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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: Democratic Services

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

Dyddiad/Date: Friday, 16 January 2026

Dear Councillor,

SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE (FORMERLY SUBJECT OVERVIEW & SCRUTINY COMMITTEE 2)

A meeting of the Social Services, Health and Wellbeing Overview and Scrutiny Committee (Formerly Subject Overview & Scrutiny Committee 2) will be held Hybrid in the Council Chamber - Civic Offices, Angel Street, Bridgend, CF31 4WB / remotely via Microsoft Teams on **Friday, 23 January 2026 at 10:00**.

AGENDA

1 Apologies for Absence

To receive apologies for absence from Members.

2 Declarations of Interest

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

3 Approval of Minutes

3 - 8

To receive for approval the minutes of a meeting of the Subject Overview and Scrutiny Committee 2 of the 06/11/2025.

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4	<u>Healthy Living Partnership - Agency Model</u>	9 - 18
	<u>Invitees</u>	
	Councillor Jane Gebbie - Deputy Leader / Cabinet Member for Social Services, Health and Wellbeing	
	Claire Marchant - Corporate Director - Social Services and Wellbeing	
	Sophie Moore – Group Manager – Prevention and Wellbeing	
	Scott Rolfe – Chief Executive – Halo Leisure	
	Adrian Ballington - Head of Development and Partnerships – Greenwich Leisure Limited	
5	<u>Conclusions and Recommendations</u>	
6	<u>Information Report - Corporate Performance Quarter 2 2025-26</u>	19 - 64
7	<u>Forward Work Programme Update Report</u>	65 - 86
8	<u>Urgent Items</u>	

To consider any item(s) of business in respect of which notice has been given in accordance with Part 4 (paragraph 4) of the Council Procedure Rules and which the person presiding at the meeting is of the opinion should by reason of special circumstances be transacted at the meeting as a matter of urgency.

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

Yours faithfully
K Watson
 Chief Officer, Legal and Regulatory Services, HR and Corporate Policy

Councillors:
 S Aspey
 F D Bletsoe
 S J Bletsoe
 C Davies
 S Easterbrook
 P Ford
 D M Hughes
 RM James
 P W Jenkins
 W J Kendall
 M Lewis
 J Llewellyn-Hopkins
 R Williams

SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE (FORMERLY SUBJECT OVERVIEW & SCRUTINY COMMITTEE 2) - THURSDAY, 6 NOVEMBER 2025

MINUTES OF A MEETING OF THE SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE (FORMERLY SUBJECT OVERVIEW & SCRUTINY COMMITTEE 2) HELD HYBRID IN THE COUNCIL CHAMBER - CIVIC OFFICES, ANGEL STREET, BRIDGEND, CF31 4WB ON THURSDAY, 6 NOVEMBER 2025 AT 10:00

Present

Councillor F D Bletsoe – Chairperson

S J Bletsoe

C Davies

S Easterbrook

GC Haines

Present Virtually

S Aspey
M Lewis

P Ford

RM James

W J Kendall

Apologies for Absence

Councillors D M Hughes, J Llewellyn-Hopkins and R Williams

Invitees

Councillor Jane Gebbie

Deputy Leader/Cabinet member for Social Services, Health and Wellbeing

Claire Marchant
David Wright
Raeanna Grainger
Charlotte Pickin
Sophie Moore
Mark Lewis
Kirsty Williams
Jessica Ware

Corporate Director – Social Services and Wellbeing
Deputy Head of Children and Family Services
Group Manager, IAA & Safeguarding
Service Manager – DoLS/LPS and Secure Estate
Group Manager - Prevention and Wellbeing
Group Manager – Early Years and Young People
Partnership and CSP Manager
Housing Strategy Planning and Commissioning Officer

Officers

Jessica Mclellan
Meryl Lawrence

Scrutiny Officer
Senior Democratic Services Officer - Scrutiny

Declarations of Interest

Claire Marchant – Personal – Item 4 – Chair of the Association of Directors of Social Services Cymru

GC Haines and WJ Kendall – Prejudicial - Item 5 – As Members of Development Control Committee in relation to discussions regarding the proposed plans to extend HMP Parc Prison

F D Bletsoe and S Easterbrook – Personal – Item 5 – As Town Councillors

S Bletsoe – Item 5 – As a trustee registered at Companies House for Wildmill Community Centre

M Lewis – Personal – Item 5 – Operates William Trigg Community Centre in Blaengarw on license from Bridgend County Borough Council

51. Approval of Minutes

Decision Made	<u>RESOLVED:</u> That the minutes of the meetings of Social Services, Health and Wellbeing Overview and Scrutiny Committee dated 11 and 25 September 2025 be approved as a true and accurate record.
Date Decision Made	6 November 2025

52. Annual Corporate Safeguarding Report 2024/25

Decision Made	<u>RESOLVED:</u> Following detailed consideration and discussions with a Cabinet Member and Senior Officers, the Committee made the following recommendations and request for additional information: Recommendations 1. Members referred to a planning application proposing an expansion to HMP Parc Prison and expressed their concerns regarding the increased pressures this could place on Social Services
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	<p>including the provision of additional social care and supportive arrangements on release including the provision of housing and the possible impact on the safeguarding of inmates. The Committee therefore recommended that the Corporate Director consider responding to the consultation highlighting the additional pressures this could place on the Service.</p> <p>2. The Committee acknowledged the improvements made at HMP Parc Prison to reduce rates of suicide and self-harm and improve relationships between the prison and the Social Services and Wellbeing Directorate and recommended that correspondence be sent to the Governor of the prison recognising the work and seeking clarification on how the prison proposes to continue to maintain and ensure safeguarding of all prisoners should the proposed expansion to the prison be approved and to invite them to attend and speak at a meeting of the Committee regarding safeguarding.</p> <p>3. The Committee expressed concern regarding the significant corporate risk posed by the timescales involved around Digital System Replacement and recognising that the implications are Council-wide, recommended that:</p> <ol style="list-style-type: none">a. the budgetary requirements to deliver the transformation within the tight timescale be quantified and that consideration be given to additional resources being allocated to achieve the transition;b. consideration be given to a dedicated ICT Lead Officer being allocated to the replacement project;c. Members receive an urgent written progress update regarding the transition; andd. that correspondence be sent to Lindsey Phillips inviting her to speak to Members regarding the Welsh Local Government Association's Digital in Social Care Framework which was launched in October 2025 and Bridgend's place within it. <p>4. Members expressed concern that home-educated learners may not have adequate contact with the Local Authority and the Committee were advised that the level is set by National Guidance. The Committee recommended that legal advice be sought as to whether the Guidance can be tailored to have increased contact with the learners and ensure they are appropriately safeguarded. The Committee further recommended to refer the matter to the Education and Youth Services Overview and Scrutiny Committee to consider adding the matter to their Forward Work Programme to monitor the situation.</p>
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	Additional Information Requested
	<p>5. The Committee expressed concern regarding the perceived delay in utilising the £1m non-recurring budget approved by Cabinet to support schools in reducing permanent exclusions and requested an update regarding the use of the funding, when it will be utilised and the proposal being developed in partnership with schools including when it will be considered for decision.</p>
Date Decision Made	6 November 2025

53. Community Hubs Strategy

Decision Made	<p><u>RESOLVED:</u></p> <p>Following detailed consideration and discussions with a Cabinet Member and Senior Officers, the Committee made the following recommendations and request for additional information:</p> <p>Recommendations</p> <p>6. Members were advised that key stakeholders in each community would be consulted on the proposed Strategy and their views sought to shape how the Hubs look in their particular area and the Committee recommended that an all-Member workshop be arranged to allow Councillors to also feed into the Strategy and that local Members are specifically consulted regarding proposed Hubs within their respective Wards.</p> <p>7. The Committee discussed the lack of alignment between education and the Strategy and recommended that consideration be given to the possibility of utilising some of the school estate as potential Hubs and that this aspect be included in the Strategy.</p> <p>Additional Information Requested</p> <p>8. The Committee discussed priority areas within Bridgend and requested a copy of the Regional Partnership Board Strategy which identified the seven priority areas for Bridgend County Borough based on level of need and current service provision.</p>
Date Decision Made	6 November 2025

Forward Work Programme Update

Decision Made	<u>RESOLVED:</u> That the Committee approved the Forward Work Programme (FWP) in Appendix A subject to the inclusion of the recommendations below, noted the Recommendations Monitoring Action Sheet in Appendix B and noted that the FWP as approved by the Committee would be reported to the next meeting of the Corporate Overview and Scrutiny Committee: 1. External Review of Strength Based Outcome Focused Practice Model being embedded into Adult Social Care; and 2. Further Report regarding the Community Hubs Strategy (at the appropriate time early in 2026)
Date Decision Made	6 November 2025

55. Urgent Items

Decision Made	None
Date Decision Made	6 November 2025

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

The meeting closed at 13:31.

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Agenda Item 4

Meeting of:	SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	23 JANUARY 2026
Report Title:	HEALTHY LIVING PARTNERSHIP – AGENCY MODEL
Report Owner: Responsible Chief Officer / Cabinet Member	CLAIREE MARCHANT CORPORATE DIRECTOR – SOCIAL SERVICES AND WELLBEING
Responsible Officer:	SOPHIE MOORE GROUP MANAGER PREVENTION AND WELLBEING
Policy Framework and Procedure Rules:	There is no effect upon the policy framework or procedure rules.
Executive Summary:	<p>The purpose of this report is to update the Social Services, Health and Wellbeing Overview and Scrutiny Committee on a proposed variation to the Healthy Living Partnership Agreement between Bridgend County Borough Council (BCBC) and Greenwich Leisure Limited (GLL) / HALO Leisure. The proposal seeks to transition from the current principal operating model to an agency model, whereby GLL/HALO would deliver leisure services on behalf of the Council rather than as an outsourced provider. The change is driven by updated HM Revenue & Customs(HRMC) guidance issued in March 2023, which enables local authorities to treat leisure income as non-business for VAT purposes. Adoption of the Agency Model is expected to improve VAT efficiency, resulting in ongoing financial savings for the Council without adversely impacting service quality or customer experience.</p> <p>The report outlines the background to the existing contract, the rationale for the proposed variation, the anticipated financial benefits, and governance considerations. External legal and VAT advice has been sought to inform the proposal. The Committee is asked to consider the report and provide feedback to inform the next stage of decision-making.</p>

1. Purpose of Report

1.1 The purpose of the report is to set out the reasons for the proposed variation to the Healthy Living Partnership Agreement between Bridgend County Borough Council and Greenwich Leisure Limited (GLL) /HALO Leisure to operate as an agent rather than as principal, together with the anticipated financial benefits that will accrue.

2. Background

2.1 The existing Healthy Living Partnership Agreement is with GLL and managed by HALO Leisure. The current contract model outsources the management of leisure services/assets to GLL/HALO as outsourced supplier acting as principal. There is an option to vary the agreement to allow GLL/HALO to manage the leisure assets as an agent (referred to as 'the Agency model') rather than as a principal.

2.2 In October 2024 Cabinet agreed to the proposed extension of the term of the Healthy Living Partnership Agreement with GLL/ HALO until 2032. Officers for the Council have since agreed the terms and entered into a deed of variation to extend the term of the agreement and published the required contract modification notice.

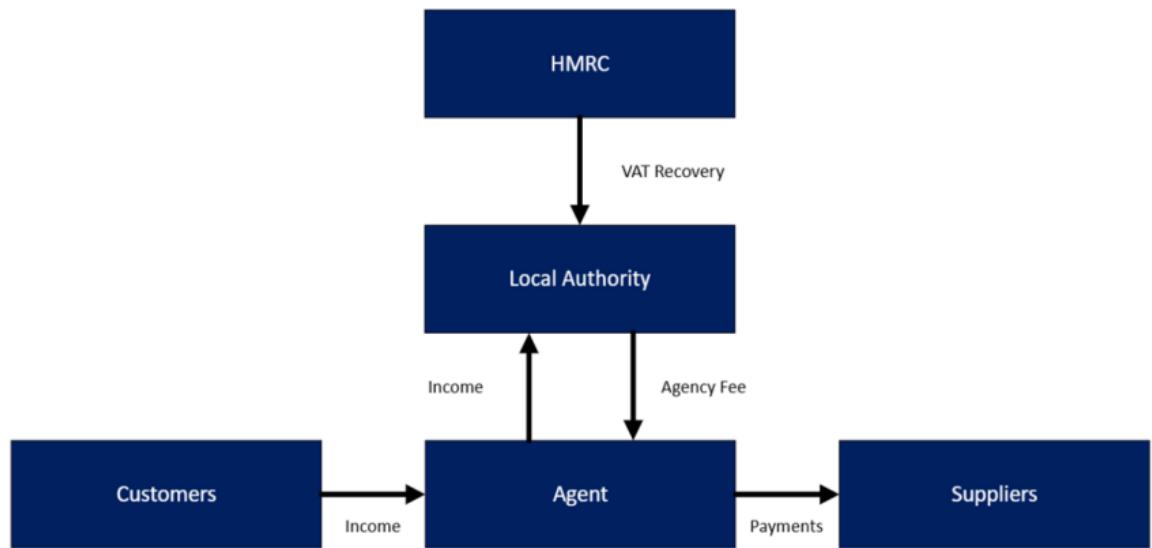
2.3 The agreed extension to the Healthy Living Partnership Agreement from April 2027 – March 2032 will support circa £200,000 per year savings linked to the Council's medium term financial strategy (MTFS). This supports the budget reduction proposal included in the draft Medium Term Financial Strategy 2026-27 to 2029-30 – SSW1 Achieve better value for money by Cabinet considering a recommendation to extend the Healthy Living Partnership (£200,000 saving proposed for 2027-28).

