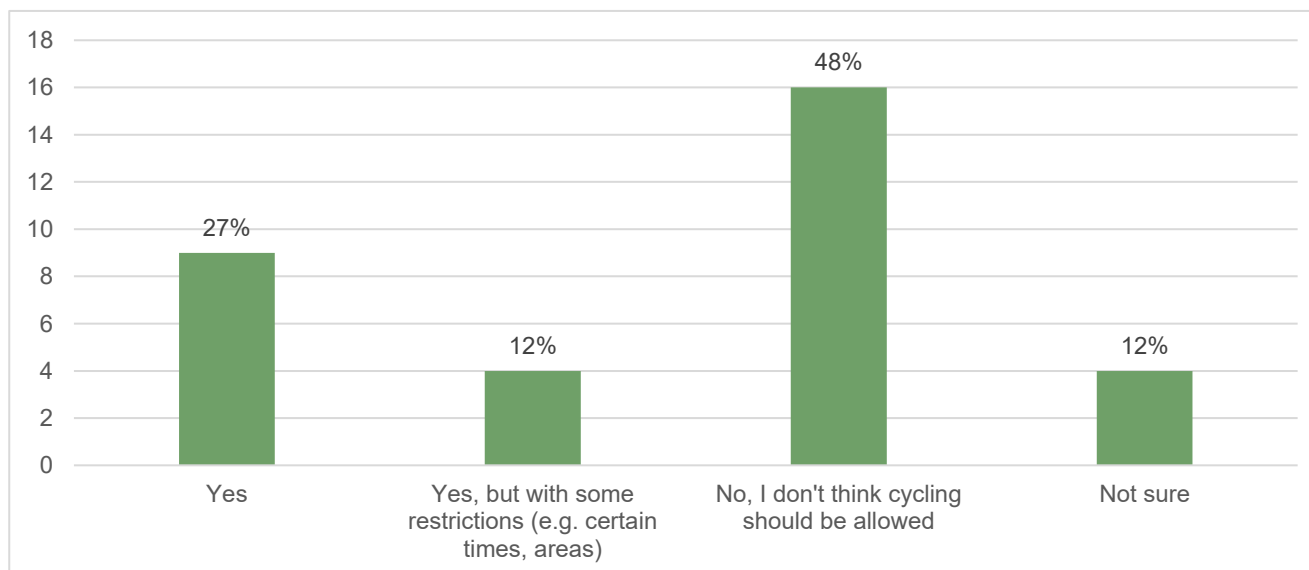


Figure 29: Should cycling be allowed in the town centre during pedestrianised hours?

4.2.6 Figure 29 shows that 48% of respondents do not support cycling in the town centre during pedestrianised hours. 27% of respondents support cycling in the town centre, and another 12% support cycling in the town centre but with some restrictions.

4.2.7 Figure 30 below shows responses from part 1, section D, question 1.

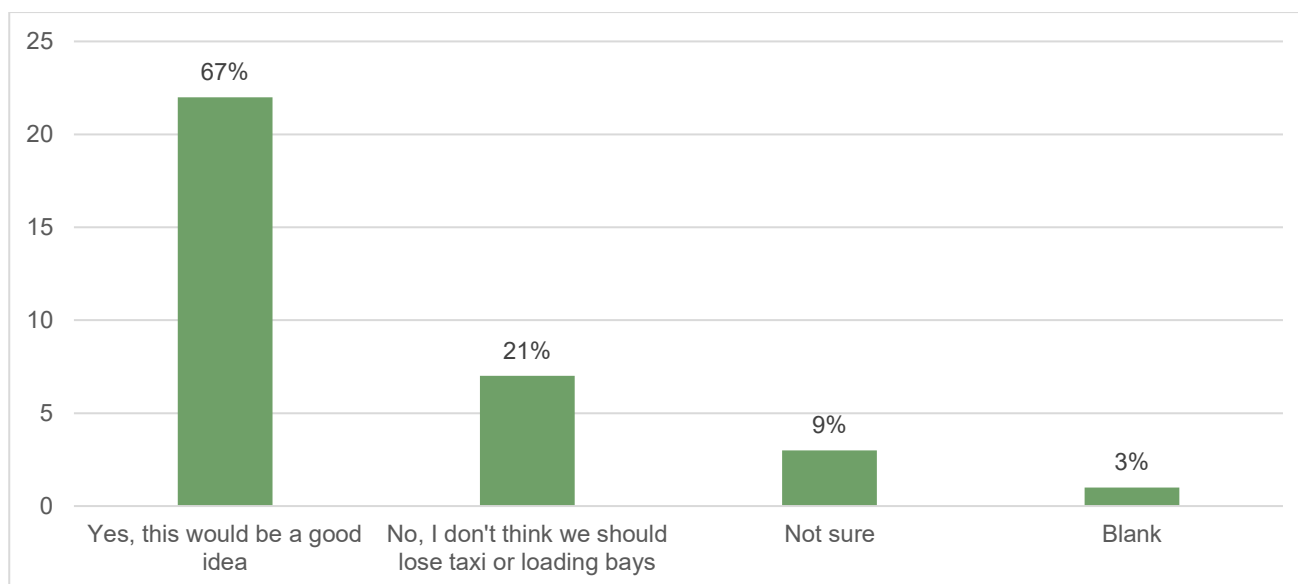


Figure 30: Do you think that we should create more disabled parking spaces in place of taxi or loading bays that are not regularly used?

4.2.8 Figure 30 shows that 67% of respondents support the creation of disabled parking spaces along Derwen Road. 21% of respondents don't think taxi and loading bays should be lost for more disabled parking spaces.

4.3 Visual Impairments

4.3.1 The following shows views by respondents who consider themselves visually impaired. This Figure shows responses to part 1, section A, question 1. There were only 6 respondents who consider themselves visually impaired, which is a low sample rate, so the results should be treated with caution.

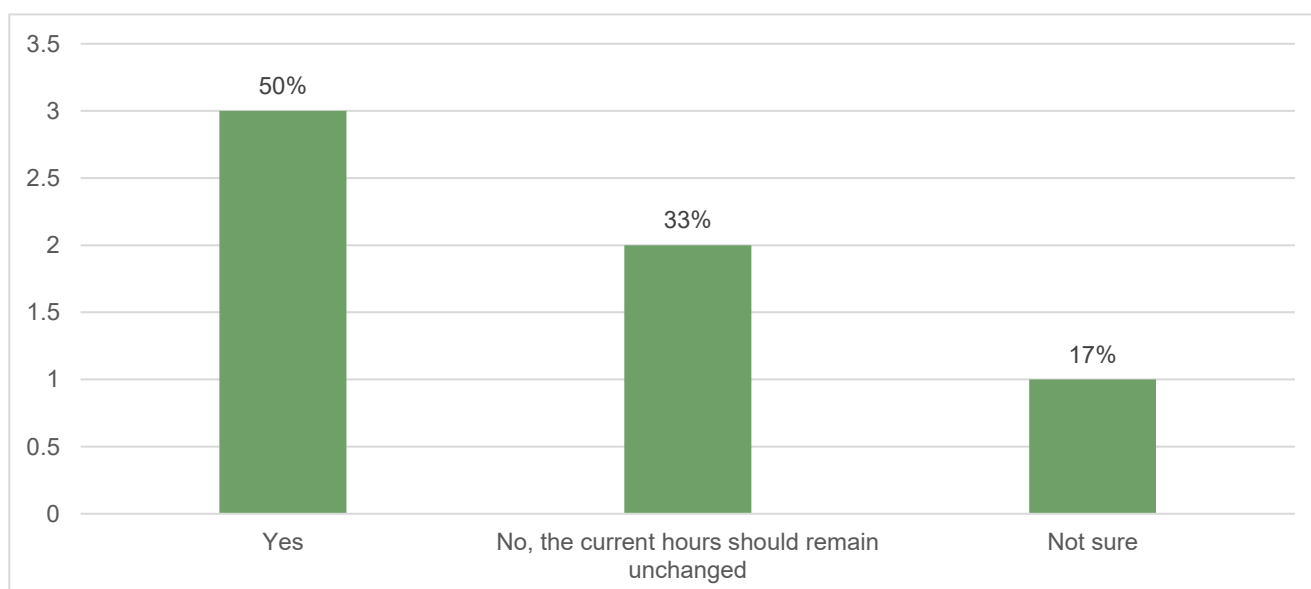


Figure 31: Do you support increasing the hours available for loading and unloading in Bridgend Town Centre?

4.3.2 Figure 31 shows that 50% of respondents support increasing loading and unloading hours in Bridgend Town Centre. 33% of respondents support the hours for loading and unloading remaining unchanged.

4.3.3 Figure 32 below shows responses from part 1, section B, question 1.

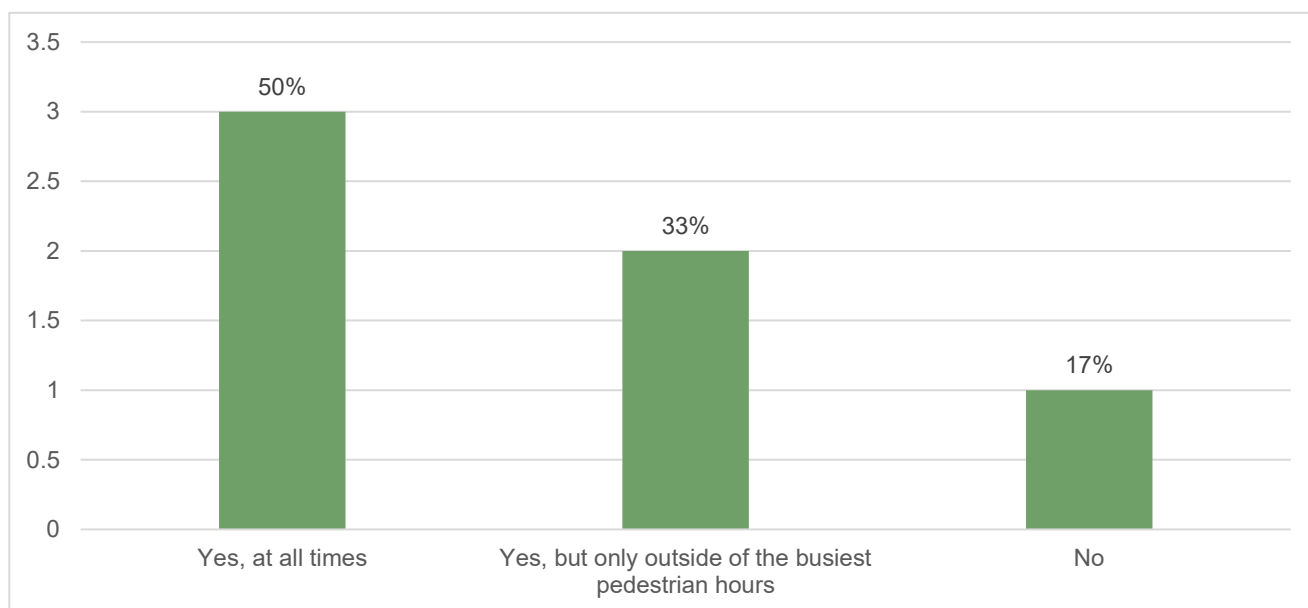


Figure 32: Should Queen Street, Dunraven Place and Market Street be more accessible to all traffic?

4.3.4 Figure 32 shows that 50% of respondents support opening Queen Street, Dunraven Place and Market Street to all traffic. A further 33% support opening these streets to all traffic but only outside of the busiest pedestrian hours. 17% of respondents believe that the town centre should not be more accessible to all traffic.

4.3.5 Figure 33 below shows responses from part 1, section C, question 1.

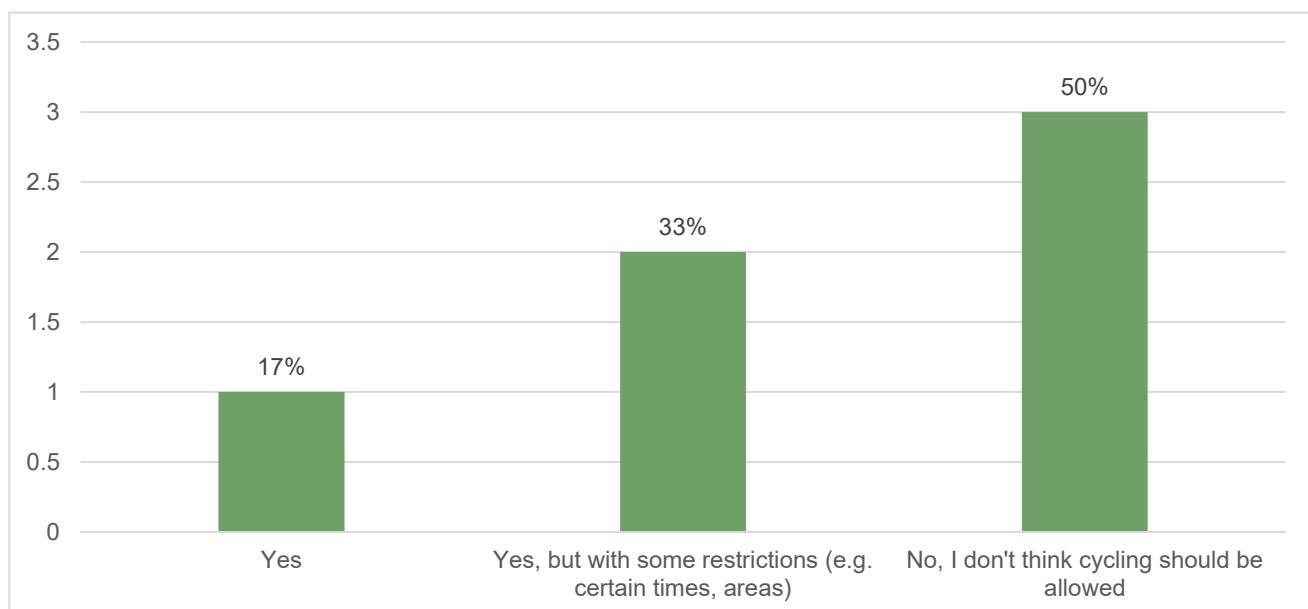


Figure 33: Should cycling be allowed in the town centre during pedestrianised hours?

4.3.6 Figure 33 shows that 50% of respondents do not support cycling in the town centre during pedestrianised hours. 17% of respondents support cycling in the town centre, another 33% support cycling in the town centre but with some restrictions.

4.3.7 Figure 34 below shows responses from part 1, section D, question 1.

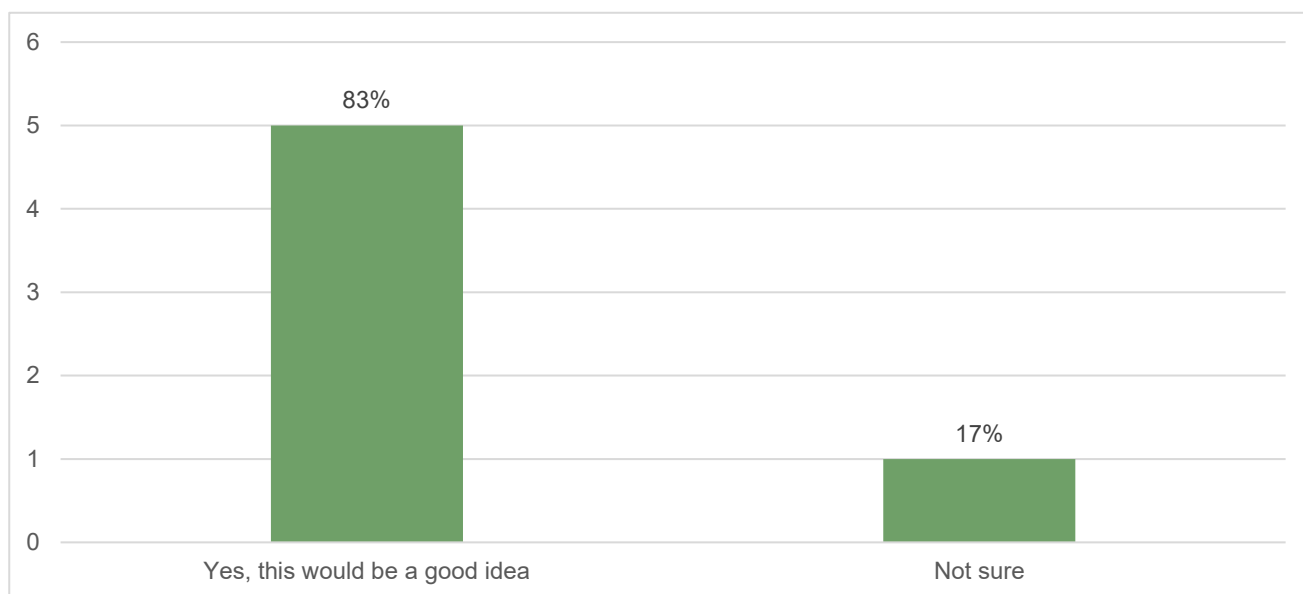


Figure 34: Do you think that we should create more disabled parking spaces in place of taxi or loading bays that are not regularly used?

4.3.8 Figure 34 shows that 83% of respondents support the creation of disabled parking spaces along Derwen Road. 17% of respondents were unsure when answering this question.

4.4 Physical Impairments

4.4.1 Figure 35 below shows views by respondents that consider themselves physically impaired. This Figure shows responses to part 1, section A, question 1. There were 133 respondents that consider themselves physically impaired.

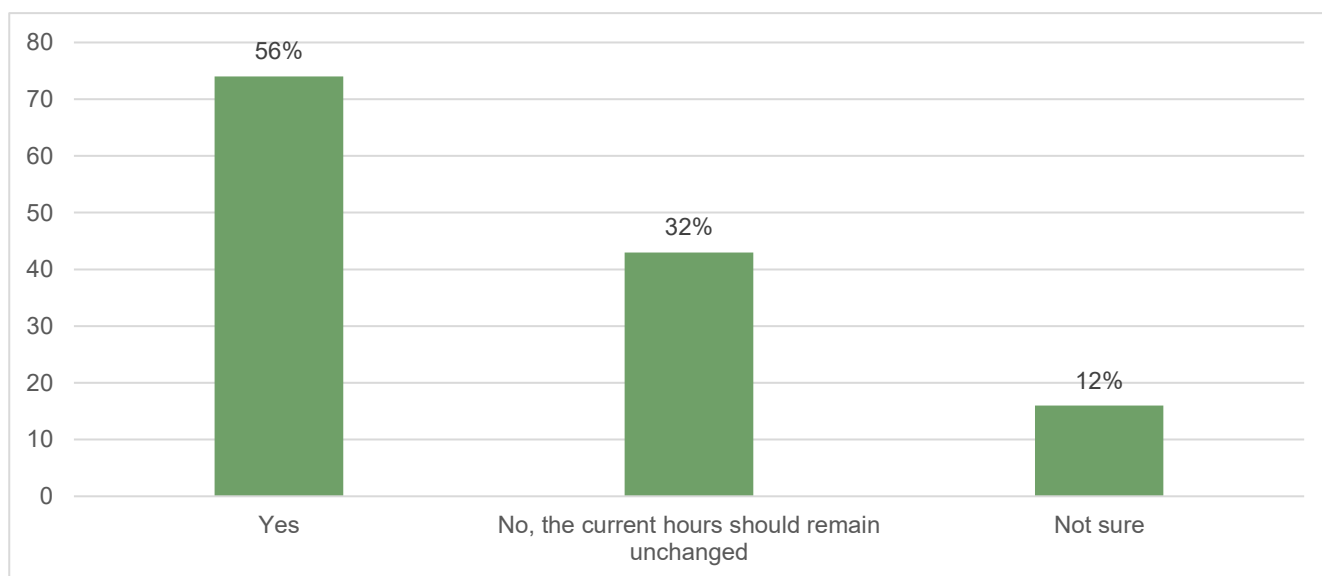


Figure 35: Do you support increasing the hours available for loading and unloading in Bridgend Town Centre?

4.4.2 Figure 35 shows that 56% of respondents support increasing loading and unloading hours in Bridgend Town Centre. 32% of respondents support the hours for loading and unloading remaining unchanged.

4.4.3 Figure 36 below shows responses from part 1, section B, question 1.

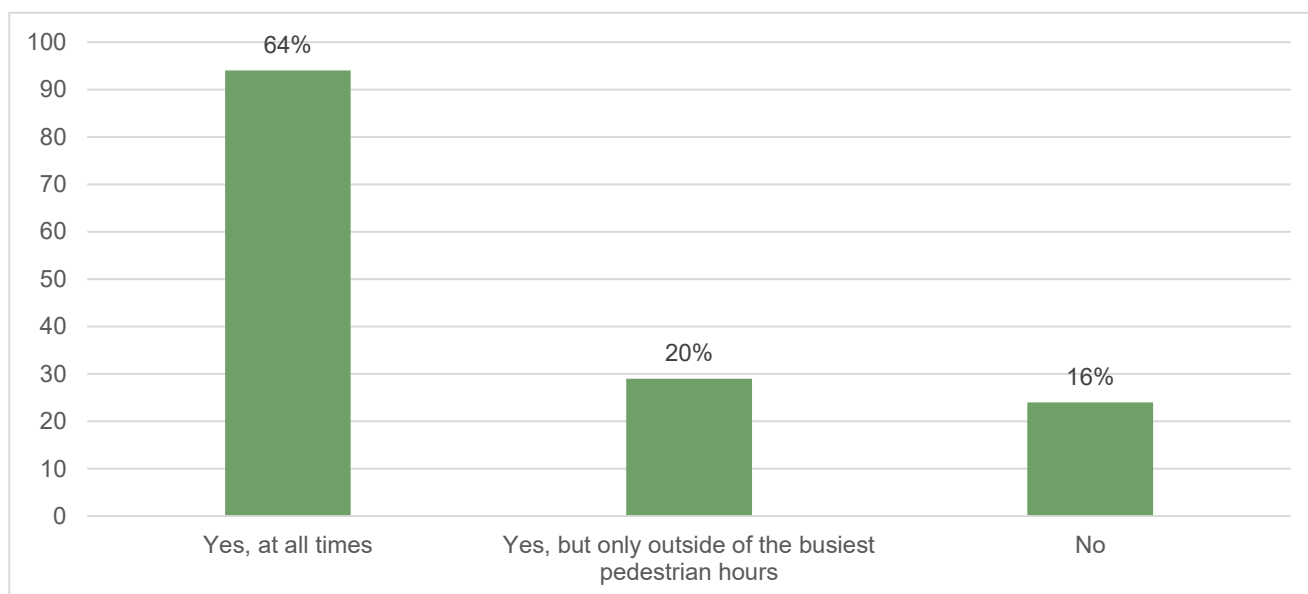


Figure 36: Should Queen Street, Dunraven Place and Market Street be more accessible to all traffic?

4.4.4 Figure 36 shows that 64% of respondents support opening Queen Street, Dunraven Place and Market Street to all traffic. A further 20% support opening these streets to all traffic but only outside of the busiest pedestrian hours. 16% of respondents believe that no traffic should have access to these streets.

4.4.5 Figure 37 below shows responses from part 1, section C, question 1.

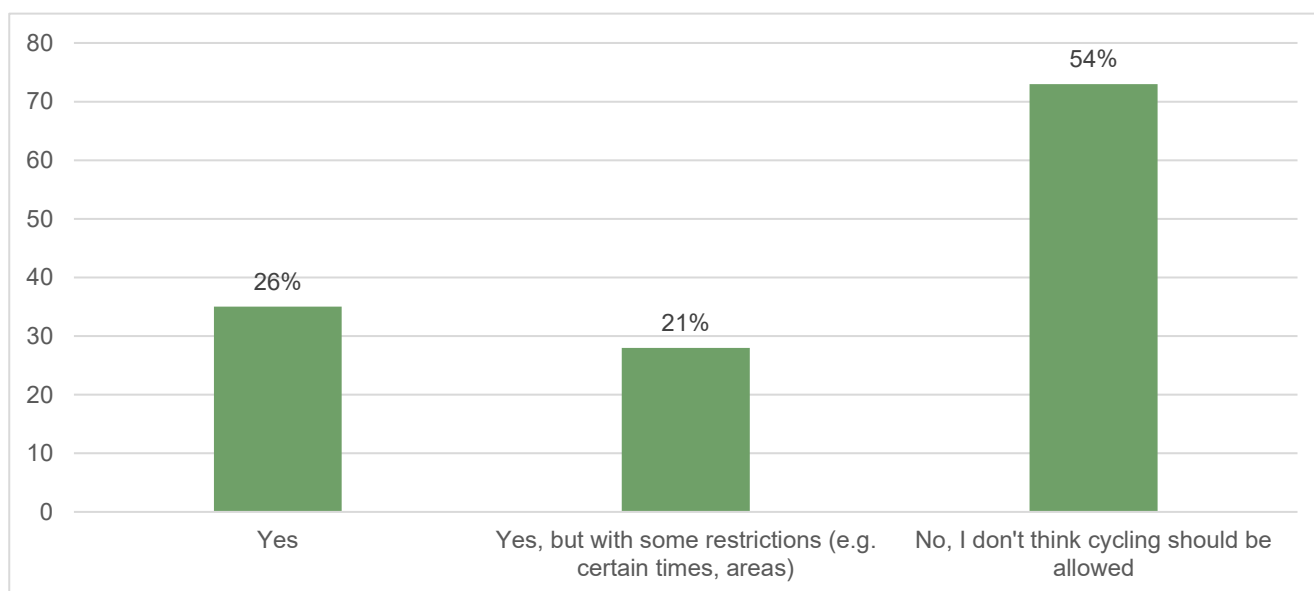


Figure 37: Should cycling be allowed in the town centre during pedestrianised hours?

4.4.6 Figure 37 shows that 54% of respondents do not support cycling in the town centre during pedestrianised hours. 26% of respondents support cycling in the town centre, and another 21% support cycling in the town centre but with some restrictions.

4.4.7 Figure 38 below shows responses from part 1, section D, question 1.

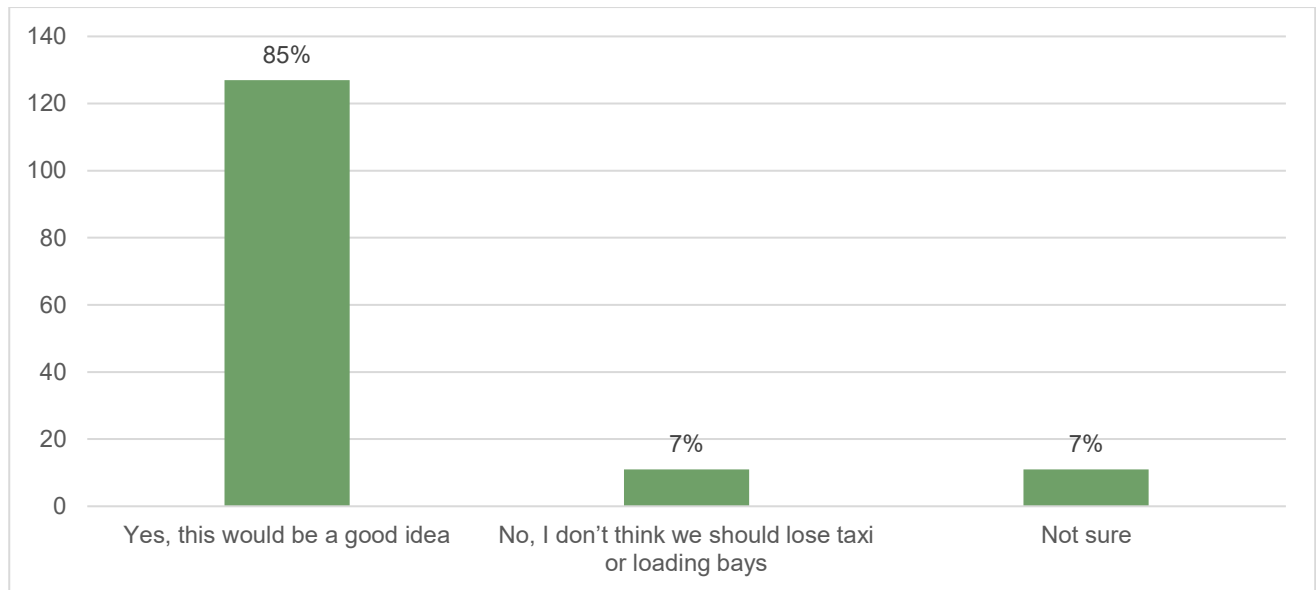


Figure 38: Do you think that we should create more disabled parking spaces in place of taxi or loading bays that are not regularly used?

4.4.8 Figure 38 shows that 85% of respondents support the creation of disabled parking spaces along Derwen Road. 7% of respondents think taxi and loading bays should not be lost.

5. SUMMARY AND CONCLUSION

5.1 Summary

5.1.1 This report presents the findings of a public consultation carried out between 4 April and 2 May 2025. The consultation generated 756 responses in total (754 online, 1 paper, 1 by email) and was supported by two in-person drop-in sessions attended by 17 people.

5.1.2 Key quantitative outcomes are:

- 64% support converting under-used taxi/loading bays to Blue Badge parking;
- 60% support extending loading/unloading hours;
- Public opinion on cycling during pedestrianised hours showed 56% are in favour of some form of cycling access (37% without restrictions and 19% with restrictions), while 37% remain opposed;
- On the question of re-opening Queen Street, Dunraven Place and Market Street to general traffic, 75% – support some form of access (56% for full access and 19% for limited access), compared with 22% who oppose re-opening altogether.

5.1.3 The respondent profile is skewed towards older age groups (29% aged 55–64; 23% aged 65–74), is predominantly White (97%) and records 22% self-declared disability or a mobility-affecting health condition. The predominance of online responses and the low in-person turnout limit the representativeness of the sample; these factors should be considered when interpreting the results.

5.2 Conclusion

5.2.1 The consultation findings provide material input for consideration but are not, on their own, determinative. They should form part of the broader evidence base Bridgend County Borough Council uses when deciding next steps and whether an intervention is appropriate.

Appendix A

Public Engagement Survey Form (English & Welsh Versions)

Bridgend Town Centre Access

GDPR Notice

All information received is stored using secure servers and in accordance with the Data Protection Act (1998). When gathering data, it is our policy to take all necessary steps to ensure personal information is processed lawfully. Your personal information will never be shared externally.

The council will take all reasonable precautions to ensure confidentiality and to comply with data protection legislation. Your information will be retained in accordance with the Council's Data Retention Policy.

You have several rights under data protection legislation. You may also withdraw your consent and ask us to delete your personal information at any time by contacting us. Further information about this is available on our website or you may contact the Data Protection Officer.

If you are dissatisfied with the manner in which we process your personal data, then you have the option to make a complaint to the Data Protection Officer and the Information Commissioner's Office.



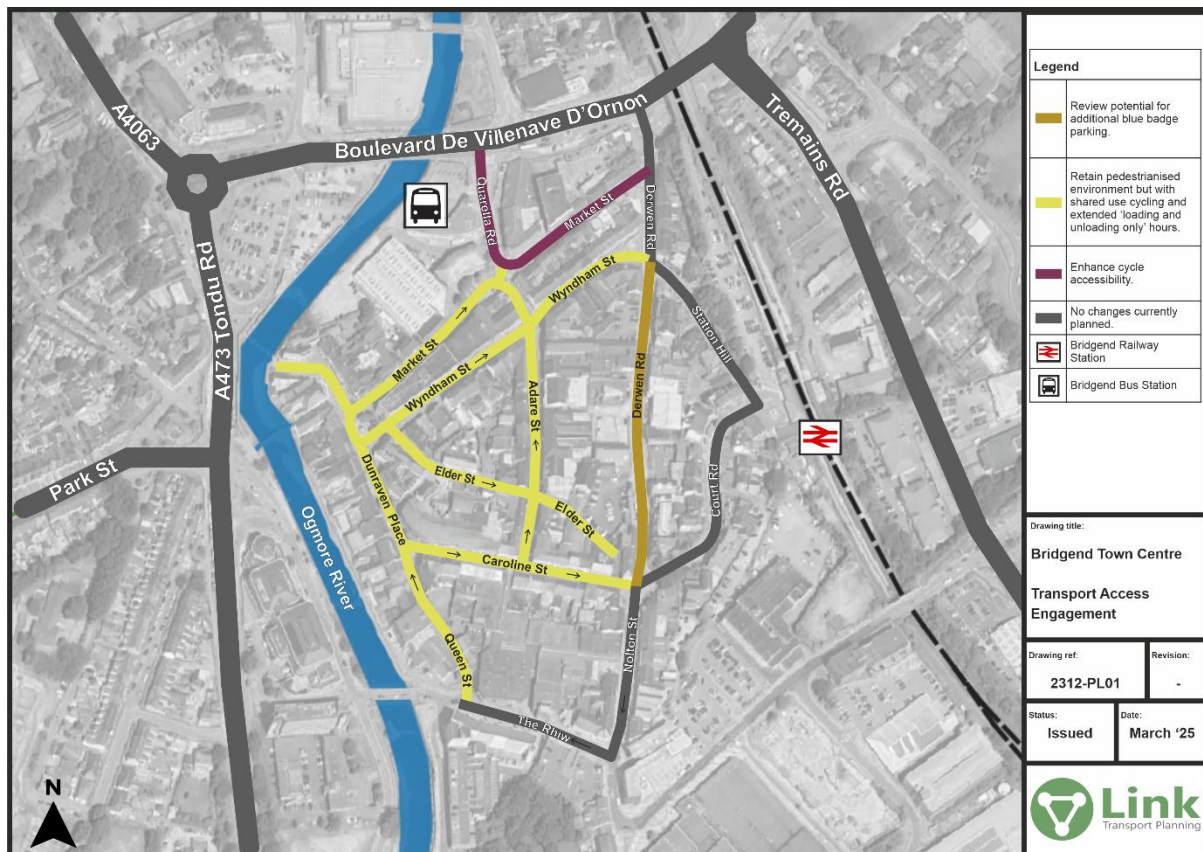
SURVEY

In recent years, there have been significant changes to how people use Bridgend town centre. These changes have been shaped by several factors, including the relocation of major stores to out-of-town retail parks, the growth of online shopping, the rise in remote services such as online banking, the shift towards home working, and challenges related to accessibility.

To address these evolving challenges, Bridgend County Borough Council is seeking your feedback on a range of potential improvements to enhance access to Bridgend town centre.

The proposed changes are shown in the overview map below and are summarised as follow:

- Extending loading and unloading hours throughout the town centre's pedestrianised areas to better support businesses and their customers.
- Allowing cycling in pedestrianised areas with the provision of enhanced cycle parking facilities.
- Increasing disabled parking opportunities by converting underutilised areas on Derwen Road.



These proposed changes are part of an initial phase aimed at improving the town centre's viability and resilience. We will closely monitor the impact and may consider further changes at a later date.

We recognise that some stakeholders favour allowing all traffic to use Queen Street, Dunraven Place, and Market Street. Although this is not included in the current proposal, we welcome all views via the survey, and your feedback will form an important part of our engagement analysis. This will help determine whether further investigation is needed for a potential follow-up phase.

You can choose to answer all sections of this questionnaire or just focus on the areas that matter most to you. Depending on which sections you choose to answer, the survey will typically take between 3 and 10 minutes to complete.

Your feedback in this survey is extremely valuable to help us shape a balanced plan that is safe, effective, and deliverable.

PART 1

Section A: Views on loading and unloading access to Bridgend town centre

Bridgend town centre is currently pedestrianised between 10 AM and 6 PM every day. Outside these hours, only vehicles that are loading or unloading can access the area. Traders in the town centre have shared feedback that they would prefer extended hours for loading or unloading, which would make it easier for suppliers and customers to deliver goods or collect goods.

This change would mean reducing the hours when the streets are fully pedestrianised. While this could help businesses, it is important to think about how it might affect pedestrians and the feel of the town centre.

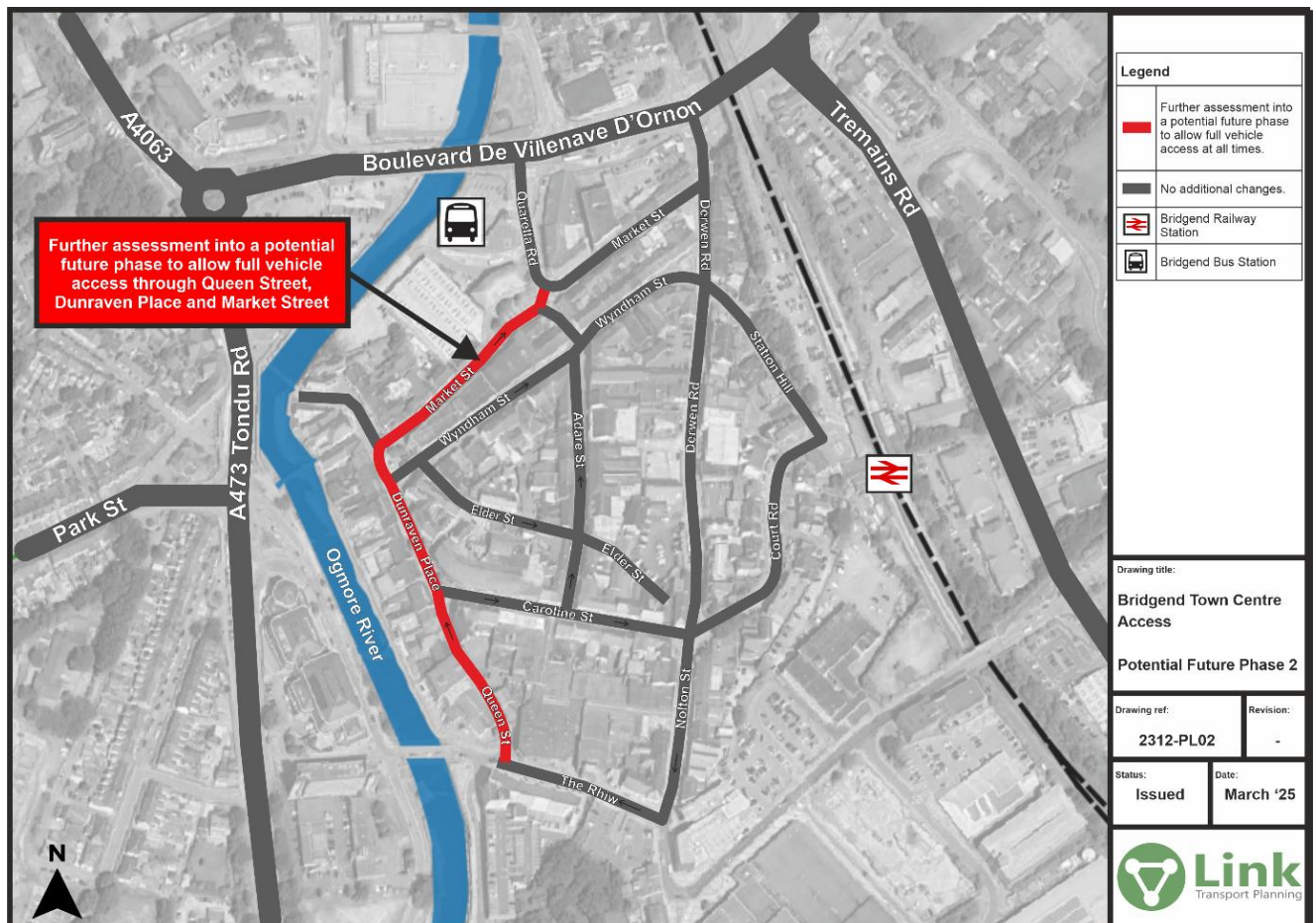
Q1: Do you support increasing the hours available for loading and unloading in Bridgend town centre?

- ☐ Yes
- ☐ No, the current hours should remain unchanged
- ☐ No, the current hours should be reduced
- ☐ Not sure

Follow-up: If you answered 'yes' or 'no, the current hours should be reduced', what loading and unloading only hours do you think should be in place and why?

Section B: Views on a potential future phase to allow full vehicle access through the peripheral town centre route of Queen Street, Dunraven Place and Market Street

Some stakeholders have shared feedback that the peripheral town centre route of Queen Street, Dunraven Place and Market Street should be opened up to all traffic, at all times. This does not form part of the current proposal, but we may undertake further assessment to determine if it could form a future follow up phase to the town centre's access arrangements. An overview map to highlight a potential future phase is provided below.



Q1: Should Queen Street, Dunraven Place and Market Street be more accessible to all traffic?

- ☐ Yes, at all times
- ☐ Yes, but only outside of the busiest pedestrian hours
- ☐ No
- ☐ Not Sure

Follow-up: Please add any further comments that you would like to make to explain your answer.

Section C: Views on cycling in the town centre

Cycling is a healthy, inclusive, low cost and zero emission form of transport. Current Welsh Government guidance states that consideration should always be given to allowing cycling through pedestrianised streets. However, cycling is not currently permitted through Bridgend town centre during pedestrianised hours. Please share your opinion on the following:

Q1: Should cycling be allowed in the town centre during pedestrianised hours?

- ☐ Yes
- ☐ Yes, but with some restrictions (*e.g., certain times, areas*)
- ☐ No, I don't think cycling should be allowed
- ☐ Not sure

Follow-up: Why do you feel this way?

Q2: Do you think there should be improved cycle parking in the town centre?

- ☐ Yes
- ☐ No
- ☐ Not sure

Follow-up: If you answered 'Yes' to Q2, please can you explain where additional or improved parking is required and what features are most important to you (*e.g. location near destination, personal and cycle security, weather protection*)

Section D: Views on disabled parking in the town centre.

Disabled parking in Bridgend town centre is available in Council car parks, private car parks, and marked blue badge bays on the street. Feedback has suggested that more blue badge spaces would make it easier for disabled users to get to places in the town centre. One idea is to add more blue badge spaces on streets like Derwen Road. This could be done by using areas currently set aside for taxis that are not often used.

Q1: Do you think that we should create more disabled parking spaces in place of taxi or loading bays that are not regularly used?

- ☐ Yes, this would be a good idea
- ☐ No, I don't think we should lose taxi or loading bays
- ☐ Not sure

Follow-up: Why do you feel this way?

Q2: Thinking more widely, do you think there is enough disabled parking available to allow access to the town centre?

- ☐ Yes, there are enough spaces
- ☐ No, more blue badge parking spaces are needed

☐ Not sure

Follow-up: Why do you feel this way?

PART 2 ADDITIONAL OPTIONAL QUESTIONS

We would greatly value your additional feedback on current access to the town centre and your priorities for improvement. This will help us better understand existing conditions and identify further areas for enhancement.

All questions are optional, and your feedback will still be used even if you do not answer the questions in this section.

Section A: About your use of the area

Q1: How do you usually travel to the town centre? (*Select all that apply*)

- ☐ Walk
- ☐ Cycle
- ☐ Public transport (*e.g., bus, train*)
- ☐ Private car
- ☐ Taxi or ride-sharing services
- ☐ I do not visit the town centre often
- ☐ Other (*please specify*):

Q2: How would you rate the ease of town centre access for walking, cycling or public transport?

- ☐ Excellent
- ☐ Good
- ☐ Fair
- ☐ Poor
- ☐ Very poor
- ☐ Unsure

Follow-up: Why did you choose that option?

Q3: How often do you visit the town centre?

- ☐ Daily
- ☐ Several times a week
- ☐ Once a week
- ☐ Once a month
- ☐ Less than once a month
- ☐ I have never been

Q4: What is the main reason for your visits to the town centre? (*Select all that apply*)

- ☐ I live in the town centre
- ☐ I work nearby
- ☐ I go to school nearby
- ☐ Shopping

- ☐ Socialising or leisure
- ☐ Accessing services (*e.g., healthcare, public services*)
- ☐ I do not visit the town centre
- ☐ Other (*please specify*):

Q5: How would you like to travel to Bridgend town centre?

- ☐ Walk
- ☐ Cycle
- ☐ Bus
- ☐ Train
- ☐ Car (*driver*)
- ☐ Car (*passenger*)
- ☐ Wheel (*using a wheelchair or other mobility aid*)
- ☐ Taxi
- ☐ Other (*please specify*):

Follow-up: What prevents you from using your preferred mode of travel to the town centre?

Q6: What would encourage you to visit Bridgend town centre more often? *(Select all that apply)*

- ☐ Improved walking, cycling, or public transport connections
- ☐ Improved car access *(e.g., more parking or fewer restrictions)*
- ☐ Better shops, restaurants, or entertainment options
- ☐ More events and activities in the town centre
- ☐ Improved safety and security
- ☐ Cleaner streets and public spaces
- ☐ Better facilities, such as public toilets or seating areas
- ☐ Nothing, I am satisfied with the current offer
- ☐ Unsure
- ☐ Other *(please specify)*:

Q7: Do you have a health issue that affects your mobility?

☐ No

☐ Hearing Impairment

☐ Visual Impairment

☐ Restricted Mobility

☐ Prefer not to say

☐ Other (*please specify*):

Equalities Monitoring

Under the Equality Act 2010 and the Public Sector Equality Duties, the Council has a legal duty to look at how its decisions impact on people because they may have particular characteristics. This question is optional.

How would these proposals affect you because of your:

Gender, Age, Ethnicity, Disability, Sexuality, Religion / belief, Gender identity, Relationship status, Pregnancy, Preferred language?

We would like to know your views on the effects that the proposals would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English.

What effects do you think there would be?

How could positive effects be increased, or negative effects be mitigated?

Please also explain how you believe the proposals could be formulated or changed to have positive effects or increased positive effects on opportunities for people to use the Welsh language, and on treating the Welsh language no less favourably than the English language and ensure there are no adverse effects on opportunities for people to use the Welsh language.

To help us ensure that we are providing services fairly to everyone who needs them, we would be grateful if you could answer a few more questions about yourself.

The information you supply will be kept confidentially and will only be used for the purposes of equalities monitoring.

Completion of these questions is not required as part of the questionnaire. You do not have to answer any of the questions if you do not wish to do so.

Alternatively, you can choose to answer some and not others by selecting the 'prefer not to say' options

Are you happy to answer a few more questions about yourself? *(Tick one option)*

☐ Yes

☐ No

Do you consider yourself as disabled? *(Tick one option)*

☐ Yes

☐ No

☐ Prefer not to say

Please select your age category: *(Tick one option)*

☐ Under 18

☐ 35 – 44

☐ 65 - 74

☐ 18 – 24

☐ 45 – 54

☐ 75 +

☐ 25 – 34

☐ 55 – 64

☐ Prefer not to say

How would you describe your nationality? *(Tick one option)*

☐ Welsh

☐ Scottish

☐ English

☐ Northern Irish

☐ Prefer not to say

☐ Other *(please specify)*:

--

What is your ethnic group? *(Tick one option)*

☐ White

☐ Asian/ Asian British

☐ Black/African Caribbean/Black
British

☐ Prefer not to say

☐ Mixed/Multiple ethnic groups

☐ Other *(please specify)*:

What is your religion or belief? *(Tick one option)*

☐ No religion

☐ Hindu

☐ Jewish

☐ Christian

☐ Muslim

☐ Prefer not to say

☐ Buddhist

☐ Sikh

☐ Other *(please specify)*:

How do you describe your gender? *(Tick one option)*

☐ Male

☐ Female

☐ Prefer not to say

☐ In another way *(please specify)*:

Are you pregnant? *(Tick one option)*

☐ Yes

- ☐ No
- ☐ Prefer not to say

Have you given birth in past 26 weeks? *(Tick one option)*

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

What is your sexual orientation? *(Tick one option)*

- ☐ Heterosexual/Straight ☐ Gay man ☐ Bisexual
- ☐ Gay woman/Lesbian ☐ Prefer not to say
- ☐ Other *(please specify)*:

What is your marital status? *(Tick one option)*

- ☐ Single ☐ Divorced
- ☐ Partnered ☐ Widowed
- ☐ Married/Civil Partnered ☐ Prefer not to say

Are you able to? *(Tick all that apply)*

	Not at all	A little	Fairly well	Fluently	Prefer not to say
Speak Welsh	☐	☐	☐	☐	☐
Read Welsh	☐	☐	☐	☐	☐
Write Welsh	☐	☐	☐	☐	☐

Thank you for taking the time to complete this survey.

Please return to:

Bridgend County Borough Council

Consultation Department

Civic Offices

Angel Street

BRIDGEND

CF31 4WB

Email: consultation@bridgend.gov.uk

Mynediad Canol Tref Pen-y-bont ar Ogwr

Hysbysiad GDPR

Caiff yr holl wybodaeth a dderbynnir ei storio gan ddefnyddio gweinyddion diogel ac yn unol â'r Ddeddf Diogelu Data (1998). Wrth gasglu data, mae gennym bolisi ar waith i gymryd yr holl gamau priodol er mwyn sicrhau bod gwybodaeth bersonol yn cael ei phrosesu'n gyfreithiol. Ni fydd eich gwybodaeth bersonol yn cael ei rhannu'n allanol.

Bydd y cyngor yn cymryd yr holl gamau rhesymol i sicrhau cyfrinachedd ac i gydymffurfio â deddfwriaeth diogelu data. Bydd eich gwybodaeth yn cael ei chadw yn unol â Pholisi Cadw Data'r Cyngor.

Mae gennych nifer o hawliau dan y deddfwriaeth diogelu data. Cewch hefyd dynnu eich caniatâd yn ôl a gofyn inni ddileu eich gwybodaeth bersonol ar unrhyw adeg drwy gysylltu â ni. Mae rhagor o wybodaeth ynglŷn â hyn ar gael ar ein gwefan, neu gallwch gysylltu â'r Swyddog Diogelu Data.

Os ydych yn anfodlon gyda'r modd yr ydym yn prosesu eich data personol, cewch gyflwyno cwyn i'r Swyddog Diogelu Data a Swyddfa'r Comisiynydd Gwybodaeth.



