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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



Rydym yn croesawu gohebiaeth yn Gymraeg. Rhowch wybod i ni os mai Cymraeg yw eich dewis iaith.

We welcome correspondence in Welsh. Please let us know if your language choice is Welsh.



Cyfarwyddiaeth y Prif Weithredwr / Chief Executive's Directorate
Deialu uniongyrchol / Direct line : 01656 643148 / 643694 / 643513
Gofynnwch am / Ask for: Gwasanaethau Democraidd

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

Dyddiad/Date: Dydd Iau, 18 Medi 2025

Annwyl Cyngorydd,

PWYLLGOR TROSOLWG A CHRAFFU GWASANAETHAU CYMDEITHASOL, IECHYD A LLES (PWYLLGOR TROSOLWG A CHRAFFU PWNC 2 YN FLAENOROL)

Cynhelir Cyfarfod Pwyllgor Trosolwg a Chraffu Gwasanaethau Cymdeithasol, Iechyd a Lles (Pwyllgor Trosolwg a Chraffu Pwnc 2 yn Flaenorol) Hybrid yn Siambbr y Cyngor - Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont ar Ogwr, CF31 4WB ar **Dydd Iau, 25 Medi 2025 am 10:00**.

AGENDA

1 Ymddiheuriadau am absenoldeb

Derbyn ymddiheuriadau am absenoldeb gan Aelodau.

2 Datganiadau o fuddiant

Derbyn datganiadau o ddiddordeb personol a rhagfarnol (os o gwbl) gan Aelodau / Swyddogion yn unol â darpariaethau'r Cod Ymddygiad Aelodau a fabwysiadwyd gan y Cyngor o 1 Medi 2008.

3 Archwiliad Gwella Arolygiaeth Gofal Cymru (AGC) o Wasanaethau Plant a Theuluoedd Mehefin 2025

3 - 34

Gwahoddwyr:

Y Cynghorydd Jane Gebbie - Dirprwy Arweinydd / Aelod Cabinet dros Wasanaethau Cymdeithasol, Iechyd a Llesiant

Claire Marchant - Cyfarwyddwr Corfforaethol - Gwasanaethau Cymdeithasol a Lles
Laura Kinsey - Pennaeth Gofal Cymdeithasol I Blant

David Wright – Dirprwy Bennaeth Gofal Cymdeithasol I Blant

Ben Anderson - Arolygiaeth Gofal Cymru

Suzanne Pile - Tîm Gwasanaeth Oedolion a Phlant - Arolygiaeth Gofal Cymru

4 Arolygiad Gwasanaeth Maethu Arolygiaeth Gofal Cymru (AGC) Mehefin 2025

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Gwahoddwyr

Fel uchod yn Eitem 4 a

Daniel Bolton – Rheolwr Grŵp – Gwasanaethau Darparwyr

5 Casgliadau ac Argymhellion

6 Adroddiad Gwybodaeth - Chwarter 4 / Perfformiad Diwedd Blwyddyn 2024-25

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7 Diweddariad Rhaglen Gwaith

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8 Materion Brys

I ystyried unrhyw eitemau o fusnes y, oherwydd amgylchiadau arbennig y cadeirydd o'r farn y dylid eu hystyried yn y cyfarfod fel mater o frys yn unol â Rhan 4 (pharagraff 4) o'r Rheolau Trefn y Cyngor yn y Cyfansoddiad.

Nodyn: Bydd hwn yn gyfarfod Hybrid a bydd Aelodau a Swyddogion mynchyd trwy Siambrau y Cyngor, Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont ar Ogwr / o bell Trwy Timau Microsoft. Bydd y cyfarfod cael ei recordio i'w drosglwyddo drwy wefan y Cyngor. Os oes gennych unrhyw gwestiwn am hyn, cysylltwch â cabinet_committee@bridgend.gov.uk neu ffoniwch 01656 643148 / 643694 / 643513 / 643159

Yn ddiffuant

K Watson

Prif Swyddog, Gwasanaethau Cyfreithiol a Rheoleiddio, AD a Pholisi Corfforaethol

Dosbarthiad:

Cynghorwr:

S Aspey

F D Bletsoe

S J Bletsoe

C Davies

S Easterbrook

P Ford

GC Haines

D M Hughes

RM James

P W Jenkins

W J Kendall

M Lewis

J Llewellyn-Hopkins

R Williams

Agenda Item 3

Meeting of:	SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	25 SEPTEMBER 2025
Report Title:	CARE INSPECTORATE WALES (CIW) IMPROVEMENT CHECK OF CHILDRENS AND FAMILY SERVICES JUNE 2025
Report Owner / Corporate Director:	CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING
Responsible Officer:	LAURA KINSEY HEAD OF CHILDREN AND FAMILY SERVICES
Policy Framework and Procedure Rules:	There is no effect upon the policy framework and procedure rules.
Executive Summary:	<p>This report describes the findings of a Care Inspectorate Wales (CIW) Improvement Check (IC) visit to Bridgend County Borough Council (BCBC) children and family services in June 2025. The improvement check focused on understand how well the Council has progressed recommendations for improvement set out in a Performance Evaluation Inspection and Improvement Check undertaken in May and December 2022 and a CIW led Joint Inspection of Child Protection Arrangements (JICPA) undertaken in June 2023.</p> <p>The IC found that BCBC leaders have consistently prioritised children and family services, to support sustained and timely improvements. This, in turn, has significantly strengthened the quality and delivery of our social services functions.</p>

1. Purpose of Report

- 1.1 The purpose of this report is to present to the Committee the Care Inspectorate Wales (CIW) Improvement Check (IC) findings report and to request that the Committee considers the report and scrutinises the associated Action Plan prior to its consideration by Cabinet in October 2025.

2. Background

2.1 CIW carry out inspection activity in accordance with the Social Services and Well-being (Wales) Act 2014 and the quality standards in the *Code of Practice in relation to the performance and improvement of social services in Wales*. This helps them determine the effectiveness of local authorities in supporting, measuring and sustaining improvements for people.

2.2 Further to a Performance Evaluation Inspection in May 2022 Care Inspectorate Wales (CIW) completed an Improvement Check in December 2022 and noted the '*local authority must continue to assure itself of the priority status, pace, quality, delivery, and impact of its improvement activity*'.

2.3 In June 2023 CIW and partner inspectorates carried out a Joint Inspection of Child Protection Arrangements (JICPA) in Bridgend. They found leaders and partners had a shared vision and positive approach to safeguarding. The local authority and partners had taken action to instigate learning following critical incidents, there were ambitious plans to drive forward improvements, and it was important to manage these changes with careful oversight. It was a relatively early stage in the Council's improvement journey and whilst there were indication positive changes were being progressed further work was needed to stabilize the workforce and embed a model of practice that would sustainably improve outcomes for children and families.

2.4 The most recent IC carried out in June 2025 focussed on progress made in the areas for improvement, which were identified during the inspection activities of 2022 and 2023.

2.5 The scope of the inspection included:

- The experiences of people at the time of the improvement check.
- The outcomes people achieve through their contact with social services
- Evidence of improvements made following inspections in 2022/2023 and plans for service development and improvement

2.6 In advance of the inspection, a range of information/documentation was submitted including:

- Strategy and Structure
- Key Documents and Operational Protocols
- Cabinet/Committee Reports
- Development Work
- Performance Data and Quality Assurance
- Workforce and Supervision information

2.7 The inspection team reviewed the experiences of people's journey through care and support through review and tracking of their social care record. The team reviewed

25 cases, with more detailed case tracking of 3 of these cases. This included a conversation with the person receiving support and/or their family, carers, advocates, or key workers afterwards interviewing the allocated case worker and their manager.

- 2.8 In addition CIW also sought the views of staff and stakeholders through focus groups and by using a range of surveys to gather information to inform the inspection. The latter included public surveys.
- 2.9 Other activities included observations of meetings and reviews of complaints and compliments.

3. Current situation/ proposal

- 3.1 The CIW inspection report is attached at **Appendix 1**.

3.2 Summary of findings

- 3.2.1 The table below summarises CIW findings and further details are available throughout the full report. It should be noted that there were no areas for improvement from the previous inspection identified where no improvements had been made.

Principle	Areas of improvement identified in 2022-23	Progress identified at this Improvement Check
People	Seeking, hearing and recording the voice of the child	Improvements made and must be sustained
People	People consistently feel listened to and treated with dignity and respect	Some improvements made – further action is required
People	Workforce recruitment and retention	Improvements made and must be sustained
People	Recording demographics and associates	Improvements made and must be sustained
People	Management oversight	Improvements made and must be sustained
People	Staff support, supervision, and training	Improvements made and must be sustained
Prevention	Provision of information, advice, and assistance (IAA). People receive the right support at the right time	Some improvements made – further action is required
Prevention	Placement sufficiency	Some improvements made – further action is required
Partnerships	Thresholds for early help and statutory services	Improvements made and must be sustained
Partnerships	Learning from reviews and audits	Improvements made and must be sustained
Wellbeing	Compliance with statutory responsibilities	Improvements made and must be sustained

Wellbeing	Arrangements for supervised contact between children and their families	Improvements made and must be sustained
Wellbeing	Identification and response to child exploitation	Some improvements made – further action is required
Wellbeing	Ensuring priority status, pace, quality, delivery, and impact of its improvement activity	Improvements made and must be sustained

3.3 **Recommendations and Next Steps**

3.3.1 Overall, the inspection is a positive commendation of the work of the Council to improve the way vulnerable children and families are supported and the quality of outcomes they receive. There are some areas where further work is required, and an Action Plan has been developed in response to the recommendations made by CIW and can be found at **Appendix 2**. The actions in the attached plan are cross-referenced with the actions in the Council's 3 year strategic plan for children and families which was approved by Council in September 2023 to ensure there is alignment and no duplication of effort. The progress to implement the actions will be overseen through the Social Services and Wellbeing Quality and Performance Framework and reported to the Social Services Improvement Board chaired by the Leader of the Council. The improvements required will be integrated into the Council's regulatory tracker which is reported to Governance and Audit Committee and can be scrutinised regularly by Overview and Scrutiny Committee at a frequency to be determined by the Committee.

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 provides the basis for driving a different kind of public service in Wales, with five ways of working to guide how the Authority should work to deliver wellbeing outcomes for people. The following is a summary to show how the five ways of working to achieve the well-being goals have been considered in this report:

- Long Term – Social Services is demand led and the Social Services and Well-being (Wales) Act 2014 (SSWBA) focusses on sustainable prevention and well-being outcomes for the future. There is a requirement to meet the needs of people in the longer term and, because of rising demographics and increasing complexity, the remodelling and transformation of services continues to be a priority.

- Prevention – one of the four themes within the CIW inspection is Prevention. CIW have identified areas of strength for Prevention in their report. The areas for improvement are also included, and actions for improvement have been addressed within the Action Plan at **Appendix 2**.
- Integration – one of the four themes within the CIW inspection is Partnerships and Integration. CIW have identified areas of strength for Integration and Partnerships in their report. The areas for improvement are also included, and actions for improvement have been addressed within the Action Plan at **Appendix 2**. The SSWBA requires local authorities to work with partners, particularly the NHS and the Police, to ensure care and support for people and support for carers is provided. The report refers to work with statutory partners.
- Collaboration – The collaborative approaches described in the report are managed and monitored through various strategic and collaborative boards across Directorates and with partners
- Involvement – the key stakeholders are the people who use social care. There is considerable engagement including surveys, stakeholder meetings, feedback forms and the complaints process. The provision of accessible information and advice helps to ensure that the voice of adults, children and young people is heard.

5.2 This report assists in the achievement of the following corporate well-being objectives under the Well-being of Future Generations (Wales) Act 2015:

- **Helping people and communities to be more healthy and resilient** - taking steps to reduce or prevent people from becoming vulnerable or dependent on the Council and its services. Supporting individuals and communities to build resilience, and enable them to develop solutions to have active, healthy and independent lives.
- **Smarter use of resources** – ensure that all resources (financial, physical, ecological, human and technological) are used as effectively and efficiently as possible and support the creation of resources throughout the community that can help to deliver the Council's well-being objectives.

6. Climate Change and Nature Implications

6.1 There are no direct climate change or nature implications associated with the report and associated action plan at this stage.

6.2 The importance of decarbonisation to help protect and sustain the environment over the long term and in line with our climate change ambitions will be considered and promoted as and when strategies identified within the action plan are implemented.

7. Safeguarding and Corporate Parent Implications

7.1 This report and action plan has a direct link to safeguarding and corporate parenting:

7.2 The Council's workforce shares a responsibility both collectively and individually to ensure that children and adults at risk are protected from harm. Council employees, Councillors, volunteers, contractors, and partners who encounter children or adults at risk in the course of their duties are expected to understand their responsibility and where necessary take action to safeguard and promote the welfare of people so that everyone can live their life free from harm, abuse, and neglect. The children we provide with care and support are among the most vulnerable in our community, and the services they receive are vital in keeping them safe. This action plan will ensure we continue to provide a high standard of service.

7.3 When a child or young person enters the care of the Council, the role of being a parent is taken on by the local authority. This constitutes Corporate Parenting. The Council has the responsibility to seek positive outcomes for care experienced children and young adults who are care leavers in the same way a good parent would for their own child. Bridgend's Corporate Parenting Strategy sets out the following commitments:

- We will keep you safe, give you somewhere comfortable to live where you are cared for properly and make sure you have all that you need.
- We will make sure that all of those that work with you and support you are well trained and treat you with dignity and respect
- We will work with you to understand your housing needs and make plans so that we can support you.
- We will help you with the skills and information you need and develop a clear pathway of support for you to live independently.
- We will strengthen the support given by all of your corporate parents; improve the contact we have with you, and we will keep in touch to see how you are doing after you are 18 years of age.

7.4 These will continue to be delivered through the action plan. From early years into adulthood all our children, young people and young adults should be kept safe, happy and have every opportunity to thrive.

8. Financial Implications

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

9. Recommendation(s)

9.1 It is recommended that the Committee scrutinises the CIW findings report and associated Action Plan prior to its consideration by Cabinet.

Background documents

None

Claire Marchant
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Children and Family Services
Bridgend County Borough Council
Civic Offices
Angel Street
CF31 4WB

Ein cyf / Our ref: BCBC IC 23/06/2025

Dyddiad / Date: 04/09/2025

Dear Director,

This letter describes the findings of our Improvement Check (IC) visit to Bridgend County Borough Council (BCBC) children's services, in June 2025.

1. Introduction

- 1.1 Care Inspectorate Wales (CIW) completed a Performance Evaluation Inspection in May 2022. In December 2022 we completed an IC to follow-up on areas for improvement and noted the '*local authority must continue to assure itself of the priority status, pace, quality, delivery, and impact of its improvement activity*'.
- 1.2 In June 2023 CIW and partner inspectorates carried out a Joint Inspection of Child Protection Arrangements (JICPA) in Bridgend. We found leaders and partners had a shared vision and positive approach to safeguarding. The local authority and partners had taken action to instigate learning following critical incidents, there were ambitious plans to drive forward improvements, and it was important to manage these changes with careful oversight.
- 1.3 CIW carry out inspection activity in accordance with the Social Services and Well-being (Wales) Act 2014 and the quality standards in the *Code of Practice in relation to the performance and improvement of social services in Wales*. This helps us determine the effectiveness of local authorities in supporting, measuring and sustaining improvements for people.
- 1.4 This IC focused on progress made in the areas for improvement, which were identified during the inspection activities of 2022 and 2023. The table below summarises our findings and further details are available throughout the report.

Principle	Areas of improvement identified in 2022-23	Progress identified at this Improvement Check
People	Seeking, hearing and recording the voice of the child	Improvements made and must be sustained
People	People consistently feel listened to and treated with dignity and respect	Some improvements made – further action is required
People	Workforce recruitment and retention	Improvements made and must be sustained
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Partnerships	Thresholds for early help and statutory services	Improvements made and must be sustained
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Well-being	Compliance with statutory responsibilities	Improvements made and must be sustained
Well-being	Arrangements for supervised contact between children and their families	Improvements made and must be sustained
Well-being	Identification and response to child exploitation	Some improvements made – further action is required
Well-being	Ensuring priority status, pace, quality, delivery, and impact of its improvement activity	Improvements made and must be sustained

2. Glossary of Terminology and Quantity Definitions

A glossary of terminology is contained in Appendix one and a table of quantity definitions in Appendix two.

3. Summary of Improvement Check Findings

- 3.1 BCBC leaders have consistently prioritised children's services, to support sustained and timely improvements. This has significantly strengthened the quality and delivery of social services functions. The local authority has moved from having a fragile workforce and critical deficits in capacity, to an overall position of stability. This is the most significant change made since 2022-23, which underpins the local authority's capacity to drive forward and sustain improvements. **This positive improvement has been achieved through sustained focus on workforce well-being and practice quality.**
- 3.2 The local authority promotes learning and takes action to make improvements in a timely way. Following critical events, the local authority has prioritised improvements with safeguarding arrangements. The JICPA 2023 found the Bridgend Multi-Agency Safeguarding Hub (MASH) facilitates adherence to the Wales Safeguarding Procedures (WSP) and encourages close partnership working between agencies, but further improvements were needed in respect of IT systems which support information sharing and the sufficiency of partner resource. These improvements have been made, with an improved IT system and sufficient partner resource in place.
- 3.3 In 2023-24 leaders developed their 3-year strategic plan for child and family services¹ (entitled 'Think Family') and a detailed business case for additional funding. This received corporate support from council and enabled the development of additional posts, including five Principal Officers (PO) who support case management teams, implement family support strategies, oversee early help services, oversee commissioning and placements, and drive the transformation of child and family services. There is also a Signs of Safety (SoS) consultant and officers to drive forward practice in relation to quality assurance, policy, and corporate parenting/participation. **The robust corporate and political support for child and family is positive practice, which has made a significant contribution to improved outcomes for people.**
- 3.4 The local authority is embedding new arrangements for an integrated IAA, early help, locality (place-based teams working within communities) social work, locality early intervention and edge of care services. **This positive change is supporting to improve outcomes for people, whilst reducing demand for**

¹ Think Family - Improving Outcomes for Children and Families in Bridgend

statutory services. This is creating capacity for an improved focus on practice standards for children who need care and support. In this context, practitioners are consistently meeting statutory duties, and child protection processes are generally in line with requirements of the WSP.

- 3.5 Improvements in practice quality are driven by a 5-stage implementation plan for the SoS methodology. SoS is built on a set of principles and values that are solution focused, strengths based, and safety orientated². Whilst practice remains variable, leaders are working with staff to build skills and confidence, and the consistency of practice is improving. Whilst it will take time to embed this organisational change, practitioners are developing a shared understanding of practice standards. The local authority should strengthen implementation through improved focus on supporting partner agencies to understand and embed approaches within their own organisations. Leaders are aware of this issue and the PO for transformation has plans to strengthen communication strategies and training opportunities, in collaboration with partner agencies.
- 3.6 Leaders and practitioners have demonstrated sustained commitment and focus on securing improvements. This is complimented by constructive relationships with partners and a commissioned programme of independent advice and quality assurance. When combined with robust quality assurance activities, this provides assurance that areas for improvement will be identified and monitored in a timely way.

4. Key Findings and Evidence

Key findings and some examples of evidence are presented below in line with the four principles of the Social Services and Well-being (Wales) Act 2014.

People - We asked:

How well is the local authority ensuring that people have a say in their lives and can achieve what matters to them? How effective are leaders at developing a stable, highly skilled, well qualified, and supported workforce?

Strengths

- 4.1 The local authority has co-produced a corporate parenting strategy with care experienced young people, in the Bridgend Youth Forum. These young people have been fully involved in selecting priorities and the design and content of the strategy. The approach taken is 'nothing about you without you' and BCBC is committed to meaningful participation in all aspects of corporate parenting.
- 4.2 Improvements in practice quality are dependent on the sufficiency and efficacy of the workforce. In 2023 41% of the local authority workforce were agency

² What Is Signs of Safety? - Signs of Safety

staff, including a managed agency team which was in place for over 2 years. Through sustained improvements, the local authority ensures practitioners typically work with fewer than 20 children. 'Think Family' prioritised a 'Grow your Own' programme for social work and there will be 12 Newly Qualified Social Workers (NQSW) appointed next year. Leaders explored opportunities for enhanced marketing campaigns, including international recruitment, and received a Social Care Wales accolade in 2025 for developing and inspiring the workforce³. In August 2024 the local authority successfully exited the arrangement for a managed agency team, and agency staff accounted for 7% of the workforce in June 2025. **This is a significant change which demonstrates their recruitment and retention strategy is delivering desired outcomes.**

- 4.3 Nearly all staff describe a significant culture shift in the last 2-3 years. This is characterised by an increasingly reflective and collaborative approach across all teams. This shift has improved staff morale, with teams developing a strong sense of collaboration and shared purpose. Our staff survey response was highly positive, with 86% indicating they would recommend working in BCBC to a friend. Leaders are described as compassionate, committed, and focused on workforce well-being. **This positive practice has significantly improved workforce recruitment, retention, and workforce stability.**
- 4.4 The workforce includes many international and newly qualified social workers, who need time and support to develop experience. The local authority has implemented a case consultation process, which supports practitioners to access senior management oversight and consultation in complex situations. Operational management complete personal supervision in a timely way and teams consistently use SoS and reflective spaces to promote outcome focused interventions. The quality of case supervision would be strengthened further with improved focus on the child's lived experience, outcome focused actions, follow-up, and evidence of reflective discussions.
- 4.5 Leaders and managers have a strong understanding of service strengths and areas for improvement. The local authority implemented a system for enhanced scrutiny and compliance monitoring following critical events and child practice reviews. Since that time, oversight has been strengthened further with an increasing focus on quality and a quality assurance framework supports oversight of agreed practice standards, reflection, and learning. **This positive practice strengthens the local authority's ability to evaluate how service delivery impacts people's outcomes.**
- 4.6 Practitioners are positive about training and how this supports their professional development. SoS training is valued, and the training department demonstrate an innovative approach to practice improvement. For example, the SoS method has been adapted to use an alternative approach for Care Experienced

³ [2025 Accolades awards ceremony, winners and... | Social Care Wales](#)

Children (CEC), namely Signs of Stability. **This positive practice is valued by staff and supports to develop workforce efficacy.**

4.7 Practitioners are increasingly seeking and hearing the voice of the child and leaders have retained focus on improving practice in this area. We found good examples of Signs of Safety being used to promote child centred approaches to direct work with children. This includes regular use of direct work tools, such as 'three houses' and 'words and pictures'. Practice would be strengthened with consistency and increased focus on how the voice of the child is impacting assessments, plans and outcomes.

Areas for improvement

4.8 The Signs of Safety methodology promotes a relationship grounded and strength-based approach to practice. Leaders are embedding this organisational change in a phased way and sustained improvements are evident. However, practice remains variable and some teams are further ahead with improvements, than others. This means some children and families are experiencing the impact of improvements more than others. For example, when safeguarding arrangements work well, professionals work with the whole family and their network to co-produce safety plans and reduce risks in a timely way. When it works less well, family strengths are not identified or utilised, and plans become service led. In some files we also found fathers should have been involved sooner in assessments and plans. **Leaders are aware of this issue and should retain focus on achieving consistent practice, across all staff and teams.**

Prevention - We asked:

How well is the local authority preventing the need for care and support and ensuring the best outcomes for people? How effective are service developments at ensuring people receive the right support at the right time?

Strengths

4.9 The IAA team is responsible for receiving contacts and referrals, providing advice and assistance, assessing needs, and undertaking safeguarding enquiries. The MASH acts as the single point of contact for all new safeguarding concerns and brings together staff from BCBC, education, police, and health services. IAA and MASH work closely together, with a shared focus on improving access and pathways to support. **The partnership working and collaboration of agencies in the MASH is positive practice.**

4.10 In 2023–24, leaders developed their 3-year strategic plan for C&F services, entitled 'Think Family'. This committed the Council to introducing new arrangements for an integrated IAA, early help, locality social work, locality early intervention and edge of care services. A commissioning strategy was

implemented to drive improvement and investment across this continuum of support. Family support services were integrated with Children and Family Services, while education engagement and pupil support services remained the responsibility of the education directorate.

4.11 Whilst the impact of these changes is the subject of ongoing review, early indicators appear positive. For example, in November 2023-2024 there was a 16% reduction in the total number of children allocated to specialist teams, including a 48% reduction in child protection allocations. Practitioners reported increased confidence and improved decision-making through shared expertise and closer collaboration. Most importantly, exit surveys indicate nearly all people receiving early help services feel more able to make positive changes, reporting improved resilience, having better emotional well-being and family relationships, and being more confident to support their child's development. Similarly, 92% of children supported by edge of care services in 2024-25 were successfully prevented from entering the care system. **This is positive practice which indicates need is being met in a timely way, whilst reducing the need for care and support.**

Areas for improvement

4.12 The local authority works closely with an improvement partner to review service outcomes and areas for development. This process highlighted the need for family support to streamline systems, develop more intensive targeted support, and reform parenting support. There are some vacancies in key posts and gaps in service sufficiency, including services for adolescents, mental health, emotional well-being, neurodiversity, and vacancies for specialist exploitation workers and the integrated family support service. These gaps have led to some delays in people receiving timely support, and we identified examples where contingency planning for ending support could be improved. **Recruitment is underway, and leaders should continue to develop services in line with their Family Support Commissioning Strategy. The local authority should also review its communication strategy to ensure staff and partners are clear about available services and referral pathways.**

4.13 Leaders are working through local and national challenges, to develop placement sufficiency for supported accommodation and regulated services. A Children, Young Person and Transition Commissioning Strategy 2023-2028 outlines plans for improvement, but there remains a projected gap in sufficiency beyond 2028. The general shortage of foster carers and the specific shortage of skilled foster carers and residential care homes who can care for children with the greatest needs, are of particular concern. **Leaders should continue to implement plans in the local authority commissioning strategy, to support timely improvements.**

4.14 Whilst placements Operating without Registration (OWR) are only used in exceptional circumstances, and their use is reducing, there are a small number of children who are placed in services providing care and support that are not registered as required by law. **The local authority must ensure children are not placed in unregistered services and must continue its efforts to identify suitable, registered placements.**

4.15 Placement sufficiency in foster care is partly dependent on the support for carers and the local authority approach to retention. Leaders have plans to improve approaches with matching, training, and placement support. The fostering service and Care Experienced Children Team (CECT) have recently appointed permanent managers, and practitioners report improved practice and morale. Whilst the fostering service and CECT are increasingly working together to strengthen placement stability, foster carers report mixed views about the impact and sustainability of these changes. **Leaders should ensure the fostering service and CECT retain priority focus, to ensure improvements are made in a timely way.**

Well-being – We asked:

How well is the local authority protecting people from abuse and neglect? How effective are service developments at addressing priority areas for improvement to safeguard children?

Strengths

4.16 The local authority responds to safeguarding enquiries in a timely way and responds to referrers as required in the WSP. Partners are consistently invited and contribute to the safeguarding process. Nearly all children receive visits in line with the requirements of the WSP, and child protection conferences and CEC Reviews are timely. The local authority has addressed improvements required from the JICPA and ensures minutes and plans are shared following these meetings. Core groups would be strengthened further if meetings were consistently in person and with improved focus on developing the outline plan from conference.

4.17 Practitioners mostly identify and make the active offer of advocacy. It is positive the offer of formal advocacy is expanding, and parental advocacy is now considered alongside advocacy for children. We saw examples of Independent Reviewing Officers (IRO) checking and ensuring children were provided with the active offer. Despite this, the uptake of advocacy is somewhat lower than expected and leaders are working with practitioners to better understand this issue. We identified examples where the offer of parental advocacy would have been appropriate and was not considered. However, informal advocacy is

nearly always available to parents in the safeguarding process, when formal advocacy is not offered or accepted.

4.18 The local authority has developed a central contact team who support supervised contact for CEC and children subject to the Public Law Outline (PLO) process. This dedicated resource is significantly improving the timeliness and quality of contact, whilst creating capacity for practitioners to focus on care and support planning.

4.19 Leaders have developed an effective Assuring Quality and Learning Framework to systemically monitor and evaluate practice. This aims to support learning and development, improved practice, and the best possible outcomes for people. An essential element of the framework is to promote critical thinking and professional curiosity through meaningful feedback from practitioners, partners, and people with lived experience. For example, staff complete appreciative enquiries⁴, and leaders have recently adopted the Most Significant Change⁵ method to hear people's stories and develop an understanding of how and when change happens for people. **This positive practice is rolling out across all teams and leaders should continue to support this advanced approach to learning and quality assurance.**

Areas for improvement

4.20 Leaders are aware of increasing concerns regarding the exploitation of children and the impact of online harm. A regional strategy was co-produced with people and partners in April 2025. Regional practice guidance, training, prevention panels, and tools were created for implementation. A local multi-agency plan has clear actions and a governance structure to oversee improvements. This includes exploitation training for the workforce and multi-agency partners. The local authority has invested in 3 specialist posts, which will strengthen the strategic and operational response to these concerns. This is a significant improvement following the JICPA 2023, and these developments are beginning to strengthen practice and management oversight. However, the strategy is not yet fully embedded, and there remains inconsistencies in how exploitation is identified across agencies. **Leaders should continue to embed consistent approaches to safeguarding children from exploitation. This should include continuing to explore opportunities for multi-agency training, reflection, and shared learning.**

4.21 Whilst the local authority generally records demographics and associates, we found case recordings were not always completed in a timely or consistent manner. Records should be accurate, objective, understandable, complete, and up-to-date. They should fully reflect and respect the views of the person

⁴ A strengths-based approach to creating change. This involves listening to the experiences of people, exploring what is already working, and how to build on that.

⁵ Deep handbook Eng.pdf

concerned, contain an appropriate level of analysis to support decisions made, and evidence sound professional judgement and decision making. **Leaders should work with practitioners to develop and embed agreed standards for record keeping.**

4.22 Whilst many assessments and plans provide a detailed summary of service interventions and next steps, there is a loss of focus on proportionality and analysis of need. Some assessments and plans would be strengthened with an improved focus on risk, harm, strengths, safety, the voice of the child, and outcomes. It is particularly important the child and significant family members are consistently included in this process and plans are co-produced. SoS provides an opportunity for family network meetings and safety plans to reduce escalations through this strength-based approach. Leaders are working with staff to build skills and confidence, and the consistency of practice is improving. **Leaders should continue to review the quality of assessments and plans and share learning to support practice improvements.**

4.23 The IRO service is piloting the SoS approach in child protection case conferences. This provides an opportunity to make the conference process more inclusive, and strength based. Parents/caregivers are actively encouraged to attend and contribute. However, the voice of the child, their lived experience and their wishes and feelings could be heard in a more impactful way. **Subject to their age and level of understanding, children must be invited and supported to take part in meetings held in line with the WSP; and all meetings held in line with child protection processes should start with the child's story⁶.**

4.24 Recordings for case conference do not sufficiently focus on the information recorded being understood by family members. **The written record of conference is a crucial working document and leaders should ensure record keeping is in line with the requirements of the WSP.**

4.25 The IRO service plans to review the SoS pilot and will seek the views of family members, as part of this process. **Leaders should continue to ensure improvements to the conference process are co-produced with people.**

Partnership - We asked:

How well are partners working together to deliver high-quality, sustainable outcomes for people? How well have strategic partnerships continued to work together, to secure continuous improvements?

Strengths

4.26 We saw collaborative partnership working at operational and strategic levels. This is critical to ensure improvements are delivered and sustained, and the

⁶ [Full report - Rapid Review of Child Protection Arrangements FINAL FOR PUBLICATION](#)

well-being of children and families is consistently promoted and protected. **Leaders have a positive professional support network from which it can draw expertise, knowledge, support, and constructive challenge.**

4.27 Effective and mature partnership arrangements between agencies are supporting a coordinated multi-agency response to safeguarding concerns. **There is a positive focus on safeguarding across the local authority. A culture of safeguarding is promoted as everyone's collective responsibility.**

4.28 Leaders have responded to areas for improvement identified through inspection activities. The initial response prioritised improvements required with workforce stability and safeguarding arrangements. Subsequent priorities included improvements to early help and prevention, fostering services, and contact arrangements. The local authority has also worked with partners to embed SoS and strengthen commissioned arrangements. Whilst some improvements are more established than others, leaders have retained focus on priorities and sought to maintain and sustain progress. **There has been a positive approach to change management.**

4.29 The local authority and multi-agency partners have developed an improved understanding of threshold for referrals into the MASH. MASH have developed a professionals advice line for discussions about safeguarding concerns. **Partners told us the professional advice line has had a positive impact. This is positive practice.**

4.30 Operational partners work well together and there is confidence in decision making for safeguarding. This is supported by effective systems for escalation and a healthy culture of professional challenge. For example, fortnightly MASH interface meetings and a Joint Operational Group (JOG) provide opportunity for multi-agency reflection and constructive challenge. **This is positive practice and leaders should continue to strengthen these arrangements.**

Areas for improvement

4.31 The local authority has brought the majority of early help services into the Child and Family directorate, from the Education directorate. This change has been well received by most staff and is supporting improved discussions about prevention and thresholds for care and support. However, some staff would benefit from an improved understanding of these changes. **Leaders should continue to work with education partners to develop a shared understanding of roles and responsibilities.**

4.32 There is draft regional guidance on thresholds for care and support. This was developed with multi-agency partners and is nearing publication. **Leaders**

should continue to work with partners locally and regionally, to implement threshold guidance in a timely and robust way.

4.33 Partners identified some inconsistent practice in relation to exploitation, professional concerns, and the operational response to the Children (Abolition of Defence of Reasonable Punishment) (Wales) Act 2020. **Leaders should continue to work with partners and seek feedback on these specific areas of practice, to ensure improvements are made in a timely way.**

4.34 Some partners would welcome further multi-agency training in respect of SoS, exploitation, thresholds, and safeguarding. **Leaders should continue to work with partners to develop an agreed approach to multi-agency training and practice.**

4.35 The Cwm Taf Morgannwg Emergency Duty Team (EDT) covers Bridgend, Merthyr Tydfil, and Rhondda Cynon Taf (RCT). The service must provide help in a crisis to vulnerable adults, children in need and their families. Partners and practitioners reported challenges with staff sufficiency, record keeping, and practice. **Leaders should work with regional partners to review these arrangements and promote improvements in a timely way.**

5. Next Steps

CIW expects the local authority to consider the areas identified for improvement and take appropriate action to address and improve these areas. CIW will monitor progress through its ongoing performance review activity with the local authority. Where relevant, we expect the local authority to share the positive practice identified with other local authorities, to disseminate learning and help drive continuous improvement in statutory services throughout Wales.

6. Methodology

Fieldwork

- Most inspection evidence was gathered by reviewing the experiences of 24 people through review and tracking of their social care record. We reviewed 21 social care records and tracked 3
- Tracking a person's social care record includes having conversations with the person in receipt of social care services, their family or carers, key worker, the key worker's manager, and were appropriate other professionals involved
- We engaged, through interviews, observations and/or focus groups, with 8 people receiving services and/or their carer
- We engaged, through interviews and/or focus groups with 48 local authority employees (this included social workers, team managers, operational and strategic managers, the head of service, and director of social services
- We interviewed a range of partner organisations
- We reviewed a sample of staff supervision files

- We observed reflective sessions and an initial child protection case conference
- We reviewed supporting documentation sent to CIW for the purpose of the inspection
- We administered surveys to local authority social services staff, partner organisations and people

Our Privacy Notice can be found at <https://careinspectorate.wales/how-we-use-your-information>.