2.4 The Healthy Living Partnership has been working on solutions to reduce costs, increase income and deliver savings without impacting fundamentally on service delivery. The proposed contract variation for GLL/HALO to operate the leisure facilities as an agent rather than a principal delivers significant on-going financial benefits to the Council without impacting on the quality of service to our customers and could secure an additional saving of circa £200,000 per annum. This supports the budget reduction proposal included in the draft Medium Term Financial Strategy 2026-27 to 2029-30 – SSW3 Achieve better value for money by Cabinet considering a recommendation to explore an agency model for the Health Living Partnership (£200,000 saving proposed for 2027-28).

2.5 In March 2023, following an Upper Tribunal (Tax and Chancery Chamber) decision in 2022, HMRC published a policy paper (Appendix 1) setting out changes to VAT treatment of local authority leisure services which states that where local authorities provide leisure services to the public, they can treat income from leisure services as 'non-business' for VAT purposes. This change to VAT treatment presents an opportunity to secure savings through adopting the Agency Model.

2.6 Under the Agency Model, GLL/HALO would act as the Council's agent for the delivery of leisure services rather than as an outsourced supplier acting as principal so that the arrangement would entail the Council providing leisure services to the public through its agent GLL/HALO. The intention being that under such an arrangement the income generated could be treated as non-business for VAT purposes. GLL/HALO would continue to provide services and staff to run the centres.

Figure 1. Overview of VAT recovery



3. Current situation/ proposal

- 3.1 The Council's contract with GLL/HALO is a "traditional" leisure concession contract, where the Council leases the leisure facilities to GLL/HALO for a peppercorn rent, and HALO operates the facilities as principal providing the leisure services to the public. GLL/HALO retains the income from the leisure facilities and pays the Council an agreed share of any surplus generated.
- 3.2 As HALO provides the leisure facilities to the public as principal, the VAT liability of the sporting income is defined by HALO's status. As an eligible body for the provision of sport, some of GLL's/HALO's supplies are exempt from output VAT and some are liable to output VAT at the standard rate. GLL/HALO is therefore required to undertake a partial exemption calculation to determine how much input VAT it is able to reclaim on the costs incurred in running the services. The irrecoverable portion of input VAT is incurred as a cost and is reflected in the costs of the services between GLL/HALO and the Council.
- 3.3 It is believed that up to 2024, the above arrangement represented the most VAT efficient route legally available, with the benefit of VAT exempt income outweighing the irrecoverable portion of input VAT.
- 3.4 However, following the court rulings in favour of local authorities and the determination that treating leisure services as non-business would not distort competition; HMRC issued Brief 3 in March 2023 (Appendix 1). The Brief makes it clear that a local authority's income direct from users from the provision of leisure services can be treated as 'non-business' for VAT purposes, rather than 'exempt'. This is the key change of circumstances from which the Agency Model opportunity is derived.
- 3.5 The change to HMRC policy potentially provides the Council, and its current partner GLL/HALO, with an opportunity to implement an arrangement, the 'Agency Model',

with benefits to all parties by way of reduced costs, whilst protecting the Council's risk position.

- 3.6 Under the Agency Model, GLL/HALO would become the Council's agent for income collection. GLL/HALO would continue to commission / provide services and staff to run the facilities. The Agency Model would result in GLL/HALO providing a standard rated, taxable service to the Council.
- 3.7 Due to the changes in the VAT liability of supplies of leisure services by local authorities, there would be no adverse impact on the Council's VAT recovery position such that VAT should remain recoverable in full and therefore there will be an overall 'saving' on the basis of moving from a position where GLL/HALO can recover VAT only partially, to one where full VAT recovery is achieved for both parties, with no additional cost for the users.

3.8 VAT Implications on Land and Property Transactions

- 3.8.1 The Council has obtained initial external VAT advice regarding the Agency Model and its potential implementation with more in depth advice to be sought.
- 3.8.2 This initial advice advised the Council that provided the Agency Model arrangements are structured in the correct way, and the legal agreements reflect this, it would be acceptable from a VAT perspective for GLL/HALO to run the leisure centres as an agent rather than a principal.
- 3.8.3 However, in working towards the implementation of the Agency Model the following will have to be considered and addressed:
 - The signage, website, marketing and other documentation related to the leisure facilities would need to make it clear to users of the facilities that the facilities were being provided by the Council and that GLL/HALO was acting as its agent and invoices issued would need to show the Council's VAT number.
 - Procedures would need to be put in place to ensure GLL/HALO provides the relevant information to the Council in a timely manner to enable it to correctly declare any VAT that is due on income on the Council's monthly VAT returns.
 - The land interest in relation to the facilities may need to change from a lease to a license to occupy.

3.9 Legal and procurement implications

- 3.9.1 The Council has obtained initial external legal advice regarding the Agency Model with more in depth advice to be provided.
- 3.9.2 This initial advice advised that the Agency Model variation would amount to a modification to the procured terms of the contract and that there is a risk that such a modification could be subject to a procurement challenge. Further advice is being prepared setting out the potential options to compliantly modify the contract and associated risks.

3.9.3 Any risk of a procurement challenge will need to be balanced with the financial benefit for the Council of adopting the Agency Model. Any decision also needs to reflect that the most likely procurement challenge would come from the small number of GLL/HALO's direct competitors in the sector, who are also likely to be exploring the same type of agency model arrangement with their partners.

3.10 Preferred Option

3.10.1 The preferred option is for GLL/HALO to operate the Council's leisure facilities as an agent rather than a principal in order to deliver ongoing savings.

3.10.2 An alternative option would be to continue the current operating model. GLL/HALO would continue to operate the Council's leisure facilities for the remaining term of the current/extended contract (up to 31st March 2032). Under this option the Council would not benefit from the significant financial savings to be achieved from implementing the 'Agency Model', as outlined in paragraph 2.4 and therefore would not achieve the identified draft MTFS saving of £200,000 in 2027-28

3.10.3 It should be noted that a number of GLL's other clients have either adopted the agency model of operation or are moving towards adoption.

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 proposed variation to the Healthy Living Partnership contract supports the Well-being of Future Generations (Wales) Act 2015 and directly contributes to Bridgend County Borough Council's Corporate Well-being Objectives, particularly those relating to improving the well-being of residents, reducing inequalities, and ensuring sustainable use of resources.

The proposal demonstrates the five ways of working as follows:

- **Long-term:**

By strengthening the financial sustainability of the Healthy Living Partnership through the Agency Model, the Council is better placed to secure the long-term future of its leisure facilities and services. This supports the ongoing delivery of affordable and accessible opportunities for physical activity, contributing to improved physical and mental well-being for residents now and in the future.

- **Prevention:**

Leisure services play a key role in preventing ill health and supporting active

lifestyles. Protecting and sustaining these services through a more efficient operating model helps reduce future demand on health and social care services and supports the Council's objective to help people live healthier, more independent lives.

- **Integration:**

The proposal aligns with the Council's wider priorities around financial sustainability, community well-being, and tackling health inequalities. It complements strategies aimed at supporting inclusive communities and improving outcomes for those most at risk of poor health.

- **Collaboration:**

The Agency Model has been developed in partnership with GLL/HALO. This collaborative approach supports effective partnership working and reflects a shared commitment to delivering value for money and positive outcomes for Bridgend residents.

- **Involvement:**

The proposed change does not alter service delivery from a customer perspective. Existing engagement and feedback mechanisms will continue to ensure that the needs of local communities and service users inform the ongoing development of leisure services.

Overall, the proposal supports Bridgend County Borough Council's Well-being Objectives by maintaining high-quality leisure provision in a financially sustainable way, helping residents to be healthier, more active, and more resilient.

6. Climate Change and Nature Implications

6.1 The proposed Agency Model is a contractual and financial change and does not directly impact the day-to-day operation or physical use of the Council's leisure facilities. There are therefore no immediate negative impacts on climate change, nature, or biodiversity arising from this decision.

By improving the financial resilience of the Healthy Living Partnership, the proposal supports the Council's commitment to the sustainable management of its assets and its wider decarbonisation ambitions. A more financially stable partnership strengthens the Council's ability to plan and invest in energy efficiency measures, carbon reduction initiatives, and environmentally responsible maintenance of leisure facilities over the life of the contract. The proposal is not expected to have any adverse impact on wildlife, nature, or biodiversity within the County Borough.

7. Safeguarding and Corporate Parent Implications

7.1 There are no safeguarding or corporate parent implications arising from this report.

8. Financial Implications

- 8.1 This is an existing long-term contract and the proposed Agency Model with GLL/HALO will secure recurring savings of circa £200,000 from 2027-28 without adversely affecting the on-going delivery or quality of service to local residents.
- 8.2 The proposed contract variation for GLL/HALO to operate the Council's leisure facilities as agent will not result in increased costs to the contract but will offer significant ongoing saving
- 8.3 Both GLL/HALO and the Council will continue to undertake high-level modelling over the coming months to establish the exact income/expenditure levels for the remainder of the contract. How much of this potential financial benefit accrues to the Council will depend on subsequent negotiations with GLL/HALO. However, the Council has already indicated to GLL/HALO that if the Agency Model is implemented then the Council's expectation is that the full financial benefit of the Agency Model arrangement should accrue to the Council.

9. Recommendation(s)

- 9.1 It is recommended that the Committee consider the content of the report and provide feedback to be considered by Cabinet in advance of the decision as to whether to approve the variation of the Healthy Living Partnership Agreement between the Council and Greenwich Leisure Limited to operate the leisure centres as an agent rather than a principal for the remainder of the current contract term.

Background documents

None

Policy paper

Changes to VAT treatment of local authority leisure services

Published 3 March 2023

Purpose of this brief

This brief explains a change in the VAT treatment of leisure services provided by local authorities.

Who needs to read this

You should read this brief if you are a local authority.

Background

Local authorities are currently treated as undertaking a business activity if they provide leisure services to members of the public.

This treatment is based on the understanding that when local authorities provide leisure services they are not acting as a public authority. A local authority acts as a public authority when they're carrying out their statutory public interest activities for the service of the community.

This treatment was challenged by a number of local authorities and the matter was considered by the courts.

This litigation has now concluded. The courts have found that local authorities' leisure services are provided under a statutory framework and can be treated as non-business for VAT purposes.

The relevant cases are:

- Midlothian Council v HMRC [2020] UKFTT 433 (TC)
- Mid-Ulster District Council v HMRC [2020] UKFTT 434 (TC)
- HMRC v Mid-Ulster District Council [2022] UKUT 00197 (TCC)
- HMRC v Chelmsford City Council [2022] UKUT 00149 (TCC)

Before a public body, such as a local authority, can treat a supply as non-business it must be shown that this treatment would not significantly affect competition.

HMRC has conducted a detailed analysis of the leisure services sector. We have found that allowing local authorities to treat their supplies of leisure services as non-business would not significantly affect competition.

Impact on local authorities

Local authorities that provide in-house leisure services to members of the public currently treat these supplies as business activities for VAT purposes and either:

- charge their customers VAT at the standard rate
- apply the exemption

Local authorities can now revisit this position and apply the non-business treatment to their supplies of leisure services. They can also submit claims to HMRC.

If you've previously submitted a claim, you need to review and resubmit this with supporting evidence. This is to reduce the delay in authorising repayments.

If you've made a claim for overpaid output tax, you must only include the VAT paid in relation to leisure services.

You should send your claim to: lasector.mailbox@hmrc.gov.uk. You should include '2023 LA VAT non-business' in the subject line of your email.

More information

Any other income received by a local authority is not affected by this change. For example, this includes income from supplies of:

- catering
- adult or children's clothing
- water bottles
- sporting goods
- items from vending machines
- car parking
- sporting lets or other sporting activities previously treated as exempt

Find more information about [how to correct VAT errors and make adjustments or claims \(VAT Notice 700/45\)](#).

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Agenda Item 6

Meeting of:	SOCIAL SERVICES, HEALTH AND WELLBEING OVERVIEW AND SCRUTINY COMMITTEE
Date of Meeting:	23 JANUARY 2026
Report Title:	INFORMATION REPORT – CORPORATE PERFORMANCE QUARTER 2 2025-26
Report Owner: Responsible Chief Officer / Cabinet Member	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 Corporate Performance Quarter 2 2025-26 report that was reported to Corporate Overview and Scrutiny Committee (COSC) on 11 December 2025 (Appendix A).- the Corporate Performance Dashboard for Quarter 2 2025-26 (Appendix 1).- The Regulatory Tracker updated for Quarter 2 2025-26 (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 Corporate Performance Quarter 2 2025-26 reported to Corporate Overview and Scrutiny Committee (COSC) on 11 December 2025, for Members' information.

2. Background

2.1 Following the reporting of the Corporate Performance Quarter 2 2025-26 to COSC for the monitoring of the quarterly performance, the report, performance dashboard and updated Regulatory Tracker for Quarter 2 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 Corporate Performance Quarter 2 2025-26 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 2 2025-26
Appendix 2 - the Regulatory Tracker updated for Quarter 2 2025-26

2.4 The background to this report is set out in Section 2 of **Appendix A** – Corporate Performance Quarter 2 2025-26 report to COSC on 11 December 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 Corporate Performance Quarter 2 2025-26 report to COSC on 11 December 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 Q2 2025-26 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 Corporate Performance Quarter 2 2025-26 report, the Corporate Performance Dashboard Quarter 2 2025-26 and the Regulatory Tracker updated for Quarter 2 2025-26 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:	11 DECEMBER 2025
Report Title:	CORPORATE PERFORMANCE QUARTER 2 2025-26
Report Owner: Responsible Chief Officer / Cabinet Member	CHIEF OFFICER – FINANCE, HOUSING & CHANGE CABINET MEMBER FOR FINANCE & PERFORMANCE
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:	This report provides – <ul style="list-style-type: none"> an overview of performance against wellbeing objectives in the Corporate Plan 2023-28 at quarter 2 2025-26. analysis of performance on the commitments and performance indicators in the Corporate Plan Delivery Plan (CPDP) 2025-26. 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 2 (Q2) of 2025-26. This is the third year of the 5-year Corporate Plan 2023-28 and the first monitoring report on the 2025-26 Corporate Plan Delivery Plan (CPDP). This report also contains analysis of performance against regulator recommendations.