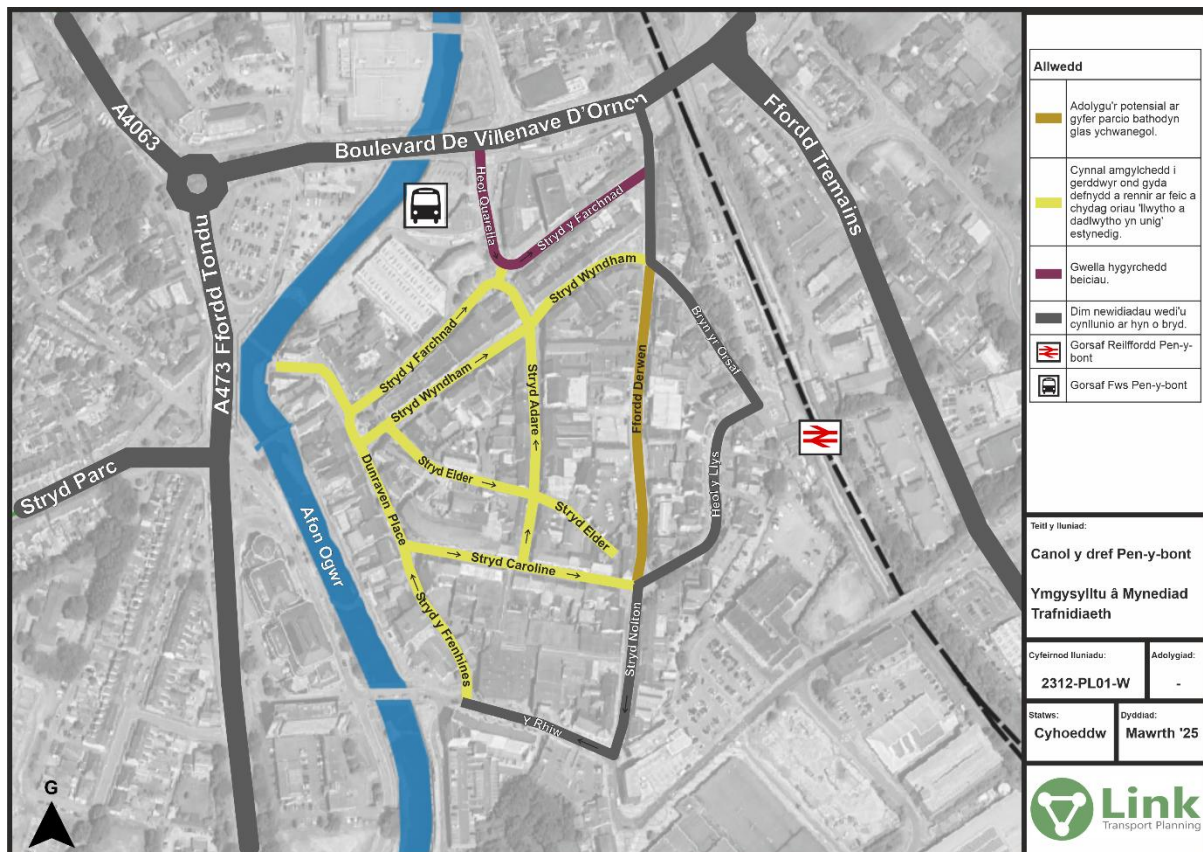
AROLWG

Yn ystod y blynyddoedd diwethaf, mae newidiadau sylweddol wedi bod o ran sut mae pobl yn defnyddio canol tref Pen-y-bont ar Ogwr. Mae'r newidiadau hyn wedi cael eu siapio gan nifer o ffactorau, gan gynnwys symud siopau mawr i barciau manwerthu y tu allan i'r dref, twf siopa ar-lein, cynnydd gwasanaethau o bell megis bancio ar-lein, a'r newid i weithio o gartref, a heriau sy'n gysylltiedig â hygrychedd.

I fynd i'r afael â'r heriau esblygol hyn, mae Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr yn ceisio eich adborth ynghylch ystod o welliannau posibl i wella mynediad i ganol tref Pen-y-bont ar Ogwr.

Crynoir y newidiadau arfaethedig fel a ganlyn:

- Ymestyn oriau llwytho a dadlwytho ar draws ardaloedd i gerddwyr yn unig yng nghanol y dref i gefnogi busnesau a'u cwsmeriaid yn well.
- Caniatáu beicio mewn ardaloedd i gerddwyr yn unig gyda darpariaeth o well cyfleusterau parcio ar gyfer beiciau.
- Cynyddu lleoedd parcio anabl drwy drosi ardaloedd nad ydynt yn cael defnydd digonol ar Ffordd Derwen.



Mae'r newidiadau arfaethedig hyn yn rhan o gam cychwynnol sydd â'r bwriad o wella hyfywedd a gwytnwch canol y dref. Byddwn yn monitro'r effaith yn agos ac efallai y byddwn yn ystyried newidiadau pellach yn ddiweddarach.

Rydym yn cydnabod bod rhai rhanddeiliaid yn ffafrio caniatáu pob traffig gael defnyddio Stryd y Frenhines, Dunraven Place, a Stryd y Farchnad. Er nad yw hyn wedi'i gynnwys yn y cynnig presennol, rydym yn croesawu pob barn trwy'r gymhorthfa, a bydd eich adborth yn ffurfio rhan bwysig o'n dadansoddiad ymgysylltu. Bydd hyn yn helpu i benderfynu a oes angen ymchwiliad pellach ar gyfer cam dilynol posibl.

Gallwch ddewis ateb pob adran o'r holiadur hwn neu ganolbwyntio ar y meysydd sydd bwysicaf i chi. Yn dibynnu ar ba adrannau rydych chi'n dewis eu hateb, bydd yr arolwg yn cymryd rhwng oddeutu 3 a 10 munud i'w gwblhau.

Mae eich adborth yn yr arolwg hwn yn hynod werthfawr i'n helpu i lunio cynllun cytbwys sy'n ddiogel, yn effeithiol ac yn gyflawnadwy.

RHAN 1

Adran A: Barn ynghylch mynediad i llwytho a dadlwytho yng nghanol tref Pen-y-bont ar Ogwr

Mae canol tref Pen-y-bont ar Ogwr ardal i gerddwyr yn unig rhwng 10 AM a 6 PM bob dydd ar hyn o bryd. Y tu hwnt i'r oriau hyn, dim ond cerbydau sy'n llwytho neu'n dadlwytho sydd â mynediad i'r ardal. Mae masnachwyr yng nghanol y dref wedi rhannu adborth y byddai'n well ganddynt ymestyn yr oriau ar gyfer llwytho a dadlwytho, a fyddai'n ei gwneud yn haws i gyflenwyr a chwsmeriaid ddanfôn neu gasglu nwyddau.

Byddai'r newid hwn yn golygu lleihau'r oriau pan fo'r strydoedd yn fannau i gerddwyr yn unig. Er y byddai hyn yn gallu helpu busnesau, mae'n bwysig ystyried sut y gallai hyn effeithio ar gerddwyr ac awyrgylch canol y dref.

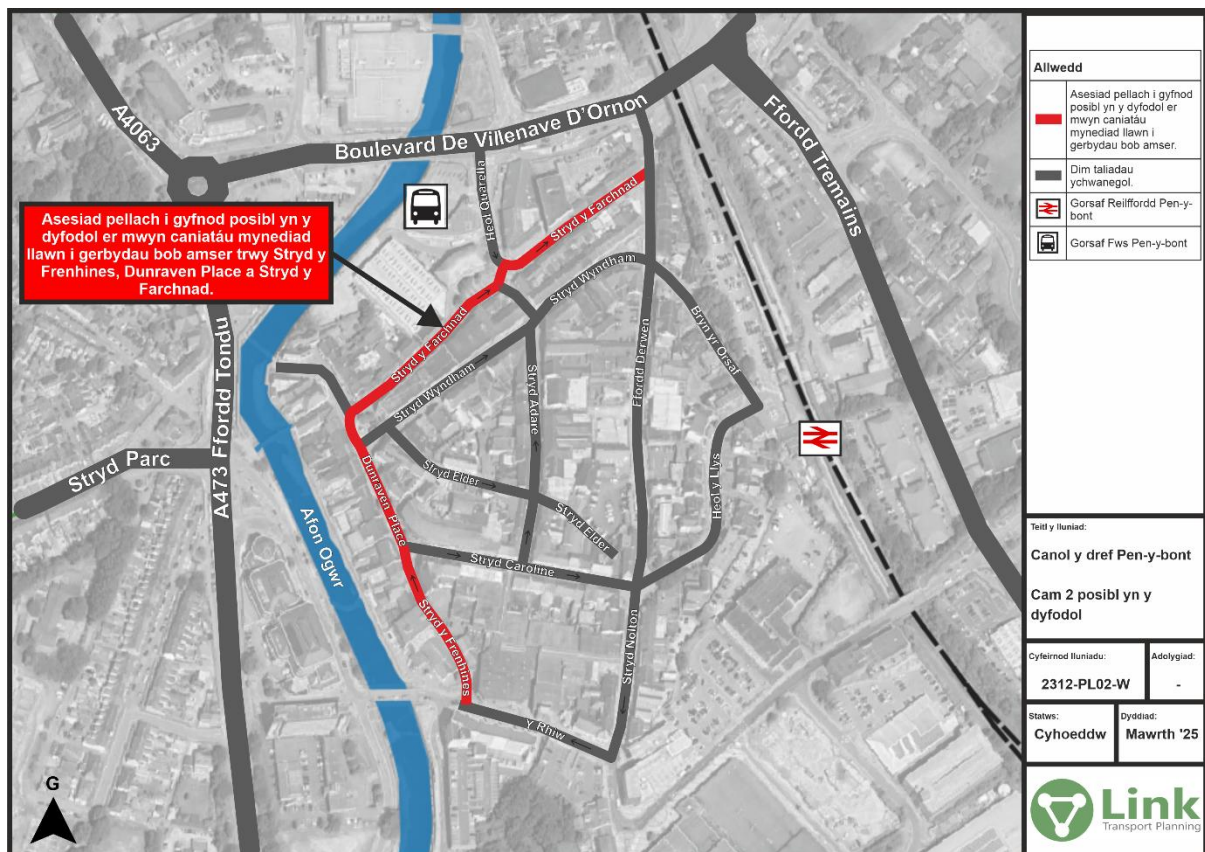
C1: A ydych chi'n cefnogi'r cynnig i ymestyn yr oriau lle caniateir llwytho a dadlwytho yng nghanol tref Pen-y-bont ar Ogwr.

- ☐ Ydw
- ☐ Nac ydw, dylid cadw'r oriau presennol
- ☐ Nac ydw, dylid lleihau'r oriau presennol
- ☐ Ddim yn siŵr

Cwestiwn dilynol: Os wnaethoch chi ateb 'ydw' neu 'nac ydw, dylid lleihau'r oriau presennol', pa oriau llwytho a dadlwytho ydych chi'n credu y dylid fod ar waith a pham?

Adran B: Barn ar gam posibl yn y dyfodol i ganiatáu mynediad llawn i gerbydau drwy'r llwybr sydd ar gyrion canol y dref, sef Stryd y Frenhines, Dunraven Place a Stryd y Farchnad

Mae rhai rhanddeiliaid wedi rhannu adborth y dylid agor y llwybr sydd ar gyrion canol y dref, sef Stryd y Frenhines, Dunraven Place a Stryd y Farchnad i bob traffig, bob amser. Nid yw hyn yn rhan o'r cynnig presennol, ond efallai y byddwn yn cynnal asesiad pellach i benderfynu a allai ffurfio cam dilynol yn y dyfodol i drefniadau mynediad canol y dref.



C1: A ddylai Stryd y Frenhines, Dunraven Place a Stryd y Farchnad fod yn fwy hygyrch i bob math o draffig?

- ☐ Dylent, drwy'r amser
- ☐ Dylent, ond dim ond y tu hwnt i'r oriau prysuraf o ran cerddwyr
- ☐ Na
- ☐ Ddim yn siŵr

Cwestiwn dilynol: Nodwch unrhyw sylwadau pellach yr hoffech eu gwneud i esbonio eich ateb.

Adran C: Barn ar feicio yng nghanol y dref

Mae beicio yn ffurf o drafnidiaeth sy'n iach, cynhwysol, cost isel ac yn rhydd o allyriadau. Mae canllawiau presennol Llywodraeth Cymru yn datgan y dylid rhoi ystyriaeth bob amser i ganiatáu beicio drwy strydoedd sydd wedi'u dynodi ar gyfer cerddwyr. Fodd bynnag, ni chaniateir beicio drwy ganol tref Pen-y-bont ar Ogwr ar hyn o bryd yn ystod oriau cerddwyr yn unig. Rhannwch eich barn am y canlynol os gwelwch yn dda:

C1: A ddylid caniatáu beicio drwy ganol y dref yn ystod oriau cerddwyr yn unig?

- ☐ Dylid
- ☐ Dylid, ond gyda rhai cyfyngiadau (*e.e., amseroedd, ardaloedd penodol*)
- ☐ Na, nid wyf yn credu y dylid caniatáu beicio
- ☐ Ddim yn siŵr

Cwestiwn dilynol: Pam ydych chi'n teimlo fel hyn?

C2: A ydych yn credu y dylid gwella parcio ar gyfer beiciau yng nghanol y dref?

- ☐ Ydw

☐ Nac ydw

☐ Ddim yn siŵr

Cwestiwn dilynol: Os wnaethoch chi ateb 'Ydw' i C2, esboniwch ble mae angen rhagor neu well leoedd parcio a pha nodweddion sydd bwysicaf i chi (e.e. *lleoliad ger cyrchfan, diogelwch personol a diogelwch y beic, amddiffyn rhag tywydd*).

Adran D: Barn ar lleoedd parcio anabl yng nghanol y dref

Mae lleoedd parcio anabl ar gael yng nghanol tref Pen-y-bont ar Ogwr ym meysydd parcio'r Cyngor, meysydd parcio preifat, a lleoedd parcio bathodyn glas dynodedig ar y stryd. Mae adborth wedi cynnig y byddai rhagor o leoedd parcio bathodyn glas yn ei gwneud yn haws i ddefnyddwyr anabl fynd i leoedd yng nghanol y dref. Un syniad yw ychwanegu rhagor o leoedd parcio bathodyn glas ar strydoedd fel Ffordd Derwen. Gellid gwneud hyn drwy ddefnyddio ardaloedd sydd wedi'u neilltuo ar hyn o bryd ar gyfer tacsis nad ydynt yn cael eu defnyddio'n aml.

C1: A ydych yn credu y dylwn greu rhagor o leoedd parcio anabl yn lle cilfannau tacsis neu lwytho nad ydynt yn cael eu defnyddio'n aml?

- ☐ Ydw, credaf y byddai'n syniad da
- ☐ Nac ydw, nid wyf yn credu y dylem golli cilfannau tacsis neu lwytho
- ☐ Ddim yn siŵr

Cwestiwn dilynol: Pam ydych chi'n teimlo fel hyn?

C2: Gan feddwl yn ehangach, a ydych chi'n credu bod digon o leoedd parcio anabl ar gael i alluogi mynediad at ganol y dref?

- ☐ Ydw, credaf fod digon o leoedd

- ☐ Nac ydw, mae angen rhagor o leoedd parcio bathodyn glas
- ☐ Ddim yn siŵr

Cwestiwn dilynol: Pam ydych chi'n teimlo fel hyn?

RHAN 2 CWESTIYNAU DEWISOL YCHWANEGOL

Byddem yn gwerthfawrogi eich adborth ychwanegol ynghylch y mynediad presennol i ganol y dref a'ch blaenoriaethau ar gyfer gwella. Bydd hyn yn ein helpu i ddeall amodau presennol yn well a nodi meysydd pellach i'w gwella.

Mae pob cwestiwn yn ddewisol a bydd eich adborth yn dal i gael ei ddefnyddio hyd yn oed os n: ad ydych yn ateb y cwestiynau yn yr adran hon.

Adran A: Ynghylch eich defnydd o'r ardal

C1: Sut ydych chi'n teithio i ganol y dref fel arfer? (*Dewiswch bob un sy'n berthnasol*)

- ☐ Cerdded
- ☐ Beicio
- ☐ Trafnidiaeth gyhoeddus (e.e., *bws, trê*n)
- ☐ Car preifat
- ☐ Tacsï neu wasanaethau rhannu car
- ☐ Nid wyf yn ymweld â chanol y dref yn aml
- ☐ Arall (*nodwch os gwelwch yn dda*):

C2: Sut fydddech chi'n sgorio pa mor rhwydd yw cael mynediad i ganol y dref trwy gerdded, beicio a defnyddio trafndiaeth gyhoeddus?

- ☐ Rhagorol
- ☐ Da
- ☐ Gweddol
- ☐ Gwael
- ☐ Gwael iawn
- ☐ Ddim yn siŵr

Cwestiwn dilynol: Pam wnaethoch chi ddewis yr opsiwn hwnnw?

C3: Pa mor aml ydych chi'n ymweld â chanol y dref?

- ☐ Yn ddyddiol
- ☐ Sawl gwaith yr wythnos
- ☐ Unwaith yr wythnos
- ☐ Unwaith y mis
- ☐ Llai nag unwaith y mis
- ☐ Nid wyf erioed wedi bod

C4: Beth yw'r prif reswm dros eich ymweliadau â chanol y dref? (*Dewiswch bob un sy'n berthnasol*)

- ☐ Rwyf yn byw yng nghanol y dref
- ☐ Rwyf yn gweithio gerllaw
- ☐ Rwyf yn mynychu'r ysgol gerllaw
- ☐ Siopa

- ☐ Cymdeithasu neu weithgareddau hamdden
- ☐ Defnyddio gwasanaethau (e.e., *gofal iechyd, gwasanaethau cyhoeddus*)
- ☐ Nid wyf yn ymweld â chanol y dref
- ☐ Arall (*nodwch os gwelwch yn dda*):

C5: Sut hoffech chi deithio i ganol tref Pen-y-bont ar Ogwr?

- ☐ Cerdded
- ☐ Beicio
- ☐ Bws
- ☐ Trên
- ☐ Car (*gyrrwr*)
- ☐ Car (*teithiwr*)
- ☐ Olwyn (*gan ddefnyddio cadair olwyn neu gymorthyddion symudedd eraill*)
- ☐ Tacsï
- ☐ Arall (*nodwch os gwelwch yn dda*):

Cwestiwn dilynol: Beth sy'n eich atal rhag defnyddio'r dull o'ch dewis i deithio i ganol y dref?

C6: Beth fyddai'n eich annog i ymweld â chanol tref Pen-y-bont ar Ogwr yn amlach?
(Dewiswch bob un sy'n berthnasol)

- ☐ Gwell llwybrau cerdded, beicio, neu gysylltiadau trafnidiaeth gyhoeddus
- ☐ Gwell mynediad ar gyfer ceir (*mwyr o leoedd parcio neu lai o gyfyngiadau*)
- ☐ Gwell siopau, bwytai, neu opsiynau adloniant
- ☐ Mwy o ddigwyddiadau a gweithgareddau yng nghanol y dref
- ☐ Gwell diogelwch
- ☐ Strydoedd a lleoedd cyhoeddus glanach
- ☐ Gwell cyfleusterau, megis toiledau cyhoeddus neu fannau eistedd
- ☐ Dim byd, rwyf yn fodlon gyda'r cynnig presennol
- ☐ Ddim yn siŵr
- ☐ Arall (*nodwch os gwelwch yn dda*):

Cwestiwn dilynol: Pam ydych chi'n teimlo fel hyn?

C7: A oes gennych unrhyw broblemau iechyd sy'n effeithio ar eich symudedd?

- ☐ Nac ydw
- ☐ Nam ar y clyw
- ☐ Amhariad ar y golwg
- ☐ Symudedd cyfyngedig
- ☐ Byddai'n well gennyf beidio â dweud
- ☐ Arall (*nodwch os gwelwch yn dda*):

Monitro cydraddoldeb

Dan Ddeddf Cydraddoldeb 2010 a Dyletswyddau Cydraddoldeb y Sector Cyhoeddus, mae gan y Cyngor ddyletswydd gyfreithiol i edrych ar sut mae ei benderfyniadau'n effeithio ar bobl oherwydd gallent fod â nodweddion penodol. Mae'r cwestiwn hwn yn ddewisol.

Sut fyddai'r cynigion hyn yn effeithio arnoch chi oherwydd eich:

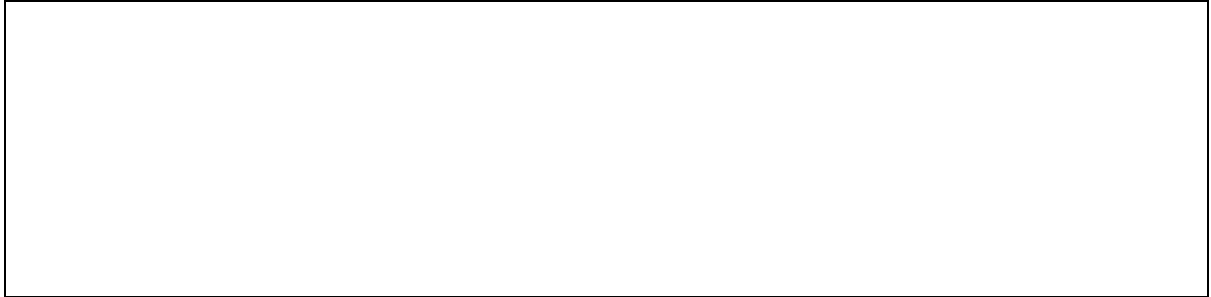
Rhywedd, Oedran, Ethnigrwydd, Anabledd, Rhywioldeb, Crefydd / Cred, Hunaniaeth ryweddol, Statws perthynas, Beichiogrwydd, Dewis iaith?

Hoffem glywed eich barn ynghylch effaith y cynigion ar yr iaith Gymraeg, yn arbennig y cyfleoedd i bobl ddefnyddio'r Gymraeg ac i beidio trin yr iaith Gymraeg yn llai ffafriol na'r Saesneg.

Pa effaith fyddent yn ei gael yn eich barn chi?

Sut ellir cynyddu effeithiau cadarnhaol, neu liniaru effeithiau negyddol?

Eglurwch hefyd sut y credwch chi y gellir creu neu addasu'r cynigion fel eu bod yn cael effaith gadarnhaol ar y cyfleoedd i bobl ddefnyddio'r iaith Gymraeg, ac i beidio trin yr iaith Gymraeg yn llai ffafriol na'r iaith Saesneg, a sicrhau nad oes effeithiau niweidiol ar y cyfleoedd i bobl ddefnyddio'r iaith Gymraeg.



Er mwyn ein helpu i sicrhau ein bod yn cyflwyno gwasanaethau i bawb sydd eu hangen mewn ffordd deg, byddem yn ddiolchgar pe baech yn ateb ychydig mwy o gwestiynau amdanoch chi eich hun.

Bydd yr wybodaeth a ddarparwch yn cael ei chadw'n gyfrinachol a'i defnyddio at ddibenion monitro cydraddoldeb yn unig.

Nid oes yn rhaid ichi ateb y cwestiynau isod fel rhan o'r holiadur. Nid oes rhaid ichi ateb unrhyw un o'r cwestiynau os nad ydych eisiau gwneud hynny.

Fel arall, gallwch ddewis ateb rhai cwestiynau a pheidio ag ateb rhai eraill drwy ddewis yr opsiwn 'byddai'n well gennyf beidio â dweud'.

A ydych chi'n fodlon ateb ychydig mwy o gwestiynau amdanoch chi eich hun?

☐ Ydw

☐ Nac ydw

A ydych chi'n ystyried eich hun yn anabl?

☐ Ydw

☐ Nac ydw

☐ Gwell gennyf beidio â dweud

Dewiswch eich categori oedran:

☐ Dan 18 oed

☐ 35 – 44

☐ 65 – 74

☐ 18 – 24

☐ 45 – 54

☐ 75 +

☐ 25 – 34

☐ 55 – 64

☐ Gwell gennyf beidio
â dweud

Sut fydddech chi'n disgrifio eich cenedligrwydd? (*Ticiwch un opsiwn*)

☐ Cymraeg

☐ Albanaidd

☐ Saesneg

☐ Gwyddeleg Gogleddol

☐ Gwell gennyf beidio
â dweud

☐ Arall (*many/wch os gwelwch yn dda*):

Beth yw eich grŵp ethnig? (*Ticiwch un opsiwn*)

- | | |
|--|---|
| ☐ Gwyn | ☐ Asiaidd/ Asiaidd Prydeinig |
| ☐ Du/ Affricanaidd/ Caribïaidd/
Du Prydeinig | ☐ Grwpiau cymysg/ aml-ethnig |
| ☐ Gwell gennyf beidio â dweud | |
| ☐ Arall (<i>manylwch os gwelwch yn dda</i>): | |

Beth yw eich crefydd neu gred? (*Ticiwch un opsiwn*)

- | | | |
|---|-------------------------------------|---|
| ☐ Dim crefydd | ☐ Hindŵaidd | ☐ Iddewig |
| ☐ Cristnogol | ☐ Mwslimaidd | ☐ Gwell gennyf beidio
â dweud |
| ☐ Bwdhaidd | ☐ Sicaidd | |
| ☐ Arall (<i>manylwch os gwelwch yn dda</i>): | | |

Sut fydddech chi'n disgrifio eich rhywedd? (*Ticiwch un opsiwn*)

- | |
|---|
| ☐ Gwryw |
| ☐ Benyw |
| ☐ Gwell gennyf beidio â dweud |
| ☐ Mewn ffordd arall (<i>manylwch os gwelwch yn dda</i>): |

A ydych chi'n feichiog?

- ☐ Ydw
- ☐ Nac ydw
- ☐ Gwell gennyf beidio â dweud

A ydych chi wedi rhoi genedigaeth o fewn y 26 wythnos ddiwethaf?

- ☐ Do
- ☐ Naddo
- ☐ Gwell gennyf beidio â dweud

Beth yw eich cyfeiriadedd rhywiol? (*Ticiwch unrhyw opsiwn*)

- ☐ Heterorywiol/ Syth ☐ Dyn hoyw ☐ Deurywiol
- ☐ Menyw Hoyw/
Lesbiadd ☐ Gwell gennyf beidio
â dweud
- ☐ Arall (*manywch os gwelwch yn dda*):

Beth yw eich statws priodasol? (*Ticiwch un opsiwn*)

- ☐ Sengl ☐ Wedi ysgaru
- ☐ Gyda phartner ☐ Gweddw
- ☐ Priod/ Partneriaeth sifil ☐ Gwell gennyf beidio â dweud

A ydych chi'n gallu? (*Ticiwch unrhyw opsiwn perthnasol*)

	Ddim o gwbl	Ychydig	Yn weddol dda	Ydw, yn rhugl	Gwell gennyf beidio â dweud
Siarad Cymraeg	☐	☐	☐	☐	☐
Darllen Cymraeg	☐	☐	☐	☐	☐
Ysgrifennu Cymraeg	☐	☐	☐	☐	☐

Diolch am roi o'ch amser i gwblhau'r arolwg hwn.

Dychwelwch at:

Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr

Yr Adran Ymgynghori

Y Swyddfeydd Dinesig

Stryd yr Angel

Pen-y-bont ar Ogwr

CF31 4WB

E-bost:

consultation@bridgend.gov.uk

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Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	DRAFT OUTDOOR RECREATION FACILITIES SUPPLEMENTARY PLANNING GUIDANCE
Report Owner / Corporate Director:	CORPORATE DIRECTOR - COMMUNITIES
Responsible Officer:	JACK DANGERFIELD SENIOR STRATEGIC PLANNING POLICY OFFICER
Policy Framework and Procedure Rules:	There is no impact on the Policy Framework or Procedure Rules.
Executive Summary:	The purpose of this report is to report back to Cabinet on the results of the 6-week consultation on the draft Outdoor Recreation Facilities Supplementary Planning Guidance (SPG), the issues raised, the Local Planning Authority's response, and how those comments have influenced the final version of the SPG. This report also seeks Cabinet approval to submit the final form SPG to Council for adoption. Subsequent adoption of this SPG will enable effective implementation of the Outdoor Recreation Facilities policy within the adopted Replacement Local Development Plan (RLDP), the Council's statutory land-use planning document.

1. Purpose of Report

- 1.1 The purpose of this report is to report back to Cabinet the results of the 6-week public consultation on the draft Outdoor Recreation Facilities Supplementary Planning Guidance (**SPG**), the issues raised, the Local Planning Authority's (**LPA**) response, and how those comments received have influenced the final version of the SPG. It also seeks Cabinet approval to submit the final form SPG to Council for adoption (**Appendix 1**).

2. Background

- 2.1 The adopted Replacement Local Development Plan ("**RLDP**", March 2024) plays a key role in ensuring new housing developments incorporate the appropriate amount and mix of Outdoor Recreation Facilities (**ORFs**), to alleviate the additional pressure placed upon existing facilities. This helps to ensure that developments remain sustainable and can support the needs of the community long-term.
- 2.2 While there is an existing adopted SPG in place (*SPG 05: Outdoor Recreation Facilities and New Housing Development*, adopted on 9th March 2022), this was prepared to expand upon the previous LDP's ORFs policy and now requires updating to support the adopted RLDP. Other contextual changes also need to be incorporated within a replacement SPG for ORFs. Firstly, new '*Fields in Trust*' standards, which define a target for the quantity of recreation space provision, have been introduced. These standards are universally accepted as the recommended benchmark for the provision of recreation space and facilities and will prove key to implementing Policy COM10. The SPG also needs to provide current evidence-based cost figures to inform commuted sums. This will ensure capital and maintenance sums secured through the planning system will better reflect the actual cost of providing such facilities. Indexation of the supporting evidence used to inform the SPG will enable these sums to be updated annually to ensure they remain current in terms of value.
- 2.3 The replacement Outdoor Recreation Facilities SPG will support and provide further direction on the implementation of RLDP Policy *COM10: Provision of Outdoor Recreation Facilities*. This policy requires developments to provide a specific quantity of recreation space *on-site*, thus helping to create sustainable, cohesive and inclusive communities where everyone has access to good quality recreation spaces and facilities.
- 2.4 The revised Outdoor Recreation Facilities SPG provides updated, specific guidance on:
- How developers should calculate the required quantity of the five recreational facility typologies defined by Policy COM10 on-site;
 - How developers should calculate the split between on-site provision and a financial contribution for the enhancement/provision of off-site recreational facilities, if required;

- How to calculate a suitable financial contribution to cover the long-term maintenance of either/both on-site and off-site facilities;
- The use of planning obligations (via s106 agreements) to secure ORF provision off-site;
- Information on the Council's accessibility benchmark standards for each recreation facility typology;
- Design guidance for the five typologies of recreational facility to encourage best practice when providing new facilities on-site;
- Information on the Council's preferred approach to the management and maintenance of on-site outdoor recreation facilities; and
- How issues relating to development viability may be considered in respect of ORF provision.

2.5 Policy COM10 defines five categories of ORF to reflect those set out in the *Fields in Trust's (FiT) 'Beyond the Six Acre Standard'*. Policy COM10 sets a spatial requirement (hectares) per 1,000 population for each ORF typology. These include:

- **Playing Pitches** – Areas marked for formal, pitch-based recreation activities such as football, rugby union/league and cricket pitches;
- **Other Outdoor Sports** – Non-pitch sports facilities, such as tennis courts, bowling greens and athletics tracks;
- **Equipped/Designated Play Areas** – Either Local Areas for Play (**LAPs**), Local Equipped Areas for Play (**LEAPs**) or Neighbourhood Equipped Areas for Play (**NEAPs**);
- **Other Outdoor Provision** – Other types of sports facilities not included in the above categories, such as Multi-Use Games Areas (**MUGAs**) and skate parks; and
- **Allotment provision** - Open space dedicated to food growing.

2.6 The revised SPG converts the policy requirement from hectares per 1,000 population to square metres per dwelling to enable planning officers and applicants to calculate the spatial requirement on-site. In cases where proposed development is not able to deliver the required quantity of outdoor recreation space on-site, financial contributions may be acceptable in lieu to support and/or enhance provision elsewhere in the vicinity of the development. The SPG includes a set of evidenced-based costings reflective of how much it would cost to both provide the different types of outdoor recreation facility off-site and to maintain on-site and off-site facilities over a 25-year period. With the inclusion of these costings in the SPG, the Council will be able to justify seeking appropriate planning contributions to cover the cost of the

provision and maintenance of high quality, inclusive and accessible outdoor recreation facilities throughout the County Borough.

2.7 Where developers justify that the full policy requirement cannot be met on-site, the LPA will refer to the results of the latest Outdoor Sport and Children's Playing Space Audit and/or the Allotments and Community Gardens Audit to determine which typologies should, where possible, be prioritised on-site. These audits will also be used to inform how committed sums should be allocated to meet local need.

2.8 The Outdoor Recreation Facilities SPG also includes design guidance for the provision of ORFs and links to a range of external best practice guidance documents. This section was informed by a Health Impact Assessment and is intended to ensure that facilities delivered are inclusive, accessible, environmentally sustainable, and maximise health and well-being benefits to all. This approach is key to ensuring balanced, socially cohesive and sustainable communities.

2.9 Policy COM10 requires developments to provide the following quantities of recreation space for each ORF typology:

- 1.2 hectares of Playing Pitches per 1,000 population;
- 1.6 hectares of Other Outdoor Sports (non-pitch) per 1,000 population;
- 0.25 hectares of Equipped/Designated Play Areas per 1,000 population;
- 0.3 hectares of Other Outdoor Provision per 1,000 population; and
- 0.2 hectares of Allotment Provision per 1,000 population.

2.10 The Development Control Committee were informed of the need to revise the Outdoor Recreation Facilities SPG at their meeting of 8th August 2024, with two members of the DC Committee volunteering to champion the production of the updated Outdoor Recreation Facilities SPG and work alongside the Senior Strategic Planning Policy Officer to progress the SPG.

3. Current situation / proposal

3.1 On 13th May 2025, Cabinet provided approval for a six-week public consultation on the draft Outdoor Recreation Facilities SPG to take place. The consultation was subsequently launched on 22nd May and closed on 2nd July, and was promoted through a variety of channels to ensure wide engagement. The consultation was hosted on the Council's consultation portal, supported by a social media campaign and an accompanying press release to maximise public awareness. In addition, targeted emails were issued to approximately 100 stakeholders, including all elected Members, Town and Community Councillors, developers, planning agents, and Registered Social Landlords. This ensured that a broad range of community and development sector representatives were directly invited to comment, providing a robust and inclusive approach to the public consultation.

3.2 A total of four representations were received on the Outdoor Recreation Facilities SPG during the consultation period. This low number reflects the fact that there were no fundamental objections to the draft SPG. All representations, together with the Local Planning Authority's response to each and the reasoning for not incorporating some suggestions, are set out in the Consultation Report attached as **Appendix 2** to this report. The comments submitted related to relatively minor points, resulting in two changes being made to the draft SPG document:

- Insertion of a reference to the '*Including Disabled Children in Play Provision* Position Statement' by the 'Play Safety Forum' under the *Local Community Needs and Accessibility* heading within Section 7.0 *Designing Outdoor Recreation Facilities* of the draft SPG.
- Updated web-link to Play Wales' document, '*Creating Accessible Play Spaces* toolkit' under the heading '*Design Guidance by Outdoor Recreation Facility Typology*' within Section 7.0 *Designing Outdoor Recreation Facilities* of the draft SPG.

3.3 However, there were no other changes considered necessary to the SPG following the public consultation. Once adopted, the final SPG will add weight to the interpretation and application of RLDP Policy COM10, provide more detailed advice to planning applicants and will become a material consideration in the determination of planning applications. It will update and replace the previous *SPG 05: Outdoor Recreation Facilities & New Housing Development* (adopted March, 2022).

4. Equality implications (including Socio-economic Duty and Welsh Language)

4.1 An initial Equality Impact Assessment (EIA) screening has identified that there would be no negative impact on those with one or more of the protected characteristics, on socio-economic disadvantage or the use of the Welsh Language. It is therefore not necessary to carry out a full EIA on this policy or proposal.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

5.1 The Outdoor Recreation Facilities SPG will provide additional guidance and material weight to support adopted RLDP Policy *COM10: Outdoor Recreation Facilities*, which seeks to enhance the supply and standard of ORFs. This is a key contributory factor to delivering Local Well-being Objective One: '*A prosperous place with thriving communities*'.

5.2 The Outdoor Recreation Facilities SPG will also contribute to the following goals within the Well-being of Future Generations (Wales) Act 2015:

- A resilient Wales – Enabling residents to access opportunities for food growing close to where they live, live closer to nature, and for socialising.

By designing in natural habitats, wherever possible, the SPG also supports wildlife to thrive.

- *A more equal Wales* – By providing accessible and inclusive ORFs, the SPG is helping to ensure that everyone has the opportunity to exercise and participate in sports and in play activities.
- *A healthier Wales* – By providing equitable access to ORFs close to where people live is essential for ensuring that residents have the opportunity to socialise, play and exercise, all important contributors to health and wellbeing.
- *A Wales of cohesive communities* – Enabling well-connected, accessible and inclusive spaces for people to meet and socialise together will foster sustainable, socially cohesive communities.

6. Climate Change and Nature Implications

- 6.1 There are no direct climate change or nature implications from this report, although the Outdoor Recreation Facilities SPG will provide additional guidance to secure ORFs as part of planning applications. ORFs play an important role in meeting the challenge of climate change and flooding through integrating Sustainable Drainage Systems (**SuDS**) and providing opportunities for conserving and enhancing the natural environment. The SPG will enable the provision of appropriate ORFs in accessible locations (close to new dwellings and/or active travel routes). This will help reduce dependence upon private vehicles, minimise the need for residents to travel to access ORFs and therefore help reduce carbon emissions. The SPG will also promote well-designed ORFs that utilise durable materials, thereby minimising the future maintenance burden and the need for replacement materials in the medium to long-term. Enabling community food-growing spaces close to where people live will also provide residents with the opportunity to source food with minimal impact on the environment.

7. Safeguarding and Corporate Parent Implications

- 7.1 There are no Safeguarding and Corporate Parent implications from this report.

8. Financial Implications

- 8.1 There are no financial implications arising from this report.

9. Recommendations

9.1 It is recommended that Cabinet:

- (a) Note the contents of this report and the consultation responses received on the draft Outdoor Recreation Facilities SPG, together with resultant amendments attached as **Appendix 2**.
- (b) Approve presenting the final form Outdoor Recreation Facilities SPG (**Appendix 1**) to Council to seek its adoption.

Background documents

None

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Bridgend County Borough
Local Development Plan
2018-2033

Draft Outdoor Recreation Facilities
Supplementary Planning Guidance
September 2025

Cyngor Bwrdeistref Sirol



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1.0 Introduction

- 1.1 The purpose of this Supplementary Planning Guidance (**SPG**) is to support and provide further direction on the implementation of the policies for Outdoor Recreation Facilities (**ORFs**) contained within the adopted (March 2024) Replacement Local Development Plan (**RLDP**). It outlines how ORFs (to accompany new residential development) should be delivered through the planning system throughout Bridgend County Borough. New ORFs should be delivered on-site in the first instance; however an equivalent financial contribution may be accepted in lieu where it is robustly justified. This will help to alleviate the additional pressure created by new development while enabling placemaking-led sustainable development. This multi-faceted approach is key to ensuring balanced, socially cohesive and sustainable communities.
- 1.2 Once adopted, this SPG will be a material consideration in the determination of all planning applications for residential development including applications for renewal of consents. It will update and replace the previous SPG 05: Outdoor Recreation Facilities and New Housing Development (2022).
- 1.3 Anyone wishing to submit an application for residential development within Bridgend County Borough is urged to consider this SPG and to contact the Local Planning Authority (**LPA**), in advance of submitting an application, to discuss the issues that are raised in this document on a site-specific basis.
- 1.4 This SPG provides specific guidance on:
- Definitions of the ORF typologies listed within Policy COM10;
 - How to calculate the requirement for each type of ORF on-site, as well as the expected financial contribution if some or all of the required ORFs cannot be provided on-site;
 - Designing each ORF typology;
 - The management and maintenance of on-site ORFs; and
 - How issues surrounding development viability may be considered in respect of ORF provision.

2.0 Policy Context

- 2.1 National Planning Policy for the provision of ORFs through the planning system is set out in Future Wales: The National Plan 2040, Planning Policy Wales (PPW) and Technical Advice Note 16 (TAN): Sport, Recreation and Open Space.
- 2.2 **Future Wales: The National Plan 2040** is the national development framework setting out the direction for development in Wales to 2040. The 'Future Wales Outcomes' include '*A Wales where people live and work in connected, inclusive and healthy places*'. Under this outcome, Future Wales states that '*high quality homes meeting the needs of society will be well located in relation to jobs, services and accessible green and open spaces. Places will meet and suit the needs of a diverse population, with accessible community facilities and services*'.
- 2.3 **PPW (Edition 12)** recognises recreation facilities and spaces as important components of placemaking, as well as their contribution towards improving people's health, well-being and amenity. It states that LPAs should provide a framework for well-located, good quality sport, recreation and leisure facilities and develop clear policies for the provision, protection and enhancement of these facilities.
- 2.4 **TAN 16: Sport, Recreation and Open Space** provides practical guidance on the role of the planning system in delivering recreation facilities. It sets out the policy framework for the provision and protection of sport, recreation and open space facilities. It equally provides guidance on incorporating sport, recreation, and open space into development plans and ensuring these amenities are accessible, high quality, and meet the needs of the community. It also emphasises the importance of assessing the current and future needs of the community, of setting design standards for open space/recreation facilities, while encouraging community involvement in the planning and management of facilities to ensure they meet local needs.

2.5 **Cwm Taf Morgannwg Public Services Board (PSB) Local Well-being Plan 2023-28** outlines how the PSB will work together to deliver the seven well-being goals for Wales as referenced in the Well-being of Future Generations (Wales) Act 2015. The PSB Local Well-being Plan is framed around the sustainable development principles and focusses on addressing the underlying causes of problems and helping to prevent them worsening or occurring in the future. There are two key objectives: *Healthy Local Neighbourhoods* and *Sustainable and Resilient Local Neighbourhoods*. Delivery of inclusive and accessible ORFs through the planning system alongside new development will significantly contribute to both well-being objectives and foster cohesive, more sustainable communities. The RLDP expresses, in land-use terms, the objectives of the Well-Being of Future Generations (Wales) Act 2015 and priorities of the PSB's Local Well-being Plan.



Newbridge Fields, Bridgend

3.0 Background

- 3.1 ORFs are vital for people's health, well-being and amenity, and are often an integral part of an area's network of green infrastructure (multi-functional green space and features), and blue infrastructure (water features). They provide spaces for play, sport, physical activity and opportunities to relax close to nature. They also make an important contribution towards people's quality of life, can help to tackle health inequalities and are a key ingredient of good 'place-making'. Networks of high quality, accessible green spaces and ORFs should also promote nature conservation, biodiversity enhancements and provide opportunities for participation in a wide range of physical activities. Ensuring that ORFs are provided within walking distance to where people live is crucial to tackling climate change by reducing the need to travel and improving the resilience of communities to cope with future climate change impacts. ORFs and spaces can also incorporate Sustainable Drainage Systems (**SuDS**), into their design which play an important role in reducing the impact of flooding. These benefits play a key role in supporting the social, environmental, cultural and economic prosperity of Bridgend and Wales. In providing ORFs, community engagement is key to ensuring that provision reflects the needs and aspirations of local people. The Council places great importance upon working in partnership with the community to deliver essential services and facilities where they are needed.
- 3.2 The RLDP's Sustainable Housing Strategy makes provision for 8,628 homes to meet the housing requirement of 7,575 homes. In order to ensure associated pressure upon existing ORFs is effectively managed, it is imperative to ensure they are maintained and/or enhanced as appropriate. Equally, provision of well-maintained, new ORFs close to where people live is a key component of delivering sustainable communities. The LPA's adopted minimum standards for ORFs are calculated per 1,000 population and are detailed in Section 4. They are derived from Field in Trust's (**FiT**) widely used *Guidance for Outdoor Sport and Play – Beyond the Six Acre Standard*

(Wales). The term, 'ORF', in the context of this guidance, is comprised of and defined using the following terminology:

Playing Pitches

- 3.3 *'Playing Pitches'* are defined as areas marked for formal, pitch-based recreation activities, including (but not limited to) association football, rugby union, rugby league, hockey, lacrosse and cricket. This typology also includes facilities ancillary to the purposes of outdoor sports such as changing rooms, toilets, pavilions, clubhouses and, where appropriate, for the level of sport played, spectator areas, lighting and training facilities.

Other Outdoor Sports (non-pitch)

- 3.4 *'Other Outdoor Sports (non-pitch)'* are defined as areas for non-pitch based recreation activity, including courts and greens comprising natural or artificial surfaces, such as tennis courts, bowling greens, athletics tracks and similar outdoor sports areas.

Equipped/Designated Play Areas

- 3.5 *'Equipped/Designated Play Areas'* are areas designated for children and young people, containing a range of facilities and an environment that has been designed to provide focused opportunities for outdoor play. They typically comprise casual or informal playing space within housing developments, including areas containing recreation equipment, grassy areas for children of different ages to enjoy recreation activities, along with equipped playing areas. This category includes Local Areas for Play (**LAPs**), Local Equipped Areas for Play (**LEAPs**) and Neighbourhood Equipped Areas for Play (**NEAPs**).

Other Outdoor Provision

- 3.6 *'Other Outdoor Provision'*: this category refers to facilities such as Multi-Use Games Areas (**MUGAs**) and skateboard parks.

Allotment Provision

- 3.7 These are areas of open space within and accessible to the urban

environment that can provide moderate exercise, relaxation and the production of fresh fruit and vegetables. They are recognised as areas that provide multi-functional benefits to communities in terms of enhanced sustainability, well-being, leisure opportunities and biodiversity. They also provide community, health and social benefits, encouraging interaction between users of all ages, providing the opportunity to teach and learn, while enhancing local biodiversity.



4.0 Planning Framework

- 4.1 PPW emphasises the planning system's role in providing a framework for well-located, good quality sport, recreational and leisure facilities. This is key to facilitating the well-being of children and adults alike, and for the social, environmental, cultural and economic life of the County Borough's communities. The strategic planning framework for the provision, protection and enhancement of sport, recreation and leisure facilities is set out within Strategic Policy 9 (SP9) and supported by Development Management Policies COM9-13:

SP9: Social and Community Infrastructure

COM9: Protection of Social and Community Facilities

COM10: Provision of Outdoor Recreation Facilities

COM11: Provision of Accessible Natural Greenspace
(including public open space)

COM12: Provision of Allotments and Community Food Networks

COM13: Provision of Cemeteries

- 4.2 All new housing developments (including 100% affordable housing sites) will be expected to include an appropriate level of ORFs for public amenity purposes in the interest of good design. COM10 is based on the benchmark standards endorsed by FiT, the National Society of Allotment and Leisure Gardeners Policies and Natural Resources Wales' Green Space Toolkit, for the provision of Accessible Natural Green Space. The LPA will work with developers to maintain an optimal level and balance of good quality ORFs and space for all residents. The standards required by COM10 are supported by the Outdoor Sport and Children's Playspace Audit and the Allotment Audit, which will be updated periodically. Provision of ORFs, in accordance with COM10, will also support the wider green infrastructure network in accordance with DNP8. Provision should be delivered on-site in the first instance.
- 4.3 Financial contributions equivalent to the value that would otherwise be expected on-site, may be acceptable where the developer is able to

demonstrate robustly that it is not possible to deliver the full requirement on-site.

- 4.4 In some circumstances, it may be appropriate to utilise off-site financial contributions for larger than local purposes, such as upgrading key facilities that serve both the site in question and a wider catchment area. For example, the centrally located Bryngarw Country Park draws visitors from a wide catchment area, thereby serving residents across the County Borough. Off-site financial contributions could be used in full or in part for projects such as (although not limited to), play area improvements, accessibility improvements, pathway upgrades and restoration of the park's natural heritage. The scope for individual sites to provide planning contributions to this end would be determined on a case-by-case basis, although the strategic sites allocated within the adopted RLDP could provide the greatest scope to provide ORF contributions for larger than local purposes.



Maesteg Welfare Park

5.0 Calculating the Requirement

- 5.1 This section sets out how to calculate ORF provision as part of planning submissions in order to achieve compliance with Policy COM10. Worked examples for different development sizes are provided in Appendices A and B.
- 5.2 Policy COM10 details five ORF typologies, together with the standards expected per 1,000 population, as follows:
1. 1.2 hectares per 1,000 population for Playing Pitches;
 2. 1.6 hectares per 1,000 population for Other Outdoor Sports (non-pitch);
 3. 0.25 hectares per 1,000 population for Equipped/Designated Play Areas;
 4. 0.3 hectares per 1,000 population for Other Outdoor Provision; and
 5. 0.2 hectares per 1,000 population for Allotment provision.

On-Site Provision

- 5.3 The average household size in the County Borough is 2.3 persons (based on Welsh Government's average household size estimates, 2023). This equates to 435 dwellings per 1,000 population, which has been used to calculate the quantum of ORF provision (in square metres) per dwelling. These requirements are set out in Column A of Table 1 below, which should be used to calculate the total quantity of provision required.
- 5.4 An additional financial contribution will be sought alongside on-site provision to cover maintenance costs for a 25-year period; these costs are shown in Column D of Table 1. However, subject to agreement with the LPA, it is acknowledged that there may be instances where the developer may transfer on-site ORFs to a private management company. The maintenance contributions shown in Column D of Table 1 would not be applicable in these instances.

5.5 Table 2 illustrates the form of ORF provision (on-site provision/off-site contribution) for different sized sites that the LPA would typically consider acceptable to meet the requirements of COM10. Applicants should refer to the column that corresponds to the total number of dwellings planned for the development. Where more than one Equipped Play Area is required on-site, the total spatial requirement for Equipped Play Areas should typically be apportioned using the ratio; 1(LAP): 4(LEAP): 10(NEAP). For large development sites, opportunities to co-locate new ORFs within school sites should be considered.



Tennis Courts, Griffin Park, Porthcawl

Table 1: Cost of On-Site Provision and Off-Site Contributions (Outdoor Recreation Facilities)

Type of ORF	ON-SITE PROVISION		OFF-SITE CONTRIBUTIONS	APPLICABLE TO ON-SITE & OFF-SITE PROVISION
	A: Requirements per dwelling (sqm)	B: Trigger	C: Capital Contribution per sqm	D: Maintenance Contribution per sqm (25 years) *
Playing Pitches	27.6	See Table 2	£12.04	£18.18
Other Outdoor Sports (non-pitch)	36.8	See Table 2	£153.39	£144.63
Equipped/Designated play areas (LAPs, LEAPs & NEAPs)	5.7	See Table 2	LAP: £71.14	£184.93
			LEAP: £43.29	£37.68
			NEAP: £60.97	£34.70
Other outdoor provision (MUGAs, skateboard parks, etc.)	6.9	See Table 2	£64.13	£61.03
Allotments	4.6	See Table 2	£557.13	£105.30

*For information on the requirements for on-site maintenance, please refer to Section 8 of this guidance.

Table 2: Development Thresholds

Size of Site (Number of Dwellings)	1-10	11-50*	51-100	101-200	201-500	500+
Other Outdoor Provision (MUGAs, skateboard parks, etc.)	No	No	Contribution	Contribution	Contribution	Yes
Playing pitches	No	No	Contribution	Contribution	Contribution	Yes
Other outdoor sports (non-pitch)	No	No	No	No	No	Contribution
Allotments	No	No	No	No	Contribution	Yes/ Contribution
Local Area for Play (LAP)	Contribution	Yes	No	Yes	Yes	Yes
Local Equipped Area for Play (LEAP)	No	No	Yes	Yes	Yes	Yes
Neighbourhood Equipped Area for Play (NEAP)	No	No	No	No	Contribution	Yes

*For developments towards the upper end of the 11-50 dwelling range, the LPA may consider it appropriate to require additional on-site provision where there is a lack of accessible ORFs in the local vicinity. This will be assessed on a case-by-case basis.