7. Welsh Language

CIW is committed to providing an active offer of the Welsh language during its activity with local authorities. The active offer was not required on this occasion. This is because the local authority informed us people taking part did not wish to contribute to this improvement check in Welsh.

8. Acknowledgements

CIW would like to thank staff, partners and people who gave their time and contributed to this inspection.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Lou Bushell-Bauers'.

Lou Bushell-Bauers
Head of Local Authority Inspection
Care Inspectorate Wales

Appendix 1

Glossary of Terminology

Term	What we mean in our reports and letters
Must	Improvement is deemed necessary in order for the local authority to meet a duty outlined in legislation, regulation or code of practice. The local authority is not currently meeting its statutory duty/duties and must take action.
Should	Improvement will enhance service provision and/or outcomes for people and/or their carer. It does not constitute a failure to meet a legal duty at this time; but without suitable action, there is a risk the local authority may fail to meet its legal duty/duties in future.
Positive practice	Identified areas of strength within the local authority. This relates to practice considered innovative and/or which consistently results in positive outcomes for people receiving statutory services.
Prevention and Early Intervention	A principle of the Act which aims to ensure there is access to support to prevent situations from getting worse, and to enhance the maintenance of individual and collective well-being. This principle centres on increasing preventative services within communities to minimise the escalation of critical need.
Voice and Control	A principle of the Act which aims to put the individual and their needs at the centre of their care and support; and giving them a voice and control over their outcomes. This can help them achieve their well-being outcomes and the things that matter most to them.
Well-being	A principle of the Act which aims for people to have well-being in every part of their lives. Well-being is more than being healthy. It is about being safe and happy, having choice and getting the right support, being part of a strong community, having friends and relationships that are good for you, and having hobbies, work or learning. It is about supporting people to achieve their own well-being and measuring the success of care and support.
Co-Production	A principle of the Act which aims for people to be more involved in the design and provision of their care and support. It means organisations and professionals working with them and their family, friends and carers so their care and support is the best it can be.

Multi-Agency working	A principle of the Act which aims to strengthen joint working between care and support organisations to make sure the right types of support and services are available in local communities to meet people's needs. The summation of the Act states there is a requirement for co-operation and partnership by public authorities.
What matters	'What Matters' conversations are a way for professionals to understand people's situation, their current well-being, and what can be done to support them. It is an equal conversation and is important to help ensure the voice of the individual or carer is heard and 'what matters' to them.

Appendix 2

Quantity Definitions Table

Terminology	Definition
Nearly all	With very few exceptions
Most	90% or more
Many	70% or more
A majority	Over 60%
Half	50%
Around half	Close to 50%
A minority	Below 40%
Few	Below 20%
Very few	Less than 10%

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Children's Social Care
June 2025 – Care Inspectorate Wales – Improvement Check
ACTION PLAN

PRINCIPLE 1 PEOPLE (Pe)					
REF	AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	TIMESCALE	BRAG
Pe1	Retain focus on implementing Signs of Safety model of practice, achieving consistent ways of working across all staff and teams.	<p>Workforce Transformation workstream meets 6-weekly and governs SofS implementation including QA activity ensure that Sofs is embedded across teams.</p> <p>Consultant Social Worker will support specific teams to ensure SofS is embedded across all teams.(RIF funded).</p> <p>SofS Champion event to be held to ensure full understanding of role and responsibility for each team</p> <p>CIG to continue to be used as a practice forum to celebrate good practice and areas for development</p> <p>Reflective Sessions involving partners to continue to be held.</p>	PO Transformation	March 2026	

PRINCIPLE 2 – PREVENTION (Pr)						
Page 27	REF	AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	TIMESCALE	BRAG
	Pr 1	Continue to develop services in line with the Family Support Commissioning Strategy; review the communication strategy to ensure staff and partners are clear about available services and referral pathways	<p>Implement the recommendations and actions contained within the Family Support Commissioning strategy</p> <p> Family Support Action Plan_05062021</p> <p>Multi-Agency board to monitor implementation of the strategy</p>	PO Family support	March 2027	
	Pr 2	Continue to implement plans in the local authority commissioning strategy, to support timely improvements.	<p>Implement the Eliminate Profit action plan to develop services to prevent children from becoming looked-after and those that need to exit care.</p> <p> FOSTERING Eliminating Profit and</p>	Head of Service/PO Commissioning	March 2027	
	Pr 3	Ensure that children are not placed in unregistered services and continue efforts to identify suitable, registered placements.	<p>To increase foster carer availability and capacity.</p> <p>Increase internal residential provision capacity.</p>	PO Placements and Commissioning, GMs	June 2026	

Page 28		<p>Ensure there are clear and timely plans for children's move on from care.</p> <p>Use the re-modelling fostering board to monitor progress linked to the above actions</p>			
Pr 4	<p>Ensure the fostering service and CECT retain priority focus, to ensure improvements are made in a timely way.</p>	<p>To continue to monitor performance, compliance, staff surveys, outcomes, staffing to prevent any impact on service delivery</p> <p>IRO service to continue to monitor quality of care planning and escalate issues to TM's and GMs when required to do so.</p> <p>PO Case Management and Transition to improve practice across CECT and Care leaving teams ensuring that SofS and care planning is evident in all teams</p>	<p>GM Provider Services and GM Case Management and Transition</p>	<p>June 2026</p>	

PRINCIPLE 3 – Wellbeing (W)

Page 29

REF	AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	TIMESCALE	BRAG
W 1	Continue to embed consistent approaches to safeguarding children from exploitation. This should include continuing to explore opportunities for multi-agency training, reflection, and shared learning.	<p>To implement the exploitation strategy and develop our exploitation service and then monitor the impact of the service on outcomes for children.</p> <p> Exploitation Strategy.docx</p> <p>Multi-agency training to be delivered to teams via Regional Safeguarding board.</p> <p>Exploitation Champions to continue to meet and promote the exploitation strategy and approaches to working with children and families.</p>	GM Locality Hubs	June 2026	
W 2	Work with practitioners to develop and embed agreed standards for record keeping.	<p>Refresh record keeping guidance and ensure teams are implementing consistently via QA activity.</p> <p>Training to be developed and delivered to teams to ensure consistency in recording.</p>	QA Officer/PO Transformation	June 2026	
W 3	Continue to review the quality of assessments and plans and share	Continue to implement the QA framework, MSC and service based audits to identify good practice and areas for development.	PO Transformation/SMT	June 2026	

PRINCIPLE 3 – Wellbeing (W)					
REF	AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	TIMESCALE	BRAG
	learning to support practice improvements.	Reflective sessions to continue to be held across teams and partners. CIG to continue to be a forum to promote good practice Action learning sets to continue to be held across teams.			
W 4	Subject to their age and level of understanding, children must be invited and supported to take part in meetings held in line with the WSP; and all meetings held in line with child protection processes should start with the child's story.	To record and reflect that children are being invited to CP conferences and that SofS is being implemented consistently with the voice of the child evident throughout. Implement SofS conferences for all CP conferences. IRO team development to ensure child's story commences a CP conference	PO Transformation and IRO Team Manager/SCWDP	June 2026	
W 5	Ensure case conference record keeping is in line with the requirements of the WSP.	To review the approach to minute taking and that notes are proportionate and reflect the strengths, risks and needs within families clearly.	GM Business Support/IRO Team Manager/GM Locality Hubs	June 2026	

PRINCIPLE 3 – Wellbeing (W)					
REF	AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	TIMESCALE	BRAG
		Training to be provided to business support staff on expectations on minute taking.			
W 6	Continue to ensure improvements to the conference process are co-produced with people	<p>To continue implement SofS conferences consistently and ensure that the voice of children and families are at the centre.</p> <p>Increase the number of children participating in their CP conference through the child's social worker having early discussions with families regarding attendance.</p>	GM IAA/Safeguarding/IRO Team Manager	June 2026	

PRINCIPLE 4 – Partnerships (Pa)

REF	AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	TIMESCALE	BRAG
Pa 1	Continue to work with education partners to develop a shared understanding of roles and responsibilities.	<p>To continue with attendance at Team Bridgend, Primary Federation and BASSH.</p> <p>Continue with interface with EEYP directorate</p> <p>SofS multi-agency training to commence with Education services by end of 2025</p>	<p>GM IAA/Safeguarding</p> <p>PO Family Support</p>	June 2026	
Pa 2	Continue to work with partners to implement threshold guidance in a timely and robust way.	<p>To launch local threshold guidance and hold raising awareness sessions of the guidance with relevant partners.</p> <p>Reflective sessions continue to be held with partners to develop shared understanding of thresholds.</p> <p>SofS multi-agency training to delivered to all partners.</p>	GM IAA/Safeguarding	March 2026	
Pa 3	Continue to work with partners and seek feedback on specific areas of practice - exploitation, professional concerns, and the operational response to the Children (Abolition	To review with partners in our multi-agency forums such as JOG progress related to exploitation, professional concern and any other areas of multi-agency practice.	Deputy HOS	March 2026	

Page 33	of Defence of Reasonable Punishment) (Wales) Act 2020 - to ensure improvements are made in a timely way.	Reflective sessions continue to be held with partners to develop shared understanding of thresholds. SofS multi-agency training to delivered to all partners			
	Pa 4	Continue to work with partners to develop an agreed approach to multi-agency training and practice.	To review what multi-agency training is currently delivered and where opportunities present to enhance multi-agency sessions. Develop joint training with Health, Education and SWP on best practice linked to children and family support	SCWDP	March 2026
	Pa 5	Work with regional partners to review EDT arrangements and promote improvements in a timely way.	To attend EDT management board and feed into service development. Create an interface with EDT with the GM IAA/Safeguarding to discuss any operational issues.	GM Locality Hubs GM IAA/Safeguarding	September 2025 September 2025

BRAG STATUS - KEY	
	Action Complete
	Action On Track
	Action Mainly On Track With Some Minor Issues

	Action Not On Track, Not Yet Meeting Performance Targets
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Agenda Item 4

Meeting of:	SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	25 SEPTEMBER 2025
Report Title:	CARE INSPECTORATE WALES (CIW) FOSTERING SERVICE INSPECTION JUNE 2025
Report Owner / Corporate Director:	CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING
Responsible Officer:	DAN BOLTON GROUP MANAGER – PROVIDER SERVICES
Policy Framework and Procedure Rules:	There is no effect upon the policy framework and procedure rules.
Executive Summary:	<p>This report presents the findings of the Care Inspectorate Wales (CIW) inspection of Bridgend County Borough Council's local authority fostering service, which took place in June 2025. The inspection followed a previous inspection in November 2023, where eight areas were identified as requiring significant improvement.</p> <p>CIW found that progress has been made in all areas with some requiring further improvement. Particular strengths related to safeguarding, oversight, and the support provided to prospective carers. The service has benefited from recent leadership stability and a clear strategic focus on improving outcomes for children.</p> <p>However, three areas continue to require further improvement: the robustness of matching processes, consistency in the review and monitoring of foster carers, and the quality and delivery of carer training.</p> <p>CIW did not issue any Priority Action Notices which reflects that some improvements had been made across all areas. The Local Authority has already taken steps to address these areas as part of a wider service remodelling programme. An improvement plan is in place and will be monitored through the Council's governance mechanisms including the regulatory tracker which is reported to Governance and Audit Committee and robust scrutiny at regular intervals to be determined by the Committee.</p>

	<p>The report and associated actions are presented for Committee scrutiny and recommendation prior to presentation to Cabinet in October for approval of the action plan.</p>
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1. Purpose of Report

1.1 The purpose of this report is to present to the Committee the Care Inspectorate Wales (CIW) inspection report following the inspection of Bridgend County Borough Council's (BCBC) local authority fostering service in June 2025, and to request that the Committee **scrutinises the inspection report and action plan and makes any recommendations on the action plan prior to consideration by Cabinet in October to approve of the action plan. In addition, the foster care recruitment strategy is contained in the report to reflect the council's response to this agenda which is at appendix 3.**

2. Background

2.1 CIW undertook an inspection of BCBC's fostering service between 23 to 27 June 2025. The inspection follows a previous visit in November 2023, where whilst good practice was evidenced eight areas were identified as requiring significant improvement.

2.2 The fostering service comprises a general fostering team and a kinship and permanence team. The service recruits, assesses, supervises and supports foster carers (including connected persons) to provide safe, nurturing placements for children.

2.3 The inspection focused on the following themes:

- Well-being
- Care and Support
- Environment
- Leadership and Management

2.4 The inspection included case tracking, staff and carer focus groups, observation of practice, and review of documentation, complaints, compliments, and surveys.

2.5 CIW found that progress had been made in five of the eight areas previously identified as requiring improvement and needs to be sustained, including safeguarding, governance, and training and information provided to prospective carers.

2.6 CIW noted that recent management stability over the previous 6 months brought more consistency and clear strategic commitment to service improvement.

3. Current situation/ proposal

3.1 The CIW inspection report is attached at **Appendix 1**.

3.2 Summary of findings

3.2.1 The table below summarises CIW findings and further details are available throughout the full report . It should be noted that there were no areas for improvement identified where no improvements had been made.

Principle	Areas of Improvement Identified in 2023	Progress Identified at June 2025 Inspection
Leadership & Management	Oversight and governance of the service	Improvements made and must be sustained
Leadership & Management	Application of policies and procedures	Improvements made and must be sustained
Well-being	Safeguarding arrangements – safety and protection from harm	Improvements made and must be sustained
Care & Support	Foster carers' delivery of safe and supportive care	Some improvements made – further action is required
Care & Support	Monitoring and reviewing foster carers' responsibilities	Some improvements made – further action is required
Care & Support	Foster carer training, support, and information	Some improvements made – further action is required
Leadership & Management	Training, advice and guidance for prospective carers	Improvements made and must be sustained
Leadership & Management	Adherence to statutory and regulatory responsibilities across the fostering service	Improvements made and must be sustained

3.3 Recommendations and Next Steps

3.3.1 An Action Plan has been developed in response to the recommendations made by CIW and can be found at **Appendix 2**. The actions in the attached plan are cross-referenced with the actions in the Children and Families 3 year strategic plan approved by Council in September 2023 to ensure there is alignment and no duplication of effort. The progress to implement the actions will be overseen through the Social Services and Wellbeing Quality and Performance Framework and reported to the Social Services Improvement Board chaired by the Leader of the Council. The improvements required will be integrated into the Council's regulatory tracker which is reported to Governance and Audit Committee and can be scrutinised regularly by Overview and Scrutiny Committee at a frequency to be determined by the Committee.

CIW have indicated they will be monitoring the Council's performance and progress in achieving the improvements required.

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 of Future Generations (Wales) Act 2015 provides the basis for driving a different kind of public service in Wales, with five ways of working to guide how the Authority should work to deliver wellbeing outcomes for people. The following is a summary to show how the five ways of working to achieve the well-being goals have been considered in this report:

- **Long-term** -The fostering service is being remodelled to ensure it meets the evolving needs of children, carers, and the workforce in a sustainable way. Improvements to governance, recruitment, and carer support are intended to secure positive long-term outcomes for children and young people.
- **Prevention** - The focus on improving placement stability, matching processes, and trauma-informed support helps prevent placement breakdowns and escalation of need. Early identification of carer support requirements and the development of behaviour support services are also key preventative actions.
- **Integration** - The fostering service works in close partnership with children's social work teams, education, health, and regional Foster Wales colleagues. The improvements being made are integrated within wider children's services strategies and linked to the local authority's Corporate Parenting and Sufficiency objectives.
- **Collaboration** - The ongoing remodelling process involves carers, staff, senior managers, and partners. Engagement events, working groups, and consultations have ensured that collaborative voices shape service redesign and improvement planning.
- **Involvement** - Care-experienced children, foster carers, and staff have been actively involved in providing feedback through focus groups, surveys, CLA reviews, and youth voice forums. This feedback is central to shaping a more responsive, user-led fostering service.

5.2 This report assists in the achievement of the following corporate well-being objectives under the Well-being of Future Generations (Wales) Act 2015:

- **Helping people and communities to be more healthy and resilient** – by strengthening foster placements, supporting carers, and improving outcomes for looked after children and care leavers.

- **Smarter use of resources** – by aligning service improvement to existing structures, reducing reliance on agency staff, and promoting carer retention and development to maximise in-house capacity.

6. Climate Change and Nature Implications

6.1 There are no direct climate or nature change implications associated with the report and associated action plan at this stage.

6.2 The importance of decarbonisation to help protect and sustain the environment over the long term and in line with our climate change ambitions will be considered and promoted as and when strategies identified within the action plan are implemented.

7. Safeguarding and Corporate Parent Implications

7.1 This inspection relates directly to the Council's responsibilities for safeguarding and corporate parenting within its local authority fostering service.

7.2 The CIW report acknowledges that safeguarding arrangements within the fostering service have improved, with stronger links between the fostering and safeguarding teams. Staff are included in safeguarding meetings, and the use of individualised safer care plans and safety agreements has been strengthened. Improvements in leadership and governance have also contributed to more effective oversight of safeguarding practice.

7.3 However, the inspection also identified areas where further improvement is needed to fully safeguard children — notably in relation to matching processes, consistency of carer reviews, and the availability and impact of training. Addressing these areas is key to ensuring children live in placements where their needs are fully understood and met.

7.4 The Council, as corporate parent, must ensure children in foster care are not only safe but are supported to thrive. The improvement plan addresses these expectations by embedding trauma-informed practice, strengthening carer support, and promoting placement stability. This reflects the Council's ongoing commitment to its corporate parenting duties and to improving the experience and outcomes for looked after children.

8. Financial Implications

8.1 There are no direct financial implications associated with this report.

9. Recommendation(s)

9.1 It is recommended that the Committee scrutinises the CIW findings report and associated Action Plan prior to its consideration by Cabinet.

Background documents

None

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Inspection Report

Foster Wales Bridgend



Level 2 the Civic Offices, Angel Street, Bridgend, CF31 4WB



01656642336

Date of inspection visits:

23/06/2025, 24/06/2025, 25/06/2025,
26/06/2025, 27/06/2025

Service Information:

Operated by: Bridgend County Borough Council Adults and Children's Services

Care Type: LA Fostering Service

Main language(s): English

Promotion of Welsh language and culture: The service provider anticipates, identifies, and meets the Welsh language and culture needs of people.

Themes:



Well-being



Care & Support



Environment



Leadership & Management

Summary:

Foster Wales Bridgend recruit, assess, train, supervise and support general foster carers and connected person carers to meet the needs of children looked after. The service comprises of a general fostering team and kinship and permanence team. This inspection follows a previous inspection in November 2023 where eight areas were identified as requiring significant improvement.

This inspection has found the service has improved in five areas. Progress was initially impacted by instability in leadership, management and workforce. A new group manager and general manager have brought more stability and there is a clear commitment to develop the service to improve outcomes for children. We found improvements to safeguarding processes, oversight and governance arrangements, policies and procedures and the training and information provided to prospective carers. Areas which require further improvement include standards of care and support which includes matching processes, carers annual reviews of fostering and carer support and training. The service is undergoing a 'remodel' which is looking at all areas of service delivery. Most areas identified at this inspection as requiring improvement have already been identified by the Local Authority provider, who has provided assurances further action will be taken.

Findings:



Well-being

Children are encouraged to share their views about the care they receive. They are supported to attend their Children Looked After (CLA) reviews where possible and have access to independent advocacy. Foster carers play a vital role in advocating for children's needs and perspectives. While there are systems to gather children's views during carers' annual fostering reviews, consistency requires further improvement. Children are not always consulted about changes in their household, including the arrival of new children. The service has engaged with the Local Authority's youth voice forum, which includes care-experienced young people, to shape future service development. Efforts are ongoing to embed children's voices more meaningfully into service planning and delivery.

Carers support children's health by ensuring attendance at medical appointments, promoting healthy lifestyles, and supporting their emotional well-being. Health is monitored through annual assessments, CLA reviews, and supervision sessions. Carers act on health concerns and refer to specialist services when needed. Referrals can be made for children to receive support to understand their life journey and previous trauma, by an external provider. This provider offers weekly consultations to staff in the team, alongside training and support to carers to understand children's needs and how best to respond, using a trauma informed approach.

Carers promote school attendance and advocate for children's educational needs, working collaboratively with education professionals. The service monitors education and leisure during visits and CLA reviews, with tutoring being provided to children who require additional support with their education attainment. Children participate in enjoyable activities which support their well-being and reflect typical family life. This includes attending clubs, participating in sports, day trips and holidays. HALO leisure cards are provided to children and carers to access local facilities. This has been extended to include soft play for younger children. A charity established by carers raises funds for events and trips throughout the year for children and their foster families. These provide opportunities for children and their carers to have fun, create positive memories, develop friendships and links in the fostering community.

Children are supported to maintain meaningful relationships with family and friends, tailored to their individual needs. Some remain with carers into adulthood through "When I'm Ready" arrangements. Carers are supported if they wish to pursue Special Guardianship Orders for children, to provide them long-term stability. Safeguarding arrangements have improved, with prompt action taken when concerns arise. Staff report better communication and information sharing. However, matching processes still require improvement, as they do not always fully consider all risks to children's well-being.



Care & Support

The Local Authority works closely with colleagues from Foster Wales and has improved efforts to recruit more foster carers. Regional collaboration and targeted campaigns have been positively received and generated new carers being approved. Placement availability is an ongoing issue across the sector. There are not enough carers to meet the diverse needs of children who require foster care. Half the children who are supported by the service are cared for by connected person carers who already have an established relationship, supporting children's identity and sense of belonging. Leaders are focusing on carer retention alongside the recruitment efforts.

Referrals to the service are made to the placement team which no longer sits within the fostering service. Staff told us there has been improved collaboration and their professional input is increasingly recognised and valued when making decisions about suitable matches for children. We found improved processes around matching and these are in the early stages of being embedded consistently. This includes a matching form and records of planning meetings. Where used well, they provide valuable opportunities for key professionals to assess suitability, identify potential risks, and determine ongoing support needs. Some records do not provide a clear rational for decision making or consider the views of all children. General carers told us they mostly receive enough information about children, prior to caring for them. Where planned, introductions are well managed. All general carers have an online profile which includes information about them, their household and photographs which are shared with children and support them to be prepared for meeting their new carers.

The service has identified an area for further development in their processes for assessing and planning longer-term care arrangements. We found no evidence of discussions with carers about their long-term capacity, commitment, strengths of these arrangements and potential impact. This would provide opportunities to identify potential risks and preventative measures which would support children's stability and longer-term outcomes. General carers are approved to care for a maximum of three children. In exceptional circumstances an exemption can be agreed for carers to care for more than three children. We found these have not been used in exceptional circumstances as described in legislation. Improvements have been made to documentation around these arrangements, but not all records of decisions evidence the service considers risks and impact on all children involved, to ensure the welfare and stability of each child is promoted. This remains an area which requires improvement.

Improvements have been made to safeguarding arrangements which ensure children are safe. Concerns are referred promptly, enabling swift intervention and support. Communication between the fostering and safeguarding teams has strengthened, ensuring there is a collaborative approach to child protection. Staff told us they are included in safeguarding meetings ensuring the fostering perspective is embedded in key decision-making processes. We found examples of comprehensive

safety plans being implemented to safeguard children's well-being. Safer care agreements have also been enhanced, are now tailored to each child's unique needs, identifying risks and providing guidance to carers on how they should mitigate these. Significant incidents are now recorded on carers records which include any safeguarding concerns and the actions taken. These include management oversight. Most staff have completed 'signs of safety' training which is embedded in other areas of children services. Leaders plan to embed this further into the fostering service.

Carers receive regular supervision support visits, which provide opportunity to discuss children's care and support. We found these did not consistently have a clear focus on how the care and support delivered is supporting children's personal outcomes. Leaders told us they are actively exploring ways to enhance the monitoring and evaluation of children's outcomes. Supervising social workers complete unannounced visits at least annually which provide a valuable opportunity to observe how children's needs are promoted and met.

Where risks are identified to children's stability, meetings are arranged and chaired by a senior social worker to identify support to prevent a breakdown in relationships. Re-unification workers based in the service provide immediate additional support to manage these risks. Leaders told us reflective discussions are being arranged for professionals who work with children who have experienced multiple breakdowns, to identify any patterns and lessons learnt.

Behaviour analysts from an external provider have been commissioned to offer support to children, carers and staff. They attend the service weekly and offer consultations, reflective discussions and training. Carers told us the trauma informed training provided is valuable and has supported them to better understand children's needs. The support children have received from the service includes therapy and life journey work to help them process their previous experiences. Carers report this service is invaluable, but more resources are needed. Leaders recognise the demand for these services and continuously review whether additional resources are needed to meet children's needs.



Environment

Foster Wales Bridgend is based within the local authority's civic offices, offering a well-equipped working environment. Staff benefit from a designated open-plan office space, situated near colleagues from other children's services teams, which supports collaboration and communication. Private meeting rooms are available to ensure confidentiality during staff supervision sessions. Service events, such as training sessions and coffee mornings, are hosted at various venues throughout the borough to enhance accessibility and engagement.

To support the service's hybrid working model, staff are provided with laptops and mobile phones. All information is securely stored electronically with password protection. An upgrade to the current database system is scheduled for early next year. The fostering panel has access to an office space within the building for in-person meetings, with the option for some members to participate virtually.

As part of the recruitment process for prospective carers, health and safety assessments are conducted to ensure the home is suitable for accommodating children's needs. Supervising social workers carry out both announced and unannounced visits where they can monitor the environment and children's bedrooms are routinely inspected. Most health and safety assessments are thorough and are reviewed as part of the carers' annual reviews. Updates are made as necessary, and any concerns identified are addressed promptly with carers.



Leadership & Management

Following the previous inspection, the service experienced ongoing instability due to changes in management and high staff turnover. This initially hindered progress in embedding necessary improvements. However, the appointment of a new Group Manager, General Team Manager, and a more stable permanent workforce over the past six months has brought greater consistency. Leaders and managers demonstrate a commitment to continuous improvement and co-production, with increasing efforts to involve children, carers, and staff in shaping the service.

A comprehensive service remodelling is currently underway, reviewing all aspects of service delivery. Working groups, including carers and representatives from across children's services, have engaged in meaningful discussions. The first group focused on improving communication within the team around the child. This is an area carers told us requires improvement. Plans are in place to strengthen collaboration between children's social workers and supervising social workers to enhance carer support and promote stability for children.

Improvements have been made to oversight and governance arrangements. The service now uses its database system more effectively to track key compliance data, enabling better information management. Policies and procedures are generally adhered to and are currently under review to ensure they remain fit for purpose. Business support has significantly increased, from one business support officer to five, enhancing the service's administrative capacity. A revised quality assurance framework has been introduced to support audits of records. Quality assurance reports identify both strengths and areas for development. Further analysis is required to evaluate the impact of changes on children's outcomes, which would inform ongoing service development plans.

There are established processes for monitoring carers' compliance and performance. Carer assessments are presented to the fostering panel, which advises the local authority whether carers meet the required competencies to be approved. Annual reviews are completed to review carers approval. These are presented to panel every three years or following significant changes. The panel, led by an experienced chair, has noted improvements in the quality of reports due to increased service stability. Panel members bring diverse expertise and receive relevant training. Annual reviews incorporate carers' views and feedback from health and education professionals. Efforts to gather input from children have improved, with more child friendly feedback questionnaires now in use. However, feedback from children, household members, and social workers remains inconsistent. Workforce instability has impacted timescales for reviews with delays noted. This remains an area which requires improvement.

Leaders and managers recognise the importance of foster carer retention and are actively reviewing support packages. The Group Manager and Team Managers have met with a range of carers to hear their experiences and provide reassurance about planned improvements. Biannual consultation events offer further opportunities for carers to share their views with leaders and managers. While many carers feel optimistic about the proposed changes, some remain cautious

due to the service's history of frequent changes. Multiple changes in supervising social workers have affected some carers. Although a few agency workers remain, there is a clear commitment to recruiting a suitable, stable, permanent workforce.

Training, advice, and guidance for prospective carers have improved. Prospective general carers now complete "Skills to Foster" training before approval, while connected person carers attend external preparation sessions. Where attendance is not possible for connected carers prior to their approval, assessing social workers provide alternative resources to ensure carers are well-informed. A foster carer handbook outlines roles, responsibilities, and available support. The service is working with regional partners to develop a formal induction programme for carers in their first year of approval.

Carer supervision is held regularly and considers their well-being, though records are not always consistently shared. The service hosts regular coffee mornings for carers which include guest speakers and provide opportunities for peer support. Carers told us training is an area which requires improvement. Internal audits show frequent cancellations due to low uptake. Carers cite short notice confirmation, inconvenient scheduling as barriers and report delays to completing mandatory training. The service is working with the training team to address these issues. We found no evidence carers have learning and development plans and records lacked analysis on how training has supported carers to undertake their role, meet the needs of children in their care and support positive outcomes.

Carers report the current out-of-hours support does not fully meet their needs, with difficulties reaching the emergency duty team and obtaining timely guidance. Leaders have acknowledged this and are considering how carers can feel better supported out of hours. Carers value the support provided by the services 'liaison carers', who assist with new carer inductions and serve as a point of contact for advice and guidance. The service is in the process of redeveloping these roles, to align to the national approach around fostering well-being. This will include more formal arrangements which aim to enhance the support provided to carers.

Managers told us they feel well supported in their roles and welcome the news of two deputy manager posts being created. These posts will ensure operational oversight while managers have opportunity to drive forward service developments and improvements. Staff feedback we received was mostly positive. Despite previous challenges, there is a growing sense of stability and confidence in the service's leadership. Staff report managers are approachable and they feel well supported. They told us improvements have been made to the collaboration between the fostering service and care experienced team. Staff express pride in working for Foster Wales Bridgend, optimism about future plans and would recommend working at the service.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

The table below show the area's for improvement we have identified.

Summary of Areas for Improvement	Date identified
Further improvements are required to ensure all children are well matched with their carers, supporting their stability and overall well-being.	23/06/25
Further improvements are required to ensure systems for monitoring and reviewing carers' responsibilities are consistent and provide assurance children's needs are met.	23/06/25
Further improvements are required to training and support provided to carers, to ensure this supports children to receive responsive, informed care.	23/06/25

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Children's Social Care
June 2025 – Care Inspectorate Wales – Fostering Service Inspection
ACTION PLAN

AREA FOR IMPROVEMENT	ACTION	RESPONSIBLE	HOW WILL WE MEASURE THE OUTCOME?	TIMESCALE	BRAG
Matching processes do not always fully assess risks to children's emotional well-being or placement stability	Revise and embed updated matching documentation and guidance; include rationale, risk matrix, and voices of children and carers in matching decisions.	Group Manager – Provider Services	The revised matching documentation and guidance will be approved and circulated, and case file audits will evidence the use of the risk matrix, rationale, and the inclusion of children's and carers' views in matching decisions.	November 2025	

Area for Improvement	Action	Responsible	How will we measure the outcome?	Timescale	Brag
P Q S E 5 2 Inconsistent foster carer annual reviews — delays, missing feedback, lack of quality oversight	Recruitment of deputy manager posts and other posts within both teams will enable more consistency of annual reviews. QA processes around annual reviews to be improved	Group Manager/Team Managers	Deputy manager posts will be established to increase capacity, and a strengthened quality assurance framework will be implemented to ensure annual reviews are completed consistently, within statutory timescales, and with contributions from all relevant parties.	November 2025	
Carers not consistently provided with accessible, timely or planned training opportunities	Develop and roll out learning and development plans for all foster carers; improve communication and confirmation of training dates.	Group Manager/Team Managers/Training lead	Individual learning and development plans will be in place for all carers, a training calendar will be published, and monitoring will evidence that carers receive confirmation of training opportunities in advance.	October 2025	
Training delivery does not promote reflection or relationship-building among carers	Ensure carer supervision and review templates prompt reflective discussion of learning, and embed opportunities to link training to real-life care experiences	Team Managers/Supervising Social Workers	Updated supervision and review templates will be implemented, and case file audits will evidence reflective discussions and links between training and care practice. Carer feedback will further confirm that training	October 2025	

Page			supports reflective practice and relationship-building.		
31	Exemptions not always meet legislative criteria or have clearly recorded rationale	Implement a revised exemptions decision-making template and embed a monthly audit of all exemptions to ensure compliance with legal criteria and robust rationale	Group Manager/Team Managers	A revised exemption decision-making template will be implemented, and monthly audits will evidence that all exemptions meet legislative criteria and are supported by clear recorded rationale.	October 2025

BRAG STATUS - KEY	
	Action Complete
	Action On Track
	Action Mainly On Track With Some Minor Issues
	Action Not On Track, Not Yet Meeting Performance Targets

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Review

- KPI's & Data Set (RDM)
- Marketing Performance (RMO)
- Current Recruitment Process (Recruitment Officer/Team Manager/ RDM)

Vision

Where happy foster carers help us to be the most logical, credible and “tip of the tongue” organisation to turn to for anyone who is considering fostering

Purpose

To help children to stay locally, experience stability, give them a family base and have the very best experience of a well-matched loving foster family, who are supported to stick by them by passionate friendly experts making foster care consistently better in Wales

Goal	2024-25 Achieved	2025-26 Target	Is this achievable? How?
Enquiries	79	110	79 reached in last 12 months, without an RO for 5 months, feel it is achievable and necessary with current conversation rate
Home Visits	27	38	Achievable in relation to enquiry target. RO capacity may be an issue.
Assessments Allocated	20	18	Achievable due to improvements in Recruitment journey and new stable management in Bridgend.
Approvals	6	11	Achievable given the above goals and progress made over previous 12 months.

Business Review Summary

Drivers	Inhibitors
<ul style="list-style-type: none"> Supportive fostering community on the whole with foster carer's ideas to improve Regular coffee groups and meet ups to support our offer Improved conversion from enquiry to initial visit More strategic planning around events and maximizing the enquiries we receive there Better conversion journey from allocation to approval and additional support offered by Recruitment officer Stronger engagement in social media platforms and activity Press interest in campaigns and organic news articles received Increased engagement from public services 	<ul style="list-style-type: none"> Staff changes and short staffing IFAs being more focal and increased marketing spend Budget reach across the full locality Ability to staff all recruitment event opportunities Cost of living / Housing crisis Recruitment officer ill for period of last year In consistent support from Liaison/pioneer carers Form F drop outs due to slow allocation process and assessor quality Loss of carers to IFAs and the impact this has on retention Need a wider variety of carers offering a variety of types of care.
Opportunities	Risks
<ul style="list-style-type: none"> New Fostering Remodeling board set up will have heavy focus on recruitment and FC offer/ support New staff bring fresh prospective and needed change Wider service buy in to the eliminate agenda and sufficiency issues Newly approved FCs more engaged in getting involved in recruitment activities Launching and development of Pioneers Tapping in to the support of local businesses through Foster Wales Partners Proposal of new offers. E.g. Council Tax discount Untapped community groups, eg, sports events Better engagement from corporate comms team 	<ul style="list-style-type: none"> Eliminate agenda impact on placement sufficiency Negative publicity and IFA tactics Staff turnover

Key Issues and Strategies

Key Issues

1. Increasing IFA presence and competitive tactics / increased budgets
2. Budgets vs Area- region is not reachable effectively with current recruitment budget available
3. Need to increase the variety of foster carer applicants coming through the process



Strategies

1. Develop and deliver an education around eliminate profit with council staff but prioritizing children's social workers working with IFA carers. While ensuring increased presence in IFA locations.
2. Layer our targeted marketing strategy to 3 main communities to make best use of budgets, and increase relationship building
3. Increase our variety of foster carers coming through the application process

Strategy 1:

Develop and deliver an education around eliminating profit with council staff but prioritizing children's social workers working with IFA carers. While ensuring increased presence in IFA locations.