2. Background

2.1 On 1 March 2023 Council agreed the Corporate Plan 2023-28. In April 2025 Council agreed the Corporate Plan Delivery Plan 2025-26 which set out aims, commitments, and performance indicators to help measure the Council's progress on its priorities. The new delivery plan is more focussed than in the previous two years following a robust review, aligning with the current corporate priorities and resources. The key changes made were:

- Wellbeing Objectives (WBOs) were reduced from seven to four with some merged / subsumed into others. The four that remain focus on –
 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
- Aims reduced from 41 to 21.

- Performance Indicators (PIs) (that measure the ‘business as usual’) reduced from 108 to 65.
- The Ways of Working measures, previously a standalone part of the Corporate Plan, have now been integrated into the WBOs.
- Commitments (that measure our initiatives or projects) reduced from 80 to 61.

2.2 Each Directorate produced a business plan, adding milestones against each commitment. These plans can be viewed via the staff intranet.

2.3 Data quality and accuracy templates have been completed for each PI to clearly define what the PI is measuring and scope of data included/excluded, calculation/verification methods, and responsible officers.

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

2.5 The regulatory tracker, established in 2023 has been integrated into the quarterly performance monitoring process.

3. Current situation / proposal

3.1 The Q2 performance dashboard (**Appendix 1**) provides BRAYG (Blue, Red, Amber, Yellow, Green) judgements on progress against the CPDP 2025-26 for our 61 commitments and outlines key activities and achievements during Q1 and Q2, and next steps where appropriate. It also provides verified Q2 values where available and supporting comments for the 65 PIs. The simple scale used to score performance is set out in our Performance Management Framework and summarised in Table 1 and 2 below.

3.2 Summary of progress on Corporate Commitments

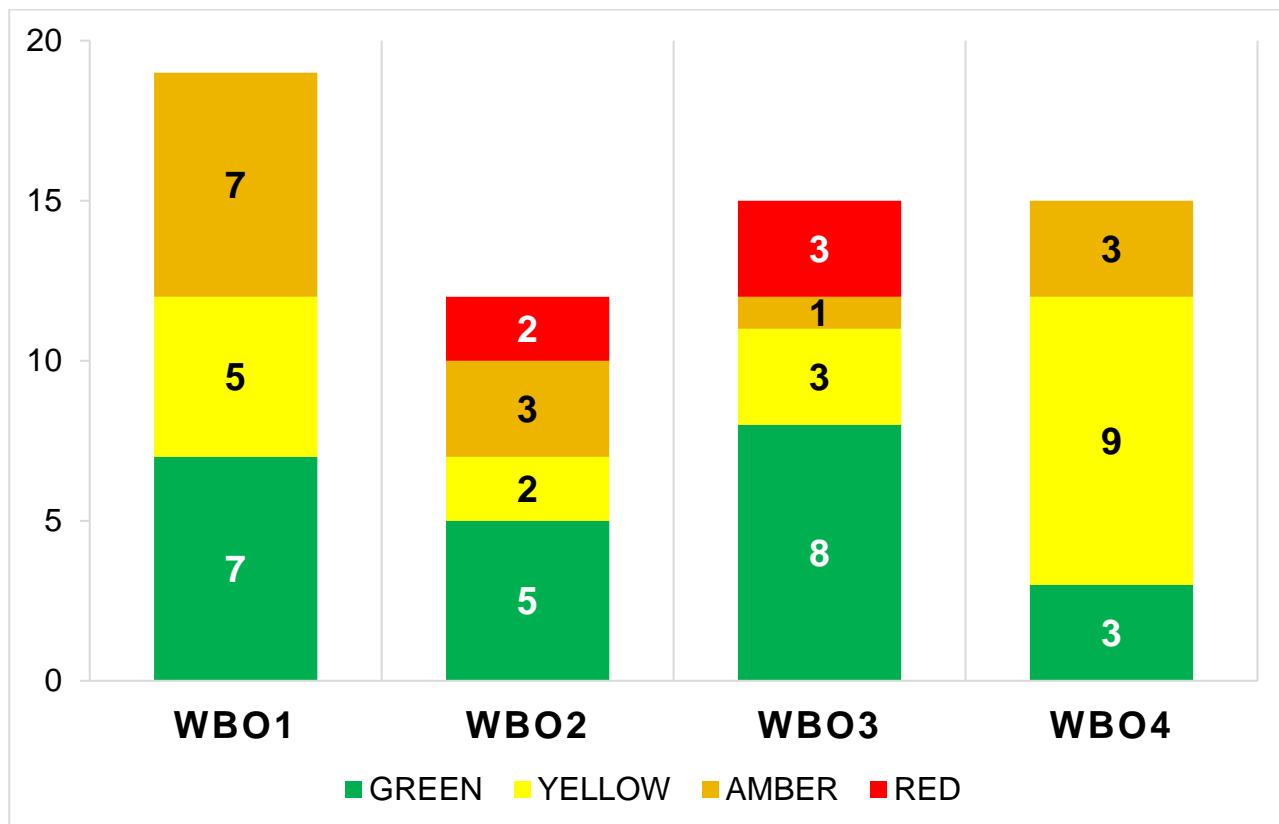
Table 1 shows the performance judgements for the 61 commitments at Q2 2025-26, with Chart 1 on the next page breaking this down further to show performance for each WBO.

Table 1

Status	Meaning of this status	Performance at Q2	
		Number	%
COMPLETE (BLUE)	Project is completed	0	-
EXCELLENT (GREEN)	As planned (within timescales, on budget, achieving outcomes)	23	37.70%
GOOD (YELLOW)	Minor issues. One of the following applies - deadlines show slippage, project is going over budget or risk score increases	19	31.15%
ADEQUATE (AMBER)	Issues. More than one of the following applies - deadlines show slippage, project is going over budget or risk score increases	14	22.95%

UNSATISFACTORY (RED)	Significant issues – deadlines breached, project over budget, risk score up to critical or worse	5	8.20%
	Total	61	100%

Chart 1 - Overall Performance on Commitments by Wellbeing Objective



3.3 Summary of Performance Indicators

At Q2 we can evaluate performance on 36 quarterly PIs, the remaining 29 are annual and will be reported at Q4 only.

- 3.4 All of the 36 quarterly PIs have verified Q2 values, however only 35 could be compared against their target to award a RAYG (Red, Amber, Yellow, Green) status. One PI has not been provided with a target for 2025-26 and the data is monitoring trend progress only. Further details of this PI (sickness absence) are provided in paragraph 3.7 and 3.8.
- 3.5 Table 2 below shows overall performance for PIs at Q2, and Chart 2 on the next page shows performance for each WBO.

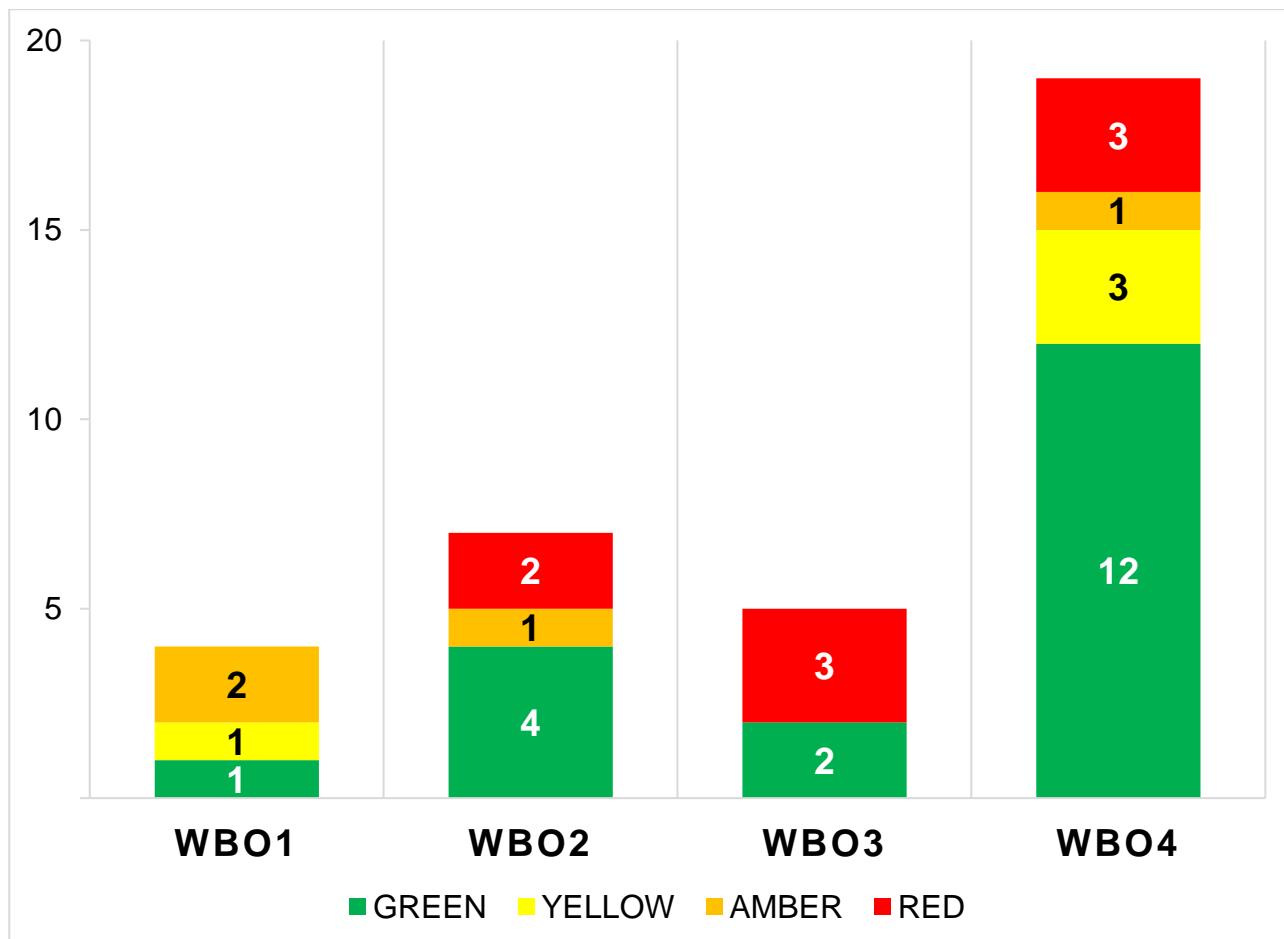
Table 2

Status	Meaning of this status	Performance at Q2	
		Number	%
EXCELLENT (GREEN)	On target <u>and</u> improved or is at maximum	19	54.3%
GOOD (YELLOW)	On target	4	11.4%

APPENDIX A

ADEQUATE (AMBER)	Off target (within 10% of target)	4	11.4%
UNSATISFACTORY (RED)	Off target (target missed by 10%+)	8	22.9%
	Total	35	100%

Chart 2 - Overall Performance on Performance Indicators by Wellbeing Objective



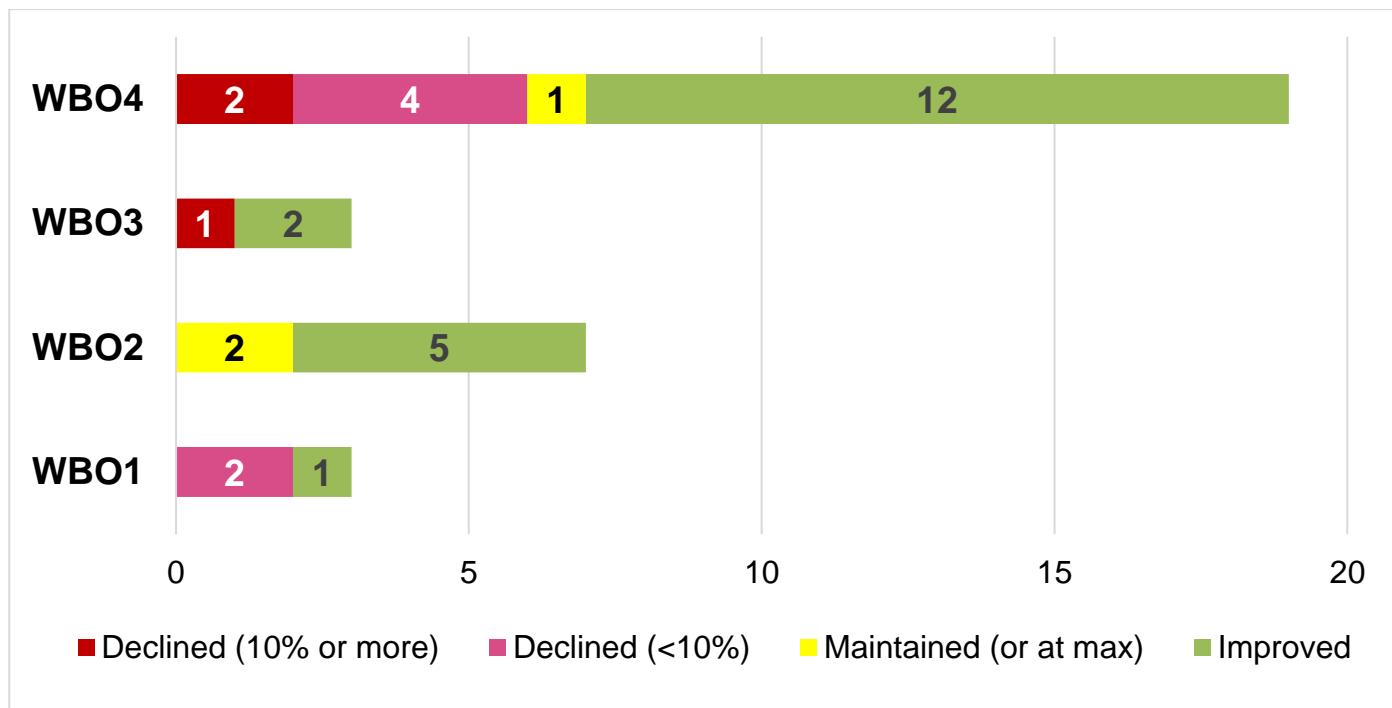
3.6 Trend data allows us to compare our Q2 values with the same period last year (Q2 2024-25). Comparable data for Q2 is available for 32 of the 36 quarterly PIs. Of the remaining four, two indicators do not have comparable verified data for Q2 last year because they are new, and two PIs are “trend not applicable” due to the way the targets are profiled. Trend analysis for Q2 performance is set out in Table 3 below, and Chart 3 on the next page, the trend analysis for each WBO.