Off-Site Provision

- 5.6 The LPA recognises that, in some cases, it may not be possible for the required on-site provision set out in Table 2 to be delivered on-site, due to either physical/environmental constraints unique to the site, or issues regarding development viability. In such cases, the applicant must demonstrate this robustly to the LPA and detail the quantum of provision that can be delivered on-site, if any. Where supporting justification is agreed, the LPA will refer to the latest Outdoor Sport and Children's Playing Space Audit and/or the Allotments and Community Gardens Audit to determine which typologies should, where possible, be prioritised on-site to contribute towards local need.
- 5.7 The remaining balance (in square metres) will then be calculated for each of the typologies required by Table 2. A financial contribution will be acceptable in lieu of on-site provision in accordance with the total off-site contribution per square metre in Table 1, Columns C+D (consisting of the capital cost and 25-year maintenance fee). Where more than one Equipped Play Area is required on-site, the financial contribution should be apportioned using the ratio; 1(LAP): 4(LEAP): 10(NEAP).
- 5.8 Table 2 also indicates where a financial contribution is acceptable in the first instance; contributions for these ORFs should be calculated using the same method. The financial contributions in Table 1 will be reviewed annually to take account of inflation.
- 5.9 In certain instances, it may be more appropriate to upgrade existing ORF provision than to provide new facilities on-site. This can be considered if an existing ORF equivalent to the typology required on-site (by Table 2), lies within the walking distance guidelines outlined in Table 3 below. This should be measured from a central point within the red line boundary of the development site (this must take into account any barriers to pedestrians such as railway lines and main roads). The acceptability of an off-site contribution in such instances will be considered on a case-by-case basis, however particular

regard will be given to whether the developer is able to demonstrate either of the following:

- The existing ORF has the capacity to support the increase in population created by the development; or
- The existing ORF is in need of enhancement/expansion (and there is the opportunity to do so).

Accessibility Benchmark Standards

5.10 Accessibility benchmark standards will be applied to ORFs. These standards are derived from FiT guidance and are set accordingly for each typology. These are indicative walking distances only, as they do not take into account any localised physical barriers. Nevertheless, they provide an indication of the LPA's desired maximum distances between residential dwellings and each type of ORF. On-site provision must comply with these standards in accordance with Policy COM10 in the RLDP. Localised accessibility factors (such as the existence of safe and accessible walking and cycling routes), will need to be duly considered by the applicant in justifying off-site contributions in lieu of on-site provision.

Table 3: Accessibility Guidance

ORF Typology	Walking Guideline	
	Walking Distance: Metres from dwellings	Walking Distance: Time from dwellings
Playing Pitches	1,200m	15 mins
All Outdoor Sports	1,200m	15 mins
Equipped / Designated Play Areas	100m from LAPs	1-1.5 mins from LAPs
	400m from LEAPs	5 mins from LEAPs
	1,000m from NEAPs	Approx 12.5 mins from NEAPs
Other Outdoor Provision (MUGAs and skate parks)	700m	Approx. 9 mins

6.0 Section 106 (S106) Agreements

- 6.1 S106 agreements are legal agreements between a planning authority and a landowner/developer, or undertakings offered unilaterally by a landowner/developer, that ensure certain planning obligations related to a development are secured and complied with. ORFs are one such type of planning obligation which will normally be secured by means of a legal agreement under s106 of the Town and Country Planning Act 1990 (as amended). S106 agreements bind the land, are registerable as a local land charge and apply to successive owners of the land.
- 6.2 In order to frontload provision, details of the design, size, siting and standard of each ORF will typically be agreed upfront and conditioned as part of the planning consent rather than agreed as a scheme under the s106 agreement. S106 agreements will typically specify the following in relation to ORFs:
- 6.2.1 **Trigger points when ORFs are to be provided on-site.** The trigger points will conventionally be tied to the occupation of open market dwellings. Different forms of ORFs will either need to be delivered in full on or prior to the defined trigger point or at phased stages on or before several trigger points (for larger sites with several types of ORFs).
- 6.2.2 **Transfer arrangements to a management company or to the Council.** Provisions will be included in the s106 agreement to detail by when the management company or the Council will adopt the respective on-site ORFs. The point(s) by which the developer must transfer each ORF will also be specified in the s106 agreement.
- 6.2.3 **The amount and timing of maintenance sums to be paid and any financial contribution in lieu of on-site delivery (if appropriate).** Maintenance sums and any financial contribution in lieu of on-site delivery (**Commutated Sums**) will be calculated in accordance with the guidance detailed in Section 5 of this SPG, and will be payable at a defined trigger point

or phased proportionately over several trigger points (for larger sites). The trigger points will normally be tied to the occupation of open market dwellings. Commuted Sums will be managed by the local authority to maintain ORFs and enable effective off-site provision within the vicinity of the development or, in some instances, for larger than local purposes. Opportunities will also be explored to co-locate ORFs with health and social care provision or community facilities.



Bryngarw Country Park

7.0 Designing Outdoor Recreation Facilities

- 7.1 Policy COM10 seeks to ensure a certain quantity of ORF space is delivered alongside new development and these facilities should be designed upfront for determination as part of each planning application. The design of these ORFs should be of a quality and form that supports the needs of the whole community, promoting accessibility across all typologies. This section begins by setting out design considerations applicable to all ORFs and also signposts to external guidance for each typology.

FiT Design Standards

- 7.2 The FiT Standards '*Creating Great Spaces for All*' should be used by developers as a starting point to inform the design of ORFs provided. The guidance sets out six 'themes' for their design which build on the FiT benchmark standards. The themes covered include:

- Accessible, safe, and inclusive;
- Promote active, healthy lifestyles;
- Support mental well-being;
- Resilient to climate change;
- Provide space for nature to thrive; and
- Adaptable to community needs.

Outdoor Recreation Facilities as Green and Blue Infrastructure

- 7.3 Green links to and from new ORFs should be included as part of their design from the outset, as per the requirements of SPG19: Biodiversity and Development. In designing development layouts, developers should look to contribute to improving the accessibility and naturalness of ORFs. In providing ORFs, developers should have particular regard to ensuring that such facilities are designed to be accessible to all.
- 7.4 The use of SuDS as part of on-site ORFs will be supported where there is a clear recreation and amenity function such as providing a walkway/path, or benches, trees and bins. SuDS areas that are fenced off, with no path or

bench will not be accepted as ORFs. Basins, ponds and lagoons will be expected to be shallow and may offer the potential to plant reedbeds and other types of wetland habitat. Design and layout could connect a series of spaces linking within or to adjacent off-site provision, which would be seen as a positive development and could be agreed for adoption. Land that has protected status, for example Scheduled Ancient Monuments, woodlands with Tree Preservation Orders or Sites of Importance for Nature Conservation (**SINCs**), are also considered unsuitable for designation. Installing formal Equipped Play Areas on land within such areas would have demonstrable harm upon their primary function. In addition, areas that have separate functions, e.g. balancing ponds, attenuation areas or other engineered features, cannot be considered towards formal play provision unless its use as such can be reasonably guaranteed throughout the year. Where SuDS are provided, developers should carefully consider how they can be designed to provide children with opportunities to play and learn about nature/wildlife.

- 7.5 Providing it does not conflict with the primary recreational function of a space/facility, developers should consider how Net Benefit for Biodiversity can be incorporated into schemes. Wherever there is the opportunity, green walls should be created to prevent such a conflict between these functions. Where this is the case, native plant species should be carefully selected and management/maintenance arrangements put in place to ensure their longevity.

Mitigating and Adapting to Climate Change

- 7.6 New ORFs should be designed to both mitigate and adapt to climate change, while supporting biodiversity. The following principles should be applied where appropriate, based on the scale and type of ORF:
- Design and manage external space to support local biodiversity and climate change adaptation (i.e. incorporating 'no mow' areas, insect hotels and/or dead wood areas to support local biodiversity);
 - Incorporate strategically placed SuDS to help alleviate flooding when it occurs;

- Maintain existing green spaces to encourage outdoor activity within existing settlements, while minimising the need to travel to partake in outdoor sport and recreation;
- Incorporate community food growing spaces to enhance 'locally grown' options for communities;
- Ensure ORFs capitalise on and link in with new and/or existing active travel routes to promote sustainable travel options;
- Enhance carbon storage within urban areas by increasing tree planting and vegetation, which will also help keep ORFs cool during warm weather and help purify the air; and
- Provide opportunities for community composting schemes.

Secured by Design (SBD) Principles and Security

- 7.7 SBD principles should be applied to the design of ORFs to minimise anti-social behaviour and crime levels. SBD is the official police security initiative that works to improve the security of buildings and their immediate surroundings, such as ORFs. Opportunities to install CCTV for ORFs should be considered, where possible, to help combat anti-social behaviour.

Local Community Needs and Accessibility

- 7.8 ORFs should be designed to reflect the needs of local communities at different life stages in order to maximise community benefit. Dialogue should be initiated with the community early in the development process, supplemented by use of local health indicators and population profiles to inform the design of ORFs. ORFs should also be designed to promote gender equality and be safe and accessible for all users. Spaces should be appropriately designed to cater for the needs of children with additional learning needs and disabilities. Particular regard should be given to the *Including Disabled Children in Play Provision Position Statement* by the Play Safety Forum and UK Children's Play Policy Forum when designing new play facilities.
- 7.9 Major development proposals must be supported by a Health Impact Assessment (**HIA**), where appropriate, in accordance with Policy SP8. This mechanism should be used to demonstrate how the proposal will result in

beneficial effects (and avoid adverse impacts), on the key determinants of health in the County Borough. The location, density and play activities provided should seek to address local health and environmental inequalities.

- 7.10 When locating ORFs, care should be taken to ensure that both light and noise impacts on local residents are minimised, for example by installing lighting with sensor/timed switches. Whether on-site or off-site, active travel connections should also be provided to these facilities to enable pedestrian and cycle connectivity in the first instance, together with access to public transport facilities.
- 7.11 When designing ORFs, developers should refer to the Council's latest adopted Play Sufficiency Action Plan and seek to incorporate its recommendations, where appropriate.

Design Guidance by Outdoor Recreation Facility Typology

- 7.12 External best practice guidance documents for each ORF typology are referenced below. These are recommended for use as a reference point to inform the design of on-site ORFs as part of wider residential and mixed-use developments.

7.12.1 Playing Pitches and Other Outdoor Sports (non-pitch):

- Sport England - [Outdoor Surfaces Design Guidance](#)
- Sport England - [Clubhouses Design Guidance](#)
- Sport England - [Comparative Sizes of Sports Pitches & Courts \(Outdoor\)](#)
- Cymru Football Foundation - [Changing Room Guidance](#)
- Cymru Football Foundation - [Artificial Grass Football Pitches \(3G\) Guidance](#)
- Sport England - [Accessible and Inclusive Design of Facilities](#)
- Sport England - [Sport-Specific Guidance](#)
- Sports and Play Construction Association (**SAPCA**) - [The SAPCA Code of Practice for the Design, Construction and Improvement of Natural Sports Turf](#)

- SAPCA - [The SAPCA Code of Practice for the Construction and Maintenance of Synthetic Turf Sports Pitches](#)
- The Football Association - [Guide to Artificial Grass Pitches](#)
- SAPCA - [The SAPCA Code of Practice for the Construction and Maintenance of Tennis Courts](#)
- Basketball England - [Basketball England – Outdoor Technical Guidance](#)

7.12.2 Children's Play Areas (Equipped/Designated Play Areas):

- Play Wales – [Creating Accessible Play Spaces: A Toolkit](#)
- Play England - [Design for Play: A Guide to Creating Successful Play Spaces](#)
- HACS – [Guide to Designing Inclusive Playgrounds](#)
- BSI – [Children's Play Areas: A guide to standards for playground equipment and surfacing \(BS EN 1176 series: 2017\)](#)

7.12.3 Other Outdoor Provision (i.e. Multi-Use Games Areas and Skate Parks):

- SAPCA - [The SAPCA Code of Practice for the Construction of Outdoor Multi-Use Games Areas](#)
- [A guide to the Design, Specification & Construction of Multi-Use Games Areas \(MUGAs\)](#)
- Skateboard GB – [Skateboarding: Design and Development Guidance for Skateboarding – Creating Quality Spaces and Places to Skateboard](#)

7.12.4 Allotments:

- [21st Century Allotments in New Developments](#)
- [Growing in the Community \(second edition\)](#)



Bryntirion Fields, Bridgend

Bridgend Local Development Plan 2018-2033
Outdoor Recreational Facilities Supplementary Planning Guidance

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8.0 Management and Maintenance of On-site Outdoor Recreation Facilities

Management Arrangements

- 8.1 The Council will adopt and maintain land as public open space within residential areas where the primary function of that land is public open space. This will be conditional upon the land fulfilling one or more of the following criteria by:
- Ensuring the health and safety of the public;
 - Enabling or supporting a sport or leisure function; or
 - Providing environmental protection or strategic landscape and visual enhancement.
- 8.2 The Council will not adopt, under the heading of ORFs, apparatus or structures including their surface areas and standoff zones that have a primary function that is not open space. This includes incidental open space associated with underground installations and engineering features, storm water cells, balancing ponds and landform for storm water drainage. The Council will consider adopting SuDS as part of the drainage system, in its role as the SuDS Approving Body (**SAB**), and in accordance with the provisions of the Flood and Water Management Act 2010.
- 8.3 Land offered as public open space that has potential historic liabilities associated with a former use, such as contaminated land, may be considered for adoption. Any such application within a development site will need to be supported by impartial assessment based on its proposed long-term use as open space. Each application will be subject to separate risk assessments of historic liabilities in relation to the proposed use as an open space.
- 8.4 Each potential ORF will be considered for adoption on its own merits on a case-by-case basis. Full discussions on what land could be eligible for adoption should be held at an early stage in the development process. It is advised that proposed adoption be fully explored with the relevant officers prior to submission of a planning permission, with detailed designs being undertaken

upfront. The Council reserves the right to explore opportunities to transfer responsibility for the management and maintenance of ORFs to a community-based organisation i.e. a local sports club, in line with the Council's Community Asset Transfer policy.

- 8.5 The adoption of land will always be subject to a payment by the developer of a Commuted Sum to cover the cost of future maintenance. The Commuted Sum for maintenance is payable on the transfer of the land. The figure is calculated using up-to-date costings for the maintenance of each ORF for 25 years (these costings will be updated annually to account for inflation). Column D in Table 1 shows these figures calculated per square metre for each ORF typology. Where developers make a financial contribution in-lieu of on-site ORFs, a Commuted Sum based on the equivalent cost of providing the required facility on-site will be sought (i.e. the equivalent capital and maintenance costs as detailed in Columns C-D of Table 1).



9.0 Development Viability

- 9.1 The policy requirements for ORFs have been based on the FiT standards, the Plan-Wide Viability Assessment and site-specific viability testing. Deviation from the requirements set out in Policy COM10 should not therefore be necessary and will only be acceptable in exceptional circumstances.
- 9.2 For allocations supported by site-specific viability appraisals at the plan-making stage, applicants citing viability issues must clearly demonstrate what variables have now changed that may warrant deviation from Policy COM10. Appropriate supporting evidence must be provided to substantiate any such claim and this evidence must be comprehensive. For example, it would not be acceptable to solely highlight a change in one variable (such as build costs), without clearly evidencing how other variables (such as house prices), may have also changed. A comprehensive refreshed viability appraisal must therefore be provided, with all inputs and assumptions being robustly evidenced. Unsubstantiated commentary will not be acceptable.
- 9.3 For windfall sites, applicants must robustly demonstrate that site-specific constraints, abnormal costs and/or other viability challenges necessitate a reduction from the policy requirements set out within Policy COM10. The LPA will work collaboratively with developers in such instances to agree an appropriate level of ORF provision, subject to appropriate evidence being provided. The LPA reserves the right to reject any development viability claims without comprehensive supporting evidence being provided.
- 9.4 In all cases, it is recognised that some information necessary to demonstrate viability may be commercially sensitive. However, this is not a sufficient reason to avoid providing the appropriate evidence to the LPA and this information will be used solely to consider whether deviation from Policy COM10 is justifiable.
- 9.5 There is a common viability appraisal model in use across the South-East Wales Region known as the '*Burrows-Hutchinson Ltd Development Viability Model*' (**DVM**). The DVM has been created as a comprehensive, user-friendly

model to assess the financial viability of development proposals. The LPA is able to make the DVM available to applicants to appraise the financial viability of a proposed development and demonstrate any necessary deviation from Policy COM10. The primary inputs required to undertake a financial viability appraisal through the DVM are provided in Appendix C to this SPG.

- 9.6 The DVM and user guide can be released to any applicant subject to the Council receiving payment of a standard fee. The fee is intended to cover the Council's administrative costs of locking and distributing the model, verifying the completed appraisal and providing a high-level review to the applicant. However, payment of a fee will **not** guarantee that a reduced quantity of ORFs will be deemed acceptable or directly result in the granting of planning permission. The fee will enable the LPA to consider whether:
- a) the DVM has been completed correctly and appropriately;
 - b) the evidence supplied to support the costs and values submitted is sufficient and proportionate;
 - c) the suggested timescales for the development are realistic; and the appraisal accords with policy requirements of the RLDP and with other guidance and/or policy statements that are pertinent to the assessment of viability in a planning context.
- 9.7 The preliminary fee does not allow for any further time that an applicant might wish to spend debating the findings of the LPA's initial high-level review. It also does not allow for any officer time necessary to re-appraise subsequent submissions of the model and supporting evidence, which will be re-chargeable. Alternative viability models can be used subject to prior agreement with the LPA. In the event of any unresolvable disputes, the Council may need to draw upon expertise from a third party to act as an independent arbitrator. The costs associated with this must be met by the developer/site promoter. For larger sites (of several hundred units), mixed-use developments or sites of a strategic scale, it may be more appropriate for an applicant to commission an independent arbitrator from the outset, following discussion with the LPA.

Appendix A - Worked Example for 25 Dwellings

Development of 25 dwellings:

An illustrative worked example for 25 market houses using the guidance and standards set out in this SPG. This example illustrates the six-step approach used to determine the nature and amount of ORFs that the LPA would normally expect, including financial contributions in-lieu of on-site provision, if applicable.

STEP 1: Determine the ORF typologies required on-site

A development of 25 market dwellings would normally be expected to provide a LAP on-site (see Table 2). Provision would not be required, in this instance, for either Other Outdoor Provision, Playing Pitches, a LEAP, a NEAP, Other Outdoor Sports, or Allotments.

STEP 2: Calculate the quantity of ORFs required on-site

The size of the LAP is calculated by multiplying the number of dwellings associated with the development (25) by the quantity (in square metres) of recreational space required per dwelling (Table 1, Column A) for the 'Equipped/Designated Play Areas' typology.

25 x 5.7m² per dwelling = 142.5m²

STEP 3: Determine whether all the ORFs requirement can be delivered on-site

If either none or part of the ORFs requirement can be met on-site (either due to physical/environmental or viability constraints), evidence will need to be provided to demonstrate this.

If only part of the ORFs requirement can be provided on-site - in this example, 100 m², then an off-site ORFs financial contribution will need to be made for the remaining 42.5m².

STEP 4: Calculate the total off-site financial contribution (for provision and maintenance)

The total cost per square metre for an off-site contribution should be calculated by combining the 'Capital Contribution per square metre' (Table 1, Column C) with the 'Maintenance Contribution per square metre' (Table 1, Column D) for a LAP. Therefore, the total off-site ORFs contribution in this example should be calculated as follows: **$42.5\text{m}^2 \times (£71.14 + £184.93) = £10,882.98$**

STEP 5: Calculate the on-site ORFs maintenance payment

In addition to the off-site contribution, a payment to cover the cost of the maintenance of on-site ORFs should be provided by the applicant. To calculate the maintenance payment, multiply the 'Maintenance Contribution per square metre' for a LAP in Table 1, Column D, by the total quantity (in square metres) of ORFs provided on-site (in this scenario, 100m²):

$100\text{m}^2 \times £184.93$ (Table 1, Column D) = £18,493

STEP 6: Calculate the total ORFs financial contribution in addition to on-site provision of ORFs

The final step is to combine the total capital costs for off-site provision and maintenance of ORFs, as set out in step 4 (**£10,882.98**) with the total on-site maintenance cost set out in step 5 (**£18,493**), to provide the total ORFs contribution for this development.

In conclusion, the applicant would be required to make a total financial contribution of £29,375.98 alongside a 100m² LAP on-site.

Appendix B - Worked Example for 150 Dwellings

Development of 150 dwellings:

An illustrative worked example for 150 market houses using the guidance and standards set out in this SPG. This example illustrates the six-step approach used to determine the nature and amount of ORFs that the LPA would normally expect, including financial contributions in-lieu of on-site provision, if applicable.

STEP 1: Determine the ORF typologies required on-site

A development of 150 market dwellings would normally be expected to provide a LAP and a LEAP on-site (see Table 2). On-site provision would not be required, in this instance, for either Other Outdoor Provision, Playing Pitches, a NEAP, Other Outdoor Sports, or Allotments.

STEP 2: Calculate the quantity of ORFs required on-site

The combined spatial requirement to be split between the LAP and the LEAP on-site is calculated by multiplying the number of dwellings associated with the development (150) by the quantity (in square metres) of ORFs required per dwelling (Table 1, Column A) for the 'Equipped/Designated Play Areas' typology (5.7m²).

150 x 5.7m² per dwelling = 855m²

The spatial requirements should be apportioned using a 1(LAPs):4(LEAPs) ratio. **Therefore, the LAP should equal 171m² (one part) in size and the LEAP should equal 684m² (four parts) in size.**

STEP 3: Determine whether all of the ORF spatial requirement can be delivered on-site

If either none or part of the requirement can be met on-site (either due to physical/environmental or viability constraints), evidence will need to be provided to demonstrate this.

A financial contribution will need to be made by the applicant for any of the ORF spatial requirement deemed not to be deliverable on-site. **In this example, only 685m² of the 855m² requirement can be delivered on-site. Therefore, an off-site financial contribution will need to be made for the remaining 170m².**

STEP 4: Calculate the total off-site financial contribution (for provision and maintenance)

The total cost per square metre for an off-site ORFs contribution should be calculated by combining 'Capital Contribution per square metre' (Table 1, Column C) with the 'Maintenance Contribution per square metre' (Table 1, Column D) for a LAP and a LEAP. An equivalent off-site ORFs contribution is also required for the Playing Pitches and Other Outdoor Provision typologies required by Table 2 for a development of this size.

As a LAP and a LEAP are required, the ORFs financial contribution should be apportioned using the ratio of 1(LAP):4(LEAP). Therefore, the off-site LAP equivalent should equal 34m² (one part) in size and the LEAP should equal 136m² (four parts) in size. This should be multiplied by the Capital and Maintenance Contribution per square metre (Table 1, Columns C+D).

In addition, the Capital and Maintenance Contribution per square metre (Table 1, Columns C+D) figure for Playing Pitches (£30.22 per sqm) should be multiplied by the requirements per dwelling (150 dwellings x 27.6m² = 4,140m²) to calculate the required ORFs financial contribution towards the Playing Pitches typology. The equivalent figure for Other Outdoor Provision typology (£125.16 per sqm) should be multiplied by the requirements per dwellings (150 dwellings x 6.9 m² = 1,035 m²).

Therefore, the ORFs off-site contribution is calculated as follows:

- 1. Off-Site LAP Contribution: 34m² x £256.07 = £8,706.38**
 - 2. Off-Site LEAP Contribution: 136 m² x £80.97 = £11,011.92**
 - 3. Off-Site Playing Pitches Contribution: 4,140m² x £30.22 = £125,110.80**
 - 4. Off-Site Other Outdoor Sport Contribution: 1,035 m² x £125.16 = £129,540.60**
- Total = £274,369.70**

STEP 5: Calculate the on-site ORFs maintenance payment

In addition to the off-site ORFs contribution, a payment to cover the cost of the maintenance of on-site facilities should be provided by the applicant. To calculate the ORFs maintenance payment, multiply the 'Maintenance Contribution per square metre' for a LAP in Table 1, Column D, by the total quantity (in square metres) apportioned to a LAP (in this scenario, using the 1:4 size ratio against the agreed on-site provision of 685m², this equals 137m²). The remaining 548m² (four

parts) should be used to calculate the total contribution towards the maintenance of the on-site LEAP, in the same way.

1. LAP Maintenance Contribution: $137\text{m}^2 \times £184.93 = £25,335.41$

2. LEAP Maintenance Contribution: $548\text{m}^2 \times £37.68 = £20,648.64$

Total = £45,984.05

STEP 6: Calculate the total ORFs financial contribution in addition to on-site provision of ORFs

The final step is to combine the total costs for off-site provision (capital) and maintenance of ORFs, as set out in step 4 (**£274,369.70**), with the total on-site maintenance cost set out in step 5 (**£45,984.05**), to provide the total ORFs contribution for this development.

In conclusion, the applicant would be required to make a total financial contribution of £320,353.75 alongside 685m² for a LAP and a LEAP on-site.

Appendix C - Data Inputs Required for Financial Viability Appraisals

- 1) List of open market dwelling types, specifying for each one:
 - a) Number of bedrooms;
 - b) Number of habitable rooms;
 - c) Gross/net internal floor areas;
 - d) Estimated open market value (freehold selling price) with supporting evidence;
 - e) Total number of each dwelling type within the proposed development;
- 2) List of affordable dwelling types, specifying for each one:
 - a) Number of bedrooms;
 - b) Number of habitable rooms;
 - c) Gross/net internal floor areas;
 - d) Estimated open market value (unrestricted freehold selling price) for intermediate dwellings;
 - e) Transfer values (with reference to Appendix A) for social rented dwellings;
 - f) Total number of each dwelling type within the proposed development;
- 3) Site layout plan for the development (outline, or detailed if available) with net developable areas and dwelling numbers for each element/phase of the proposed development;
- 4) Estimated construction and sales programmes for the development;
- 5) Details of current land ownership or details of the contractual terms and stage of transaction reached for its acquisition by the developer. This must include the land price paid (or, if estimated and not yet paid, the basis for that estimate), and allowance made for acquisition fees and Land Transaction Tax;
- 6) Planning costs and anticipated period before commencement of development (in months), after land acquisition has been completed;

- 7) Housing construction costs (plot costs), as a total sum or £/m², noting any additional allowance made for achieving compliance with forthcoming building regulations. Evidence must be provided to justify what these costs are based on;
- 8) Physical infrastructure costs, broken down between:
 - a) Off-site drainage, highway and/or other works, with detailed analysis/justification;
 - b) Normal on-site costs for providing road access and services to individual plots (including “externals” such as detached garaging and landscaping, which may be assessed on a fixed average sum per dwelling, or as a percentage of plot costs);
 - c) Abnormal site costs (if any) with detailed analysis/justification;
- 9) Allowance made for professional fees in connection with:
 - a) Planning and building regulations approvals;
 - b) Housing construction costs;
 - c) Physical infrastructure works;
- 10) Estimated sum (or percentage allowance) for contingencies;
- 11) S106 financial contributions necessary to achieve full RLDP policy compliance and anticipated timing of payments;
- 12) Sale and marketing costs for open market dwellings;
- 13) Finance costs, including interest rate(s) applied, and the basis for their calculation; and
- 14) Details of any proposed non-residential uses, including gross external and net internal floor areas, together with estimated costs and revenues associated with those parts of the development. This will include, where available, estimated freehold and rental values for each element/unit, the investment yield(s) on which estimated freehold values have been based/calculated, and details of any pre-lets or forward sale arrangements.

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Appendix 2: Consultation Representations, Responses and Resultant Actions

Section 5: Do you have any comments on the proposed guidance for on-site provision of Outdoor Recreation Facilities outlined in Section 5?	
Organisation	Pencoed Town Council
Representation	With the recently proposed residential development to the East of Pencoed, which includes the construction of over 800 houses, I hope that this guidance takes such developments into account as the infrastructure and recreational facilities are already strained as things stand. For example, if there are 435 dwellings per 1,000 population, that would mean there would be over 2,000 people moving into the new residential development. Thus, is there room for 2.4 hectares of playing pitches, 3.2 hectares of other outdoor sports and so on? To me and the Council, it seems difficult to accommodate such demands.
Local Planning Authority Response	The SPG has been produced to provide supplementary guidance to adopted RLDP Policies, including the suite of allocations therein. This includes the strategic allocation at Land East of Pencoed. Land East of Pencoed will be subject to assessment against the full suite of adopted RLDP policies, notably the site-specific policy (PLA4) for this mixed-use strategic site. This policy states that 6 ha of Outdoor Recreation Facilities (ORFs) would be required on-site. This was based on a suite of evidence provided to inform development of the RLDP, including an illustrative masterplan, which is appended to the RLDP itself (Appendix 7) for purposes of visualisation. An outline planning application has recently been submitted for Land East of Pencoed and will be assessed against the RLDP. The precise nature of on-site recreation provision will be refined through the development management process. This draft SPG will only become a material consideration if adopted by Council, although will support RLDP policies rather than introducing new policy requirements.
Resultant Action	Comments noted and on-site recreation provision at Land East of Pencoed will be assessed against the suite of RLDP policies and refined through the development management process.

Section 5: Do you have any comments on the proposed guidance for off-site provision of Outdoor Recreation Facilities and commuted sums (financial contributions) outlined in Section 5?	
Organisation	Pencoed Town Council
Representation	No significant comments. However, off-site provision may be in high demand with the proposed residential development in Pencoed, as stated above.
Local Planning Authority Response	This SPG is intended to provide developers with guidance on the level and type of new ORFs typically required by Policy COM10 of the adopted RLDP. The SPG provides clarity and will help to enable the consistent application of the adopted policy, thus ensuring an appropriate level of ORFs is provided for all development sites.
Resultant Action	No action necessary.
Organisation	House Builders' Federation
Representation	The HBF supports paragraph 5.4 - 'However, subject to agreement with the local planning authority (LPA), it is acknowledged that there may be instances where the developer may transfer on-site ORFs to a private management company. The maintenance contributions shown in Column D of Table 1 would not be applicable in these instances.'
Local Planning Authority Response	The support for the proposed approach is noted.
Resultant Action	No action necessary.
Section 5: Do you have any comments on the proposed development thresholds set out in Table 2, Section 5?	
Organisation	Pencoed Town Council
Representation	No issues with the table itself, but when applied to Pencoed and the proposed developments, it seems that every single site stated would have to be provided in the area to accommodate the over

	2,000 new residents should the developments go ahead. It is important that this is considered alongside the draft planning guidance for ORFs.
Local Planning Authority Response	It is recognised that the delivery of the full quantity of ORFs required by Table 2 in the SPG may not be feasible in all cases. The thresholds provided in Table 2 are intended as a guide as to what the LPA would typically expect to see delivered on a site of that scale. It should be noted that Land East of Pencoed has its own site-specific policy (PLA4 within the adopted RLDP) and the precise nature of provision will be refined through the development management process. Once adopted, the SPG will add clarity to policy application, however it will not alter the adopted RLDP policy requirements for this site or any other site.
Resultant Action	Comments noted and on-site recreation provision at Land East of Pencoed will be assessed against the suite of RLDP policies and refined through the development management process.
Section 7: Do you have any comments on the design guidance for new Outdoor Recreation Facilities?	
Organisation	Pencoed Town Council
Representation	No opposition to this, in fact it is supported. But again, it is worth being mindful of the capacity of Pencoed to provide such ORFs.
Local Planning Authority Response	The support for the proposed approach is noted. The site in question (Land East of Pencoed) will be assessed against adopted RLDP Policy PLA4, which lists site-specific requirements for the provision of on-site ORFs. However, the LPA recognises that, for all development sites allocated in the RLDP, there may be competing policy demands on development sites. In some cases, site-specific constraints may necessitate off-site provision. Where off-site contributions are proposed, applicants will be required to robustly demonstrate why on-site provision cannot be achieved. Where such justification is accepted, the LPA will refer to the most up-to-date Outdoor Sport and Children's Playing Space Audit and/or the Allotments and Community Gardens Audit to help determine which typologies should, where possible, be prioritised for on-site

	delivery. Any agreed commuted sums will be managed by the LPA to support the maintenance and enhancement of ORFs to help meet community needs.
Resultant Action	No action necessary.
Organisation	Cwm Taf Morgannwg Public Health Team, Cwm Taf Morgannwg University Health Board
Representation	Thank you for inviting me to comment on the public consultation of this policy. I have read through and have only identified one comment I would like to make in section 7 you mention the secure by design guidance published by the police. Could you reference their guidance on using edible landscaping such as rosemary and fruiting trees to encourage security but also support access to good quality food in green spaces across Bridgend.
Local Planning Authority Response	While the SPG contains a section setting out design <i>principles</i> for new ORFs, it does not seek to introduce very specific design requirements such as that mentioned. Instead, it lists a suite of externally accessed best practice guidance documents to enable applicants to achieve optimal design of new recreation spaces that take account of each site's individual context. Council approval will be sought to update links to the latest guidance post adoption to ensure that guidance remains current. Each development proposal will be duly assessed, with reference to Secured by Design Principles and other best practice as referred to in this SPG. Moreover, the need to safeguard and enhance biodiversity and integrated multi-functional green infrastructure networks is already a key part of the RLDP as detailed within Policy SP3. The strategic site policies (PLA1-5) also reference the need for allocated strategic sites to support opportunities for formal and informal play in addition to community-led food growing. There is already considered to be appropriate adopted policy coverage in these respects.
Resultant Action	No action necessary.
Organisation	Play Wales

Representation	Play Wales recommends that the SPG references the <i>Including Disabled Children in Play Provision</i> Position Statement, from the UK Play Safety Forum and Children's Play Policy Forum, which can be accessed here. You may also be interested in our Creating accessible play spaces toolkit.
Local Planning Authority Response	The LPA has considered the suggestion to include a reference to the <i>Including disabled children in play provision</i> Position Statement and is satisfied that it makes a positive contribution to the SPG. Section 7 (design guidance) of the SPG fully supports the needs of all members of the community in accessing and using ORFs. The SPG already includes a reference to the Play Wales' <i>Creating Accessible Play Spaces</i> toolkit within the SPG. The web-link will be updated.
Resultant Action	Insert a reference to the <i>Including disabled children in play provision</i> Position Statement under the <i>Local Community Needs and Accessibility</i> heading within Section 7.0 <i>Designing Outdoor Recreation Facilities</i> of the SPG. Update web-link to Play Wales' <i>Creating Accessible Play Spaces</i> toolkit under the <i>Design Guidance by Outdoor Recreation Facility Typology</i> heading within Section 7.0 <i>Designing Outdoor Recreation Facilities</i> of the SPG.
Organisation	House Builders' Federation
Representation	The HBF supports paragraph 9.1 – 'The Council will adopt and maintain land as public open space within residential areas, where the primary function of that land is public open space.'
Local Planning Authority Response	The support for the proposed approach is noted.

Resultant Action	No action necessary.
Appendices A & B: Do you have any comments on the Worked Examples?	
Organisation	Pencoed Town Council
Representation	It would be interesting to see the calculations of the required on and off site ORFs, the cost of the contribution and maintenance for 800 dwellings (over 2,000 residents). With just a cursory glance it seems that such costs would be considerably high.
Local Planning Authority Response	Costs and on-site provision requirements would be assessed in accordance with the guidance set out in Section 5.0 of the Outdoor Recreation Facilities SPG. This would be dependent on the nature of provision secured on a site-by-site basis. All on-site/off-site requirements contained within Table 2 are based upon the LPA's experience of historic planning applications. The costs set out in Table 2 are based on up-to-date evidence and reflect real-world examples of the costs of providing typical facilities. The figures were produced on behalf of Bridgend County Borough Council by Landscape Architects at Kirklees Council, who have extensive experience in the design and installation of ORFs. These costs are considered to provide a robust and realistic basis for planning purposes.
Resultant Action	No action necessary.
Do you have any other comments to make on the proposed Outdoor Recreation Facilities SPG?	
Organisation	Pencoed Town Council
Representation	I urge that such guidance takes into account the proposed residential developments to the East of Pencoed as such a development, along with the proposed ORFs calculations in this guidance, would have a significant impact on Pencoed and its infrastructure.
Local Planning Authority Response	Policy COM10, together with the Outdoor Recreation Facilities SPG, is intended to ensure that sufficient outdoor recreation provision is made to support the needs of a growing population. The LPA anticipates that this provision will be delivered either on-site or, where appropriate, within the vicinity of the development. As such, the proposed development is not expected to place additional

	pressure on existing facilities in the town. Instead, new infrastructure will be provided to fully mitigate any potential impacts – subject to the adoption of the SPG prior to the submission of any reserved matters application. Land East of Pencoed will be subject to the requirements of the site-specific Policy PLA4 of the RLDP, which includes requirements for the provision of ORFs on-site. Table 2 contained within the SPG is indicative only and the precise level and type of provision will be refined through the development management process.
Resultant Action	Comments noted and on-site recreation provision at Land East of Pencoed will be assessed against the suite of RLDP policies and refined through the development management process.
Organisation	House Builders' Federation
Representation	The HBF supports paragraph 3.1 (Background) - 'ORFs and spaces can also incorporate Sustainable Drainage Systems (SuDS), into their design which play an important role in reducing the impact of flooding.'
Local Planning Authority Response	The support for the proposed approach is noted.
Resultant Action	No action necessary.

Proposed SPG Changes as a Result of the Consultation

The paragraphs proposed for amendment following the consultation are detailed below, for the reasons explained in the previous table. Strikethrough text is used to indicate proposed deletions from the SPG, whereas blue text is used to indicate proposed additions to the SPG. Only paragraphs proposed for amendment are included below, there are no proposed changes to the remainder of the draft SPG following consultation. The final draft version of the SPG (**Appendix 1**) incorporates the proposed amendments below.

- Insert a reference to the *Including Disabled Children in Play Provision* Position Statement by the Play Safety Forum under the *Local Community Needs and Accessibility* heading within Section 7.0 *Designing Outdoor Recreation Facilities* of the SPG:

7.8 ORFs should be designed to reflect the needs of local communities at different life stages in order to maximise community benefit. Dialogue should be initiated with the community early in the development process, supplemented by use of local health indicators and population profiles to inform the design of ORFs. ORFs should also be designed to promote gender equality and be safe and accessible for all users. Spaces should be appropriately designed to cater for the needs of children with additional learning needs and disabilities. [Particular regard should be given to the *Including Disabled Children in Play Provision Position Statement* by the Play Safety Forum and UK Children's Play Policy Forum when designing new play facilities.](#)

- Update web-link to Play Wales' *Creating Accessible Play Spaces* toolkit under the *Design Guidance by Outdoor Recreation Facility Typology* heading within Section 7.0 *Designing Outdoor Recreation Facilities* of the SPG:

7.12.2 Children's Play Areas (Equipped/Designated Play Areas):

- Play Wales – [Creating Accessible Play Spaces: A Toolkit](#)

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	DRAFT HOUSES IN MULTIPLE OCCUPATION SUPPLEMENTARY PLANNING GUIDANCE
Report Owner / Corporate Director:	CORPORATE DIRECTOR - COMMUNITIES
Responsible Officer:	JACK DANGERFIELD SENIOR STRATEGIC PLANNING POLICY OFFICER
Policy Framework and Procedure Rules:	There is no impact on the Policy Framework or Procedure Rules.
Executive Summary:	The purpose of this report is to seek Cabinet approval to consult on the draft Supplementary Planning Guidance (SPG) 'Houses in Multiple Occupation' document (Appendix 1). Subsequent adoption of this SPG will enable effective implementation of the Houses in Multiple Occupation Policy within the adopted Replacement Local Development Plan, the Council's statutory land-use planning document.

1. Purpose of Report

- 1.1 The purpose of this report is to seek Cabinet approval to consult publicly on the draft '*Houses in Multiple Occupation*' (**HMO**) Supplementary Planning Guidance (**SPG**) document (see **Appendix 1**).

2. Background

- 2.1 The adopted Replacement Local Development Plan ("**RLDP**", March 2024) plays a key role in enabling sustainable, mixed and balanced communities, including development of HMOs. The Town and Country Planning (Use Classes) Order 1987 (as amended) (**Use Classes Order 1987**), now contains a distinction between '*small HMOs*' (Use Class C4, with 3-6 residents sharing basic amenities) and '*large*

HMOs' (Unique Use or '*sui generis*'), with more than 6 unrelated persons sharing basic amenities). Prior to February 2016, planning permission was only required for large HMOs. However, since this date, planning permission is required for all HMOs, whether housing 3-6 or 7 or more unrelated people who do not form a single household. In this context, the meaning of '*small HMO*' under Class C4 as a '*house in multiple occupation*' (but not a converted block of flats), in the Use Classes Order 1987, aligns with and refers to the meaning of "*HMO*" in section 254 of the Housing Act 2004 (**HA 2004**). The meaning of '*single household*' under Class C3(a) dwellinghouses of the Use Classes Order 1987, aligns with section 258 of the HA 2004 which sets out when persons are to be regarded as not forming a *single household* and when a person is considered to be a member of the same family; s258 HA 2004 also applies to HMOs defined under s254 HA 2004, including *small HMO* (Class C4) and *large HMO (sui generis)*. This change in legislation has resulted in greater awareness of HMOs in the context of the planning system.

- 2.2 HMOs can play an important role in the County Borough's housing mix by providing a broader range of accommodation options, particularly for students, young professionals, and those on lower incomes. However, they also raise specific planning challenges. HMOs are often characterised by shorter than average tenancies, leading to higher population turnover, and their occupation by multiple independent adults can increase the intensity of residential use. This, in turn, can lead to increased activity in and around the property, more noise, greater demand for parking, and additional pressures on waste management.
- 2.3 Whilst not every HMO will result in adverse impacts, and in some cases the level of activity may be comparable to that of a large family household, the cumulative effect of high concentrations of HMOs can be significant. These cumulative impacts can include harm to residential amenity, erosion of local character and loss of community cohesion. There is a need to strike a careful balance between supporting housing choice and preventing the over-concentration of HMOs in any given locality. RLDP Policy COM7 specifies criteria to assess the appropriateness of proposals to convert dwellings into HMOs, aiming to avoid over-intensification of the use as an HMO within any given locality.
- 2.4 At their meeting on 8th August 2024, the Development Control Committee requested development of a specific SPG on HMOs to provide additional planning guidance to support adopted Policy COM7. Councillor Simon Griffiths volunteered to champion the production of the HMO SPG and work alongside the Senior Strategic Planning Policy Officer to progress it. The draft HMO SPG attached to this report (**Appendix 1**) represents the culmination of this work.

3. Current situation / proposal

- 3.1 The draft SPG relating to HMOs (**Appendix 1**) aims to provide additional detail on

how adopted Policy COM7 should be interpreted and applied in practice. It is intended to assist both planning applicants and officers by clarifying this Policy's requirements and how proposals will be assessed. The draft HMO SPG also explains the relationship between planning and other regulatory regimes relevant to HMOs, such as Licensing and Building Regulations, highlighting how these other statutory regimes operate alongside, but separately from, the planning system. In doing so, the draft HMO SPG aims to ensure a consistent and transparent approach to managing HMO development, supporting the creation of sustainable, balanced communities throughout the County Borough.

3.2 This draft HMO SPG provides specific guidance on:

- How HMOs are defined in planning terms and when planning permission is required for HMOs;
- The roles of Planning, Licensing and Building Regulations in respect of HMOs;
- Application of the radius test (ensuring that no more than 10% of properties are HMOs within a 50m radius in any given area);
- How the character and appearance of the locality is considered when major extensions or alterations are proposed;
- How the scale and intensity of HMOs will be considered in relation to HMO applications;
- How local parking provision will be considered in relation to HMO applications;
- Amenity considerations (of both future HMO occupants and neighbours); and
- Submission requirements for applicants.

3.3 Prior to seeking Council approval for adoption, the draft HMO SPG will be subject to a public consultation exercise. This will be enabled by utilising the Council's online consultation portal, direct targeting of stakeholders (including all Elected Members and Town and Community Councils), and a social media campaign. Consultation responses will be sought to influence and shape the final version of the HMO SPG. A consultation report will then be presented back to Cabinet, then to Development Control Committee for noting, and finally to Council. That consultation report will document a general summary of comments, the issues raised and the Local Planning Authority's responses, while detailing how those comments have influenced the final version of the HMO SPG. Once adopted, the final HMO SPG will add weight to the interpretation and application of RLDP Policy COM7, provide more

detailed advice to planning applicants and will become a material consideration in the determination of planning applications.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 An initial Equality Impact Assessment (**EIA**) screening has identified that there would be no negative impact on those with one or more of the protected characteristics, on socio-economic disadvantage or the use of the Welsh Language. It is therefore not necessary to carry out a full EIA on this policy or proposal.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The HMO SPG will provide additional guidance and material weight in support of adopted RLDP Policy COM7. The HMO SPG aims to enable development of HMOs while safeguarding residential amenity, community cohesion, and the character of existing neighbourhoods. This is a key contributory factor to delivering Local Well-being Objective One - '*A prosperous place with thriving communities*'.
- 5.2 The HMO SPG will also contribute to the following goals within the Well-being of Future Generations (Wales) Act 2015:
- *A Wales of cohesive communities* - Seeks to prevent the over-concentration of HMOs and promote balanced communities.
 - *A more equal Wales* - Supporting access to affordable and flexible accommodation for individuals and enabling housing options that meet diverse needs.

6. Climate Change and Nature Implications

- 6.1 There are no direct Climate Change or Nature implications from this report, although the HMO SPG will provide additional guidance to enable development of sustainable HMOs that promote active travel opportunities.

7. Safeguarding and Corporate Parent Implications

- 7.1 There are no Safeguarding and Corporate Parent implications from this report.

8. Financial Implications

- 8.1 There are no financial implications arising from this report.

9. Recommendations

- 9.1 It is recommended that Cabinet:

- (a) Approve the draft HMO SPG (**Appendix 1**) as the basis for a public consultation period of 6 weeks;
- (b) Authorise the Corporate Director - Communities and Group Manager - Planning and Development Services to make minor presentational changes, typographical or factual corrections as necessary prior to public consultation; and
- (c) Authorise the Corporate Director - Communities and Group Manager - Planning and Development Services to undertake the public consultation for a period of 6 weeks and to report the results of the public consultation back to Cabinet for approval and then to send the report to Council and seek adoption of the final HMO SPG.

Background documents

None.

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**Bridgend County Borough
Local Development Plan
2018-2033**

**Draft Houses in Multiple Occupation
Supplementary Planning Guidance
September 2025**

Cyngor Bwrdeistref Sirol



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Chapel Street, Bridgend

1.0 Introduction

- 1.1 Houses in Multiple Occupation (HMOs) are generally defined as properties occupied by three or more unrelated individuals, forming more than two households (Welsh Government, Law Wales: Houses in Multiple Occupation). The Local Planning Authority (LPA) recognises the important role HMOs play in contributing to Bridgend County Borough's housing supply by providing flexible and often more affordable accommodation options for a diverse range of residents.
- 1.2 HMOs can indeed provide accommodation for small households who may otherwise be unable to meet their needs in the market and/or require flexibility to move home. They are typically occupied by students, young professionals and those on short-term work contracts.
- 1.3 However, residents of HMOs can often remain in situ for relatively less time than residents of other dwelling houses, meaning areas with significant concentrations of HMOs can witness greater population turnover. Equally, multiple occupation of a house can involve intensification of its residential use, due to a greater number of independent adults residing within the property. In certain instances, this can lead to increased levels of activity in and around the house, greater noise levels, additional demand for car parking spaces and waste disposal issues. Nevertheless, conversion of a single dwelling house into an HMO may not necessarily constitute intensification. For example, a single dwelling house could accommodate an adult couple plus several additional adult children who are set to remain in the parental home for an unspecified period. On this basis, it is normally difficult to demonstrate the degree of impact that an individual property converted to an HMO may have on the character and amenity of its surroundings. However, a high proportion of HMOs can have a much more significant cumulative impact on the character of an area, its residential amenity and also local community cohesion.

1.4 Common perceptions associated with HMOs include:

- Negative changes to the character of an area
- Negative impacts on the amenity of occupants and neighbours through the intensification of uses
- Increased pressure on parking provision
- Waste storage and litter issues
- Anti-social behaviour/crime issues
- The provision of inadequate living conditions for occupiers
- Negative impacts on the physical environment and streetscape.

1.5 While not all of these issues (should they arise) are under the direct control of the LPA, the adopted Replacement Local Development Plan (RLDP) includes Policy COM7: *Houses in Multiple Occupation*. This aims to ensure that proposals to convert dwellings into HMOs are assessed as to their appropriateness in order to avoid over intensification of the use within the locality. This Supplementary Planning Guidance (SPG) provides planning applicants and officials with additional information on how to interpret and apply Policy COM7. This SPG will be taken into account as a material planning consideration when determining planning applications for HMOs.



Morfa Street, Bridgend

2.0 National Policy Context

- 2.1 **Future Wales: The National Plan 2040** – While HMOs are not explicitly referenced within *Future Wales*, it includes high-level planning goals that support their management through local policy, especially in terms of creating sustainable, well-connected, and balanced communities. It includes several *Placemaking Principles* which promote high-quality, inclusive, and sustainable places. LPAs are expected to support mixed and balanced communities, which aligns with the goal of managing concentrations of HMOs to avoid harmful social and/or environmental impacts.
- 2.2 *Policy 2 – Shaping Urban Growth and Regeneration of Future Wales* encourages urban intensification in a way that supports well-being and community cohesion. HMOs, which can increase intensification in urban areas, must be managed carefully to align with this policy.
- 2.3 *Policy 7 – Delivering Affordable Homes of Future Wales* supports diverse housing provision, particularly for those on lower incomes. While privately run HMOs are not classed as ‘Affordable Housing’ for the purposes of the land use planning system, HMOs can provide an affordable market housing option for those otherwise unable to meet their needs in the housing market.
- 2.4 *Policy 9 – Resilient Ecological Networks and Green Infrastructure* indirectly supports the management of the intensification of HMOs, as they can lead to an increase in population densities which can place more pressure on services and green spaces. By managing their distribution, LPAs can support the resilience of ecological networks.
- 2.5 **Planning Policy Wales (PPW) (Edition 12)** sets out the overarching national planning policy for Wales and should be used to guide planning and placemaking at the local level. These policies underpin local planning policies used to guide development.
- 2.6 PPW emphasises the need to promote sustainable development and support the well-being of people and communities across Wales, such as by ensuring that a range of housing types are delivered to support a diverse population

and a range of housing needs. PPW also promotes the creation of cohesive and balanced communities.

- 2.7 While HMOs are not specifically referred to within PPW, it underscores the need for LPAs to ensure that housing developments contribute to balanced communities and meet the diverse needs of the population. This includes providing a range of housing types and tenures to accommodate different household sizes and compositions.