Strategic Objective:

Ensure we maximise opportunities, so IFA carers know they have the option to transfer to LA & support eliminating agenda communications

Goals:

- Increase in the number of transfer foster carers

Tactical Program:

- Educating service staff around eliminating profit
- Relevant messaging around money and support
- Talking about profit with enquirers, potential joint visits with CLA teams
- Building content around teams working together – CLA, foster carer, fostering teams
- Sharing stories of successful transfers
- Management to ensure our children's services are better equipped for transfers.
- Postcode targeting to IFA carers (and close surrounding area)

Watch out:

- That transferred carers are of good quality

Strategy 2:

Layer our targeted marketing strategy to 3 main communities to make best use of budgets, and increase relationship building

Strategic Objective:

To increase engagement in selected areas/communities. Enhance relationships with people in those communities to increase awareness and enquiries.

Goals:

- Increase enquiries from people in particular localised areas – measured by increase in enquiries and percentage enquiries from certain locations

Tactical Program:

- Map where are current LA carers and IFA carers live to identify 3 key areas
- Develop a layered approach – pop-ups as a CTA? Where can we advertise? Facebook, banners, stickers in windows, schools, print, local events etc.
- Fostering partners – increasing knowledge of local employers so they can confidently say “we are fostering partners, and this is what it means...”, they have the ability to share info about LA fostering. Increased engagement on their socials, leaflets, posters etc.
- Community groups online, and local groups in person
- Developing relationships with education clusters in these areas
- Making best use of our liaison carers who can support as ambassadors in their local area if it fits with our identified communities.

Watch out:

- Making sure we don't miss out on opportunities in other areas
- Ensuring we have the time to educate fostering partners effectively

Strategy 3:

Increase our variety of foster carers coming through the application process

Strategic Objective:

To increase enquiries from a wider variety of foster carers as the demographic in Bridgend is diverse

Goals:

- To see an increase in enquiries from different demographics

Tactical Program:

- Better education around who can foster, types of fostering, types of children/young people that need care, naturally through marketing by;
 - Showcasing a bigger variety of our existing foster carers
 - Myth-busting
 - Email marketing
- More open conversations at recruitment events and encouraging people to attend the online information session.
- Encouraging our existing foster carers to have conversations with people they know that may make a good foster carer. Dad's club.
- Making use of Care Friends App with specific job roles encouraging different types of people.
- Targeting different events / local spaces, with events and leaflets / posters themed around who can foster for example;
 - Sports events / Runs (Ogi run)
 - Leisure centres
 - Rugby / football clubs
 - Industrial estates
- Fostering partners, ensuring we include a wide range of types of businesses

Watch out:

- Ensuring the enquiries coming through are good quality
- Making sure existing foster carers are involved enough and know the right things to say

Plan on a page

Appendix 3

Analysis	Strategy	Action
<p>KPI forecast</p> <ul style="list-style-type: none"> Inquiries 110 Home Visits 38 Assessments allocated 18 Approvals 11 <p>Drivers</p> <ul style="list-style-type: none"> Supportive fostering community overall with foster carer's ideas to improve Regular coffee groups and meet ups to support our offer Improved conversion from enquiry to initial visit More strategic planning around events and maximizing the enquiries we receive there Better conversion journey from allocation to approval and additional support offered by Recruitment officer Stronger engagement in social media platforms and activity Press interest in campaigns and organic news articles received <p>Inhibitors</p> <ul style="list-style-type: none"> Staff changes and short staffing IFAs being more focal and increased marketing spend Budget reach across the full locality Ability to staff all recruitment event opportunities Cost of living / Housing crisis Recruitment officer ill for period of last year In consistent support from Liaison/pioneer carers Form F dropouts due to slow allocation process and assessor quality Loss of carers to IFAs and the impact this has on retention Need a wider variety of carers offering a variety of types of care. <p>Risks</p> <ul style="list-style-type: none"> Eliminate agenda impact on placement sufficiency Negative publicity and IFA tactics Staff turnover <p>Opportunities</p> <ul style="list-style-type: none"> New Fostering Remodeling board set up will have heavy focus on recruitment and FC offer/ support New staff bring fresh prospective and needed change Wider service buy in to the eliminate agenda and sufficiency issues Newly approved FCs more engaged in getting involved in recruitment activities Launching and development of Pioneers Tapping into the support of local businesses through Foster Wales Partners Proposal of new offers. E.g. Council Tax discount Untapped community groups, eg, sports events Better engagement from corporate comms team 	<p>Key Issues</p> <ol style="list-style-type: none"> Increasing IFA presence and competitive tactics / increased budgets Budgets vs Area- region is not reachable effectively with current recruitment budget available Need to increase the variety of foster carer applicants coming through the process <p>Strategies</p> <ol style="list-style-type: none"> Develop and deliver an education around eliminate profit with council staff but prioritizing children's social workers working with IFA carers. While ensuring increased presence in IFA locations. Layer our targeted marketing strategy to 3 main communities to make best use of budgets, and increase relationship building Increase our variety of foster carers coming through the application process <p>Goals</p> <ul style="list-style-type: none"> Increase in the number of transfer foster carers Increase enquires from people in particular localised areas – measured by increase in enquires and percentage enquires from certain locations To see an increase in enquires from different demographics 	<ul style="list-style-type: none"> Educating service staff around eliminating profit Relevant messaging around money and support Talking about profit with enquirers, potential joint visits with CLA teams Building content around teams working together – CLA, foster carer, fostering teams Sharing stories of successful transfers Management to ensure our children's services are better equipped for transfers. Postcode targeting to IFA carers (and close surrounding area) <ul style="list-style-type: none"> Map where are current LA carers and IFA carers live to identify 3 key areas Develop a layered approach – pop-ups as a CTA? Where can we advertise? Facebook, banners, stickers in windows, schools, print, local events etc. Fostering partners – increasing knowledge of local employers so they can confidently say "we are fostering partners, and this is what it means...", they have the ability to share info about LA fostering. Increased engagement on their socials, leaflets, posters etc. Community groups online, and local groups in person Developing relationships with education clusters in these areas Making best use of our liaison carers who can support as ambassadors in their local area if it fits with our identified communities. <ul style="list-style-type: none"> Better education around who can foster, types of fostering, types of children/young people that need care, naturally through marketing by: Showcasing a bigger variety of our existing foster carers, Myth-busting and Email marketing More open conversations at recruitment events and encouraging people to attend the online information session. Encouraging our existing foster carers to have conversations with people they know that may make a good foster carer. Dad's club. Making use of Care Friends App with specific job roles encouraging different types of people. Targeting different events / local spaces, with events and leaflets / posters themed around who can foster for example: Sports events / Runs (Ogi run), Leisure centres, Rugby / football clubs, Industrial estates Fostering partners, ensuring we include a wide range of types of businesses

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Agenda Item 6

Meeting of:	SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	25 SEPTEMBER 2025
Report Title:	INFORMATION REPORT - QUARTER 4 / YEAR END PERFORMANCE 2024-25
Report Owner / Corporate Director:	CHIEF OFFICER – LEGAL AND REGULATORY SERVICES, HR AND CORPORATE POLICY
Responsible Officer:	MERYL LAWRENCE SENIOR DEMOCRATIC SERVICES OFFICER - SCRUTINY
Policy Framework and Procedure Rules:	There is no effect upon the policy framework and procedure rules.
Executive Summary:	To provide for information within the remit of this Committee: <ul style="list-style-type: none">- the Quarter 4 / Year End Performance 2024-25 report that was reported to Corporate Overview and Scrutiny Committee (COSC) on 24 July 2025 (Appendix A).- the Corporate Performance Dashboard for Quarter 4 / Year End 2024-25 (Appendix 1).- The Regulatory Tracker updated for Quarter 4 2024-25 (Appendix 2).

1. Purpose of Report

1.1 The purpose of this report is to provide for information, within the remit of this Committee, the Quarter 4 / Year End Performance 2024-25 reported to Corporate Overview and Scrutiny Committee (COSC) on 24 July 2025, for Members' information.

2. Background

2.1 Following the reporting of the Quarter 4 / Year End Performance 2024-25 to COSC for the monitoring of the quarterly performance, the report, performance dashboard and updated Regulatory Tracker for Quarter 4 are being reported to the subsequent meeting of the other Overview and Scrutiny Committees, for information on the performance within the respective remit of each Committee.

2.2 In a report to Governance and Audit Committee (GAC) in November 2022, Audit Wales highlighted the requirement for the Council to improve arrangements dealing

with recommendations from regulator reports. In response a 'regulatory tracker' was developed which is considered at GAC twice yearly. In July 2023, GAC recommended that the regulatory tracker be included on all other Overview and Scrutiny Forward Work Programmes for the Committees to be aware of progress. This has now been integrated into the quarterly performance monitoring process.

2.3 Therefore the Quarter 4 / Year End Performance 2024-25 report to COSC is attached at **Appendix A** with the following appendices to that report attached as:

Appendix 1 - the Corporate Performance Dashboard for Quarter 4 / Year End 2024-25

Appendix 2 - the Regulatory Tracker updated for Quarter 4 2024-25

2.4 The background to this report is set out in Section 2 of **Appendix A** – the Quarter 4 / Year End Performance 2024-25 report to COSC on 24 July 2025.

3. Current situation / proposal

3.1 Details of the scale for scoring the Council's performance, summary of progress on Corporate Commitments, comparison with the previous quarter, overall performance on Performance Indicators (PIs) by Wellbeing Objective, PI trends and measuring performance against the five ways of working are set out in Section 3 of **Appendix A** – the Quarter 4 / Year End Performance 2024-25 report to COSC on 24 July 2025.

3.2 In place of the previous 4 Directorate dashboards, a single performance dashboard (**Appendix 1**) has been developed for the Council's performance against its Corporate Plan based upon the Wellbeing Objectives, as requested by COSC, together with greater detail on the individual commitments and PIs along with improved explanatory comments.

3.3 Updates on current open Regulator Reports/Audits are collected as part of the corporate quarterly performance data collection. The Regulatory Tracker updated for Q4 2024-25 is included as **Appendix 2**.

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 This report assists in measuring and monitoring progress made against the following of the Council's 4 Wellbeing Objectives under the **Well-being of Future Generations (Wales) Act 2015**:

1. A prosperous place with thriving communities
2. Creating modern, seamless public services
3. Enabling people to meet their potential
4. Supporting our most vulnerable

5.2 The 5 ways of working set out in the Well-being of Future Generations (Wales) Act have also contributed to the Council developing its own five ways of working. The ways of driving and measuring those ways of working is also contained in the Corporate Plan Delivery Plan.

6. Climate Change and Nature Implications

6.1 There are no Climate Change or 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 The Committee is requested to note the content of the Quarter 4 / Year End Performance 2024-25 report, the Corporate Performance Dashboard Quarter 4 / year End 2024-25 and the Regulatory Tracker updated for Quarter 4 2024-25 within the remit of this Committee and have regard to the dashboard and the tracker when considering the Committee's Forward Work Programme report.

Background documents

None

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Meeting of:	CORPORATE OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	24 JULY 2025
Report Title:	QUARTER 4/YEAR-END PERFORMANCE 2024-25
Report Owner / Corporate Director:	CHIEF OFFICER – LEGAL AND REGULATORY SERVICES, HR AND CORPORATE POLICY
Responsible Officer:	ALEX RAWLIN POLICY AND PERFORMANCE MANAGER
Policy Framework and Procedure Rules:	Monitoring performance against the Corporate Plan forms part of the Council's Performance Management Framework.
Executive Summary:	<p>This report provides –</p> <ul style="list-style-type: none"> an overview of performance against wellbeing objectives in the Corporate Plan 2023-28 at quarter 4/Year-end 2024-25. analysis of performance on the commitments and performance indicators in the Corporate Plan Delivery Plan (CPDP) 2024-25. An update on the performance against our current regulator recommendations (Regulatory Tracker).

1. Purpose of Report

1.1 The purpose of this report is to provide the Committee with an overview of Council performance against the Corporate Plan at quarter 4 (Q4)/ year-end of 2024-25. This is the second year of the 5-year Corporate Plan 2023-28 and the third and final performance report on the 2024-25 Corporate Plan Delivery Plan (CPDP). This report also contains analysis of performance against current regulator recommendations at Q4.

2. Background

2.1 On 1 March 2023 Council agreed the Corporate Plan 2023-28. In April 2024 Council agreed the Corporate Plan Delivery Plan 2024-25 which set out aims, commitments, and performance indicators to help measure the Council's progress on priorities.

2.2 Each Directorate produced a business plan, including milestones against each commitment, targets against each Performance Indicator (PI) and a rationale for targets. These plans can be viewed via the staff intranet. Data quality and accuracy templates have been completed for each PI to clearly define what the PI is measuring, scope of data, calculation/verification methods, and responsible officers. In the summer of 2024, the Corporate Plan PI targets and rationales were approved by Corporate Management Board (CMB) and provided to the Corporate Overview and Scrutiny Committee (COSC) in September 2024 along with minor amendments to the CPDP.

2.3 As part of the Performance Management Framework, monitoring of the CPDP is carried out quarterly through 4 directorate performance dashboards scrutinised by Directorate Management Teams. A single performance dashboard is reported quarterly to Cabinet and Corporate Management Board (CCMB). The same dashboard is presented to the Corporate Overview and Scrutiny Committee (COSC) at quarters 2, 3 and 4 to help them scrutinise progress.

2.4 The performance team has worked with the Corporate Overview and Scrutiny Committee to make improvements to the performance reporting process to give Members a clearer understanding of how the Council is performing, including:

- development of the single performance dashboard,
- improvements to the commentary in the dashboards,
- use of summary presentations

2.5 In a report to the Governance and Audit Committee (GAC) in November 2022, Audit Wales highlighted the requirement for the Council to improve arrangements dealing with recommendations from regulator reports. In response a 'regulatory tracker' was developed which is considered at GAC twice yearly. In July 2023, GAC recommended that the regulatory tracker be included on all Subject Overview and Scrutiny forward work programmes for the Committees to be aware of progress. This has now been integrated into the quarterly performance monitoring process.

3. Current situation / proposal

3.1 The year-end performance dashboard (**Appendix 1**) provides judgements on progress against the CPDP 2024-25 for our commitments and outlines key activities and achievements in the year, and next steps where appropriate. It also provides verified annual values and supporting comments for the PIs. The simple scale used to score performance is set out in our Performance Management Framework and summarised in the Table 1 below.

3.2 Summary of progress on Corporate Commitments

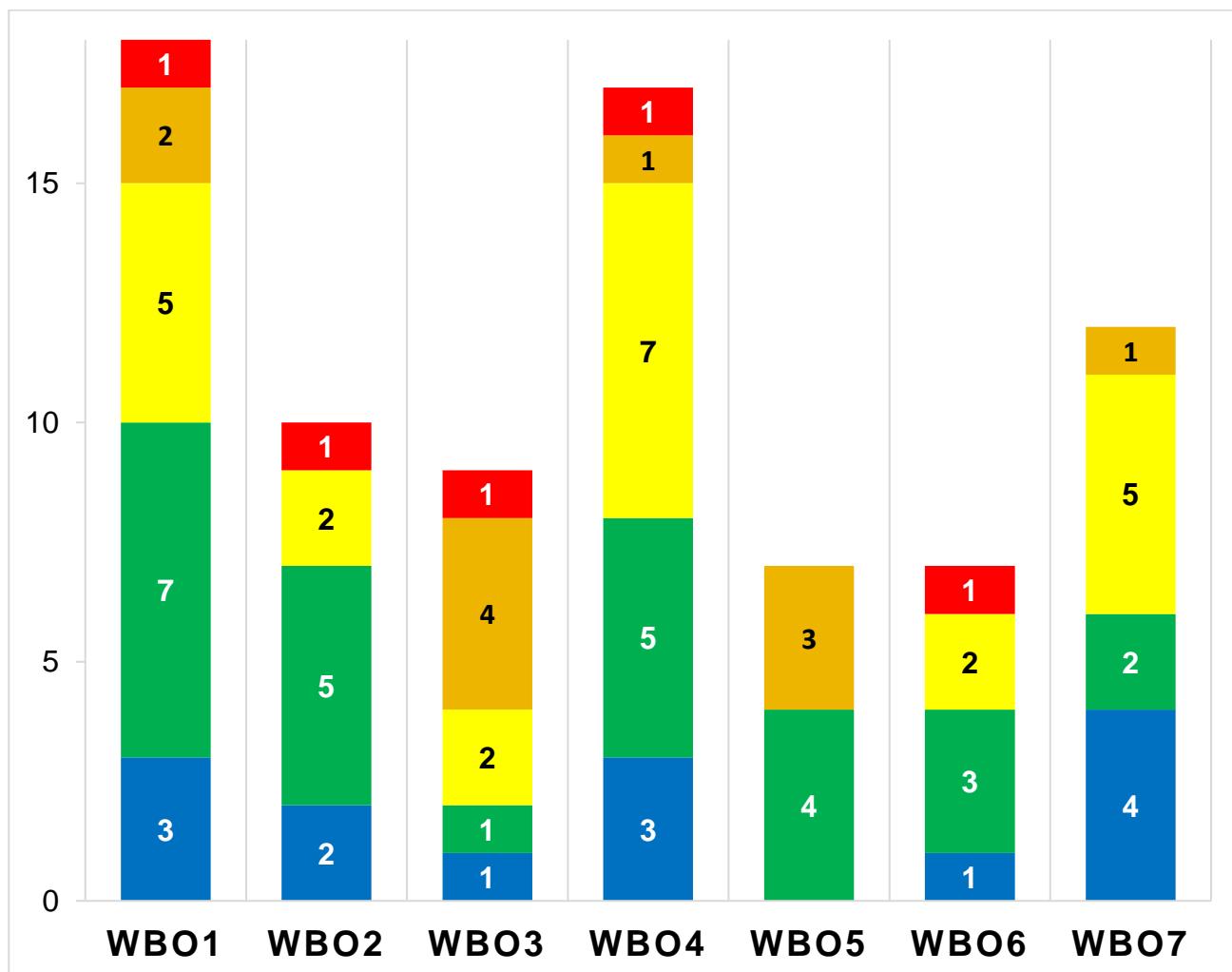
The CPDP 2024-25 contains 80 Commitments to measure performance against the Corporate Plan. Table 1 shows the performance judgements for these commitments at Year-end /Q4 2024-25 and comparison with the previous quarter (PQ), with Chart 1 breaking this down further to show performance for each of the wellbeing objectives.

Table 1

Status	Meaning of this status	Performance			
		PQ (Q3)		Current (Q4)	
		Number	%	Number	%
COMPLETE (BLUE)	Project is completed	4	5%	14	17.5%
EXCELLENT (GREEN)	As planned (within timescales, on budget, achieving outcomes)	29	36.25%	27	33.75%
GOOD (YELLOW)	Minor issues. One of the following applies: deadlines show slippage, project is going over budget, risk score increases	28	35%	23	28.75%
ADEQUATE (AMBER)	Issues. More than one of the following applies: deadlines show	13	16.25%	11	13.75%

	slippage, project is going over budget, risk score increases				
UNSATISFACTORY (RED)	Significant issues – deadlines breached, project over budget, risk score up to critical or worse	6	7.5%	5	6.25%
	Total	80	100%	80	100%

Chart 1 - Overall Performance on Commitments by Wellbeing Objective



3.3 Summary of Performance Indicators

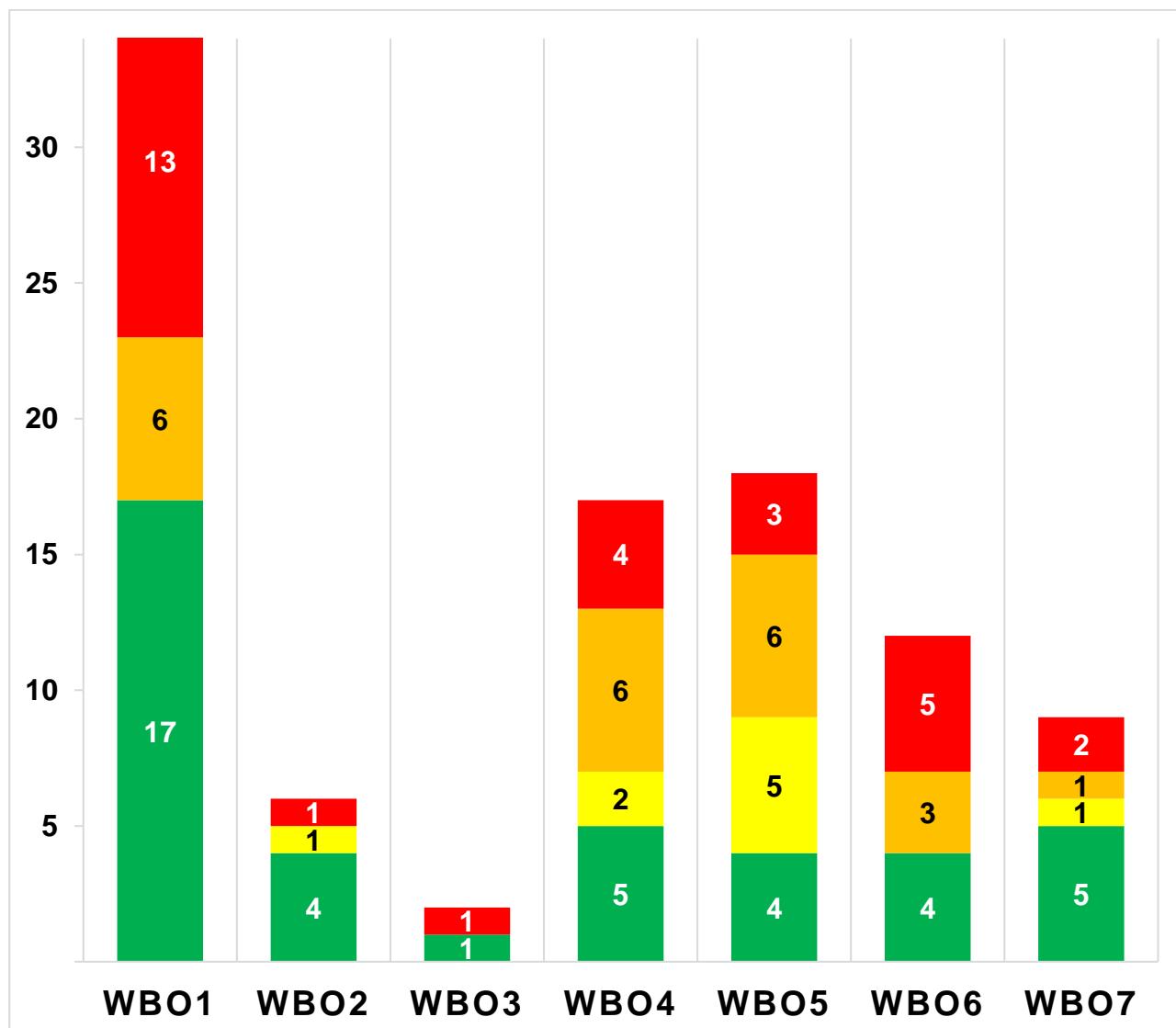
The CPDP 2024-25 contains 108 Performance Indicators to measure performance against the Corporate Plan. At year-end (Q4) we can evaluate performance on the full PI data set, 60 quarterly indicators, and 48 annual indicators which are included for the first time.

3.4 100 of the 108 PIs have verified annual values and could be compared against their target to award a RAYG (Red, Amber, Yellow, Green) status. Table 2 on the next page shows overall performance for PIs at year-end (Q4) and a comparison with the previous quarter, and Chart 2 shows performance for each wellbeing objective.

Table 2

Status	Meaning of this status	Performance			
		PQ (Q3)		Current (Q4)	
		Number	%	Number	%
EXCELLENT (GREEN)	On target <u>and</u> improved or is at maximum	25	42.37%	40	40%
GOOD (YELLOW)	On target	2	3.39%	9	9%
ADEQUATE (AMBER)	Off target (within 10% of target)	12	20.34%	22	22%
UNSATISFACTORY (RED)	Off target (target missed by 10%+)	20	33.90%	29	29%
	Total	59	100%	100	100%

Chart 2 - Overall Performance on Performance Indicators by Wellbeing Objective



APPENDIX A

3.5 Verified data could not be provided for the eight indicators detailed below with explanations provided by the Service.

PI Ref, Type & Aim	PI Description	Service Comments
CED29a) CP WBO2.5	The proportion of staff reporting through survey that they agree or strongly agree with the statement: a) I feel every department is working towards the same common goal	Performance: Survey was not run in 2024-25 as planned. The response rate to the 2023-24 staff survey was disappointingly low with 707 responses (23% of staff) which represented a 19% decrease in staff participation compared with the previous year. In addition, many aspects of the responses were ambiguous and difficult to interpret. There was a high level of neutral responses and limited qualitative feedback making analysis of the results difficult. We therefore ran two focus groups with a cross section of staff to gain more insight. Staff raised a number of issues that created barriers to participation in the survey, including lack of digital access for some staff, duration of the survey, time of year the survey ran (February), as well as a range of issues they wanted addressed including clearer priorities and more direct communication from Corporate Management Board (CMB). CMB and Cabinet reflected on the feedback and a range of changes were initiated in response to staff concerns, including the decision to change to a biannual staff survey supported by surveys tailored to a number of staff groups (primarily frontline staff) who either could not participate digitally or would benefit from a more streamlined survey which will run at different times of the year. In addition, the 7 wellbeing objectives in the corporate plan were streamlined to make communication more straightforward and some new communication channels were introduced to establish a clearer voice and connection with CMB (the Chief Executive's quarterly message, the Managers' Briefing Note and the Managers' Forum).
CED29b) CP WBO2.5	b) I am satisfied with BCBC as an employer	
CED29c) CP WBO2.5	c) Working here makes me want to perform to the best of my ability	
CED29d) CP WBO2.5	d) I feel that BCBC values its employees' ideas and opinions	
CED29e) CP WBO2.5	e) Do you think there are opportunities for two-way communication to discuss and raise ideas and issues?	
CED49a) CP WBO2.5	Percentage of staff reporting through survey that they agree or strongly agree with the statement: a) I feel supported to manage my personal wellbeing whilst in work	
CED49b) CP WBO2.5	b) The council is dedicated to taking positive action to support employees achieve a positive sense of wellbeing in their working lives.	
CED50 CP WBO2.5	Number of sign up of new subscribers to the staff extranet	Performance: Unfortunately, we are unable to progress with this project due to the proof of concept not meeting the necessary threshold, therefore we need to consider an alternative solution.

3.6 Trend data allows us to compare our 2024-25 annual values with the same period last year (2023-24 annual values). Comparable annual data is available for 92 PIs. Of the remaining 16, 8 indicators are “Data not available” as explained in paragraph 3.5, 6 indicators do not have comparable verified data for last year because they are new (5) or data was not collected last year (1), and 2 PIs are “Trend not applicable” due the way their targets are profiled. Overall trend analysis is set out in

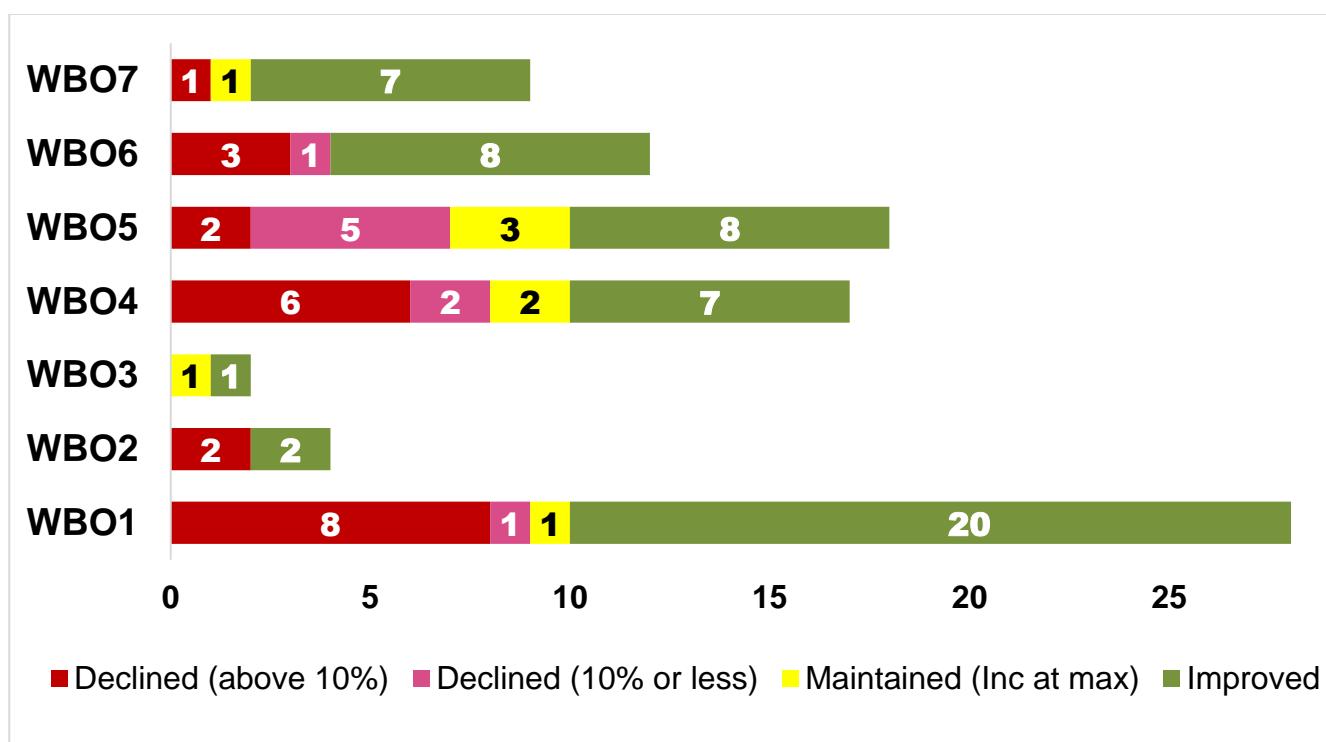
APPENDIX A

Table 3 with comparison to the previous quarter, and Chart 3 shows the trend analysis for each wellbeing objective.

Table 3

Performance Indicators Trend Definition		Trend			
		PQ (Q)		Current (Q4)	
		Number	%	Number	%
↑	Performance has improved	28	52.83%	53	57.6%
↔	Performance maintained (includes those at maximum)	6	11.32%	8	8.7%
↖	Declined performance (by less than 10%)	7	13.21%	9	9.8%
↓	Declined performance (by 10% or more)	12	22.64%	22	23.9%
	Total	53	100%	92	100%

Chart 3 – Performance Indicator Trend by Wellbeing Objective



Measuring Performance against our Ways of Working

3.7 This is the second year of developing indicators / commitments to demonstrate how the Council is performing against the five ways of working in the new Corporate Plan. For 2025-26 these have been integrated into the 4 wellbeing objectives. In the 2024-25 CPDP there are 9 ways of working PIs not included within the wellbeing objectives. All 9 have verified annual values, of which, 7 could be compared against a target and awarded a RAYG status. This is shown in Table 4 below.

Table 4

Status	Meaning of this status	Performance			
		PQ (Q3)		Current (Q4)	
		Number	%	Number	%
EXCELLENT (GREEN)	On target <u>and</u> improved or is at maximum	2	33.33%	3	42.9%
GOOD (YELLOW)	On target	1	16.67%	0	-
ADEQUATE (AMBER)	Off target (within 10% of target)	1	16.67%	1	14.2%
UNSATISFACTORY (RED)	Off target (target missed by 10%+)	2	33.33%	3	42.9%
	Total	6	100%	7	100%

3.8 Trend data is also available for 7 of the 9 indicators, comparing 2024-25 annual performance with the same period last year (2023-24 annual values). 2 of the indicators are “trend not applicable” due the way the targets are profiled. Trend analysis is set out in Table 5.

Table 5

Performance Indicators Trend Definition		Trend			
		PQ (Q3)		Current (Q4)	
		Number	%	Number	%
	Performance has improved	1	16.67%	3	42.8%
	Performance maintained (includes those at maximum)	2	33.33%	2	28.6%
	Declined performance (by less than 10%)	1	16.67%	1	14.3%
	Declined performance (by 10% or more)	2	33.33%	1	14.3%
	Total	6	100%	7	100%

Summary of Sickness Absence

3.9 There is no target for sickness absence, though the focus continues to be on trying to reduce sickness across the organisation. Staff wellbeing measures are in place and sickness continues to be closely monitored.

3.10 The cumulative days lost per full time equivalent (FTE) employee for 2024-25 is 13.76 days, an 11.2% increase on the 12.37 days for 2023-24. This worsening trend is mirrored within the directorate and schools' data with the exception of Education, Early Years and Young People Directorate. The proportion of days lost that are classified as short-term absences (7 days or less) has decreased slightly from 26% in 2023-24 to 24% in 2024-25. The most common reason for absence remains as Stress/Anxiety/Depression (not work related).

Summary of Performance against Regulator Recommendations

3.11 Updates on current open Regulator Reports/Audits are collected as part of the corporate quarterly performance data collection. The Regulatory Tracker updated for Q4 2024-25 is included as **Appendix 2**. Summary of current reports and their BRAYG status judgements is provided in Table 6. A more detailed analysis will be provided in a report to the Governance and Audit Committee in October 2025.

Table 6

Audit/Inspection	Recommendations					
	Total	Blue	Green	Yellow	Amber	Red
Care Inspectorate Wales (CIW) inspection of Sunny Bank (February 2025)	1	-	-	-	1	-
CIW Inspection Report on Ty Ynysawdre (Residential) (January 2025)	1	-	-	1	-	-
Audit Wales (AW), Setting of Well-being Objectives	3	1	2	-	-	-
AW, Review of Decision-Making Arrangements	5	5	-	-	-	-
CIW Inspection of Golygfa'r Dolydd (September 2024)	5	-	4	-	1	-
AW, Financial Sustainability Review	2	2	-	-	-	-
CIW Inspection of Harwood (June 2024)	2	-	2	-		-
AW, Digital Strategy Review	3	1	2	-	-	-
CIW Inspection Report on Foster Wales Bridgend	20	17	1	2	-	-
AW, Use of Service User Perspective and Outcomes	3	2	-	-	1	-
CIW Improvement Check Visit to Children's Social Care Services	10	7	-	2	1	-
AW, Springing Forward, Strategic Workforce Management	3	2	-	1	-	-
Transformational Leadership Programme Board, Baseline Governance Review Cwm Taf Morgannwg Regional Partnership Board	7	3	1	1	2	-
CIW Performance Evaluation Inspection of Children's Services	21	19	1	-	-	1
AW, Review of Arrangements to Become a 'Digital Council'	3	2	-	-	1	-
Total	89	61	13	7	7	1

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 This report assists in measuring and monitoring progress made against the following corporate well-being objectives under the Well-being of Future Generations (Wales) Act 2015 that form the Council's Corporate Plan 2023-28:-

1. A County Borough where we protect our most vulnerable
2. A County Borough with fair work, skilled, high-quality jobs and thriving towns
3. A County Borough with thriving valleys communities
4. A County Borough where we help people meet their potential
5. A County Borough that is responding to the climate and nature emergency
6. A County Borough where people feel valued, heard and part of their community
7. A County Borough where we support people to live healthy and happy lives

5.2 The 5 ways of working set out in the Well-being of Future Generations (Wales) Act have also contributed to the Council developing its own five ways of working. The ways of driving and measuring those ways of working is also contained in the Corporate Plan Delivery Plan.