Table 3

Performance Indicators Trend Definition		Trend at Q2	
		Number	%
↑	Performance has improved	20	62.5%
↔	Performance maintained (includes those at maximum)	3	9.375%

	Declined performance (by less than 10%)	6	18.75%
	Declined performance (by 10% or more)	3	9.375%
	Total	32	100%

Chart 3 – Performance Indicator Trend by Wellbeing Objective



Summary of Sickness Absence Performance

3.7 There is no target set for sickness absence for 2025-26, 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.

3.8 The cumulative days lost per full time equivalent (FTE) employee at Q2 2025-26 is 5.89 days, a 5.3% decrease compared to the 6.22 days reported at Q2 last year. This demonstrates an improving trend that is mirrored within directorate and schools' data with the exception of the Chief Executive's Directorate. The proportion of days lost that are classified as short-term absences (7 days or less) has decreased slightly from 22% in 2024-25 to 19% in 2025-26. The most common absence reason continues to be Stress/Anxiety/Depression (not work related).

3.9 Summary of Performance against MTFS Savings Targets

At Q2 £5.593 million (67%) of the £8.379 million proposed budget reductions set out in the MTFS for 2025-26 have been achieved, with £7.522 million (90%) likely to be achieved by year end. A breakdown of the most significant budget reduction proposals unlikely to be achieved in full is included in **Appendix 1**, and additional financial information is provided in the Budget Monitoring 2025-26 Quarter 2 Revenue Forecast report presented to Cabinet on 21 October 2025.

3.10 Summary of Performance against Regulator Recommendations

Updates on current open Regulator Reports/Audits are collected as part of the corporate quarterly performance data collection. The Regulatory Tracker updated for Q2 2025-26 is included as **Appendix 2**. Summary of current reports and their BRAYG status judgements is provided in Table 4. A more detailed analysis was provided to the Governance and Audit Committee in a report on 30 October 2025.

Table 4

Audit/Inspection	Recommendations					
	Total	Blue	Green	Yellow	Amber	Red
Audit Wales, Arrangements for Commissioning Services (June 2025)	3			3		
Care Inspectorate Wales (CIW) Improvement Check Children's Social Care Services (June 2025)	16		11	2		3
CIW Inspection Report on Foster Wales Bridgend (June 2025)	5			5		
Audit Wales, Setting of Well-being Objectives	3	2	1	-	-	-
CIW Inspection of Golygfa'r Dolydd (September 2024)	5	2	3	-	-	-
Audit Wales, Digital Strategy Review	3	1	-	-	2	-
Audit Wales, Use of Service User Perspective and Outcomes	3	2	-	-	1	-
CIW Improvement Check Visit to Children's Social Care Services (Nov 2022)	10	8	-	1	1	-
Transformational Leadership Programme Board, Baseline Governance Review Cwm Taf Morgannwg RPB	7	3	1	1	2	-
Audit Wales, Review of Arrangements to Become a 'Digital Council'	3	2	-	-	1	-
Total	58	20	16	12	7	3

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:-

- THRIVING - A prosperous place with thriving communities

- EMPOWERING - Supporting our most vulnerable
- ACHIEVING - Enabling people to meet their potential
- MODERNISING - Creating modern, seamless public services

5.2 The 5 ways of working set out in the Well-being of Future Generations (Wales) Act have also been considered in the development of the Council's wellbeing objectives. The ways of driving and measuring them is also contained in the Corporate Plan Delivery Plan 2025-26.

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 2025-26 have been developed to help assess the Council's performance in areas including climate change and nature.

7. Safeguarding and Corporate Parent Implications

7.1 There are no specific implications from this report on safeguarding or corporate parenting. However, some of the measures and projects included within the Corporate Plan 2023-28 and annual delivery plan for 2025-26 have been developed to help assess the Council's performance in areas including safeguarding and 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 2 for the year 2025-26.

Background documents

None

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Corporate Performance Dashboard

Quarter 2 2025-26



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



KEY:**How will we mark or score ourselves**

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

	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

THRIVING

A prosperous place with
thriving communities

**EMPOWERING**

Supporting our most
vulnerable



TEAM BRIDGEND

Our priorities for 2025/26

**ACHIEVING**

Enabling people to meet
their potential

**MODERNISING**

Creating modern, seamless
public services



WBO1: A prosperous place with thriving communities

WBO1.1: Moving towards net zero carbon, and improving our energy efficiency

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CED57 CP WBO1.1	Levels of nitrogen dioxide (NO ₂) pollution in the air (micrograms per m ³) (CEX SRS) Lower Preferred	43.60	40					Annual Indicator - To be reported at Q4
DCO20.01 CP WBO1.1	Annual Gas Consumption across the Authority – kWh (COMM) Lower Preferred	21,122,938	20,000,000					Annual Indicator - To be reported at Q4
DCO20.02 CP WBO1.1	Annual Electricity Consumption across the Authority – kWh (COMM) Lower Preferred	15,019,064	14,000,000					Annual Indicator - To be reported at Q4
DCO23.05 CP WBO1.1	Reduction in emissions (across our buildings, fleet & equipment, streetlighting, business travel, commuting, homeworking, waste, procured goods and services) (COMM) Higher Preferred	1%	5%					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.1.1	Invest in energy efficiency improvements to the Council's estate and assets. (COMM)	AMBER (Adequate)	Quarter 2: Work has continued on established programmes of work to install energy efficiency measures across the Council's estate including LED lighting, building insulation, solar PV systems, and electric vehicle charging infrastructure. Examples include: Coleg Cymunedol Y Dderwen (CCYD) - new LED lighting on the outdoor pitches. Porthcawl Comprehensive School - solar PV on a new roof, funded through a Salix loan (invest to save). Civic Offices - replacement of end of life water heater with a heat pump to provide hot water	We will continue to work to install energy efficiency measures across the council's estate. We are awaiting the launch of the Refit scheme. We will replace the end of life fossil fuel systems with the £180,000 grant award from Welsh Government.
WBO1.1.2	Implement our Air Quality Action Plan and monitor its effectiveness in improving air quality along Park Street (CEX SRS)	GREEN (Excellent)	Quarter 2: The Action Plan has been implemented with Measure 18 (Deny all access onto St Leonards Road) still retained and will be reviewed in 2026, dependent on 2025 results. Results up to end of September, show OBC140 and OBC110 at an annual average of 41 ug/m ³ , and OBC123 at 40 ug/m ³ . Monitoring data from August 2025 is not available, as the monitoring tubes were vandalised. Results elsewhere across the Borough showed lower NO ₂ concentrations in August, and therefore had these results been available the running averages would be more favourable. Shared Regulatory Services (SRS) successfully obtained Welsh Government (WG) Funding via the Local Air Quality Support Fund, which will be utilised to install two indicative real-time monitors as of November 2025.	The Annual Report is scheduled to be presented to Cabinet on 18th November 2025 meeting.

WBO1.2: Protect landscapes and open spaces

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DCO23.06 CP WBO1.2	Number of blue flag beaches (COMM) Higher Preferred	3	3					Annual Indicator - To be reported at Q4
DCO23.07 CP WBO1.2	Number of green flag parks and green spaces (COMM) Higher Preferred	2	2					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.2.1	Deliver projects such as woodland enhancement, develop and protect our natural environment in partnership with our communities and key stakeholders as part of our Bridgend Biodiversity Plan (COMM)	GREEN (Excellent)	Quarter 2: The One Common Connection Project is up and running and we are in the process of signing landowner agreements so that work can commence. Local Nature Reserves site safety inspections have taken place. We have continued to work with Llais y Goedwig on the management of Bedford Park and with Tremains Rangers in Tremains Wood. Ash dieback work has been commissioned and undertaken in Bedford Park Tremains Wood and Craig Y Parcau. New ponds have been delivered and completed with new fencing delivered to increase safety. New paths are completed at Bedford Park and a successful launch event. New Ash Die Back work has been issued across four of the LNRs. 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. The Duty Plan is currently being reviewed and contract awarded for the 2025-28 Duty Plan which is due for completion by end of January 2026.	

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WBO1.3: Promote the conditions for economic growth and prosperity

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DCO23.03 CP WBO1.3	Number of businesses receiving support through Shared Prosperity Funding (COMM) Higher Preferred	37	15	7	25	24	↑	Quarterly Indicator Target Setting: This is the final year of the funding so will attempt to maximise the benefits locally where possible with reduced funding available. Performance: Accumulative position at Q2 shows we are on target and we have allocated all of the current available SPF funding.
DCO23.04 CP WBO1.3	Number of business start-ups assisted (COMM) Higher Preferred	94	30					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.3.1	Develop funding bids enhance the economy and stimulate new job opportunities (COMM)	AMBER (Adequate)	Quarter 2: During Q1 and Q2 we have worked with UK Government, Welsh Government (WG) and Cardiff Capital Region (CCR) to develop projects, including the new UK Government Local Growth Fund (the replacement of the current Shared Prosperity Fund). As the UK SPF is coming to an end in March 2026 and we have yet to receive firm news on future funding there is uncertainty regarding the continuation of key projects.	We will continue to work with UK Government, WG and CCR to develop projects, including the new Local Growth Fund
WBO1.3.2	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)	YELLOW (Good)	Quarter 2: A total of 31 start up grants have been awarded by the end of Q2. By the end of Q2 the team had delivered total of 23 business development grants and three business feasibility grants. Both grants are 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. Since May 2025 we have operated a pop-up shop in Maesteg Market. The initiative has attracted 86 expressions of interest and has accommodated eight start-ups, bringing vibrancy and footfall to Maesteg Market.	
WBO1.3.3	Invest an additional £7.75m of Shared Prosperity Funding in projects in the County Borough by 2026, with third sector partners, including in people and skills, supporting local businesses, and developing communities and place (COMM)	YELLOW (Good)	Quarter 2: As at the end of Q2, all projects are reporting full projected spend for the year. Shared Prosperity Funding (SPF) comes to an end in March 2026. Its replacement, the Local Growth Fund will initially be given to WG. WG will shortly be holding a 6-week consultation period to determine the shape of the next program. As a result, we do not know the specific scope on the offer which will mean there will be very little time to prepare and share bid documentation with Cabinet.	
WBO1.3.4	Improve sustainable and active travel choices, to increase connectivity and greener travel choices in line with our strategic transport projects (COMM)	YELLOW (Good)	Quarter 2: Contract has been let for active travel works in Brackla and work will commence early in 2026. Funding bids for active travel projects for financial year 2026-27 have been developed and submitted to CCR ready for agreement with WG later in the year. Strategic Transport priorities for 2026-27 are being developed in preparation for agreement with Cabinet.	A report will be brought to Cabinet early in the New Year outlining the work on current projects and agreeing objectives going forward.

WBO1.4: Regenerate our town centres and Valleys

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DCO23.01 CP WBO1.4	Number of commercial properties assisted through the enhancement grant scheme (COMM) Higher Preferred	7	4					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO1.4.1	Deliver a Transforming Towns programme of 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 2: The Transforming Towns Programme has been fully allocated for this financial year in order to ensure the grant is used to its full capacity. Conversations will continue with new applicants in order to ensure that there is a strong pipeline of projects to take up any financial capacity which is created, this has been done in consultation with Welsh Government. The Placemaking Strategies for Maesteg and Porthcawl are being utilised to ensure that grant and funding opportunities are being directed to support potential projects where possible.	
WBO1.4.2	Continue to deliver a commercial property enhancement grant for all valley high streets, to bring vacant properties back into use and improve local centres. (COMM)	AMBER (Adequate)	Quarter 2: Commercial Property Grant is supported by the SPF and will run until March 2026. The Grant continues to be marketed, and applicants are worked with on a 1:1 basis. The uptake and enquiries have been lower in the Q1 and Q2 than anticipated however we do expect to deliver the targets and spend.	We will continue to work with applicants to understand where the challenges and issue are in relation to bringing forward commercial projects.
WBO1.4.3	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)	GREEN (Excellent)	Quarter 2: The development of the Ewenny Road Site is continuing. A sale to a housing developer has been agreed and planning application for the site is currently being considered. Remediation works at the Ewenny Road Site is due to be completed in December 2025. A sale has been agreed for the land. A reserved matters application has been made as is being considered by the planning authority.	