3.0 Background

- 3.1 The preparation of this SPG is driven by several interrelated factors. These include the projected rise in single-person households and persistent housing affordability issues, both of which are increasing demand for shared housing across many parts of the UK. While Planning, Licensing and Building Regulations each serve distinct legal purposes, they all contribute to the regulation of HMOs and work best when aligned. Applicants often face challenges in navigating the interplay between these regimes. This SPG aims to provide local interpretation, clarification, and practical guidance on the implementation of HMO-related planning policy – specifically Policy COM7 of the RLDP. It is intended to support both applicants and planning officers in applying this policy consistently and transparently, while reinforcing the LPA’s wider housing and placemaking objectives.
- 3.2 Although the number of planning applications for HMOs in Bridgend County Borough has remained relatively low over the past five years – averaging approximately 5 per year – the issue has gained greater prominence following legislative change in February 2016. The Town and Country Planning (Use Classes) (Amendment) (Wales) Order 2016 (“**Wales Order 2016**”) created a new C4 Class covering HMOs occupied by 3-6 unrelated persons. Therefore, the Town and Country Planning (Use Classes) Order 1987 (as amended) (**Use Classes Order 1987**) now contains a clearer distinction between small HMOs (Use Class C4) and large HMOs (Unique Use), with implications for when planning permission is required. Prior to February 2016, planning permission was only required for large HMOs. However, since this date planning permission is required for all HMOs whether housing 3-6 or 7 or more unrelated persons. As a result, and in anticipation of potential future growth in HMOs, it is considered timely and appropriate to provide SPG to guide decision-making. This guidance will ensure that any new HMO development supports well-balanced, inclusive communities, avoids harmful over-concentrations, and contributes positively to the County Borough’s long-term placemaking aspirations.

4.0 Planning Framework

- 4.1 The RLDP sets the framework to provide an appropriate and sustainable supply of housing land to deliver inter-connected, balanced communities that form the basis for individuals and families to prosper in all aspects of their lives. The strategic planning framework is set out within Strategic Policy 6: Sustainable Housing Strategy (SP6), which is supported by Development Management Policies COM1 – COM7:

SP6: Sustainable Housing Strategy

COM1: Housing Allocations

COM2: Affordable Housing

COM3: On-Site Provision of Affordable Housing

COM4: Off-Site Provision of Affordable Housing

COM5: Affordable Housing Exception Sites

COM6: Residential Density

COM7: Houses in Multiple Occupation

- 4.2 Policy COM7 provides specific policy criteria to assess HMO proposals throughout Bridgend County Borough. It considers whether the cumulative concentration, scale and intensity of such proposals may have a net impact upon the broader locality's existing residential amenity, character and appearance. The aim of the policy is to enable HMOs to be developed in a manner that enables cohesive communities, while protecting local character and amenity.
- 4.3 This SPG will be used as a material consideration to support the application of Policy COM7. It will assist in the determination of any planning application for the conversion of a single dwelling (Use Class C3) or a non-residential property to an HMO, or the intensification of use of a 'C4' property (small HMO with 3-6 unrelated residents) to a 'Unique Use' (more than 6 unrelated persons sharing basic amenities) large HMO.

5.0 HMO Definitions and Regulatory Context

- 5.1 This section provides an overview of how HMOs are defined and regulated, setting out the distinctions between planning definitions, licensing requirements, and building regulations, while clarifying how these different regimes interact.

HMOs in Planning Terms

- 5.2 HMOs can be defined as residential dwellings with three or more people from two or more different families living together (i.e. not a '*single household*') and sharing one or more basic amenity (i.e. kitchen, bathroom, or toilet). The Town and Country Planning (Use Classes) Order 1987 (as amended by the Wales Order 2016) classifies HMOs into two types:

- **A small HMO:** Use Class C4 – small HMOs are shared houses or flats occupied by between three and six unrelated individuals, as their only or main residence, who share basic amenities, such as a kitchen or bathroom; or
- **A large HMO:** 'Unique Use' – large HMOs are buildings occupied by more than six unrelated individuals, as their only or main residence, who share basic amenities, such as a kitchen or bathroom. These are unclassified by the Use Classes Order and are therefore considered to be a Unique Use (a use of its own kind or '*sui generis*').

- 5.3 For planning purposes of determining whether occupants of a property form a '*single household*' or an '*HMO*', the relevant meanings in the Use Classes Order 1987 and the Housing Act 2004 (**HA 2004**), apply. The meaning of '*small HMO*' under Class C4 as a 'house in multiple occupation' (but not a converted block of flats), in the Use Classes Order 1987 (as amended), aligns with and refers to the meaning of "*HMO*" in section 254 of the HA 2004. The meaning of '*single household*' under Class C3 of the Use Classes Order 1987 (as amended) aligns with section 258 of the HA 2004 which sets out when persons are to be regarded as not forming a single household for the purposes of s254 HA 2004 ('house in multiple occupation'), and when a

person is considered to be a member of the '*same family*', or fall within a description specified by regulations made by the appropriate national authority. For these purposes, section 258 (3) HA 2004 provides that a person is a member of the '*same family*' as another person if:

- a. those persons are married to, or civil partners of, each other or live together as if they were a married couple or civil partners;
- b. one of them is a relative of the other; or
- c. one of them is, or is a relative of, one member of a couple and the other is a relative of the other member of the couple.

5.4 As mentioned above (paragraph 3.2), Use Class C4 was introduced in Wales in 2016. A change of use from Use Class C4 to Class C3 (dwellinghouses) is permissible without obtaining planning permission. However, planning permission is required in each of the following scenarios:

- A change of use of any building (including from Use Class C3) to either a small (Use Class C4) or large (Unique Use) HMO.
- An increase in the size of an HMO from a small HMO (C4) to a large HMO (Unique Use). For example, if a small HMO containing 6 people was to increase in size for the occupation of one additional resident. The same applies in reverse - the change of use of a large HMO (Unique Use) to either a small HMO (C4) or a dwelling (C3) will require planning permission.
- External alterations or extensions to existing HMOs which are not permitted development.

Exclusions

5.5 While the definition of an HMO generally relates to properties occupied by three or more unrelated individuals sharing basic amenities, there are several types of residential arrangements that are typically not considered HMOs for planning purposes. These include:

- Owner-occupied properties with up to two lodgers – Where a resident landlord lives in the property and rents out rooms to no more than two lodgers, this is usually considered a single household and not an HMO.
- Children’s homes or supported accommodation for children – Properties where children live under care arrangements (often registered children’s homes), which fall under Use Class C2.
- Residential care homes or supported housing for people in need of care – Also within Use Class C2, these include homes for elderly people, disabled people, or others receiving care.
- Purpose-built student accommodation (PBSA) – Self-contained developments designed specifically for students are not usually classed as HMOs.
- Properties occupied by a single household – A group of people who live together as a single household (e.g. A family) are not considered to live in an HMO.

Mandatory Licensing for HMOs

- 5.6 The planning system is one of several regulatory regimes applying to HMOs. Properties may also require a mandatory licence under the Housing Act 2004 and need to comply with building regulations. These regimes are separate, with distinct criteria – approval under one does not imply approval under another. However, Shared Regulatory Services (SRS), who oversee the licensing and management HMOs in Bridgend County Borough, should be consulted on planning applications for HMOs to ensure alignment between planning and housing enforcement considerations.
- 5.7 The Housing Act 2004 mandates licensing for certain types of HMO to ensure they meet certain health and safety standards. In Wales, mandatory licensing applies to HMOs that:
- Are occupied by five or more individuals forming two or more households;
 - Comprise three or more storeys; and
 - Share basic amenities like kitchens or bathrooms.

- 5.8 Licences usually last five years, though shorter terms may be issued if concerns exist about management. Licensing ensures the property meets standards for safety (e.g. fire precautions), has appropriate occupancy levels, and is adequately managed. Conditions may be attached to reduce negative impacts on the wider area. Beyond mandatory licensing, there is no additional or selective licensing in place for HMOs across Bridgend Country Borough.
- 5.9 A two-and-a-half storey property with a dormer extension would typically be regarded as a three-storey building for the purposes of mandatory HMO licensing.

Fit and Proper Persons Test

- 5.10 Licence holders and managers must be deemed 'fit and proper persons', with no relevant convictions (e.g. fraud, violence, sexual offences, housing law breaches), and must demonstrate competency to manage an HMO.

Management Regulations

- 5.11 Managers must comply with the Management of Houses in Multiple Occupation (Wales) Regulations 2006, and, where applicable, the 2007 Additional Provisions Regulations. These impose duties including:
- Providing information to occupiers;
 - Taking fire and general safety measures;
 - Maintaining water, gas, electricity supplies;
 - Keeping common parts, fittings, and appliances in good order;
 - Maintaining living accommodation; and
 - Providing proper waste disposal.
- 5.12 Failure to comply is a criminal offence, with fines of up to £20,000 on conviction.



Pant Hirwaun, Heol y Cyw

Inspections and Health & Safety

5.13 Before issuing a licence, SRS inspect the property to assess licence conditions and housing standards under the Housing Health and Safety Rating System (HHSRS). This assesses 29 hazards, each weighted to determine whether a property has:

- **Category 1** (serious hazards); or
- **Category 2** (less serious hazards).

5.14 Local authorities must act where Category 1 hazards are found, and landlords are required to address all identified risks.

Operating Without a Licence

5.15 Running a **licensable HMO** without a licence is a criminal offence, as is failing to comply with licence conditions, both subject to significant penalties. The application process is managed by SRS (for further information refer to the [Licensing of HMOs Guidance Note](#)).

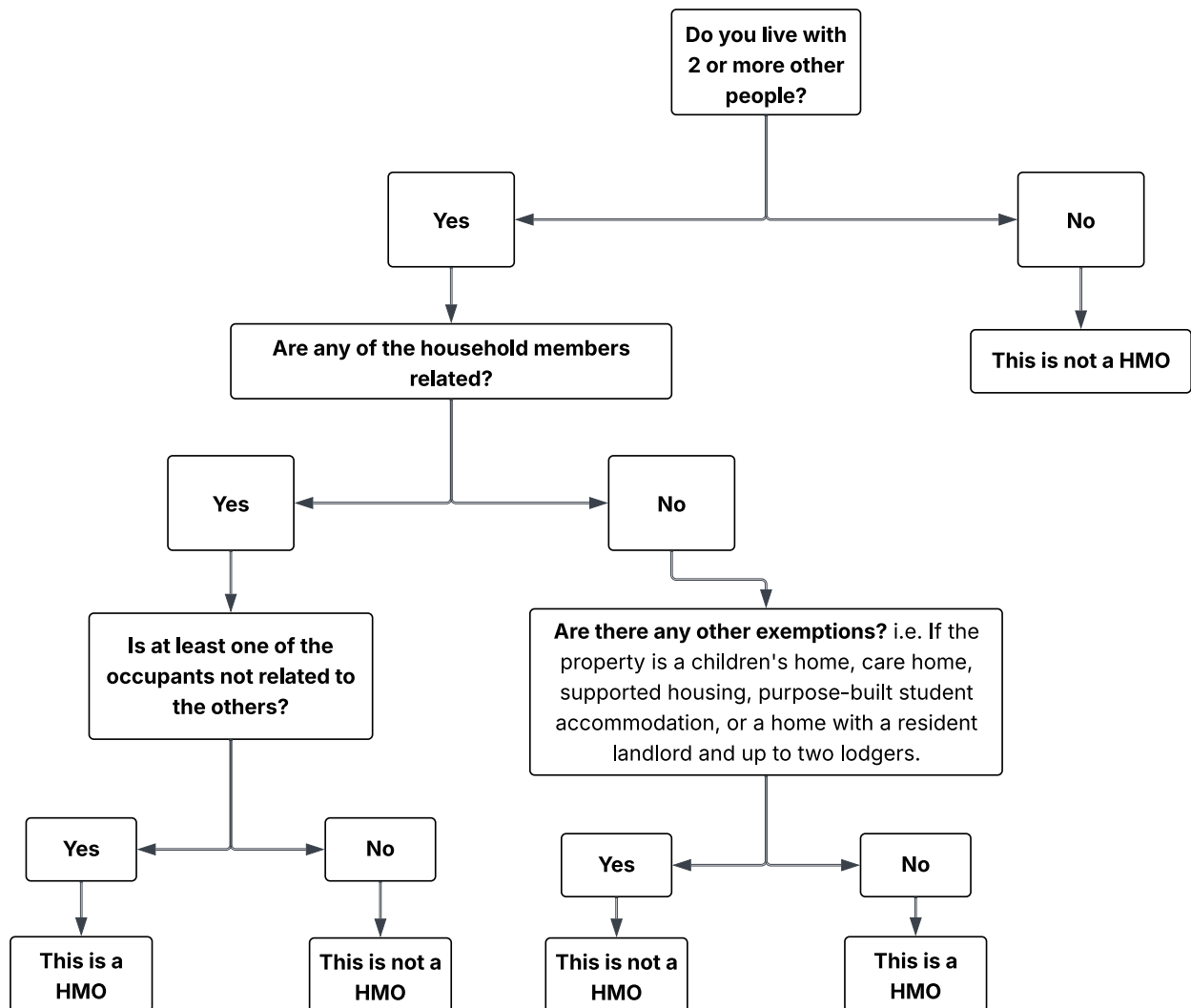
Homelessness (Suitability of Accommodation) (Wales) Order 2015

- 5.16 Shared accommodation provided to homeless households in priority need must meet the standards set out in the Homelessness (Suitability of Accommodation) (Wales) Order 2015. Under Article 2 of the Order, where the accommodation is an HMO, it must be licensed where required and meet relevant HMO standards. This ensures that individuals are not placed in unsuitable or substandard housing.

Building Regulations

- 5.17 An existing house converted to an HMO can still be a 'dwellinghouse' and would not require separate Building Regulations approval if it is to be occupied by people who share a tenancy, share the bills and where the property does not have any locks on the bedroom doors.
- 5.18 However, where the HMO is occupied by people with separate tenancies and proposes to have locks on doors, this would then be classed as 'rooms for residential purposes'. This would constitute a material change and require building regulations approval.
- 5.19 Any other type of change of use to an HMO would require a Full Plans Building Regulation application, and be expected to install the following before occupation:
- Emergency Lighting
 - Fire Safety Signage
 - Fire Doors throughout (self-closing where applicable)
 - Fire Detection throughout building
 - Protected Corridor to final exit.
- 5.20 A statutory consultation with South Wales Fire Service will also be required. The application process is managed by Building Control (for further information see the [Building Control section of the Council's website](#)).

Figure 1: Do I Live in an HMO?



6.0 Planning Requirements

- 6.1 This section provides further guidance on each of the criteria set out in Policy COM7 of the RLDP. It is intended to support applicants and decision-makers by clarifying how the policy should be interpreted in the context of proposals for HMOs, and by outlining key considerations to be addressed through the planning process. A list of documents the LPA would typically expect to be submitted when making a planning application for an HMO can be found in Appendix A.

Policy COM7: Criterion 1

'It would not lead to more than 10% of all residential properties within a 50m radius of the proposal being HMOs.'

- 6.2 All proposals for a change of use from a single dwelling to an HMO will be subject to the 'radius test'. The Welsh Government's Housing in Multiple Occupation: Review & Evidence Gathering report found that local concerns regarding the number of HMOs increases once concentrations of HMO households rise above 10%. Such concentrations have the potential to cause negative amenity impacts upon existing residents including the potential for increased levels of disturbance associated with multiple households within a property. These factors combined with a reduction in the number of family homes within an area can inhibit the maintenance of sustainable, mixed and balanced communities.
- 6.3 Any proposal that would lead to more than 10% of all residential dwellings being HMOs within a 50m radius would be contrary to Policy COM7 and deemed unacceptable, unless overriding material considerations demonstrably outweigh concerns over concentration.
- 6.4 To ascertain whether a proposal complies with this policy criterion, a circle with a 50m radius should be drawn around the central point within the property's red line boundary to show all properties falling within this area. Only those properties whose centre point (that is the most central point within a property's red line boundary) falls within the circle should be included within

the calculation. A calculation of the proportion of HMOs as a percentage of all residential units within the 50-metre radius should then be made as detailed in paragraph 6.2.5. For subdivided properties or purpose-built apartment blocks, each individual self-contained unit (whether resulting from a subdivision or located within an apartment block) will be counted as a single dwelling.

- 6.5 In order to identify existing properties in HMO use, the LPA will utilise data held on the number of existing HMOs within the proposal's vicinity. This will include any previous planning consents combined with any current HMO licenses. The applicant or any objectors may supplement or challenge such data held by the LPA. However, satisfactory evidence must be provided to support any such claims.
- 6.6 To calculate the percentage of HMOs within a specific area, the following formula should be used:

$$\text{HMO concentration} = \frac{\text{Number of HMOs within 50m radius}}{\text{Number of residential properties within 50m radius}} \times 100$$

The answer to this equation should be rounded to the closest integer i.e. 9.5% should be rounded up to 10%, or 9.4% should be rounded down to 9%.

- 6.7 To determine the appropriate denominator, all residential dwellings that fall within a 50m radius that are categorised as either Use Class C3 (dwellinghouse), C4 (small HMO) or 'Unique Use' (large HMO), must be included within the calculation. Figure 2 shows an example of how the radius test should be applied to an application for an HMO to ascertain whether it complies with Policy COM7.

Figure 2: Application of 50m Radius Test



Mill Meadow, North Cornelly

Bridgend Local Development Plan 2018-2033
Houses in Multiple Occupation Supplementary Planning Guidance

Policy COM7: Criterion 2

‘Conversion is possible without major extensions or alterations to the building which would significantly alter the character and appearance of the street scene and the broader locality.’

- 6.8 It is recognised that the majority of conversions to HMOs will require minimal alterations to their external appearance. However, any alterations should be well integrated with the existing street patterns, historic context, urban layout and landscape features of the surrounding area, while having regard to the size and character of the property and wider street scene.
- 6.9 Extensions to an HMO to create additional bedrooms would not constitute creation of a new HMO or add to the concentration of HMOs in a locality. However, any increase in the number of residents can have an impact on the character of an area and amenity of neighbouring occupiers. These types of planning applications will be assessed on a case-by-case basis. In such cases, careful consideration will be given to the proposal’s impact upon the locality’s amenity, character and appearance. Impact on adjoining properties and public spaces, such as by way of loss of light, privacy or proposals being visually overbearing, will be duly considered. Proposals should also consider how the building interacts with pavements or other public spaces.
- 6.10 If floor levels are altered, the impact on the appearance of the property from street level should be considered. When larger rooms are split into two separate rooms, the applicant should ensure that any new windows align with the divided room. A new dividing wall that intersects the middle of a traditional bay window will not usually be acceptable.
- 6.11 The entrance and approach to an HMO is an important part of how it functions in relation to its surroundings. When HMOs are accessed from side or rear entrances, this can cause amenity issues for neighbouring residents, as well as have an impact on the visual appearance of the street scene. Entrances designed to be visible from the street are considered optimal.

- 6.12 The provision of on-site car parking or secure cycle storage, where required to support an HMO conversion, will not generally be considered to constitute a major extension or alteration to the building. Such works are typically modest in scale and, where appropriately designed, do not significantly alter the character or appearance of the street scene or wider locality. Each case will be assessed on its individual merits, but this SPG assumes that proposals of this nature can ordinarily be accommodated within the scope of the policy criterion.

Permitted Development Rights (PDRs) and HMOs

- 6.13 Once planning permission has been granted for a property to operate as a HMO, some PDRs may still apply, depending on the type of HMO. In Wales, small HMOs (Use Class C4) are generally treated as “dwellinghouses” for the purposes of the Town and Country Planning (General Permitted Development) Order 1995 (as amended) (GPDO). This means that most householder PDRs, such as certain extensions, loft conversions, and outbuildings, can still apply, subject to the usual limitations and conditions.
- 6.14 However, larger HMOs (Unique Use) and are not considered dwellinghouses under the GPDO. As a result, PDRs that apply to dwellinghouses do not usually extend to large (Unique Use) HMOs.
- 6.15 When granting planning permission, the LPA may apply a planning condition that requires the HMO to be limited to a maximum number of occupants at any one time. This will typically relate to the number of bedrooms in accordance with the internal layout indicated on the approved floor plans. A further planning condition may be applied to remove the owner’s PDR for an HMO on a case-by-case basis.

Converting Non-Residential Buildings to HMOs

- 6.16 Proposals to convert non-residential buildings to HMOs that include extensions and/or external alterations will be considered on their own merits against the policies in the RLDP. Such proposals should, however, be in

keeping with the existing form and character of the building and preserve the character of the wider street scene.

HMOs, Listed Buildings and Conservation Areas

- 6.17 Owners of listed buildings converted to HMOs are required to gain listed building consent for any alterations or extensions (internal or external) that may affect its character. The LPA recommends that applicants seek guidance from the Historic Buildings Conservation Officer before submitting an application for such a scheme. The LPA, when considering whether to grant planning permission for development that affects a listed building, has a statutory duty to “have special regard to the desirability of preserving the building or its setting or any features of architectural or historic interest that the building possesses” (Section 66 of the Planning (Listed Buildings and Conservation Areas) Act 1990). PPW (Edition 12, p.130) sets a ‘general presumption in favour of the preservation or enhancement of a listed building and its setting, which might extend beyond its curtilage’.
- 6.18 Proposals for HMOs located within or affecting the setting of conservation areas should demonstrate how they will preserve or enhance the special character and appearance of the area. As conservation areas are designated for their special architectural or historic interest, development proposals must be informed by a heritage impact assessment in accordance with Policy *SP18: Conservation of the Historic Environment* of the RLDP. Any physical alterations, intensification of use, or changes to the character of a property arising from HMO conversion should be sensitive to the historic and architectural context. The LPA will resist proposals that fail to respect the distinctive character, appearance, and setting of the conservation area, in line with national best practice and relevant legislation, including the Historic Environment (Wales) Act 2016.
- 6.19 Careful consideration should be given to retrofitting insulation and installing solar photovoltaics in/on HMO buildings in addressing energy consumption. Traditional buildings require the ability for moisture evaporation off surfaces and insulation can be damaging to the building fabric. Advice from the

Council's Conservation and Design Team can highlight practices that avoid harmful installations and that damage architectural character.

- 6.20 The LPA recommends obtaining pre-application conservation advice for proposals relating to Listed Buildings / buildings in Conservation Areas as well as key historic buildings that form part of the historic landscape. These may include former chapels / welfare halls / vacant traditional buildings, etc. Guidance on managing change and energy efficiency measures relating to the historic environment is also available and should be used to inform proposals relating to buildings of traditional construction. When preparing proposals, developers are encouraged to seek advice from a heritage specialist with experience of working on historic buildings.

Policy COM7: Criterion 3

'The scale and intensity of use would be compatible with the existing building and adjoining and nearby uses'.

- 6.21 While it important to manage the number of HMOs within a particular area, intensification of individual HMOs can adversely impact the existing building and adjoining and nearby uses. Planning permission will need to be sought to increase the size of an HMO from between three to six people (Use Class C4) to seven or more people (Unique Use). All planning applications for HMOs must not only be assessed against Policy COM7 and this SPG, but also against *Policy SP3: Good Design and Sustainable Placemaking*. Policy SP3 sets out broader requirements relating to design quality and the character of development in relation to its surroundings.

Intensification of Use and Impact on a Neighbourhood's Character

- 6.22 Proposals for new, or the intensification of existing HMOs, should have regard to the size and character of the property, as well as of the wider street scene (opposite and adjacent uses, in particular). Each proposal will be assessed on a case-by-case basis, but the net gain in the number of occupants should not be unduly excessive in nature.
- 6.23 The proposal's impact on the amenity of local residents, the character and appearance of the street scene, and highway safety will be assessed at the

point of application. To enable the LPA to fully assess the HMO's compatibility with the existing building and neighbouring uses, the applicant is required to submit floor plans which provide a clear indication of the proposed room uses, including bedrooms, communal spaces and location of any opening windows. Plans for bedrooms must also indicate the maximum number of occupants. Potential impacts on residential amenity will be assessed by considering elements such as visual impact, loss of light, overlooking, privacy, disturbance and likely traffic movements.

- 6.24 When assessing planning applications for changes of use to HMOs, it is important to distinguish between perceived impacts based on the previous occupants and the lawful planning use of the property. The planning system does not control who occupies a dwelling, but rather how it is used. For example, a property lawfully used as a single dwellinghouse (Use Class C3) may be occupied by a couple or by a large family of adults without requiring planning permission. As such, assessments of impact must be based on the potential lawful use under current planning controls, not the specific nature of past occupants. Proposals for HMOs should therefore be judged against a baseline of the established planning use and whether the proposal would result in a material change in the character or impact of the use in planning terms, rather than who previously lived at the property.

Compatibility of Uses

- 6.25 HMOs must be compatible with nearby uses. For example, an HMO would not be deemed acceptable if located in the middle of an industrial estate, as this would be contrary to other policies in the RLDP. In particular, applications for the conversion of commercial buildings to HMOs should consider the nature of adjacent and nearby uses and the degree to which they are compatible with a residential property. For example, a proposal for a new HMO adjoining a commercial premises should be able to provide outdoor amenity space without adversely impacting upon the servicing and security of the neighbouring business.

- 6.26 Typically, planning permission is not required for internal alterations to an HMO, unless the building is listed, the alterations significantly impact the building's external appearance or involve structural changes affecting fire safety, escape routes, or load-bearing walls. Proposals to convert communal areas (i.e. a sitting room into an additional bedroom) may require planning permission if they result in a material change of use. This could be due to the resulting change in character, impact on residential amenity, increase in the number of occupiers, and/or parking pressures.

HMOs in Flood Risk Areas

- 6.27 In areas at risk of flooding, the potential intensification of residential use associated with HMO development may exacerbate local flood risk or pose risks to future occupants. Proposals for HMOs in flood risk areas should demonstrate that flood risk is adequately addressed in accordance with national guidance (e.g. Technical Advice Note 15). Applicants may be required to submit a Flood Consequences Assessment. The LPA may resist intensification of use through HMO development where it would lead to unacceptable environmental pressures.

Policy COM7: Criterion 4

'The proposal incorporates on-site parking provision or demonstrates that it will not have an adverse effect on local parking provision'.

- 6.28 Parking is a frequently raised concern in relation to HMOs. However, the nature of car ownership and demand for parking spaces can vary depending on location, resident profile, and site-specific factors. Importantly, the conversion of a property to an HMO does not automatically result in increased parking demand; in many cases, HMOs can have lower levels of car ownership than traditional family homes.
- 6.29 All applications for HMO proposals must include details of the proposed parking provision. The appropriate level of provision will be assessed by the LPA based on the following considerations:
- The availability and suitability of parking within the curtilage of the property;
 - The sustainability of the site in relation to proximity to services and amenities;
 - Access to public transport, bus stops and active travel routes (e.g. walking and cycling infrastructure);
 - The availability of existing on-street parking in the surrounding locality; and
 - A comparison of the likely parking demand of the proposed HMO with that of the existing use.
- 6.30 Proposals in localities with good access to commercial centres, public transport and active travel routes could negate the need for any additional parking generated by a net increase in people.

Methodology for Assessing Parking Impact

- 6.31 Applicants are required to assess the potential impact on local parking provision using the methodology set out in Appendix C. This methodology enables a proportionate, consistent approach to assessing whether additional parking demand would result in adverse impacts on the surrounding area. A

summary checklist is also included in Appendix C to guide applicants through the assessment process.

Design Requirements for On-Site Parking

6.32 Where on-site parking is proposed, the following principles apply:

- Provision within the curtilage of the property is preferred, where feasible.
- Parking layouts should:
 - Complement the residential character of the area; and
 - Avoid dominating the frontage or detracting from the building's entrance and approach.
- Tandem parking is not acceptable for HMOs.
- Each parking space should be independently accessible – vehicles should be able to enter and leave each space without needing to move others.
- Parking provision should comply with the latest Bridgend Parking Standards SPG.
- As Policy *PLA11: Parking Standards* of the RLDP states, consideration must be given to electric and Ultra Low Emission Vehicles.
- Schemes that provide on-site parking by sacrificing amenity space are unlikely to be acceptable.
- Where front gardens are converted into parking, paving materials used should be permeable or porous.

6.33 It is noted that off-street parking for existing dwellings may relieve existing on street parking pressures and better enable residents to charge an electric vehicle.



Newcastle Hill, Bridgend

Policy COM7: Criterion 5

'The proposal includes adequate storage for recycling/refuse, cycles and a clothes drying area'

Bicycle Storage

- 6.34 HMOs should provide secure, covered and accessible bicycle storage within the curtilage of the property and on the ground floor. As a general rule, a minimum of one bicycle parking space per bedroom will be required, reflecting the likelihood that each occupant is an independent adult with their own transport needs. This standard supports active travel, aligns with the Active Travel (Wales) Act 2013, and can help reduce pressure on car parking provision. The LPA may consider a reduced standard in exceptional circumstances. These include where it can be robustly demonstrated that demand will be lower, or where storage can be provided outside the curtilage of, yet in close proximity to the property. However, lack of bicycle storage may result in refusal of planning permission due to amenity, accessibility or sustainability concerns.
- 6.35 Plans submitted with the planning application should clearly identify where proposed bicycle storage is located. Corridors and landings should not be used for storing bicycles and storage areas will need to be sensitively designed to ensure their regular use does not have an adverse impact on the amenity of residents.
- 6.36 The LPA may use planning conditions to ensure the provision of secure cycle storage for residents of HMOs.

Refuse and Recycling Storage

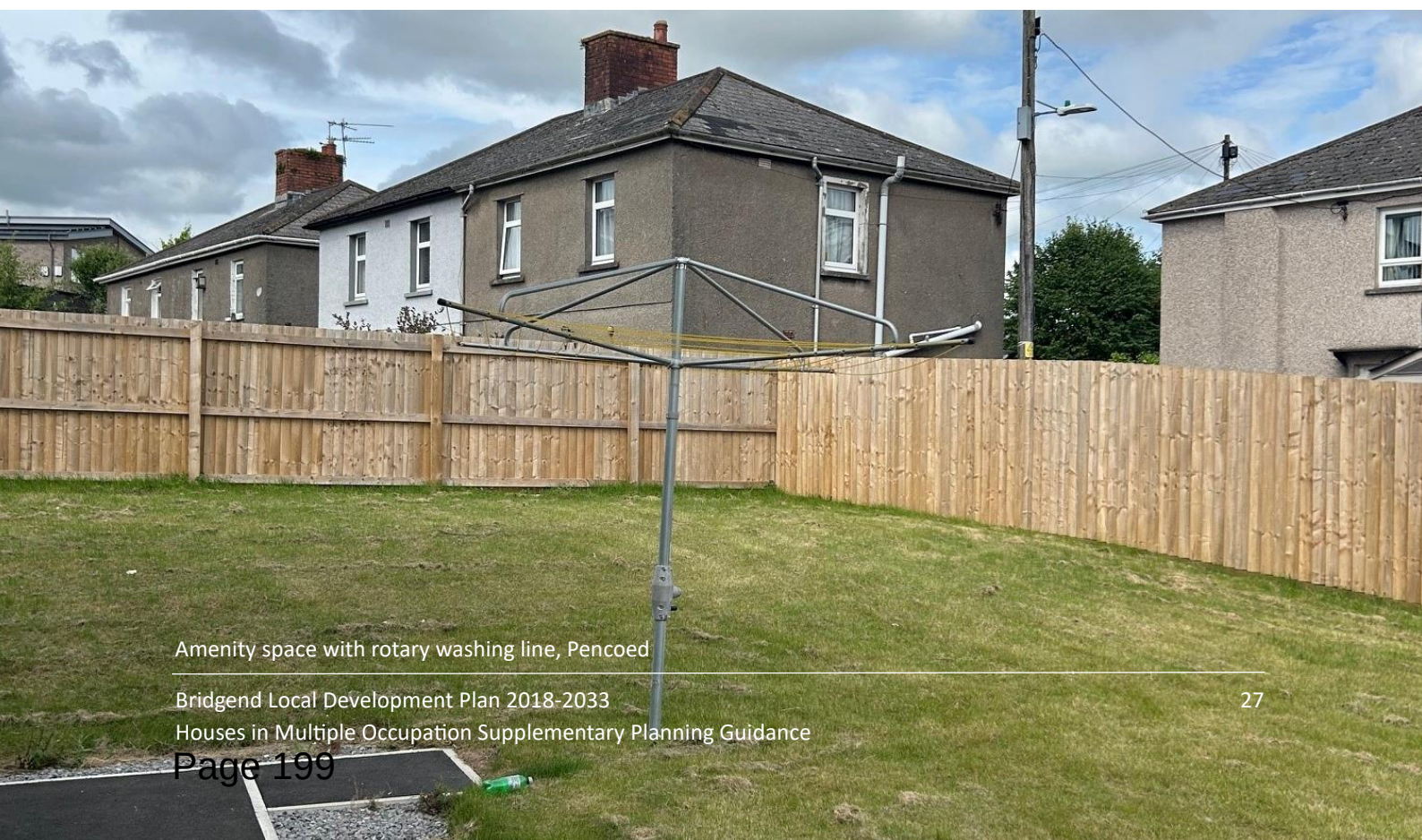
- 6.37 All proposals will be required to incorporate adequate provision for the secure storage of refuse and recycling materials. This should be separate to any amenity space or clothes drying areas provided for residents, and away from view from street level, wherever possible. The location, design and size of external bin storage areas should be suitable for such as use and should not detract from the character of the locality. Where possible, bins should be

stored to the side or rear of the property. Unimpeded access should be provided to these facilities in a manner that enables occupants to freely move refuse and recycling to the front of the property ready for collection. If the only option is to store refuse and recycling at the front of the property, suitable screening should be provided. All waste and recycling storage areas should be clearly identified on plans submitted with the planning application.

- 6.38 Provision for waste facilities in new build HMOs must comply with Policy ENT15: Waste Movement in New Development in the RLDP.

Clothes Drying Area

- 6.39 A dedicated external area (containing either a rotary or washing line) for clothes drying is recommended in order to reduce the risk of damp and mould forming indoors. Where only internal drying provision is possible, the space provided should be well and securely ventilated, adequately sized for the number of occupants and separate from communal living areas, such as kitchens, bathrooms, or sitting rooms. It should be capable of being heated and enclosed (e.g. with a closable internal door) to prevent condensation spreading to other parts of the property. The clothes drying area must be clearly defined on the submitted plans. Consideration should be given to providing a dryer/washer-dryer for tenants to use.



Amenity space with rotary washing line, Pencoed



Covered bin storage unit, Bridgend

Policy COM7: Criterion 6

‘The proposed development would not have an unacceptable adverse impact on residential amenity.’

6.40 In assessing whether a proposed HMO would have an unacceptable adverse impact on residential amenity, consideration should be given to the potential effects on both the occupants of the HMO and neighbouring properties. Residential amenity includes factors such as:

- Noise and disturbance;
- Privacy;
- Access to natural light and outlook; and
- Adequacy of internal and external amenity space.

6.41 In the context of HMOs, where accommodation is often intensified and shared, it is particularly important to take a wider view of residential amenity that includes the health, safety and well-being of occupants. RLDP Policies *SP3: Good Design and Sustainable Placemaking* and *SP8: Health and Well-*

being set out key criteria for ensuring that development supports people's health and well-being.

- 6.42 Internal floor dimensions of living spaces are considered an important element of maintaining appropriate amenity standards and providing for healthy and attractive environments. This applies to both new buildings and conversions. For example, the conversion of existing buildings to HMOs should not result in over-intensive residential use that would give rise to cramped living conditions and/or rooms with insufficient windows. To ensure proposals do not have an unacceptable adverse impact on residential amenity, applicants should seek to ensure appropriate room sizes, and the SRS licensing standards attached at Appendix B can be used as a guide in these respects.
- 6.43 SRS also require a readily accessible bathroom/shower room be not more than one floor away from each bedroom, and that the number provided supports the number of occupants. Minimum standards are also provided for Water Closets (WCs). The LPA regards these standards as best practice and therefore applicants are encouraged to apply the same standards for all HMOs, regardless of size. Refer to Appendix B.

Outdoor Amenity Space

- 6.44 HMOs should provide outdoor amenity space in which residents can relax. Amenity spaces provided should be an appropriate size for the number of occupants and accessible to all residents at all times. They should be separate to space used for activities such as clothes drying and storing refuse/recycling and bicycles. The retention of existing gardens is recommended to support biodiversity, for amenity value and to help reduce surface water flooding.

Protecting the Amenity of Neighbouring Uses

- 6.45 In line with Policy SP3 of the RLDP, HMOs must be designed to avoid unacceptable adverse impacts on the amenity of neighbouring occupiers. Proposals should prevent overlooking, overshadowing, and the creation of adverse microclimatic conditions through careful site layout and design.

HMOs Above/Adjoining Commercial Premises

- 6.46 If a proposal for an HMO adjoins a commercial premises, amenity space should be provided to minimise disturbance due to noise. HMOs above shops or other commercial premises should have their own separate entrance to the street frontage.

Material Considerations

- 6.47 Planning decisions must be based on land use impacts and material planning considerations, not the identity or personal characteristics of future occupants. It is not appropriate, or lawful, to refuse planning permission for an HMO on the basis of assumptions about who may live there, including concerns about perceived behaviour, lifestyle, or potential for criminal activity. For example, it would not be acceptable to oppose an HMO application on the grounds that:
- The property may be occupied by students, young people, or the unemployed, and that this could lead to anti-social behaviour;
 - There is a belief that future residents may not 'fit in' with the surrounding community; or
 - There are generalised fears that HMOs lead to crime without evidence of a land-use impact.

Appendix A – Submission Requirements for Applicants

- Application form
- Site location plan
- Block plan of the site
- Existing and proposed floor plan, including internal floor areas for each room – floor plans should clearly identify proposed room uses, including bedrooms, communal spaces and the location of any opening windows. It should be indicated what each room will be used for and how many people in each room. For bedrooms, the plans must also indicate the maximum number of occupants. Also, the location of bedrooms in relation to communal areas must be clear.
- Details of waste and recycling
- Details of bicycle parking
- Details of external amenity space
- Details of drying space
- Elevation plans where any extensions or new openings such as windows and doors are proposed
- Supporting statement including details of proposed parking provision (car and bicycle)
- Any supporting evidence; for example, parking surveys, information about local parking provision, etc.

Appendix B – HMO Licensing Standards

While these standards are not planning standards and cannot be imposed or enforced as such, the LPA recommends use of these licensing standards as a 'best practice' guide to ensure appropriate room sizes and amenity standards in HMOs.

Part One: HMO Space Standards

Space Requirements for Shared Accommodation with Shared Facilities

(includes the kitchen, lounge, bathroom, and toilet)

Table 1: Bedroom Space Standards

Room	Size	Configuration	Space Requirements
Bedroom(s)	Single	With separate lounge	6.5m ²
		Without separate lounge	10m ²
	Double	With separate lounge	10m ²
		Without separate lounge	15m ²

Table 2: Kitchen Space Standards

Room	Number of Occupants	Space Requirements
Kitchen	1-2 person/s	5.5m ²
	3-6 persons	7m ²
	7-10 persons	10.5m ²

Space Requirements for Self-Contained Accommodation

(exclusive use of own facilities)

Table 3: Self-Contained Accommodation Space Standards

Accommodation Type	Number of Rooms	Configuration	Space Requirements
Single Bedsit/Flat	One room	Lounge/Kitchen/Bedroom	13m ²
Double Bedsit/Flat			15m ²
Single Bedsit/Flat	Two rooms	Lounge/Kitchen	10m ²
		With separate bedroom	6.5m ²
Double Bedsit/Flat		Lounge/Kitchen	13m ²
		With separate bedroom	11m ²
Single Bedsit/Flat	Two rooms	Lounge/Bedroom	10m ²
		With separate kitchen	5.5m ²
Double Bedsit/Flat		Lounge/Bedroom	15m ²
		With separate kitchen	5.5m ²

Part Two: HMO Amenity Standards

Bathroom and Toilet Amenities within Shared Accommodation

Table 4: Bathroom/WC Facility Standards

	Number of Occupants	Quantity	Configuration
*Toilets (WCs):	Up to 4 occupants	1 WC	May be in bathroom/shower room
	5 occupants	1 WC	In a separate compartment
	6 occupants	2 WC	May be in bathroom/shower room
	Between 7-10 occupants	2 WC	1 WC to be in a separate compartment to the room containing bath/shower
	Between 11 – 15 occupants	3 WC	1 WC to be in a separate compartment to the rooms containing baths/showers

*Each WC to include a wash hand basin with an adequate supply of cold water and constant hot water.

Table 5: Bathroom Requirements

	Number of occupants	Quantity
*Bathroom:	Every 5 occupants	1 bathroom

* Each bathroom to contain a bath or shower with an adequate supply of cold water and constant hot water, but not necessarily a toilet or wash hand basin.

Toilets and bathrooms to be provided in an enclosed and adequately laid out and ventilated room, either:

- Within the living accommodation; or
- Within reasonable proximity to the living accommodation.

Bathroom and Toilet Amenities within Self-Contained Accommodation

Where bathroom facilities are for the exclusive use of an individual household, i.e. in self-contained flats or individual bedsits, they are to include:

- ☒ A toilet
- ☒ A bath or shower with an adequate supply of cold and constant hot water.
- ☒ A wash hand basin.

Toilets and bathrooms to be provided in an enclosed and adequately laid out and ventilated room, either:

- Within the living accommodation; or
- Within reasonable proximity to the living accommodation.

Kitchen Amenities within Shared Accommodation

It is recommended that at least 2 double electrical sockets are provided in addition to the cooker socket.

Table 6: Kitchen Amenities Requirements

Amenity	Number of Occupants	Configuration
Cooker	Up to 5 occupants	1 full cooker - (1 oven and 4 hobs)
	Up to 7 occupants	1 full cooker – (1 oven and 4 hobs) <u>AND</u> at least one alternative cooking option (e.g. air fryer/microwave, etc.)
Sink	Up to 5 occupants	1 sink - (With hot and cold water and draining board)
	Up to 7 occupants	1 sink – (With hot and cold water and a draining board) <u>AND</u> a dishwasher.
Work Surface	Up to 5 occupants	2.0 linear metres Note – (a work surface of at least 500mm must be sited adjacent to each cooker).
	Each occupant thereafter	An additional 0.5 linear metres per occupant
Dry Goods Storage	Per occupant	1 base unit (500mm) OR 1 wall unit (1,000mm) Note – (space under sink unit & drainer not

		allowable for food storage).
Refrigerated Storage	Per occupant	1 shelf in a refrigerator <u>AND</u> 1 shelf in a freezer, per person.

Kitchen Amenities within Self-Contained Accommodation

Where kitchen facilities are for the exclusive use of an individual household. i.e. in a self-contained flat, or individual bedsit, the following is to be provided:

- A cooker of adequate size to include 2 – 4 ring hobs with oven or a microwave.
- A sink unit (with drainer) with adequate supply of cold and constant hot water.
- A work top for food preparation, of minimum size 1m x 0.6m
- A work surface of at least 500mm must be sited adjacent to each cooker.
- A standard under-counter size fridge as a minimum AND a freezer to be provided (*in addition to the fridge*) OR one standard fridge/freezer would meet this requirement.
- A cupboard for food and utensil storage, of minimum size 500mm standard base OR wall unit (1,000mm).
- Sufficient electrical sockets. It is recommended that at least 2 double sockets are provided in addition to the cooker socket.

Appendix C – Methodology for Assessing Parking Impact

The following methodology should be used to assess whether a proposal will have an effect on parking provision.

Step 1: Site Accessibility and Context

Applicants must provide an assessment of the site's accessibility, including:

- Distance to bus stops, railway stations and frequency of services;
- Quality and connectivity of walking and cycling routes;
- Access to local amenities (i.e. shops, schools, employment hubs, etc.); and
- Presence of car clubs or shared mobility options.

This will provide context for car dependency and potential vehicle ownership for both the existing and proposed use.

Step 2: Calculate Parking Demand – Existing Use

Calculate the likely parking demand of the existing use by considering:

- Household size and composition;
- Local car ownership data (e.g. latest census or local surveys);
- The number of bedrooms and available off-street parking.

Step 3: Calculate Parking Demand – Proposed HMO

Calculate parking demand generated by the proposed HMO, taking into account:

- Expected number of residents and their typical car ownership profile;
- Accessibility data from Step 1; and
- Comparable data from existing HMOs in similar locations.

Step 4: Net Impact Assessment

Compare the calculated parking demand of the existing and proposed use:

- If there is no net increase in likely vehicle demand, the proposal is unlikely to have an adverse impact.

- If there is a net increase, further evidence is required to demonstrate this can be accommodated (proceed to step 5).

Step 5: Assess Local Capacity and Parking Stress

If additional demand for parking is expected, the applicant must demonstrate that the local area can accommodate the net increase. This may involve:

- Providing evidence of available off-street parking provision; and
- Undertaking a parking survey of the surrounding streets to assess existing parking stress and capacity. In all cases, the survey should:
 - Follow a methodology agreed with the Highways Authority (e.g. Overnight surveys);
 - Include weekday and weekend data;
 - Cover a reasonable radius (typically 100-200m walking distance); and
 - Present clear data on the number and occupancy of on-street spaces.

Table 7: Parking Capacity vs Demand Checklist

Step	Requirement	What to Submit
1. Site Accessibility and Context	Demonstrate the site's accessibility by sustainable travel modes and proximity to services.	Map or written statement showing:- • Distance to bus stops and frequency of services • Proximity to railway stations • Walking and cycling routes • Nearby services and amenities • Any car clubs or shared mobility schemes.
2. Parking Demand – Existing Use	Calculate typical car ownership for current (C3) use.	• Description of current/former use – including plans • Household size or composition • Estimated car ownership level (with data source) • Existing off-street parking availability.
3. Parking Demand – Proposed HMO	Calculate parking demand for the proposed HMO.	• Expected number of occupants – including proposed plans • Car ownership assumptions based on

		local evidence or comparable HMOs • Reference to accessibility factors from Step 1.
4. Net Impact Assessment	Compare existing and proposed parking demand.	• Table or written summary comparing both scenarios • Clear statement on whether there is a net increase in demand.
5. Local Parking Capacity / Parking Survey	If net demand increases, assess whether this can be accommodated.	• Details of any proposed on-site parking provision • If relying on on-street parking: a parking *survey following an agreed methodology * Survey must include:- ○ Map of surveyed area (100m-200m radius) which includes any traffic restrictions ○ Weekday and weekend overnight occupancy ○ Number and type of available spaces ○ Summary of capacity vs demand.

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Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	TREASURY MANAGEMENT QUARTER 1 REPORT 2025-26
Report Owner / Corporate Director:	CHIEF OFFICER – FINANCE, HOUSING AND CHANGE
Responsible Officer:	NIGEL SMITH GROUP MANAGER – CHIEF ACCOUNTANT
Policy Framework and Procedure Rules:	Para 22.5 Financial Procedure Rules require that the Chief Finance Officer shall report quarterly to the Cabinet, summarising borrowing and investment activity and indicating compliance with any statutory or Council approved guidelines together with a half yearly and an annual report to Council.
Executive Summary:	The report provides an update of Treasury Management activity for the quarter 1 period 2025-26, to 30 June 2025. As at 30 June 2025 the Council had £96.29 million of long term debt, £2.32 million of Salix loans (interest free), £14.58 million of other long term liabilities and £64 million of investments. The overall net debt position is £49.19 million. The average interest rate for debt as at 30 June 2025 was 4.69%. For investments it was 4.08%. The Council has a manageable maturity structure of borrowing, with its current debt repayable at various points over the next 30 years, the next repayment being due in September 2025. The Council is required to set and report against Treasury Management Indicators, details of which are included in Appendix A. These show that the Council is operating within its approved limits. The Council has complied with the Chartered Institute of Public Finance and Accountancy's Treasury Management in the Public Services Code of Practice and Welsh Government Investment Guidance during the period.

1. Purpose of Report

- 1.1 The purpose of this report is to update the Cabinet on the treasury management activities for the quarter ending 30 June 2025.

2. Background

- 2.1 Treasury Management is the management of the Council's cash flows, borrowing and investments, and the associated risks. The Council is exposed to financial risks including the loss of invested funds and the revenue effect of changing interest rates. The successful identification, monitoring and control of financial risk are therefore central to the Council's prudent financial management.
- 2.2 Treasury risk management at the Council is conducted within the framework of the Chartered Institute of Public Finance and Accountancy's Treasury Management in the Public Services: Code of Practice 2021 edition (the TM Code), which requires the Council to approve a Treasury Management Strategy before the start of each financial year, and, as a minimum, a semi-annual and annual treasury outturn report. The TM Code also requires the Council to set a number of Treasury Management Indicators, which are forward looking parameters, and enable the Council to measure and manage its exposure to treasury management risks, and these are included throughout this report. Welsh Government (WG) guidance issued in November 2019 on Local Authority Investments requires the Council to approve an Investment Strategy before the start of each financial year. This report fulfils the Council's legal obligation under the Local Government Act 2003 to have regard to both the CIPFA Code and the Welsh Government Guidance.
- 2.3 The CIPFA Prudential Code for Capital Finance in Local Authorities (2021 Edition) (Prudential Code) includes a requirement for Local Authorities to provide a Capital Strategy, which is a summary document approved by full Council covering capital expenditure and financing, treasury management and non-treasury investments. The definition of investments in the revised Prudential Code covers all the financial assets of the Council as well as other non-financial assets which the authority holds primarily for financial return. The Council's Capital Strategy 2025-26 complied with CIPFA's requirement and included the Prudential Indicators along with the details regarding the Council's non-treasury investments. The Capital Strategy and Treasury Management Strategy should be read in conjunction with each other as they are interlinked, as borrowing and investments are directly impacted upon by capital plans, and both were approved together by Council on 26 February 2025.
- 2.4 The Council's treasury management advisors are Arlingclose. The current services provided to the Council include:
- advice and guidance on relevant policies, strategies and reports
 - advice on investment decisions
 - notification of credit ratings and changes
 - other information on credit quality
 - advice on debt management decisions
 - accounting advice
 - reports on treasury performance
 - forecasts of interest rates
 - training courses

3. Current situation / proposal

3.1 External Context – Economic Background

- 3.1.1 UK headline consumer price inflation (CPI) rose over the quarter from 2.6% at 31 March 2025 to 3.6% at 30 June 2025, well above the Bank of England's 2% target. The core measure of inflation, which excludes the most volatile components, specifically food and energy prices, also increased, from 3.4% to 3.7%.
- 3.1.2 Data released during the period showed that the UK economy expanded by 0.7% in the first quarter of the calendar year (January – March), following three previous quarters of weaker growth. UK Gross Domestic Product (GDP) is estimated to have increased by 0.3% in the April – June quarter, growth not as strong as in the first quarter of the year.
- 3.1.3 Interest rates during the quarter reduced from 4.5% on 1 April 2025 to 4.25% in May and remained at that rate to the end of the quarter. The rate was further reduced in August to 4.0%. Arlingclose, the authority's treasury adviser, maintained its central view that Bank Rate would continue to fall, and a further reduction is expected later in the year.