6. Climate Change and Nature Implications

6.1 There are no specific implications of this report on climate change or nature. However, some of the measures and projects included within the Corporate Plan 2023-28 and annual delivery plan for 2024-25 have been developed to help assess the Council's performance on areas including climate change.

7. Safeguarding and Corporate Parent Implications

7.1 There are no specific implications from this report on safeguarding or corporate parenting.

8. Financial Implications

8.1 There are no financial implications arising from this report.

9. Recommendations

9.1 The Committee is recommended to note the Council's performance at quarter 4 for the year 2024-25.

Background documents

None

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Corporate Performance Dashboard

Year end 2024-25



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



KEY:**How will we mark or score ourselves**P
a
g
d

We have one simple scale for how we mark or score the council's performance. Because overall judgements, commitments and performance indicators are measured differently, the colours or judgements have different descriptions depending on which type of performance you are reviewing.

What does this Status mean?			
	Overall / self-assessment performance	Commitments, projects or improvement plans	Performance Indicators
COMPLETE (BLUE)	Not applicable	Project is completed	Not applicable
EXCELLENT (GREEN)	Very strong, sustained performance and practice	As planned - within timescales, on budget, achieving outcomes	On target and performance has improved / is at maximum
GOOD (YELLOW)	Strong features, minor aspects may need improvement	Minor issues. One of the following applies - deadlines show slippage, project is going over budget or risk score increases	On target
ADEQUATE (AMBER)	Needs improvement. Strengths outweigh weaknesses, but important aspects need improvement	Issues – More than one of the following applies - deadlines show slippage, project is going over budget or risk score increases	Off target (within 10% of target)
UNSATISFACTORY (RED)	Needs urgent improvement. Weaknesses outweigh strengths	Significant issues – deadlines breached, project over budget, risk score up to critical or worse	Off target (target missed by 10%+)

For performance indicators, we will also show trends in performance so you can see how we are doing compared with the same period last year.

Trend	Meaning
↑	Improved performance
↔	Maintained performance (includes those at maximum)
↙	Declined performance (by less than 10%)
↓	Declined performance (by 10% or more)

Trend	Performance Indicator types
CP	Corporate Plan Indicator
WoW	Ways of Working Indicator

	Directorate Responsible
ALL	All Directorates
CEX	Chief Executives Directorate
COMM	Communities Directorate
EEYYP	Education, Early Years, and Young People Directorate
SSWB	Social Services and Wellbeing Directorate

OUR CORPORATE PLAN - AT A GLANCE

OUR 7 WELLBEING OBJECTIVES-



A County Borough where we protect our most vulnerable



A County Borough with fair work, skilled, high-quality jobs and thriving towns



A County Borough with thriving valleys communities



A County Borough where we help people meet their potential



A County Borough that is responding to the climate and nature emergency



A County Borough where people feel valued, heard and part of their community



A County Borough where we support people to live healthy and happy lives

WBO1: A County Borough where we protect our most vulnerable

WBO1.1: Providing high-quality children's and adults social services and early help services to people who need them

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CH/026 CP WBO1.1	Safe reduction in the number of children on the child protection register. (SSWB) Lower Preferred	270	189	175	75	↑	Quarterly Indicator Target Setting: Target set to see continued reduction following significant increase in 2022-23. Performance: We continue to reduce our Child Protection figures and to provide reassurance around our decision making. We have undertaken audit and had an independent review.
DEFS29 CP WBO1.1	Percentage of completed TAF (Team Around the Family) support plans that close with a successful outcome.(SSWB) Higher Preferred	75%	83%	87%	82%	↖	Quarterly Indicator Target Setting: To continue to improve performance. Performance: Performance slightly reduced but not of concern with it being in line with previous years. However, the Family Support Services Manager will monitor this with Central Grants Team moving forward.
SSWB38a CP WBO1.1	Percentage of reablement packages completed that a) reduced the need for support. Higher Preferred	11.67%	14.32%	18%	17.49%	↑	Quarterly Indicator Target Setting: The resetting of the reablement programme will increase the number of individuals going through reablement and maintain / reduce the need for support. Performance: The service has observed that the level of dependency of the people going through reablement has increased therefore making it difficult in some cases to reduce the need for support.
SSWB38b CP WBO1.1	b) maintained the same level of support Higher Preferred	14.59%	13.79%	14%	15.72%	↑	There are challenges with mitigating need for support due to levels of complexity and frailty of people accessing reablement coupled with some identified training needs for staff which is influencing performance outcomes.
SSWB38c (AD/011c) CP WBO1.1	c) mitigated need for support. (SSWB) Higher Preferred	66.84%	66.58%	68%	55.99%	↓	
SSWB76 CP WBO1.1	Number of packages of reablement completed during the year. (SSWB) Higher Preferred	377	377	400	509	↑	Quarterly Indicator Target Setting: The resetting of reablement programme will increase demand. Performance: Exceeded target due to the remodelling of the Support at Home service.
SSWB39 CP WBO1.1	Safe Reduction in the number of Care Experienced Children. (SSWB) Lower Preferred	398	370	350	333	↑	Quarterly Indicator Target Setting: Target set to see continued reduction in numbers reflective of pre-pandemic levels. Performance: We have exceeded target and continue to work with families who are ready for care order discharge or reunification.
SSWB55a CP WBO1.1	Percentage of carers who were offered a carer's assessment: a) Children's Higher Preferred	New 23-24	100%	100%	100%	↔	Quarterly Indicator Target Setting: Target set to see all eligible carers offered an assessment Performance: On target (108 out of 108 offered)
SSWB55b CP WBO1.1	b) Adults. (SSWB) Higher Preferred	New 23-24	No Data	100%	92.78%	No trend	Quarterly Indicator Target Setting: Target set to see all eligible carers offered an assessment Performance: 1465/1579 offered a carers assessment that was recorded on the system. A carers plan has been developed that seeks to improve performance.
SSWB57 CP WBO1.1	Percentage of enquiries to the Adult Social Care front door which result in information and advice only. (SSWB) Higher Preferred	New 23-24	74.88%	75%	84.58%	↑	Quarterly Indicator Target Setting: A new Early, Intervention and Prevention operating model has been implemented at the front door to manage adult social care. Performance: Continuing improvement evidencing the day-to-day use of strength based outcome focussed model of practice.
SSWB61a CP WBO1.1	Number of people who access independent advocacy to support their rights within: a)	New 23-24	64	130	39	↓	Quarterly Indicator Target Setting: To reflect predicted demand. Performance: There has been a decreasing trend in the number of children eligible for the

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
Page 8	children's social care Higher Preferred						advocacy active offer. This is due to a reduction in the number of children becoming care experienced and those being subject to an Initial Child Protection Conference. Focused work to increase the provision of the active offer for eligible children has been undertaken and consequently current data for 2024-25 has seen an increase in performance in the last two quarters.
SSWB61b CP WBO1.1	b) Adult's social care Higher Preferred	New 23-24	87	180	67	⬇	Quarterly Indicator Target Setting: To improve performance. Performance: The advocacy groups are operating at capacity, largely with ongoing casework, which is restricting their ability to pick up new referrals. The service will undertake a review of the delivery of this contract to reflect current demand and the service specification contained in the contract.
SSWB78a CP WBO1.1	Timeliness of visits to a) children who are care experienced Higher Preferred	81.13%	85.31%	87%	88.28%	⬆	Quarterly Indicator Target Setting: To continue to improve performance and reflect the challenges there have been linked to recruitment and retention. Performance: Performance has improved quarter on quarter. Clear processes are now in place and have been maintained.
SSWB78b CP WBO1.1	b) children on the child protection register Higher Preferred	82.14%	86.77%	87%	89.27%	⬆	Quarterly Indicator Target Setting: To continue to improve performance and reflect the challenges there have been linked to recruitment and retention. Performance: Performance continues to improve in this area which relates to a more stable workforce and understanding of roles and responsibilities.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.1.1	Continue to improve early help services by increasing the number of team around the family (TAF) interventions that close with a positive outcome (SSWB)	BLUE (Completed)	Quarter 4: Following the restructure of aspects of Early Help into Social Services and Wellbeing, there has been a 10% increase in referrals for Early Help support compared to last year. Over the course of 2024-25, we have focused on strengthening the early help offer and improving outcomes for families. There has been a 67% reduction in the number of cases stepping up to statutory services, a key outcome that highlights the effectiveness of our preventative work. Notably, there were no step-ups to safeguarding in Quarter 4. The introduction of new front door arrangements has facilitated earlier identification of risk, allowing teams to intervene before needs escalate. A mapping pilot in the North Hub has been successfully rolled out, providing a robust framework for understanding family needs and coordinating support. This has been supported by strong joint working between locality teams, partner agencies, and health services, ensuring families receive timely and appropriate interventions. Earlier identification has allowed teams to undertake preventative work rather than reacting to crises, and staff now feel more confident in managing complex cases and sustaining positive outcomes for families. Impact measures have shown that 96% of families reported feeling more able to make positive lifestyle and behaviour changes, and 94% of families (including 92% of those affected by disability) reported improved family resilience.	Actions for 2024/25 have been completed. 2025/26 will focus on implementing the early help commissioning strategy.
WBO1.1.2	Help communities become more resilient, so more people will find help / support they need in their community. (SSWB)	YELLOW (Good)	Quarter 4: Early Intervention and Prevention Hub model continues to embed. Performance indicators are showing evidence that the strengths-based practice model is operational. In 2024-25, capacity within the Early Help screening process was increased to manage growing demand more effectively. Signs of Safety (SoS) was embedded across all hubs, supporting a consistent, strengths-based approach to assessment and intervention. Case mapping processes with locality teams were improved, ensuring clearer oversight of family needs and better alignment of support. Stronger links with partner agencies were developed, enabling more effective collaboration and ensuring that families accessed the right services as quickly as possible to prevent escalation of need. The Education, Early Years and Young People (EEYYP) panel was introduced, bringing together key services to improve the coordination of referrals and ensure families receive timely and appropriate support. In addition, preparation is underway for the launch of the regional SPACE	To continue ensuring the skill mix is right for the service area. Our focus is also now beginning to move on to evidencing quality interactions and outcomes through the quality assurance framework.

Code	Commitment	Status	Progress this period	Next Steps
			Wellbeing Panel towards the end of 2025, further enhancing multi-agency coordination and integrated working.	
WBO1.1.3	Support the wellbeing of unpaid carers, including young carers, to have a life beyond caring (SSWB)	BLUE (Completed)	Quarter 4: The Prevention and Wellbeing Service has actively supported 549 young carers over the last 12 months, with 146 attending the Young Carers Network event organised by the Young Carer Ambassadors. The Bridgend Carers Wellbeing Service received 553 referrals. 1522 carers supported, signposted - 4650 and provided information, advice and assistance to 2617. 115 referrals made to BCBC for full carers assessments. The service continues to meet needs based on volume of engagement. Through our partnership working with Bridgend Carer Centre, 57 young carers aged between 7 to 12 year olds have been supported through peer mentoring groups.	Creation of a strategic carers group within Bridgend to ensure all unpaid carers views are heard and acted upon. First stage will be identifying employees from within BCBC to identify 5 key themes to progress. Once the initial meeting has taken place the group will grow to include carer representatives from third sector organisations to ensure co-production.
WBO1.1.4	Improve Children's Services by delivering the actions in our three-year strategic plan (SSWB)	GREEN (Excellent)	Quarter 4: The action plan for 2024/25 has been routinely reviewed by the senior management team. Good progress has been made in progressing the priorities within the plan since its implementation. This includes: <ul style="list-style-type: none"> Implementation of the revised Quality Assurance (QA) Framework. Finalising a commissioning strategy for family support services. Continued delivery of the 'Signs of Safety' programme including multi-agency workshops. The implementation of an operating model between prevention (early help) and statutory services to provide an integrated service in which more children and families with complexity of need are supported preventatively where families are motivated and consent to change. Continued improvements in the sufficiency, quantity, and quality of provision for care experienced children requiring residential care. Continued joint working with key partners to deliver the priorities laid out in the three-year plan. 	To continue to support the implementation of the plan through 2025/26.
WBO1.1.5	Improve adult social care with a new three-year strategic plan to tackle physical and mental health impacts of Covid-19 on people with care and support needs, and our workforce (SSWB)	GREEN (Excellent)	Quarter 4: Progress against the plan monitored at a senior level. This includes the Social Services Improvement Board. Formal evaluation of the operating model implemented in February 2024 was progressed. Adults weekly quality assurance outcomes panel continues to oversee practice, establish trends and practice development needs.	Formal review of the six-monthly progress against the plan's milestones.
WBO1.1.6	Change the way our social workers work to build on people's strengths and reflect what matters to our most vulnerable citizens, the relationships they have and help them achieve their potential (SSWB)	GREEN (Excellent)	Quarter 4: Directorate teams are now trialling and testing alternative methods for capturing the voices of individuals in receipt of services. Feedback form development based on the Person Centred Community Care Inventory (PERCCI) method promoted by Social Care Wales is now active in a number of areas. Capturing the voices of individuals through PERCCI and the Most Significant Change model are being tested across Directorate teams within Quality Assurance (QA) direct observation mechanisms.	Findings and recommendations of learning from use of the approaches that support strengths-based models of practice are contributing to QA framework form revision around impact and outcomes. To be signed off in Quarter 1 2025/26
WBO1.1.7	Address the gaps in social care services such as care and support at home, specialist care homes for children and adults and recruiting more foster families (SSWB)	AMBER (Adequate)	Quarter 4: A draft Children and Families Placement Commissioning Strategy has been submitted to Welsh Government and has been presented to CCMB (Cabinet and Corporate Management Board) and Scrutiny. A business justification case has been endorsed approving initially 2 homes, the acquisition of one home is underway and a fostering programme board is set up and will focus on recruitment, retention, and support for foster carers. We have undertaken an accommodation mapping exercise across Adult Social Care, the findings of which were reported to a members briefing session in January 2025, and then approved by Cabinet in March 2025. There has also been a review of daytime opportunities in Bridgend which has been approved by Cabinet.	*Continue to develop and mobilise children's residential as set out in the business justification case and Placement Commissioning Strategy. *Secure any capital and revenue available to support growth. *Continue to progress the fostering project plan. *Key actions and priority areas in the Day Opportunities and Accommodation Based Service reviews have been built into relevant work programmes for 2025/26

Code	Commitment	Status	Progress this period	Next Steps
Page 83 WBO1.1.8	We will ensure that children and families access support from the right service at the right time with the aim of preventing their needs from escalating (SSWB)	AMBER (Adequate)	Quarter 4: We have seen a significant increase in demand into Early Help since the restructure of services in July 2024. However, there continues to be some challenges for people referring for support and the route to access the range of services still provided by other parts of the council. This has led to some confusion within the system. To address these challenges, the introduction of the Education, Early Years and Young People (EYYP) panel has been a key development in streamlining the allocation of referrals and reducing delays in getting families the support they need. This panel brings together multiple services to ensure cases are allocated swiftly and appropriately. Increased capacity within the Early Help screening team has also been established, allowing for quicker allocation of referrals and reducing the waiting time for families. The team is now completing more detailed assessments that clearly identify family needs, enabling more targeted and effective interventions. Regular communication has been established with schools and partner agencies to update them on the new processes, which has helped to upskill professionals and improve the quality of referrals. This combined approach ensures that families are accessing the right support more efficiently, reducing the risk of needs escalating and enhancing overall outcomes.	To continue to work with Education Early Years and Young People directorate to identify a solution to developing one single point of access for all family as identified by the Family Support Commissioning Strategy.

WBO1.2: Supporting people in poverty to get the support they need / help they are entitled to

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED43 CP WBO1.2	Percentage of people supported through FASS (Financial Assistance and Support Service) where support has resulted in increased income through claims for additional/increased benefits and allowances. Higher Preferred	New 23-24	92%	85%	96%		Quarterly Indicator Target Setting: Target set to maintain good performance. The 'drop in' and 'outreach' approach is proving positive in people coming forward for support early and therefore improving outcomes. Performance: A positive year for the service with the target being achieved each quarter. A total of 562 residents have successfully achieved increased income through the support of FASS.
CED44 CP WBO1.2	Percentage of people supported through FASS who have received advice and support in managing or reducing household debt Higher Preferred	New 23-24	93%	85%	94%		Quarterly Indicator Target Setting: Target set to maintain good performance. The 'drop in' and 'outreach' approach is proving positive in people coming forward for support early and therefore improving outcomes. Performance: Target achieved throughout the year with a total of 220 achieving reduced household debt.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.2.1	Support eligible residents to receive financial help through the Council Tax Reduction Scheme. (CEX)	GREEN (Excellent)	Quarter 4: Council Tax Reduction (CTR) is promoted via the Council's website and in the notes of every Council Tax demand notice. The Service offers numerous ways of applying for CTR, including via Universal Credit claims, digital and paper claims, and supports the most vulnerable through home visits. The average time taken to process a new claim for CTR is currently 19 days. Bridgend CBC has been invited to participate in WG's Local Authority Benefit Take-up Pilot. They have committed to funding a 12-month use of a data analytical tool, to assess the extent it helps in identifying unclaimed benefits. During the pilot, up to 12 local authorities will be able to use the tool to interrogate their datasets in order to identify residents who are missing out on their entitlements to financial support. The local authority will be able to undertake targeted campaigns at key points in the year where they contact residents encouraging them to claim their entitlements.	
WBO1.2.2	Raise awareness of financial support available to residents (CEX)	GREEN (Excellent)	Quarter 4: The continuation of the FASS project has led to £1.7m in income gains since the start of the financial year. Clients accessing the service throughout the full year have presented with multiple issues, the top 5 being Benefits and Tax Credits, Universal Credit, Charitable Support & Food Banks, Consumer goods and services, and debt referrals to the service. In past years the service has predominantly supported clients from the most deprived areas of the county borough, however new post code areas are emerging and in the last quarter more clients were supported from surrounding communities.	

WBO1.3: Supporting people facing homelessness to find a place to live

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DOPS39 CP WBO1.3	Percentage of people presenting as homeless or potentially homeless, for whom the Local Authority has a final legal duty to secure suitable accommodation. (CEX) Lower Preferred	7.6%	29%	10%	26.4%		<p>Quarterly Indicator</p> <p>Target Setting: Target set to see reduction in the number who fall into the final legal duty category. This is where initial measures to relieve their homelessness within 56 days have failed.</p> <p>Performance: The Authority continues to have a duty to accommodate everyone that presents as homeless and in need of emergency accommodation. There is not enough affordable housing to meet the demands of the service. The Authority now operates the Welsh Government Leasing Scheme which continues to grow in size. This has benefitted the service as it offers an affordable solution solely to those who are homeless. Due to the shortage of affordable housing, more households are being owed the final duty. Those with complexities are more difficult to find solutions for and harder to prevent from becoming homeless. Pressures on the service continue to grow, more people are presenting homeless. There has been a 12% increase in homeless presentations in 2024/25 compared to the previous year.</p>
PAM/012 (DOPS15) CP WBO1.3	Percentage of households threatened with homelessness successfully prevented from becoming homeless. (CEX) Higher Preferred	19%	11%	20%	31.2%		<p>Quarterly Indicator</p> <p>Target Setting: Target set at realistic level considering the Welsh Government legislative changes in terms of priority need which has a significant impact on number of households included in this measure.</p> <p>Performance: The housing service remain under considerable pressure since the emergency changes introduced during the Covid pandemic and thereafter. There remains to be a shortage of affordable housing to meet the demands. The introduction of longer notice periods in the Renting Homes Act does allow for longer prevention periods however, this is only successful if there is a new home to move into or if the existing home can be saved. Collaboration with Registered Social Landlords (RSLs) to prevent homelessness has been key by ensuring those who are facing homelessness are given some priority for housing. The Private rented sector is also pivotal in this, but this comes at a cost to the Local Authority, however results in savings in the long term. The disparity between market rents and Local Housing Allowance often results in this tenure not being suitable for most of our clients. Whilst prevention activity has improved, the demand on the service has not reduced. There has been a 12% increase in homeless presentations in 2024-25 compared to the previous year.</p>

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.3.1	Continue to improve our housing and homelessness service to reduce homelessness across the borough through implementation of the agreed action plan (CEX)	YELLOW (Good)	Quarter 4: The majority of the key action points within the plan have been completed. In year 3 in particular the Social Housing Allocation Policy was reviewed. A complex housing scheme was commissioned and operational. We have increased the use of, and built relationships, in the private rented sector by the adoption of the Welsh Government Leasing Scheme and are proactively bringing empty properties back into use. We have purchased accommodation to use as a more suitable form of temporary accommodation for those that are homeless. The remainder of actions will be reviewed and completed in year 4. We have reviewed our allocation policy to incorporate rapid rehousing targeted at homeless households. We continue to work on a multi-agency basis to identify those facing the harshest form of homelessness i.e. rough sleeping, to support individuals into accommodation with wraparound support. We continue to work proactively with Registered Social Landlords (RSLs) to develop accommodation to address the demands on social housing.	

WBO1.4: Supporting children with additional learning needs to get the best from their education

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS170 CP WBO1.4	Percentage of new local authority individual development plans (IDPs) delivered using the online IDP system. (EEYYP) Higher Preferred	New 24-25	New 24-25	100%	0%	No trend	<p>Quarterly Indicator</p> <p>Target Setting: All IDPs should be transferred to the new IDP system at the earliest opportunity to ensure adherence to the Additional Learning Needs and Education Tribunal (Wales) Act.</p> <p>Performance: The implementation of the online IDP system has been delayed therefore we have been unable to deliver IDPs via the online system. See WBO1.4.1 below.</p>

DEFS171 CP WBO1.4	Number of pupils on the waiting lists for specialist provision. (EEYYP) Lower Preferred	New 24-25	23	10	55		<p>Quarterly Indicator Target Setting: Placing pupils in specialist provision at the earliest opportunity ensures that all of their educational needs are met. Throughout the year the waiting lists may fluctuate as pupils can be added at any time. We aim to see a trend of decreasing numbers on the waiting list over time. This target is the end-of-year target. Performance: The last Access to Education panel for 2024-25 took place in February 2025. A total of 23 pupils were referred for first discussion. Updates were received from schools for a number of previous referrals where support offered to maintain mainstream placements had not been successful. This has resulted in a further increase in the number of pupils identified for specialist placements. There have been successful growth bids to expand specialist provisions to tackle capacity and wait lists which include additional observation and assessment classes and Communication Autism Resource Education (CARE) provisions. We are looking to install a double mobile classroom at Ysgol Bryn Castell and plan to open three new learning resource centres. We are working with Ysgol Bryn Castell and the Bridge to maximise capacity and manage pupils on reduced timetables, with off-site provisions and non-attenders so that pupils on waiting lists can attend. Some pupils have been placed in moderate learning difficulty (MLD) provisions in lieu of placements in autistic spectrum disorder (ASD) CARE bases.</p>
DEFS172 CP WBO1.4	Percentage of year 9 pupils with Additional Learning Needs (ALN) with a transition plan in place, which have had an annual review by 31 March of each current school year. (EEYYP) Higher Preferred	New 24-25	New 24-25	100%	74.3%	No trend	<p>Annual Indicator Target Setting: In order to comply with the Additional Learning Needs Code for Wales, all IDPs must be reviewed annually. Performance: Transition plans are completed by schools during the IDP review meeting. Meetings can be impacted by non-attendance of key stakeholders, rescheduling and ALN Coordinator (ALCo) capacity. Our ALN Lead will be in regular contact with ALNCos during the summer and autumn terms to ensure completion of the reviews by March each year. We hope to be able to better monitor this data when the online IDP system is fully operational across all schools later this year.</p>

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.4.1	Implement the online IDP (Individual Development Plan) system for local authority and school-based IDPs (EEYYP)	RED (Unsatisfactory)	Quarter 4: A live trial of the online Individual Development Plan (IDP) system earlier in the year identified some system issues meaning we have been unable to extract IDPs from the system. There have been some capacity issues resulting in delays from Gwynedd Council in fixing these issues before the end of the year.	During Q1 2025-2026, Gwynedd Council have successfully implemented system updates and fixes which will allow us to progress with launching the system in early 2025-26. We will host an introductory session to the system for ALNCos at the next ALNCo Forum in May 2025 where we can test the system prior to roll out to schools.
WBO1.4.2	Develop a five-year plan to meet increasing demand on support services, specialist provision and schools (EEYYP)	GREEN (Excellent)	Quarter 4: The draft plan has been produced following completion of an ALN capacity analysis, and shared with the Head of Service Early Years, Education and Young People for approval. Pressure bids were approved to meet demand for ALN places. This includes three new learning resource centres – a Foundation Phase observation class, a Foundation Phase Nurture Class for pupils with Emotional, Social and Behavioural Difficulties (ESBD) and a secondary Communication, Autism Resource Education (CARE) base. Identifying schools for these provisions to open in September 2025 is ongoing.	

WBO1.5: Safeguarding and protecting people who are at risk of harm

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CH/003 CP WBO1.5	Children's safeguarding referrals – decision making in 24 hours. (SSWB) Higher Preferred	99.53%	99.69%	100%	99.97%		<p>Quarterly Indicator Target Setting: To continue to improve performance and ensure children are protected from harm. Performance: Whilst we are off target, this equates to only 5 contacts out of 14828 which were screened outside of the statutory 24-hour timescale. Performance has improved compared to last year.</p>
SSWB62 CP WBO1.5	Percentage of child protection investigations completed within required timescales (SSWB) Higher Preferred	New 23-24	77.78%	75%	84.4%		<p>Annual Indicator Target Setting: We are reviewing systems and processes to accurately reflect this information. Performance: 184/218- We have exceeded our target, however, ongoing work required in this area.</p>

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SSWB63 CP WBO1.5	Average waiting time (in days) on the Deprivation of Liberty Safeguards (DoLS) waiting list (SSWB) Lower Preferred	New 23-24	16 days	16 days	10 days		Quarterly Indicator Target Setting: To maintain good performance within existing resources. Performance: Exceeded the target due to the DoLS Sustainability Plan.
SSWB77 CP WBO1.5	Percentage of Adult safeguarding inquiries which receive initial response within 7 working days (SSWB) Higher Preferred	84.19%	81.85%	85%	83.08%		Quarterly Indicator Target Setting: To continue to improve performance and ensure adults are protected from harm. Performance: This is an area where we are going to complete a deep dive to establish the causes within the system both internal and external. We have introduced a weekly monitoring system so we can escalate accordingly.
CORPB1 CP WBO1.5	Percentage of safeguarding e-learning (including workbook) completions (ALL) Higher Preferred	77.33%	82.73%	100%	85.77%		Quarterly Indicator Target Setting: All staff to complete mandatory training Performance: There has been an improved position on the completions of this mandatory module. Escalations will now also be issued to heads of service to further support completions. The Learning & Development website has also been updated so managers can check themselves if their staff have completed this training. The module is promoted to all new starters through the Corporate Induction Framework and reminders are issued throughout the year, via the Learning & Development bulletin, detailing the importance for staff to complete all mandatory e-learning modules.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.5.1	Work as One Council to effectively safeguard children and adults at risk (SSWB)	YELLOW (Good)	(SSWB) Quarter 4: The Corporate Safeguarding Board continues to oversee safeguarding practice across the Council. A reasonable assurance of corporate safeguarding arrangements has been given by internal audit. Safeguarding risks and self-assessments by all directorates continue to be the focus of the group which reports via a dashboard to CCMB on a monthly basis. (EEYYP) Quarter 4: The 'Signs of Safety' model of practice continues to be embedded into practice in schools, local authority and partner agencies. Professional safeguarding referrals to the directorate are managed effectively by the Education Engagement Team. Schools positively use the professional line in the Multi-Agency Safeguarding Hub (MASH) for discussions in relation to safeguarding. All schools are in compliance with safeguarding training and report they are confident in working with partner agencies in regard to child protection. The safeguarding audits of schools have been completed with 93% (56/60) of schools rated as overall green. The percentage of schools self-evaluating themselves as overall green this year remains the same as the previous year. However, there was an increase this year in the number of sections rated as green in comparison to last year. A draft Early Years and Childcare Safeguarding Policy has been completed. This is awaiting approval from the Cwm Taf Morgannwg Safeguarding Board. Designated Safeguarding Person forum is due to take place in April 2025 which allows partners to collaborate and share best practice. A total of 67 governors completed safeguarding training between April 2024 and March 2025 but safeguarding audits have shown further engagement is required from governors around safeguarding training.	Progress the management action plan from the corporate safeguarding internal audit report. Develop the 2024-25 annual report. Progress directorate by directorate self-assessment. Continue collaboration with the clerk to the governors to increase governor engagement with training delivered by the Education Engagement Team. We will launch Cwm Taf Morgannwg Safeguarding Board's exploitation strategy and toolkit.
WBO1.5.2	Safeguard children, young people and adults at risk of exploitation (SSWB)	GREEN (Excellent)	Quarter 4: Regional strategy has been signed off and local plans developed for implementation in BCBC.	Local action plan implementation including training staff on key documents such as screening and assessment tools. Business support systems in place to collate data and information as well as support the Exploitation protocol meetings that will take place in high risk exploitation cases.

WBO1.6: Help people to live safely at home through changes to their homes

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED45(a) CP WBO1.6	The average number of calendar days taken to deliver a Disabled Facilities Grant (DFG) for: a) low level access showers. Lower Preferred	New 23-24	694 days	210 days	839 days	⬇️	Quarterly Indicator Target Setting: Backlog of works due to the impact of CV19 is still significantly affecting our ability to improve performance or record a meaningful baseline for each category. Therefore, we will continue to use our original aspiration of 210 days as an initial baseline. Performance: We have continued to work through the pipeline of referrals and the number of backlog cases is coming down. Where referrals have been deemed a priority by an occupational therapist these have been escalated. Referrals dating back to 2019 have been certified during year and continue to significantly impact PIs. Budget has been brought forward from 2025-26 in order to maintain the completion of referrals within this financial year, as the budget for 2024-25 has been utilised. See WBO1.6.1 below.
CED45(b) CP WBO1.6	b) Stair lifts Lower Preferred	New 23-24	351 days	210 days	579 days	⬇️	
CED45(c) CP WBO1.6	c) ramps Lower Preferred	New 23-24	835 days	210 days	1,086 days	⬇️	
CED45(d) CP WBO1.6	d) extensions (CEX) Lower Preferred	New 23-24	945 days	210 days	1,115 days	⬇️	
DOPS41 CP WBO1.6	Percentage of people who feel they are able to live more independently as a result of receiving a DFG in their home. (CEX) Higher Preferred	New 23-24	98%	98%	99.3%	⬆️	Quarterly Indicator Target Setting: Target retained. To continue to achieve a positive outcome for grant recipients in living more independently. Performance: Achieved target.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.6.1	Improve the process and access to grants for older and disabled people who need to make changes to their home (CEX)	YELLOW (Good)	Quarter 4: The Disabled Facilities Grant (DFG) Procurement framework is now live. The framework has allowed us to allocate referrals to contractors in a more timely manner, ensuring value for money and making best use of the capital budget available. Use of the framework will ensure the experience for the end user runs smoothly and efficiently in meeting their needs at the earliest opportunity. The 2024-25 budget was fully spent as of 31st March 2025. An additional £90k of funding was secured in March from the Regional Partnership Board, which allowed us to adapt a further 15 homes. Total DFG spend in the full year £2.4m. A total of 238 adaptations were completed in 2024-25, a 5% rise on the previous year. A significant number of cases from the backlog have been addressed, with 116 cases left from prior to March 2023, compared to 387 outstanding in the prior year.	

WBO1.7: Support partners to keep communities safe

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED46 CP WBO1.7	Number of instances where CCTV supports South Wales Police in monitoring incidents (CEX) Higher Preferred	New 23-24	944	944	1,020	⬆️	Quarterly Indicator Target Setting: To continue supporting South Wales Police in actively monitoring CCTV incidents across Bridgend County Borough Performance: The CCTV service continue supporting South Wales Police in actively monitoring CCTV incidences. In 2024-25, we have supported an average of 85 incidences each month, with CCTV staff initiating 45.1% of these.
CED62 CP WBO1.7	Percentage of Assia service users reporting increased feelings of safety at their exit evaluation(CEX). Higher Preferred	New 24-25	New 24-25	100%	99.12%	No trend	Quarterly Indicator Target Setting: New PI – 100% target. Safety planning, targeting hardening and safety measures carried out with all service users throughout support and before exiting the service Performance: 911 completed exit evaluations, 903 reported increased feelings of safety. Target not achieved as some service users opted not to respond to the question in Q1 and Q2

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
Page 88	CED63 CP WBO1.7 Percentage of high risk domestic abuse victims / public protection notices received by the service contacted within 48 hours (CEX) Higher Preferred	New 24-25	New 24-25	100%	100%	No trend	Quarterly Indicator Target Setting: New PI – 100% target. Contact within 48 hours is identified best practice (in line with Leading Lights accreditation) Performance: Target met in line with good practice standards (1214 of 1214)
	CED64 CP WBO1.7 Percentage of medium risk domestic abuse victims / public protection notices received by the service contacted within 72 hours (CEX). Higher Preferred	New 24-25	New 24-25	100%	100%	No trend	Quarterly Indicator Target Setting: New PI – 100% target. Contact within 72 hours is identified best practice (in line with Leading Lights accreditation) Performance: Target met in line with good practice standards (629 of 629)
	CORPB2 CP WBO1.7 Percentage of council staff completing Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) training (Level 1) (ALL) Higher Preferred	73.45%	75.54%	100%	75.92%	↑	Quarterly Indicator Target Setting: All staff to complete mandatory training Performance: There has been a slight improvement on the completions of this mandatory learning. Escalations will now also be issued to heads of service to further support the completions. The Learning & Development website has also been updated so managers can check themselves if their staff have completed this training. The module is promoted to all new starters through the Corporate Induction Framework and reminders are issued throughout the year, via the Learning & Development bulletin, detailing the importance for staff to complete all mandatory e-learning modules.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.7.1	Regionalise the Community Safety Partnership (CSP), creating a single CSP covering the three respective local authority areas, providing strategic oversight for VAWDASV, Contest & Serious Violence (CEX)	BLUE (Completed)	Quarter 4: The Cwm Taf Morgannwg Community Safety Partnership (CTMCSP) has been established, terms of reference have been developed and the inaugural meeting of CTMCSP has taken place. The Regional Community Safety Partnership structure has been confirmed and is operational, with delivery mechanisms being worked through. Meetings have been diarised for the 2025 calendar year alongside governance arrangements with Public Services Board (PSB) and Joint Overview and Scrutiny Committee.	
WBO1.7.2	Identify children who are more likely to offend and provide them with support to reduce offending behaviour (EEYYP)	YELLOW (Good)	Quarter 4: From September 2024, the weapon awareness programme has begun to target the Year 7 intake for each comprehensive school and the one school missed in the school year 2023-2024. This has now extended to older age year-groups. Bridgend Youth Justice Service (BYJS) has recently carried out further presentations to schools, early help teams and Pupil Support Services to raise awareness of the BYJS prevention offer. BYJS have continued meet on a monthly basis with Community Safety Partnership and Youth Support Service to see share information and offer support to existing wider prevention provision. Our Victim Officer has liaised with the Anti-Social Behaviour Team and has improved multi-agency partnership working in that area. The successful implementation of a range of activities (such as, building skills, Halo Leisure Centre activities and encouraging children to attend full time education), has played a role in diverting children who offend from being criminalised, significantly reducing the number of first-time entrants into the criminal justice system. Bridgend Youth Justice Service currently has reduced case holding capacity due to a recruitment freeze. This has unfortunately led to children being put on a waiting list for prevention intervention.	