WBO1.5: Reduce, reuse or recycle as much waste as possible

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
PAM/010 CP WBO1.5	Percentage of streets that are clean (COMM) Higher Preferred	99.35%	99%	99%	89.68%	99.19%	⬇️	Quarterly Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: Due to MTFS savings for 2025/26 there is limited capacity in the team to carry out inspections which has had an impact on the number of streets visited and assessed in the period and therefore on overall performance. Officers have now been trained to carry out this role meaning inspections will be carried out more regularly, which will provide more data for reporting.
PAM/030 CP WBO1.5	Percentage of waste reused, recycled or composted (COMM) Higher Preferred	70.93%	70%	70%	65.5%	70.96%	⬇️	Quarterly Indicator Target Setting: To maintain the existing targets which remain challenging to achieve Performance: Provisional Data - Wood and green waste processors have encountered issues meaning waste has been stored on site so cannot be counted as being recycled. This has been a problem nationally and waste is now moving onto recycling processors so should be reflected in Q3.
DCO20.05 CP WBO1.5	Percentage of Street cleansing waste prepared for recycling (COMM) Higher Preferred	41.22%	40%					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period							Next Steps
WBO1.5.1	Bring our Waste Service in-house (COMM)	GREEN (Excellent)	Quarter 2: Ongoing, end date now changed to 4th July 2027 with contract extension agreed. Work is underway and SLR Consultancy have been appointed to assist with the project. Task logs for all service areas have been introduced and project leads by discipline are in place. Monthly progress updates being provided to Transition Board with RAG ratings by area. Risk register for the project has been created and maintained.							Key work in the closing part of the year focuses on procurement of a materials management partner.

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WBO1.6: Provide opportunities for culture, leisure, and play

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period		
SSWB83 CP WBO1.6	Number of active users across target population groups via health & wellbeing leisure membership provision (SSWB) Higher Preferred	New 25-26	700	525	1,013	New 25-26	No Trend	Quarterly Indicator Target Setting: New indicator. Baseline data to be recorded in order to set future target. Performance: The programme continues to provide extensive access to a wide range of health, fitness, and wellbeing opportunities for targeted children, young people, and families across the county.		
DCO23.10 CP WBO1.6	Number of play areas that have been refurbished (COMM) Higher Preferred	22	40					Annual Indicator - To be reported at Q4		
SSWB67 CP WBO1.6	Participation in the national free swimming initiative for 16 and under (SSWB) Higher Preferred	23,208	20,000					Annual Indicator - To be reported at Q4		

Commitments

Code	Commitment	Status	Progress this period					Next Steps
WBO1.6.1	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)	GREEN (Excellent)	Quarter 2: The Grand Pavilion Project continues to progress, with a main contractor on site and delivering over the next 18 months. The construction contract commenced in September 2025 on site at Porthcawl. A Programme Board has been established for some time to oversee the project. This is complemented by monthly contractor meetings and client-side project team meetings. Monitoring returns and claims are submitted in accordance with the funding requirements. Further funding for this project continues to be sought. An Additional £1.5m was secured against the project from the Arts Council in September.					
WBO1.6.2	Continue the children's play areas refurbishment programme and make sure inclusive play equipment is provided to allow opportunities for all. (COMM)	AMBER (Adequate)	Quarter 2: Phase 4 of the refurbishment programme is in progress - 19 playgrounds. Phase 5 and 6 (40 playgrounds) is being assessed to determine the necessary capital funding, their completion will be dependent on the budgetary agreement.					Agree capital funding for phase 5 & 6 and initiate the necessary procurement processes to complete the refurbishment programme.
WBO1.6.3	Enlarge the Food and Fun Programme for summer 2025 (EEYYP)	AMBER (Adequate)	Quarter 2: Four schools took part in the Food and Fun programme during summer 2025, with 160 children benefitting from attending and 2730 healthy breakfasts and lunches served. Across the programme, 144 physical activities and 32 nutrition sessions were delivered to the participants. Participation dropped from six schools in 2024 to four schools in 2025. The main barriers to participation have been around staff recruitment and commitment to cover the events during the summer holidays. The involvement of family support workers has helped support the promotion of the programme and headteachers who have previously been part of the programme have been vocal in their endorsement. To date, ten schools have expressed interest in running the programme in summer 2026 and seven have confirmed. A promotion and marketing plan for summer 2026 is being developed, including a video that has been produced, in conjunction with Tondu Primary School, showcasing the programme and its benefits					The Healthy Child Co-ordinator will continue to meet with schools, with a particular focus on secondary schools, and promote the benefits of the programme throughout the autumn term. The deadline for signing up to run a scheme in summer 2026 will be December 2025. Exploration will take place to improve links with other services so that participating schools receive all the support they need in the preparation and delivery phases of the programme.

Code	Commitment	Status	Progress this period						Next Steps
Page 38	WBO1.6.4 Develop whole Council action plan and networks to support the submission of the Play Sufficiency Assessment to Welsh Government. (SSWB)	YELLOW (Good)	Quarter 2: The Play Sufficiency Action Plan code has been designed with the development of clear action points. The Action Plan is awaiting signoff from Cabinet. The draft Plan shared with Welsh Government in line with requested submission date.						Play Sufficiency Plan to be approved by cabinet.
	WBO1.6.5 Develop active wellbeing offer for targeted groups (SSWB)	GREEN (Excellent)	Quarter 2: 'Super Agers' activities reached 269 older adults with 1522 attendances across 87 wellbeing sessions. The programme expanded into Llangeinor supporting not only this area but also neighbouring Betws, which sits in the lowest 10% of Welsh Index of Multiple Deprivation in Wales. 5588 attendances were supported through 60 plus free swim and 3417 supported through 16 and under free swim. The National Exercise Referral Scheme supported 130 participants to complete a 16-week programme. There were 14 referrals for joint carer support, of these, 11 participants began and seven completed the course. HALO Wellbeing membership supported 729 individuals (carer leavers, children and young people with a disability and their households, care experienced children and households) to access free wellbeing opportunities. 17 young children have also been supported through golden ticket initiative providing free learn to swim lessons and household membership to families referred in through social services e.g. Child disability and transition team, edge of care and care experienced children's team.						Work with partners to identify volunteers and community anchor organisations to support the expansion of community offer. The next phase will focus on identifying barriers to participation (e.g. accessibility, confidence levels, awareness of the programme benefits) and raising the 16 and under attendance figure.
	WBO1.6.6 Develop the Healthy Living Partnership Strategy (SSWB)	AMBER (Adequate)	Quarter 2: Draft themes have been agreed with Sport Wales and Central South Partnership focusing on Bridgend priorities to underpin statutory services and building community resilience which will feed into the overall Healthy living strategy.						Develop insight and learning tool to capture distance travelled and social value of return on investment.
	WBO1.6.7 Develop the Libraries, Culture and Community hub Strategy (SSWB)	AMBER (Adequate)	Quarter 2: Initial engagement exercise was undertaken in summer 2025. Raw data is currently being analysed to develop first phase draft of the Libraries, Culture and Community Hub Strategy.						Use raw data to shape draft libraries, culture and community hub strategy
	WBO1.6.8 Maintain performance against Welsh public library standards (SSWB)	YELLOW (Good)	Quarter 2: Bridgend currently meets all of the 13 core entitlements in full. Of the 7 quality indicators which have targets, Bridgend is achieving 5 in full and 1 in part. 1 is not currently achieved. Data available for Q1 only due to current reporting timelines timescales: Total library visits Q1 =105,771, Total issues (physical items) Q1=79,286 eBook/ eAudiobook downloads Q1=17,572.						Reprofile our reporting schedule to align with quarterly reporting and expand to capture outreach books on wheels service

WBO2: Creating modern, seamless public services

WBO2.1: Improving how we engage with people, listening to views & acting on them

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period	
CED70 CP WBO2.1	Percentage of Complaints closed within timescales (CEX) Higher Preferred	31.83%	80%	80%	27.87%	20.72%	↑	Quarterly Indicator Target Setting: Baseline target. To be reviewed during the lifecycle of the Corporate Plan to reflect the corporate customer function. Performance: Meeting the target is dependent on service areas providing responses to corporate complaints within the deadline provided, and providing feedback in terms of lessons learned. There is a robust process in place within the complaints team.	
CED59(a) CP WBO2.1	Level of engagement (Welsh / English) a) across consultations Higher Preferred	8,050	8,800					Annual Indicator - To be reported at Q4	
CED59(b) CP WBO2.1	b) with corporate communications to residents, using the digital communications platform (CEX) Higher Preferred	1,203,706	1,000,000					Annual Indicator - To be reported at Q4	

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.1.1	Improve 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 2: The new Media Protocol has been agreed and publicised to staff and members. A Members' Bulletin has been established and is subject to ongoing improvement with feedback from Cabinet Members. The procurement exercise for a social media scheduling platform is underway. Once implemented it will improve efficiency and release capacity within the Communication and Engagement Team. A restructure of the Team has been completed and will be in place from 1 st October. A formalised approach to tackling inaccurate information/misinformation has been agreed with CMB and will be presented to informal Cabinet in October. The Team have received training to produce improved video content for residents. Links have been established with Youth Services Team, including meeting with groups of children and young people to encourage participation in future consultations and engagement exercises. Planning is taking place to provide a youth friendly version of budget consultation.	
WBO2.1.2	Improve the way we gather and use resident views (CEX)	GREEN (Excellent)	Quarter 2: Following refresh of Citizens Panel, we are using panel members in focus groups the first of which was for Panel Performance Assessment in September and next will be for budget consultation in January. The data from our first residents' survey has been reviewed with a report presented to CMB. The campaign materials for the budget consultation have been reviewed and updated, including a members' toolkit which is due to launch in October 2025.	
WBO2.1.3	Improve the way we gather and use staff views (CEX)	GREEN (Excellent)	Quarter 2: The corporate narrative has been agreed and publicised to staff and members. New approach to staff survey has been developed and will be considered by CMB in October 2025. Proposals for improvements to internal communications and video content are in development. The project to transition to a new and improved bilingual intranet are underway and progressing well.	
WBO2.1.4	Improve the way we handle and learn from corporate complaints and compliments (CEX)	RED (Unsatisfactory)	Quarter 2: The form and process for complaints has been built and is currently in the process of going through initial testing. A User Acceptance Testing session will be held with Officers from key service areas to undertake rigorous testing. Once signed off, training of all staff will be undertaken. A detailed specification has been developed and handed to ICT to start scoping out reporting requirements - a date for this is to be confirmed. Improvements to recording information relating to lessons learned, regardless of the complaint outcome is not progressing as well as planned; the complaints team records the information we receive from the service areas but is not receiving the requested information routinely.	Continue to test the new process for complaints. Once the new process has been signed off, all staff will receive training.
WBO2.1.5	Implement the strategic equality plan action plan (CEX)	GREEN (Excellent)	Quarter 2: Implementation of the Strategic Equality Plan Action Plan is underway. Corporate Equalities focus group has been established and are meeting bi-monthly as planned. Regular updates are on progress against the action plan are provided as required, and the annual progress report will be presented to Cabinet Committee Equalities in November 2025.	

WBO2.2: Offer more information and services online, and in local areas

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CED5 CP WBO2.2	Percentage of first call resolutions (CEX) Higher Preferred	72.67%	75.92%	75.92%	73.92%	67.29%		Quarterly Indicator Target Setting: Target retained, to increase the number of calls resolved at the first point of contact Performance: Whilst this PI is slightly off target, the team continues to review performance with the relevant service area to identify areas where the Customer Advisors could be upskilled to deal with and resolve the calls at the first point of contact.
CED51 CP WBO2.2	Number of online transactions using the digital platform (CEX) Higher Preferred	81,034	81,034	40,517	42,862	42,392		Quarterly Indicator Target Setting: To increase online transactions by customers to promote channel shift Performance: On target

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.2.1	Continue to review the corporate front door to streamline, standardise, and enhance entry points into the council whilst improving the resolution at the first point of contact. (CEX)	YELLOW (Good)	Quarter 2: Good progress has been made to review and define the entry point into Adult Social Care. Initial analysis is also underway in relation to customer demand within their Network Hubs.	Continue to test and go live with Adult Social Care online referral form, and scope further work in relation to analysing customer demand across remaining channels i.e. emails. Finalise review customer demand within the Network Hubs to identify areas to improve service performance, and resolution at first point of contact.