3.2 Public Works Loan Board (PWLB) Lending Facility Advice, Revised CIPFA Codes

- 3.2.1 The Council continues to undertake its duties in line with the current guidance for the PWLB lending facility which was significantly revised by HM Treasury in August 2021. Authorities that are purchasing or intending to purchase investment assets primarily for yield, or financial return, will not be able to access funding from the PWLB except to refinance existing loans or externalise internal borrowing. Acceptable use of PWLB borrowing includes service delivery, housing, regeneration, preventative action, refinancing and treasury management.
- 3.2.2 The Council's treasury management activities are undertaken in line with CIPFA's Prudential Code for Capital Finance in Local Authorities and CIPFA's Treasury Management in the Public Services Code. To comply with the Prudential Code authorities must not borrow to invest primarily for financial return. The Prudential Code also states it is not prudent for local authorities to make investment or spending decisions that will increase the Capital Financing Requirement (CFR) unless directly and primarily related to the functions of the authority. Existing commercial investments are not required to be sold, however, authorities with existing commercial investments who expect to need to borrow should review the options for exiting these investments.

3.3 Treasury Management update for period 1 April 2025 to 30 June 2025

- 3.3.1 The Council has complied with its legislative and regulatory requirements during the first quarter of 2025-26. The Treasury Management Strategy 2025-26 was approved by Council on 26 February 2025.
- 3.3.2 A summary of the treasury management activities is shown in the Treasury Management Quarterly report to 30 June 2025 at **Appendix A**. The Council's external debt and investment position on 30 June 2025 is shown in Table 1 below, and more

detail is provided in **Appendix A**. No long-term borrowing has been taken out in the first quarter of 2025-26.

The balance on investments held at 30 June 2025 was £64.00 million, an increase from the £36.75 million held at 31 March 2025, with an average interest rate of 4.08% (4.39% as at 31 March 2025). The Council receives two amounts of Welsh Government Revenue Settlement Grant (at £17.226 million per amount) which has provided a positive cash flow position for the first quarter.

Table 1: Council's external debt and investment position at 30 June 2025

Investments for Treasury Purposes	Principal as at 31/03/2025 £m	Principal as at 30/06/2025 £m	Average Rate 30/06/2025 %
External Long Term Borrowing			
Public Works Loan Board (PWLB)	77.04	77.04	4.70
Lenders Option Borrowers Option (LOBO)	19.25	19.25	4.65
Salix Loans (Interest Free)	2.51	2.32	NIL
Short Term Borrowing	5.00	NIL	NIL
Total External Borrowing	103.80	98.61	4.69*
Other Long Term Liabilities			
Private Finance Initiative**	11.97	10.89	
IFRS 16 Leases	3.69	3.69	
Total Other Long Term Liabilities	15.66	14.58	
Total Gross Debt	119.46	113.19	
Investments for treasury management purposes			
Debt Management Office	18.00	32.50	4.21
Money Market Funds (instant access)	12.75	23.50	4.29
Banks	6.00	8.00	2.93
Total Treasury Investments	36.75	64.00	4.08
Net Debt	82.71	49.19	

* Excluding Salix loans which are interest free

** (PFI) arrangement for the provision of a Secondary School in Maesteg 9.75 years remaining term

- 3.3.3 The £19.25 million in Table 1 above relates to Lender's Option Borrower's Option (LOBO) loans which have a maturity date of 2054 though these may be rescheduled in advance of this maturity date with the lender having the ability to recall the debt at 2 intervals in the year, July and January. Whilst the expectation is that as interest rates fall the lender is unlikely to exercise this option, and it was not exercised on 22 July 2025, there remains some risk that the lender may exercise their option.
- 3.3.4 The Total Other Long Term Liabilities figure of £14.58 million at 30 June 2025 includes £10.89 million for the Private Finance initiative (PFI) arrangement for the provision of a Secondary School in Maesteg and £3.69 million right of use assets..
- 3.3.5 Both the CIPFA Code and Welsh Government Guidance require the Council to invest its funds prudently and to have regard to the security and liquidity of its investments

before seeking the highest rate of return, or yield. The Council's objective when investing money is to strike an appropriate balance between risk and return. Investment decisions are made by reference to the lowest published long-term credit rating from Fitch, Moody's or Standard and Poor's to ensure that this lies within the Councils' agreed minimum credit rating.

- 3.3.6 The Council defines high credit quality as organisations and securities having a credit rating of A- (A3 for Moody's) or higher and the Council does not invest in any organisation below this level. Schedule A in **Appendix A** shows the equivalence table for credit ratings for Fitch, Moody's, and Standard and Poor's and explains the different investment grades.
- 3.3.7 There are no long-term investments (original duration of 12 months or more) outstanding as at 30 June 2025. All investments at 30 June 2025 are short term deposits including instant access and notice accounts.
- 3.3.8 The Treasury Management Code requires the Council to set and report on a number of Treasury Management Indicators. The indicators either summarise the expected activity or introduce limits upon the activity. Details of the estimates for 2025-26 set out in the Council's Treasury Management Strategy compared to the actual at 30 June 2025 are shown in **Appendix A** and these show that the Council operated within the approved limits throughout the year to date.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. This is an information report, therefore it is not necessary to carry out an Equality Impact assessment in the production of this report. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The well-being goals identified in the Act were considered in the preparation of this report. It is considered that there will be no significant or unacceptable impacts upon the achievement of well-being goals/objectives because of this report.

6. Climate Change and Nature Implications

- 6.1 The Climate Change and nature implications were considered in the preparation of this report. It is considered that there will be no significant or unacceptable impacts upon the environment because of this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 The Safeguarding and Corporate Parenting implications were considered in the preparation of this report. It is considered that there will be no significant or

unacceptable impacts upon safeguarding and corporate parenting because of this report.

8. Financial Implications

8.1 The financial implications are reflected within the report and the attached **Appendix A**.

9. Recommendations

9.1 It is recommended that Cabinet:

- Note the treasury management activities for the quarter ending 30 June 2025.
- Note the Treasury Management Indicators for the period 1 April 2025 to 30 June 2025 against those approved in the Treasury Management Strategy 2025-26.

Background documents

None



Treasury Management Quarterly Report to 30 June 2025

EXECUTIVE SUMMARY

- Treasury Management is the management of the Council's cash flows on a day-to-day basis and is carried out in accordance with legislation and Codes of Practice. The Treasury Management Strategy for 2025-26 was approved by Council on 26 February 2025.
- Inflation at 30 June 2025 as measured by the Consumer Price Index (CPI) continued to stay above the Bank of England's target of 2% at 3.6%, a rise from 2.6% in March 2025.
- The Bank of England base rate was reduced to 4.25% in May.
- Total external borrowing at 30 June 2025 was £98.61 million, a slight reduction from the previous quarter of £103.80 million due to repayment of £5m of short-term borrowing and Salix loan repayments.
- Total investments at 30 June 2025 were £64 million, an increase from £36.75 million at the year end. This is in part due to the Council receiving 2 payments of Welsh Government Revenue Support Grant (RSG) in April, so an additional grant of £17.226 million in the month which will increase short term cash resources.
- Average interest rates on investments as at 30 June 2025 were 4.08%, a reduction from those at 31 March 2025 of 4.39%. This reduction is as expected given the reduction in the Bank of England base rate.
- The Council's investments are diversified across a number of institutions, including Money Market Funds and banks. Security of the Council's cash resources is always the primary factor when investing cash resources.
- Based on the approved capital programme the Council may need to borrow long term during 2025-26, however, this is dependent on the actual expenditure incurred on capital projects and the use of earmarked reserves. In the short term the Council uses the cash available from earmarked reserves to finance capital expenditure, known as internal borrowing. This is prudent whilst the Council has resources available, but these will need to be replaced with borrowing as the reserves are used.
- The liability benchmark indicates the Council may need to borrow up to £18 million during 2025-26, but this will be closely monitored during the year to ensure borrowing is taken when necessary.
- The Council has operated within the approved limits set out in the Treasury Management Strategy 2025-26.

1.0 INTRODUCTION

Treasury management activities are the *'management of the organisation's borrowing, investments and cash flows, including its banking, money market and capital market transactions, the effective control of the risks associated with those activities, and the pursuit of optimum performance consistent with those risks.'* (Chartered Institute of Public Finance and Accountancy (CIPFA) Treasury Management in the Public Services: Code of Practice (2021) (CIPFA TM Code).

The definition of 'Investments' includes:

- Treasury Management investments (held for the prudent management of financial affairs), and
- non-Treasury Investments, undertaken as part of a Capital Strategy either in the course of provision of services, or made for commercial reasons purely to make a financial gain. These are managed outside of normal treasury management activity.

The Council carries out its treasury management function in accordance with the CIPFA TM Code and the legal obligation under the Local Government Act 2003 to have regard to both the CIPFA TM Code and Welsh Government Guidance.

The Council has an integrated Treasury Management Strategy where borrowing and investments are managed in accordance with best professional practice, which is assessed either from internal expertise or consultation with our external advisers. The Council will look to borrow money if needed to either meet short term cash flow needs or to fund capital schemes approved within the capital programme. Therefore, any actual loans taken are not generally associated with particular items of expenditure or assets.

The Council delegates responsibility for the implementation and regular monitoring of its treasury management policies and practices to Cabinet, and for the execution and administration of treasury management decisions to the Section 151 Officer. The Governance and Audit Committee are responsible for ensuring effective scrutiny of the Treasury Management Strategy and policies and regular reports will be presented to the Committee for their consideration.

2.0 ECONOMIC CONTEXT

UK headline consumer price inflation (CPI) increased over the quarter, rising from an annual rate of 2.6% in March to 3.6% in June, well above the Bank of England's 2% target. The core measure of inflation also increased, from 3.4% to 3.7% over the same period.

Data released during the period showed the UK economy expanded by 0.7% in the first quarter of the calendar year, following three previous quarters of weaker growth. UK Gross Domestic Product (GDP) is estimated to have increased by 0.3% in the April – June quarter, showing growth in the second quarter of the calendar year not as strong as the first.

Labour market data appeared to show a softening in employment conditions as weaker earnings growth was reported for the period April to June 2025 with regular earnings (excluding bonuses) at 5.0% while total earnings was 4.6%. Employment rates fell during the quarter whilst unemployment rates increased, while the economic inactivity rate and number of vacancies fell.

Having started the financial year at 4.5%, the Bank of England's Monetary Policy Committee (MPC) cut Bank Rate to 4.25% in May. The 5-4 vote was split with the majority wanting a 25bps cut, two members voting to hold rates at 4.5% and two voting for a 50bps reduction. At the June MPC meeting, the committee voted by a majority of 6-3 to keep rates on hold. The three dissenters wanted an immediate reduction to 4%, however they would have to wait until August. At its meeting ending on 6 August 2025, the MPC voted by a majority of 5-4 to reduce Bank Rate by 0.25 percentage points, to 4%, rather than maintaining it at 4.25%. The committee is next due to meet on 17 September 2025.

The June Monetary Policy Report highlighted the Bank of England's view that disinflation in domestic inflation and wage pressures were generally continuing and that a small margin of excess supply had opened in the UK economy, which would help inflation to fall to the Bank's target of 2% over the medium term. While near-term GDP growth was predicted to be higher than previously forecast in the second quarter of calendar year 2025, growth in the same period the following year was trimmed back, partly due to ongoing global trade developments.

Arlingclose, the authority's treasury adviser, maintained its central view that Bank Rate would continue to fall, and that the Bank of England would focus more on weak GDP growth rather than stickier and above-target inflation. Another cut to Bank Rate is expected during 2025, taking the main policy rate to 3.75%, however the balance of risks is deemed to be to the downside as weak consumer sentiment and business confidence and investment impact economic growth.

3.0 EXTERNAL DEBT AND INVESTMENT POSITION

The Council's external debt and investments at 30 June 2025 is set out in Table 1 below. The Council held £98.61 million of Long Term Borrowing comprising:

- Public Works Loan Board (PWLB - UK government) at fixed rates and duration
- Lender's Option Borrower's Option (LOBO) which may be rescheduled ahead of their maturity of 22 July 2054 (no call was made in July 2025)
- £2.32 million of Salix interest-free loans

The Council borrowed £5 million from the PWLB in February 2025 over a 16-month period for cash flow purposes and to replace a £5m PWLB long term loan that was repaid on 31 March 2025.

At 30 June 2025 the Council had £64 million of investments for treasury management purposes and £4.89 million of investments for commercial purposes.

Table 1: Council's external debt and investment position as of 30 June 2025

Investments for Treasury Purposes	Principal as at 31/03/2025 £m	Principal as at 30/06/2025 £m	Average Rate 30/06/2025 %
External Long Term Borrowing			
Public Works Loan Board (PWLB)	77.04	77.04	4.70
Lenders Option Borrowers Option (LOBO)	19.25	19.25	4.65
Salix Loans (Interest Free)	2.51	2.32	NIL
Short Term Borrowing	5.00	NIL	NIL
Total External Borrowing	103.80	98.61	4.69*
Other Long Term Liabilities			
Private Finance Initiative**	11.97	10.89	
IFRS 16 Leases	3.69	3.69	
Total Other Long Term Liabilities	15.66	14.58	
Total Gross Debt	119.46	113.19	
Investments for treasury management purposes			
Debt Management Office	18.00	32.50	4.21
Money Market Funds (instant access)	12.75	23.50	4.29
Banks	6.00	8.00	2.93
Total Treasury Investments	36.75	64.00	4.08
Net Debt	82.71	49.19	

Investments for Commercial Purposes	Fair Value as at 31/03/2025 £m	Anticipated return 31/03/2026 £m
Investments	4.890	0.458

* Excluding Salix loans which are interest free and Short Term borrowing

** (PFI) arrangement for the provision of a Secondary School in Maesteg 8.75 years remaining term

The current profile of repayment of the Council's long-term debt is set out in the Liability Benchmark chart below. The table assumes that the Public Works Loan Board and Lender's Option Borrower's Option loans will be repayable on their maturity date. However, although shown as maturing in 2054, the £19.25 million of Lender's Option Borrower's Option loans may be called sooner than this, the next call date being 22 January 2026.

PWLB lending criteria requires that the Council does not invest purely for financial return if it wishes to access any new PWLB borrowing. The CIPFA TM Code sets out that it is not prudent for local authorities to invest for financial return.

All borrowing by the Council is as a single pool of debt rather than having loans specific to individual schemes. Where a Council finances capital expenditure by debt, it must put aside revenue to repay that debt in later years, known as Minimum Revenue Provision (MRP). The forecast MRP for 2025-26 as set out in the Capital Strategy is

£4.624 million, which includes supported and unsupported borrowing, the PFI for Maesteg School and leases recognised on the balance sheet as from 1 April 2024.

Liability benchmark

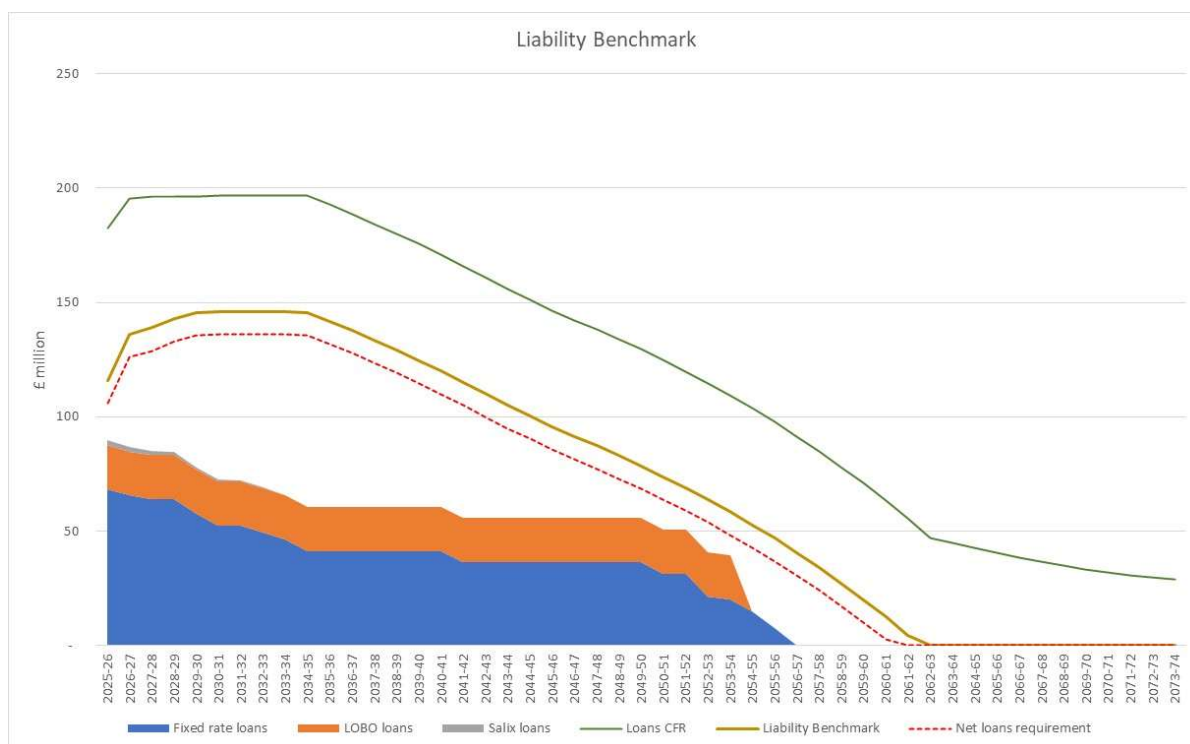
The liability benchmark is a tool which helps to assess the lowest level of borrowing the Council needs, taking into account available cash resources to fund capital expenditure in the short term. A minimum level of investments is factored into the calculation, set at £10 million, which are held as reasonably liquid to ensure the Council has available cash resources to meet day-to-day cash flow requirements. Forecast borrowing needs are based on capital expenditure estimates and available usable reserves. The underlying need to borrow to fund capital expenditure (known as the Capital Financing Requirement or CFR) is the amount of capital expenditure which is not funded via grants, capital receipts or contributions from revenue and earmarked reserves.

Table 2 below shows the Capital Financing Requirement and the calculation of the liability benchmark. It is important to note that the graph is based on the current approved capital programme and the borrowing associated therewith. Any new schemes which require debt financing will increase the CFR and loans requirement.

Table 2: Liability benchmark

	31 March 2025 actual	31 March 2026 estimate (TMS)	31 March 2026 forecast	31 March 2027 forecast	31 March 2028 forecast
	£m	£m	£m	£m	£m
Capital Financing Requirement	181.09	183.22	196.85	208.56	207.85
Less: Other debt liabilities	(15.65)	(15.12)	(14.36)	(12.97)	(11.50)
Loans Capital Financing Requirement	165.44	168.10	182.49	195.59	196.35
Less: Balance Sheet Resources	(130.25)	(58.52)	(76.64)	(69.59)	(67.47)
Plus: Liquidity allowance	10.00	10.00	10.00	10.00	10.00
Liability Benchmark	45.19	119.58	115.85	136.00	138.88

The liability benchmark is an important tool to help establish whether the Council is likely to be a long-term borrower or long-term investor in the future and so shape its strategic focus and decision making. The liability benchmark itself represents an estimate of the cumulative amount of external borrowing the Council must hold to fund its **current** capital plans while keeping treasury investments at the minimum level to manage day-to-day cash flow.



It is forecast that the Council may need to borrow long term in 2025-26 although this is based on a number of assumptions including the forecast capital programme expenditure and the level and use of reserves.

The Section 151 Officer will monitor and update the liability benchmark assumptions on an on-going basis and report any significant changes within the treasury management monitoring reports to Cabinet, the Governance and Audit Committee and Council as appropriate. This could be as a result of changes in the level of usable reserves at year end, slippage within the Capital Programme or changes within the working capital assumptions which may affect the Council's need to take new long-term borrowing.

4.0 BORROWING

As at 30 June 2025 the Council held £98.61 million of Long-Term Borrowing, £96.29 million of which is fixed long term loans as part of its strategy for funding previous years' capital programmes.

The Council has previously raised the majority of its long-term borrowing from the Public Works Loan Board (PWLb) and this was the case when the Council borrowed £5m for duration of 16 months in February 2025. The Council will however consider long term loans from other sources including banks, pension funds and other local authorities if appropriate. The Council will also investigate the possibility of issuing bonds and similar instruments, in order to lower interest costs and reduce over-reliance on one source of funding in line with the CIPFA TM Code.

The Council has loans from PWLB maturing within the next 3 financial years that it will need to repay. Given the anticipated level of expenditure within the capital programme over the current and next financial years, it is likely that new borrowing will be required to replace these maturing loans. The value of the loans due to be repaid over the next 3 years is shown in Table 3.

Table 3: Value of PWLB maturing debt

	2025-26 £ million	2026-27 £ million	2027-28 £ million
Value of maturing debt	3.709	7.790	1.395

The £3.709 million due for repayment during 2025-26 is for two loans maturing during the year. £2.790 million is due for repayment on 30 September 2025 and £0.919 million on 31 March 2026. As noted above the Council is likely to need to borrow during 2025-26 which will replace these maturing loans.

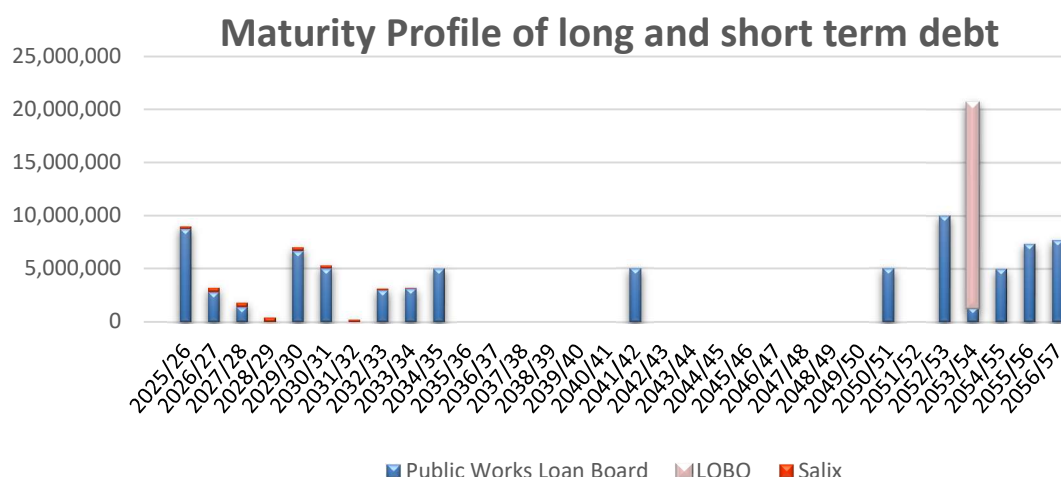
Maturity structure of borrowing

The maturity structure of borrowing indicator is set to control the Council's exposure to refinancing risk with respect to the maturity of the Council's external borrowing. The limits are set to avoid having large amounts of debt maturing in a short space of time, and is the amount of projected borrowing maturing in each period as a percentage of total projected borrowing. Where the maturity date of borrowing is unknown, as in the case of LOBO loans, the maturity should normally be determined by reference to the earliest date at which the lender can require repayment. The £19.25 million of LOBO loans has therefore been included in the 'Under 12 months' category. This table also reflects the PWLB repayable in 2025-26.

Table 4: Maturity Structure of Borrowing 2025-26

Maturity structure of borrowing	Upper limit	lower limit	£ million	As at 30 June 2025
Under 12 months	50%	0%	28.16	28.55%
12 months and within 24 months	25%	0%	3.18	3.23%
24 months and within 5 years	25%	0%	9.14	9.27%
5 years and within 10 years	40%	0%	16.74	16.98%
10 years and within 20 years	50%	0%	5.00	5.07%
20 years and above	60%	25%	36.39	36.90%

As can be seen from the table the maturity structure remains within the limits approved as part of the Treasury Management Strategy 2025-26. The following chart provides the maturity profile of the Council's long term debt.



All the LOBO loans are subject to the lender having the right to change the rate of interest payable during the financial year at either of two trigger points in January and July, with the Council having the right to refuse the change, triggering early repayment and the need to re-finance. This is a manageable risk should repayment be needed during the current financial year as the Council has sufficient cash funds available in the short term, but would, however, need to consider taking out new debt to replace these loans during the current financial year. These loans were not called at the July call date and the next call date is 22 January 2026.

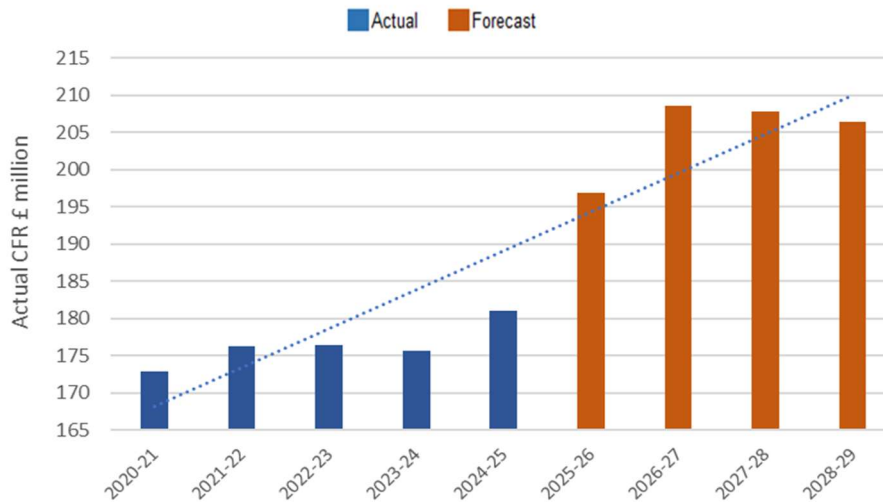
Table 5: LOBO loans

Commencement date	Loan value £m	Potential repayment date	Option frequency	Full term maturity
22 January 2004	4.00	22 January 2026	6 months	22 January 2054
22 January 2004	5.00	22 January 2026	6 months	22 January 2054
22 January 2004	10.25	22 January 2026	6 months	22 January 2054

In accordance with the Treasury Management Strategy, the Council is internally borrowing, which is when it uses temporary cash balances it holds in the short term instead of undertaking external borrowing. The current level of internal borrowing is £62.96 million as at 30 June 2025. This is shown by the Council's Capital Financing Requirement (CFR) net of its external level of debt including other long term debt liabilities. The Council's CFR as at 31 March 2025 was £183.26 million, external borrowing £99.65 million and other long term debt liabilities £15.12 million, which is primarily the PFI Maesteg School scheme plus the lease commitments of right of use assets.

The chart below shows the trend in the CFR based on **current** capital commitments within the approved capital programme. The CFR is anticipated to increase in the current and following year assuming capital expenditure is incurred as currently anticipated. The CFR in future years shows a marginal reduction, however, this is on the assumption that there will be no new schemes added to the capital programme which require debt financing. If new schemes requiring debt financing are added, the CFR will continue to increase.

Capital Financing Requirement Trend



5.0 TREASURY INVESTMENTS

The Council holds treasury investments as a result of temporary cash balances arising from its day-to-day activities. The management of the day-to-day cash requirements of the Council is undertaken in-house with advice from Arlingclose, the Council's Treasury Management advisors. This may involve temporary borrowing to meet cash-flow needs or temporary lending of surplus funds. Investment balances can fluctuate daily and arise as a result of a range of circumstances, including timing differences of revenue and capital cash flows, reserves and other balances held for future use.

Investments are made in institutions approved by the Council as part of its Treasury Management Strategy and in accordance with investment guidelines issued by the Welsh Government. As part of the Markets and Financial Instruments Directive II, the Council elected for 'professional' status, which covers national and regional governments and public bodies. The categories of investments the Council can invest in can be changed with any proposed changes being presented to Council for approval. Treasury investments are made primarily on the basis of ensuring security of the funds invested, whilst managing liquidity, and only then considering a commensurate return on the investment. As at 30 June 2025, the Council held £64 million of investments, with a weighted average return (based on the rate of return of each investment over the 3 month period) of 4.20% (£36.75 million at 4.81% as at 31 March 2025). This compares to the average interest rate of investments as at 30 June 2025 of 4.08%, as shown in Table 1 and indicates that returns are falling, as expected when the Bank of England base rate reduces.

Table 6 below shows the investment profile as at 30 June 2025.

Table 6: Investments by counterparty type

Investment Category	Balance 1 April 2025	Investments made in period	Investments repaid in period	Balance 30 June 2025	Weighted interest rate 1 April 2025 to 30 June 2025
	£m	£m	£m	£m	%
Government DMO	18.00	143.00	(128.50)	32.50	4.29
Money Market Funds	12.75	18.50	(7.75)	23.50	4.37
Banks (instant access/notice accounts)	6.00	11.05	(9.05)	8.00	3.34
TOTAL	36.75	172.55	(145.30)	64.00	4.20

The following should be noted:

- During the period to 30 June 2025 all investments made were in line with the approved counterparties within the Treasury Management Strategy.
- Investments are diversified over a number of organisations across different sectors, demonstrating a diversified investment portfolio.
- All investments are in sterling and are rated A- and above as per the approved criteria or with a public body.
- The weighted average rates are for all investments made during 1 April 2025 to 30 June 2025.

The overall interest receivable from treasury investments for the period 1 April 2025 to 30 June 2025 was £0.658 million. There has been a slow and gradual reduction to interest rates since they reached their peak of 5.25% in July 2024, with a 0.25% reduction on four occasions, with the rate reduced to 4.25% in May 2025 (the rate was reduced again in August 2025 to 4.00%). The Council will continue to take a cautious approach to investing to ensure as its primary concern the security of any investments made. The risk of default for investments held is considered negligible.

All investments longer than 364 days will be made with a cautious approach to cash flow requirements and advice from the Council's Treasury Management advisors will be sought as necessary. All investments as at 30 June 2025 were short term of less than one year duration, as shown in Table 7 below.

Table 7: Sums invested for periods longer than a year

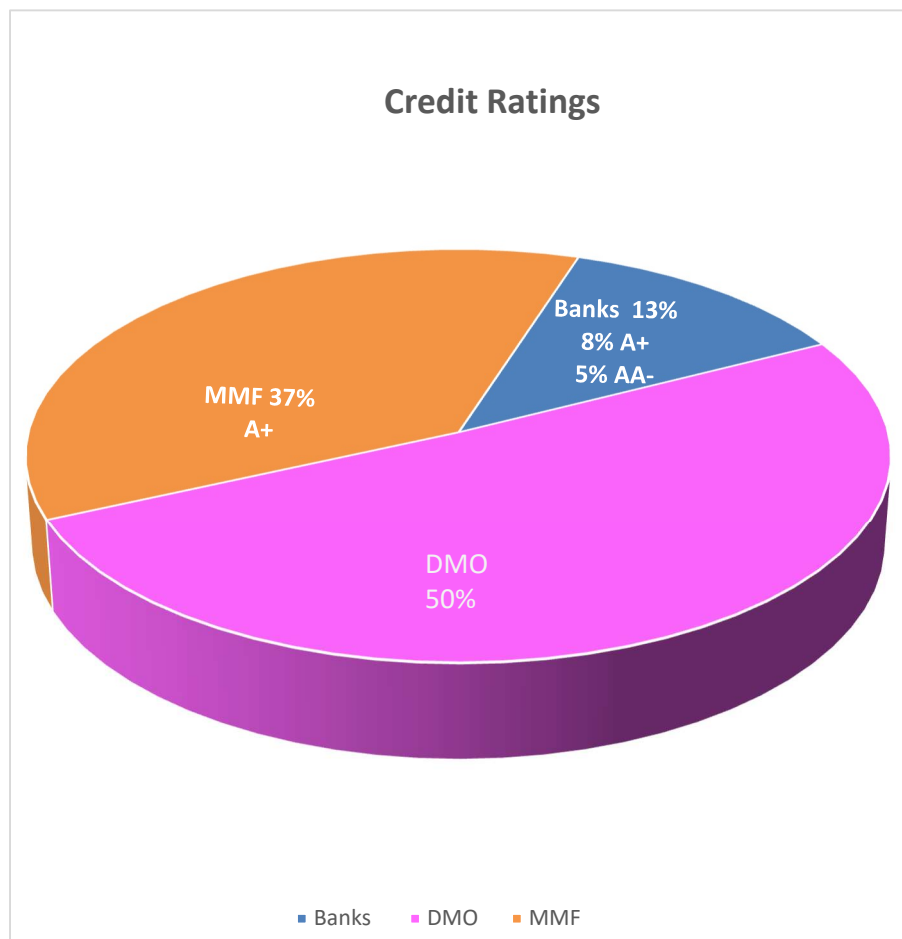
Price risk indicator	TMS 2025-26 £m	Actual £m	Full term maturity
Limit on principal invested beyond financial year end	10	NIL	NIL

The below table details the Council's investments by counterparty and maturity profile.

Table 8: Investments by maturity

Counterparty Category	Instant Access £m	Deposits maturing within 1 month £m	Deposits maturing within 2-3 months £m	Deposits maturing within 4-12 months £m	TOTAL £m
Government DMO	-	30.50	2.00	-	32.50
Money Market Funds	23.50	-	-	-	23.50
Banks	8.00	-	-	-	8.00
Total	31.50	30.50	2.00	0.00	64.00

The pie chart below summarises the distribution of the Council's investments by credit ratings. The DMO are the UK government and rated AA.



6.0 INTEREST RATE EXPOSURES

The Council is exposed to interest rate movements on its borrowings and investments. Movements in interest rates have a complex impact on the Council, depending on how variable and fixed interest rates move across differing financial instrument periods. Short term and variable rate loans expose the Council to the risk of short-term interest rate rises and are therefore subject to the Treasury Management indicator below.

The following Table is based on investments at 30 June 2025.

Table 9: Interest Rate Exposure

Interest rate risk indicator	£ million
One year revenue impact of a 1% rise in interest rates	(0.424)
One year revenue impact of a 1% fall in interest rates	0.616

It is important to note that this is an indicator, not a limit. It is calculated at a point in time on the assumption that maturing loans and investments would be replaced at rates 1% higher or lower than they are currently, and that the treasury investment and borrowing portfolios remain unchanged over the next 12 months, which in practice is not the case. The figure for the 1% fall in interest rates indicator is not the same figure as the 1% increase (but reversed) as the borrowing relates to variable LOBO loans where it is assumed that the lender would only exercise their option if there was an increase in interest rates. All other borrowing does not have a rate reset in the next year and is with the PWLB at fixed rates.

A comparison of interest payable on borrowings excluding other long term liabilities (PFI and lease interest), and interest income due for the period 1 April 2025 to 30 June 2025 is shown below.

Table 10: Interest

	01 April 2025 – 30 June 2025 £ million
Interest expenditure payable on long term borrowing	1.205
Interest income received in period	(0.658)
Net interest cost	0.547

7.0 NON-TREASURY INVESTMENTS

The Council recognises that investment in other financial assets and property primarily for financial return, taken for non-treasury management purposes, requires careful investment management. Such activities include investments in subsidiaries and investments in property. A schedule of the Council's existing non-treasury investments (currently limited to owned property) is set out in Table 11 below. Recent PWLB

guidance requires that local authorities should review their investment portfolio if they wish to secure PWLB borrowing but does not require the local authority to sell existing investment assets. This category covers non-financial assets held primarily or partially to generate a profit, primarily investment property. These assets are valued on an annual basis to reflect market conditions and the current value at the time they are valued, otherwise known as Fair Value, which provides security of their value and continued benefit to the Council.

Table 11: Non-treasury investments

Non-treasury investments	£ million
Bridgend Science Park - Units 1 & 2	3.070
Waterton Cross Land	0.560
Brynmenyn Industrial Estate Plot 53	0.675
Village Farm Plots 32, 119 & 120	0.385
Tyrewise Bridgend	0.200
Total at Fair Value	4.890
Anticipated annual return 2025-26	0.458

The Council considers that the scale of its investment properties is proportionate to the resources of the Council as the investment represents less than 1% of its total long-term assets. In addition, the value of these investments has increased from the previous year.

In accordance with Welsh Government Investment Guidance these are be classified as non-treasury investments.

Schedule A – Credit Rating Equivalence Table

Credit Rating Equivalence Table

	Description	Fitch		Moody's		Standard & Poor's	
		Long	Short	Long	Short	Long	Short
INVESTMENT GRADE	Extremely strong	AAA		Aaa		AAA	
	Very strong	AA+	F1+	Aa1	P-1	AA+	A-1+
		AA		Aa2		AA	
		AA-		Aa3		AA-	
	Strong	A+	F1	A1	P-2	A+	A-1
		A		A2		A	
		A-		A3		A-	
	Adequate	BBB+	F2	Baa1	P-3	BBB+	A-2
		BBB		Baa2		BBB	
		BBB-		Baa3		BBB-	
SPECULATIVE GRADE	Speculative	BB+	B	Ba1	Not Prime (NP)	BB+	B
		BB		Ba2		BB	
		BB-		Ba3		BB-	
	Very speculative	B+		B1		B+	C
		B		B2		B	
		B-		B3		B-	
	Vulnerable	CCC+	C	Caa1		CCC+	C
		CCC		Caa2		CCC	
		CCC-		Caa3		CCC-	
		CC		Ca		CC	
	Defaulting	C	D			C	D
		D		C		D	

Schedule B – Arlingclose Economic & Interest Rate Forecast – June 2025

	Current	Sep-25	Dec-25	Mar-26	Jun-26	Sep-26	Dec-26	Mar-27	Jun-27	Sep-27	Dec-27	Mar-28	Jun-28
Official Bank Rate													
Upside risk	0.00	0.25	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50
Central Case	4.25	4.00	3.75	3.75	3.75	3.75	3.75	3.75	3.75	3.75	3.75	3.75	3.75
Downside risk	0.00	-0.25	-0.50	-0.75	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00
3-month money market rate													
Upside risk	0.00	0.25	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50
Central Case	4.25	4.00	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85
Downside risk	0.00	-0.25	-0.50	-0.75	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00	-1.00
5yr gilt yield													
Upside risk	0.00	0.60	0.65	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70
Central Case	4.00	4.10	4.05	4.00	3.95	3.95	4.00	4.05	4.10	4.10	4.10	4.10	4.10
Downside risk	0.00	-0.60	-0.65	-0.70	-0.75	-0.80	-0.85	-0.90	-0.95	-1.00	-1.05	-1.10	-1.15
10yr gilt yield													
Upside risk	0.00	0.60	0.65	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70
Central Case	4.51	4.40	4.35	4.35	4.35	4.35	4.35	4.35	4.35	4.35	4.35	4.35	4.35
Downside risk	0.00	-0.60	-0.65	-0.70	-0.75	-0.80	-0.85	-0.90	-0.95	-1.00	-1.05	-1.10	-1.15
20yr gilt yield													
Upside risk	0.00	0.60	0.65	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70
Central Case	5.13	4.85	4.75	4.75	4.75	4.75	4.75	4.75	4.75	4.75	4.75	4.75	4.75
Downside risk	0.00	-0.60	-0.65	-0.70	-0.75	-0.80	-0.85	-0.90	-0.90	-0.90	-0.90	-0.90	-0.90
50yr gilt yield													
Upside risk	0.00	0.60	0.65	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70	0.70
Central Case	4.56	4.55	4.45	4.45	4.45	4.45	4.45	4.45	4.45	4.45	4.45	4.45	4.45
Downside risk	0.00	-0.60	-0.65	-0.70	-0.75	-0.80	-0.85	-0.90	-0.90	-0.90	-0.90	-0.90	-0.90

- Bank Rate was maintained at 4.25% in June 2025 but reduced 0.25% during the Bank of England's Monetary Policy Committee (MPC) meeting held in August 2025 to 4.00%.
- The MPC remains sensitive to heightened uncertainty in the economic environment, particularly around inflation expectations, so Bank Rate will be cut gradually to offset weak growth. Our advisors continue to forecast a 0.25% rate cut in November 2025 to 3.75%.
- Prospects for global growth have weakened. While the outlook for inflation is unclear, we expect weak growth and related policy rate expectations to dampen medium-term UK government yields.
- Long-term gilt yields are elevated reflecting uncertainty over US economic, monetary and fiscal policy expectations, and potential increases in UK and global bond supply.

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	ANTI-MONEY LAUNDERING POLICY
Report Owner / Corporate Director:	CHIEF OFFICER – FINANCE, HOUSING AND CHANGE
Responsible Officer:	NIGEL SMITH, GROUP MANAGER – CHIEF ACCOUNTANT
Policy Framework and Procedure Rules:	Regulation 26.3 of the Financial Procedure Rules requires the Chief Finance Officer to develop, maintain and implement the Anti-Money Laundering Policy. The Policy should be reviewed on a regular basis.
Executive Summary:	The Anti-Money Laundering Policy was last updated in January 2019 and approved by Cabinet on 19 February 2019. The policy should be regularly reviewed and updated and as such has been revised and reviewed by the Governance and Audit Committee and is presented to Cabinet for approval.

1. Purpose of Report

- 1.1 The purpose of this report is to present the updated Anti-Money Laundering Policy (**Appendix A**) to Cabinet for approval.

2. Background

- 2.1 The Council is required to ensure the proper use and protection of public funds and assets to ensure the maximum financial resources are available to deliver its services. In order to achieve this the Council must seek to reduce fraud and the misappropriation of resources to zero. Money Laundering is a term applied to “possessing or in any way dealing with or concealing the proceeds of any crime”, in essence, any method used to convert or exchange money or assets obtained from criminal activity into money or assets that are “clean”, in such a way that the “clean” money can no longer be linked back to the criminal activity. Examples of money laundering offences include tax evasion, theft, bribery, smuggling – including drug trafficking – and illegal arms sales. The Anti-Money Laundering Policy sets out the means to which the Council will achieve this.
- 2.2 In addition to the process of money laundering itself as an offence, the failure to report money laundering offences is also an offence. Money laundering can take many forms such as:

- Concealing, disguising, converting or transferring criminal property or removing it from the UK.
- Entering into or becoming concerned in an arrangement which you know or suspect facilitates the acquisition, retention, use or control of criminal property by or on behalf of another person.
- Acquiring, using or possessing criminal property.
- Investing the proceeds of crime into other financial products or the acquisition of property/assets.
- Generating money from a transaction if you have reasonable ground to believe the money will fund terrorism.

3. Current situation / proposal

- 3.1 The Council is committed to establishing and maintaining effective arrangements to prevent, detect and report money laundering in relation to Council services. The Council requires all Members and employees to demonstrate the highest standards of honesty and integrity and this includes compliance with the relevant legislation.
- 3.2 The Council has in place Anti-Money Laundering and Anti-Fraud, Bribery and Corruption policies to support effective arrangements to prevent and detect acts of money laundering which are monitored and reviewed by the Governance and Audit Committee.
- 3.3 The Anti-Money Laundering Policy specifically addresses identification of money laundering and the procedures to be followed should money laundering be suspected. Cabinet last approved the Anti-Money Laundering Policy on 19 February 2019. The current review makes a number of minor amendments and updates for the UK's exit from the European Union, to require enhanced due diligence for organisations outside of the UK. The revised Anti-Money Laundering Policy is attached as **Appendix A**. The policy has been reviewed by the Governance and Audit Committee on 19 June 2025 with no further amendments.
- 3.4 This policy is supplementary to the Council's wider Fraud Strategy and Framework which sets out the key responsibilities with regard to fraud prevention and what to do if fraud or financial irregularity is suspected and the action that will be taken by management.
- 3.5 The policy will be reviewed and updated as required on a regular basis.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

5.1 The well-being goals identified in the Act were considered in the preparation of this report. The following is a summary to show how the 5 ways of working to achieve the well-being goals have been used to formulate the recommendations within this report:

- **Long Term** The Anti-Money Laundering Policy, Procedure and Reporting Arrangements will assist in the long term to support officers and Members in the successful execution of their duties by meeting the legal obligations in the course of business activities.
- **Prevention** The purpose of the procedure is to prevent Money Laundering and to report it where it is suspected a transaction may be Money Laundering.
- **Integration** The outcomes that the procedure supports is that implementation of the policy will help in the prevention of Money Laundering.
- **Collaboration** All members and staff are obliged to follow this policy.
- **Involvement** The persons mainly involved in the procedure will be Bridgend County Borough Council staff.

6. Climate Change and Nature Implications

6.1 The climate change and nature implications were considered in the preparation of this report. It is considered that there will be no significant or unacceptable impacts upon the environment because of this report.

7. Safeguarding and Corporate Parent Implications

7.1 The Safeguarding and Corporate Parenting implications were considered in the preparation of this report. It is considered that there will be no significant or unacceptable impacts upon Safeguarding and Corporate parenting because of this report.

8. Financial Implications

8.1 There are no financial implications arising from this report.

9. Recommendation

9.1 It is recommended that Cabinet approves the updated Anti-Money Laundering Policy at **Appendix A**.

Background documents

None

Appendix A



ANTI-MONEY LAUNDERING POLICY

September 2025

ANTI-MONEY LAUNDERING POLICY

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1. Introduction

- 1.1 The purpose of this document is to provide Members and staff with an understanding of “Money Laundering”, to provide them with guidance on identifying money laundering and to set out the procedures they must follow to ensure the Council complies with its legal obligations.
- 1.2 Historically, legislation to tackle the laundering of the proceeds of crime was aimed at the financial and investment sector. However, it was subsequently recognised that those involved in criminal conduct and terrorism were able to ‘clean’ criminal proceeds through a wider range of businesses and professional activities. Criminals are becoming increasingly sophisticated in the techniques they employ and local authorities could be seen as softer targets.

2. What is Money Laundering?

- 2.1 Money Laundering is a term applied to “possessing or in any way dealing with or concealing the proceeds of any crime”, in essence, any method used to convert or exchange money or assets obtained from criminal activity into money or assets that are “clean”, in such a way that the “clean” money can no longer be linked back to the criminal activity. Examples of money laundering offences include tax evasion, theft, bribery, smuggling – including drug trafficking – and illegal arms sales. There are two types of offences which may be committed:

- Money laundering offences (see section 5.1).
- Failure to report money laundering offences (see section 8).

- 2.2 The main legislation covering anti-money laundering is:

- Sanctions and Anti-Money Laundering Act 2018
This provides the basis for the detection, investigation and prevention of money laundering and terrorist financing and enables sanctions to be imposed to support this.
- The Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017
These regulations set out the detailed requirements for organisations and individuals engaged in regulated activities.
- Proceeds of Crime Act 2002
This defines the money laundering offences and gives law enforcement agencies far reaching powers to deal with them.
- Terrorism Act 2000
This defines the primary offences related to terrorism funding and requires regulated businesses to report knowledge or suspicion of offences.

Other legislation includes:

- Criminal Finances Act 2017
- Terrorist Asset-Freezing etc. Act 2010
- Counter- Terrorism Act 2008
- Anti- terrorism, Crime and Security Act 2001

2.3 Money laundering can take many forms such as:

- Concealing, disguising, converting or transferring criminal property or removing it from the UK.
- Entering into or becoming concerned in an arrangement which you know or suspect facilitates the acquisition, retention, use or control of criminal property by or on behalf of another person.
- Acquiring, using or possessing criminal property.
- Investing the proceeds of crime into other financial products or the acquisition of property/assets.
- Generating money from a transaction if you have reasonable ground to believe the money will fund terrorism.

2.4 The channelling of the money often involves the following three stages:

- **Placement**
This is the movement of cash from its source - following a crime the monies are paid into a bank account or used to purchase an asset.
- **Layering**
Using a number of complex transactions to hide the proceeds of crime.
- **Integration**
Return of the illicit funds back into the accounts to make them appear lawful.

3. The Obligations of the Council

3.1 The law requires those organisations in the regulated sector and conducting relevant business to:

- Appoint a Money Laundering Reporting Officer ('MLRO') to receive disclosures from employees of suspected money laundering activity.
- Implement risk sensitive policies and procedures relating to customer due diligence, reporting, record keeping, internal control, risk assessment and management, the monitoring and management of compliance and the internal communication of such policies and procedures.

3.2 Not all the Council's business is 'relevant' for these purposes. It is mainly those carried out by Customer Services, Procurement, Finance and certain company and property transactions carried out by Legal Services. However, the safest way to ensure compliance with the law is to apply it to all areas of work undertaken by the Council. Therefore, all Members and employees are required to comply with the Council's Anti-Money Laundering Policy in terms of reporting concerns about possible money laundering.

3.3 The Money Laundering, Terrorist Financing and Transfer of Funds (Information on the Payer) Regulations 2017 and the Sanctions and Anti-Money Laundering Act 2018 require appropriate systems of internal control to prevent money laundering. These controls are required to help identify possible attempts to launder money or fund terrorism, so that appropriate action to prevent or report it can be taken.

- 3.4 Systems of internal control should help identify unusual or suspicious transactions or customer activity. These include:
- Identification of relevant risks and responsibilities under this Policy;
 - Provision of information to relevant persons on suspected money laundering risks;
 - Training of relevant employees on the legal and regulatory responsibilities for money laundering and control measures;
 - Measures to ensure that money laundering risks are taken into account in the day to day operations of the organisation.
- 3.5 Where money laundering is suspected the MLRO must report the matter to the National Crime Agency.

4. The Money Laundering Reporting Officer

- 4.1 The officer nominated to receive disclosures about money laundering activity within the Council is the Section 151 Officer who can be contacted as follows:

Section 151 Officer, Bridgend County Borough Council, Civic Offices, Angel Street, Bridgend, CF31 4WB

In the absence of the Section 151 Officer, the employee should contact the Deputy Head of Finance, Group Manager – Chief Accountant or the Group Manager – Budget Management, Bridgend County Borough Council, Civic Offices, Angel Street, Bridgend, CF31 4WB.

5. Identification of potential money laundering situations

- 5.1 It is not possible to give a definitive list of ways in which to identify money laundering or how to decide whether to make a report to the MLRO. The following are types of risk factors which may, either alone or cumulatively, suggest possible money laundering activity:
- Payment of a substantial sum in cash – anything which is £5,000 or more
 - Payment of lower cash sums where cash is not the normal means of payment
 - A new customer or use of new/shell companies
 - A secretive customer, e.g. refuses to provide proof of identity or other requested information without a reasonable explanation
 - Concerns about the honesty, integrity, identity or location of a customer
 - Illogical third party transaction such as unnecessary routing or receipt of funds from third parties or through third party accounts
 - Involvement of an unconnected third party without logical reason or explanation
 - Overpayments by a customer or payments of deposits subsequently requested back without a reasonable explanation
 - Absence of an obvious legitimate source of funds
 - Movement of funds overseas, particularly to a higher risk country or tax haven
 - Receipt of monies from countries outside the EU who do not have effective systems to counter money laundering or terrorist financing
 - Unusual transactions or ways of conducting business, without reasonable explanation
 - A transaction without obvious legitimate purpose or which appears uneconomic, inefficient or irrational

- Transactions with Politically Exposed Persons (PEP) or their family. These include Members of Parliament, Senior Government officials, Diplomats and high ranking officers in the Armed Forces
- The cancellation or reversal of an earlier transaction
- Requests for release of customer account details other than in the normal course of business
- Transactions at substantially above or below fair market values
- Poor business records or internal accounting controls
- A previous transaction for the same customer which has been, or should have been, reported to the MLRO
- Lack of 'traceability' of persons involved
- Individuals and companies that are insolvent yet have funds

These are just examples where money laundering can take place. If you suspect money laundering in another area you should consult with the Money Laundering Officer for advice.