WBO2: A County Borough with fair work, skilled, high-quality jobs and thriving towns

WBO2.1: Helping our residents get the skills they need for work

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS82 CP WBO2.1	The number of participants in the Employability Bridgend programme going into employment. Higher Preferred	392	366	233	453	Trend not applicable	Quarterly Indicator Target Setting: Target set to maximise use of funding secured for that year. Funding arrangements can vary from year to year therefore targets are not comparable Performance: We have overachieved on this target for year total.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.1.1	Invest £22m of Shared Prosperity Funding in projects in the County Borough by 2025, with third sector partners, including in people and skills, supporting local businesses, and developing communities and place (COMM)	YELLOW (Good)	Quarter 4: The programme was completed in line with funder requirements and over 95% of target indicators across the programme were exceeded. The Economic Programme Board, chaired by the Cabinet member for Regeneration, Economic Development and Housing, oversaw the programme's governance. Finance completed end of year reporting, and all projects finished on time, however the programme had an 11% underspend due to final quarter unforeseen issues. A package of activity to take place during the transition year, 2025-26, was agreed by Cabinet and Corporate Management Board in January 2025.	
WBO2.1.2	Employability Bridgend will work with funders and partners, including the Inspire to Work Project to deliver a comprehensive employability and skills programme (COMM)	GREEN (Excellent)	Quarter 4: Programme signed up 1,353 participants as of end of Q2, 304 participants in Q3 and 121 participants in Q4. Q4 was a smaller number than previous quarters as we closed referral in mid-Feb to be able to concentrate on closing files for the end of the project year as we didn't have clear guidance on whether we could move participants over to the transition year. We have worked with partners such as other BCBC departments, particularly the neurodivergence team in January for the Pathways conference, to support with training, volunteering and employment. We signpost as appropriate to or collaborate with other services and projects as appropriate. The Marketing and Engagement team is well established and successful with promoting employability.	

WBO2.2: Making sure our young people find jobs, or are in education or training

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS80 CP WBO2.2	Number of participants in the Employability Bridgend programme supported into education or training. (COMM) Higher Preferred	387	76	409	678	Trend not applicable	Quarterly Indicator Target Setting: Target set to maximise use of funding secured for that year. Funding arrangements can vary from year to year therefore targets are not comparable Performance: We have overachieved on this target for the year.
PAM/046 CP WBO2.2	The percentage of Year 11 leavers from schools in the authority identified as not being in education, employment or training (NEET) in the Careers Wales Annual Destination Survey Statistics. (EEYYP) Lower Preferred	1.6%	1.4%	1.5%	1.9%		Annual Indicator Target Setting: This target reflects the current position where more young people are identifying with a range of complex issues, impacting their progression into education, employment, or training. Performance: The percentage of Year 11 leavers identifying as NEET has increased compared to last year. Several factors have contributed to this increase, such as, school exclusions, pregnancy and mental health issues leading to long periods of school avoidance and social exclusion. Bridgend is the 5th best performing local authority for numbers of Year 11 leavers presenting as NEET. The Youth Support Services Post-16 NEET Coordinator has held the first panel looking at current Year 11 pupils in Bridgend that have less than 50% attendance, of which there were 30 (this does not include data from Pencoed Comprehensive School and Brynteg School). The panel consisted of members of staff from Education Engagement Team, Pupil Support Services and Youth Services. While the panel discussed support arrangements, this will likely be impacted by the confirmed budgetary reductions, leading to fewer staff able to provide appropriate interventions.

Commitments

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Code	Commitment	Status	Progress this period	Next Steps
WBO2.2.1	Increase employment and training opportunities in the County Borough for young people aged 16 to 24 years old (COMM)	RED (Unsatisfactory)	Quarter 4: We do not have Youth Guarantee monies anymore, so no specific Youth focussed work takes place.	This commitment is to be removed for 25-26. It is replaced by a commitment to increase employment and training opportunities for all age groups, not just 16-24 year olds.
WBO2.2.2	Employ and develop a well-motivated, well supported, qualified social care workforce in the Council and with partners. Fill vacancies in our social care services and reduce dependence on agency workers (SSWB)	GREEN (Excellent)	Quarter 4: We continue to evidence low levels of agency in children and family services. High levels of maternity in some service areas in adult social care are contributing to agency levels. There is continued focus on wellbeing at an individual and team level. The 'Grow Our Own Social Work Programme' and international recruitment project has achieved Social Care Wales Accolade highlighting excellent practice which the rest of Wales can learn from. Staff have attended College careers events and open days and have had direct input onto College Health and Social Care diploma programmes, giving presentations on working in social care, also provision of information on work pathways, apprenticeship programmes and careers in social care. Discussions taking place with the College regarding the provision of work placements (residential care) for students who will be undertaking the Level 3 Health and Social Care Diploma.	Deployment of newly qualified social workers (12) qualifying from the "grow your own" scheme to key areas of business need. Establish a directory of work placement opportunities for Health and Social Care students. Initially within BCBC adult residential care services, with the intention to extend to commissioned providers services.
WBO2.2.3	Bridgend Music Service will further develop links with partners to explore income generation opportunities and broaden the learning offer where appropriate. (EEYYP)	BLUE (Completed)	Quarter 4: Youth ensemble membership has grown over the year with ensemble groups ranging from beginner to post-Grade 8 standard, as Primary Orchestra, Secondary Orchestra and Senior Orchestra. County youth ensemble membership has increased by 10% in January 2025 and remains on course to return to pre COVID-19 membership levels by the end of the summer term 2025. Youth ensembles were combined and digitally recorded the ensemble for submission into this year's MFY 'Mentor Connect Programme'. This submission resulted in our 'Bridgend County Combined Youth Orchestra' receiving an invitation to perform as part of the National MFY Festival in Birmingham Symphony Hall in July 2025. Links further developed with the national 'Music for Youth' (MFY) organisation, enabling cost reductions whilst young musicians can still work with MFY professional musicians and receive feedback on their performances. Members of the BBC National Orchestra of Wales confirmed that they will visit Bridgend Music Service in May 2025 to deliver two concerts to pupils. Bridgend Music service has recently received the Mayor of Bridgend Citizenship Award for its ongoing contribution and impact on the community.	

WBO2.3: Improving our town centres, making them safer and more attractive

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.3.1	Deliver £1.3m of Transforming Towns investment across our town centres in partnership with Welsh Government over the next two years to improve the economic sustainability of our town centres (COMM)	GREEN (Excellent)	Quarter 4: More than £340,000 was awarded to 5 schemes which contribute towards regenerating our town centres. These schemes were supported as part of the Transforming Towns Programme. This scheme has been renewed to support projects in 2025-6. The availability of commercial property grants has been marketed, with some feasibility finance available for projects in the Valley areas available throughout. Significant consultation has been undertaken on the new placemaking strategies and marketing continues on availability of funding.	

WBO2.4: Attracting investment and supporting new and existing local businesses

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DCO23.03 CP WBO2.4	Number of businesses receiving support through Shared Prosperity Funding. (COMM) Higher Preferred	New 23-24	25	21	37	↑	Quarterly Indicator Target Setting: This is the final year of the funding so will attempt to maximise the benefits locally where possible. Performance: The business support programme has been delivered successfully in 24-25.

Page 91	DCO23.04 CP WBO2.4	Number of business start-ups assisted. (COMM) Higher Preferred	New 23-24	219	53	94	↓	Annual Indicator
								Target Setting: Continue to assist and capitalise on the strong new business demand Performance: The business support programme has been delivered successfully in 24-25, however performance is slightly lower compared to the previous year. It was not possible to award as many business support grants in 24-25 due to funding availability, and a specific business support programme (Rebel Business School) that was delivered in 23-24 could not be delivered in 24-25 due to funding availability.

Commitments

Code	Commitment	Status	Progress this period					Next Steps
WBO2.4.1	Invest in business start-ups in the County Borough by providing both professional and grant support, supporting key growth sectors like research and development, finance and the green economy (COMM)	GREEN (Excellent)	Quarter 4: A total of 68 start up grants have been awarded during 2024-25. The grant is now open all year and signposting to other organisations is given so that the required business plan and cashflow forecast are supported by Business Wales. Support has been provided from UK Steel Enterprises to enhance the start-up grant and it is expected that the grant will be of interest to former TATA, and TATA supply chain, employees. By the end of Q4 the team had delivered total of 27 business development grants and 10 business feasibility grants. The grant panel meetings continue to be held regularly to ensure the best support is offered to applicants and maximise the number of grants awarded within timescales. The grant panel is a useful mechanism to ensure that discussion on all grants available to businesses and other enterprises takes place to ensure the best support is offered. Both commissions are coming to a close at the end of March. Both commissions have been completed. Both completed in line with all funders target requirements and compliance.					
WBO2.4.2	Work with the Cardiff City Region (CCR) and its 10 local authorities to transition to the Corporate Joint Committee (CJC) and to continue to work regionally on strategic planning, transport and economic development. (COMM)	GREEN (Excellent)	Quarter 4: The Corporate Joint Committee has been formed. Work to produce the draft Delivery Agreement for Cardiff Capital Region (CCR) and was completed by September 2024. Monthly meetings of the Economic Directors Forum monitors this work and communicates with the Corporate Joint Committee (CJC) on its strategic vision. Work with the CJC to produce a regional transport plan and was completed in December.					

WBO2.5: Making the council an attractive place to work

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period	
CED29(a) CP WBO2.5	The proportion of staff reporting through survey that they agree or strongly agree with the statement: a) I feel every department is working towards the same common goal Higher Preferred	41%	35%	42%	Data not available	No trend	Annual Indicator	Target Setting: Target set to show increase in positive feedback from staff in comparison to the previous survey conducted (2023-24 actuals) Performance: Survey was not run in 2024-25 as planned. The response rate to the 2023-24 staff survey was disappointingly low with 707 responses (23% of staff) which represented a 19% decrease in staff participation compared with the previous year. In addition, many aspects of the responses were ambiguous and difficult to interpret. There was a high level of neutral responses and limited qualitative feedback making analysis of the results difficult. We therefore ran two focus groups with a cross section of staff to gain more insight. Staff raised a number of issues that created barriers to participation in the survey, including lack of digital access for some staff, duration of the survey, time of year the survey ran (February), as well as a range of issues they wanted addressed including clearer priorities and more direct communication from Corporate Management Board (CMB). CMB and Cabinet reflected on the feedback and a range of changes were initiated in response to staff concerns, including the decision to change to a biannual staff survey supported by surveys tailored to a number of staff groups (primarily frontline staff) who either could not participate digitally or would benefit from a more streamlined survey which will run at different times of the year. In addition, the 7 wellbeing objectives
CED29(b) CP WBO2.5	b) I am satisfied with BCBC as an employer Higher Preferred	67%	66%	74%	Data not available	No trend		
CED29(c) CP WBO2.5	c) Working here makes me want to perform to the best of my ability Higher Preferred	77%	73%	79%	Data not available	No trend		
CED29(d) CP WBO2.5	d) I feel that BCBC values its employees ideas and opinions Higher Preferred	40%	39%	48%	Data not available	No trend		
CED29(e) CP WBO2.5	e) Do you think there are opportunities for two-way communication to discuss and raise ideas and issues? (CEX) Higher Preferred	84%	85%	86%	Data not available	No trend		
CED49(a) CP WBO2.5	Percentage of staff reporting through survey that they agree or strongly agree with the statement: a) I feel supported to manage my personal wellbeing whilst in work Higher Preferred	70%	67%	71%	Data not available	No trend		

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
page 92 CED49(b) CP WBO2.5	b) The council is dedicated to taking positive action to support employees achieve a positive sense of wellbeing in their working lives (CEX). Higher Preferred	53%	50%	54%	Data not available	No trend	in the corporate plan were streamlined to make communication more straightforward and some new communications channels were introduced to establish a clearer voice and connection with CMB (the Chief Executive's quarterly message, the Managers' Briefing Note and the Managers' Forum).
	Number of sign up of new subscribers to the staff extranet (CEX) Higher Preferred	New 23-24	Data not available	Baseline	Data not available	No trend	Quarterly Indicator Target Setting: The staff extranet site is in its final test phase with the initial pilot being initiated in July 2024 prior to all staff roll out, where baseline data can be captured. Performance: Unfortunately, we are unable to progress with this project due to the proof of concept not meeting the necessary threshold, therefore we need to consider an alternative solution.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.5.1	Improve the Council's culture as an employer, offering fair work opportunities to current and potential employees. Use the views of our workforce to make improvements, develop and motivate employees and improve staff retention (CEX)	YELLOW (Good)	Quarter 4: Throughout the year the council has continued to promote itself as an employer of choice to ensure that both current and new employees have access to development. During the year the council was awarded the Disability Confident - Leader status, continues to pay the Real Living Wage and promote a range of benefits such as Staff Discounts, Health & Wellbeing Platform and flexible employment options. The number of apprentices employed across the organisation during 2024-25 was 22 which was lower than previous years. The council will continue to support services to appoint apprentices within the budget available. The workforce planning E-learning module has been written; however, work is taking place to develop a toolkit on this topic to give managers the necessary tools to undertake effective workforce planning. Work is progressing on improving key aspects of internal communication following feedback from the staff focus groups, and visible leadership e.g. Chief Executive's quarterly message to all staff. A monthly bulletin to managers has been established which has seen an open rate of 80% to each edition. Full structured programme of internal communication will be dependent on restructure of Communications Service and capacity.	

WBO2.6: Ensuring employment is fair, equitable and pays at least the real living wage

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED54 CP WBO2.6	Number of real living wage employers identified (CEX) Higher Preferred	235	250	255	257	↑	Annual Indicator Target Setting: Increase the number of suppliers replying and becoming accredited Performance: Target achieved. We have successfully identified 7 additional Real Living Wage employers in 2024-25 that were awarded contracts with BCBC. This takes the running total to 257.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.6.1	Encourage employers to offer growth/training options to employees (CEX)	BLUE (Completed)	Quarter 4: We are continuing to ask our bidders if their staff are trained and kept up to date with relevant training in order to fulfil their roles within the organisation. We believe this is very important to ensure the contracted work is carried out safely, professionally and to a high standard. It is now a standard practice in Procurement to ask if bidders offer apprenticeships via our contracts if appropriate to do so.	

WBO3: A County Borough with thriving valleys communities

WBO3.1: Investing in town centres, including Maesteg town centre

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DCO23.01 CP WBO3.1	Number of commercial properties assisted through the enhancement grant scheme (COMM) Higher Preferred	New 23-24	4	2	7	↑	Annual Indicator Target Setting: To allocate the grant appropriately to successful applicants in line with funding terms Performance: Target achieved - £168,280.96 was paid out against 7 properties to enhance and consolidate the High Street in Commercial areas across our valley areas. A further commitment has been made to support schemes in the year 2025-6.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.1.1	Complete a Placemaking Strategy for Maesteg town centre to improve the environment and support future investment bids (COMM)	YELLOW (Good)	Quarter 4: Consultation on the Placemaking Plan for Maesteg has been completed and the Plan is now ready for formal approval. The Placemaking Plan will be used to support investment and development of projects in and around the town centre. It will support applications for project funding and to demonstrate need and opportunities for activity to support the town centre.	Receive formal approval on Placemaking Plan.
WBO3.1.2	Develop a commercial property enhancement grant for all valley high streets, to make them look better and bring properties back into commercial use (COMM)	GREEN (Excellent)	Quarter 4: Just over £168,000 was paid out against 7 properties to enhance and consolidate the High Street in Commercial areas across our valley areas. This fund was supported by the Shared Prosperity Fund. Grants were awarded in Ogmore Vale, Garw, Llynfi, Pencoed and Pyle. Examples include Ogmore Valley Family Dental, and Ogmore Boxing Club, where support was given to maintain active frontages on the high street and retaining vital health services and benefits within the valley.	

WBO3.2: Creating more jobs in the valleys

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.2.1	Develop funding bids for our valleys, to enhance the economy and stimulate new job opportunities (COMM)	AMBER (Adequate)	Quarter 4: Project development across the valleys areas has been supported by Shared Prosperity Fund Finance. Programmes and projects will need to be supported by external funding. The Valley Regeneration Strategy is in final draft form to be circulated for completion. Once formally adopted, use this as a tool to develop potential funding bids.	Complete the Valley Regeneration Strategy and submit for formal adoption.
WBO3.2.2	Increase the amount of land and premises available for businesses, including industrial starter units, in the Valleys (COMM)	AMBER (Adequate)	Quarter 4: Discussions still on-going with Northern Valleys Gateway Initiative (NVI). Discussions started with Cardiff Capital Region (CCR) in relation to accessing funds through the NVI programme in 2023 and nearly 2 years later funding still has not been released to BCBC through CCR to progress the development of much needed business units in the Valleys.	Continue to work with CCR for the Northern Valleys Gateway Initiative to understand which proposals could be suitable to take forward as a new application in 2025.

WBO3.4: Improving education and skills in the Valleys

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.4.1	Establish three new Flying Start provisions, offering free childcare for two-year-olds in Nantymoel, Ogmore Vale and Pontycymmer (EEYYP)	BLUE (Completed)	Quarter 4: The three provisions at Nantymoel, Ogmore Vale and Pontycymmer have been established. We have received approval from Welsh Government on the proposed delivery plan for the universal expansion of Flying Start childcare (phase three) approval in March 2025 which will see the final Lower Super Output Areas in Maesteg becoming eligible from April 2025. All settings funded for Flying Start and/or early education places have now received the new, enhanced Group B and Group C safeguarding training. All settings are now using the compliance tool to self-evaluate their settings and to ensure that evidence is in place to qualify their assessment of their setting. Judgements against the quality indicators suggest that, as of March 2025, 92% of funded settings are offering care (and where relevant) education that is at least of good quality.	

WBO3.4.2	Open Welsh-medium childcare in the Ogmore Valley and Bettws, with 32 full-time-equivalent childcare places (EEYYP)	RED (Unsatisfactory)	Quarter 4: The tender process for the opportunity to open a Welsh-medium provision at the Bettws site has concluded and a preferred provider has been identified. The preferred provider has accepted the opportunity and negotiations regarding the terms of the lease are underway. Once the Bettws building is handed over, the local authority will offer support to the provider to register and promote the setting. The tender process for the Blackmill has been delayed and will now run through May 2025. At the open day for Blackmill on 12 March 2025, four providers came to express an interest. Mudiad Meithrin and Bridgend's procurement team met in January 2025 and have established a way that Mudiad Meithrin can enter into the procurement process for Blackmill.	The tender process for the Blackmill setting will run through May 2025.
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WBO3.5: Investing in our parks and green spaces and supporting tourism to the valleys

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.5.1	Develop a regeneration strategy for the valleys (including Ogmore and Garw Valleys) (COMM)	AMBER (Adequate)	Quarter 4: The Valley Regeneration Strategy has been produced, Stakeholder consultation on the development has been completed, and a consultation report has been produced, and a report take to SOC3 to review the consultation and its influence on the development of the plan is in final draft form to be circulated for completion. Once is formally adopted; we will use this as a tool to develop potential funding bids.	Complete The Valley Regeneration Strategy and submit for formal adoption.

WBO3.6: Encourage the development of new affordable homes in the valleys

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED55 CP WBO3.6	Number of additional affordable homes provided by Registered Social Landlords (RSLs) in the Valleys (CEX) Higher Preferred	New 23-24	2	20	2	↔	Annual Indicator Target Setting: This 1-year target forms part of wider programme to see an additional 100 units in the valleys provided by RSLs over the next 5 years through the Welsh Government capital build scheme. Performance: Whilst 13 have been built/acquired in the financial year, only 2 have been provided i.e. ready for occupation. The remainder will count towards the additional affordable homes in 2025-26. We have continued the dialogue with RSLs promoting development in the Valleys. There are schemes in the main programme of the plan to be developed in the Valleys over the 3 year rolling period.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.6.1	Promote and encourage the development of new social housing in the valleys (CEX)	YELLOW (Good)	Quarter 4: Monthly meetings continue with the 6 Registered Social Landlords (RSLs) currently developing in the area to progress the capital build programme to identify priority areas for development ensuring the needs of BCBC are met. Representation from BCBC Strategic Asset Management brings specialist insight and furthers opportunities. Working relationships with planning colleagues have been enhanced with consultation taking place at the early stage of site consideration. Quarterly strategic meetings take place with Chief Executive Officers of RSLs. Quarterly meetings take place with all RSLs and Welsh Government collectively to bring forward BCBC's development plan and ensure full utilisation of capital grants. Valley areas are promoted and considered in line with the Local Housing Market Assessment; Valley sites feature in the current main programme of development and future pipeline development.	
WBO3.6.2	Redevelop the Ewenny Road site, including new and affordable homes, an enterprise hub, open space and green infrastructure, in partnership with the adjoining landowner (COMM)	AMBER (Adequate)	Quarter 4: The development of 180 new homes is continuing. Following the former Ewenny Road Industrial Estate being marketed, the sale of the land to a housing developer is in the process of being finalised.	Finalise the sale of the Ewenny Road site. Once the Valley Regeneration is formally adopted, this will be used to develop potential funding bids.

WBO4: A County Borough where we help people meet their potential

WBO4.1: Providing safe, supportive schools with high quality teaching

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS155 CP WBO4.1	Percentage of schools that have self-evaluated themselves as 'green' as part of their annual safeguarding audit. (EEYYP) Higher Preferred	90%	93%	100%	93%	↔	<p>Annual Indicator</p> <p>Target Setting: In line with guidance, to ensure schools are exercising their legal safeguarding obligations.</p> <p>Performance: All safeguarding audits have been completed. The percentage of schools self-evaluating themselves as overall green this year remains the same as the previous year. However, there was an increase this year in the number of sections rated as green in comparison to last year. The main areas for improvement are in relation to governor training and knowledge on safeguarding, and the topic of safeguarding being discussed at student council meetings. Schools have advised safeguarding will be an agenda item at student council meetings and we will work with the clerk to the governors to increase governor engagement with safeguarding training. All designated safeguarding persons (DSPs) in schools have received appropriate training.</p>
DEFS156 CP WBO4.1	Number of schools judged by Estyn to be in 'significant improvement' or 'special measures' (EEYYP) Lower Preferred	0	1	0	1	↔	<p>Quarterly Indicator</p> <p>Target Setting: School support is in place with improvement partners so there should be early support provided to avoid the outcome of any school requiring 'significant improvement' or in 'special measures'.</p> <p>Performance: One school has been removed from Estyn 'special measures' category, while another school has been deemed to require special measures after an Estyn inspection this term revealed significant inconsistencies in the quality of teaching and learning across the school. The post-inspection action plan was submitted and approved by Estyn in February 2025, and the school has begun identifying a range of professional learning to support the school address the recommendations identified. The local authority, alongside improvement partners, will continue to work closely to support the school with their recommendations.</p>
EDU010a CP WBO4.1	The percentage of school days lost due to fixed-term exclusions during the academic year, in a) primary schools. Lower Preferred	0.02%	0.024%	0.03%	0.031%	⬇	<p>Annual Indicator</p> <p>Target Setting: Fixed-term exclusions are currently showing an upward trend due to behavioural changes and an increased complexity of needs. The target reflects an expected improvement in performance.</p> <p>Performance: There has been a significant increase in the percentage of days lost due to fixed-term exclusions for primary schools compared to 2023-2024. The opposite trend is seen in secondary schools where days lost are slightly improved. Challenging behaviour in schools remains problematic and we are facing challenges around the</p>
EDU010b CP WBO4.1	b) secondary schools.(EEYYP) Lower Preferred	0.164%	0.165%	0.15%	0.152%	⬆	<p>use of weapons and violent behaviour within schools. Weapons-Related Incidents in Bridgend Educational Settings Strategy Group has been convened to look at the use of violence and weapons within schools, to identify trends and themes including areas of best practice to address violence in school.</p>
EDU016a (PAM/007) CP WBO4.1	Percentage of pupil attendance in a) primary schools Higher Preferred	90.1%	91.5%	93%	92.49%	⬆	<p>Annual Indicator</p> <p>Target Setting: Pupil attendance is a critical measure, as young people are unlikely to attain their full potential and are more likely to be diverted into anti-social behaviour if they are not attending school regularly. Work is ongoing with schools and families to highlight the importance of attendance and support available.</p> <p>Performance: Pupil Attendance rates in primary schools continues to increase, however attendance in secondary</p>
EDU016b (PAM/008) CP WBO4.1	b) secondary schools (EEYYP) Higher Preferred	86.5%	87.9%	90%	87.31%	⬇	<p>school remains lower than that of primary school age pupils. Work is ongoing to support pupil attendance across all schools. The Education Engagement Team are supporting schools to complete an attendance audit to identify areas of best practice and development. The working group continues to strategically support pupil attendance. Work will be completed this school year to improve persistent absence levels in primary schools as the gap between the best performing and worst performing is of concern.</p>
PAM032 CP WBO4.1	Average Capped 9 score for pupils in Year 11. (EEYYP) Higher Preferred	New 23-24	361.50	363	357.40	⬇	<p>Annual Indicator</p> <p>Target Setting: Welsh Government has reinstated the data collection for the 2022-23 school year. Target set to achieve an improvement on last year's results. Further data required to identify trends.</p> <p>Performance: Capped 9 scores are below target but remain above Wales average (352.1), placing Bridgend in 9th compared to other local authorities in Wales. In 2023 there was a partial realignment of the grade boundaries to pre COVID-19 levels, causing a partial drop in scores across Wales. The decreasing trend continued in 2024, following the complete national realignment of the grades to pre COVID-19 levels. We work closely with school leaders to improve capped 9 scores, through various mechanisms such as, sharing effective practice, the role of improvement</p>

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
							partners, brokering support, developing leadership capacity, local authority network groups, evaluating the quality of teaching and judging the impact of teaching on the outcomes for learners.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.1.1	Help schools achieve their improvement plans by analysing needs and offering training to address this, ensuring that all schools will be judged by Estyn as 'not requiring any follow-up' (EEYYP)	YELLOW (Good)	Quarter 4: The current professional learning compendium from Central South Consortium has a range of professional learning for school staff and governors, which has been developed through analysis of Estyn recommendations, feedback from school leaders and an analysis of school priorities. A new website has been launched by Central South Consortium with a range of resources, guidance materials and case studies to support schools to develop their provision for teaching, including literacy. The local authority has shared individual "School on a page" (SOAP) documents, which contains high-level information the local authority uses to support schools (in relation to aspects such as, leadership, governance, self-evaluation). These will aid reflection and self-improvement. The first Strategic Partnership Board was established this year with local authority officers and representative headteachers to assist with self-evaluation processes related to the directorate's strategic plan. These will continue as termly meetings. One school has recently been removed from 'special measures', but another school has been judged in a recent Estyn inspection as requiring 'special measures'. This school is making expected progress against milestones and engaging effectively with professional learning and support offered.	
WBO4.1.2	Ensure all local schools are rated as green following their safeguarding audit and provide support they need to improve (EEYYP)	YELLOW (Good)	Quarter 4: All safeguarding audits have concluded with 93% schools rated an overall green. The number of schools with an outcome of overall green remains the same as the previous year (56 schools out of 60), but there has been an increase in the number of audit sections rated as green. A review of the safeguarding audit will be completed this year to ensure it is compliant with legislative framework and the requirements of Estyn. The Education Engagement Team continues to provide safeguarding training and support to schools. The EEYYP Directorate Safeguarding Board takes place once a term and it enables effective sharing of best practice between partners and coordination of work.	
WBO4.1.3	Make additional digital learning training available to all school staff to improve teaching and learning in our schools (EEYYP)	GREEN (Excellent)	Quarter 4: Throughout this year, schools have been supported with a variety of digital professional learning and skills training for online safety, Curriculum for Wales (Digital Competence Framework), artificial intelligence guidance, policy, risk and skills training for generative artificial intelligence tools and services. They have received guidance and support regarding Hwb migration for email, data and device management. Schools have been supported with Bridgend's full capital funding allocation for expenditure through the EdTech Commercial Service for 2024-2025 and 2025-2026. The new draft Bridgend Schools' Digital Learning Strategy 2025-2028 has been developed with consultation from Bridgend Schools' ICT Strategy Group, local authority officers and school representatives from secondary, special and primary settings. This has now been sent to Welsh Government for feedback and will be published in September 2025.	
WBO4.1.4	Improve the digital offer to young people, including youth led interactive website (EEYYP)	GREEN (Excellent)	Quarter 4: The youth support social media presence is growing weekly with posts now reaching 2700 people through Facebook and 5300 people through Instagram. Youth Support Services are still awaiting the outcome of a business proposal to begin a trial for a corporate TikTok account, as this has been identified as young people's preferred platform. Your Voice digital forum has now concluded with a current total of 790 participants. Staff from the Children's Rights and Participation team will now work with our Youth Councillors to develop a report identifying the main themes and issues from the data received. The aim is to share a report with elected members and senior leadership team. The website pages continue to be remodelled, alongside support from our Young Editors group, and now includes representation of our third sector group - Bridgend Youth Matters.	

WBO4.3: Expanding Welsh medium education opportunities

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS138 CP WBO4.3	Percentage of Year 1 learners taught through the medium of Welsh. (EEYYP) Higher Preferred	8.1%	8.56%	8.7%	8.83%	↑	Annual Indicator Target Setting: Welsh Government targets in accordance with Welsh in Education Strategic Plans (Wales) Regulations 2019. Performance: The percentage of Year 1 learners taught through the medium of Welsh has increased gradually over the last five years and continues to follow an upward trajectory, surpassing the target for this year. Work continues to support and promote education through the medium of Welsh in Bridgend, with a variety of groups, projects and initiatives in place to increase opportunities for children to use the Welsh language.

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS157 CP WBO4.3	Percentage of learners studying for assessed qualifications through the medium of Welsh at the end of Key Stage 4. (EEYYP) Higher Preferred	6.89%	6.62%	7.16%	7.23%	↑	Annual Indicator Target Setting: To see an increase in learners studying through the medium of Welsh as per Welsh in Education Strategic Plans (Wales) Regulations 2019. Performance: The percentage of learners studying for assessed qualifications through the medium of Welsh at the end of Key Stage 4 has increased from the previous year and surpassed the 2024-2025 target. This indicates a higher proportion of children studying at our Welsh-medium secondary school. Work continues to support and promote education through the medium of Welsh in Bridgend, with a variety of groups, projects and initiatives in place to increase opportunities for children to use the Welsh language.
DEFS158 CP WBO4.3	Number of learners studying for Welsh as a second language at AS Level and A Level. (EEYYP) Higher Preferred	New 23.24	29	20	17	↓	Annual Indicator Target Setting: School budget cuts may impact schools' ability to run courses in person. A hybrid model has been offered to schools but not all students are comfortable with virtual learning environments. Performance: The number of learners studying for Welsh as a second language at AS and A level has reduced this year compared to last year. School budget cuts may impact schools' ability to run courses in person going forward. A hybrid model has been offered to schools but not all students are comfortable with virtual learning environments.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.3.1	Deliver the actions in the Welsh in Education Strategic Plan (WESP) (EEYYP)	GREEN (Excellent)	Quarter 4: Cymraeg i Blant is now holding sessions in the Gilgal Baptist Church, Porthcawl to support the growth in Welsh-medium education in readiness for the childcare hub and seedling school. A series of termly groups such as baby massage, baby yoga and Welsh Rhymetime sessions are now held in Maesteg, Y Sarn, Bridgend Town and Pyle. A new online booking system is in place so that new parents can enrol. A total of 152 groups were held across Bridgend this year, and 1460 parents attended. We are exploring the possibility of funding an additional Cymraeg i Bawb Officer due to increased demand. From March 2025, the late immersion provision will be located at Ysgol y Ferch o'r Sger for pupils up to Year 7. This will be initially staffed by agency staff. A provision is also being run at Ysgol Gymraeg Bro Ogwr for a Year 2 pupil. Another agency teacher will offer Hwb leithyddol to primary schools. In the schools where the late immersion is situated, 'language booster sessions' are offered to pupils as part of the provision whilst capacity allows. 100% of schools are now engaged with Siarter Iaith and Siarter Iaith Cymraeg Campus. A communications plan is in place to celebrate schools that have received awards. A press release has been published to celebrate the Siarter Iaith awards ceremony that was held in March 2025.	

WBO4.4: Modernising our school buildings

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.4.1	Enlarge Ysgol Gymraeg Bro Ogwr to a 2.5 form-entry new-build school. (EEYYP)	RED (Unsatisfactory)	Quarter 4: The school design has been progressed. A revised Outline Business Case detailing a revised cost estimate was submitted to Welsh Government, and subsequently, the Cabinet Secretary for Education gave approval to proceed to Full Business Case stage. In November 2024, Council approved the additional capital funding required for the scheme. An active travel engagement session has been held with the School Council. Asbri Planning has been appointed to lead on the pre-application consultation (PAC), ahead of submitting a planning application. Information to inform this process is being generated. A decision regarding 'on site' active travel provision and other highway matters is required ahead of commencing the PAC process. Ecological issues continue to affect the Ffordd Cadfan site, and the seasonal mitigation. This has impacted on the timing of a site investigation.	We will obtain confirmation of the extent of 'on site' active travel requirements and other highway requirements (for example, traffic orders). The Major Projects Team and Asbri Planning will complete the required information to undertake the PAC process. In June 2025, we will seek Cabinet approval to modify the implementation date for the school to September 2027. There are plans to remove vegetation from the site and fence, trap and clear slow worms during the summer period. We can then commence additional site investigation work.
WBO4.4.2	Provide a new-build for Mynydd Cynffig Primary School (EEYYP)	AMBER (Adequate)	Quarter 4: The detailed design and contract preliminaries have been progressed. A revised Outline Business Case and a cost estimate was submitted to Welsh Government, and the Cabinet Secretary for Education gave approval to proceed to Full Business Case stage. In November 2024, Council approved the additional capital funding required for the scheme. An active travel engagement session has been held with the School Council and elected members which informed priorities for investment. Additional site investigation work has concluded. The planning application was submitted in November 2024. Challenges have been faced due to delayed planning decision and certain aspects of the scheme have impacted on the programme for delivery (for example, land issues). A revised programme has been developed and will be the	The Major Projects Team will complete the detailed design and The Bill of Quantities will be completed. The heads of terms will be agreed for the temporary relocation of the pigeon lofts. Planning approval will be received for the scheme. In May 2025, Cabinet approval will be sought to modify the implementation date for the school to September 2027 and to tender the scheme. Ecological works will commence.