WBO2.3: Modernise and become a more efficient council

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CHR002 (PAM/001) CP WBO2.3	Number of working days/shifts lost to sickness absence per full-time equivalent (FTE) BCBC employee (CEX/ALL) Lower Preferred	13.76 days	No target	No target	5.89 days	6.22 days	↑	Quarterly Indicator Target Setting: To reduce sickness levels across the organisation Performance: In comparison to Q1 and Q2 for 2024/25 sickness absence has improved. Managers are encouraged to continue to manage their sickness absences with the support of HR&OD. HR Briefings on Welfares and health and wellbeing for 2025/26 are scheduled to take place for managers and these are actively communicated. Staff are encouraged through various channels to access the wellbeing resources and e-learning modules on health and wellbeing topics. See page 23 and 24 for additional information on sickness absence (Directorate summaries and breakdown by absence reason)
CORPB5 CP WBO2.3	Percentage of staff that have completed a Personal Review/Appraisal (excluding school staff) (CEX/ALL) Higher Preferred	68.42%	80%					Annual Indicator - To be reported at Q4
DCO16.8 CP WBO2.3	Number of Council owned assets transferred to the community for running (CATs) or transferred from a short-term agreement to a long-term agreement for running during the year (COMM) Higher Preferred	2	10					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.3.1	Approve and implement the new digital strategy (CEX)	AMBER (Adequate)	Quarter 2: The public consultation on the draft strategy was undertaken between 2 nd June and 13 th July 2025. Following the Corporate Overview and Scrutiny Committee meeting in July 2025, a decision has been made to review the Strategy further to ensure our vision and aspirations around transformation are reflected.	Further discussions are to be held with CMB and Council to determine corporate vision and aspirations to progress with the implementation of the new Digital Strategy and delivery plan.
WBO2.3.2	Continue to rationalise the corporate estate (COMM)	AMBER (Adequate)	Quarter 2: The Portfolio is under regular review to identify opportunities to relinquish surplus building within the Corporate Estate. We continue to proactively engage with service groups and stakeholders to review each asset's use and where possible recommend alternative uses or bring forward assets for sale. Focus has been on Civic Offices and Depot locations.	We will continue to work with all services to identify opportunities to maximise the use of our existing assets and where appropriate bring forward assets as surplus and take necessary steps to action a disposal or to change their use and utilise internally.
WBO2.3.3	Invest in Community Asset Transfers and support clubs and Community Groups with equipment grants to improve and safeguard the facilities. (COMM)	AMBER (Adequate)	Quarter 2: Two allocations were made in Q1 and Q2, but these were increases from original allocations due to market price increases. The total of funding allocated to community groups undertaking CATs (as at end Q2) stands at £448,776. £27,131 in committed funding was paid to community groups in Q1 & Q2 2025-2026 and a further £33,734 in Q3, leaving a total available CAT Capital fund of £368,989 at present. The focus of the CAT Fund (pavilions) has been developed to ensure that the funding is being used to carry out essential repairs only and requiring the groups to obtain match funding in any amount wherever possible. The Town & Community Council Liaison Officer took up post in September who will work closely with Town & Community Councils to identify Opportunities for grants and CAT transfers.	We will continue to work on investing in CATs and support clubs and community groups using equipment grants to improve and safeguard the facilities.

WBO2.4: Improve partnership working with partners, the third sector and Town and Community Councils

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CED62 CP WBO2.4	Percentage of Assia service users reporting increased feelings of safety at their exit evaluation (CEX) Higher Preferred	99.12%	100%	100%	100%	96.81%	↑	Quarterly Indicator Target Setting: Safety planning, targeting hardening and safety measures carried out with all service users throughout support and before exiting the service Performance: On target – 970 service user responses recorded during Q1 and Q2
CED63 CP WBO2.4	Percentage of high-risk domestic abuse victims / public protection notices received by the service contacted within 48 hours (CEX) Higher Preferred	100%	100%	100%	100%	100%	↔	Quarterly Indicator Target Setting: Contact within 48 hours is identified best practice (in line with Leading Lights accreditation) Performance: On target – 480 received during Q1 and Q2.
CED64 CP WBO2.4	Percentage of medium risk domestic abuse victims / public protection notices received by the service contacted within 72 hours (CEX) Higher Preferred	100%	100%	100%	100%	100%	↔	Quarterly Indicator Target Setting: Contact within 72 hours is identified best practice (in line with Leading Lights accreditation) Performance: On target - 385 received during Q1 and Q2
SSWB84 CP WBO2.4	Number of active referrals supported by Local Community Coordinators (SSWB) Higher Preferred	New 25-26	600	300	180	New 25-26	No Trend	Quarterly Indicator Target Setting: New indicator. Baseline data to be recorded in order to set future target. Performance: Data only collated in Q2 due to new KPI . Q1 data will be added in for Q3 report. Overall data collected has been undertaken to focus on insight and learning
SSWB85 CP WBO2.4	Number of children and young adults supported during school holidays (SSWB) Higher Preferred	New 25-26	950					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO2.4.1	Develop a new regional agreement for working with frail older people between health boards and councils (SSWB)	GREEN (Excellent)	Quarter 2: Section 33 agreement for Integrated Community Care System approved by Cabinet in July 2025.	Signing and sealing of Section 33 agreement
WBO2.4.2	Complete the town and community council arrangements review (CEX)	RED (Unsatisfactory)	Quarter 2: The final draft report of the Review of Community Arrangements was completed and presented to Council on 24 th October 2025 but was not approved.	Review the report to Boundary Commission and seek advice to amend the report.
WBO2.4.3	Work co-productively with our communities to develop their own solutions and become more resilient. (SSWB)	YELLOW (Good)	Quarter 2: Quarter 2: The Local Community Co-ordinators (LCCs) have seen 160 new referrals in Q1 and 102 new referrals in Q2. LCCs are currently supporting 180 individuals. There are currently 102 individuals on the waiting list across all 6 geographical areas. 72 new Children and Families referrals (27 Edge of Care, 24 Children disability & transition team, 5 Locality Hubs, 6 Central Safeguarding, 3 care experienced Childrens team, 1 Education Welfare, 6 External) 76 new individuals referred. Active Participants currently supported: 148. Continuous multi-agency collaboration promotes stability and positive outcomes for children and families. A significant proportion of participants have successfully moved on to community-based opportunities, reflecting effective early intervention and empowerment.	The current children and family provision is over prescribed with 57 (1 x 37hrs + 1 x 20 hrs) hour post per week not able to cope with demand of referrals. Internal and external investment needed to support family demand. Work productively with 3rd sector partners, early help and statutory services to align governance of referrals to ensure best use of resources. Ensuring the prevention referral pathway is fit for purpose.

WBO3: Enabling people to meet their potential

WBO3.1: Provide an effective Childcare and Early Years Offer

Performance Indicators

Page 42	PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period	
	DEFS160 CP WBO3.1	Number of two-year-olds accessing childcare through the Flying Start programme (EEYYP) Higher Preferred	542	620	595	624	536		Quarterly Indicator Target Setting: The target reflects the positive investment made in the Phase 2A and 2B expansions of the programme. Performance: Capital works were undertaken at the Flying Start building in Sarn over summer 2025, enabling the setting to register for an additional 12 places (24 sessional places) to help meet increasing demand. Four additional childminders have expressed an interest in registering with the local authority to provide Flying Start funded places, and a further six private providers have been recruited. Over 100 applications for Flying Start childcare were made under Phase Three of the programme between April and August 2025.	

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.1.1	Provide effective leadership and management of maintained Early Years settings ensuring that outcomes in Care Inspectorate Wales inspections are at least 'good'. (EEYYP)	GREEN (Excellent)	Quarter 2: Of the settings that have been inspected by Care Inspectorate Wales, 90% were judged to be good or excellent across all areas. The current management structure of the maintained settings requires review so that workload is more fairly distributed, and leaders are clearer about specific responsibilities, and better accountability can be secured. A review of leadership responsibilities within and across the maintained settings will take place during the autumn term. A newly developed leadership toolkit is due to be launched in the autumn half term. During a closure day on 1 September 2025, maintained settings received training on the quality framework for Early Childhood Play, Learning and Care (ECPLC) and the Developmental Pathways (0 to 3), which was well-received. Settings have since reviewed and refined their processes for assessment and planning. Learning environments will also be reviewed and improved.	
WBO3.1.2	Offer effective support and challenge to funded non-maintained Early Years settings ensuring that outcomes in joint inspections are at least 'good'. (EEYYP)	GREEN (Excellent)	Quarter 2: In their most recent joint inspections, 89% of early education settings were judged to be at least good. No settings are in a follow up category. Recently, three settings have been asked to provide good practice case studies for Estyn. Documentation has been prepared by the Early Years and Childcare Team, detailing the initial and ongoing requirements of funded childcare providers. The quality framework document is in the process of being approved by colleagues in Legal Services. Milestones for this piece of work have been agreed with the Procurement Team and the Central Grants Team. Pre-market engagement is planned for October and November 2025, with the tender opportunity going live in December 2025. A training brochure has been published incorporating a wide variety of professional development opportunities for the sector in response to self-evaluation outcomes. Following the success of the Professional Learning Community (PLC) that operated last academic year, a new PLC has been convened, with double the number of settings involved. The first two modules of the year-long Froebelian Approach project were attended by 23 practitioners from across the early years sector (settings and schools).	

WBO3.2: Provide safe, supportive schools with high quality teaching

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period	
DEFS155 CP WBO3.2	Percentage of schools that have self-evaluated themselves as 'green' as part of their annual safeguarding audit (EEYYP) Higher Preferred	93%	100%					Annual Indicator - To be reported at Q4	
EDU010a CP WBO3.2	Percentage of school days lost due to fixed-term exclusions during the academic year, in a) primary schools. Lower Preferred	0.031%	0.030%					Annual Indicator - To be reported at Q4	
EDU010b CP WBO3.2	b) secondary schools (EEYYP) Lower Preferred	0.152%	0.150%					Annual Indicator - To be reported at Q4	

Page 43	EDU016a (PAM/007) CP WBO3.2	Percentage of pupil attendance in a) primary schools Higher Preferred	92.49%	94.0%	Annual Indicator - To be reported at Q4			
	EDU016b (PAM/008) CP WBO3.2	b) secondary schools (EEYYP) Higher Preferred	87.31%	92.0%	Annual Indicator - To be reported at Q4			
	PAM032 CP WBO3.2	Average Capped 9 Score for pupils in Year 11 (EEYYP) Higher Preferred	357.40	360.00	Annual Indicator - To be reported at Q4			

Commitments

Code	Commitment	Status	Progress this period				Next Steps
WBO3.2.1	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)	GREEN (Excellent)	Quarter 2: During the summer term 2025, 99 school governors attended topical training sessions delivered by the local authority. The governor skills audit tool was circulated to schools in June 2025 and 109 responses were received. This audit supports the development of appropriate support for governors. An analysis of the results has been completed, and the local authority's analysis will be shared with schools after the autumn half term. Surveys have been provided to headteachers to gather thoughts on potential items for future professional development workshops. One school remains in 'special measures' categorisation, but the school is making expected progress against recommendations. Each member of staff has been provided with significant professional learning opportunities; all staff have leadership responsibilities and are now actively involved in school improvement.	Following the WG middle tier review, there has been a remodelling of the professional learning offer for schools at a regional and national level. Central South Consortium will continue to provide professional learning, resources and bespoke support according to their revised remit. The new national professional learning and leadership body, Dysgu, will also provide professional learning and support for curriculum, teaching and leadership.			
WBO3.2.2	Make additional digital learning training available to all school staff to improve teaching and learning in our schools (EEYYP)	GREEN (Excellent)	Quarter 2: The Bridgend Schools' Digital Learning Strategy 2025-26 has been published to schools following commendation from WG on its governance, forward thinking and detailed overview of the digital landscape across Bridgend schools. During the school year 2024-25 and in 2025-26 to date, 32 schools (29 primary, 3 secondary) have participated in local authority-led skills training for Generative Artificial Intelligence. The training has been delivered as all-day learning events or via in-school staff training, with a focus on concepts, risks, prompting and using Microsoft Copilot. Currently six schools are involved in the WG pilot programme to assist schools with developing a consistent pupil progression tool. Meetings have been held between the schools and WG to review the new free software available to schools. This software should save teachers time and, in turn, reduce workload and provide consistency among teachers in the school.				
WBO3.2.3	Improve the digital offer to young people, including youth led interactive website (EEYYP)	GREEN (Excellent)	Quarter 2: Our TikTok account officially launched on 19 September 2025. We are using this platform to promote our services, highlight what is available to young people, and share success stories from across the community. Website pages continue to be remodelled, with support from our Young Editors group, and include representation of our third sector group, Bridgend Youth Matters. The interactive bulletin board (that is, a 'Padlet') has been completed within the planned timescales. It will be launched when updates to our official website are live, which is expected to be in November 2025.	The Young Editors group will continue to work with young people and staff to create engaging content, ensuring our platform remains youth-led, creative, and inclusive. The interactive bulletin board (that is, a 'Padlet') will be launched in November 2025. Once website updates are live, we will carry out a young person consultation to gather broader feedback on the setup, design, and future development plans.			

WBO3.3: Provide Welsh medium education opportunities

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DEFS138 CP WBO3.3	Percentage of Year 1 learners taught through the medium of Welsh (EEYYP) Higher Preferred	8.83%	8.85%					Annual Indicator - To be reported at Q4

Page 4	DEFS157 CP WBO3.3	Percentage of learners studying for assessed qualifications through the medium of Welsh at the end of Key Stage 4 (EEYYP) Higher Preferred	7.23%	7.20%	Annual Indicator - To be reported at Q4
	DEFS158 CP WBO3.3	Number of learners studying for Welsh as a second language at AS Level and A Level (EEYYP) Higher Preferred	21	17	Annual Indicator - To be reported at Q4

4 Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.3.1	Deliver the actions in the Welsh in Education Strategic Plan (WESP) (EEYYP)	YELLOW (Good)	Quarter 2: A late immersion provision, 'Pont Iaith', for pupils up to Year 7 has been established at Ysgol y Ferch o'r Sgêr. Development will be ongoing. Seven pupils are currently receiving this provision. A Leader of Late Immersion provision has been recruited from an agency on a secondment basis. A budget pressure bid has been presented to cover transport costs, for which the outcome is currently outstanding. Out of all Reception applications, those for Welsh-medium schools increased from 7.85% in September 2024 to 10.67% in September 2025. A new Cylch Ti a Fi (parent and toddler group) has opened in Porthcawl and Mudiad Meithrin are planning on opening a Cylch Meithrin (playgroup) in the area to feed the future Welsh-medium seedling school. Due to a lack of Geographical Information System (GIS) support, we are unable to review historic data to support the development of the most suitable boundary in the valleys gateway area for Welsh-medium catchment areas. This has delayed the completion timeframe for this work.	We will engage with the private sector to progress an independent review of Welsh-medium catchment areas.