6. Staff Responsibilities

- 6.1 All Members and employees are required to adhere to this policy but certain financial and legal services staff are more likely to have to comply with the customer identification procedure, '**due diligence**' and the record keeping procedures.
- 6.2 There are two levels of '**due diligence**'. The 2017 Regulations require due diligence to be carried out on a risk sensitive basis, these are:

'**Simplified due diligence**' - required where there is a low risk of money laundering. For example:

- If a company is listed on the stock exchange a company search and evidence of the listing would suffice. (Note, for example, a company search is often undertaken / may already have been undertaken for BCBC by the Procurement Section in conjunction with the Finance Department – so further enquiry may not need to be undertaken)
- Government bodies and organisations who are regulated by a professional body.

'**Enhanced due diligence**' should be applied for those customers with a high-risk status. For example:

- Remote transactions where the customer is not physically present.
- Organisations or individuals identified as high risk of money laundering or terrorism finance.
- Organisations which His Majesty's Revenues and Customs (HMRC) or other law enforcement authorities have identified as high risk.
- Organisations from countries identified as high risk.
- Where false or stolen documents have been provided as evidence.
- Customer is a Politically Exposed Person (defined as persons entrusted with prominent public functions either in the UK or abroad)¹ or an immediate family or associate of that person.

¹ Examples include: Government Ministers, Members of Parliament, Members of political party Governing Bodies, high ranking officers in the armed forces. This is not exhaustive and if unsure please contact Finance for more information

- A transaction is complex, unusually large, or with an unusual pattern.
 - Entities outside of the UK, particularly given the UK's departure from the EU on 31 January 2020.
- 6.3 Due diligence will not have to be considered for organisations regulated by the Financial Services Authority (FSA) or supervised by a listed professional regulator e.g. the Solicitors Regulation Authority.
- 6.4 Where due diligence investigations are undertaken, evidence of the customer identification (paragraph 6.7) and the record of the relationship / transaction should be retained for at least five years from the end of the business relationship of transaction(s). If there is a criminal prosecution they must be retained until the legal proceedings are concluded.

The records that must be kept are:

- Copies of the evidence obtained to satisfy the due diligence obligations and details of customer transactions for five years after the end of the business relationship
 - The supporting evidence and records in respect of the business relationships and occasional transactions which are the subject of customer due diligence measures or ongoing monitoring
 - A copy of the identification documents accepted and verification evidence obtained
 - References to the evidence of identity, including those of the 'beneficial owner', the individual that ultimately owns or controls the organisation on whose behalf a transaction or activity is being conducted
 - Transaction and business relationship records should be maintained in a form from which a satisfactory audit trail may be compiled, and which may establish a financial profile of any suspect account or customer
 - A written account of the risk assessment
- 6.5 If satisfactory evidence of identity is not obtained at the outset of the matter then the business relationship or one off transaction(s) cannot proceed any further.
- 6.6 The customer identification procedure (paragraph 6.7) must be carried out when the Council is carrying out 'relevant business' and:
- Forms a business partnership with a customer,
 - Undertakes a one-off transaction (including a property transaction or payment of a debt) involving payment by or to a customer of €15,000 (approximately £12,500) or more,
 - Undertakes a series of linked one-off transactions involving total payment by or to the customer(s) of €15,000 (approximately £12,500) or more,
 - It is known or suspected that a one-off transaction, or a series of them, involves money laundering. The **customer identification procedure** must be completed before any business is undertaken for that customer in relation to accountancy, procurement, audit and legal services with a financial or real estate transaction.
- 6.7 **Customer Identification Procedure.** Employees must:
- Identify the person seeking to form the business relationship or conduct the transaction (an individual or company / organisation),
 - Verify their identity using reliable, independent sources of information,
 - Identify who benefits from the transaction,
 - Monitor transactions to make sure they are consistent with what you understand about that person or country,
 - Understand the source of their funds,

- Ensure there is a logical reason why they would want to do business with the Council.
- 6.8 This applies to existing customers, as well as new ones but evidence for transactions more than 10 years old need not be retained unless any related investigation has not concluded. In these instances they must be retained until the National Crime Agency (NCA) has given permission to destroy the data.
- 6.9 The law does not prescribe the precise form in which the records are to be retained. However, they must be admissible as evidence in any trial. In practice, most courts will accept electronic scanned documents but there may be certain circumstances where this is not permissible.
- 6.10 Some of the information retained may constitute personal information in accordance with the Data Protection Act 2018 and the UK General Data Protection Regulation 2016 (GDPR). The legislation provides exemptions to permit the sharing of personal data in pursuance of anti-money laundering requirements.

7. Reporting Procedure

- 7.1 The MLRO is responsible for investigating the suspicion and reporting any suspected Money Laundering activity to the National Crime Agency.
- 7.2 If you know or suspect that money laundering activity is taking place, has taken place, or that your involvement in a matter may amount to a prohibited act under the legislation, this must be disclosed immediately to the MLRO. This disclosure should be done within hours of the information coming to your attention, not weeks or months later. **If you do not disclose information immediately, then you may be liable to criminal prosecution.**
- 7.3 Your disclosure should be made using the report form attached at Appendix 2. The disclosure report must contain as much detail as possible, for example:
- Full details of the people involved (including yourself if relevant), e.g. name, date of birth, address, company names, directorships, phone numbers, etc
 - Full details of the nature of your and their involvement
 - The types of money laundering activity suspected
 - The dates of such activities, including whether the transactions have happened, are ongoing or are imminent
 - Where they took place
 - How they were undertaken
 - The (likely) amount of money/assets involved
 - Why, exactly, you are suspicious of.
- 7.4 You should also supply any other available information to help the MLRO to make a sound judgement as to the next steps to be taken and you should enclose copies of any relevant supporting documentation.
- 7.5 If you are a legal adviser and consider that legal professional privilege may apply to the information, you should explain fully in the report form the reasons why you contend the information is privileged. The MLRO, in consultation with the Monitoring Officer, will then decide whether the information is exempt from the requirement to report suspected money laundering to the National Crime Agency (NCA).

- 7.6 Once you have reported the matter to the MLRO you must follow any directions given. You must NOT make any further enquiries into the matter yourself. Any necessary investigation will be undertaken by the NCA. All employees will be required to co-operate with the MLRO and the authorities during any subsequent money laundering investigation.
- 7.7 At no time and under no circumstances should you voice any suspicions to the person(s) whom you suspect of money laundering or to any other individual without the specific consent of the MLRO. If you do so, you may commit the offence of 'tipping off'.
- 7.8 Do not make any reference on records held to the fact that you have made a report to the MLRO. If a customer exercises their right to see their record, any such note would obviously tip them off to the report having been made and may render you liable to prosecution. The MLRO will keep the appropriate records in a confidential manner.
- 7.9 In all cases no further action must be taken in relation to the transaction(s) in question until either the MLRO or the NCA (if applicable) has specifically given their written consent to proceed.

8. Failure to report money laundering offences or suspicions

- 8.1 In addition to the money laundering offences, there are other offences of failure to report suspicions of money laundering. These are committed where, in the course of conducting relevant business, you know or suspect, or have reasonable grounds to do so (even if you did not know or suspect), that another person is engaged in money laundering and you do not disclose this as soon as is practicable to the MLRO.
- 8.2 Failure to report money laundering offences means that potentially any employee could be caught by the money laundering provisions if they suspect money laundering and either become involved with it in some way and/or do nothing about their suspicions.
- 8.3 Whilst the risk of contravening the legislation is low, it is extremely important that all employees understand their legal responsibilities, as serious criminal sanctions may be imposed for breaches of the legislation. However, an offence is not committed if the suspected money laundering activity is reported to the MLRO and appropriate consent obtained to continue with the transaction.
- 8.4 If you report suspected money laundering to the MLRO, you should not discuss it with anyone else: you may commit a further offence of 'tipping off' if, knowing a disclosure to the MLRO has been made, you make a disclosure to someone else which is likely to prejudice any investigation which might be conducted.
- 8.5 Even if you have not reported the matter to the MLRO, if you know or suspect that such a disclosure has been made and you mention it to someone else, this could amount to a tipping off offence. Be very careful what you say and to whom, in these circumstances. Any person found guilty of tipping off or prejudicing an investigation is liable to imprisonment (maximum five years), an unlimited fine, or both.

9. Consideration of disclosure report by the Money Laundering Reporting Officer

- 9.1 On receipt of a disclosure report, the MLRO will record the date of receipt on the report, acknowledge receipt of it and indicate when they expect to respond.
- 9.2 The MLRO will consider the report and any other available internal information they may consider relevant. This may include:
- Reviewing other transactions, patterns and volumes,
 - The length of any business relationship involved,
 - The number of any one-off transactions and linked one-off transactions,
 - Any identification evidence.
- 9.3 The MLRO will undertake any other inquiries deemed appropriate and will ensure that all available information has been obtained. In doing so, the MLRO will avoid any action which could tip off those involved, or which could give the appearance of tipping them off. Where appropriate, Internal Audit will investigate on behalf of the MLRO.
- 9.4 The MLRO may also need to discuss the report with the employee who reported the case.
- 9.5 The MLRO will then consider all aspects of the case and decide whether a report to NCA is required. He/she must make a timely determination as to:
- Whether there is actual or suspected money laundering taking place,
 - Whether there are reasonable grounds to know or suspect that money laundering is taking place,
 - Whether he needs to seek consent from the NCA for a particular transaction to proceed.
- 9.6 Where the MLRO concludes one or more of the above, he/she will record his/her conclusion (Appendix 3) and disclose the matter as soon as possible to NCA [online](#). The link to the website for reporting can be found in Appendix 4.
- 9.7 Once the MLRO has made a disclosure to NCA, their consent will be needed before you can take any further part in the transaction. Consent will be received in the following way:
- Specific consent,
 - Deemed consent if no notice of refusal is received from NCA during the notice period (i.e. 7 working days starting with the first working day after the MLRO makes the disclosure),
 - Deemed consent if refusal of consent is given during the notice period but the moratorium period has elapsed (31 days starting with the day on which the MLRO receives notice of refusal of consent) without any further refusal of consent.
- 9.8 The MLRO should make clear in the report to NCA if such consent is required, and if there are any deadlines for giving such consent, e.g. completion date or court deadline.
- 9.9 Where the MLRO concludes that there are no reasonable grounds to suspect money laundering this will be recorded appropriately and they will give consent for any ongoing or imminent transaction(s) to proceed.

- 9.10 All disclosure reports referred to the MLRO and subsequent reports made to the NCA must be retained by the MLRO in a confidential file kept for that purpose, for a minimum of five years.
- 9.11 The MLRO commits a criminal offence if they know or suspect, or have reasonable grounds to do so, through a disclosure being made to them, that another person is engaged in money laundering and they do not disclose this as soon as possible to the NCA.

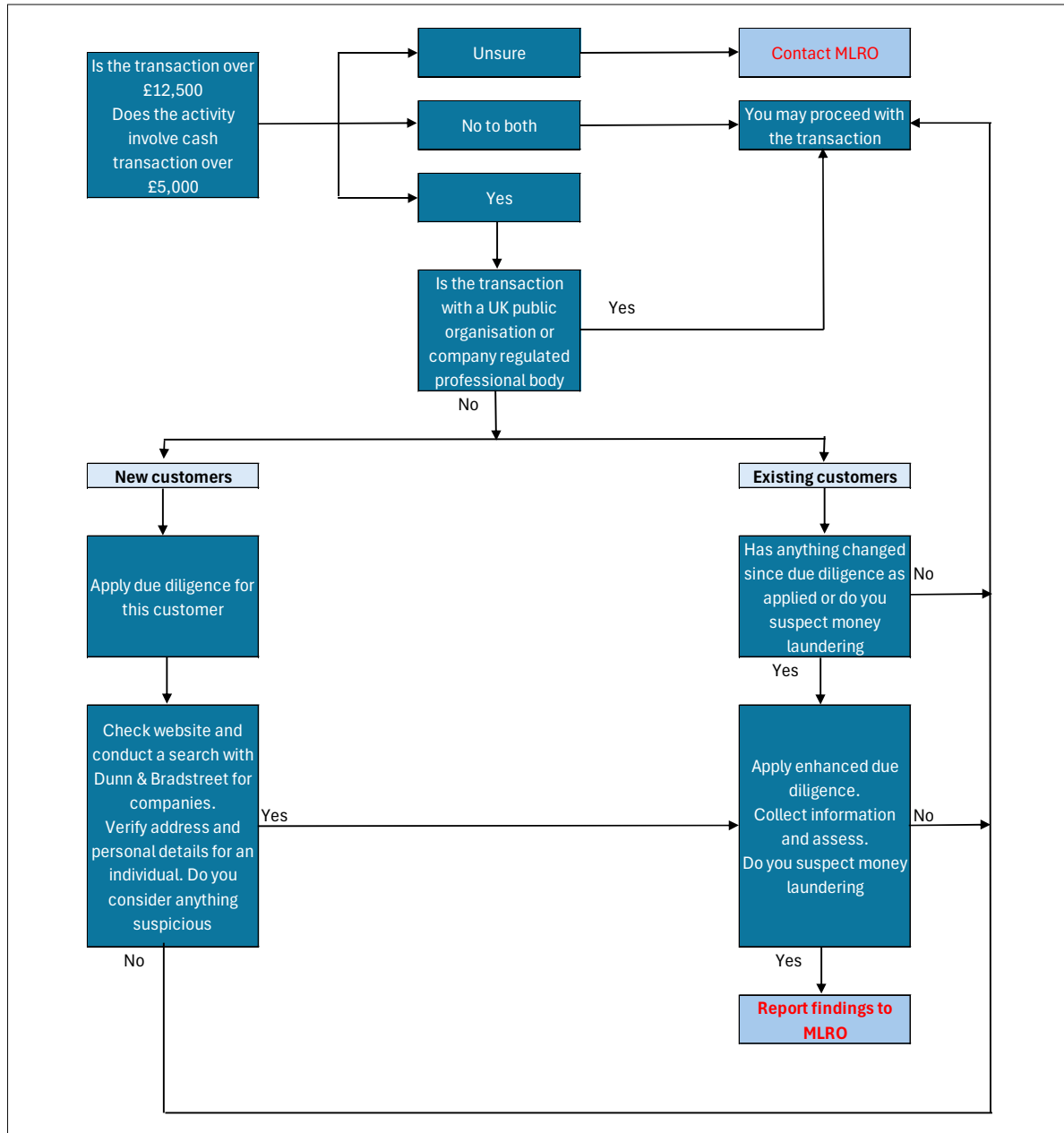
10. Training

- 10.1 The Council will take appropriate measures to ensure that employees are made aware of the law relating to money laundering and has in place e-learning as part of the wider Fraud Prevention e-learning module, and will arrange for key individuals most likely to be affected by the legislation to complete the e-learning module.
- 10.2 As part of the eLearning module staff are directed to this Policy, which will be updated regularly to reflect any legislative changes.

11. Conclusion

- 11.1 The legislative requirements concerning anti-money laundering procedures are lengthy and complex. This document has been written to enable the Council to meet the legal requirements in a way that is proportionate to the low risk to the Council of contravening the legislation. Should you have any concerns whatsoever regarding any transactions then you should contact the MLRO.
- 11.2 The policy will be reviewed as and when required e.g. following any legislative changes and reported to the Governance and Audit Committee, Cabinet and Council as appropriate.

APPENDIX 1

MONEY LAUNDERING CHECKLIST

APPENDIX 2**Disclosure Report to Money Laundering Reporting Officer - Re suspected money laundering activity**

CONFIDENTIAL	
Report to Money Laundering Reporting Officer	
Name of Reporter	
Job Title/ Department	
Phone No	
e-mail	
Details of Suspected Offence	
Name of Person Suspected	
Reason for Suspicion	
Have investigations been undertaken (Please detail)	
Have you discussed your suspicions with someone else. If yes please detail	
Have you consulted your suspicions with any Supervisory body e.g. Law Society	
Do you have any reason why this matter should not be reported to NCA?	
Is the transaction prohibited under the Section 18 Terrorism Act 2000 or Sections 327-329 Proceeds of Crime Act but has received Consent from the NCA.	
Please provide any additional information you consider necessary to support your submission.	
Signed:	Dated:
TIPPING OFF: it is a criminal offence to inform the suspect or anybody other than your line manager that you are making this report. Please speak to the MLRO if you need any guidance on what to say to any third parties who are chasing you in respect of a transaction.	

APPENDIX 3**Money Laundering Reporting Officer Report**

CONFIDENTIAL	
For Completion by MLRO	
Date report received	
Date acknowledged	
Are there any reasonable grounds for suspecting money laundering (please detail)	
Are there any reasons you do not intend reporting the matter to NCR (please detail)	
Date of report to NCA	
Please provide any additional information you consider necessary to support your submission.	
Reply from NCA	
Notice Period	
Moratorium Period	
Date Consent received from NCA	
Date consent given to employee to proceed	
Please provide any additional information you consider relevant	
Signed:	Dated:

THIS REPORT TO BE RETAINED FOR AT LEAST FIVE YEARS

APPENDIX 4

Reporting of incidents need to be made on- line to the National Crime Agency. These must ONLY be reported by the Money Laundering Reporting Officer as appropriate.

Guidance notes are available at :

Guidance on assessing for money laundering.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/686152/Money_Service_Businesses_Guidance.pdf

Guidance on the submission of a form to NCA

<https://www.nationalcrimeagency.gov.uk/what-we-do/crime-threats/money-laundering-and-illicit-finance>

Submitting the form:

<https://www.nationalcrimeagency.gov.uk/what-we-do/crime-threats/money-laundering-and-illicit-finance/suspicious-activity-reports>

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Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	SOCIAL SERVICES REPRESENTATIONS AND COMPLAINTS ANNUAL REPORT 2024/25
Report Owner / Corporate Director:	CORPORATE DIRECTOR, SOCIAL SERVICES AND WELLBEING
Responsible Officer:	SARAH TRIPP, COMPLIMENTS AND COMPLAINTS RESOLUTION MANAGER
Policy Framework and Procedure Rules:	There is no effect upon the Policy Framework and Procedure Rules.
Executive Summary:	The Social Services Representations and Complaints Annual Report for 2024/25 provides a review of the effectiveness of the social services complaints procedure and a summary of statistical information relating to the complaints and representations dealt with during the reporting period. The report includes - • numbers of complaints and representations received and resolved at each stage; • adherence to timescales; • the nature of the complaints and representations, and; • a summary of the lessons learned and actions taken by the Authority in relation to the complaints and representations received. The report also provides a cross-section of feedback across the Directorate in the form of comments and compliments.

1. Purpose of Report

- 1.1 The purpose of this report is to present to Cabinet the 2024/25 Annual Report on Social Services Representations and Complaints for approval. The Annual Report is attached as **Appendix 1**.

2. Background

- 2.1 Members will be aware that there is a requirement for local authorities to have in place procedures for considering any representations or complaints made in relation to the

discharge of their Social Services functions. This Annual Report relates to Social Services representations and complaints received that have been handled in accordance with the Welsh Government Complaint Guidelines “A Guide to Handling Complaints and Representations by Local Authority Social Services” which came into effect on 1st August 2014. The guidance supports the implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014. The Regulations outline a two-stage process in line with the Health Services Complaints Procedure.

2.2 The key elements of the Social Services Representations and Complaints Procedure are to:

- respond to Stage 1 complaints within 15 working days of the date of resolution (10 working days permitted to meet/discuss with the complainant to achieve a resolution).
- complete Stage 2 independent complaint investigations within 25 working days.
- work collaboratively with colleagues within the Directorate and in other Directorates of the Authority, the NHS and liaise with external bodies such as the Public Services Ombudsman for Wales and Care Inspectorate Wales to provide a ‘seamless’ complaints service.
- monitor performance of complaints handling, learning from complaints and using this learning to improve services for everyone who uses them.

Where complainants have exhausted the complaints procedure, the complainant has the right to refer their concern for consideration by the Public Services Ombudsman for Wales.

2.3 From the Annual Report, Cabinet will note that a strong emphasis is placed not just upon complaints, but also on the comments and compliments providing a balanced view. Services across the Directorate are keen to learn from the information gathered and use this to inform service improvements as well as future service developments.

2.4 The Annual Report also contains management information relating to complaints addressed in accordance with the Authority’s Corporate Complaints Procedure, together with information relating to the majority of complaints being addressed and resolved informally (prior to reaching Stage 1 of the complaints procedure). This important and significant work ensures concerns are resolved efficiently, with an agreed resolution whilst preventing complainants from being subjected to the formal complaints procedure unnecessarily.

2.5 Statistical information relating to the processing of Member Referrals is provided in the Annual Report. The Representations and Complaints Procedure does not preclude the right of an individual to approach their local Councillor, Member of the Senedd or Member of Parliament who all undertake an important role in handling

concerns and queries that individual constituents may have. Member Referrals can range from comments and queries to complaints.

- 2.6 The Annual Report also includes information arising from a cross-section of feedback generated from user/carer engagement exercises undertaken by a range of service areas.
- 2.7 The draft report was presented to the Corporate Overview and Scrutiny Committee for the first time on the 11th September 2025. The report was well received, with discussion focusing on aspects of the report including safeguarding and objectives for the year ahead.

3. Current situation / proposal

- 3.1 The Annual Report contains statistical information in relation to the representations and complaints received during 2024/25 for both Adult Social Care and Children and Family Services.
- 3.2 The number of representations (complaints, comments and compliments) received during the reporting period is broken down as follows:

27	Statutory Complaints
143	Concerns resolved outside of the complaints procedure
374	Compliments / Comments

This is a decrease in the overall number of complaints received over the last year: 170 in 2024/25 compared to 182 in 2023/24 and 191 in 2022/23. The report shows an increase in the number of compliments received compared to the previous reporting periods; 374 compliments received in 2024/25 compared to 362 received in 2023/24 and 257 received in 2022/23. Complaints staff continue to encourage all staff across the Directorate to record and log all compliments received.

- 3.3 An analysis of performance demonstrates that the Directorate continues to achieve an early resolution for the vast majority of complainants. The number of complaints resolved by this approach in 2024/25 was 143 (84%), in comparison to previous years, which was 141 (77%) in 2023/24 and 142 in 2022/23 (74%), demonstrating an improvement in performance. This evidences the continued focus on swift and effective complaints handling via a local, citizen centred, approach.
- 3.4 During 2024/25, 11 complaints were received by the Public Services Ombudsman for Wales; 9 were regarding Children and Family Services, while 2 pertained to Adult Social Care. Notably, none of these cases proceeded to investigation. This represents a decrease from 16 complaints in 2023/24, but is fairly consistent with the 10 complaints received in 2022/23.

- 3.5 During 2024/25, 3 complaints were addressed by the Corporate Complaints procedure. These complaints pertained to Children and Family Services and involved a subject access request, issues with residential financial charging, and a data breach.
- 3.6 During 2024/25, a total of 27 complaints were addressed in accordance with the Statutory Social Services Complaints Procedure; equating to 16% of all complaints received. 18 were resolved at Stage 1, and 9 progressed through to Stage 2. Stage 2 is the formal investigation stage requiring the appointment of an Independent Investigator. Information provided within the report suggests that there is a higher level of complexity in cases that proceed through the formal Stage 2 process.
- 3.7 The report highlights how the Directorate applies lessons learned from complaints within its service areas. During this reporting period, notable examples include collaborating with senior leaders and management to address recurring issues and trends. This involves following up on the completion of corrective actions and monitoring the implementation of impartial recommendations from Stage 2 Independent Investigating Officers. The complaints department also work alongside the Quality Assurance Officer to integrate insights from complaints into broader service improvement plans.
- 3.8 The report highlights a wide range of feedback from people who use social care services which is used to inform service development. The Annual Report details a cross section of the feedback received for a range of services across the Directorate.
- 3.9 The number of Member Referrals received for both Adult and Children and Family Services during the reporting period was 131; 101 of which were in relation to Adult Social Care and 30 in relation to Children and Family Services. This is a decrease of 3% from the 135 members referrals received in 2023/24.
- 3.10 Independent advocacy support services across Adult Social Care and Children and Family Services continues to be a priority, and the annual report provides details of advocacy activity across both service areas, together with a summary of comments and outcomes achieved.
- 3.11 The majority of the work carried out within the Social Services Representations and Complaints Procedure is undertaken in consultation with Legal services, and there is a strong working relationship between the social services complaints staff and the Council's legal department.
- 4. Equality implications (including Socio-economic Duty and Welsh Language)**
- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies,

strategies, services and functions. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The report assists in the achievement of the following corporate 5 ways of working under the Well-being of Future Generations (Wales) Act 2015:

Involvement	The report provides a comprehensive overview of the feedback and concerns expressed by people who use social services during the reporting period 2024/25. It offers valuable insights into the perspectives and experiences of individuals accessing social services.
Long term	There will be a positive long-term impact from this report by transparently addressing representations and complaints. The report lays a foundation for continuous improvement in service delivery. It also promotes accountability and highlights areas for refinement, fostering a culture of long-term responsiveness and accountability.
Prevention	The report supports the Council's objective to help people and communities to be healthier and more resilient. Our community engagement encourages self-sufficiency and collaborative solutions, reducing the need for extensive reliance on resources.
Integration	This report is integrated across the Directorate in both Adult Social Care and Children and Family Services as set out above and is required under the Social Services Complaints Procedure (Wales) Regulations 2014.
Collaboration	The guidance that underpins this report has an emphasis on achieving service user satisfaction. Staff across the Directorate have worked collaboratively with the people of the county borough to 'put things right' and secure positive outcomes for individuals and families wherever practicably possible.

6. Climate Change and Nature Implications

- 6.1 There are no climate change or nature implications as a result of this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 All staff have a duty under the Council's Safeguarding Policy to safeguard and promote the wellbeing of children, young people and adults at risk of abuse or neglect, to ensure that effective practices are in place throughout the Council and its commissioned services. The complaints department support safeguarding activity by ensuring that any complaints containing safeguarding concerns are referred to the relevant safeguarding teams in a timely manner.

8. Financial Implications

8.1 There are no direct financial implications arising from this report.

9. Recommendation

9.1 It is recommended that Cabinet approve the Annual Report on Social Services Representations and Complaints for 2024/25.

Background documents

None

SOCIAL SERVICES REPRESENTATIONS AND COMPLAINTS



**ANNUAL REPORT
2024 / 2025**

September 2025

**SOCIAL SERVICES
REPRESENTATIONS AND COMPLAINTS 2024/25**

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1. INTRODUCTION

This report covers the period 1st April 2024 to 31st March 2025 and relates to representations and complaints received by the Social Services and Wellbeing Directorate regarding services and support provided by Adult Social Care and Children and Family Services.

Local Authority Social Services are required to maintain a procedure for considering complaints and representations (comments and compliments). Any member of the public, including a child who has received or was entitled to receive a service from Social Services may make a complaint. The purpose of this report is to provide a review and statistical analysis of the complaints, comments and compliments received by Social Services during the reporting period.

This is the tenth Annual Report relating to representations and complaints received by the Directorate which have been handled in accordance with the Welsh Government Complaint Guidelines “*A Guide to Handling Complaints and Representations by Local Authority Social Services*” which came into effect on 1st August 2014. The guidance supports the implementation of the Social Services Complaints Procedure (Wales) Regulations 2014 and the Representations Procedure (Wales) Regulations 2014. The Regulations introduced a two-stage process which replaced the previous three stages and also brings the process for Social Services into line with the NHS Complaints Procedure.

2. SUMMARY OF THE STATUTORY COMPLAINTS PROCEDURE

“A guide to handling complaints and representations by Local Authority Social Services” (Welsh Government).

Stage 1 – Local Resolution: An emphasis is placed upon swift resolution of the majority of complaints. An offer to discuss the complaint with the complainant must be made to attempt to resolve matters. This discussion must take place within 10 working days of the date of acknowledgement of the complaint. Where this approach leads to mutually acceptable resolution, the Local Authority must write to the complainant with details of the terms of the resolution within 5 working days of the date on which the complaint or representation was resolved.

Stage 2 – Formal Investigation: Appointment of an Independent Investigator is made and for complaints relating to Children and Family Services an Independent Person must also be appointed to oversee the investigation process. Collaborative arrangements have been established (on a reciprocal basis) with neighbouring Local Authorities to share details of Independent Investigating Officers and Independent Persons able to undertake investigations.

The investigation must be completed, and a full written response issued to the complainant within 25 working days. Where this is not possible, the Authority must write to the complainant to explain the reason for the delay and ensure the response is issued as soon as possible and no later than 6 months from the date of receipt of the complaint.

3. THE PUBLIC SERVICES OMBUDSMAN FOR WALES

Where complainants have exhausted the complaints procedure, they have the right to refer their concern for consideration by the Public Services Ombudsman for Wales (PSOW).

The PSOW provides an external independent service for the purpose of considering complaints made by members of the public in relation to all Local Authority services, including Social Services. The PSOW also has jurisdiction to examine and determine complaints of injustice as a result of maladministration on the part of the Local Authority.

The Ombudsman will normally require complainants to have sought redress, in the first instance, via the Local Authority's complaints procedure prior to accepting and investigating a complaint of maladministration on the part of the Local Authority.

During 2024/2025, **11** complaints were received by the PSOW's Office, **9** of which related to Children and Family Services, **2** in respect of Adult Social Care. None were progressed to investigation.

4. MEMBER REFERRALS

The Representations and Complaints Procedure does not preclude the right of an individual to approach their Local Councillor, Assembly Member or Member of Parliament. They undertake an important role in handling concerns and queries that individual constituents may have. Collectively, these are called Member Referrals and can range from comments and queries to complaints.

If an Elected Member considers it to be inappropriate to deal with a concern, the matter can be referred for consideration under the Complaints Procedure. With effect from 2017, only those referrals received from Elected Members have been recorded by Democratic Services. Cabinet Members may liaise with Assembly Members and Members of Parliament to complete referrals but this data is no longer recorded.

During 2024/2025, Member referrals were received as follows:-

Table 1

2024/2025	Number of Referrals
Adults and Prevention & Wellbeing	101
Children and Family Services	30
Total	131

5. COMPLAINTS AND REPRESENTATIONS RECEIVED FROM THE CITIZEN VOICE BODY “LLAIS”

The Citizen Voice Body (CVB) promotes public engagement in the planning, designing and delivery of services and plays a key role in ensuring health and social care services in Wales are of a high quality and are responsive to the needs of citizens. The CVB operates under the name “Llais” and became operational from 1st April 2023. Llais is an independent body which provides a free Advocacy service to support members of the public who may wish to raise a concern. Llais also provide advice and information on the most appropriate course of action. During the reporting period, **6** complaints were received from Llais advocates; **5** of which related to Children and Family Services and **1** in respect of Adult Social Care.

6. ENGAGEMENT AND FEEDBACK

In addition to receiving comments and compliments from service users and their relatives/carers, the Directorate also issues a range of feedback questionnaires from across service areas. A cross-section of the feedback during 2024/2025 is set out below:

Adult Social Care

The **Telecare** survey is forwarded to all people who have accessed a Local Authority Domiciliary Care Service and have an active Care and Support Plan.

Between 1st April 2024 and 31st March 2025, **785** surveys were distributed, of which, **165** responses were received. This is a **21%** response rate, which is a decrease from the response rate of 34% in the previous year.

General comments provided include:

I have mobility issues and a great fear of falling and could be on the floor for hours. Telecare is like a security blanket.

Excellent services and everyone helpful and considerate.

A from your organisation recently visited my mum to set up the emergency response system. Everything went perfectly but I just wanted to say what a great job A did in explaining the system and how it all works. We all found him very concise, very knowledgeable and very helpful! A is certainly a credit to your team and I would be grateful if you could pass on both mine and my mother's thanks.

Happy with the peace of mind that you are on call.

The chap who was here was very polite and patient. Spent a long-time explaining things to us - he was so thorough. He was very pleasant too. He tidied up after installing the key safe.

We are grateful. We only set the fall watch off by mistake, but the response time was impressive. Thank you.

The **Early Intervention and Prevention Hub** provides all contact for adult health and social services. Both the public and professionals can access the hub, which provides:

- information, advice and assistance including direction to third sector and community services when they are the best places to address well-being needs;
- and multi-disciplinary triage including mental health services and urgent community response for people who need assessment or immediate service.

Comments include:

I really appreciate all the support from you for us as a family.
You have been so lovely and you have been so nice, you have been very understanding, I was dreading making this call but you have listened to me.
Honestly B this is life changing I can't thank you enough for everything you have done.
C is very helpful, she has been excellent, helpful and supportive. She is professional and is approachable. Her communication is always clear, and she has tried her best to get the best package of care for us and I really appreciate it. She's punctual and if she promises to do something, she always follows it up and keeps me in the loop and notifies me of things.
I can't thank you enough for being so kind and listening to me and helping me.

The **Commissioning for Complex Needs** team play a crucial role in effectively engaging with all stakeholders and individuals to ensure support is provided in line with each person's outcomes and aspirations. The team offer proportionate, evidence based, strengths based, outcome focused assessments and reviews, which enable people to achieve their aspirations whilst maximising resources.

Comments provided include:

Thank you for keeping me updated, we have been to Tenby for a couple of days and have just got home, it will be sad seeing you go, you have been a great help to us all and we will miss you, thank you for everything you have done to help us.
Just a little email to let you know about a compliment given today around good practice and professional standards in relation to conduct for a NHS Continuing Healthcare Assessment, carried out in Brocastle. Extremely stressful time for family, good outcome, son had an awful experience with his father going through the same process beforehand but felt for his mother it was conducted very professionally.
Thanks for all your help and support for D and myself at both meetings, which was really important for D's future happiness and independence.
Thank you for your help on this also. Your support along with E has been invaluable.

Bryn Y Cae is a purpose built residential home, which provides residential and respite care for older persons with assessed care and support needs. The service provides short term

reablement placements for up to 6 weeks to prevent hospital admission or step down; this is an integrated service provided by the local authority and the health board. It has 37 bedrooms; 9 of which are within the dementia unit of the home, 22 are in the frail elderly units and 6 are on the re-enablement unit. The dementia unit has nine bedrooms, all of which have en-suite facilities. They come furnished or residents can choose to bring in their own furniture. Staff at Bryn Y Cae encourage families to assist their relative to personalise their room as much as possible. There is an assisted bathroom and separate shower room, a reminiscence room, large lounge/activity room and one quiet lounge. There is also a dining room with access to a secure garden area. Staff at Bryn Y Cae are committed to supporting residents to lead a fulfilled life as possible, in an environment which:

- Places value on individual beliefs, choices and aspirations.
- Promotes maximised independence and community integration.
- Provides a safe, nurturing and homely environment,

Comments provided include:

To everyone on the butterfly unit. Thank you all so much for your care in looking after everyone on your unit.

F told me how absolutely wonderful all the staff have been since G has been there. She said they were all really caring but not just to G but to the whole family and they really appreciated it.

Thank you for everything you do for Mum and making it such a joy for her at this time of her life. We can't thank you enough.

Thank you for the incredible job you do looking after our loved ones. You all have compassion, patience, and an exceptional level of dedication. We cannot express how grateful we are knowing your looking after all residents (especially H). Hoping you all have a wonderful Christmas. Best Wishes.

The home is wonderful; I can't praise you and your team enough.

Children and Family Services

The **West Locality Safeguarding Hub** work with children from pre-birth to 18 years of age. The team manage care and support, child protection, Public Law Outline and court cases. The team work closely with children and families and partner agencies to facilitate plans in an attempt to facilitate positive change for families. The team analyse and manage risk to ensure children remain at home where it is safe for them to do so.

Comments include:

Just a big thank you for getting who I am and who I could be and for being patient. I'm really grateful and thankful for all your help. All I can say is I got a house, my son, my life back and I just need my grandchildren back and I be completely happy. But again thank you I, I don't know how you do a job like you do.'

As you know J has been a huge part of our lives since February and she has been outstanding. J has everything a family could ever need in a social worker, she's professional but also very down to earth, non-judgemental, supportive and goes above and beyond in all aspects of her work. As you know we as a family have been involved with children's services on and off for years. We've had some awful social workers, some ok but only just, others that whilst have been nice they've been for their mandatory visit and that's it for another 2 or 6 weeks. J however, checks in several times a day even when she probably isn't required to, she has a passion for her job that you rarely see and above all she's very compassionate and empathic and shows that social workers are actual human beings too rather than "robots" who come in, find fault and leave again. My confidence in my parenting regularly takes a tumble but she's always there reassuring me and making me feel better about myself. Again, as you are aware I find it very difficult to converse with people causing a massive reluctance in her engaging. However, J has made a lot of headway with K and K often seeks out J when she's distraught and in need of someone to speak to. K has made it clear that when J leaves, she will not work with anyone else and unfortunately, I believe this to be true. I fear that this will set K back even further and will be detrimental to her mental health and her trust issues with people, she needs consistency and right now other than myself, J is the only other person giving her that. My other children all love J too and love seeing her and speaking with her. I have voiced my concerns to the multi-agency disciplinary team and the majority, if not all are extremely concerned as to what K will do and how she will cope with no longer having J. K is nowhere near ready to come away from her. Finally, I'd like to finish by again saying how amazing J is, she is a great asset to your team and I know that she will go extremely far in life. She's got everything and more required in a social worker. I'm begging and pleading that you keep her on the team for not only K's sake but also the massive difference she will make to the lives of many families in the future, and you will have the pleasure of saying - she's one of my team and I knew from the off she would make a massive difference 😊.

I just wanted to say how impressed I have been by the [local authorities] support for L and her parents and in particular M's work on this case. [The Judge] was very complimentary about his work on this case, and I just wanted you to be aware. There is so much criticism out there I just wanted you to know that others do recognise and appreciate all the hard work that you do.

Would just like to say you've made a good impression on N, she doesn't talk fondly of many adults but she always points out that you actually talk about her, her general life & interests etc & seem to listen to what she says. Thank you

Bridgend County Borough Council's **Child Disability and Transition** team supports disabled children and young people, including those in care, as they transition into

adulthood. This team provides support, including financial assistance for meeting care needs, and aims to facilitate smooth transitions from childhood to adulthood.

Comments include:

I just wanted to say thank you for everything you did for me and don't say it's your job because you went above your job to help me so thank you.

Hope you have the best Christmas because that is what you make mine. You truly are the best and extremely awesome.

We hope you and your family have a fantastic festive period. Thank you for all your amazing work. I know he and we really appreciate it.

You were very supportive of staff and O was always on the end of the phone if we needed anything. You also had a very good relationship with P which I felt kept him in a good place and ultimately had a very good outcome.

The **Kinship Care & Permanence** team supports kinship carers, birth parents, and children in special guardianship orders. They provide financial support, home visits, advice, support groups, fostering training, and placement support. The team also assists with communication with other organisations and birth parents.

Comments include:

Thank you for today. Please pass on to Q also. We felt listened to, heard and understood, it's been a long time since we have felt appreciated. Have a wonderful Xmas x

I visited a carer yesterday, R, and she said that the support you are providing to the young person in her care is brilliant, and she couldn't speak highly enough of you. I just wanted to email to say thank you for the work that you do, it is appreciated and makes such a difference to our carers and young people.

I just wanted to share how positive the support from fostering has been over recent weeks. As you know there are challenges in both teams but it certainly feels like a joint approach to address matters rather than it being a [social work team] issue, so thanks S for your hard work and support. I also want to say how impressed I am of T. She is so helpful, upfront and child focused. She has been a great support on several cases recently.

I would like to say that since U has worked with V he is a changed child, he has really helped him. We are really sorry to see him leave us. He has been a very good asset to myself and W. Thank you very much.

Adult Social Care - Statutory Independent Professional Advocacy (IPA)

Providers

Bridgend County Borough Council (BCBC) commissions a 'Hub & Spoke' service model for advocacy which includes:

- Bridgend Voice & Choice (BVC) Advocacy Contact Hub: PromoCymru;
- Specialist Learning Disability Provider (statutory and non-statutory): People First Bridgend, and;
- Specialist Communications/Accessible Support Provider: Mental Health Matters Wales

Performance Data

During the 2024/25 reporting period, the BVC Advocacy Hub received an average of 35 contacts per quarter, which was down from an average of 50 per quarter the previous year. Whilst the volume of connected contacts has varied, peaking in 2021 and 2022, there has been a marked and consistent increase in the proportion of contacts resulting in formal case records. This suggests that although overall contact demand has not maintained the numbers seen between 2021 and 2022; the helpline is now dealing with a greater proportion of contacts requiring intensive advocacy intervention.

Professionals remained the primary source of helpline enquiries, emphasising their crucial role in facilitating advocacy access, but potentially demonstrating that wider knowledge of the role and rights to advocacy is needed.

Referrals and contacts to the BVC Hub are triaged and referred to the most appropriate support service. During the reporting period, 47% of BVC helpline cases were referred for Independent Professional Advocacy (IPA), ensuring those with statutory advocacy needs received specialist support. 33% of cases involved signposting or transfer to other specific specialist services. 80% of all cases received relevant information and/or advice, indicating that the vast majority of service users benefited from tailored guidance, either as a standalone intervention or alongside further support. Across 2024/25, BVC signposted cases to a total of 48 individual organisations.

Overall, whilst connected contacts have declined in volume; the significant rise in conversion rate demonstrates fewer, but more complex, cases required intensive support.

Most BVC helpline enquiries relating to the adult social care process centred around requests for information, advice, and assistance usually indicating service users wanting to enter the care and support process. Care and carer assessments, as well as care and support planning, also saw increased activity mid-year, mirroring the heightened activity on the helpline from professionals seeking advocacy support in navigating and accessing services during this period. Safeguarding and care reviews remained steady across the year, whilst complaints and child protection issues, though less frequent, were present throughout.

Children and Family Services – Statutory Independent Professional Advocacy (IPA)

Provider

Tros Gynnal Plant (TGP) is an established and long-standing advocacy provider in the Bridgend area, under a regional contract for Cwm Taf Morgannwg led by Rhondda Cynon Taf County Borough Council.

Active Offers & Issue-based Advocacy (IBA)

During the year, 133 children and young people accessed the Issue Based Advocacy (IBA) service, presenting with 172 issues. This represents a decrease of 12 young people compared to 145 who accessed the service in the previous year. Of the 133, 58 were accessing the service for the first time, down from 76 first-time users in the previous year.

There was also a small decrease in Active Offers (AO), with 66 received this year, compared to 71 last year. A total of 132 children and young people were eligible for the AO during the year, a 49% reduction from 262 the previous year. Of those eligible, 66 were referred for AO, meaning that 50% of eligible individuals received a referral, compared to just 27% the previous year. While this increase is encouraging, we recognise that further improvement is needed.

To improve this, TGP have delivered presentations to social work teams to increase the understanding of the local authorities' responsibilities in promoting the AO. Additionally, TGP distributed literature via email outlining referral pathways, the AO and the advocacy process. These efforts have had a positive impact, as several IBA referrals were received as a direct result.

The decrease in the number of children and young people in the child protection arena accessing advocacy services may, in part, be attributed to the decline in young people becoming eligible for the AO.

7. STATISTICAL INFORMATION 2024/2025

Number of Representations Received and Timescales

Table 2

Total Number of Complaints and Representations Received Statutory Complaints Procedure – 1st April 2024 to 31st March 2025		
Complaints	Adult Social Care	Children and Family Services
Informal (resolved outside of the formal complaints procedure)	41	102
Stage 1	7	11
Stage 2	3	6
Total Complaints	<u>170</u>	

Compliments	Adult Social Care	Children and Family Services
	252	122
Total Compliments	<u>374</u>	

A total of 182 complaints were received in the previous period 2023/24. The table above shows a **decrease in complaints** received during this reporting period, – **6.5%** compared to the previous year.

A total of 362 compliments were received in the previous period 2023/24. The table above shows an **increase in compliments** received during this reporting period, + **3%** compared to the previous year.

Timescales

98% of all complaints were acknowledged by the complaints department within 2 working days during this reporting period.

At Stage 1, the complainant should be contacted within 10 working days of the acknowledgment date by the individual investigating the complaint. This person is usually the relevant manager responsible for the service area related to the complaint. After resolving the complaint, a written response should be provided on behalf of the Local Authority within 5 working days of the discussion or meeting.

During the reporting period, 16.6% of complaints led to a meeting or telephone call held within 10 working days. It's pertinent to acknowledge that this figure reflects mutual availability; as there are times when managers may be busy or on leave, or the dates offered may not be suitable for the complainant, leading to the meeting occurring later than 10 working days.

Overall, **67%** of Stage 1 complaints were resolved within the timescales outlined in the complaints policy. This is the percentage of complaints that received a written response within 5 working days following the telephone discussion or meeting. If no meeting or call took place, compliance is calculated based on those who received a written response within 15 working days from the start date of the complaint. This is an increase from the 47% completed within timescale in the previous year.

At Stage 2, the guidelines specify that an investigation must be completed, and a full written response issued to the complainant within 25 working days of the start date. Unfortunately, no Stage 2 complaint investigations were completed, and reports issued within this timeframe. This is consistent with the previous year. The complexity and seriousness of the complaints that reach this stage have resulted in investigations exceeding the 25-working day limit. The severity and intricacy of the issues investigated during the reporting period necessitated thorough and detailed investigations, requiring more time to ensure all aspects are carefully considered.

Several independent investigations during the reporting period involved interviews with former staff members who have since left the local authority. In these cases, the complaints department must co-ordinate with Human Resources (HR) to obtain contact details and encourage the voluntary participation of former staff members, which can take additional time. As former staff no longer have access to social work systems, they must rely on their recollections of events, making it more challenging to obtain the accurate and detailed accounts needed for the investigation.

Another factor contributing to delays in completing complaint investigations is the complexity of the complaints themselves. A significant proportion of complaints are highly detailed and involved multiple complex issues. During the reporting period, **41%** of complaints covered multiple issues, which is relatively consistent with the 46% reported the previous year. While we strive to meet the timescales outlined in our complaints policy, the complexity of these complaints necessitates a thorough approach to ensure meaningful and positive outcomes for complainants. Additional time is required to ensure all aspects of each complaint are fully considered and addressed.

Additionally, **14%** of complaints involved multiple teams within the local authority, an increase from 9.5% the previous year. This necessitates co-ordination among various service managers, further prolonging enquiries and the investigation process.

When assessing compliance with timescales, it is essential to consider the substantial increase in complaint volumes during the 2022/23 reporting period. That year saw a 158% rise in complaints compared to the previous year. Although there was a slight decrease of 5% in 2023/24, followed by another decrease of 6.5% in 2024/25, the overall number of complaints remains significantly higher than when Welsh Government last reviewed the application of these timescales in 2014.

Despite these ongoing challenges, there has been an improvement in the timeliness of responses to Stage 1 complaints, reflecting the directorate's ongoing efforts to streamline processes, enhance coordination, and provide more timely responses to those raising concerns. While progress at Stage 1 is encouraging, it is clear that further work is needed to ensure compliance with timescales. To support this effort, we are reviewing internal workflows with the goal of refining and accelerating our processes, especially in light of the complexity of complaints received.

To support adherence to timescales at Stage 2, we are actively working to expand the pool of available independent investigators. This includes sharing information about both new and experienced investigators with neighbouring local authorities, as well as exchanging insights into the quality of investigatory work conducted (while maintaining complainant confidentiality). Additionally, we are exploring opportunities to attract qualified candidates to these roles. This would help alleviate pressure on existing resources, support adherence to timescales, and ensure the continued delivery of high-quality investigations.

Overall Analysis

Early Resolution of Complaints

In line with the Welsh Government Guidance “A guide to handling complaints and representations by Local Authority social services” Bridgend County Borough Council, wherever possible, focuses on early resolution of complaints, with **84%** of complaints resolved informally during this reporting period (pre the complaints procedure). This is an increase from the 77% of complaints resolved informally in 2023/24. The high percentage continues to reflect the Directorate’s commitment to achieving early resolution for complainants.

Some of the feedback and comments received in relation to staff working within the Social Services Complaints Department are as follows:

Well done W, [the] recognition of the professional way you lead complaints for us is very well deserved.
X, you’ve been exemplary.
Further to today’s quarterly performance meeting, can I express my gratitude to Y for supporting me in my role to make sense of emerging themes across the Directorate and subsequent triangulation with Compliments and Complaints data. Y is consistently responsive to information requests and more recently set up regular meetings between us to ensure that we evaluate the findings we critically reflect on to improve quality across the Directorate and promote excellence wherever possible.
Once again, I appreciate your help.
Thank you for responding so quickly.

Complaint Outcomes (Statutory)

In-line with Welsh Government guidance on “*A guide to handling complaints and representations by local authority social services*” complaints resolved at the local resolution stage are only closed by mutual consent, with all parties confirming that a resolution has been agreed. The three most common themes during this reporting period were:

- Lack of support (**18%**)
- Staff conduct (**16%**)
- Lack of communication (**14%**)

Further information on themes can be found on Page 17 and 18 of this report.

Stage 2 complaints are investigated by an Independent Investigating Officer (IIO) independent from the Council. Complaints relating to Children and Family Services must also be overseen by an Independent Person (IP).

The outcome of Stage 2 complaints resolved within the reporting year are as follows:

Table 3.

Complaint Outcomes (St. 2 – Statutory Complaints Procedure)			
Outcome	Adult Social Care	Children and Family Services	Total
Not Upheld	1	3	4
Partially Upheld	1	3	4
Upheld	1	0	1
Total	3	6	9

The following complaints were upheld following independent investigation:

Children and Family Services

Lack of Care and Support Package.

The Independent Investigating Officer (IIO) concluded that there was no Care and Support package in place despite the allocation of Direct Payments. The Child Disability and Transition team did not implement appropriate support.

No Carer's Assessment for Parents.

The investigation established that parents received no support as carers. The Child Disability and Transition team did not act on a referral for a Carer's Assessment.

Funding Change from a Commissioned Service to Direct Payments.

The IIO found no clear rationale in records or in the information elicited at interview for the proposed change.

Proposed Transition Despite Stable Placement.

The IIO concluded that the current placement at Ty Teulu was successful, yet Bridgend Resource Centre was proposed to complainants in care planning. The IIO concluded that this was inconsistent with the young person's needs.

Respite Not Offered.

The investigation identified there was no updated discussion of respite since 2021, and that respite needs were not considered in recent care and support planning.

Inadequate Support Following Allegation Against Foster Carer.

The IIO found gaps in process, communication, and record-keeping. The investigation established that support was insufficient and that the safeguarding process was mishandled.

Failure to Support Child During Investigation.

The IIO found evidence of delayed contact and a lack of support. The investigation concluded that the child was not properly supported and the safety plan was not reviewed.

Disputed Strategy Meeting Communication.