Code	Commitment	Status	Progress this period	Next Steps
			basis for a Cabinet decision in May 2025. Ecology issues are also affecting the site and some works will need to be undertaken in summer 2025 ahead of the appointment of the main contractor.	
WBO4.4.3	Enlarge Ysgol Ferch o'r Sgêr to a two form-entry new-build school. (EEYYP)	YELLOW (Good)	Quarter 4: Cabinet approval has been received to transition the scheme from Mutual Investment Model (MIM) funding to capital. Council approved the funding required to deliver the scheme, and this is now detailed in the capital programme. Cabinet approval was received to modify the opening date of the school to September 2026, and stakeholders were advised accordingly. The planning application has been submitted. Cabinet gave approval to tender the scheme, and the tender process commenced in February 2025. Corporate Landlord Department is working with Valleys to Coast to put in place the land options agreement in respect of the Marlas site (required for the replacement English-medium school, as that project is intrinsically linked to the delivery of Ysgol y Ferch o'r Sgêr). The programme was negatively impacted due to the length of time taken for Welsh Government to undertake their review of the MIM programme and cost plan.	The Full Business Case will be submitted to Welsh Government in May 2025. The tender process will close on 7 May 2025. The tender evaluation process will then be undertaken, and the outcome will be reported to Cabinet in June 2025, and approval will be sought to award a contract to the successful bidder. Planning consent will be received and the options agreement in respect of the Marlas site will be actioned.
WBO4.4.4	Provide a new two-form entry English-medium school to replace the existing Afon Y Felin and Cornel Primary Schools. (EEYYP)	YELLOW (Good)	Quarter 4: Cabinet approval has been received to transition the scheme from MIM funding to capital. Council approved the funding, and this is now detailed in the capital programme. Cabinet approval was received to modify the opening date of the school to September 2026, and stakeholders were advised accordingly. The planning application has been submitted, and following Cabinet approval the tender process commenced in February 2025. Corporate Landlord is working with Valleys to Coast to put in place the land options agreement in respect of the Marlas site (required for the replacement English-medium school, as that project is intrinsically linked to the delivery of Ysgol y Ferch o'r Sgêr).	The tender process will close on 7 May 2025. The tender evaluation process will be undertaken, and the outcome will be reported to Cabinet in June 2025, and approval will be sought to award a contract to the successful bidder. The Full Business Case will be submitted to Welsh Government in May 2025. Planning consent will be received and the options agreement in respect of the Marlas site will be actioned.
WBO4.4.5	Relocate Heronsbridge School to a new-build 300-place school (EEYYP)	YELLOW (Good)	Quarter 4: A revised Outline Business Case and a cost estimate was submitted to Welsh Government, and the Cabinet Secretary for Education gave approval to proceed to Full Business Case stage. In November 2024, Council approved the additional capital funding required for the scheme. In January 2025, Cabinet approval was received to tender the scheme (that is, to appoint a design and build contractor). The tender and contract documentation were finalised and the tender process commenced in March and will close on 14 May 2025. Delayed decision making in previous years has impacted on the programme for delivering the school. A modification to the school opening date is required.	Once the tender process concludes, the tender evaluation process will be undertaken, and the outcome will be reported to Cabinet in June 2025, and approval will be sought to award a contract to the successful bidder (that is, under a professional services contract in the first instance, to complete the design (RIBA Stage 4)). Once appointed, the contractor will review the programme for delivery and Cabinet approval will be sought to modify the implementation date.

WBO4.5: Attract and retain young people into BCBC employment

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED56 CP WBO4.5	Percentage of those concluding apprenticeships and obtaining a non-apprentice role (CEX) Higher Preferred	70.8%	90%	90%	55.56%	⬇️	Annual Indicator Target Setting: Continue to improve the number of apprentices gaining employment Performance: Of the 18 apprenticeships that were completed during 2024-25, 10 were successful in obtaining roles within the council, others went on to employed positions elsewhere having gained experience and training with the council.
DOPS36 CP WBO4.5	Number of apprentices employed across the organisation (CEX) Higher Preferred	36	46	20	22	⬇️	Annual Indicator Target Setting: Target decreased due to recruitment freeze. Performance: Target met, however, there has been a reduction in the number of apprentices appointed over the course of the year due to budget constraints.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.5.1	Work with local schools to promote the Council as an	YELLOW (Good)	Quarter 4: During the year Learning & Development (L&D) have engaged with schools, via the termly Directors Reports and have attended options and careers events at various locations to promote the apprenticeship offer including specific roles, e.g. business admin, IT, and multi-trade apprentices. Workshops have been delivered on applying for apprenticeship jobs and interview skills. L&D	

employer and promote apprenticeships (CEX)		have also visited jobs fayres and options events at some comprehensive schools as well as attended "Dragon's Den" events and mock interviews.	
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WBO4.6: Offering youth services and school holiday programmes for our young people

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
SSWB66 CP WBO4.6	Participation in targeted activities for people with additional or diverse needs (SSWB) Higher Preferred	New 23-24	357	400	540	↑	Quarterly Indicator Target Setting: Increased external funding available Performance: Actual figure is in excess of the target set based on establishing a baseline over the last 12 months.
SSWB67 CP WBO4.6	Participation in the national free swimming initiative for 16 and under. (SSWB) Higher Preferred	16,691	19,659	16,000	23,208	↑	Annual Indicator Target Setting: Reduced/more targeted programme due to increasing costs. Performance: The programme supports free access to swimming pool based activities for those aged 16 and under during school holiday periods and weekends. A review of this funding and how it is used is taking place which will impact on the coming years actual figures.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.6.1	Make our leisure and culture programmes more accessible to children with additional needs (SSWB)	BLUE (Completed)	Quarter 4: The Step Up and Step Down programme continues to support families who fall outside statutory services. There were 20 new active family referrals (63 individuals) with family referrals over the 12 months period (5 North of Bridgend, 5 Central Bridgend, 5 within the West). 18 household referrals have been supported to access community opportunities. The Healthy Living partnership has supported 119 vulnerable households to learn to swim based on referrals from children and families services. The halo health and wellbeing membership card in partnership with BCBC is currently supporting 173 foster children, 76 carer leavers, 5 individuals in a residential setting, 79 youth justice participants and 63 young adults within youth development. There are 142 children and young adults with a disability and their household being supported also. The Healthy Living Partnership has supported 119 vulnerable individuals to learn to swim based on referrals from children and families services as well as support 209 of their households to access halo membership.	To work closely with early help and children's disability transition team to ensure there is no duplication and a clear menu of support at the front door. Embed fully into Local community coordinators' role.
WBO4.6.2	Enlarge the Food and Fun Programme for summer 2024 (EEYYP)	BLUE (Completed)	Quarter 4: Six Food and Fun programmes operated in the summer holidays 2024. The six programmes included a wide geographical spread across the county borough and include a Welsh-medium school. In total, 213 children benefitted from attending. An evaluation of this year's programme is underway in order to report back to the Welsh Local Government Association (WLGA). Promotion of the scheme for next year will continue into the spring term. Job descriptions for the roles are being re-written to ascertain whether the enhanced expectations for the programme to be school-run impact on the pay grades for the posts. An options paper is in the process of being prepared to consider how barriers to schools' participation could be reduced or removed.	

WBO4.7: Work with people to design and develop services

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.7.1	Work co-productively with people to develop their own solutions (SSWB)	BLUE (Completed)	Quarter 4: The Bridgend Inclusive Network Group (BING) network has worked with and supported 20 organisations within Bridgend County Borough, creating over 100 community opportunities, and assisting over 211 individuals living with disabilities in Bridgend. Examples of this approach is the work of the Impetus dance group which is an inclusive dance group who are supported by 13 volunteers (3 out of the 4 volunteers have a disability and all volunteers are carers in their own right). The group supports 184 participants. Our partnership with BAVO has supported 272 Third sector organisations, supported to develop or deliver prevention opportunities' focusing on "what matters". 137 individuals attending network meetings. 564 people have increased knowledge of the services available to them (locally). 587 people report increased social connections.	Continue to engage with both people with lived experience and stakeholders to shape services and improve effectiveness.

WBO4.9: Being the best parents we can to our care experienced children

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CH/052 CP WBO4.9	Percentage of care leavers who have experienced Homelessness during the year (SSWB) Lower Preferred	10.27%	7.17%	10%	9.96%		<p>Quarterly Indicator</p> <p>Target Setting: To maintain performance.</p> <p>Performance: There continues to be significant challenges within Housing currently which is impacting upon provision of accommodation and access in a planned way to safe and suitable accommodation. There is close joint working with Housing to look at the options to improve performance in this area.</p>
SSWB48a CP WBO4.9	Percentage of care leavers who have completed at least 3 consecutive months of employment, education or training: a) in the 12 months since leaving care Higher Preferred	54.17%	68.97%	70%	59.38%		<p>Quarterly Indicator</p> <p>Target Setting: To continue to improve performance.</p> <p>Performance: Inspire continue to have involvement in the development of Pathway Reviews for young people approaching adulthood. The Web Resource is now up and running and is available for young people between 15 and 26. Next steps will involve pushing forward on plans with HR to support young people with applications. A multi-agency task and finish group will be developed to improve percentage of care leavers completing at least three consecutive months of education, employment or training.</p>
SSWB48b CP WBO4.9	b) in the 13-24 months since leaving care. (SSWB) Higher Preferred	62.07%	57.69%	65%	82.14%		<p>Quarterly Indicator</p> <p>Target Setting: To continue to improve performance</p> <p>Performance: Exceeding target.</p>

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.9.1	Give care experienced children love, care, safe homes to live in and opportunities to try new activities, gain new skills and fulfil their potential working across the Council and partners (SSWB)	GREEN (Excellent)	Quarter 4: The corporate parenting board continues to provide opportunities to strengthen partnership work. An example of this would be the support offered via the fire service and connecting them with the teams to provide support to families. New measures have been agreed with the performance team to support in identifying how we are working with children who are care experienced and how we can hear their voice as part of service development (most significant change). The Youth forum continues to meet regularly with the support from Tros Gynnal Plant Cymru. The Corporate Parenting Officer brings the themes of these to Corporate Parenting for the board to consider within that forum and next steps. We are currently supporting 178 care experienced individuals and their households to access health and wellbeing opportunities. We are supporting care experienced children to access training and development linked to leadership and volunteering with some sessions already held between services specifically 16+ team and Youth Support Services.	<ul style="list-style-type: none"> *Review effectiveness of the new performance measures. *Continue to develop practice and relationships as part of the corporate parenting board process. *Agree next steps for most significant change model development across teams.
WBO4.9.2	Work with partners to deliver improved outcomes for care experienced children through the delivery of actions in the corporate parenting action plan and informed by the views of our children and young people (SSWB)	YELLOW (Good)	Quarter 4: A performance framework has been developed, and agencies are beginning to provide data on their support for care-experienced children. However, there is more to do to ensure all partners present their information in a timely way. The action plan is monitored by the Corporate Parenting board which is ongoing. The Corporate Parenting Officer is collating action plans for other partner agencies and as part of this work will ensure the voice of the child is included in the plans.	Complete the multi-agency framework so all data is presented and analysed to improve outcomes for children and families.
WBO4.9.3	Support the implementation of the Corporate Parenting Strategy in schools. (EFEYYP)	GREEN (Excellent)	Quarter 4: The draft plan for corporate parenting was shared with the Corporate Parenting Board at the last meeting and has now been updated in line with directorate priorities. A report will be shared with Cabinet Committee Corporate Parenting on 7 May 2025. The team are carrying out scheduled 'drop in' sessions with the Care Experienced Children Team to support the educational provision of children looked after. There are current challenges with the reporting abilities on our management information system for children looked after. Work is ongoing to remedy these issues and ensure accurate and appropriate data capture. A quality assurance work is planned start on the Personal Education Plans in collaboration with Children and Family Services	

WBO5: A County Borough that is responding to the climate and nature emergency

WBO5.1: Moving towards net zero carbon, and improving our energy efficiency

Performance Indicators

Page 101	PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
	CED57 CP WBO5.1	Levels of nitrogen dioxide (NO2) pollution in the air (micrograms per m ³) (CEX SRS) Lower Preferred	47	43.80	40	43.60	↑	Annual Indicator Target Setting: This target is the legal air quality objective for NO ₂ . Modelling undertaken for the Air Quality Action Plan, suggests, this will be achieved by 2026. Performance: Annual actual reflects annual average for 2024 in the designated Park Street Air Quality Management Area (AQMA). The results for monitoring undertaken at sites OBC-110 and OBC-140 located on Park Street residential facades, exceeds the annual average air quality objective set at (40µg/m ³) for NO ₂ . OBC-110 recorded annual average figures of 43.6µg/m ³ and OBC-140 recorded an annual average figure of 41.6µg/m ³ . This represents a decrease in NO ₂ concentrations at site OBC-110 when compared to 2023. In 2024, monitoring site OBC-123 was compliant with the NO ₂ annual objective for the first time since the commencement of monitoring at this location, with a result of 38.4µg/m ³ . It should be noted that the value of 40.8µg/m ³ reported in 2023-24 has been revised by the service to 43.80 µg/m ³ .
	DCO20.01 CP WBO5.1	Annual Gas Consumption across the Authority – kWh. (COMM) Lower Preferred	24,362,648 kWh	21,966,783 kWh	20,868,443 kWh	21,122,938 kWh	↑	Annual Indicator Target Setting: To see reduction in energy consumption levels and progress our corporate energy efficiency Performance: Although the target has not been achieved, the annual outturn figure has seen a reduction in energy consumption levels of 3.84% compared to 23-24.
	DCO20.02 CP WBO5.1	Annual Electricity Consumption across the Authority – kWh. (COMM) Lower Preferred	15,927,161 kWh	15,210,536 kWh	14,450,009 kWh	15,019,064 kWh	↑	Annual Indicator Target Setting: To see reduction in energy consumption levels and progress our corporate energy efficiency Performance: Although the overall target has not been met, there has been a 1.26% reduction in energy consumption levels compared to 23-24. This PI is also showing a downward trend year on year.
	DCO20.03 CP WBO5.1	Annual CO2 related to gas consumption across the Authority – tonnes. (COMM) Lower Preferred	4,458 tonnes	4,018 tonnes	3,817 tonnes	3,866 tonnes	↑	Annual Indicator Target Setting: To see reduction in energy consumption and relation emissions and progress our corporate energy efficiency Performance: Actual outturn figure is slightly off target, however, there has been a reduction in energy consumption and relation emissions compared to 23-24.
	DCO20.04 CP WBO5.1	Annual CO2 related to electricity consumption across the Authority – tonnes. (COMM) Lower Preferred	3,080 tonnes	3,150 tonnes	2,925 tonnes	3,110 tonnes	↑	Annual Indicator Target Setting: To see reduction in energy consumption and relation emissions and progress our corporate energy efficiency Performance: Actual outturn figure is slightly above target, however, there has been a reduction in energy consumption and relation emissions compared to 23-24.
	DCO23.05 CP WBO5.1	Reduction in emissions (across our buildings, fleet & equipment, streetlighting, business travel, commuting, homeworking, waste, procured goods and services) (COMM) Higher Preferred	N/A	4.3%	5%	1%	↓	Annual Indicator Target Setting: To see a reduction in emissions and progress our corporate energy efficiency Performance: PROVISIONAL DATA- the final analysis will not be complete until September 2025. Our emissions fall into two categories: those we can control and change more easily, and those that are in supply chains and subject to the decisions of others, i.e. our suppliers. The supply chain related emissions equate to 80% of our overall emissions, and therefore the impact of the reduction in emissions we can control is less significant overall. Focusing on reducing our emissions through procurement and support for the development of the circular economy is a key factor in achieving the overall reductions that are required.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
Page 102	WBO5.1.1 Keep reducing our carbon footprint by changing our Council vehicles to electric and further energy efficiency schemes (COMM)	GREEN (Excellent)	Quarter 4: Draft strategy delivered in March 2025, feedback from officers and Scrutiny Committee has been provided to Carbon Trust and the revised strategy anticipated to be complete in May 2025. It will then be subject to a 12 week public consultation before formal adoption.	
	WBO5.1.2 Continue work to finalise and implement our Air Quality Action Plan, and start work on the measures to improve air quality along Park Street (CEX)	GREEN (Excellent)	Quarter 4: The final Air Quality Action Plan (AQAP) was approved by cabinet in April 2024, with the main action to continue to monitor air quality on Park Street. Cabinet approved the decision not to implement the final measure of the 'do something' scheme – Measure 18 Deny all access onto St Leonards Road, owing to the timescales for the required Traffic Regulation Order consultation, costs and consideration that natural compliance is not likely to be accelerated as a result. This measure will be retained and will be reconsidered dependent on ongoing NO ₂ monitoring results in the Park Street Air Quality Management Area (AQMA). The Annual Progress Report detailing 2023 monitoring results was prepared and reported to Cabinet in October 2024, where it was noted that in 2023, monitoring undertaken at the designated sites along Park Street demonstrated a trend of reducing NO ₂ levels, but still exceed the annual average air quality objective set at (40µg/m ³). Current monitoring indicates the sites exceeding annual air quality objectives are isolated to one area of Park Street. This area of Park Street experiences higher concentrations of pollutants due to the proximity of houses to a heavily trafficked primary route with congestion issues.	
	WBO5.1.3 Ensure all new build schools meet the requirement for net zero carbon (EEYYP)	AMBER (Adequate)	Quarter 4: Each of the five schemes are in stages of design development. However, due to a variety of issues (including, ecology issues, delays in planning approval and funding), the timescales for the five schemes have been impacted. This target will only be achieved following construction of the schools (see further details in the individual school commitments WBO4.4.1 - WBO 4.4.5)	See next steps for individual school commitments WBO4.4.1 - WBO 4.4.5).
	WBO5.1.4 Invest in energy efficiency improvements to Council buildings including schools (COMM)	AMBER (Adequate)	Quarter 4: The Programme board allocated funding to the LED (Light Emitting Diode) replacement programme and solar PV (technology that converts sunlight directly into electricity using semiconductor materials) roll out over key opportunity sites, including schools. 17 buildings have had insulation levels improved and a further 5 have had new LED lighting to replace less efficient fittings. 220.8kWp of PV was installed in 2024-25 (including Resource Centre, Bryn y Cae, Bryncethin). and work is underway to install approximately 255kWp of PV on a further 9 sites in 2025-26. 2 buildings have had gas heating systems replaced with more efficient heat pumps. Energy Manager has an on-going programme of work in relation to monitoring and responding to key opportunities. Despite no progress being made on launch of a new RE:FIT scheme at a UK level work has progressed to develop the potential scope of assets that may be included in such a programme of work	Commence the REFIT2 scheme in Spring 2025 in line with the MTFS.

WBO5.2: Protecting our landscapes and open spaces and planting more trees

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DCO23.06 CP WBO5.2	Number of blue flag beaches (COMM) Higher Preferred	New 23-24	3	3	3	↔	Annual Indicator Target Setting: Target set to maintain current high standards Performance: Blue Flag beaches have been maintained along with the Blue Flag Marina.
DCO23.07 CP WBO5.2	Number of green flag parks and green spaces (COMM) Higher Preferred	New 23-24	2	2	2	↔	Annual Indicator Target Setting: Target set to maintain current high standards Performance: All our green flag parks maintained their status.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO5.2.1	Deliver projects such as woodland protection, develop and protect our natural environment in partnership with our communities as part of	GREEN (Excellent)	Quarter 4: The Local Nature Partnership (LNP) has continued to be supported by the Climate Change Response Team, and we are working to broaden the reach of the LNP through the development of engagement graphic templates, a communication plan (with a focus on engaging farmers/landowners and those not professionally involved with nature), and a dedicated LNP webpage on Visit Bridgend. The team are also developing projects with partners and community groups to include in our Local Places for Nature 25-27 application. All LPfN 24-25 funding has been spent. LPfN funding has supported a number of groups with equipment for surveying, nest boxes, tree planting etc. Biodiversity schemes at Coychurch Playing Fields, Tondu Post Office and Caerau Mens Shed have been completed. Projects are in	

	our Bridgend Biodiversity Plan (COMM)		development for future LPfN funding. We have not received notification of our future allocation but as yet the application has not been released. Two members of staff have had their contracts extended to cover the next two years. Guidance on the Section 6 (Biodiversity) Duty has been added to the intranet, alongside links to the Bridgend Biodiversity Duty Plan and monitoring templates. A section has also been added to the Corporate Induction e-learning module on the Biodiversity Duty, what it is and what it means for BCBC employees.							
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WBO5.3: Improve the quality of the public realm and built environment through good placemaking principles

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
PAM/018 CP WBO5.3	Percentage of all planning applications determined within 8 weeks or within an agreed period. (COMM) Higher Preferred	64%	68%	80%	67%		<p>Quarterly Indicator Target Setting: Target set in line with national target for good performance Performance: Officers continue to struggle with large workloads, budget reductions and balancing large scale strategic housing and business proposals with a huge caseload of minor and householder applications. The time needed to deal with the larger applications has drawn resource away from smaller schemes with consequent drop in performance. Nevertheless, the team remain committed to high quality outcomes even if it is at the expense of speed. By way of mitigation and in response to budget constraints, the service has introduced additional paid for services including planning performance agreements (PPAs) and pre-application 'plus'. This has brought in additional revenue and allowed the use of agency staff to backfill the roles taken up with large scale development.</p>
PAM/019 CP WBO5.3	Percentage of planning appeals dismissed. (COMM) Higher Preferred	64%	87%	80%	81%		<p>Annual Indicator Target Setting: Target set in line with national target for good performance Performance: Bridgend's planning decision are robust and based on sound evidence and the appeal dismissal rate remains high in comparison to other authorities. This is evidenced by the relatively low number of planning appeal received in relation to the level of decisions made. With a low level of appeals, performance data can be skewed by a small number of allowed appeals. It is too early to determine if there is a downward trend in the quality of decision making however, the team are under extreme pressure with large workloads and significant budgetary constraints and it is inevitable that overall performance will suffer as a result.</p>

WBO5.4: Reducing, reusing or recycling as much of our waste as possible

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DCO20.05 CP WBO5.4	Percentage of Street cleansing waste prepared for recycling. (COMM) Higher Preferred	40.47%	41.18%	40%	41.22%		<p>Annual Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: Performing above target and improving on 23-24's actual.</p>
PAM/010 CP WBO5.4	Percentage of highways land found to be of a high / acceptable standard of cleanliness. (COMM) Higher Preferred	98.05%	99.8%	99%	99.35%		<p>Quarterly Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: Performance remains around average for the year and only slightly above target for Q4. Possible wet weather conditions impacting Q4 with higher amounts of detritus. Unfortunately, staffing and resource issues have affected the overall performance of this PI.</p>
PAM/030 CP WBO5.4	Percentage of municipal waste prepared for reuse, recycled, or composted. (COMM) Higher Preferred	71.38%	72.78%	70%	70.93%		<p>Quarterly Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: Overall performance is above target but lower than expected due to issues with processing wood and green waste at the onward destination facility. Material remaining in storage cannot be included.</p>
PAM/030a) CP WBO5.4	Percentage of municipal waste: a) prepared for reuse Higher Preferred	0.68%	1.43%	1%	0.54%		<p>Quarterly Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: (REUSE) - In last year's figures materials from Highways Waterton were included. We are no</p>

Page 104	PAM/030b	b) recycled Higher Preferred	51.01%	50.42%	49%	50.59%		longer confident that this material is reused so weights have not been included in this PI for this quarter. This is the main impact on downward trend in performance. Wood waste remaining in storage and also less green waste collected in Qtr3 means that the overall recycling figure is below target. (RECYCLED) Performing above target. Q4 in particular is higher than any other quarter due to the wood remaining in storage being recycled.
	PAM/030c	c) composted. (COMM) Higher Preferred	19.69%	20.14%	20%	19.8%		(COMPOSTED) : Slightly below target due to issues with processing wood and green waste at the onward destination facility. Material remaining in storage cannot be included.
	PAM/043	Kilograms of residual waste generated per person. (COMM) Lower Preferred	120.20 kg	119.80 kg	125 kg	117.76 kg		Quarterly Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: The amount of waste not prepared for recycling continues to reduce year on year.

Commitments

Code	Commitment	Status	Progress this period					Next Steps
WBO5.4.1	Develop our Future Waste Services Model, and seek to improve our recycling rates further in line with Welsh Government targets. We will consult on the options with residents in 2024 (COMM)	AMBER (Adequate)	Quarter 4: Following the analysis of in-depth feasibility work on future waste model options, a decision was made by Cabinet in November 2024 to begin work to bring waste services in house. Following this, fortnightly meetings are being held of the Waste Transition Board Chaired by the Leader. Work stream leads within the authority are in place and are feeding into this process with project support agency on board and feeding into waste transition board.					Modelling work due to be completed by end of June 2025. Outcomes of modelling to be reported further in mid 2025/26

WBO5.5: Improving flood defences and schemes to reduce flooding of our homes and businesses

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period	
DCO23.08 CP WBO5.5	Percentage of statutory sustainable drainage systems (SuDS) applications processed within 7 weeks from receipt of appropriate scheme drawings. (COMM) Higher Preferred	New 23-24		100%	95%		Quarterly Indicator Target Setting: To maintain existing performance Performance: 100% achieved via holding regularly meetings with SUDs colleagues to manage workloads in this area and assess upcoming deadlines to ensure targets were met	

Commitments

Code	Commitment	Status	Progress this period					Next Steps
WBO5.5.1	Invest in and improve flood mitigation measures throughout our communities to reduce flood risk (COMM)	GREEN (Excellent)	Quarter 4: All schemes subject to funding within Welsh Government (WG) Small Scale Grant are now complete and funding from WG has been received. This includes Adare Street, Ogmore Vale and Dinam Street, Nantymoel to repair damaged culvert and mitigate flood risk. Funding has been applied for through the WG FCERM (Flood and Coastal Erosion Risk Management) Capital Pipeline funding (feasibility) for a catchment wide study of the Nant Cefn Glas in relation to the Bryntirion flooding event in September 2024. Funding requests were submitted in December 2024 and approved March 2025.					

WBO6: A County Borough where people feel valued, heard and part of their community

WBO6.1: Celebrating and supporting diversity and inclusion and tackling discrimination

Performance Indicators

Page 105	PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
	CORPB3 CP WBO6.1	Percentage of council staff completing Introduction to Equality and Diversity training (E-Learning or workbook). (ALL) Higher Preferred	12.07%	47.61%	100%	64.25%	↑	Quarterly Indicator Target Setting: All staff to complete mandatory training Performance: An improved position. Work will continue to engage with those employees that are yet to complete the e-learning. The Learning & Development website has also been updated so managers can check themselves if their staff have completed this training. The module is promoted to all new starters through the Corporate Induction Framework and reminders are issued throughout the year, via the Learning & Development bulletin, detailing the importance for staff to complete all mandatory e-learning modules.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO6.1.1	Implement the agreed action plan supporting Welsh Government on race equality and LGBTQ+ (CEX)	GREEN (Excellent)	Quarter 4: The commitments from these action plans have been incorporated into our Strategic Equality Plan 2024-2028 (SEP) which was approved in July 2024 and has now been published on our website. Work towards achieving these actions will continue over the next 4-year lifespan of the SEP. The SEP Action Plan was agreed by Cabinet Committee Equalities in November 2024 and an update on work carried out will be reported to Cabinet Committee Equalities in November 2025.	
WBO6.1.2	Establish new BCBC staff groups for people with protected characteristic (CEX)	BLUE (Completed)	Quarter 4: There are now three staff network groups established: Menopause, Disability and LGBTQ+. Staff meet for an hour every month during the working day. Terms of reference have been completed and shared with all staff members within the groups. Information on staff networks is promoted regularly via Bridgenders. Details and promotion of staff networks has also been added to the Staff communication and engagement pages of the intranet. A Welsh Language Forum for staff of all proficiency levels has been established. Attendance levels are growing monthly, and we are continuing to promote throughout the organisation to maximise take-up.	

WBO6.2: Improving the way we engage with local people, including young people, listening to their views and acting on them

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED58 CP WBO6.2	Percentage of consultation participants who answered positively: How effective do you think we have been in meeting our aim of being citizen-focused over the last 12 months? (CEX) Higher Preferred	46%	49.4%	50%	44.2%	↓	Annual Indicator Target Setting: To ensure that the actions of the Council do support the residents of the area Performance: This is below target and showing a downward trend compared to 23-24, however we are currently reviewing and analysing the results of the first Residents Survey carried out in autumn 2024, which will help us to improve the way we gather and use resident views.
CED59(a) CP WBO6.2	Level of engagement a) across consultations Higher Preferred	8,267	7,946	8,300	8,050	↑	Annual Indicator Target Setting: To ensure the Council is engaging well at all levels across the area Performance: The number of consultations in 24/25 was down on the previous years as some consultations were postponed to the following year e.g. Libraries and others were cancelled e.g. Meals at Home. This resulted in lower response rate overall.
CED59(b) CP WBO6.2	b) with corporate communications to residents, using the digital communications platform Higher Preferred	795,335	972,384	972,500	1,203,706	↑	Annual Indicator Target Setting: To ensure the Council is engaging well at all levels across the area Performance: The Communications Team have continued to publicise the Residents' Bulletin and develop the content resulting in greater numbers of subscribers and open rates.
CED59(c) CP WBO6.2	c) across all corporate social media accounts (CEX) Higher Preferred	1,230,698	1,715,802	1,715,900	1,488,712	↓	Annual Indicator Target Setting: To ensure the Council is engaging well at all levels across the area Performance: This figure includes engagement on Facebook, Instagram and Linked in. This figure is down on the previous year and is explained by a) the previous year contained some

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
Page 106							data relating to engagement on Twitter/X which is no longer available to us, and b) the level of engagement is not controllable by the team, lower levels of reaction could indicate people are less inclined to complain, increasing targets is therefore not necessarily a measure of performance

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO6.2.1	Review how we communicate and engage with residents, including children and young people to help us become more customer focused and responsive (CEX)	GREEN (Excellent)	Quarter 4: Easy-read and youth versions of all our consultations are currently available upon request, and plans are in place to produce easy read versions for all consultations. Key consultations are promoted to various youth network groups: Bridgend Youth Council, schools, Bridgend College. An easy-read version of Budget Consultation 2025 was available on the consultation webpage with specific question about customer focus and responsiveness. Improvements have been made to the online forms for planning consultations to streamline the consultation process. The Participation and Engagement Strategy has been implemented and published. Several engagement sessions were carried out in schools across the Borough to capture the views of learners and how the consultation would impact them and their families. Work is progressing on the production of an action plan to achieve the objectives published in the Participation and Engagement Strategy. The first National Residents Survey for Bridgend County Borough was carried out in Autumn 2024 and was promoted regularly throughout the period the survey was live. The survey was made available for people with additional learning needs and request has been made to Data Cymru who facilitate the survey, for the next survey to have an easy read option for young people. The results of the survey will now be analysed.	
WBO6.2.2	Provide new opportunities for the community to engage with us on our regeneration plans, holding workshops with key stakeholders including town councils, learners and community groups (COMM)	YELLOW (Good)	Quarter 4: Multiple engagement and consultation sessions have taken place during the year on all of our regeneration plans. Consultation exercises have taken a variety of forms including online and in person. Formal public engagement sessions have taken place on all strategies. Consultation reports produced in addition to specific stakeholder sessions with local relevant groups, Town Councils, schools and businesses. Consultation exercises completed during the year include the Porthcawl Town Centre Placemaking plan, the Regeneration Masterplan for Salt Lake and Sandy Bay and Amendments to Bridgend Town Centre Access.	

WBO6.3: Offering more information and advice online, and at local level, and making sure you can talk to us and hear from us in Welsh

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED5 CP WBO6.3	Percentage of first call resolutions (CEX) Higher Preferred	75.91%	69.17%	75.92%	72.67%	↑	Quarterly Indicator Target Setting: To increase the number of calls resolved at the first point of contact Performance: The first call resolution indicator shows the number of calls handled by the customer services team at the first point of contact without having to transfer the caller on. The number of calls relate to those services where Customer Services can support such as highways, blue badges, council tax and housing and will exclude services such as recycling and waste, housing benefits etc. There is no methodology to measure resolution times call once the calls are transferred to other service areas. The total number of calls handled in Customer Services were 72,664 with 52,806 being resolved at the first point of contact. There will always be situations where calls are more complex and will need to be transferred to the relevant service area. However, whilst recognising that there are limitations to the type of queries that can be dealt with by Customer Services, the team continue to review these calls with the relevant service areas to look at ways of upskilling staff to improve the number of calls successfully handled at the first point of contact.
CED51 CP WBO6.3	Number of online transactions using the digital platform (CEX) Higher Preferred	103,347	72,500	72,500	81,034	↑	Quarterly Indicator Target Setting: To increase online transactions by customers to promote channel shift Performance: The number of online transactions have increased this year with most customers choosing to access council services online. Further online services are continuing to be developed.

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED52 CP WBO6.3	Number of hits/views on the corporate website (CEX) Higher Preferred	1,398,559	3,415,000	3,415,000	3,267,538		Quarterly Indicator Target Setting: To provide a digital option for people wishing to contact and transact with the Council Performance: Overall the number of hits/views on the corporate website has dropped compared to 23-24. Website visits are out of our control and can fluctuate due to world and local news and events.
CED53 CP WBO6.3	Percentage of staff with Welsh language speaking skills (including schools) (CEX) Higher Preferred	25.5%	26.82%	28%	28.35%		Annual Indicator Target Setting: To improve the number of staff, including schools, with Welsh language speaking skills. Performance: Improved position and target achieved.
CORPB4 CP WBO6.3	Percentage of council staff completing Welsh Language Awareness E-Learning. (ALL) Higher Preferred	12.4%	47.61%	100%	63.12%		Quarterly Indicator Target Setting: All staff to complete mandatory training Performance: An improved position. Work will continue to engage with those employees that are yet to complete the e-learning. The Learning & Development website has also been updated so managers can check themselves if their staff have completed this training. The module is promoted to all new starters through the Corporate Induction Framework and reminders are issued throughout the year, via the Learning & Development bulletin, detailing the importance for staff to complete all mandatory e-learning modules.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO6.3.1	Continue to evaluate and review the communication options available to ensure information is available to all residents across the borough (CEX)	GREEN (Excellent)	Quarter 4: The widget to our digital communication has now been embedded into the MyAccount platform so residents are now able to subscribe to a variety of communication topics such as jobs, general weekly updates etc. easily. The widget for the engagement platform was removed following the issue with the Welsh language and is now in the process of being introduced to ensure residents are also able to see open consultations within their MyAccount easily to encourage engagement and participation. We are now looking at how we can also update our online services to embed these services to again improve communication and engagement with residents. All communication and consultations produced by the team are regularly monitored by the Welsh Language Manager to ensure adherence to the Welsh Language Standards.	