WBO3.4: Modernise school buildings

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.4.1	Enlarge Ysgol Gymraeg Bro Ogwr to a 2.5 form-entry new-build school. (EEYYP)	RED (Unsatisfactory)	Quarter 2: The school opening date has been modified to September 2027. The pre-commencement consultation process is yet to begin as further technical assessments and information such as the transport assessment, ecology, and archaeology reports are not finalised. Ecology issues at the Fordd Cadfan site have prevented commencement of the site investigation work. A translocated site has now been identified, which the ecologist has agreed is suitable.	Officers are working with the specialist consultants to ensure the reports are finalised so that the pre-application consultation (PAC) process can begin as soon as possible. The translocation work will begin, subject to the ecologist's approval.
WBO3.4.2	Provide a new-build for Mynydd Cynffig Primary School (EEYYP)	AMBER (Adequate)	Quarter 2: The school opening date has been modified to September 2027. Cabinet approval to tender the scheme has been received. The local authority is currently awaiting the outcome of the planning application. Ecological surveys have been completed but the translocation of slow worms has been delayed.	Translocation will begin, subject to ecologist's approval. Development Control Committee will determine the outcome of the planning application. The tender process will follow, once the Bill of Quantities has been finalised.
WBO3.4.3	Enlarge Ysgol Ferch o'r Sgêr to a two form-entry new-build school. (EEYYP)	RED (Unsatisfactory)	Quarter 2: WG has approved the Full Business Case and the tender process has concluded, with a successful contractor identified. The land swap agreement with Valleys to Coast is not yet enacted, and this is having a detrimental impact on the contract award and programme. Corporate Landlord Department is working on this aspect of the scheme, understands the urgency, and is aiming to resolve this issue as soon as possible.	The construction contract will be awarded once the land swap agreement is in place.
WBO3.4.4	Provide a new two-form entry English-medium school to replace the existing Afon Y Felin and Cornelius Primary Schools. (EEYYP)	RED (Unsatisfactory)	Quarter 2: WG has approved the Full Business Case and the tender process has concluded, with a successful contractor identified. The land swap agreement with Valleys to Coast is not yet enacted, and this is having a detrimental impact on the contract award and programme. Corporate Landlord Department is working on this aspect of the scheme, understands the urgency, and is aiming to resolve this issue as soon as possible.	The construction contract will be awarded once the land swap agreement is in place.
WBO3.4.5	Relocate Heronsbridge School to a new-build 300-place school (EEYYP)	GREEN (Excellent)	Quarter 2: Following conclusion of a tender process, Kier Construction has been appointed under a professional services contract to undertake the design of the school. The company is making excellent progress and is consulting with key stakeholders regarding the design development.	A report requesting Cabinet approval to modify the opening date of the school will be presented in December 2025.

WBO3.5: Be good parents to our care experienced children

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CH/052 CP WBO3.5	Percentage of care leavers who have experienced Homelessness during the year (SSWB) Lower Preferred	9.96%	10%	5%	7.94%	4%		Quarterly Indicator Target Setting: To maintain performance Performance: Amended WG guidance excluding those not engaged and over the age of 21 has decreased the number of care leavers compared to previous years, as we were previously including care leavers up to the age of 25. The current Unaccompanied Asylum-Seeking Children (UASC) process to access housing has and will continue to have an impact on our target along with a change in how the overall number of individuals are measured. Multiagency reflective sessions have now commenced alongside housing to identify any learning or changes needed to prevent further homelessness. Planning is also underway for implementation of the joint homelessness protocol. Due to revised guidance this target will need to be reconsidered in 2026/27.
SSWB86 CP WBO3.5	Percentage of care leavers who have completed at least 3 consecutive months of employment, education or training in the 24 months since leaving care (SSWB) Higher Preferred	70%	65%	65%	65.71%	63.33%		Quarterly Indicator Target Setting: To continue to improve performance Performance: Performance has been sustained and continues to be above target. There has however been a decrease as compared to Q1. Work remains ongoing to target support as part of Pathway Planning and supporting young people with their career/education goals.

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.5.1	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 2: The Corporate Parenting Board continues to take place bimonthly. The Board have a set of priorities and have been developing baseline data to understand the needs and demands of the care experienced children within their service. In Q2 we have been planning for the young people's summit that is taking place at the end of October 2025.	Young People's summit to take place October 2025. This will feed into the strategic direction of the board and consideration around how the feedback aligns with our Corporate Parenting priorities and commitments. Continue to promote opportunities for care experienced young people's voices to be heard and actioned across child and family services. Review Corporate Parenting board priorities and workplan for Q3-4. Finalise baseline data for Corporate Parenting board partners
WBO3.5.2	Support the implementation of the Corporate Parenting Strategy in schools. (EEYYP)	YELLOW (Good)	Quarter 2: The Corporate Parenting Strategy is a key part of our vulnerable group surgeries, which were completed in the spring and summer terms. These surgeries are carried out with all 59 schools, examining any attendance, exclusion and behaviour concerns and the number of pupils on roll who would be identified as vulnerable by Estyn. Corporate parenting is also incorporated into the care-experienced children governor training, which was delivered in the summer term. The Education Engagement Team lead co-ordinators hold 'drop-in' sessions bi-monthly for education queries from the Care-Experienced Children Team. The Pupil Development Grant is used positively to fund play therapy, additional curriculum support and emotional literacy support assistants, to help children and young people with emotional and social difficulties.	An evaluation form will be sent to all schools in January 2026 to review the effectiveness of Pupil Development Grant. An analysis can then be carried out on the findings. Personal education plans will be quality assured once the WG final guidance is released (consultation is closing in December 2025). The earliest this guidance will be available is the first quarter of 2026.

WBO3.6: Help people get the skills they need for work

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DEFS80 CP WBO3.6	Number of participants in the Employability Bridgend programme supported into education or training (COMM) Higher Preferred	678	219	109	41	339	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 and there has been a significant change in funding for 25/26 Performance: During Q1 we moved to a new case management system and were embedding a new staff structure in the team therefore no claims for outcomes were made, and the number reported is for Q2 only. We are confident that with pipeline performance (that is outcomes we know we have achieved but, as the participant is still receiving support, they are not counted in claim) that we are able to meet the annual target by end of Q4.
DEFS82 CP WBO3.6	Number of participants in the Employability Bridgend programme going into employment (COMM) Higher Preferred	453	290	144	70	203	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 and there has been a significant change in funding for 25/26 Performance: See DEFS80 comment above. This is a challenging target, and we have regular meetings to monitor performance and put in place mitigations to ensure that we will be able to meet the target by end of Q4.
PAM/046 CP WBO3.6	Percentage of Year 11 leavers identified as not being in education, employment or training (NEET) (EEYYP) Lower Preferred	1.9%	2.0%					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO3.6.1	Increase employment and training opportunities in the County Borough. (COMM)	GREEN (Excellent)	Quarter 2: During Q1 and Q2 the programme has signed up 427 participants against an annual target of 660 (175 in Q1 and 252 in Q2). Employability Bridgend is supporting with training, volunteering and employment. We signpost as appropriate to or collaborate with other services and projects as appropriate. We have worked with other BCBC departments, such as Social Services, to organise a further Pathways to Care course to encourage recruitment into Social Care roles. We are also supporting the BEST project, which focusses on sustainability of jobs in businesses of the county borough.	
WBO3.6.2	Employability Bridgend will work with funders and partners to deliver a comprehensive employability and skills programme (COMM)	GREEN (Excellent)	Quarter 2: We hold monthly meetings of the Bridgend Employability Network (BEN) which has more than 100 people on the mailing list, representing organisations from across the spectrum that operate in Bridgend to inform and develop referral pathways and collaborative opportunities. Our current focus is creating a booklet/online directory of support available in the county borough. Our marketing and engagement team are developing our online presence with Facebook and Instagram accounts in English and Welsh. We currently advertise in print media, on local radio and through networking with partners and stakeholders. We are part of the BCBC SPF Comms Plan and regularly liaise with the Communications Team. We regularly hold large events such as the Bridgend Jobs Fair, with over 650 visitors and over 60 employers, as well as community events to engage with residents of the county borough.	

WBO4: Supporting our most vulnerable

WBO4.1: Provide high-quality children's & adults social services / early help services

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CH/026 CP WBO4.1	Number of children on the child protection register (SSWB) Lower Preferred	75	120	120	77	125		<p>Quarterly Indicator</p> <p>Target Setting: Sustain safe reduction in the Child Protection Register</p> <p>Performance: We are exceeding our prediction in this area. Audit activity has evidenced consistent application of thresholds and safe and appropriate decision making.</p>
DEFS29 CP WBO4.1	Percentage of completed TAF (Team Around the Family) support plans that close with a successful outcome (SSWB) Higher Preferred	82%	87%	87%	88%	81%		<p>Quarterly Indicator</p> <p>Target Setting: To continue to improve performance.</p> <p>Performance: Significantly improved performance which relates to more targeted and timely interventions and management oversight.</p>
SSWB39 (CH/039) CP, SSWBPM WBO4.1	Number of Care Experienced Children (SSWB) Lower Preferred	333	325	338	337	359		<p>Quarterly Indicator</p> <p>Target Setting: Continue to safely reduce the number of Care Experienced Children</p> <p>Performance: An audit is underway to identify any learning and opportunities for further prevention. Actions within the safe reduction strategy remain a priority with continued senior management oversight and monthly meetings to review any barriers to care order discharge or progressing with Special Guardianship Orders. Signs of Stability will also be the focus of training over the coming weeks to support a better understanding around reunification and the development of trajectories for return home. In addition, complex case panel provides further scrutiny on our out county and internal residential placements.</p>
SSWB57 CP WBO4.1	Percentage of enquiries to the Adult Social Care front door which result in information and advice only (SSWB) Higher Preferred	84.58%	83%	83%	82.51%	85.17%		<p>Quarterly Indicator</p> <p>Target Setting: The model is being embedded and we will seek to continue to improve performance.</p> <p>Performance: Slightly below target, but improved on Q1 performance. Identified that aspects of the Duty Desk responses need to be reviewed more closely to confirm training and development needs in this area that will improve performance. This review will be completed by the service and is planned for Q3 when Consultant Social Worker in post.</p>
SSWB75 CP WBO4.1	Number of people recorded as delayed on the national pathway of care (SSWB) Lower Preferred	70	90	90	68	86		<p>Quarterly Indicator</p> <p>Target Setting: This reflects the current population needs, taking in to account seasonal fluctuations in people's health.</p> <p>Performance: Improved performance acknowledged. Ongoing work with partners and stakeholders to improve accuracy of codes on e-whiteboards, also continuing to streamline paperwork and process, with the aim of maximising use of trusted assessors.</p>
SSWB78a CP WBO4.1	Timeliness of visits to a) children who are care experienced Higher Preferred	88.28%	87%	87%	90.17%	87.86%		<p>Quarterly Indicator</p> <p>Target Setting: To continue to maintain performance</p> <p>Performance: Performance has been sustained and continues to be above target.</p>
SSWB78b CP WBO4.1	b) children on the child protection register (SSWB) Higher Preferred	89.27%	87%	87%	91.63%	87.80%		<p>Quarterly Indicator</p> <p>Target Setting: To continue to maintain performance</p> <p>Performance: Excellent performance continues in this area.</p>
SSWB87 CP WBO4.1	Percentage of reablement packages implemented with a positive outcome (SSWB) Higher Preferred	73.48%	69%	69%	71.53%	73.68%		<p>Quarterly Indicator</p> <p>Target Setting: This reflects the current population needs, taking in to account seasonal fluctuations in people's health.</p> <p>Performance: Performance above target, the service continues to review its processes and ways of working to improve performance in this area.</p>