The IIO established during staff interviews that there were conflicting statements made about police contact. The complaint was upheld due to poor communication and follow-up.

Poor Safety Planning.

The IIO found no evidence of adequate safeguarding documentation and communication was lacking.

Lack of Transparency in Safeguarding Process.

The IIO concluded that the complainant was not kept informed of the process. There were communication failures; the IIO concluded that the complainant should have been appropriately informed of the process and there were missed opportunities for support.

Loss of Foster Carer's Records.

The IIO found inconsistencies around record submission and management. The investigation established that the foster carer records were mishandled and that the record keeping practices were inconsistent with policy.

Adult Social Care**Lack of Communication About Activities.**

The IIO found that the complainant did not receive email updates on son's activities at Bridgend Resource Centre.

Decision on Direct Payment Top-up Delay.

The IIO established that following the notice given from the previous provider, the family were not offered timely alternatives. The IIO concluded that the communication delay was unacceptable; the family were left with no options and were required to fund the direct payment top-up for the new provider.

Assessment Process Delays.

The IIO established that there was a delay in assigning a knowledgeable social worker. The delays were due to staffing issues.

Bridgend Resource Centre (BRC) lacking in Capacity and Suitability.

The IIO established that, following the notice given from the previous provider, the new provider (BRC) was not appropriate for the complainant's son's needs and there was no availability for the required five days a week.

Unresolved Funding Issues and Reduced Direct Payment hours.

The investigation established that, following closure of the previous provider, there was uncertainty regarding the new placements funding. This resulted in a lack of stability or clarity for the complainant's son's care.

Improper Transition Planning.

The IIO established that a move to Bridgend Resource Centre was suggested without proper assessment or planning, causing the complainant and family uncertainty.

Misinformation received During Assessment Process.

The IIO found that the agency social worker misinformed the family and failed to appropriately coordinate the case. The IIO found that there was an inadequate understanding of policies and poor communication.

Social Services Complaints**Delay in Stage 1 Complaint Handling.**

The IIO found a delay in requesting daughter's consent and confusing communication. Additionally, the sign off process contributed to delays and complainants' frustration.

Corporate Complaints Procedure

There are situations where certain aspects of a complaint do not fall under the Social Services Statutory Complaints Procedure; in these cases, the Authority's Corporate Complaints Procedure is utilised instead. During the 2024/25 period, the Local Authorities' Corporate Complaints team received **3** complaints related to Social Services, which were appropriately addressed according to the Corporate Complaints Procedure. The first complaint concerned a Subject Access Request (SAR) made under the Data Protection Act. The complainant expressed concern that information she expected to be recorded was not provided. The second complaint came from the director of a young person's residential home and was regarding the council's lack of response to the company's proposed price increase. The third complaint, which was Upheld, involved a data breach in Children and Family Services. The Council Annual Complaints Report details these complaints, along with others received across various directorates, in accordance with the Corporate Complaints Policy.

Complaint Themes

The nature of all complaints received to the directorate varied, and included:

Table 4.

Themes of complaints received 2024/25	Percentage %
Lack of support	18%
Staff conduct	16%
Lack of communication	14%
Failure to act in a way the complainant believes council should have	9%
Case management/review decisions	7%

Breach of confidentiality	5%
Request	5%
Factual Inaccuracies/False Accusations	4%
Other	3%
Frequent changes of staff	3%
Delays	2%
Child/Adult protection process/outcome, decision for registration or de-registration	2%
Removal and reduction of service	2%
Safeguarding concerns raised	2%
Court order not followed	1%
Issue with assessment	1%

Complaints regarding a lack of support

As seen in Table 4, the largest proportion of complaints received during this period (**18%**) centred around a perceived lack of support in various areas critical to our responsibilities under the Social Services and Well-being (Wales) Act 2014. This theme reflects a range of concerns expressed by service users, carers, and families regarding the adequacy of the assistance provided.

In Adult Services, complainants reported struggling to manage their caring responsibilities and often felt overwhelmed and unsupported. Family members also voiced concerns about the level of involvement and support provided to their vulnerable relatives, believing that social services should be doing more to meet their needs.

In Children and Family Services, a recurring issue was the lack of support for families of disabled children and those caring for children with challenging behaviours. Parents described feeling isolated and under-supported in meeting their children's needs. Foster carers, including those in general placements and kinship arrangements, also raised concerns about the level of support they received in maintaining their caring roles. These concerns included the need for emotional support, particularly for carers facing allegations or involved in child protection procedures. At times, the lack of support referred to was financial. Additionally, complaints during the reporting period were received from or on behalf of young people leaving care who required assistance with finances, housing, or obtaining important documents.

This feedback highlights the importance of timely intervention across both Adult and Children and Family Services. Addressing these concerns remains a key priority for the directorate as we continue to work on improving the quality and responsiveness of the services we provide.

Complaints regarding staff conduct

During this reporting period, **16%** of complaints received related to the conduct of individual staff members. Complaints pertaining to the conduct of staff members are handled by the appropriate line manager in accordance with the Council's internal HR policies. These policies are designed to ensure that appropriate action is taken, when necessary. The relevant line manager who handles the complaint must take the concerns seriously, and thoroughly evaluate every concern raised relating to the conduct of their staff. The complaints department hold a record of staff names to support the identification of any reoccurring concerns and are able to highlight this to the appropriate managers. In compliance with legal confidentiality obligations inherent in each employee's contract of employment and the Data Protection Act (2018), the Council must not disclose the results of any investigations to a complainant.

Complainants may also be advised that they are entitled to raise a concern directly with the regulatory body, Social Care Wales or Social Work England, and are provided with details of how to also raise a concern separately, should they wish to do so.

Complaints regarding safeguarding concerns

During this reporting period, **4** complaints were raised that highlighted safeguarding concerns, which were addressed according to Wales Safeguarding Procedures. Of these complaints, **3** related to Children and Family Services, while **1** pertained to Adult Social Care.

In Children and Family Services, one complaint prompted a Section 47 investigation. The second complaint was referred to the Group Manager of the Multi-Agency Safeguarding Hub (MASH) for review, and the complainant was advised on how to report any new concerns directly to the MASH. The concerns raised in the third complaint were forwarded to the allocated social worker for a thorough investigation; however, it was determined that these concerns did not meet the threshold for further investigation.

In Adult Services, one complaint was received regarding safeguarding concerns. This concern involved an allegation that a Support at Home carer had used a 'Steddy' aid with excessive force, resulting in injury to the service user's feet. In accordance with Wales Safeguarding procedures, the matter was referred to the Adult Safeguarding Team for a comprehensive investigation.

8. HOW COMPLAINTS WERE RESOLVED and LESSONS LEARNED

A variety of methods were used to resolve complaints, including:

Liaison between Complaints Officers, Management and Complainants.

- Work with complaints officers and relevant managers to identify and agree on a swift and informal resolution to issues raised.

- Facilitate meetings between managers and complainants to encourage honest and open communication, allowing for a better understanding of the complainants' concerns and desired outcomes.

Collaboration and Best Practices.

- Fostering positive working relationships with Social Services Complaints Departments across other Local Authorities in Wales to share best practice and ensure consistency in handling complaints. This collaboration helps ensure that complainants receive fair and equitable treatment. For particularly complex cases, we may engage in collaborative problem-solving while always maintaining confidentiality.

Communication with Complainants.

- Provide complainants with a clear explanation of the reasons behind decisions (both verbally and in writing).
- Maintain openness and honesty by offering apologies to complainants when necessary.
- Identify areas where services can be improved and ensure that corrective actions are recorded and followed up on.
- Offer reassessments where appropriate.

Advocacy Advice/Support and Independent Consideration.

- Direct complainants to advocacy services such as Llais, TGP Cymru, and BVC for additional support.
- Refer complaints to Stage 2 of the Social Services Complaints Procedure for independent review and consideration.

Quality Assurance and Improvement.

- Collaborate with the Quality Assurance Officer to discuss recurring issues and trends in complaints. This dialogue allows for a targeted focus on areas needing service quality improvement. The Quality Assurance Officer considers how identified learning outcomes align with broader service improvement plans.

A summary of key lessons learned during 2024/25 were as follows:

Table 5

Team	Lessons Learned / Actions Implemented
Adult Social Care	Even though the complaint was 'Not Upheld', the IIO recommended that we ensure families new to social services are clearly informed about the role of social workers and expectations. The Local Authority is reviewing the documentation for first-time service users to ensure they fully understand the role of social services.

Care Experienced Childrens Team	Ensure Section 47 outcomes are referenced in Reviews of care experienced children and care plans are rationalised. A note was placed on the children's records to reflect the outcomes and actions taken, ensuring an accurate record of the Local Authority's interventions.
Child Disability & Transition	Group Manager to try and improve relations between complainant and the service to encourage a robust needs assessment. The Local Authority offered this as a potential way forward with the Group Manager intervening to broker a relationship with the complainant, provided that the complainant agrees. If complainant agrees, a robust needs assessment will be undertaken with corresponding Care and Support Plans.
Child Disability & Transition	Social workers to read previous assessments and care plans before visits. Social workers have been reminded of the importance of reviewing previous assessments and care plans as part of the current assessment process.
Child Disability & Transition	Clearly communicate the rationale behind considering in-house care provision as the first option. The Local Authority clarified that under the Social Services and Wellbeing (Wales) Act 2014, resources must be allocated fairly and sustainably. This is now being communicated more clearly to families.
Child Disability & Transition	Decisions about funding for placements are evidence-based. Outcome Surgery ensures decisions with financial implications are made based on evidence of assessed and agreed care and support needs.
Child Disability & Transition	Engage families actively in assessments and decision-making processes. Social workers have been reminded of their responsibility to actively involve families during the assessment process. Learning from this case has been integrated into training, supervision, and quality assurance processes.
Community Learning Disability Team	Reassess care packages and consider reinstating additional care hours if necessary. The Local Authority agreed to consider if additional care hours are warranted, however this decision is based on the outcome of the social worker's assessment.

Community Learning Disability Team	Make decisions on funding quickly, based on individual care needs. The Local Authority has implemented a more efficient decision-making process at Outcomes Surgery for care plans with financial implications.
Community Learning Disability Team	Engage families in the assessment process and consider placements holistically. This practice is in place and has been reinforced through ongoing training, supervision, and quality assurance processes.
Community Learning Disability Team	Allocate cases with complexity to more experienced social workers. The Local Authority is reviewing its allocation process to ensure cases are assigned to social workers with appropriate experience and expertise.
Community Learning Disability Team / Day Services	Ensure clear communication with day services about placements and assessments. Social workers are required to proactively engage with day services management to confirm service availability before offering or agreeing to services.
Complaints Department	Ensure consent is obtained at the outset when a representative files a complaint. Consent is obtained promptly in all cases where someone other than a parent or legal guardian is making a representation on behalf of a child.
Complaints Department	Improve communication between the Complaints Team and complainants. The Complaints Team has reflected on how to improve communication, especially during staff absences, by ensuring detailed handovers and using file notes to ensure all team members are aware of the complaint status.
Complaints Department	Provide guidance on the complaints process to Social Work Teams, ensuring timely responses. The Local Authority has updated training materials, provided refresher training, and reminded staff of the eLearning module for staff on the complaints process.
Complaints Department	Develop a Quick Reference Guide for Social Workers on their responsibilities within the complaints process. The Quick Reference Guide been developed and will be made available to all staff to ensure clarity on their roles and the statutory timescales for responses.

East Locality Safeguarding Hub	Even though the complaint was 'Not Upheld', the IIO recommended reflection on whether earlier action should have been taken regarding the removal of children from the complainant. The Local Authority reflected on the timeliness of intervention in the response letter to the complainant.
Fostering	Strengthen training and support for foster carers, especially for those with children who have challenging behaviours. The Local Authority is currently reviewing the training and support provided to foster carers, including developing targeted training for those caring for children with challenging or complex needs.
Fostering	Revisit record-keeping policies and ensure staff and Foster carers are clear about the importance of accurate, timely records. The Local Authority has updated practice guidance, conducted workshops, and increased monitoring to ensure compliance with record-keeping standards.
Fostering	Ensure foster carer records are accurate, signed off, and located in the appropriate systems. A new Recording Policy has been implemented and staff have been trained on proper record-keeping procedures. Foster carer records are now regularly reviewed as part of annual reviews.
Fostering	Address issues of concern with foster carers during supervision sessions and maintain detailed incident records. The Local Authority is reviewing its placement stability approach to identify early interventions that could prevent potential breakdowns. Staff and Foster carers are encouraged to maintain detailed incident records.
Fostering / Care Experienced Childrens Team	Introduce case consultations for early intervention and to reduce escalation. A new case consultation model has been introduced, allowing teams to book consultations with senior managers for advice and guidance on next steps.
Fostering / Care Experienced Childrens Team	Ensure that allegations against foster carers are properly tracked and handled, with staff aware of their roles and responsibilities. The Local Authority has updated its Quality Assurance framework, embedded the Signs of Safety model, and created a Local Authority

	Designated Officer (LADO) post to oversee allegations against professionals, providing training and advice.
Fostering / Care Experienced Childrens Team / LADO	Managers should review how the case that led to a complaint could have been handled differently to improve communication and information sharing. A comprehensive learning event was held to discuss how communication breakdowns occurred and ways to improve communication between teams and foster carers.
Older People Mental Health	Even though the complaint was 'Not Upheld', the IIO recommended that we ensure families receive written records of reviews and care plans, especially in cases where there may be misunderstanding. The Local Authority will provide written records of care plans and reviews to families, where the individual's consent is obtained.
Outcomes Surgery	Make swift decisions when in-house services cannot meet an individual's needs, and ensure transparency in decision-making. The Local Authority has updated its practice in the Outcomes Surgery to ensure swift decisions on external providers and clear communication on how decisions are made.

In order to ensure that the directorate learns from complaints, and improvements are embedded effectively, the complaints department record, analyse and report on the learning from complaints. Improvements are monitored using an 'Outcomes Tracker' spreadsheet, which is reviewed periodically by the Complaints Manager to ensure that all outcomes and agreed actions have been completed. While some actions are straightforward and can be implemented quickly, others may require a period of work, time and commitment from the service to embed. The Complaints Manager also follows up on any outstanding actions during the 'Continuous Improvement Group' meetings in both Adult and Children and Family Services. This group, attended by team managers and senior managers within the service, ensures that all areas of improvements are being addressed. The flowchart to the right demonstrates



the process we follow from the recommendations being made, to ensuring they are completed.

Welsh Language Standards

There have been no complaints received during this reporting period that have been communicated via the medium of Welsh.

To ensure compliance with the requirements of the Welsh Language Standards all complaints publicity material, including leaflets and the complaints section of the Council’s [website](#) have been translated and are readily available in Welsh and English.

Compliments

Compliments are regarded as important information which can be used to identify and learn from good practice. All compliments are therefore recorded centrally, and details provided in management reports. As shown in Table 2 (page 12), **374** compliments were received during 2024/25 compared to 362 the previous year, a welcome **increase of 3%**. Please see a cross selection of the compliments received for 2024/25 in the table below:

Table 6.

Compliments - Adult Social Care:
I wanted to say, my nan moved in earlier in the year and the reception and service received has been fantastic.
Her moving in has given my family peace of mind that she is safe, secure and in a friendly, homely environment. Since her moving in, she has been having her medication regularly and eating set meals and can see the improvement from this in her.
We had one incident where she fell and had to go to hospital, we were contacted straight away and everything was dealt with seamlessly.
The staff have all been excellent and very friendly and welcoming when I come to visit. They have been very kind to us, while we have been going through some personal issues and when visiting have made us feel welcome.
I would like to thank everyone for their care for my nan in the last year.
I would like to thank Z and his team C.D.A.T. they've been absolutely brilliant with me.. looked after me in a way.. never judge me at all. But without Z I'd be dead and his support..... they have been nothing but outstanding with me and how and how my life is changing for the better. I think all the team, but Z's been by the side off me or whenever I needed someone to talk to when I was down at any time. Don't know what else to say other than thank you 🙏 Legends!!
A sadly passed away last week, and B has worked with her and her family for many years and has built a very positive and trusting relationship with them, providing vast amounts

of support over the years. The family thanked her for her support and 'for being there when we needed you most and for caring'.
I was speaking to one of the social workers in CMHT who are helping us out with some of our referrals and she said she takes her hat off to you all for the work that you do in the hospital, she has realised since helping how hard you all work and the processes you complete, thought that it was nice for her to appreciate what you do.
Glyn Cynffig is a clean and well run place with excellent staff, thank you. All of the staff have always been helpful. Thank you for all the help and support I have had while in Glyn Cynffig . It has changed my life for the better.
Not everyone will be lucky enough to have you as a social worker and my dysfunctional - but not overly traumatic background. It would be so much worse for someone else.
I will sing your praises throughout, of course.
If I never speak to you again, I need you to know that you made a real difference in mine and my mums life. I genuinely believe you were chosen to oversee her transition and that no one on the planet would've cared more than you.
That call you facilitated for the kids, my mum and me was literally the act of an angel.
Lovely to see you and C again today. I'm literally blown away by my new hearing gadget. I was excited to get it for the TV. Being able to wear it out is on another level. I'm pleased and grateful with my NHS hearing aids, they're brilliant. To have my hearing enhanced even more, too another level is absolutely amazing. The sound is so much clearer. It's going to make so much difference to me, I cannot begin to tell you how much that means. I feel confident that I won't have to concentrate as much wearing it out as I do with my hearing aids. I feel I'll be able to hear people talking normally without asking them to repeat themselves. I feel like a kid at Christmas, with the best gift ever of superpower hearing! I could hear you clearly the other side of the street!!!! There were tears after you both left. Happy, grateful tears.... they haven't stopped just yet. I'm so excited and grateful to have it. I feel so lucky. It's blown my mind. It's flipping genius, and my new best friend. It's going to make so much difference for me. I cannot put into words how much it means. Thank you both from the bottom of my heart.
I just wanted to share some lovely feedback I received this afternoon regarding yourself and a male colleague. I spoke to a senior manager in the Health Board today, who's mother receives Telecare and the Mobile Response service, her mother lives with MND. She described yourself and a male colleague as attending her mother and said how sympathetic and respectful you both were to her mother. She said she had set up a similar

type of service down West Wales but said, "when you see a service in action for your own family members and they were so professional and amazing, you feel so grateful." She was saying how her mother has communication problems but you both took your time and were so respectful, that she was so impressed.
Dear D, E and all the team at Ty Cwm Ogwr, I just wanted to say a huge thank you to the care and support that you provided to my mum but also my dad. Living so far away, it was comforting to know that mum was in safe hands and being cared for by a team of such wonderfully kind and thoughtful people. Keep doing what you do - you are all amazing.

Compliments – Children and Family Services:
Thank you for working with me. I'm sad it's come to an end but thank you so much being there for me when I had no one. I'm going to miss you so much.
I can only attribute the change being a result of the commitment and hard work of the Social Worker who managed to develop a positive working relationship with F and her father. Additionally, professionals involved have shared nothing but positive praise about the way in which Social Worker, G progressed this case.
To H, Thank you so much everything you have done for me + my family. We would still be hitting a brick wall if it wasn't for all your hard work, support, determination + not giving up on us.
Thank you so much for all the help and encouragement over our time together. You don't know what difference it made to us.
Myself and my son have recently had the pleasure of working alongside social worker H from assessment team. I'd just like to thank her massively from the bottom of our hearts for all the guidance and support she has given myself and I over these last few weeks. Thank you for being there for I and always putting his needs first. He really opened up to H because he gained her trust instantly. Please could you forward this email on. We will be forever grateful, keep doing an amazing job you really are one in a million. We will always remember H thanks to all she's done. Thanks again.
Thank you so much for all your help, support, understanding and your dedication to helping our family. It is hugely appreciated. I feel truly blessed you were the social worker allocated to us. I wish you good luck for your future. You truly do make a difference.
I've just read through the report which was really good to read through. We're so pleased with all the positive feedback and that is testament to your support throughout our first steps in foster care over the last 18months / 2 years. You're a fabulous [supervising social worker] that continues to support and encourage us, reading what you have said about us shows just how well you know us all, this is so important to us and gives us the confidence to continue our journey supporting the children that come into our care.
Just a big thank you for getting who I am and who I could be and for being patient. I'm really grateful and thankful for all your help. All I can say is I got a house, my son, my life back and I just need my grandchildren back and I be completely happy. But again thank you J, I don't know how you do a job like you do.

9. ACHIEVEMENTS IN 2024/25

Overall Reduction in Complaints

There has been a **6.5%** decrease in the total number of complaints received compared to the previous year. This decline reflects ongoing efforts to improve service delivery and communication and may indicate an increase in customer satisfaction with the quality of services provided by Social Services.

Early Resolution of Complaints

A notable achievement this year is the high proportion of complaints resolved at an early, local level. The majority of concerns were successfully addressed informally or at Stage 1 of the Social Services Complaints Procedure, with only **5%** advancing to a formal independent investigation (Stage 2). This emphasises the effectiveness of early resolution approaches and highlights the commitment of teams to respond promptly and constructively to concerns.

Implementation of the Most Significant Change (MSC) Approach

This year marked the beginning of implementing the Most Significant Change (MSC) methodology as a tool for learning from complaints. MSC enables the collection of compelling narratives that illustrate meaningful change and service impact. By providing qualitative insights that may not be evident through traditional complaint analysis, MSC will enhance our understanding of service effectiveness and support more reflective, person-centred service development.

Service Improvement Through Complaint Outcomes

During the reporting period, independent complaints investigators at Stage 2 of the complaints procedure issued a significant number of service improvement recommendations; **49** in total. This process has required closer collaboration between the complaints manager, operational managers, and the quality assurance officer to ensure these insights inform service planning and development. Additionally, quarterly thematic reviews of complaint trends are shared with senior leaders and service managers through directorate management team meetings, team managers meetings, and continuous improvement groups. This helps to identify recurring issues, drive targeted improvements, and reinforce the role of complaints as a critical mechanism for learning and continuous improvement.

10. OBJECTIVES FOR 2025/26

Strengthening the Culture of Learning and Improvement using the Most Significant Change (MSC) Model

The first objective for the year ahead is to regularly capture and reflect on the experiences of the people we support, as well as the outcomes of interventions and the impact of complaint resolutions using the MSC model. This approach fosters a culture of continuous learning, helps identify patterns and best practices, and enables us to adapt our services to reflect service users' lived experiences, thereby improving the quality of service delivery.

Further Develop Accessible Complaints Information

Create complaint information in formats that are accessible to young people, individuals with learning difficulties, and those with hearing or visual impairments. All complaints materials to be available in easy read, audio, braille and child-friendly formats. Ensuring this information is accessible promotes inclusivity, allowing all individuals to engage fully with the complaints process. This builds trust and empowers a wider range of service users to voice their concerns, ultimately enriching the department's understanding of diverse perspectives.

Collaborate with the Social Care Workforce Development Programme (SCWDP)

Link with SCWDP to ensure that training materials are readily accessible to all staff members. Collaborate to keep training resources current, inclusive, and available in formats that cater to different learning styles and roles within the department. Regularly reviewing and refining these materials will facilitate a consistent understanding of procedures and responsibilities across teams, improve adherence to timescales, boost staff confidence, and enhance complaint handling standards and outcomes for complainants.

Further Expand the Pool of Independent Investigators

We currently share information about high-quality Investigating Officers with neighbouring local authorities on a reciprocal basis. This year, one of our objectives is to explore additional opportunities to attract qualified candidates to this role. Increasing our pool of independent investigators will help alleviate pressure on existing resources, support adherence to timelines, and ensure the provision of high-quality investigations. Enhanced investigative capacity will contribute to timely and consistent complaint resolutions and ensure investigations remain impartial.

Promote a Positive Complaints Culture

In the coming year, we aim to conduct a feedback survey to identify areas for improvement, streamline processes, and foster a positive attitude toward complaints as opportunities for learning and development. This initiative will help clarify the complaints process and the roles within the complaints department, reduce defensiveness, and position complaints as valuable opportunities for growth and service excellence, thereby improving overall morale and attitudes toward complaints.

11. EQUALITIES

A screening for equality impact has been carried out in relation to the representation and complaints procedure. There is no negative impact on the protected equality characteristics.

There have been no complaints in relation to equality impacts received during the reporting period in relation to the Social Services Representations and Complaints Procedure.

We do not currently request or record equalities information from complainants. As a result, we are unable to report on the proportion of complaints received from individuals with protected characteristics as defined under the Equality Act 2010.

Report prepared for Claire Marchant

Statutory Director of Social Services
By the Compliments and Complaints Resolution Manager

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	DELEGATED AUTHORITY POLICY
Report Owner / Corporate Director:	CLAIRE MARCHANT CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING
Responsible Officer:	JOE BOYLE POLICY OFFIER – SOCIAL SERVICES AND WELLBEING
Policy Framework and Procedure Rules:	There is no effect upon the Policy Framework and Procedure Rules.
Executive Summary:	This report presents and proposes the new Delegated Authority Policy for implementation into the Social Services and Wellbeing Directorate. The delegation of authority is the process undertaken to allow certain decision-making processes to be made by a child or young person’s primary care worker(s) or carer(s), where they do not reside with an individual holding parental responsibility due to them being a child experiencing care. The implementation of this policy will allow the child to experience a “more normal” process regarding certain decision-making processes which can be reported as taking lengthy periods of time by children experiencing care resulting in embarrassment or inconvenience to the child or young person.

1. Purpose of Report

- 1.1 The purpose of this report is to request approval for the proposed Social Services and Wellbeing Delegated Authority Policy (**Appendix 1**).

2. Background

- 2.1 Many Children and Young People who live in the care system, either in foster or residential care settings, have reported to experience delays in gaining approval or permission to obtain items or attend events which leads to embarrassment, inconvenience, the individual missing out on things, and can lead towards breakdown in relationships between children/young people and their carers.
- 2.2 Delegated Authority means the individuals with parental responsibility for a child or young person to let the foster carers make some of those day-to-day decisions on their behalf without having to consult first. Individuals with parental responsibility may be the child/young person’s parents or the Local Authority.

3. Current situation/ proposal

- 3.1 The proposed policy at **Appendix 1** replaces all previous versions of a Delegated Authority policy used previously by Bridgend County Borough Council's Children and Family Services.
- 3.2 This policy has been produced to provide a framework for Foster Carers and Social Care Workers to follow, resulting in reduced delays in decision making processes for children and young people.
- 3.3 Work has been completed by the Cwm Taf Morgannwg Safeguarding Board to produce a regional policy called "Consent for Medical Treatment for Children Looked After". This policy has been written in line and accordance with this regional policy, its definitions and the principles it sets out.
- 3.4 This policy sets out the areas in which Delegated Authority may apply for children and young people, and the different levels and reasons for those. It also states when the decisions about what Delegated Authority may be consented to will take place and with whom.
- 3.5 At the end of any discussions a document will be produced, which will clearly state to whom Delegated Authority responsibility is given and for what. This is a document that will be read, discussed and agreed by all the people involved in the child/young person's life, and will afterwards be signed and retained on the child/young person's file. Any areas where Delegated Authority responsibility is given will be regularly reviewed, either at the annual review process or as and when needed if sooner.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 An initial Equality Impact Assessment (EIA) screening has identified that there would be no negative impact on those with one or more of the protected characteristics, on socio-economic disadvantage or the use of the Welsh Language. It is therefore not necessary to carry out a full EIA on this policy or proposal.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The Act provides the basis for driving a different kind of public service in Wales, with 5 ways of working to guide how public services should work to deliver for people. The following is a summary to show how the 5 ways of working to achieve the well-being goals have been used to formulate the recommendations within this report.

Involvement	This policy has been informed by the review of relevant legislation and guidance, along with meetings and discussions with relevant colleagues.
Long term	This policy seeks to support the long-term placements of children leading to greater outcomes for them by more stable placements through appropriate delegation of authority by allowing for decisions to be made in appropriate timescales.

Prevention	This policy seeks to prevent break down of working relationships with children and young people by enabling them to feel heard and respected to a greater extent by enabling appropriate and effective delegation of authority allowing appropriate and timely decision making to be made.
Integration	These policies will be integrated into the Social Service and Wellbeing Directorate's Children and Family Services.
Collaboration	The policy has been developed collaboratively by working groups involving staff from across the Social Services and Wellbeing directorate.

6. Climate Change and Nature Implications

- 6.1 There are no climate change or nature implications arising from this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 This policy will enhance the Council's ability to discharge its statutory duties under the Social Services and Well-being (Wales) Act 2014, and relevant regulations, with regard toward its safeguarding and Corporate Parent responsibilities to children and young people supported within the care system.

8. Financial Implications

- 8.1 There are no direct financial implications arising from the implementation of this policy. Where any financial aspects or considerations are required because of any delegated authority decisions, these will be met within existing budgets and financial allowances.

9. Recommendation

- 9.1 For Cabinet to approve the implementation of the Delegated Authority policy into the Social Services and Wellbeing Directorate (**Appendix 1**).

Background documents

None

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Delegated Authority Policy

Children's Social Care

Document Name and Location	Delegated Authority Policy
Author	The Original Author is not recorded, however the Policy was introduced by the then Head of Safeguarding and Family Support via Corporate Parenting Cabinet Committee 28 th October 2013
Document Owner	Laura Kinsey Pennaeth Gofal Cymdeithasol I Blant I Head of Children's Social Care Cyngor Bwrdeistref Sirol Penybont ar Ogwr I Bridgend County Borough Council Ffôn / Phone: (01656) 642314 E-bost / Email: Laura.kinsey@bridgend.gov.uk Gwefan / Website: www.bridgend.gov.uk
Review Date	This document is to be reviewed a minimum of every 3 years after its approval date, the next review to occur no later than December 2026. Incremental reviews may take place as required.
Accessibility	This document can be made available in Welsh.

Updates, Revisions and Amendments		
Version	Details of Change	Date
2	Contents page and numbering/ formatting Reasons for delegated authority Update to the legislation (SSWBA 2014) Reviewing delegated authority within CEC Reviews Areas a foster carer cannot legally have delegated authority Amend Delegated authority form to be more comprehensive and additional signatures.	07.02.2023

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1. Introduction

Many young people who live in foster and residential care report that the delay in getting permission for items/events can lead to embarrassment, inconvenience, and ultimately prevent them from being able to partake in activities that their peers can.

This policy aims to reduce, wherever possible, any delays encountered for a care experienced young person or child regarding specific decision making. It will allow for decision-making and signatory permission to be made on the child/young person's behalf by their foster carers or residential provider rather than the Local Authority or their parents.

Day-to-day parenting involves countless decisions and actions, from the mundane to the highly significant. Signatures are required for some medical procedures and for children to undertake some activities or access some services. Other activities involve an element of 'informed consent' but require no signature. Finally, in addition to these, there are the decisions about the everyday personal care given by the foster carer – from emotional and physical care, to what a child has for breakfast or what time they are expected to get home from an evening out with friends. Every situation is different. The age, views and legal status of the child or young person, the role and involvement sought by the parent, the confidence and experience of the foster carer, the policies and procedures of the children's service and even the personal values of the Social Worker can all play a part in defining the foster carer's role and responsibilities.

In order to achieve the most appropriate arrangements for the delegation of authority, it is therefore imperative that the Local Authority works closely with parents, foster carers and of course (where appropriate) the child/young person. This is a vital task which, because of its complexity and emotional nature, needs time and attention. Indeed, the failure to get this aspect of practice right can have serious consequences for everyone as the placement continues.

This policy sets out the areas in which Delegated Authority may apply for children and young people, and also the different levels and reasons for those. It will also state when the decisions about what Delegated Authority may be consented to will take place and with whom. There will also be a clear outline of whose responsibility it is to speak to each of the people involved and record their views to contribute to an overall agreement.

At the end of any discussions a document will be produced, which will clearly state to whom Delegated Authority responsibility is given and for what. This is a document that will be read, discussed and agreed by all the people involved in the child/young person's life, and will afterwards be signed and retained on the child/ young person's file. Copies will also be given to parents and the foster carers/residential provider, to retain for future reference.

The Welsh Government stated in their 'Fulfilled Lives, Supportive Communities' document that Delegated Authority for foster carers was important so that:-

'Children and young people in foster care are able to enjoy the same opportunities as their peers to have a fulfilled childhood and foster carers are given enough autonomy to make everyday decisions about the children in their care.'

The Children's Commissioner for Wales endorsed the publication of the Welsh Government guidance quoting:

'I welcome this process of clearly establishing what authority is to be delegated to Foster Carers as one that will bring clarity and enable looked after children to feel that their day-to-day experience is more in line with that of their friends and peers.'

In addition to this, work has been completed by the Cwm Taf Morgannwg Safeguarding Board to produce a regional policy called "Consent for Medical Treatment for Children Looked After". This policy has been written in line and accordance with this regional policy, its definitions and the principles it sets out.

2. Legislation and Guidance underpinning Delegated Authority

The following are key pieces of legislation and guidance concerning delegation of authority. This is not an exhaustive list.

- The Children Act 1989
- The Social Services and Well-being (Wales) Act 2014
- The Local Authority Fostering Services (Wales) Regulations 2018
- Independent Reviewing Officer Handbook
- Consent for Medical Treatment for Children Looked After -CTM Safeguarding Board policy

Other useful resources and websites:

Supporting Placement Planning: Handbook on Delegated Authority (The Fostering Network). Available at:

<https://www.thefosteringnetwork.org.uk/advice-information/looking-after-fostered-child/delegated-authority>

3. What is Delegated Authority?

Parents have 'parental responsibility' for their children. This means that a person with parental responsibility is responsible for the care and wellbeing of the child and, unless a court order says something different, that person, and anyone else that also has parental responsibility, can make important decisions about the child's life.

Parental Responsibility (PR) is defined in law as: 'All the rights, duties, powers, responsibilities and authority, which by law a parent of a child has in relation to the child and his property'.

When children come into foster care on a voluntary basis (s.76 Social Services and Wellbeing (Wales) Act 2014) the parents keep all of their parental responsibility. If the children are the subject of an Interim Care Order, Care Order or Emergency

Protection Order the parental responsibility is shared with the relevant Local Authority.

Foster carers therefore have to consult with the parent, usually via the child's Social Worker, before they can make any day-to-day decisions for the child in their care.

Delegated Authority means the parent and/or the Local Authority agree to let the foster carers make some of those day-to-day decisions on their behalf without having to consult first. Indeed, the Government is clear that foster carers should be authorised to make everyday decisions about their fostered child wherever possible, within the legal framework.

4. What is the difference between having Parental Responsibility and having 'Delegated Responsibility?'

A person with PR may not surrender or transfer the PR.

A person with Delegated Authority may only do what they are authorised to do (unless it is an emergency, in which case they can do what is reasonable to keep the child safe). Whereas a person with PR can make almost any decision about a child's upbringing.

Any arrangement with a temporary carer is not legally binding and a person who holds PR may take back their child, and/or the authority they have delegated, at any time, unless a Court Order says they may not.

Any delegation does not relieve the parent, or any other person delegating, of any liability that may arise as a result of a failure to meet the parental responsibility.

4.1 Why is it important?

In accordance with Guidance accompanying the Children Act 1989, *Foster carers should be given the maximum appropriate flexibility to take decisions relating to children in their care, within the framework of the placement plan and the law governing parental responsibility. Except where there are particular identified factors which dictate to the contrary, foster carers should be given delegated authority to make day to day decisions on matters such as health, education and leisure.*

4.2 What Delegated Authority aims to achieve:

- Normalising the experiences of young people in care.
- Reducing delay in decision-making, therefore preventing children/young people from missing out on ordinary activities and trips.
- Encouraging more productive and thoughtful thinking about who is best placed to do what.
- Encouraging discussion and forward-planning regarding agreement and consent issues.
- Promotion of inclusivity and treating foster carers/residential carers as part of the team around the child.
- Clarity and transparency in all areas of practice.

- More efficient use of existing processes and roles.

5. What does it mean to Delegate Authority?

A person with PR (Parental Responsibility) may not surrender or transfer any part of it to another person; however, a person who has PR may arrange for all or some of their authority to be met in certain circumstances by someone else. This is called 'delegating authority' and may be given for a particular event or arrangement (such as a medical appointment or school trip).

The law says that the person who does not have PR for a child but has care of the child (e.g. Foster Carer) may '*do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child's welfare.*' This means that in an emergency, if no agreement has been made about what to do, the carer may do what is 'reasonable' in order to safeguard the child. Statutory guidance states that what is reasonable will depend upon the urgency of the situation and how practical it is to consult with a person with PR.

Carers often find they need the authority to make certain day-to-day decisions, such as whether the child they are caring for is allowed to stay overnight with a particular friend, or whether she or he can go on a school trip.

It is important that foster carers know what authority they have to make these decisions.

Arrangements for delegating authority from the parents to the local authority, and/or from the local authority to the foster carers, must be discussed and agreed as part of the care planning process (particularly at placement planning meetings), and agreements should be recorded and clearly set out in the Placement Plan, the document which sets out the arrangements for the child to live and be cared for by the foster carers. The Placement Plan should help the carer understand what decisions they can make. Where there are issues that a carer believes it would be in the child's best interest for them to decide, and these are not covered in the Placement Plan, then the carer should discuss this with the child's social worker during the statutory visit, or by contacting them directly.

Arrangements for delegated authority should be given particular scrutiny when children are confirmed in long term or permanent placements, and attention given to how responsibilities are shared in order to reinforce and support the long-term bonds and attachments which foster carers will be expected to build with the child. In all placements, particularly those that are long term or permanent, what is appropriate to delegate to the foster carer, and what the parents are prepared to delegate to the local authority, may change. Agreements about delegation of authority should therefore be regularly reviewed through care and support planning and Care Experienced Child (CEC) Review meetings, taking into account the views of birth parents, the child, and the foster carer, and the legal status of the placement. Any changes should be recorded in the placement plan.

6. Who takes legal responsibility for decisions made by a person with Delegated Authority?

Where authority has been delegated, the person who has PR still remains liable in law for any failure to meet any part of his parental responsibility.

However, a person to whom authority has been delegated may also be liable in law if the decision they made was negligent or criminal.

7. Key Principles underpinning this Policy are: -

- Effective delegation of authority should minimise delays in decision-making and maximise the child's opportunity to enjoy their childhood and a full family life.
- Decisions about delegation of authority should be based on good quality assessments of need and risk for the individual child and carer.
- Delegated Authority to foster carers/residential providers will be individually agreed for each child and young person in their care. The extent of the delegation will vary depending on:
 - the type of placement;
 - the legal status;
 - the rights, entitlements and opinions of the child or young person and their parents;
 - the skills and competence of the foster carer/residential provider.
- Children and Young People must be able to express their views and have them heard. The best interests of the child or young person will determine all decisions.
- Parents must be supported and informed so they can play as full a part as possible in their children's lives.
- Foster carers/residential providers should be enabled and supported to take everyday decisions about the child where appropriate. In long-term placements this is even more important.
- A foster carer/residential provider's span of responsibilities should take account of their wishes and feelings about undertaking the tasks involved. We appreciate that carers may not always want to have overall decision-making responsibility in all areas.
- Foster carers should be trained and supported to undertake appropriate risk assessments in areas in which they are authorised to make decisions.

8. Good practice requires that:

- Sharing information about day-to-day care and routines is essential but not enough in itself. Foster carers/residential providers cannot care safely and make decisions without good quality information about the history of the child and the family. Social workers must ensure that foster carers/residential providers receive this.
- A foster carer/residential provider's delegated authority to take decisions is discussed and agreed with the carer and the child or young person's parents at the start of the placement as part of the placement planning and/or review process dependent on timescales and circumstances.

- Where there are positive working relationships with the birth family, routinely securing parental consent is to be encouraged.
- The wishes and feelings of the foster carer carer/residential provider should also be considered and recorded.
- Parents should be given all the information they need to reach a decision about delegation of authority. They should be given full opportunity to discuss any concerns they have with the social worker and should be kept informed about decisions made about their child.
- Delegations of authority have to be agreed by those with parental responsibility. A foster carer/residential provider never has parental responsibility for the child they look after; they can make decisions only by acting on behalf of the local authority and parent. Parental responsibility cannot be transferred
- Delegation of authority should be revisited at every review meeting and discussed with all the parties between reviews. Any changes must be incorporated into the Placement Plan by the social worker. This will ensure that changes in the child's circumstances, or in the parent's willingness to delegate authority, or the foster carer carer's/residential provider's skills and confidence to take on authority, can be reflected in that plan.

In order to fulfil these aims, particular importance will be placed on the following factors throughout the planning process:

8.1 Good quality assessments:

Decisions regarding the level of Delegated Authority should be based on good quality assessments of need and risk for the individual child and foster carer/residential provider. The balance and distribution of responsibilities should support the key relationship between the young person and the foster carer/residential provider in long-term and permanent placements.

8.2 Being Specific:

The Delegated Authority agreement should be explicit about the distribution of tasks, consents and responsibilities between parents, social workers and foster carers/residential provider. It should include as much detail in this respect as possible, including the name of the lead person with respect to each consent/decision/task and their role.

Where authority is delegated and there are two foster carers in a household, the Delegated Authority agreement should address the joint nature of their responsibilities.

8.3 Thinking ahead:

It is particularly important for everyone to try to anticipate consent and agreements that may be needed in the weeks or months ahead. The age and interests of the young person, and the lifestyle and recreational holiday plans of the foster carers, should all be considered in an effort to predict what decisions are likely to arise. What is likely to come up? What will be needed?

Foster carers/residential providers should take responsibility for informing social workers where they foresee a matter arising that may require a decision about delegation of authority. This will help avoid problems further down the line.

Even when a specific decision has to be taken by a manager within Children and Family Services, it may be possible to authorise the foster carer/residential provider to sign the relevant documentation. An appropriate and relevant trail should be maintained and recorded within the child's personal file detailing the approval given for a foster carer to sign the relevant documentation if required.

8.4 A 'living document':

The Delegated Authority document that has been drawn up following consultation is agreed at the first CEC review and reviewed at subsequent statutory reviews chaired by the Independent Reviewing Officer (IRO).

CEC Review meetings provide opportunities to look again at how authority to give consents and take decisions is distributed between the social worker, parent and foster carer/residential provider and to decide if the balance is working and meets the child's needs.

Any changes to Delegated Authority should be recorded in the placement plan and the review and signed consents obtained to those changes.

8.5 Keeping parents involved and informed:

For a parent who does not have their child living with them, the loss of decision-making can be difficult to come to terms with. We also understand that some decisions are complex and that responsibility for those items needs to be retained by parents and/or the Local Authority. As the placement continues, it is therefore important that Social Workers continue to maintain a close working relationship with parents (wherever possible) by ensuring that parents receive regular information about the everyday care of their child in a way that feels right for them.

The exclusion felt by many parents, and their own confusion about 'how it all works', can contribute to a need to hold on tightly to the few pieces of control that they feel they possess – for example, decisions about haircuts and holidays.

8.6 Resolving differing opinions:

The child's social worker, the foster carer/residential provider and the supervising social worker are the key professionals working with the child. The status and functioning of this 'core team' relationship and its role in problem solving and conflict resolution is key to the successful support of each placement. It is so important that it requires attention in its own right. Time is short, but good communication between these professionals is essential outside the formal reviews, particularly if there are tensions or problems.

9. Withdrawal of Delegated Authority

Delegation of Authority can be removed at any statutory review meeting. The process for removing any delegation of authority must be discussed and monitored at any statutory review or through an urgent review should circumstances and concerns regarding the Foster Carer(s) arise.

Where decisions around removal of Delegated Authority are required due to concerns regarding the Foster Carer(s), a formal review of the carers continuing registration should be undertaken.

10. Different Peoples' roles within Delegated Authority

10.1 Local Authority's Role:

Local authorities should ensure that everyday decisions about the care of children and young people are delegated to the foster carer/residential provider unless there are clear reasons why this would interfere with the Local Authority's statutory duty to 'safeguard and promote' the welfare of Care Experienced children, or there are well-founded and legally binding objections from the child or young person's parents.

10.2 Foster Carers/Residential Providers' Role:

Foster carers/residential providers will be responsible for keeping the child or young person's social worker informed about decisions taken under Delegated Authority; this can be done during routine visits unless there is need for immediate consultation. This should be covered in the foster care agreement/-placement plan.

10.3 Parents' Role:

Parents need to be able to support and promote their child/ren's wellbeing whilst they are Care Experienced, by agreeing to Delegated Authority consent to the child/ren's foster/residential providers following careful discussions and understanding of what they are agreeing to.

Parents should not feel afraid to ask or challenge areas that they do not agree with; parents should be wholly involved in the discussions about Delegated Authority and requesting a full explanation as to what it will mean for them and their child/ren.

11. How will Delegated Authority be implemented?

When a child is placed it can be an upsetting and distressing period for all involved. Therefore, Bridgend County Borough Council intends to have the discussion about, and implement, Delegated Authority at the point of the first CEC review.

Each child that becomes Care Experienced, or changes placement, must have a CEC review within 28 days; therefore, this should give reasonable time for each decision-maker or person involved to have an input into drawing up a bespoke Delegated Authority Agreement for any child or young person.

The Fostering Supervising social worker will undertake discussions with the foster carers/residential provider about which aspects of Delegated Authority they feel they are able to consent to and which areas in terms of the child/young person that they are currently looking after would best meet their needs to lead as 'normal' a life as possible.

The Allocated Social Worker will undertake discussions regarding Delegated Authority with the parent/s clearly outlining what they are agreeing to (or not – and why) and can put those areas onto the Delegated Consent form in preparation for the CEC review.

The Allocated Social Worker will (age-appropriately) discuss with the child/young person what areas of Delegated Authority they would like to see in place whilst they are Care Experienced.

The Allocated Social Worker will discuss with the residential provider which aspects of Delegated Authority they will undertake.

The proposed Delegated Authority form with all views included should be looked at and agreed by a safeguarding manager and recorded in supervision prior to being presented to the CEC review /IRO.

At the initial CEC Review the delegated consent form will be discussed and the discussion points recorded. This should lead to an agreed Delegated Authority Consent Form being available at the end of the CEC review that all parties are signed up to and clear about.

12. Areas where foster carers cannot legally give consent

12.1 Religion

A child in the care of the local authority cannot be brought up in a religion that is different to the one they would have otherwise been brought up in. This does not mean that, where necessary, a child cannot be placed with a foster family of a different faith if this family is appropriate to meet the child's wider needs. However, it does mean that the foster carers cannot actively seek to persuade the child to change their religion. If a fostered child is considering changing their religion, even if they are over 16, foster carers should seek advice and guidance about how they respond to this. Full consideration in a review needs to be given to the long-term implications for the child of departing from the faith of the family of origin.

12.2 Taking the child abroad

Where the Local Authority (LA) has is an Interim Care Order or a full Care Order in place, the LA can authorise the child to be taken outside of the UK for up to 1 month, such as for a holiday for example.

If the proposed trip is for longer than 1 month, then written consent of all people with parental responsibility for the children, or the permission of the Court is required.

12.3 Passport

Young people can apply for their own passport at age sixteen. Prior to this the local authority would have to apply.

12.4 National Insurance Number

Local authorities should ensure that all Care Experienced young people receive their National Insurance number without delay and that the information is given to both the young person and the foster carer/residential provider. Useful information on this can be found on the website below:

<https://www.gov.uk/guidance/national-insurance-number-applying-for-a-number-for-a-looked-after-child>

12.5 Tattoos

UK law is clear: 18 is the minimum age for a person to have a tattoo. The issue of parental consent, therefore, does not arise.

13. Other Important Questions

13.1 How does a foster carer/residential provider know if the person delegating authority is able to make that decision?

- If the local authority has an Emergency Protection Order, Interim Care Order or Care Order, the foster carer/residential provider may assume that any officer of the local authority has the authority to delegate responsibility. However, if the local authority does not have such an order, it is the parent or someone else with PR who has to agree to delegate any authority to the foster carer/residential provider.
- A written record should be kept by the Foster Carer/residential provider of all decisions to delegate authority.

13.2 What happens if the foster carer disagrees with what the local authority is proposing?

Where there is disagreement it is helpful for carers to discuss the issue with their Supervising Social Worker, in order to understand the reasons that have led to the decision and to be clear about what options are available if they still wish to take the matter further. As well as discussing any issues with their Supervising Social Worker and the Child's Social Worker, if the foster carer feels that decisions taken are not in the child's best interests, they could also discuss matters with the child's Independent Reviewing Officer, or the child's advocate if s/he has one.

13.3 What happens if the young person is 16?

There are some things that a young person who is 16 or over, or under 16 but mature, can consent to in their own right, for example:

- A young person aged 16 (or a young person under that age who is considered by medical staff to have sufficient understanding of the implications of treatment) can consent to their own medical treatment.

- From the age of 16 a young person can consent to their own care plan when they are Care Experienced by the local authority and there is no court order in place.

These things should be clearly set out in the Delegated Authority document.

13.4 What about in an emergency situation?

A person with care of a child who does not have PR may do what is reasonable in the circumstances for the purpose of safeguarding or promoting the child's welfare. This applies equally if the person with PR cannot be contacted within the timescale necessary. This means that in an emergency, if it is not possible to refer back to the local authority, the foster carer can do what is necessary to keep the child safe.

14. Delegated Authority Summary

The following table has been adopted from Welsh Government guidance and summarises the areas of delegated authority which should be considered for each child or young person in foster/residential care. The overriding principles are that:

- All decisions must be made in line with the Care Planning process.
- In the case of an emergency or where an unexpected opportunity arises the foster carer/residential provider should act as a reasonable, prudent parent.