WBO6.4: Helping clubs and community groups take control of and improve their facilities and protect them for the future

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DCO16.8 CP WBO6.4	Number of council owned assets transferred to the community for running (CATs) across the County Borough (COMM) Higher Preferred	10	7	10	2		Annual Indicator Target Setting: To continue to deliver the CAT programme across the County Performance: The CAT Programme has encountered numerous challenges in the 2024-25, with the post having been temporarily covered for the majority of the year. A new CAT officer was appointed in January 2025 and has already made significant progress with multiple groups, with 3 new leases signed and awaiting completion (25-26 Q1), 23 awaiting preparations by Corporate Landlord/Legal, 7 awaiting planning outcomes and 13 awaiting club decisions. The number of "new" CATs will reduce as the assets are transferred, although there will be a significant number of transfers from short leases to longer-term leases, as is reflected in the new KPI for 2025-2026.
SSWB69 CP WBO6.4	Number of people supported to have their needs met in their communities by local community co-ordinators and community navigators (SSWB) Higher Preferred	New 23-24	395	450	566		Annual Indicator Target Setting: Increased staffing resource (3) enables some additional support. Performance: Although the numbers of Local Community Co-ordinators has been increased the current volume is low for whole county coverage and additional investment into these preventative roles would increase the community-based support available. There are limitations on the numbers that can be supported at any given time, particularly regarding those on the edge of care with higher complexities of need. Understanding where the children and families data will feed into going forward will impact on actual data in 2025/26.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO6.4.1	Invest in Community Asset Transfers and support clubs and Community Groups with equipment grants to improve and safeguard the facilities. (COMM)	RED (Unsatisfactory)	Quarter 4: Successful CATs completed in Coytrahen Community Centre and Evanstown Welfare Park Bowling Green (via tenancy at will). A report to allocate further funding of £500k to the CAT Capital Fund was approved by the Capital Programme Board in November 2024, confirming the authority's commitment to investing in CATs across the borough. A further £42,586.00 was approved via the CAT Capital Fund in Q4 2024-2025: *£17,608.20 to Maesteg Bowls Club for Green Improvements *£24,978.00 to Bridgend Athletics RFC for pitch drainage improvements.	See DCO16.8 for details of CATs scheduled to complete during Q1 2025-26

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WBO6.5: Becoming an age friendly council

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO6.5.1	To work towards becoming an accredited Age Friendly Council (SSWB)	YELLOW (Good)	Quarter 4: We continue to work closely with Cwm Taf Morgannwg (CTM) partners and Third sector organisations, including the CTM WISE project, working on streamlining health services and the social prescribing pathways, including National Exercise Referral Scheme and the 60+ Active Leisure Scheme. Support has been made to increase community resilience within dementia services. Over 10 voluntary organisations have been supported through grant applications for community projects active in dementia prevention. We celebrated older persons week with cultural and artistic opportunities. These activities including art workshops, cinema screenings and a silent disco run by our cultural trust Awen. Sustainability is now embedded in the partnerships.	Continue to be a part of the Welsh Government and Older Persons Commissioners Network to inform local planning and development.

WBO7: A County Borough where we support people to be healthy and happy

WBO7.1: Improving active travel routes and facilities so people can walk and cycle

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO7.1.1	Improve sustainable and active travel choices, including the Metrolink bus facility in Porthcawl, to increase connectivity and greener travel choices (COMM)	BLUE (Completed)	Quarter 4: The Metrolink bus facility was made fully operational in November 2024. The active travel improvements work is now also complete with drop kerb installations installed throughout the borough.	

WBO7.2: Offering attractive leisure and cultural activities

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period	Next Steps
SSWB70 CP WBO7.2	Number of visits by older adults to physical activity opportunities supported (SSWB) Higher Preferred	New 23-24	23,308	23,500	24,663	↑	Annual Indicator Target Setting: External funding secured. Performance: Currently establishing baseline in order to assess effectiveness of this service and what it includes. This will help set a benchmark for 2025-26.	

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO7.2.1	Redevelop Porthcawl Grand Pavilion to increase the use of the new facilities and extend social and leisure facilities, in partnership with Awen Cultural Trust (COMM)	YELLOW (Good)	Quarter 4: A tender process to award the contract for the construction work in relation to the Pavilion Redevelopment has been completed. Cabinet and Council approval to award the tender has been sought. Enabling works at the site have been completed to prepare the site for the main contract work. Unfortunately, this project will be completing during the financial year 2026-27.	

Page 109	WBO7.2.2 Develop an active leisure offer for older adults to improve physical and mental wellbeing (SSWB)	BLUE (Completed)	Quarter 4: The Feel Good for Life wellbeing programme has supported 600 attendances across the borough. Super-agers community wellbeing activities have supported 163 individuals including 2061 attendances across 126 opportunities. The National Exercise Referral Scheme (NERS) has supported 1331 new referrals in 24/25. In the last year 473 participants completed a 16 week course. There were 157 referrals for carer support with 35 participants starting the course and 26 participants completing the course. In relation to pulmonary rehabilitation 141 participants started and 117 completed the course.	Joining up all older adult's initiatives and expanding the Older Adult Network to ensure it is representative of people across Bridgend. Move to low-cost offer to ensure sustainability of the programme and ensure long term participation for the 60 plus, reducing the risk if funding is curtailed.
	WBO7.2.3 Maintain performance against Welsh public library standards (SSWB)	YELLOW (Good)	Quarter 4: Work has begun to progress a long-term strategy for libraries within Bridgend. Public engagement exercise has been developed and shared with scrutiny and will go live in Q1 2025/26. Library related usage is monitored on a quarterly basis as part of the cultural partnership and includes a diverse range of areas including events, borrowing and digital resources. There have been 73,068 attendances (supporting 33,727 junior issues and 3,704 ICT sessions).	The public engagement exercise will inform and support the co-design and shape the long-term library offer for Bridgend. We will continue to monitor performance through quarterly reviews. Further work with HALO to ensure both Garw and Ogmore Valley libraries are operating in line with Welsh public library standards
	WBO7.2.4 Develop a long-term Active Bridgend plan and leisure strategy (SSWB)	YELLOW (Good)	Quarter 4: External support has been commissioned from Knight Kavanagh and Page (KKP) to map current provision.	To shape consultation objectives/priorities identified within the first phase. Stakeholder meeting to take place in line with public engagement.

WBO7.3: Improving children's play facilities and opportunities

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DCO23.09 CP WBO7.3	Value of investment in play areas (COMM) Higher Preferred	New 23-24	£54,443	£1,600,000	£1,709,584	↑	Annual Indicator Target Setting: Target set in line with programme of works for the year Performance: The total amount of investment in Play areas in 24-25 has exceeded the target of £1,600,000. A total of 22 play areas were refurbished and handed over to the community.
DCO23.10 CP WBO7.3	Number of play areas that have been refurbished (COMM) Higher Preferred	New 23-24	0	22	22	↑	Annual Indicator Target Setting: Target set in line with programme of works for the year Performance: The target of 22 play areas to be refurbished in 24-25 has been achieved.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO7.3.1	Improve the quantity and quality of play opportunities. We will invest in children's play areas throughout the Borough and make sure inclusive play equipment is provided to allow opportunities for all (SSWB/COMM)	GREEN (Excellent)	(SSWB) Quarter 4: Collaboration and co-ordination among service teams supporting specific matters from A-I have been reviewed. Ludicology have supported focus groups to support a draft assessment and action plan with a focus on policy/implementation across all directorates. Informal engagement with underrepresented groups has taken place to understand diverse needs across Bridgend in relation to Play Sufficiency Assessment. 142 children and young adults and their households have been supported with free HALO Leisure membership to access health and wellbeing opportunities. (COMM) Quarter 4: Tenders prepared and invitations to tender prepared and procurement process undertaken. Snagging works completed on 22 playgrounds and handed over.	Play Sufficiency Action Planning Day to be held on the 15th May where a draft Play Sufficiency Assessment for 2025 which will be subject to further engagement. Ludicology to support the evidence required to support Play Sufficiency Assessment. We will continue to strengthen the community offer for young people and families living with disabilities or additional needs, listening to their voice and reflecting what matters to them Progress to tender assessment for tranche 5.

WBO7.4: Providing free school meals and expanding free childcare provision

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
DEFS160 CP WBO7.4	Number of two-year-olds accessing childcare through the Flying Start programme. (EEYYP) Higher Preferred	321	530	570	542		<p>Quarterly Indicator Target Setting: The target reflects the positive investment made in the Phase 2A and 2B expansions of the programme. Performance: The number of children enrolled in childcare settings through the Flying Start programme as of 31 March 2025 has shown an increase on last year. However, numbers remain below target with falling birth rates in Flying Start areas believed to be impacting the numbers. Phase three expansion will target new areas in 2025-26.</p>
DEFS162 CP WBO7.4	Percentage of non-maintained settings that are judged by Care Inspectorate Wales as at least 'good'. (EEYYP) Higher Preferred	New 23.24	76.5%	100%	83%		<p>Quarterly Indicator Target Setting: Target in line with Welsh Government expectations. Performance: Of the 19 settings currently registered to provide early education places, 18 have so far received joint inspections from Estyn and Care Inspectorate Wales, with 15 of these settings judged to be 'at least good'. This is an increase on Q3 and an overall improvement on the previous year (2023-24). Since 2022, 11 out of 12 inspections (92%) of inspections have resulted in outcomes that are 'at least good'. We are awaiting reinspection of setting that received less than good judgements dating back to 2019. We provide extensive support to settings to prepare for inspections including, thorough quality assurance processes, training and professional development opportunities, and designated officers for each setting to provide advice and guidance around self-evaluation and improvement planning.</p>
DEFS163 CP WBO7.4	Percentage of eligible learners offered a free school meal. (EEYYP) Higher Preferred	New 23.24	100%	100%	100%		<p>Quarterly Indicator Target Setting: Target in line with Welsh Government expectations Performance: Universal Primary Free School Meals (UPFSM) for Nursery, Reception and Year 1 to Year 5 was implemented prior to the end of the 2023-2024 school year. Year 6 pupils became eligible for UPFSM from September 2024. This completes the roll-out of UPFSM within Bridgend.</p>

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO7.4.1	Provide free school meals to all primary school learners by September 2024 (EEYYP)	BLUE (Completed)	Quarter 4: The Universal Primary Free School Meals (UPFSM) offer was implemented for Nursery, Reception and Year 1 to Year 5 prior to the end of the 2023-2024 school year. Year 6 pupils became eligible for UPFSM from September 2024. This completes the roll-out of UPFSM within Bridgend.	
WBO7.4.2	Work with childminders, nurseries and others to roll-out universal childcare for all two-year-olds (EEYYP)	BLUE (Completed)	Quarter 4: The service has achieved the targets set by Welsh Government for the latest phase of expansion (26 children) and five new providers have been recruited to support the ongoing delivery of the Flying Start childcare programme. A proposed delivery plan for the universal expansion of Flying Start childcare (Phase Three) has been drafted and submitted to Welsh Government in December 2024 and was approved in March 2025. We are committed to delivering this plan over the next three years. A total for 542 children were enrolled in childcare settings through the Flying Start programme as of March 2025, showing an increase on the previous year. However, we have seen fewer childcare places taken up in original Flying Start areas. We believe this to be due to falling birth rates in those areas.	

WBO7.5: Integrating our social care services with health services so people are supported seamlessly

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
SSWB75 CP WBO7.5	Number of people recorded as delayed on the national pathway of care. (SSWB) Lower Preferred	New 23-24	104	71	70		<p>Quarterly Indicator Target Setting: To continue to improve performance Performance: We have embedded the remodelling of support at home, taking the opportunity to use the 50-day challenge grant money to support the remodelling. We are working with the health board around the enhanced community care model. We have fully embedded the strengths-based practice model. This has led to an increase in the overall number of people receiving reablement, and therefore to a reduction in the overall domiciliary care hours provided, in line with the Discharge to Recover and Assess model. Figures do fluctuate based on demand and</p>

						presenting needs, however, the expansion of the short-term interventions and the ongoing work supporting flow through the system is seeking to improve this position.
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Commitments

Code	Commitment	Status	Progress this period				Next Steps
WBO7.5.1	Work even more closely with the NHS so all people receive the right health or care service at the right time (SSWB)	AMBER (Adequate)	Quarter 4: We have continued to work regionally in developing a Bridgend and Cwm Taf Morgannwg model, including developing a Section 33 agreement and work to evolve our current model. We have remodelled our reablement services to ensure more people have the opportunity to have their independence maximised. We have expanded the offer from the integrated community networks through the recruitment of primary mental health nurses within the network clusters.				Regional Section 33 agreement to be considered by Cabinet.

WBO7.6: Improving the supply of affordable housing

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CED60 CP WBO7.6	Number of additional affordable homes provided by Registered Social Landlords (RSLs) across the County Borough (CEX) Higher Preferred	110	64	110	77	↑	Annual Indicator Target Setting: Working with RSL's to utilise capital income streams, such as the Social Housing Grant (SHG) – to develop 500 units over a 5-year programme. Performance: Whilst 92 have been built/acquired, 77 have been provided i.e. ready for occupation. The remainder will count towards the additional affordable homes in 25-26. RSLs to achieve completions of schemes in line with milestones in the next financial year. There is a full development plan for the next 2 financial years. We have continued regular dialogue with RSL development teams to promote developments and fully utilise capital grants.
CED61 CP WBO7.6	Total number of empty properties returned to use with local authority intervention (CEX) Higher Preferred	81	70	5	36	↓	Annual Indicator Target Setting: The Empty Properties Group will work with property owners via the Empty Properties Strategy with a focus on the top 20 properties as identified. Performance: Target exceeded; however, target set for 24/25 was based on 23/24 annual value of 6 properties returned to use. Both the 22/23 and 23/24 values have been revised by Shared Regulatory Services during data validation of the 24/25 value and were substantially higher than previously reported. There have been less properties returned to use during 24/25 compared the previous year's data due to the priority to focus on the top 20 long-term empty properties that have the most detrimental impact on the community. See further details of activities in WBO7.6.3 below.

Commitments

Code	Commitment	Status	Progress this period				Next Steps
WBO7.6.1	Increase the number of affordable homes in Bridgend County Borough in partnership with Welsh Government and social landlords (CEX)	YELLOW (Good)	Quarter 4: Monthly meetings continue with the 6 Registered Social Landlords (RSLs) currently developing in the area to progress the capital build programme. This will identify priority areas for development, ensuring the needs of the council are met. Representation from BCBC Strategic Asset Management brings specialist insight and furthers opportunities. Working relationships with planning colleagues have been enhanced with consultation taking place at the early stage of site consideration. Quarterly strategic meetings take place with Chief Executive Officers of RSLs. Quarterly meetings take place with all RSL's and Welsh Government collectively to bring forward BCBC's development plan and ensure full utilisation of capital grants. The Welsh Government Leasing scheme has been adopted with a growing portfolio of accommodation already in use with further properties in the pipeline.				
WBO7.6.2	Get a better understanding of housing and support needs and work with social landlords to provide homes to suit those needs (CEX)	YELLOW (Good)	Quarter 4: A detailed support needs assessment was undertaken as part of the Housing Support Grant Strategy; this is reviewed when commissioning housing services. Housing need data is obtained from weekly and monthly statistics run from the housing register which informs us of the type of homes however development must also take into consideration the Local Housing Market Assessment. Monthly meetings take place with RSL development teams to discuss needs and development sites. Housing needs are addressed quarterly at the strategic Bridgend Housing Partnership meeting.				

Page 112	WBO7.6.3 Continue to target those long-term empty properties that have the most detrimental impact on the community, focusing on the Top 20. (CEX)	GREEN (Excellent)	Quarter 4: Over the last 12 months we have seen excellent progress with top 20 priority properties. 5 properties have been sold; 7 properties have been subject to renovation works; 2 have been placed up for sale and 2 have become occupied. Enforcement action has been taken against 4 of the properties (4 enforcement notices and 3 work in default). 5 properties have been subject to informal action whereas 2 properties have received no intervention in this financial year. Work also continues on properties outside the top 20 utilising the 5-stage escalation letter process and enforcement provisions. Following cabinet approval in Q3 to pursue a compulsory purchase order in relation to our worst residential empty property, work is progressing well and we will be seeking final approval from Cabinet shortly. Work is continuing in relation to the enforced sale of a long-term empty property. Following Cabinet approval to accept the Welsh Government's Empty Property Enforcement Fund in Q3, we are in receipt of two loan agreements for sealing. This funding will be used to complete the compulsory purchase order and enforced sale procedure. The Empty Property Loan Scheme is live and is generating interest. Two loan applications have been approved and we are in receipt of a further application.	
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Ways of Working

Performance Indicators

PI Ref & Type	PI Description and Preferred Outcome	Year End 22-23	Year End 23-24	Target 24-25	Year End 24-25 & RYAG	Direction vs year end 23-24	Performance this period
CHR002 (PAM/001) WOW	Number of working days/shifts per full-time equivalent (FTE) local authority employee lost due to sickness absence (ALL) Lower Preferred	13.20 days	12.37 days	No target	13.76 days	⬇	Quarterly Indicator Target Setting: To reduce sickness levels across the organisation Performance: Overall absence levels have increased, on-going work with HR&OD to support directorates. The wellbeing of the workforce is paramount and its vital we continue to support employees.
CORPB5 WOW	Percentage of all staff that have completed a Personal Review/Appraisal (excluding school staff) (ALL) Higher Preferred	58.05%	60.89%	80%	68.42%	⬆	Annual Indicator Target Setting: Target set to ensure all eligible staff have an annual review Performance: Completion rates have improved during 2024-25. The appraisal window for 2025-26 has already started and managers have been requested to complete their employee appraisals during Q1/Q2, with the exception of those that are on probation/maternity/sick.
DCO16.9 WOW	Realisation of capital receipts targets. (COMM) Higher Preferred	£3,710,000	£0	No target	£1,850,000	Trend not applicable	Quarterly Indicator Target Setting: The corporate property disposal strategy is currently in development for Spring 2025 Performance: Sale of Ravens Court completed in March 25 bringing total sales for the year ahead of target.
DCO19.02 WOW	Percentage of full statutory compliance across BCBC operational buildings (COMM) Higher Preferred	78.6%	84.9%	100%	78.2%	⬇	Quarterly Indicator Target Setting: To ensure full statutory compliance Performance: Overall safety critical compliance continues to rise with a positive upwards only trajectory. Several new contracts have been awarded and following mobilisation will have a further positive impact on overall compliance figures. Target for compliance will always remain at 100% but the trend towards achieving this is positive. The addition of a compliance team apprentice has assisted significantly in the positive work.
DCO23.14 WOW	Percentage of statutory compliance across BCBC operational buildings "Big 5". (COMM) Higher Preferred	New 23-24	93.5%	100%	95.2%	⬆	Quarterly Indicator Target Setting: To ensure full statutory compliance Performance: BIG-5 Compliance has shown a continued upwards trend over the year remaining at above 95% for the last two quarters. A number of key servicing contracts will be tendered shortly where further improvements to the overall figures are anticipated. Our ability to closely manage service contractors and an enhanced programme of work from the DLO will seek to maintain levels above 95% moving forward.
DOPS34 (a) WOW OTH1	Percentage availability of: a) voice and data network Higher Preferred	100%	100%	99.99%	100%	↔	Quarterly Indicator Target Setting: Target set to maintain good performance Performance: Target achieved

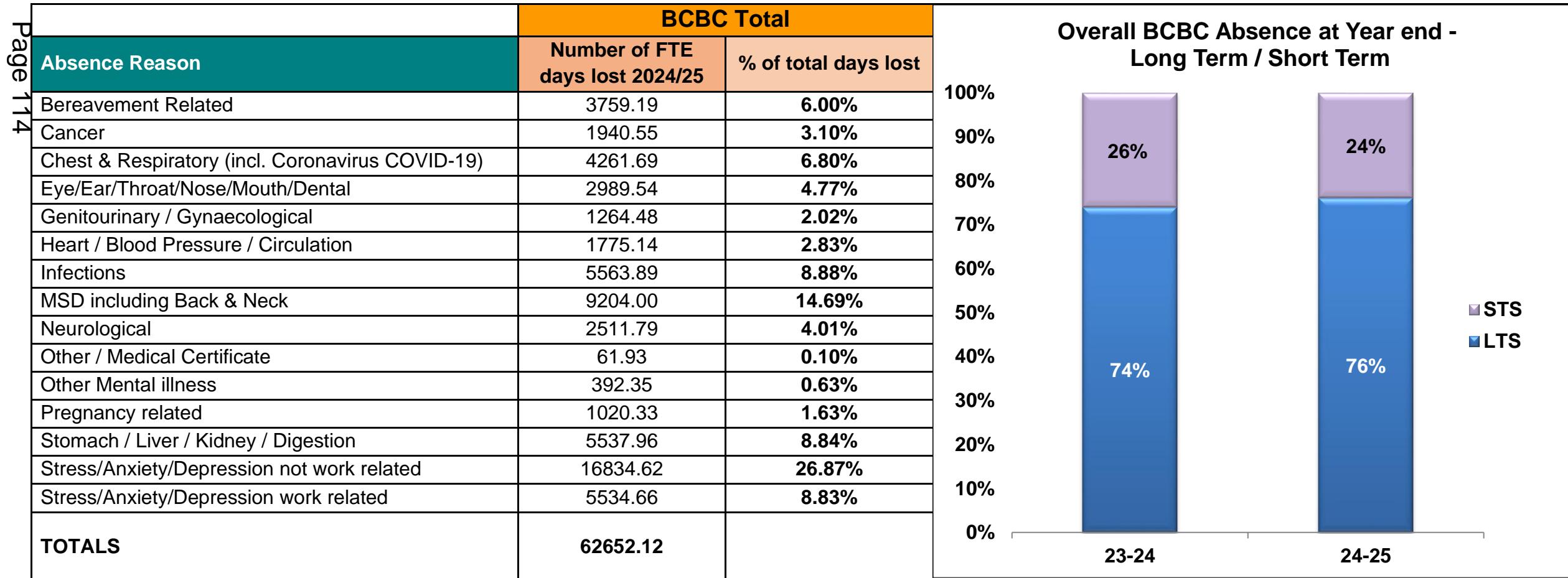
Page 113	DOPS34 (b) WOW	b) storage area network (core computing) Higher Preferred	100%	100%	99.99%	100%	↔	
	DOPS34 (c) WOW	c) core applications (as defined in the ICT Strategy), central printers and multi-functional devices and network connected devices (CEX). Higher Preferred	99.99%	99.96%	99.9%	99.99%	↑	

PI Ref & Type	PI Description	Annual target 24-25 £'000	Performance at Year end			Performance this period					
			Achieved by year end		Variance year end						
			£'000	%	£'000	%					
DRE6.1.1 WOW	Percentage budget reductions achieved (Overall BCBC budget) Higher Preferred	£13,045	11,476	88%	£1,569	12%	<p>Target Setting: To achieve all reductions outlined in the MTFS</p> <p>Performance: The year end position is that of the 2024-25 savings target of £13.045 million, £11.476 million has been achieved (88%) The most significant reduction proposals not achieved in full are:</p> <ul style="list-style-type: none"> EDFS9 – Cessation of Adult Community Learning provision (£149,000). The shortfall is due to the timing of the required restructure with the consultation process finalised during quarter 3. Savings will be achieved in full from 2025-26. EDFS19 – Communications and Relationships Team (£142,000). Saving not met in 2024-25 due to the overall increase in the number of pupils needing the service. Consultation is due to start soon with the outcome of the consultation determining next steps. Shortfalls against this savings target will be met through one off efficiencies in 2025-26 to deliver a balanced budget position. SCH1 – Efficiency saving against School Delegated Budgets – 3% in 2024-25 (£3.441 million). Saving is referenced as having been achieved due to the overall reduction in Individual Schools Budget (ISB), however the reduced budgets have resulted in an overall deficit balance for schools at year end of £619,000. Close monitoring of school budgets will continue going into 2025-26 with a further 1% efficiency saving to be achieved on school delegated budgets and officers continue to work with schools to bring this overall deficit down. SSW13 - Council to reduce its investment into cultural services (£360,000). There was a shortfall of £295,000 against the proposal in 2024-25. On 14th May 2024 Cabinet approved a £50,000 reduction to the book fund and removal of the £15,000 subsidy for the Youth Theatre. Cabinet also approved public engagement over how future savings can be achieved and further reports will be presented to Cabinet to enable the outcome of consultation exercises to be taken into account when finalising any proposed changes. The service will also continue to maximise grant funding opportunities throughout 2025-26. CEX22 – Review of ICT Services (£398,000). There was a shortfall of £339,000 against this proposal in 2024-25. Further work is to be carried out on a review of the telephony budgets across the Council following a re-procurement exercise, with the full saving anticipated to be met in 2025-26. 				

Additional Sickness Information by Directorate

Directorate			FTE 31.03.2025	QTR4 2023/24			QTR4 2024/25			Cumulative Days per FTE 2023/24	Cumulative Days per FTE 2024/25
Chief Executive Directorate			411.30	1122.64	111	2.58	824.79	108	2.005	9.62	10.48
Communities Directorate			489.16	1583.28	172	3.23	1898.97	163	3.882	12.42	16.50
Education, Early Years and Young People Directorate			467.11	2268.03	303	4.35	1688.84	318	3.616	13.13	12.62
Schools			2137.20	7625.44	1285	3.43	8154.09	1334	3.815	11.81	12.54
Social Services and Wellbeing Directorate			1033.61	4010.69	453	4.24	3969.70	457	3.841	14.59	16.92
BCBC TOTAL			4538.37	16610.07	2324	3.60	16536.39	2380	3.644	12.37	13.76

Sickness Absence by Reason



Name of Audit / Regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Care Inspectorate Wales (CIW) Inspection of Sunny Bank (February 2025)	PAN – 21. The service provider has not adequately supported children and prepared them for moving on, ensuring they and care staff who know them best are consulted and involved in planning their transitions.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	This was regarding the transition of a young person out of the service, we appealed this decision, but it was rejected. Statement of Purpose amended to state all young people will have a minimum of a week transition (whilst still being person centred). A transition template has been created with help from Behaviour Clinic which will act as a default.	n/a	AMBER
CIW Inspection Report on Ty Ynysawdre (Residential) (January 2025)	AFI - Regulation 16 (Review of Personal Plan). Personal Plan / Care and Support Plans are not reflective of changes in need; it is a regulatory requirement to review every three months or when there has been changes in a person's needs	Group Manager – Direct Care Provider Services	March 2026	Each individual has had a monthly review of their care and support, measures have been put in place to ensure support plans are reflective of current risks and support needs. As a result, five individuals who have experienced changes in their care and support needs have had their documents updated to reflect these changes. Work has commenced in terms of standardised documentation and processes across older adults' accommodation services.	n/a	YELLOW
Audit Wales, Setting of Well-being Objectives (Oct 2024)	R1 The Council should ensure that it covers the full range of statutory requirements when developing its next well-being statement, including: <ul style="list-style-type: none">• how it considers it has set well-being objectives in accordance with the sustainable development principle; and• how it proposes to ensure resources are allocated annually for the purpose of taking steps to meet its well-being objectives	Alex Rawlin	Jun-25	This is included in the Council's draft self-assessment 2024/25 which will be presented to Governance and Audit committee in July and Cabinet / Council in September 2025	n/a	BLUE
	R2 The Council should build on its current approach to engagement by considering ways to: <ul style="list-style-type: none">• draw on citizens' views to inform the development of the Well-being objectives at an early stage; and• ensure that it is involving the full diversity of the population	Alex Rawlin	Mar-28	This will form part of the approach to the development of the next Corporate Plan and wellbeing objectives in 2028	n/a	GREEN
	R3 The Council should clearly set out in the corporate plan how it intends to work with partners to support the delivery of its well-being objectives	Alex Rawlin	Apr-25	This information has been requested as part of the directorate business planning process.	n/a	GREEN
Audit Wales, Review of Decision-Making Arrangements (Oct 2024)	R1 –The Council should ensure that its published forward work programme for committees is accessible, comprehensive, and covers a longer time frame than the current 4-month period to give more opportunity for robust pre-decision scrutiny and provide greater transparency around the decision-making process for both Members and the public	Kelly Watson	Dec-24	Six-month FWP for Cabinet, Council and Scrutiny has been published. Work will be ongoing to ensure this is regularly kept up to date.	n/a	BLUE
	R2 – The Council should ensure that its scheme of delegation is updated, to mitigate the risk of decisions being taken without the proper authority.	Kelly Watson	Oct-24	Completed	n/a	BLUE
	R3 – The Council should ensure that there is clarity on the role of scrutiny in the decision-making process. The lack of clarity on the role of the O&S committees, particularly in relation to pre-decision scrutiny is limiting O&S committees' ability to contribute fully and effectively to the decision-making process.	Kelly Watson	Dec-24	Training with Elected Members and Senior Officers has been undertaken including sessions on Roles, Responsibilities, LA Governance Arrangements and the importance of pre-decision Scrutiny. A scrutiny review and protocol was approved by Full Council in May 2025.	n/a	BLUE

Name of Audit / regulator Page	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 116	R4 – The Council should ensure that it provides greater transparency regarding the remit of the different O&S committees. Naming the O&S committees 1, 2 and 3 does not help with transparency of the remit of the committees, particularly from a public perspective. It is also a potential barrier to encouraging public involvement in the scrutiny process.	Kelly Watson	Dec-24	Following a detailed Scrutiny Review, a report proposing new arrangements including the renaming of the Scrutiny Committees was agreed by Full Council in April and May 2025.	n/a	BLUE
	R5 – The Council should ensure that Members receive, and are encouraged to access, a relevant training programme to ensure they are well equipped to understand and undertake their role. This should include focussed training for specific roles, e.g. chairing skills.	Kelly Watson	Dec-24	Completed	n/a	BLUE
CIW Inspection of Golygfa'r Dolydd (Sept 2024)	AFI 18 - The service provider has not reviewed the provider assessment when timescales for children's stays have been extended, to ensure the service remains suitable. Childrens views have not been considered as part of the provider assessment.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	Impact risk assessments and provider assessments have been updated moving forward to mitigate this area of improvement. Provider assessments being updated now for any change in the care and support the young person has. There are also better ways to capture and document the young person's voice. This is implemented as they have been witnessed during recent REG73 and Quality assurance visits. Responsible Individual to continue to oversee during coming visits.	n/a	GREEN
	AFI 21- Childrens views are not included in the planning and review of their care and support. Reviews of plans, do not consider the progress being made by children to achieve their personal outcomes.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	Child friendly personal plans were in development at the time of inspection which CIW were made aware of and are now in operation. Outcomes and progress are now better captured on the personal plan. There has been a drive to really capture the words of the child using speech marks as much as possible. These are now being reviewed and updated weekly. They are also fed by creation of a How's my week form. This is working well as far as at this point but will need continued oversight by RI during statutory and quality assurance visits.	n/a	GREEN
	AFI 43 - The service provider must ensure the premises, facilities and equipment are suitable for the service and meet children's needs.	Group Manager Placement and Provider Services	Sept 2025	An ongoing review of the internal environment has been made and will continue for the future linked to individual children's needs. Improvements in this area have already been made. This is continuing with light furnishings etc. Funding has recently been accessed through the original capital pot which will really help push this. This will be a co-produced with children and fully captured to demonstrate to CIW not only improvements but that children contributed. Skate ramp has also been repaired and can be used (risk assessment in place)	n/a	AMBER
	AFI 6- The service provider has not ensured the service is provided with sufficient care, competence and skill, having regard to the statement of purpose.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	A review of the Statement of Purpose has taking place which accurately reflects the workforce and expertise in the service Now. Vocational Outreach Worker removed temporarily as that was the issue. Statement of Purpose submitted to CIW.	n/a	GREEN
	AFI 58- The service provider must have arrangements in place to ensure medicines are stored and administered safely.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	Review of Medication audit process. The system now involves a weekly audit on Wednesdays. This has worked very well. Medication cabinet keys to be locked away when not in use. RI overseeing this providing oversight during quality assurance visits and Reg 73 visits. All staff trained in medication. All staff have competency assessments. Medication procedure reviewed and read by all staff.	n/a	GREEN

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Audit Wales, Financial Sustainability Review (Aug 2024)	R1 To strengthen the Council's approach to financial sustainability, the Council should develop a savings plan across the timescale of the MTFP, to clearly show how the funding gap will be addressed or clearly communicate the challenge where this is not possible	Carys Lord	Feb-25	This have been completed and is now business as usual	n/a	BLUE
	R2 The Council should strengthen its arrangements to ensure the impact of its financial position and MTFP on communities and on the delivery of its well-being objectives is reported to members to enable them to monitor and address any impacts.	Carys Lord	Mar-25	This have been completed and is now business as usual	n/a	BLUE
CIW Inspection of Harwood (June 2024)	AFI 21- Young people have not received care and support in accordance with their personal plan.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	The Responsible Individual has put measures in place to review and monitor that care plans are delivered in line with identified need. This specifically draws on young person not being kept safe and incidents happening as a result of lack of support / supervision. These areas have been addressed by manager and reviewed / overseen during Reg73 visits and quality assurance audits. Continued oversight needed until inspection which is due by June 2025	n/a	GREEN
	AFI 35 - The service provider has not ensured agency staff have the same checks as permanently employed staff and have evidence to demonstrate checks have been undertaken. This may include confirmation and checklists supplied by any agency.	Group Manager Placement and Provider Services	Complete subject to CIW sign-off	The Responsible Individual has put in place checklists to ensure the relevant checks are in place and the agencies the service works with has also been advised of expectations. These checks are working and since this inspection, CIW haven't had raised any issues in regards this area. These same systems that have avoided sanctions are the same that Harwood now employs. These have been completed but will not be signed off as complete until the inspection.	n/a	GREEN
Audit Wales, Digital Strategy Review (April 2024)	Strengthening the evidence base R1 To help ensure that its next digital strategy is well informed and that its resources are effectively targeted, the Council should draw on evidence from a wide range of sources, both internally and externally including: • involving stakeholders with an interest in the digital strategy as well as drawing on the views of stakeholders from existing sources; and • aligning its strategic approach to digital both across the Council and with partners to help identify opportunities to share resources, avoid duplication of effort and deliver multiple benefits.	Martin Morgans	Aug-25	This is complete and these considerations were taken into account when developing the new Strategy	n/a	BLUE
	Identifying resource implications R2 To help ensure that its next digital strategy is deliverable and achieving value for money the Council should identify the short, medium and long-term resource implications of delivering it together with any intended savings.	Martin Morgans	Aug-25	Once the new Digital Strategy is in place, this recommendation will be considered as part of the development of the delivery plan which will underpin the new strategy.	December 2025	GREEN
	Arrangements for monitoring value for money R3 To help ensure that the Council can effectively monitor and evaluate value for money from its strategic approach to digital it should strengthen its arrangements for monitoring the progress and impact of its digital strategy over the short, medium and long term.	Martin Morgans	Aug-25	Once the new Digital Strategy is in place, a review of the Terms of Reference of the Digital Board will be undertaken, as well as implementing an improved process to monitor progress and impact over the short, medium and long term	December 2025	GREEN