Foster carers/residential providers should generally hold delegated authority for:	In particular circumstances and following discussion they may hold delegated authority for:	Local Authorities will generally be responsible for:
Routine medical visits to GP	Immunisations	Passports
Overnight stays up to 23 hours	Body piercings	Decisions regarding contact
Holidays within the UK	Non Routine medical treatment including general anaesthetic	Alcohol/Substance misuse follow up actions
Organised Activities	Holidays/trips abroad	
Haircuts	Change of school	National Insurance Number
Visiting friends	Wider media activity (Dependent on individual circumstances)	Use of contraception (dependent on capacity of young person)
School medical	Church and religious ceremonies	
Optician	Participating in hazardous activities	
Dentist		

School day trips*		
Meeting with school staff		
Sports clubs/organisations		
School photographs*		
Sex education		
Mobile telephones		
Consent to educational initiatives		
Emergency medical procedures and/or seeking medical advice		
* Responsibility for these areas should be delegated as soon as possible after placement		

BRIDGEND LOCAL AUTHORITY DELEGATED CONSENT FROM

Name of Child/ Young Person	
Date of Birth:	
Information System Number	
Legal Status:	
Name of Current Carer/ Keyworker in Residential Placement	
Placement Address	

Parent/ Person with PR 1:

I _____ (parent or local authority
Representative (include title if LA representative) with parental responsibility)

Parent/ Person with PR 2:

I _____ (parent or local authority
Representative (include title if LA representative) with parental responsibility)

authorise _____ Who is (status of
Person): _____

To give consent for the above named child in the following areas:

1. Medical and Health

Need	I (parent with P.R) consent/ agree the following:	Notes:	Date
1.1 Medical treatment including anaesthesia			
1.2 Routine immunisations			
1.3 Planned medical procedures			
1.4 Medical procedure carried out in the home where the person administering the procedure requires training (e.g child with disability/illness)			

1.5 Dental - signed consent to dental emergency treatment including anaesthetic			
1.6 Dental - routine treatment including anaesthetic			
1.7 Optician – appts, glasses			
1.8 Consent to examination /treatment by school Doctor/nurse			
1.9 Administration of prescribed/over the counter medications			
1.10 Permission for school to administer prescribed/over the counter medications			
1.11 Referral/ consent for to access another service e.g CAMHS			

_____ Signed (Parent/ representative with PR)

_____ Signed (Parent/ representative with PR)

Date:

2. Education

Need	I (parent with P.R) consent /agree the following:	Notes	Date
2.1 Signed consent for school day trips			
2.2 Signed consents for school trips of up to 4 days			
2.3 Signed consents for school trips of over 4 days			
2.4 School trips abroad			

2.5 School photos (for personal purchase)			
2.6 School photo: Class photo in media.			
2.7 Registering at a school			
2.8 Changing a school			
2.9 Personal Health and Social Education (sex education)			

_____ Signed (Parent/ representative with PR)

_____ Signed (Parent/ representative with PR)

Date:

3 Personal, leisure and home life

Need	I (parent with P.R) consent/ agree the following:	Notes:	Date
3.1 Overnight with friends ('sleep overs')			
3.2 Holidays within the United Kingdom.			
3.3 Sports/ social clubs			
3.4 Trips away with clubs e.g. Brownie/Scout camps.			

3.5 More hazardous activities- e.g. horse riding, skiing, rock climbing			
3.6 Haircuts/colouring			
3.7 Body piercing			
3.8 Part time employment (age 16)			
3.9 Accessing social networking sites e.g. Facebook, Twitter, MSN			

_____ Signed (Parent/ representative with PR)

_____ Signed (Parent/ representative with PR)

Date:

4. Faith and religious observance

Need	I (parent with P.R) consent/ agree the following:	Notes:	Date
4.1 New or changes in faith, church or religious observance			
4.2 Attendance at a place of worship with carer.			

5. Other areas or categories

Need	I (parent with P.R) consent/ agree the following:	Notes	Date

_____ Signed (Parent/ representative with PR)

_____ Signed (Parent/ representative with PR)

Date:

Practitioner Guidance for Medical Emergency Situations

As stated within the policy, the law says that the person who does not have PR for a child but has care of the child (e.g. Foster Carer) may '*do what is reasonable in all the circumstances of the case for the purpose of safeguarding or promoting the child's welfare.*' This includes medical emergency situations in order to promote the ongoing welfare of the Child. This also extends to situations where the child either presents as, and is suspected of, or reports having misused substances including alcohol.

The following document sets out a list of expected actions following known or suspected substance misuse for social care practitioners, including foster carers, to undertake in order to promote the child's welfare.

For the purpose of this document, the term 'Substance Misuse' has been used to cover the consumption and use of Alcohol and Drugs, not including Nicotine and tobacco-based products like cigarettes and Vapes.

Incidents where the Substance Misuse or Suspected Substance Misuse is a New or Previously Unknown Behaviour

For all instances of substance misuse or suspected substance misuse, including both when reported by a child or young person and where a practitioner suspects that a child or young person has been using substances, they must seek appropriate medical advice. They should do this by:

- Calling NHS 111
- Calling 999
- Taking the child/young person to the nearest hospital A&E department

They should record all signs and symptoms that they have witnessed that the child/young person is displaying or what the child/young person has reported taking. They should also record the actions that they have taken including the time that they made the phone call, who they have spoken to and what they have been advised to do. Where the practitioner decides they need to take the child/young person to A&E, they should record the time at which this decision has been made, the time that the child was seen by the medical practitioner, along with any advice that they have been given, at the earliest opportunity.

Where the practitioner does not attend A&E, they should conduct regular observations on the child/young person, no less than every half an hour, or as directed by the medical professional they have spoken to via 111/999. These observations must be recorded within the daily notes or via the relevant recording method utilised.

The care practitioner should contact the child's social worker at the earliest opportunity, following seeking medical advice. Where they have contacted NHS 111 for further advice and are waiting on a call back, they should contact the Social

Worker and provide them with all of the details that they have at that time. Where they have physically attended A&E, the practitioner should keep the Social Worker updated as often as possible, where the Social Worker has not attended and joined them at the hospital.

Incidents where the Substance Misuse is a Previously Known and/or Repetitive Behaviour

Where the Substance Misuse is a previous known behaviour, this should be clearly documented within the child/young person's care and behaviour plans and should have a risk assessment associated to this.

The social care practitioner should follow the details and actions set out within these documents and record all symptoms, suspicions and information given by the child/young person in the appropriate records.

Where the presentation is different, or the substance reported to have been misused by the child/young person is not one that has been used before, this should be treated as a new behaviour and the practitioner should follow the instructions and advice as above.

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	OUTCOMES OF ESTYN INSPECTIONS OF SCHOOLS IN BRIDGEND DURING SPRING TERM 2025
Report Owner / Corporate Director:	CORPORATE DIRECTOR – EDUCATION, EARLY YEARS AND YOUNG PEOPLE
Responsible Officer:	SUE ROBERTS GROUP MANAGER SCHOOL SUPPORT
Policy Framework and Procedure Rules:	There is no impact on the Council's policy framework or procedure rules.
Executive Summary:	This report contains information about the core inspections of three primary schools, two secondary schools and one pupil referral unit that took place during the spring term 2025. The report also provides information on interim visits to three primary schools, during the spring term 2025. There is also information on the removal of Coleg Cymunedol Y Dderwen and Llangewydd Junior School from the Estyn review category.

1. Purpose of Report

1.1 The purpose of this report is to inform Cabinet of the outcomes of the Estyn core inspection visits during spring term 2025 to the following schools and pupil referral unit (PRU) (in order of inspection date):

- The Bridge Alternative Provision;
- Nottage Primary School;
- Ysgol Gymraeg Bro Ogwr;
- Brynteg School;
- Archdeacon John Lewis Church in Wales Primary School; and
- Bryntirion Comprehensive School.

1.2 The report will also inform Cabinet of the outcomes of the Estyn interim visits during the spring term 2025 to the following schools (in order of inspection date):

- Abercerdin Primary School;
- Plasnewydd Primary School; and
- Newton Primary School;

- 1.3 The report contains information on Estyn's follow-up visits to Coleg Cymunedol Y Dderwen and Llangewydd Junior School and their removal from the list of schools requiring Estyn review.

2. Background

- 2.1 Due to the COVID-19 pandemic, Estyn had suspended inspections across all schools for a one-year period.
- 2.2 During the spring and summer terms 2022, Estyn piloted inspection arrangements that support renewal and reform in education in Wales. Inspection reports no longer included summative gradings, but instead detailed how well providers are helping a child to learn.
- 2.3 In June 2023, Estyn announced they were reviewing how they inspect across all sectors to make sure their work keeps pace with changes in Wales and that learners' best interests continue to be prioritised.
- 2.4 From September 2024, new inspection arrangements were introduced by Estyn, which would allow for more regular visits to primary, secondary, and all-age schools as well as pupil referral units (PRUs).
- 2.5 Maintained schools and PRUs will now have a core inspection and an interim visit within the six-year inspection period. Core inspections will be led by an Estyn HMI (His Majesty's Inspector) or a registered inspector.
- 2.6 During a core inspection, inspection teams will not give overall grades for each inspection area. However, they will make a robust and thorough evaluation of the school or PRU's provision and its impact on pupils' learning and well-being.
- 2.7 The three inspection areas (IA) are set out below:
- IA1: Teaching and learning;
 - IA2: Well-being, care, support and guidance; and
 - IA3: Leading and improving.
- 2.8 Following an inspection, each provider will receive a report. The provider will also receive a parent and carer version of the report.
- 2.9 The key elements of a core inspection report include the following:
- an overview of the school or PRU;
 - a summary of the main points of the inspection report;
 - recommendations that identify what needs to improve;
 - a main evaluation of the three inspection areas; and
 - additional information on safeguarding arrangements, healthy eating and drinking, school funding, and health and safety issues (safety on the site).
- 2.10 Some reports may also contain one or more 'spotlights'. A spotlight is a short paragraph that highlights an innovative practice or area worth sharing.

- 2.11 The purpose of interim visits is to support providers with their self-evaluation and improvement plans, to ensure the best outcomes for learners. Interim visits will be led by an Estyn HMI.
- 2.12 An interim visit can last up to two days depending on the sector. For example, an interim visit will be a single day for most primary schools and for most secondary schools the visit will last two days. For larger primary schools, this can be extended up to two days.
- 2.13 Interim visits are not intended to draw overall conclusions about the effectiveness of the school, but they will support leaders to review progress since the last core inspection and consider their next steps for improvement.

3. Current situation/ proposal

- 3.1 During the spring term 2025, Estyn visited three primary schools, two secondary schools and one PRU in Bridgend, who received a core inspection using the new approach. The full text of these reports is available on the Estyn website: www.estyn.gov.uk.

The Bridge Alternative Provision

- 3.2 The Bridge Alternative Provision was inspected by Estyn in January 2025 and the report was published on 24 March 2025.
- 3.3 Estyn identified the following spotlights:

Well-being, care, support and guidance

The PRU excels in providing exceptional care, support, and guidance, addressing the diverse well-being needs of its pupils across all sites. Post-pandemic, the PRU has effectively adapted to support the increasingly complex mental health challenges faced by children and young people.

Therapeutic support

Pupils value their experiences at the PRU, with nearly all expressing genuine respect for staff, peers, and their environment. Many pupils highlight the PRU as a welcoming space where they feel safe and cared for. The well-established integrated therapeutic approach across the PRU has led to significant improvements in pupils' well-being, attendance and emotional regulation, and as reported by parents and carers, strengthened family relationships. Parents and carers deeply appreciate the PRU's support, with a very few crediting it for helping their children overcome critical life challenges.

Equity of curriculum offer

Leaders ensure an inclusive and equitable curriculum offer for all pupils, including those who are unable to attend the main site. These pupils benefit from full-time online teaching and learning delivered internally by PRU staff. This ensures a consistent approach for these pupils, with full access to all available qualifications, in line with that of their peers. This is a significant strength of the provision.

3.4 Estyn also noted the following as strengths of the PRU:

- The PRU actively encourages pupil voice informally and formally through the school council and eco committee, empowering pupils to contribute meaningfully to their learning and environment. Older pupils are articulate and confident in expressing their views, often acknowledging the PRU's role in helping them overcome challenges and achieve both personal and academic growth.
- The teaching and learning provision at the PRU are highly effective, with nearly all staff demonstrating a flexible approach tailored to the individual needs and well-being of pupils. Teachers skilfully use a variety of strategies and resources to engage pupils and support their progress.
- The assured leadership provided by the headteacher and senior leaders ensures that the PRU operates effectively across its four sites. Their clear vision, founded on respect and strong values, has created an environment where staff and pupils share exceptionally positive working relationships.

3.5 The Bridge Alternative Provision's Estyn inspection report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Strengthen the planning and tracking of pupils' progressive skills development
Recommendation 2	Provide consistent opportunities for younger pupils to develop and apply their extended writing skills

3.6 Estyn inspectors concluded that the PRU is making sufficient progress, and no follow-up action is required.

3.7 The local authority, along with Central South Consortium, will support the PRU in drawing up an action plan to show how the recommendations will be addressed.

Nottage Primary School

3.8 Nottage Primary School was inspected by Estyn in January 2025 and the report was published on 31 March 2025.

3.9 Estyn identified the following spotlights:

Developing strong, shared and impactful leadership

Strong and successful distributed leadership is an impressive facet of the school's work. Leaders strive productively to ensure the continuous development of the skills and knowledge of both pupils and staff, to support them all to reach their potential. Leaders at all levels have a thorough and accurate knowledge of the school's strengths and areas for development. They use this effectively to drive and sustain improvements in teaching and learning, such as recent successful work to improve reading.

Developing pupils as thoughtful and independent learners who can solve problems

A notable feature of the school's practice is the highly successful provision for pupils to develop their thinking and problem-solving skills in meaningful ways. Pupils of all ages skilfully tackle stimulating activities that promote creative thinking, independently or in collaboration with their friends. Nearly all pupils rise to these challenges well. They demonstrate perseverance to complete their tasks and show resilience when trying different approaches

3.10 Estyn also noted the following as strengths of the school:

- Working relationships between staff and pupils are strong, as are peer to peer relationships. This contributes successfully to a calm and purposeful working environment where pupils are friendly, polite and behave extremely well.
- Good attendance has a high profile in the school. Most pupils attend school daily and do so with glee. The school monitors attendance diligently and staff challenge and support the attendance rates of identified families well. There is a strong culture of safeguarding, which ensures that pupils are safe and happy during their time in school. Staff are well trained and have a good understanding of the role they play in keeping pupils safe.
- The school's support for pupils with additional learning needs (ALN) is strong and well-led. Leaders and staff have a good understanding of ALN reform and extensive and valuable training has taken place. Leaders work closely with cluster colleagues and external agencies to support all pupils and their families, especially those with ALN. Leaders deliver beneficial and relevant professional learning to staff and monitor the progress of pupils effectively. Learning support officers provide effective assistance to pupils with ALN through intervention programmes and class-based support, enabling most to make solid progress towards their individual targets.

3.11 Nottage Primary School's Estyn inspection report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Provide more frequent opportunities for pupils to develop and apply a full range of writing skills
Recommendation 2	Improve pupils' Welsh oracy skills

3.12 Estyn inspectors concluded that the school is making sufficient progress, and no follow-up action is required.

3.13 The local authority, along with Central South Consortium, will support the school in drawing up an action plan to show how the recommendations will be addressed.

Ysgol Gymraeg Bro Ogwr

- 3.14 Ysgol Gymraeg Bro Ogwr was inspected by Estyn in February 2025 and the report was published on 7 April 2025.
- 3.15 Estyn identified the following spotlight:

Ensuring access to educational experiences for families who experience the effects of poverty

Leaders have established the Emotional and Family Well-being Team, which provides purposeful and sensitive support to families. Staff have fostered a close relationship with parents and pupils, and they know the needs of families well. They offer tailored provision, including emotional support, and arrange access to specialist services such as advice on housing and budgeting. The team organises a collection and exchange service that provides free school uniform to families who need it, including pupils who are transferring to secondary school. Grant funding is used wisely to ensure that cost does not prevent pupils from attending off-site educational visits.

- 3.16 Estyn also noted the following as strengths of the school:

- Ysgol Gymraeg Bro Ogwr is a welcoming, fun and caring community where a clear priority is given to promoting pupils' well-being and ensuring opportunities for all. Leaders work diligently to maintain and develop the sense that the school is one big happy and harmonious family where everyone encourages and supports each other. They have established a culture of safeguarding successfully. As a result, most pupils take pride in the care they receive and feel safe at school while at work and play.
- The headteacher is a firm and passionate leader. She has high expectations of herself and others and she conveys these expectations purposefully to staff, parents and pupils. The headteacher is supported by a team of dedicated and conscientious staff. They understand their roles and responsibilities well and work diligently for the benefit of pupils. Leadership responsibilities have been allocated purposefully among the staff, and leaders at all levels contribute appropriately to the school's work
- Staff are secure language models. They model vocabulary and syntax effectively and encourage linguistic accuracy from pupils. One side effect of this is that most pupils communicate maturely and clearly in Welsh and English and use relevant subject vocabulary correctly.
- An effective feature of the school's work is the co-operation with parents and a range of external agencies, including the wider community. The 'Ti a Fi' sessions that are held at the school, for example, provide important opportunities to share information about pupils' interests and needs before they start school. This supports staff to implement timely arrangements to meet pupils' needs appropriately.

- 3.17 Ysgol Gymraeg Bro Ogwr's Estyn inspection report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Ensure that teachers' feedback supports pupils to improve their work consistently
Recommendation 2	Ensure that learning activities challenge more able pupils consistently

- 3.18 Estyn inspectors concluded that the school is making sufficient progress, and no follow-up action is required.
- 3.19 The local authority, along with Central South Consortium, will support the school in drawing up an action plan to show how the recommendations will be addressed.

Brynteg School

- 3.20 Brynteg School was inspected by Estyn in February 2025 and the report was published on 14 April 2025.
- 3.21 Estyn identified the following spotlights:

Digital skills

Pupils develop their digital skills well. Key Stage 3 pupils and those in the sixth form use digital devices provided by the school responsibly and independently to enhance their learning. In their computer science lessons, pupils enjoy a range of purposeful opportunities to develop a broad repertoire of useful skills, for example how to interrogate a database successfully. Across the curriculum, there are beneficial opportunities for the progressive development of pupils' digital skills within authentic contexts, such as when pupils create a simple code to control a micro-bit device

Dyfodol

The 'Dyfodol' provision creates a safe and caring environment for pupils in Key Stages 3 and 4 who find it challenging to access mainstream education. Pupils receive a personalised curriculum which is carefully matched to their social, emotional and educational needs. This not only helps to build their confidence and self-esteem but helps them to develop their literacy and numeracy skills so that they can be increasingly integrated into the mainstream curriculum and take part in the life of the school.

- 3.22 Estyn also noted the following as strengths of the school:
- Mutual respect, clear classroom routines and constructive working relationships between staff and pupils are notable features of most lessons at Brynteg School. As a result, most pupils demonstrate positive attitudes towards learning and behave well in lessons and around the school. They arrive promptly to lessons, settle quickly to their work and many listen with respect to their teachers and peers.
 - The school has established a strong sense of community which is valued by staff, pupils, parents and governors. Most pupils are friendly and courteous,

exemplifying the school's values of 'respect, independence, community, kindness'. There is a strong ethos of rewarding pupils which supports positive behaviour and reinforces the values of the school.

- The school has strong, well-established arrangements to help pupils make the transition into Year 7, Key Stage 4 and the sixth form. Supported beneficially by partnerships with external agencies, it provides all pupils with helpful advice and guidance to help them make informed decisions about their future.
- The headteacher provides calm, thoughtful and innovative leadership. He has an ambitious vision for Curriculum for Wales which is well understood by most staff. This is focused on ensuring that pupils have authentic opportunities to apply their learning across a range of subject areas. He is ably supported by a committed team of senior leaders who work closely with him to embed this vision.

3.23 Brynteg School's Estyn inspection report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Address the safeguarding issue identified in the report
Recommendation 2	Improve attendance
Recommendation 3	Ensure that arrangements for line management and self-evaluation are consistently robust so that all leaders are held to account fully and plan for improvement precisely

3.24 Estyn inspectors concluded that the school is making sufficient progress, and no follow-up action is required.

3.25 The local authority, along with Central South Consortium, will support the school in drawing up an action plan to show how the recommendations will be addressed. The safeguarding issue identified related to the lunchtime arrangements at the school. Following the feedback received from the inspection team during the week, immediate adjustments were made to the lunchtime arrangements. Although Year 11 pupils were permitted to leave the premises during lunchtime prior to and throughout the inspection week, this practice was discontinued as of Monday 17 February. From that date onwards, Year 11 pupils are required to remain on-site during lunchtime.

Archdeacon John Lewis Church in Wales Primary School

3.26 Archdeacon John Lewis Church in Wales Primary School was inspected by Estyn in February 2025 and the report was published on 23 April 2025.

3.27 Estyn noted the following as strengths of the school:

- Since September 2024, the school has had an acting headteacher. Currently, she is supported by two part-time acting deputy headteachers. Since taking up leadership duties, the acting headteacher has worked swiftly to secure

improvements to aspects of the school's work including communication with parents and provision to develop the independence of younger pupils.

- Leaders understand the context of the school community well. They address identified emerging needs successfully through the provision of worthwhile professional development opportunities. For example, recent professional development has improved staff's ability to recognise and support concerns around anxiety and mental health. This is beginning to have a positive impact on pupils and their families. Staff form warm and positive relationships with pupils who in turn feel respected and valued. Staff utilise an effective range of intervention strategies such as trauma informed practice well to promote pupil well-being.
- Across the school, provision for the development of skills is effective. Staff in the younger classes promote high expectations and model language well. This enables most younger pupils to make accelerated progress in the development of their speaking and listening skills. Over time, most pupils make strong progress with reading skills which they apply well across the curriculum.
- School leaders develop strong partnerships with parents, partner schools and the wider community. A strong relationship with the diocese enhances pupils spiritual, and moral development well. The church provides a wide range of opportunities for pupils to develop positive inter-generational links.

3.28 Archdeacon John Lewis Church in Wales Primary School's Estyn inspection report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Implement consistent and effective approaches to manage instances of poor behaviour and keep the effectiveness of these arrangements under regular review
Recommendation 2	Reduce persistent absence
Recommendation 3	Develop the effectiveness of school leaders in ensuring that monitoring and evaluation activities identify and address important areas for development
Recommendation 4	Improve the Welsh language skills of older pupils

3.29 Estyn inspectors concluded that the school is making sufficient progress, and no follow-up action is required.

3.30 The local authority, along with Central South Consortium, will support the school in drawing up an action plan to show how the recommendations will be addressed.

Bryntirion Comprehensive School

3.31 Bryntirion Comprehensive School was inspected by Estyn in March 2025 and the report was published on 6 June 2025.

3.32 Estyn identified the following spotlights:

Bryntirion book week

To promote enjoyment in reading and encourage a love of books, the school holds an annual Bryntirion book week. This involves a range of activities involving all pupils and staff. These events include writing and poetry workshops for pupils run by authors, journalists and poets, a readathon, a free book swap and a book review competition. During this week, there is a ten-minute shared reading activity at the beginning of each lesson, where teachers model reading aloud. This is based on an engaging text that encourages pupils to be curious and excited to find out what happens next. Each book week is based on a theme. This year, the theme was careers linked to reading and studying English.

The school's provision for the development of pupils' digital skills

Pupils develop their digital skills effectively in information and communication technology (ICT), in computing lessons, and in a range of subjects across the curriculum. These include well-planned opportunities in 'Dysgu Byw' lessons, personal and social education, skills challenge lessons, and also when completing enterprise challenges. In these instances, pupils:

- Build spreadsheets and work with formulae well to carry out a range of analysis tasks such as considering potential over and underspends in budgets under different scenarios;
- Explore the advantages and disadvantages of social media and develop a strong understanding of how to keep safe online;
- Discuss the ethical considerations of representations of sexualised images online and their impact on identity, image, reputation and mental health; and
- Develop websites or use social media platforms effectively to present their ideas, using a range of applications to edit and embed multi-media.

3.33 Estyn also noted the following as strengths of the school:

- A notable strength of Bryntirion Comprehensive School is the positive working relationships between staff and pupils. The school is a caring and inclusive community, which supports both pupils and staff. As a result, most pupils behave very well and treat their peers, staff and visitors with respect and care.
- The senior team provides strong leadership. There are clear lines of accountability and staff and leaders are supported well to carry out their roles. They are held to account well for the quality of the provision and pupil outcomes in their areas of responsibility. Leaders know the school well and plan effectively for improvement.
- Pastoral staff know the pupils well and form purposeful relationships with them and their families. The pastoral team provide beneficial support and interventions to support pupils' well-being. These are tailored to the specific needs of pupils through effective use of year group profiles. The school has fostered productive partnerships with a variety of external agencies, which contribute positively towards this provision.

- Pupil leadership is a particularly strong feature of the school. There is a range of strategic groups that enables pupils to have purposeful impact on school improvement. For example, 'Wellbeing Leaders' deliver sessions to fellow pupils on mental health that are tailored to the needs of the school community. The pupils' 'Learning and Development' subcommittee and 'Subject Ambassadors' have a clear impact on learning and teaching across a range of subject areas. Pupil leaders recognise the need to share the impact of their work more widely.

3.34 Bryntirion Comprehensive School's Estyn inspection report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Improve the attendance of pupils who are eligible for free school meals.
Recommendation 2	Refine curriculum arrangements in Year 9 to ensure that there is continuity and depth of learning in all subjects.

- 3.35 Estyn inspectors concluded that the school is making sufficient progress, and no follow-up action is required.
- 3.36 The local authority, along with Central South Consortium, will support the school in drawing up an action plan to show how the recommendations will be addressed.
- 3.37 During the spring term 2025, Estyn visited three primary schools, who received an interim visit. A summary of the visit is provided through a letter to each school, which are available to view on the Estyn website: www.estyn.gov.uk.

Abercerdin Primary School

- 3.38 On Thursday 20 February 2025, a team of Estyn inspectors visited Abercerdin Primary School to consider how the school has progressed in addressing two recommendations from its core inspection in February 2020.
- 3.39 The two recommendations that were identified are:
- Strengthen opportunities for pupils to develop their independent learning skills and to influence what and how they learn; and
 - Plan effectively for all pupils to use their mathematical skills in worthwhile contexts across the curriculum.
- 3.40 Overall, leaders and staff have been thorough and thoughtful in their work to address the recommendations from the last inspection. Estyn thanked the school's leaders, staff, and pupils for their positive approach to the interim visit, and for their warm welcome to the school.

Plasnewydd Primary School

- 3.41 On Tuesday 1 April 2025, a team of Estyn inspectors visited Plasnewydd Primary School to consider how the school has progressed in addressing its school improvement priorities.
- 3.42 Estyn focused on the following priority during their visit:
- How effectively has the school embedded its Languages, Literacy and Communication (LLC) curriculum to support pupils' progress in English (writing) and Welsh (oracy).
- 3.43 Estyn noted leaders have a sound understanding of the school's current strengths and areas for improvement and have suitable plans in place to continue to move the school forward.

Newton Primary School

- 3.44 On Wednesday 2 April 2025 a team of inspectors visited Newton Primary School to consider how the school has progressed in addressing two of the recommendations from its core inspection in February 2023.
- 3.45 Estyn focused on the following two recommendations during their visit:
- Improve the teaching of writing and increase the range of opportunities, particularly for older pupils, to apply their skills fully; and
 - Provide clear feedback to pupils that helps them to improve their work successfully.
- 3.46 Overall, leaders and staff have a strong understanding of the school's current strengths and areas for improvement and have effective plans in place to continue to move the school forward.
- 3.47 At the end of the spring term, Estyn conducted follow-up visits to Coleg Cymunedol Y Dderwen and Llangewydd Junior School to assess whether they would be removed from the list of schools requiring Estyn review.

Coleg Cymunedol Y Dderwen

- 3.48 Coleg Cymunedol Y Dderwen was inspected by Estyn in October 2023 and the report was published on 4 December 2023. At that time, Estyn inspectors concluded the school was not making sufficient progress and would be subject to a follow-up review.
- 3.49 The Coleg Cymunedol Y Dderwen report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Streamline self-evaluation and improvement processes and ensure that they focus consistently on the impact of provision on pupil outcomes.
Recommendation 2	Increase the effectiveness of teaching by ensuring that it provides appropriate challenge for all pupils.

Recommendation 3	Strengthen provision for the progressive development of pupils' literacy, numeracy and Welsh skills.
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- 3.50 The local authority, along with Central South Consortium, supported the school in drawing up an action plan to show how the recommendations would be addressed and held regular progress review meetings over the course of the year.
- 3.51 On 6 May 2025, Estyn judged that Coleg Cymunedol Y Dderwen had made sufficient progress in addressing the recommendations from the section 28 inspection.
- 3.52 The school has been removed from the list of schools requiring Estyn review and there will be no further monitoring activity in relation to this inspection.

Llangewydd Junior School

- 3.53 Llangewydd Junior School was inspected by Estyn in October 2023 and the report was published on 18 December 2023. At that time, Estyn inspectors concluded the school was not making sufficient progress and would be subject to a follow-up review.
- 3.54 The Llangewydd Junior School report included the following recommendations:

Recommendation number	Recommendation
Recommendation 1	Embed leadership at all levels and strengthen the role of the governors to identify the school's priorities for improvement successfully.
Recommendation 2	Ensure that teaching consistently provides opportunities to develop pupils' independent skills and challenges all pupils, particularly those who are more able.
Recommendation 3	Ensure that the curriculum is meaningful for all pupils and builds their numeracy and ICT skills systematically and coherently across the school.
Recommendation 4	Provide pupils with opportunities to influence what and how they learn and to contribute to the development of the school.

- 3.55 The local authority, along with Central South Consortium, supported the school in drawing up an action plan to show how the recommendations would be addressed and held regular progress review meetings over the course of the year.
- 3.56 On 9 May 2025, Estyn judged that Llangewydd Junior School had made sufficient progress in addressing the recommendations from the section 28 inspection.
- 3.57 The school has been removed from the list of schools requiring Estyn review and there will be no further monitoring activity in relation to this inspection.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty, and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services, and functions. This is an information report; therefore, it is not necessary to carry out an Equality Impact assessment in the production of this report. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The Well-being of Future Generations (Wales) Act 2015 Assessment provides a comprehensive summary of the outcomes expected from the implementation of the service.

Long-term Supports the improvement of standards and outcomes in schools.

Prevention Development of post-inspection action plans or refinement of school improvement plans helped to ensure that recommendations identified are addressed and acted upon to secure school improvement, preventing standards from slipping. The local authority and Central South Consortium will continue to monitor the school's progress.

Integration Monitoring and acting upon school inspection reports is key to ensuring that outcomes for schools are achieved thus helping to support a successful economy.

Collaboration The local authority works closely with schools, Estyn and with Central South Consortium to deliver the well-being objectives related to school improvement. The local authority receives the school inspection reports from Estyn, and this informs the work conducted by Central South Consortium to deliver the support for school improvement services.

Involvement This area of work involves all stakeholders in school improvement. Schools work closely with Improvement Partners from Central South Consortium to refine their improvement plans or post-inspection action plans and to identify strategic support from the local authority, Central South Consortium and elsewhere (as required) reflecting the diversity of stakeholders involved in aspects of school improvement.

6. Climate Change and Nature Implications

- 6.1 There are no climate change and nature implications arising directly from this information report.

7. Safeguarding and Corporate Parent Implications

7.1 There are no safeguarding or corporate parent implications arising directly from this information report.

8. Financial Implications

8.1 There are no financial implications arising directly from this information report.

9. Recommendation

9.1 It is recommended that Cabinet notes the content of this report.

Background documents

None.

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Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	CABINET, COUNCIL AND OVERVIEW AND SCRUTINY COMMITTEES FORWARD WORK PROGRAMMES
Report Owner / Corporate Director:	CHIEF OFFICER – LEGAL AND REGULATORY SERVICES, HR AND CORPORATE POLICY
Responsible Officer:	MARK GALVIN – SENIOR DEMOCRATIC SERVICES OFFICER - COMMITTEES
Policy Framework and Procedure Rules:	There is no impact on the policy framework and procedure rules.
Executive Summary:	The report is required in order to outline the planned programme of items proposed to be considered at Cabinet, Council and Overview and Scrutiny Committee meetings in the six coming months. The publishing of this report will benefit the public in terms of them being made aware of such key items of business in advance.

1. Purpose of Report

- 1.1 The purpose of this report is to seek Cabinet approval for items to be included on the Cabinet Forward Work Programme for the period 1 September 2025 to 28 February 2026 and for Cabinet to note the Council and Overview and Scrutiny Committees' Forward Work Programmes for the same period.

2. Background

- 2.1 The Forward Work Programme is usually prepared by the Monitoring Officer to cover a period of four months except when ordinary elections of councillors occur. However, following a recent recommendation from Audit Wales, it will now will be amended to cover six months. This is to give more opportunity for robust pre-decision scrutiny and provide greater transparency around the decision-making process for both Members and the public.
- 2.2 The Forward Work Programme will contain matters which the Cabinet, Overview and Scrutiny Committees and full Council are likely to consider. It will contain information on:
 - (a) the timetable for considering the Budget and any plans, policies or strategies forming part of the Policy Framework and requiring Council approval, and which body is to consider them;

responsibility of the Cabinet;

- (c) the work programme of the Overview and Scrutiny Committees, to the extent that it is known.

3. Current situation / proposal

- 3.1 The proposed Forward Work Programmes for the above period are appended to the report, as follows:

- Cabinet - **Appendix 1**
- Council - **Appendix 2**
- Overview and Scrutiny Committees - **Appendix 3**

- 3.2 Following consideration by Cabinet, the Forward Work Programmes will be published on the Council's website.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The well-being goals identified in the Act were considered in the preparation of this report. It is considered that there will be no significant or unacceptable impacts upon the achievement of well-being goals/objectives as a result of this report.

6. Climate Change and Nature Implications

- 6.1 There are no climate change or nature implications arising from this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 There are no safeguarding or corporate parent implications arising from this report.

8. Financial Implications

- 8.1 There are no financial implications arising from this report.

9. Recommendations

Cabinet is recommended to:

- Approve the Cabinet Forward Work Programme for the period 1 September 2025 to 31 February 2026 at **Appendix 1**;

- Note the Council and Overview and Scrutiny Committees' Forward Work Programmes for the same period, as shown at **Appendix 2** and **Appendix 3** of the report, respectively.

Background documents

None.

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CABINET FORWARD WORK PROGRAMME - 1 SEPTEMBER 2025 TO 28 FEBRUARY 2026

Date	Title of Report	Contact Officer
23 Sept 25	Social Services Representations and Complaints Annual Report 2024-25	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
23 Sep 25	Delegated Authority Policy	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
23 Sept 25	Draft Outdoor Recreation Facilities Supplementary Planning Guidance	Janine Nightingale Corporate Director Communities Tel: 01656 643241 Email: Janine.nightingale@bridgend.gov.uk
23 Sept 25	Draft Houses in Multiple Occupation Supplementary Planning Guidance	Janine Nightingale Corporate Director Communities Tel: 01656 643241 Email: Janine.nightingale@bridgend.gov.uk

Date	Title of Report	Contact Officer
23 Sept 25	Bridgend Town Centre Masterplan Update	Janine Nightingale Corporate Director Communities Tel: 01656 643241 Email: Janine.nightingale@bridgend.gov.uk
23 Sept 25	Treasury Management Quarter 1 Report 2025-26	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
23 Sept 25	Anti-Money Laundering Policy	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
23 Sept 25	Outcomes of Estyn Inspections of Schools in Bridgend during Spring Term	Lindsay Harvey Corporate Director – Education, Early Years and Young People Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk
23 Sept 25	Information Report for Noting: Representation on Cabinet Committees	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.watson@bridgend.gov.uk

Date	Title of Report	Contact Officer
23 Sept 25	Cabinet, Council and Overview and Scrutiny Committee Forward Work Programmes	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.watson@bridgend.gov.uk
21 Oct 25	Reinstatement of Bus Service via Mawdlam/Kenfig Pool	Janine Nightingale Corporate Director Communities Tel: 01656 643241 Email: Janine.nightingale@bridgend.gov.uk
21 Oct 25	Corporate Safeguarding Policy	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
21 Oct 25	Children and Family Services Placement Commissioning Strategy 2025-2030	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
21 Oct 25	Medication Policy	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk

Date	Title of Report	Contact Officer
21 Oct 25	Self-Assessment	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
21 Oct 25	Empty Homes Strategy 2025-2030	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
21 Oct 25	Budget Monitoring 2025-26 – Quarter 2 Revenue Forecast	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
21 Oct 25	School Modernisation: Welsh Medium Secondary School provision – New Bridgend College	Lindsay Harvey Corporate Director – Education, Early Years and Young People Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk

Date	Title of Report	Contact Officer
18 Nov 25	Supervision Policy	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
18 Nov 25	Treasury Management Half-Year Report to September 2025	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
18 Nov 25	Local Air Quality Management Annual Report 2025	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.watson@bridgend.gov.uk
16 Dec 25	Annual Corporate Safeguarding Report 2024-2025	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk

Date	Title of Report	Contact Officer
13 Jan 26	Medium Term Financial Strategy 2026-27 to 2029-30	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
13 Jan 26	Budget Monitoring 2025-26 – Quarter 3 Revenue Forecast	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
3 Feb 26	Medium Term Financial Strategy 2026-27 and Draft Budget Consultation Process	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk

COUNCIL FORWARD WORK PROGRAMME – 1 SEPTEMBER 2025 TO 28 FEBRUARY 2026

Date	Title of Report	Contact Officer
24 Sept 25	Presentation by the Police and Crime Commissioner	Jake Morgan Chief Executive Tel: 01656 643380 Email: Jake.Morgan@bridgend.gov.uk
24 Sept 25	Standards Committee Annual Report	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.Watson@bridgend.gov.uk
24 Sept 25	Democratic Services Committee Annual Report	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.Watson@bridgend.gov.uk
25 Sept 25	Urgent Delegated Power Decisions	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.Watson@bridgend.gov.uk

Date	Title of Report	Contact Officer
25 Sept 25	Retail And Commercial Development SPG	Janine Nightingale Corporate Director Communities Tel: 01656 643241 Email: Janine.nightingale@bridgend.gov.uk
25 Sept 25	Director of Social Services Annual Report	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
22 Oct 25	School Modernisation: Welsh Medium Secondary School provision – New Bridgend College	Lindsay Harvey Corporate Director – Education, Early Years and Young People Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk
22 Oct 25	Draft Outdoor Recreation Facilities SPG	Janine Nightingale Corporate Director Communities Tel: 01656 643241 Email: Janine.nightingale@bridgend.gov.uk
22 Oct 25	Self-Assessment	Carys Lord Chief Officer - Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk

Date	Title of Report	Contact Officer
19 Nov 25	Treasury Management Half-Year Report to September 2025	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
19 Nov 25	Capital Programme – Quarter 2 Update 2025-26	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
19 Nov 25	Council Tax Base 2025-26	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
4 Feb 26	Capital Programme Quarter 3	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
25 Feb 26	Medium Term Financial Strategy 2026-27 to 2029-30	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302

Date	Title of Report	Contact Officer
		Email: Carys.Lord@bridgend.gov.uk
25 Feb 26	Council Tax 2026-27	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
25 Feb 26	Capital Strategy 2026-27	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
25 Feb 26	Treasury Management Strategy 2026-27	Carys Lord Chief Officer – Finance, Housing and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk

APPENDIX 3**OVERVIEW AND SCRUTINY FORWARD WORK PROGRAMME – 1 SEP 2025 – 28 FEB 2026**

Date	Title of Report	Scrutiny Committee	Contact Officer
11 Sep 25	- Director of Social Services Annual Report 2024-25 - Social Services Complaints and Representations	Social Services, Health and Wellbeing Overview and Scrutiny Committee	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
15 Sep 25	- Mental Health and Wellbeing Support for Learners	Education and Youth Services Overview and Scrutiny Committee	Lindsay Harvey Corporate Director – Education and Family Support Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk
25 Sep 25	- Care Inspectorate Wales (CIW) Fostering Service Inspection June 2025 - Care Inspectorate Wales (CIW) Improvement Check Of Childrens And Family Services June 2025	Social Services, Health and Wellbeing Overview	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email:

Date	Title and Description of Report	Scrutiny Committee	Contact Officer
		and Scrutiny Committee	Claire.marchant@bridgend.gov.uk
29 Sep 25	- United Kingdom Shared Prosperity Fund Update - Social Housing Allocation Policy	Communities, Environment and Housing Overview and Scrutiny Committee	Janine Nightingale Corporate Director, Communities Tel: 01656 643179 Email: Janine.Nightingale@bridgend.gov.uk Carys Lord Chief Officer - Finance, Performance and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
13 Oct 25	- Online Safety	Education and Youth Services Overview and Scrutiny Committee	Lindsay Harvey Corporate Director – Education and Family Support Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk

Date	Title and Description of Report	Scrutiny Committee	Contact Officer
23 Oct 25	- Budget Monitoring 2025- 26 – Quarter 2 Revenue Forecast - Update on Recommendations from Audit Wales Report, <i>Arrangements for Commissioning Services – Bridgend County Borough Council</i> - Scrutiny Annual Report 2024/25	Corporate Overview and Scrutiny Committee	Carys Lord Chief Officer - Finance, Performance and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.watson@bridgend.gov.uk
3 Nov 25	- Net Zero Strategy Review - Electric Vehicle Charging Strategy	Communities, Environment and Housing Overview and Scrutiny Committee	Janine Nightingale Corporate Director, Communities Tel: 01656 643179 Email: Janine.Nightingale@bridgend.gov.uk
6 Nov 25	- Annual Corporate Safeguarding Report 2024/25 - Community Hubs Strategy	Social Services,	Claire Marchant Corporate Director Social

Date	Title and Description of Report	Scrutiny Committee	Contact Officer
		Health and Wellbeing Overview and Scrutiny Committee	Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
24 Nov 25	- Teaching and Learning in Schools in Bridgend - Physical Health, Healthy Living and Wellbeing	Education and Youth Services Overview and Scrutiny Committee	Lindsay Harvey Corporate Director – Education and Family Support Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email: Claire.marchant@bridgend.gov.uk
4 Dec 25	- Halo, Leisure Arrangements and Wellbeing	Social Services, Health and Wellbeing Overview	Claire Marchant Corporate Director Social Services & Wellbeing Tel: 01656 643248 Email:

Date	Title and Description of Report	Scrutiny Committee	Contact Officer
		and Scrutiny Committee	Claire.marchant@bridgend.gov.uk
8 Dec 25	- Porthcawl Grand Pavilion	Communities, Environment and Housing Overview and Scrutiny Committee	Janine Nightingale Corporate Director, Communities Tel: 01656 643179 Email: Janine.Nightingale@bridgend.gov.uk
11 Dec 25	- Quarter 2 Performance Report 2025-26 - Corporate Plan Delivery Plan 2025-26	Corporate Overview and Scrutiny Committee	Kelly Watson Chief Officer, Legal and Regulatory Services, HR and Corporate Policy Tel: 01656 643248 Email: Kelly.Watson@bridgend.gov.uk
15 Jan 25	- Draft Medium Term Financial Strategy 2026- 27 to 2029-30 and Budget Proposals	Corporate Overview and Scrutiny Committee	Carys Lord Chief Officer - Finance, Performance and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk

Date	Title and Description of Report	Scrutiny Committee	Contact Officer
27 Jan 25	- Scrutiny Recommendations on Medium Term Financial Strategy 2026-27 to 2029- 30 and Draft Budget Consultation Process - Capital Strategy 2026-27 onwards - Budget Monitoring 2025- 26 – Quarter 3 Revenue Forecast	Corporate Overview and Scrutiny Committee	Carys Lord Chief Officer - Finance, Performance and Change Tel: 01656 643302 Email: Carys.Lord@bridgend.gov.uk
9 Feb 25	- Future School Modernisation - School Maintenance	Education and Youth Services Overview and Scrutiny Committee	Lindsay Harvey Corporate Director – Education and Family Support Tel: 01656 642612 Email: Lindsay.harvey@bridgend.gov.uk Janine Nightingale Corporate Director, Communities Tel: 01656 643179 Email: Janine.Nightingale@bridgend.gov.uk

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	INFORMATION REPORT FOR NOTING
Report Owner / Corporate Director:	CHIEF OFFICER – LEGAL AND REGULATORY SERVICES, HR AND CORPORATE POLICY
Responsible Officer:	MICHAEL PITMAN – TECHNICAL SUPPORT OFFICER DEMOCRATIC SERVICES
Policy Framework and Procedure Rules:	There is no effect upon the policy framework and procedure rules.
Executive Summary:	To update Cabinet with a report published since the last Cabinet meeting

1. Purpose of Report

- 1.1 The purpose of this report is to inform Cabinet of the Information Report for noting that has been published since its last scheduled meeting.

2. Background

- 2.1 It was previously resolved to approve a revised procedure for the presentation to Cabinet and Council of Information Reports for noting.

3. Current situation / proposal

3.1 Information Report

The following Information Report has been published since the last meeting of Cabinet:-

Title

Date Published

Representation on Cabinet Committees
and Member Champion

23 September 2025

3.2 Availability of Document

The document has been circulated to Elected Members electronically via

email and placed on the Bridgend County Borough Council website. The document is available from the above date of publication.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. This is an information report, therefore it is not necessary to carry out an Equality Impact assessment in the production of this report. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations Implications and Connection to Corporate Well-being Objectives

- 5.1 The well-being goals identified in the Act were considered in the preparation of this report. It is considered that there will be no significant or unacceptable impacts upon the achievement of well-being goals/objectives as a result of this report.

6. Climate Change and Nature Implications

- 6.1 There are no Climate Change and nature implications from this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 There are no Safeguarding and Corporate Parent Implications from this report.

8. Financial Implications

- 8.1 There are no financial implications in relation to this report.

9. Recommendations

- 9.1 That Cabinet acknowledges the publication of the report referred to in paragraph 3.1 above.

Background documents

None

Meeting of:	CABINET
Date of Meeting:	23 SEPTEMBER 2025
Report Title:	REPRESENTATION ON CABINET COMMITTEES AND MEMBER CHAMPION
Report Owner / Corporate Director:	REPORT OF THE MONITORING OFFICER
Responsible Officer:	RACHEL KEEPINS, DEMOCRATIC SERVICES MANAGER
Policy Framework and Procedure Rules:	There will be no effect on the policy framework and procedure rules.
Executive Summary:	To note the appointment of Members to Cabinet Committees and the Council's Future Generations Champion.

1. Purpose of Report

- 1.1 The purpose of this report is for Cabinet to note changes to the appointment of Members to Cabinet Committees and the appointment of the Authority's Future Generations Champion.

2. Background

- 2.1 At a meeting of Cabinet on 24 June 2025, the following Members were appointed to Cabinet Committees:

Cabinet Committee Equalities and Employee Relations (CCEER)

1. Leader
2. Deputy Leader & Cabinet Member Social Services, Health & Wellbeing
3. Cabinet Member – Regeneration, Economic Development & Housing
4. Cabinet Member - Climate Change & the Environment
5. Cabinet Member – Finance and Performance
6. Cabinet Member – Education & Youth Services
7. Cabinet Member – Resources
8. Cllr A Berrow
9. Cllr. R. Goode
10. Cllr P Ford
11. Cllr D Hughes
12. Cllr M Lewis
13. Cllr J Llewellyn-Hopkins
14. Cllr R Penhale-Thomas

15. Cllr A Wathan
16. Cllr Amanda Williams
17. Cllr E Winstanley

Cabinet Committee Corporate Parenting (CCCP)

1. Leader
2. Deputy Leader & Cabinet Member Social Services, Health & Wellbeing
3. Cabinet Member – Regeneration, Economic Development & Housing
4. Cabinet Member - Climate Change & the Environment
5. Cabinet Member – Finance and Performance
6. Cabinet Member – Education & Youth Services
7. Cabinet Member – Resources
8. Cllr F Bletsoe
9. Cllr J Pratt
10. Cllr T Thomas
11. Cllr A Wathan
12. Cllr Amanda Williams

2.2 Since this time there have been requests for Members to come off these Cabinet Committees and changes to these appointments to be made.

2.3 Separately, it has been recommended by the Future Generations Commissioner as part of the Future Generations Report 2025, that the Authority appoint a Future Generations Champion to engage with the Hwb Dyfodol (Futures Hub), which is a dedicated initiative to build capacity for foresight and futures thinking across the Welsh public sector.

3. Current situation / proposal

3.1 The revised appointments are detailed below:

Cabinet Committee Equalities and Employee Relations

1. Leader
2. Deputy Leader & Cabinet Member Social Services, Health & Wellbeing
3. Cabinet Member – Regeneration, Economic Development & Housing
4. Cabinet Member - Climate Change & the Environment
5. Cabinet Member – Finance and Performance
6. Cabinet Member – Education & Youth Services
7. Cabinet Member – Resources
8. Cllr A Berrow
9. Cllr. R. Goode
10. Cllr P Ford
11. Cllr D Hughes
12. Cllr M Lewis
13. Cllr J Llewellyn-Hopkins
14. Cllr A Ulberini-Williams
15. Cllr A Wathan
16. Cllr Amanda Williams
17. Cllr E Winstanley

Cabinet Committee Corporate Parenting (CCCP)

1. Leader

2. Deputy Leader & Cabinet Member Social Services, Health & Wellbeing
3. Cabinet Member – Regeneration, Economic Development & Housing
4. Cabinet Member - Climate Change & the Environment
5. Cabinet Member – Finance and Performance
6. Cabinet Member – Education & Youth Services
7. Cabinet Member – Resources
8. Cllr Della Hughes
9. Cllr J Pratt
10. Cllr Rob Smith
11. Cllr A Wathan
12. Cllr Amanda Williams

- 3.2 Members are requested to note that the Chair of the Social Services, Health and Wellbeing Overview and Scrutiny Committee (OSC) also sits on the CCCP as well as four scrutiny champions nominated from each Scrutiny Committee.

Future Generations Champion

- 3.3 The Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing, Cllr Jane Gebbie, has been nominated as the Authority's Future Generations Champion.

4. Equality implications (including Socio-economic Duty and Welsh Language)

- 4.1 The protected characteristics identified within the Equality Act, Socio-economic Duty and the impact on the use of the Welsh Language have been considered in the preparation of this report. As a public body in Wales the Council must consider the impact of strategic decisions, such as the development or the review of policies, strategies, services and functions. It is considered that there will be no significant or unacceptable equality impacts as a result of this report.

5. Well-being of Future Generations implications and connection to Corporate Well-being Objectives

- 5.1 The following is a summary of the implications to show how the 5 ways of working have been used to formulate the recommendation:

- Long-term - The approval of this report will assist in the long term planning of the business of the Council.
- Prevention - Continued and relevant representation supports the Council by enhancing its current and future relationships.
- Integration - The report supports all the well-being objectives.
- Collaboration - This report supports collaborative working with Cabinet and other backbench Members and emphasises the role of Corporate Parents for all Elected Members.
- Involvement - More representation on these Cabinet Committees ensures that more constituent views can be represented.

- 5.2 The appointment of a Future Generations Champion will secure a role that will involve promoting and taking forward the Council's 4 Wellbeing Objectives, advocating for long-term thinking and sustainable development.

6. Climate Change and Nature Implications

- 6.1 Climate Change links directly with one of the seven Well-being goals under the Well-being of Future Generations (Wales) Act, in achieving 'A Prosperous Wales': *An innovative, productive and low carbon society which recognises the limits of the global environment and therefore uses resources efficiently and proportionately (including acting on climate change); and which develops a skilled and well-educated population in an economy which generates wealth and provides employment opportunities, allowing people to take advantage of the wealth generated through securing fair work.* As such, climate change and nature will no doubt be a priority of 'Hwb Dyfodol' and thereby form a key part of the role of the Future Generations Champion.

7. Safeguarding and Corporate Parent Implications

- 7.1 There are no safeguarding implications associated with these appointments.

8. Financial Implications

- 8.1 There are no financial implications associated with these appointments.

9. Recommendations

- 9.1 Cabinet is recommended to note the appointments detailed within the report at paragraphs 3.1 and 3.3

Background documents

None.

By virtue of paragraph(s) 14 of Part 4 of Schedule 12A
of the Local Government Act 1972.

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