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Ofsted Report on Foster Wales Bridgend (Jan 2024)	R1 Childrens views to be actively sought following placement endings.	n/a	n/a	Complete		BLUE
	R2 Some children are not accessing statutory education, impacting on outcomes and increasing pressure on foster carers.	Group Manager Placement and Provider Services	Quarterly	We have continued our links with education, this is a wider corporate parenting responsibility. Education, Early Years and Young People Directorate have reported to Cabinet Corporate Parenting Committee on the role of the Education Engagement Team in supporting care experienced children. We have a complex needs policy in place for children not accessing education so that foster carers can receive enhanced payments to support children during school hours.	March 2026	YELLOW
	R3 Safeguarding procedures are not consistently followed. Information sharing between teams, consideration of risks and decision making is not robust.	Group Manager Placement and Provider Services	March 2024	The Fostering team manager has continued the link with our Local Authority Designated Officer LADO, Fostering Network have developed an allegation toolkit which will strengthen the processes around when an allegation is made against a foster carer.	n/a	BLUE
	R4 Foster care agreements and safer caring agreements are in place, but these are not completed thoroughly,	n/a	n/a	Complete	n/a	BLUE
	R5 There are shortfalls in the service considering the needs of all household members and carers capacity (matching)	Group Manager Placement and Provider Services	March 2024	The team manager continues to have oversight of the process and quality/consistency.	n/a	BLUE
	R6 When foster carers have been subject to safeguarding concerns, delays have occurred in completing annual reviews and presenting these to foster panel.	n/a	n/a	Complete	n/a	BLUE
	R7 Some children have experienced high numbers of moves, which impacts their stability and outcomes	Group Manager Placement and Provider Services	March 2025	8.71% have experienced 3 plus moves in 2024/25 so numbers remain low.	n/a	BLUE
	R8 Demand on the service is high and many foster carers are often asked to care for more children than they are approved for. Additional resources are provided to try to support these arrangements. However, these are routinely used with carers who look after children with complex needs, without robust consideration of the impact and risks involved.	n/a	n/a	Complete	n/a	BLUE
	R9 As part of the matching process key information is shared during planning meetings, however, these meetings are not completed consistently.	Group Manager Placement and Provider Services	Quarterly	The team manager has put processes in place which means they sign off all of these documents, ensuring this is taking place consistently.	n/a	BLUE
	R10 Children who need long term care, are matched with carers, without a thorough assessment of their long-term needs, how these change over time, carers commitment and understanding of these needs.	Group Manager Placement and Provider Services	March 2025	The team manager has put processes in place which means they sign off all of these documents, ensuring this is taking place consistently.	n/a	BLUE
	R11 The service is reviewing how they can improve monitoring of children's personal outcomes.	n/a	n/a	Complete	n/a	BLUE

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 119	R12 Feedback from foster carers has been mixed regarding the foster carer charter implementation, information sharing and decision-making needing to be improved.	Group Manager Placement and Provider Services	June 2024	There is now a clear plan to embed the foster charter into practice across all of children's services, with a face-to-face implementation session planned.	n/a	BLUE
	R13 Several policies and procedures have been updated prior to inspection, to reflect the changes needed. The service is not currently operating in line with these policies and procedures which is impacting children's outcomes	n/a	n/a	Complete	n/a	BLUE
	R14 The current recording systems do not support effective oversight and smooth operation of the service. Some key information, including the DBS checks for foster carers support networks are not monitored effectively.	n/a	n/a	Complete	n/a	BLUE
	R15 The service has experienced a high turnover of staff in all areas.	Group Manager Placement and Provider Services	June 2024	There is a stable management team in place, with general fostering having a team manager and senior in place, although there are two vacancies in the general side this is being covered by a very experienced agency social worker. The kinship senior post has two internal candidates so we are confident this post will be filled by next quarter.	n/a	BLUE
	R16 Evidence of updated DBS checks for staff needs strengthening.	n/a	n/a	Complete		BLUE
	R17 Quality assurance and learning framework has not been implemented consistently.	Group Manager Placement and Provider Services	April 2024	There is a clear plan for the quality assurance (QA) framework to be implemented by July 2025. There have been observations of practice of Supervising Social Workers (SSW) and positive feedback received from foster carers about their SSW.	July 2025	YELLOW
	R18 Not all prospective foster carers have received the information and training they require prior to their assessment	n/a	n/a	Complete		BLUE
	R19 Some foster carers report training does not meet their needs fully as they care for children with more complex needs.	Group Manager Placement and Provider Services	March 2024	Training plan is in place and training lead led our recent Information and Consultation Event (ICE), taking feedback from carers which will go into the training plans for the next year.	n/a	BLUE
	R20 Additional guides for children reflecting different ages and needs to be developed.	Group Manager Placement and Provider Services	Nov 2024	Children's guide to be launched in summer 2025. We have also developed more child friendly feedback forms as part of the annual review process (based on children's feedback).	Sept 2025	GREEN
Audit Wales, Use of Service User Perspective and Outcomes (Jan 2024)	R1 Information on the perspective of the service user <ul style="list-style-type: none"> The Council should strengthen the information it provides to its senior leaders to enable them to understand how well services and policies are meeting the needs of service users. 	Alex Rawlin	April 2025	We are participating in the new Welsh Council's Performance Information Community of Practice aimed at enhancing the quality of performance information and providing opportunities to review performance management arrangements, share best practices, and collaborate on data development. The National Resident Survey (WLGA/Data Cymru) ran in the Autumn and findings have been analysed.	April 2026	AMBER
	R2 Information on progress towards outcomes <ul style="list-style-type: none"> The Council should strengthen the information provided to senior leaders to help them evaluate whether the Council is delivering its objectives and its intended outcomes. 	Alex Rawlin	April 2025	The revised Corporate Plan Delivery Plan (CPDP) was presented to Cabinet / Council in March 2025.	n/a	BLUE

Name of Audit / regulator Page 120	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
	R3 Quality and accuracy of data <ul style="list-style-type: none"> The Council needs to assure itself that it has robust arrangements to check the quality and accuracy of the service user perspective and outcomes data it provides to senior leaders. 	Alex Rawlin	Sept 2024	Complete	n/a	BLUE
CIW Improvement Check Children's Social Care Services (Nov 2022)	Pe9 - Continue to work towards ensuring a sufficient and sustainable workforce, with the capacity and capability to consistently meet statutory responsibilities	Director and Workforce Board	Continuous	No change since last quarter. Agency use continues to be low, and recruitment and retention continues to be stable.	n/a	BLUE
	Pe10 - Continue to monitor the quality of social care records ensuring recording in relation to siblings, ethnicity, language, religion is strengthened, and a consistent approach taken	PO Training	April 2023	Completion rates are increasing with Quality Assurance system flexibility through the Interim Framework 2024. MOSAIC will enable us to establish mandatory field to address this completely.	n/a	BLUE
	Pe11 - Ensure people consistently feel listened to and treated with dignity and respect	HoS	Sept 2023	Tros Gynnal Plant (TGP) Cymru continue to support the LA in developing a Parents Charter and forum. Feedback from parents to TGP Cymru has highlighted areas that they feel would make their experience of child protection conference easier have been shared regionally. Positively, all the areas identified by parents are already being delivered in Bridgend.	March 2026	YELLOW
	Pr6 - Continue to closely monitor the position of children's social services and early help services to ensure any indicators of risks to achieving and sustaining improvement and compliance with statutory responsibilities, and pressure/ gaps in service provision are quickly identified and the required action is taken	Director/HoS/Deputy HoS	June 2023	Compliance across teams continues to be strong and where there are aspects of poor performance, these are recognised and plans in place to address preventing critical incidents occurring.	n/a	BLUE
	Pr7 - The local authority should ensure systems are in place to provide all staff, with up-to-date information regarding availability and accessibility of early help services and records relating to intervention of early help services	n/a	n/a	Complete	n/a	BLUE
	Pr8 - Ensure children are not placed in unregistered services and must continue its efforts to identify suitable, registered placements	GM Commissioning	Continuous	We presently have 2 children placed in Operating Without Registration placements. There continues to be challenges within the placement market, however, improved care planning has reduced some of the issues seen historically. The Health and Social Care Act has received royal assent. The intention of which is to remove profit from children's social care. Funding from WG will be provided over the coming year although only a reduced amount is guaranteed which presents risks. Our Placement commissioning strategy highlights clearly the pressures we face and how we best can respond. Our new residential provision should be operational in September 2025.	March 2030	AMBER
	Pi4 - Ensure clarity and consistency of thresholds for access to early help and statutory services. The local authority must prioritise this work to ensure children and families access the right support at the right time and ensure smooth access to services, and where required smooth transition between early help / preventative and statutory services	Director/Head of Service	June 2023	The final version of the threshold document has been presented to the regional safeguarding sub-group. A final review is being undertaken by that group to ensure the document is fit for purpose. It will then progress to publication in July 2025.	Sept 2025	YELLOW
	W6 - Performance indicators in relation to timeliness of meeting statutory requirements - maintain focus and scrutiny on ensuring compliance with all its statutory responsibilities	n/a	n/a	Complete	n/a	BLUE

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 121	W7 - Implement and embed consistent practice regarding identifying and responding to child exploitation, progress work as a matter of urgency	n/a	n/a	Complete	n/a	BLUE
	W8 - Closely monitor contact arrangements for children and their families	GM Case Management and Transition	June 2023	The contact team is now in place with a contact manager in post. This will allow a clear oversight of the contact arrangements for families and ensure consistency across teams.	n/a	BLUE
Audit Wales, Springing Forward – Strategic Workforce Management (Oct 2022)	R1 The Council needs to urgently develop its strategic workforce approach, embedding the sustainable development principle at its core, to enable it to address the significant workforce issues it faces.	n/a	n/a	Complete	n/a	BLUE
	R2 The Council should develop a suite of strategic quantitative and qualitative measures to enhance its ability to understand the impacts and affordability of its workforce plans and actions.	Kelly Watson	Sept 2023	Revised workforce reporting is now in place and data is produced quarterly and shared with CMB and other key forums such as Directorate Management Teams, etc. This work will continue going forward, with focus on specific areas where needed.	n/a	BLUE
	R3 The Council should also explore opportunities to benchmark its own performance over time and its arrangements with other bodies to provide a different dimension to its performance management data. Whilst also offering an insight to how other bodies are performing and discovering notable practice elsewhere.	Kelly Watson	June 2023	We have developed some of our own performance measures. Benchmarking with others is a challenge and is being explored at a national level.	Sept 2025	YELLOW
Transformational Leadership Programme Board – Baseline governance Review – Cwm Taf Morgannwg Regional Partnership Board (Aug 2022)	R1 Strategic planning and applying the sustainable development principle Our work found opportunities for the TPLB to strengthen its planning arrangements and demonstrate how it is acting in accordance with the sustainable development principle (as set out in the Well-being of Future Generations (Wales) Act). The principle should be integral to the TPLB's thinking and genuinely shaping what it does by: a) taking a longer-term approach to its planning beyond five years, b) ensuring greater integration between the long-term plans of the four statutory bodies of the TPLB, and c) improving involvement of all members of the TPLB to ensure an increased voice for non-statutory partners and a better understanding of the purpose of the RPB more generally.	Head of Regional Commissioning Unit	2023-24	Complete	n/a	BLUE
	R2 Governance Arrangements The Cross-Cutting Programme Board is yet to be established. It is intended to oversee the development and delivery of regional cross-cutting services and could have a role ensuring a more coherent and impactful integrated community model. The TPLB should establish the programme board to ensure that decision making arrangements are in place to help resolve cross-cutting issues and risks brought to the attention of the RPB	Head of Regional Commissioning Unit	2023-24	The regional Memorandum of Understanding, as a precursor to a binding Regional Partnership Agreement (RPA), has been agreed through each of the statutory organisations' governance fora. Development of a Regional Partnership (Section 33) Agreement is progressing and will be with Statutory organisation governance in July. This will provide the region with a shared accountability framework.	Sept 2025	GREEN

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 122	R3 Performance Management The outcomes and performance framework was still being finalised at the time of our review. The TPLB needs to finalise and implement the framework, ensuring it contains quantitative and qualitative measures that will enable the RPB to demonstrate outcomes and impact	Head of Regional Commissioning Unit	n/a	Complete	n/a	BLUE
	R4 Risk Management Our work found areas of risk management that need to be improved, particularly in relation to regional workforce planning. The TPLB should strengthen regional risk management arrangements by improving the identification and prioritisation of shared risks and ensuring mitigating actions are robust and clearly articulated.	Head of Regional Commissioning Unit	ongoing	Multidisciplinary teams on a local footprint, and an integrated Navigation Hub, are key features of the ICCS model agreed. 'phase 1' will focus on aligning current community-based Health & Social Care teams by developing shared priorities and creating a team environment (Functional integration for Rhondda Cynon Taf and Merthyr Tydfil) Clinical Navigation Hub leads have been engaged and a project structure is being developed for Nav Hub/ Single Point of access alignment. Bridgend is at a different stage, and the next step is improving existing arrangement through the Regional Partnership Agreement (RPA). A paper highlighting issues for resolution prior to the agreement of the RPA is being developed for partners. A Delivery Subgroup has been established to drive these immediate priorities forwards. The intention is to move to a single regional model in Stage 2, with the above as steps towards that acknowledging the different starting points. Demand and Capacity work progressing. A paper proposing priorities and action for the Population Health Pathway will be presented to the Regional Commissioning Group on 4 April and to PLT on 25 April. A Business Case is being prepared to pull together all the above.	Sept 2025	AMBER
	R5 Regional Commissioning Unit Our work found that the lack of capacity within the RCU was leading to some delays in progressing actions. The work of the RCU is crucial to the continuing success of the TPLB. The TPLB needs to consider how it can build capacity and maximise resources to support the TPLB and minimise overreliance on a small team.	Head of Regional Commissioning Unit	2023-24	Complete	n/a	BLUE
	R6 Use of Resources Improving the health and social care outcomes of the region will require efficient and effective use of combined resources. Our work found that there had been some limited examples of pooled budgets and other arrangements for sharing resources. The TPLB needs to explore more innovative ways of sharing and pooling core resources across the region to maximise its impact and outcomes for the Cwm Taf Morgannwg population	Head of Regional Commissioning Unit	2023-24	Additional Regional Capacity identified to support completion of Memorandum of understanding and Section 33 agreement. Ongoing discussions regarding changes required to existing legal agreements across the region.	Sept 2025	YELLOW

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 123	<p>R7 Regional Workforce Planning Like many parts of the public sector, the region is experiencing significant workforce challenges. The TLPB needs to consider how it can facilitate a regional and strategic approach to addressing these challenges and to help it deliver its priorities.</p>	Head of Regional Commissioning Unit	ongoing	<p>Detailed exercise being undertaken to generate granular detail on teams in scope for integrated model. Including: Geographical footprint of the team(s) if not already evident (i.e. neighbourhood/cluster/locality) Team establishment (FTEs and vacancies) Capacity and demand. Typical caseload level and waits. Management structure. Named individuals, contact details and reporting lines into organisations. Service responsiveness Access criteria. Referral processes. Pay scales and Terms & Conditions. ICT systems utilised. Main links with other services in the pathway.</p>	Ongoing	AMBER
CIW, Performance Evaluation Inspection of Children's Services (May 2022)	PE1 - Opportunities for children's views to be consistently sought and appropriately recorded need to be strengthened	n/a	n/a	Complete	n/a	BLUE
	PE2 - Limited Evidence of Direct Work	n/a	n/a	Complete	n/a	BLUE
	PE3 - Inconsistent use of chronologies and genograms	n/a	n/a	Complete	n/a	BLUE
	PE4 - Strengthen business support for practitioners	n/a	n/a	Complete	n/a	BLUE
	PE5 - Variable evidence of management oversight/Quality of supervision	n/a	n/a	Complete	n/a	BLUE
	PE6 - Practice model – implementation of Signs of Safety	n/a	n/a	Complete	n/a	BLUE
	PE7 - Review of direct payments scheme	n/a	n/a	Complete	n/a	BLUE
	PE8 - Consistent offer of a carers assessment	Dep HoS/GM Case Management and Transition/ Carers Development Officer	March 2023	Performance indicators show 100% carers are being offered a carers assessment	n/a	BLUE
	PR1 - Opportunities to prevent escalation of need continues to be a challenge for the local authority given the persistently high volume of referrals together with the complexity of needs of children and families, and workforce challenges	Director/ Workforce Board, HoS Children's Social Care/ HoS Education & Family Support	June 2023	The Family Support commissioning strategy has now been completed and a clear action plan is in place to respond to the identified areas within the strategy. This work will be taken into 2025/26.	March 2026	GREEN
	PR2 - Missed opportunities to thoroughly explore and mitigate risk and a lack of professional curiosity	n/a	n/a	Complete	n/a	BLUE

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 124	PR3 - Placement sufficiency and support	HoS/GM Placements and Provider Services	March 2023	<p>A Business Justification Case has been developed and approved by the relevant boards in respect of increasing capacity of provision of homes for children.</p> <p>A property has been identified for a multi-occupancy residential service and offer accepted. Search underway for the second home.</p> <p>We have continued to work closely with Foster Wales on recruiting and retaining foster carers. Our recruitment officer has supported national campaigns and led local activities such as information sessions and drop-ins. A new foster carer handbook and welcome pack for newly approved carers are nearly ready and awaiting final sign-off.</p> <p>We also held our latest Information and Communication Event (ICE), which was well attended and generated valuable ideas and feedback from carers and staff.</p> <p>A new front door process is now in place to strengthen the applicant journey—from the first enquiry right through to panel. This includes clearer communication with applicants, mid-point meetings to check progress and provide support, and a stronger quality assurance process of independent social worker assessments.</p> <p>We have also worked with regional groups to help shape national resources, including a Children's Guide that we will be adapting for our local area.</p>	March 2030	RED
	PR4 - Accessibility of information, advice and assistance	n/a	n/a	Complete	n/a	BLUE
	PR5 - Strengthening of Quality Assurance (QA) framework and alignment of performance and quality assurance systems	Director/HoS/ Principal Officer Training	March 2023	The Principal Officer for Social Work Transformation commenced in post in March. This will assist the embedding of the framework and support teams in developing more emphasis on the quality of their work as compliance across teams is generally strong.	n/a	BLUE
	PI1 - Inconsistent thresholds and standards of practice	n/a	n/a	Complete	n/a	BLUE
	PI2 - The local authority will need to ensure its communication strategy is sufficiently robust to effectively communicate to staff and partners the vision for children's services and the many developments taking place/planned to take place	n/a	n/a	Complete	n/a	BLUE
	PI3 - Share learning from audits and reviews with staff and partners	n/a	n/a	Complete	n/a	BLUE
	W1 – Further work is required to improve the timeliness of meeting statutory responsibilities	n/a	n/a	Complete	n/a	BLUE
	W2 - Facilitation of supervised contact	GM Case Management & Transition/ GM Locality Hubs/Contact Monitoring MO	March 2023	The service is now centralised, and additional management support is also in place. It is already evident that the centralised nature of the service is providing more opportunities to maximise the service than when based in localities ensuring children and families are having quality family time together consistently.	n/a	BLUE

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q4 2024-25	Current Delivery Date	BRAYG Q4 24-25
Page 125	W3 - Consistent high quality written records	n/a	n/a	Complete	n/a	BLUE
	W4 - CSE and CCE – strengthen interventions and mapping	n/a	n/a	Complete	n/a	BLUE
	W5 - First year of practice – ensure competence and confidence of staff and provide consistent supervision and oversight	n/a	n/a	Complete	n/a	BLUE
Audit Wales, Review of Arrangements to Become a 'Digital Council' (June 2021)	P1 The Council could improve its digital strategy	Martin Morgans	Dec 2024	Draft Strategy has been completed with the public consultation starting in June 2025 with the aim to submit final Strategy to Cabinet in October 2025.	October 2025	AMBER
	P2 The Council should strengthen some governance arrangements to deliver the strategy	n/a	n/a	Complete	n/a	BLUE
	P3 - The Council should consider improving communication with staff / members to evoke the culture necessary to change	n/a	n/a	Complete	n/a	BLUE

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Agenda Item 7

Meeting of:	SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	25 SEPTEMBER 2025
Report Title:	FORWARD WORK PROGRAMME UPDATE
Report Owner / Corporate Director:	CHIEF OFFICER – LEGAL & REGULATORY SERVICES, HR & CORPORATE POLICY
Responsible Officer:	MERYL LAWRENCE SENIOR DEMOCRATIC SERVICES OFFICER – SCRUTINY
Policy Framework and Procedure Rules:	The work of the Overview & Scrutiny Committees relates to the review and development of plans, policy or strategy that form part of the Council's Policy Framework and consideration of plans, policy or strategy relating to the power to promote or improve economic, social or environmental wellbeing in the County Borough of Bridgend.
Executive Summary:	<p>The Council's Constitution requires each Overview and Scrutiny Committee to develop and implement a Forward Work Programme for the Committee.</p> <p>The Committee is asked to consider and agree its Forward Work Programme, identify any specific information it wishes to be included in and any invitees they wish to attend for the reports for the next two Committee meetings, identify any further items for consideration on the Forward Work Programme having regard to the criteria set out in the report, and consider the Recommendations Monitoring Action Sheet for this Committee.</p>

1. Purpose of Report

1.1 The purpose of this report is to:

- a) Present the Committee with the Forward Work Programme attached as **(Appendix A)** for consideration and approval;
- b) Request any specific information the Committee identifies to be included in the items for the next two meetings, including invitees they wish to attend;
- c) Request the Committee to identify whether there are presently any further items for consideration on the Forward Work Programme having regard to the selection criteria in paragraph 3.5 of this report;

- d) Present the Recommendations Monitoring Action Sheet (**Appendix B**) to track responses to the Committee's recommendations made at previous meetings;
- e) Advise that the Committee's Forward Work Programme as approved will be reported to the next meeting of Corporate Overview and Scrutiny Committee (COSC) for information, together with those from the other Overview and Scrutiny Committees, following their consideration in this cycle of Committee meetings.

2. Background

- 2.1 The Council's Constitution requires each Overview and Scrutiny Committee to develop and implement a Forward Work Programme for the Committee.
- 2.2 The Council's Constitution also provides for each of the other Overview and Scrutiny Committees to propose items for the Forward Work Programme having regard for the Council's Corporate Priorities and Risk Management framework. Where a matter for consideration by an Overview and Scrutiny Committee also falls within the remit of one or more other Committees, the decision as to which Committee will consider it will be resolved by the respective Chairs or, if they fail to agree, the Chair of the Corporate Overview and Scrutiny Committee.

Best Practice / Guidance

- 2.3 The Centre for Governance and Scrutiny's (CfGS) Good Scrutiny Guide recognises the importance of the Forward Work Programme. In order to 'lead and own the process', it states that Councillors should have ownership of their Committee's work programme, and be involved in developing, monitoring and evaluating it. The Good Scrutiny Guide also states that, in order to make an impact, the scrutiny workload should be coordinated and integrated into corporate processes, to ensure that it contributes to the delivery of corporate objectives, and that work can be undertaken in a timely and well-planned manner.
- 2.4 Forward Work Programmes need to be manageable to maximize the effective use of the limited time and resources of Scrutiny Committees. It is not possible to include every topic proposed. Successful Scrutiny is about looking at the right topic in the right way and Members need to be selective, while also being able to demonstrate clear arguments for including or excluding topics.
- 2.5 The CfGS's guide to effective work programming 'A Cunning Plan?' makes the following reference to the importance of good work programming:

'Effective work programming is the bedrock of an effective scrutiny function. Done well it can help lay the foundations for targeted, incisive and timely work on issues of local importance, where scrutiny can add value. Done badly, scrutiny can end up wasting time and resources on issues where the impact of any work done is likely to be minimal.'

3. Current situation / proposal

3.1 Following the approval of the schedule of Scrutiny Committee meeting dates at the Annual Meeting of Council on 14 May 2025, the standing statutory reports to Scrutiny Committees of: the Corporate Plan, the Medium Term Financial Strategy (MTFS) and Budget, Performance and Budget Monitoring, etc. have been mapped to the appropriate timely meeting dates into a Forward Work Programme.

3.2 The Forward Work Programmes for each Scrutiny Committee have been prepared using a number of difference sources, including:

- Corporate Risk Assessment;
- Directorate Business Plans;
- Previous Scrutiny Committee Forward Work Programme report topics / minutes;
- Committee / Member proposed topics;
- Policy Framework;
- Cabinet Work Programme;
- Discussions with Corporate Directors;
- Performance Team regarding the timing of performance information.

3.3 There are items where there is a statutory duty for Policy Framework documents to be considered by Scrutiny, e.g., the MTFS including draft budget proposals scheduled for consideration in January 2026, following which COSC will make conclusions and recommendations in a report on the overall strategic overview of Cabinet's draft Budget proposals to the meeting of Cabinet in February 2026.

3.4 An effective Forward Work Programme will identify the issues that the Committee wishes to focus on during the year and provide a clear plan. However, at each meeting the Committee will have an opportunity to review this as the Forward Work Programme Update will be a standing item on the Agenda, detailing which items are scheduled for future meetings and be requested to clarify any information to be included in reports and the list of invitees. The Forward Work Programme will remain flexible and will be reported to each COSC meeting for information.

Identification of Further Items

3.5 The Committee are reminded that the Scrutiny selection criteria used by Scrutiny Committee Members to consider, select and prioritise items emphasises the need to consider issues such as impact, risk, performance, budget and community perception when identifying topics for investigation to maximise the impact scrutiny can have on a topic and the outcomes for people. The criteria which can help the Committee come to a decision on whether to include a referred topic, are set out below:

Recommended Criteria for Selecting Scrutiny Topics:

PUBLIC INTEREST: The concerns of local people should influence the issues chosen for scrutiny;

ABILITY TO CHANGE: Priority should be given to issues that the Committee can realistically influence, and add value to;

PERFORMANCE:	Priority should be given to the areas in which the Council is not performing well;
EXTENT:	Priority should be given to issues that are relevant to all or large parts of the County Borough, or a large number of the Authority's service users or its population;
REPLICATION:	Work programmes must take account of what else is happening in the areas being considered to avoid duplication or wasted effort.

Reasons to Reject Scrutiny Topics:

- The issue is already being addressed / being examined elsewhere and change is imminent.
- The topic would be better addressed elsewhere (and can be referred there).
- Scrutiny involvement would have limited / no impact upon outcomes.
- The topic may be sub-judice or prejudicial.
- The topic is too broad to make a review realistic and needs refining / scoping.
- New legislation or guidance relating to the topic is expected within the next year.
- The topic area is currently subject to inspection or has recently undergone substantial change / reconfiguration.

Corporate Parenting

3.6 Corporate Parenting is the term used to describe the responsibility of a local authority towards care experienced children and young people. This is a legal responsibility given to local authorities by the Children Act 1989 and the Children Act 2004. The role of the Corporate Parent is to seek for children in public care the outcomes every good parent would want for their own children. The Council as a whole is the 'Corporate Parent', therefore all Members have a level of responsibility for care experienced children and young people in Bridgend.

3.7 In this role, it is suggested that Members consider how each item they consider affects care experienced children and young people, and in what way can the Committee assist in these areas.

3.8 Scrutiny Champions can greatly support the Committee in this by advising them of the ongoing work of the Cabinet Committee Corporate Parenting and particularly any decisions or changes which they should be aware of as Corporate Parents.

3.9 The Forward Work Programme for the Committee is attached as **Appendix A** for the Committee's consideration.

3.10 The Recommendations Monitoring Action Sheet to track responses to the Committee's recommendations made at previous meetings is attached as **Appendix B**.

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 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:

- Long-term - The approval of this report will assist in the planning of Scrutiny business in both the short-term and in the long-term on its policies, budget and service delivery.
- Prevention - The early preparation of the Forward Work Programme allows for the advance planning of Scrutiny business where Members are provided an opportunity to influence and improve decisions before they are made by Cabinet.
- Integration - The report supports all the wellbeing objectives.
- Collaboration - Consultation on the content of the Forward Work Programme has taken place with the Corporate Management Board, Heads of Service and Elected Members.
- Involvement - Advanced publication of the Forward Work Programme ensures that stakeholders can view topics that will be discussed in Committee meetings and are provided with the opportunity to engage.

5.2 When setting its Forward Work Programme, the Committee should consider how each item they propose to scrutinise assists in the achievement of the Council's 4 Wellbeing Objectives under the **Well-being of Future Generations (Wales) Act 2015** as follows:

1. A prosperous place with thriving communities
2. Creating modern, seamless public services
3. Enabling people to meet their potential
4. Supporting our most vulnerable

6. Climate Change and Nature Implications

6.1 The Committee should consider how each item they scrutinise affects climate change, the Council's Net Zero Carbon 2030 target and how it meets the Council's commitments to protect and sustain the environment over the long term. There are no Climate Change or Nature Implications arising from this report.

7. Safeguarding and Corporate Parent Implications

7.1 The Committee should consider how each item they scrutinise affects care experienced children and young people, and in what way the Committee can assist in these areas. Safeguarding is everyone's business and means protecting peoples' health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. There are no Safeguarding and Corporate Parent Implications arising from this report.

8. Financial Implications

8.1 There are no financial implications arising from this report.

9. Recommendation

9.1 The Committee is recommended to:

- a) Consider and approve the Forward Work Programme for the Committee in **Appendix A**;
- b) Identify any specific information the Committee wishes to be included in the items for the next two meetings, including invitees they wish to attend;
- c) Identify whether there are presently any further items for consideration on the Forward Work Programme having regard to the selection criteria in paragraph 3.5 of this report.
- d) Note the Recommendations Monitoring Action Sheet in **Appendix B** to track outstanding responses to the Committee's recommendations made at previous meetings;
- e) Note that the Committee's Forward Work Programme as approved will be reported to the next meeting of Corporate Overview and Scrutiny Committee for information, together with those from the other Overview and Scrutiny Committees, following their consideration in this cycle of Committee meetings.

Background documents

None.

APPENDIX A

Social Services, Health and Wellbeing Overview and Scrutiny Committee 2025-26 Forward Work Programme

Wednesday, 9 July 2025 at 10.00am		
Report Topic	Information Required / Committee's Role	Invitees
Regional Partnership Agreement	Pre-Decision	Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing Officers Corporate Director – Social Services and Wellbeing; Head of Adult Social Care; Group Manager – Integrated Community Services Manager; and External Regional Integrated Services Director for Cwm Taf Morgannwg; and Director, Primary Care, Community & Mental Health – Cwm Taf Morgannwg University Health Board

Thursday 11 September 2025 at 10.00am		
Report Topics	Any Specific Information Requested	Invitees
Social Services Annual Report 2024-25	Pre-Decision	Cabinet Member Deputy Leader of the Council and Cabinet Member for Social Services, Health and Wellbeing; Officers Corporate Director - Social Services and Wellbeing; Head of Adult Social Care; Head of Children and Family Services. Group Manager - Prevention and Wellbeing; Group Manager – Commissioning; and Group Manager - Business Strategy, Performance & Improvement.
Social Services Representations and Complaints 2024-25	Pre-Decision	Cabinet Member Deputy Leader of the Council and Cabinet Member for Social Services, Health and Wellbeing; Officers Corporate Director - Social Services and Wellbeing.

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Thursday, 25 September 2025 at 10.00am		
Report Topic	Information Required / Committee's Role	Invitees
Care Inspectorate Wales Improvement Check of Children and Family Services - June 2025 and Care Inspectorate Wales Fostering Service Inspection - June 2025	CIW to present the Improvement Check report to the Committee.	Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing Officers Corporate Director – Social Services and Wellbeing; Head of Children and Family Services; Deputy Head of Children and Family Services; External Representatives from Care Inspectorate Wales

Thursday, 6 November 2025 at 10.00am		
Report Topic	Information Required / Committee's Role	Invitees
Annual Corporate Safeguarding Report 2024-25		Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing Officers Corporate Director – Social Services and Wellbeing; Head of Adult Social Care; Head of Children and Family Services; Group Manager – Information, Advice and Assistance and Safeguarding; Team Manager – Older People Mental Health; and Education and Community Safety Leads
Community Hubs Strategy	Including Libraries post consultation.	Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing Officers Corporate Director – Social Services and Wellbeing; Group Manager – Prevention and Wellbeing; External Chief Executive – Awen

APPENDIX A

Thursday, 4 December 2025 at 10.00am		
Report Topic	Information Required / Committee's Role	Invitees
Halo, Leisure Arrangements and Wellbeing	<p>Including plans and various programmes provided e.g. carer's offer.</p>	<p>Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing</p> <p>Officers Corporate Director – Social Services and Wellbeing; Group Manager – Prevention and Wellbeing;</p> <p>External Active Communities Manager – Halo Leisure</p>

Thursday, 12 March 2026 at 10.00am		
Report Topic	Information Required / Committee's Role	Invitees
Assisted Transport Policy Implementation Progress	Post implementation progress report	<p>Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing</p> <p>Officers Corporate Director – Social Services and Wellbeing;</p>
Learning Disability Transformation Programme Progress	Post implementation progress report	<p>Head of Adult Social Care; Policy Officer – Social Care;</p> <p>External Representatives from People First</p>

Monday, 27 April 2026 at 10.00am		
Report Topic	Information Required / Committee's Role	Invitees
Provision of Accommodation Based Regulated Support Services in Bridgend	<p>Post implementation progress report</p> <p>To include information setting out the provision of accommodation based regulated support services in Bridgend to include the following:</p> <ul style="list-style-type: none"> a. whether they are private, public or charity sector; b. how staff are contracted; and c. the ownership of the buildings. 	<p>Cabinet Member Deputy Leader and Cabinet Member for Social Services, Health and Wellbeing</p> <p>Officers Corporate Director – Social Services and Wellbeing; Head of Adult Social Care.</p>

Briefings and Workshops:

Topic	Information Required / Committee's Role	Invitees
Overview – Social Services & Wellbeing Directorate / Social Services and Wellbeing (Wales) Act	Attendance from: Corporate Director – Social Services and Wellbeing Head of Adult Social Care Head of Children and Family Services Group Manager – Prevention and Wellbeing	To be scheduled.
The Replacement System for CareDirector (WCCIS)	The Committee requested a briefing on COR-2024-01 on the Corporate Risk Assessment: The threat to business continuity if the Council is unable to procure and implement major ICT systems which support critical services such as a replacement system for CareDirector (WCCIS). CareDirector is a Cloud-based case management solution for social care organisations that supports integrated working across health and social care.	Members and officers for the Briefing and Workshop – TBD. To be scheduled in early 2026 in partnership with IT.
Use of Artificial Intelligence within Social Services and Wellbeing Directorate	The Committee recommended that there be an all Member briefing on the use of artificial intelligence within the Social Services and Wellbeing Directorate and how it is envisaged it could safely aid a reduction in staff numbers.	This will form part of the Digital Strategy which will be reported to the Corporate Overview and Scrutiny Committee Pre-Decision. To be scheduled after the Digital Strategy has been considered at COSC.

Items to be Scheduled to the Committee's Forward Work Programme

- Support for Care Leavers (including input from Employability and Housing).
The Committee have requested that Care Experienced young people be invited for this item.

(Will be a joint report between Social Services, Health and Wellbeing and the Communities and Housing Directorates)
- Regional Partnership Agreement Progress Update (12 months from July 2025)
- Future Arrangements for Advocacy for Adults and Children
- A closed session detailing confidential information presented to Social Services Improvement Board (including live case studies)

Social Services, Health and Wellbeing Overview and Scrutiny Committee**RECOMMENDATIONS MONITORING ACTION SHEET 2025-2026**

Date of Meeting	Agenda Item	Action	Responsibility	Outcome	Response
11 Sep 25	Draft Social Services Annual Report 2024/25	Various – being drafted			
11 Sep 25	Social Services Representations and Complaints Annual Report 2024/25	Various – being drafted			
11 Sep 25	Forward Work Programme Update	<p>The Committee requested that the following items be added to their Forward Work Programme:</p> <p>a. Future Arrangements for Advocacy for Adults and Children;</p> <p>b. A closed session detailing confidential information presented to Social Services Improvement Board including live case studies</p>	Scrutiny/Chair of Committee	Scrutiny to action in Work Planning Meetings with the Chair and Corporate Director. Item added to the Committee's Forward Work Programme.	
11 Sep 25	Forward Work Programme Update	The Committee requested that Care Experienced Young People be invited to attend for the Support for Care Leavers report, when scheduled.	Scrutiny/Chair of Committee	Scrutiny to action in Work Planning Meetings with the Chair and Corporate Director and subsequent report request.	

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