Commitments

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Code	Commitment	Status	Progress this period	Next Steps
WBO4.1.1	Support the wellbeing of unpaid carers, including young carers, to have a life beyond caring through delivery of the carer's action plan. (SSWB)	YELLOW (Good)	Quarter 2: Tuvida continue to support unpaid adult carers. 140 new referrals supported during Q1 and Q2. 3042 carers provided with signposting opportunities. We have received 87 requests for full carers assessment and 2,079 requests for information, advice and assistance. 300 young carers have benefited from Halo memberships, supported by the Healthy Living Partnership. This provides access to facilities that promote physical activity and wellbeing. 713 family members or households of young carers are also accessing free Halo memberships. 549 young carers have been issued with Young Carer ID cards, helping them to identify themselves and access support. 20 active Young Carer Ambassadors continue to represent their peers and contribute to shaping young carer services. 179 primary school pupils and 448 young people from comprehensive schools are currently engaged with the network. Two young carers have requested a statutory assessment to ensure they receive appropriate help for their individual circumstances. 23 partner organisations are working collaboratively to provide a co-ordinated network of support for young carers across the area. The "We Are Valued" Days provided meaningful support for 136 young carers, offering them the chance to connect with others who share similar experiences. 21 carers accessed support via the Carers respite project, which adds value to the health and care system by proactively addressing the wellbeing of unpaid carers, and reported improvements in their ability to manage their own wellbeing.	Increased knowledge and understanding of community support for all carers. Ensuring there is always a family approach where possible. Continue co production with partners of choice to develop wellbeing opportunities for unpaid carers across Bridgend.
WBO4.1.2	Improve Children's Services by delivering the actions in our three-year strategic plan. (SSWB)	GREEN (Excellent)	Quarter 2: CIW inspection concluded with significant improvement noted, reflecting the actions in the 3-year plan being met. Further details are available in the reports that went to Corporate Parenting Committee in October 2025.	Continue to monitor the actions via the Social Services Improvement Board
WBO4.1.3	Improve adult social care by delivering the actions in our three-year strategic plan (SSWB)	YELLOW (Good)	Quarter 2: A review is being commissioned of the adult social care operating model introduced in February 2024 to ensure it is meeting the aims to improve outcomes for people from all population groups. There is a specific focus on improving services for people with a learning disability overseen by an improvement board.	Review Terms of Reference and develop a work plan for the Learning Disability Programme Board.
WBO4.1.4	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)	YELLOW (Good)	Quarter 2: Within Child and Family Services the Most Significant Change (MSC) framework has been piloted and developed with the framework implementation underway during Q2. Within adults, the PERCCI (Person-Centred Community Care Inventory) form continues to be utilised and the MSC framework is being piloted. Across directorate Adult's and Children's Services continue to implement their strength-based model of practice. Within Children's the implementation plan for the signs of safety model continues to be closely monitored and reviewed through the improving outcomes board.	Moving into Q3-Q4 MSC stories will be shared and heard during a MSC panel with leaders and management to support citizen voice in service development.
WBO4.1.5	Address the gaps in Adult Social Care provider services by implementing the priority commissioning areas identified in our commissioning strategies and detailed service reviews (SSWB)	YELLOW (Good)	Quarter 2: Work is ongoing in this area, where Planning Groups have been established to oversee the progress against the priority areas identified in the relevant strategic plans. Progress to date has included developing an Accommodation-Based Service Delivery Plan, and an upcoming review of Shared Lives Services, and the recommissioning of Care at Home Services.	Carry out review of Shared Lives Service, to increase numbers and broaden the scope of the service, including review of payment/charging arrangements. Care Home tender to commence in October 2025.
WBO4.1.6	Address the gaps in Childrens and Family Services provider services and respond to the Eliminating Profit/Health & Social Care Bill by implementing the priority commissioning areas identified in the Placement Commissioning strategy (SSWB)	AMBER (Adequate)	Quarter 2: To further strengthen the Placements Commissioning Strategy and achieve the ambition set out in the Health and Social Care Act 2025, there has been a piece of work undertaken by both IPC and Practice Solutions in relation to demand and financial modelling as a result of the legislative changes. The Placements Commissioning Strategy is due to go Cabinet and a market position statement will follow where we will engage with the external market on the gaps identified in the placement commissioning strategy.	Receive final draft of demand and financial modelling. Business justification capital and revenue cases to be submitted for property two and three. PCS to go to Cabinet Market Position Statement to be drafted
WBO4.1.7	Ensure that children and families can access support from the right service at the right time with the aim of preventing their needs from escalating. (SSWB)	AMBER (Adequate)	Quarter 2: Work has been undertaken to develop a single point of access for children and families. The restructure of Early help into Social Services and Wellbeing is assisting in ensuring children and families are diverted to the right part of the system, however, there is more work to do to align services available in Education, Early Years and Young People.	To consider single point of access within the Family Support Commissioning Board.
WBO4.1.8	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)	YELLOW (Good)	Quarter 2: There has been a significant and sustained reduction in the use of agency workers in Children's Services due to the work led by the Directorate Workforce Board. As previously reported, we have successfully grown our own social workers, implemented international recruitment and supported workers via the social services qualification route.	Strengthening of short-, medium- and longer-term actions in adult social care to ensure a robust plan to reduce agency usage in social work and direct services.

WBO4.2: Support people in poverty

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CED43 CP WBO4.2	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 (CEX) Higher Preferred	96%	85%	85%	100%	96%	↑	Quarterly Indicator Target Setting: Target retained. The 2024/25 target was increased in line with the re-commissioning of the service to improve outcomes for recipients of the service. The service will maintain these outcomes throughout the next year. Performance: Target achieved - 300 people were supported during Q1 and Q2
CED44 CP WBO4.2	Percentage of people supported through FASS who have received advice and support in managing or reducing household debt (CEX) Higher Preferred	94%	85%	85%	100%	88%	↑	Quarterly Indicator Target Setting: Target retained. The 2024/25 target was increased in line with the re-commissioning of the service to improve outcomes for recipients of the service. The service will maintain these outcomes throughout the next year. Performance: Target achieved - 150 people were supported during Q1 and Q2

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.2.1	Support eligible residents to receive the financial help available to them. (CEX)	GREEN (Excellent)	Quarter 2: A plan for 2025-26 has been completed and benefit take up campaigns are underway, including Pension Credit and Free School Meals. 20 households have now claimed pension credit out of 85 contacted (23.5%), with a combined award of over £66k per annum. Two Free School Meals (FSM) campaigns have been undertaken, the first targeting households with comprehensive age children, which has resulted in 25 children are now receiving FSM (17% take-up), and second targeting households with children due to starter reception in September, with 124 now receiving FSM (31% take-up). The campaigns included promotion of the Employability Team and school essentials grant. The Benefits Service, in partnership with NEST, sent awareness raising letters to 2,837 households in September who might benefit from WG's NEST scheme. The scheme provides free, impartial advice and home energy efficiency improvements for eligible households, helping them become more energy-efficient and reducing energy bills.	To coincide with the Department for Work and Pensions' pension credit week, the Benefits Service will contact everyone that may qualify for Pension Credit again. Further FSM campaigns are also planned.

WBO4.3: Support people with housing needs

Performance Indicators

PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DOPS39 CP WBO4.3	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	26.4%	20%	20%	23%	21.9%	⬇	Quarterly Indicator 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. Performance: The impact of legislative changes since covid has continued to impact on homelessness and housing. More households are presenting as homeless than have done in previous years. Private rented accommodation was once an alternative tenure that could be relied upon for homeless prevention/relief for many of our clients but is no longer a viable solution due to the increase in market rents and the disparity to housing benefit/universal credit housing costs. The demand on social housing far outweighs supply which impacts on the ability to prevent/relief homelessness as the accommodation is not there to discharge duties into. We also have the highest number registered on the common housing register in recent times, we have to ensure accommodation is also allocated to those in housing need not just those that are homeless.
PAM/012 (DOPS15) CP WBO4.3	Percentage of households threatened with homelessness successfully prevented	31.2%	20%	20%	29.6%	22.1%	↑	Quarterly Indicator Target Setting: Target set at realistic level considering the legislative changes in terms of priority need which has a significant impact on number of households included in this measure Performance: Improvement in performance is likely to be because we are seeing more private landlords

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	from becoming homeless (CEX) Higher Preferred						working with us, but this is at a cost as they are requesting significantly more upfront funding in advance e.g. 6 months rent in advance and bond. This is however funded from homeless prevention funding/housing support grant. We have also embedded the WG Leasing Scheme which we can only discharge homeless duties into. RSLs continue to support housing homeless households from our housing register.
DOPS41 CP WBO4.3	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	99.3%	98%	98%	100%	100%	Quarterly Indicator Target Setting: Target retained. To continue to achieve a positive outcome for grant recipients in living more independently. Performance: On target – 77 service users surveyed in Q1 and Q2.
PAM/015 (PSR002) CP WBO4.3	Average number of calendar days taken to deliver a Disabled Facilities Grant (CEX) Lower Preferred	798.91 days	542 days	542 days	928.25 days	768.92 days	Quarterly Indicator Target Setting: Target includes six months to approve grant award and a further twelve months to complete the DFG, this is based on the exponential demand on the service which has significantly increased the waiting time against the available capital to deliver the adaptations on an annual basis. Performance: Focus has again been spent on certifying legacy cases. During Q2, we successfully certified two cases from 2019/2020 along with a further 2 cases from 2020/2021. Given that these 4 cases are historic, our average days has been impacted. However, we are confident that our average days will improve with each passing month/quarter as we continue to close cases from previous years.
CED60 CP WBO4.3	Number of additional affordable homes provided by Registered Social Landlords (RSLs) across the County Borough (CEX) Higher Preferred	77	110				Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.3.1	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 2: The agreed action plan was to plan the homelessness strategy. We are nearing the end of the process and majority of the actions have been completed. The main part of this was the review of the Social Housing Allocation Policy. The review of the policy is well underway. The draft for the Social Housing Allocation Policy is out to public consultation and will close in October 2025. We have completed the purchase of three properties, delivering 16 units of temporary accommodation. This is in addition to Mapletree House, which was already a BCBC owned building but has now been repurposed to deliver nine units of temporary accommodation. Further properties to purchase are in the pipeline to achieve the purchase of six properties as approved by Cabinet.	Consultation responses will need to be considered to determine if any further amendments are required. If the amendments are minor, the policy will be taken to cabinet for approval and should be implemented in December/January. If major amendments are required, it may need to go back out to public consultation
WBO4.3.2	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 2: Targeted work on the top 20 empty has continued. During Q1 and Q2 one of the top 20 properties has become occupied. A further seven properties are under renovation and four properties are up for sale. Five properties are subject to enforcement action (one Compulsory Purchase Order (CPO), one enforced sale; two planning prosecutions pending and one enforcement notice served). The remainder are subject to ongoing informal action in line with our Strategy. Work also continues on properties outside the top 20 utilising the 5-stage escalation letter process and enforcement provisions. In Q2, BCBC made its first CPO under the Empty Homes Strategy. We have successfully obtained WG funding to support the work of our empty homes enforcement in relation to two long term empty homes (£250k and £22k). This will be used for our CPO and for an enforced sale procedure. A further two funding applications have been submitted to WG to support work in default and other enforcement action (£100k and £75k). We are continuing attend the Empty Homes Working Group Meetings chaired by Shared Regulatory Services, where we discuss long term empty properties and agree to co-ordinate our approach to address these.	

WBO4.4: Support children with additional learning needs

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
DEFS170 CP WBO4.4	Percentage of new local authority individual development plans (IDPs) delivered using the online IDP system (EEYYP) Higher Preferred	0%	100%	50%	3%	0%	↑	<p>Quarterly Indicator</p> <p>Target Setting: While there have been some issues getting the online IDP system operating we are committed to transferring all IDPs to the new online system as soon as possible to comply with the Additional Learning Needs and Education Tribunal (Wales) Act.</p> <p>Performance: We currently have 601 local authority IDPs. To date, 18 have been delivered via the online IDP system but this will incrementally increase over time. Schools have been able to use the system to develop school-based IDPs and there are now 38 school-based IDPs in the online system.</p>
DEFS171 CP WBO4.4	Number of pupils on the waiting lists for specialist provision (EEYYP) Lower Preferred	55	10	30	27	13	↓	<p>Quarterly Indicator</p> <p>Target Setting: Placing pupils in specialist provision at the earliest opportunity ensures that all of their educational needs are met. Throughout the year 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.</p> <p>Performance: Waiting lists have decreased significantly since June 2025 due to suitable places being identified from September 2025. Some of the additional £1m funding will be used to support the development of in-house 'educated other than at school' (EOTAS) provision through Youth Services and the utilisation of currently under-used buildings for additional classes as satellite bases. A pressure bid has been submitted to support staffing and additional longer-term running costs. An ALN Grant bid has been accepted, to install a mobile classroom in Ysgol Bryn Castell, increasing school capacity by two extra classes. The planning and procurement process for this has commenced.</p>
DEFS172 CP WBO4.4	Percentage of year 9 pupils with Additional Learning Needs (ALN) with a transition plan in place, that have had an annual review by 31 March of each current school year.(EEYYP) Higher Preferred	74.3%	100%					Annual Indicator - To be reported at Q4

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.4.1	Implement the online IDP (Individual Development Plan) system for local authority and school-based IDPs. (EEYYP)	YELLOW (Good)	Quarter 2: An overview of the IDP system was presented at the ALNCo Forum on 20 May 2025. There have been a number of meetings over the summer and autumn term to address issues with the system and we are now starting to launch the IDP system with schools. The data sharing agreement has now been finalised. The system has been introduced to some settings to develop one-page profiles on the system and some local authority IDPs are now being completed on it. To date, 18 local authority IDPs and 38 school IDPs have been delivered via the online IDP system but this will incrementally increase over time.	
WBO4.4.2	Develop a five-year plan to meet increasing demand on support services, specialist provision and schools (EEYYP)	AMBER (Adequate)	Quarter 2: The ALN Provision Plan 2025-2030 has been shared and approved by the directorate's Corporate Director and Head of Learning. A Post-16 transition process has been developed and shared with schools, and all pupils with an IDP have transition plans developed from Year 9 onwards. However, the process will not be complete until we better understand the funding element. We are awaiting clarity from WG on Post-16 funding. We do not yet know whether local authorities will be responsible for a budget or managing claims for Post-16 courses going forward. We are awaiting feedback on pressure bids for additional provision to meet demand and reduce waiting lists. Where we have not had capacity to place pupils in a learning resource centre, three schools have agreed to take additional pupils utilise available empty classrooms to provide additional teaching areas when required. This reduces staffing costs and provides more appropriate settings to meet pupil needs while working through the statutory process of establishing new learning resource centres.	We will receive confirmation from WG on the budget responsibilities for Post-16 courses and receive outcomes on pressure bids submitted for additional specialist provision.

WBO4.5: Safeguard and protect people at risk of harm

Performance Indicators

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PI Ref, Type & Aim	PI Description and Preferred Outcome	Year End 24-25	Target 25-26	Q2 Target 25-26	Q2 position 25-26 & RYAG	Q2 24-25 (same period last year)	Direction vs same period last year	Performance this period
CH/003 CP WBO4.5	Children's safeguarding referrals – decision making in 24 hours (SSWB) Higher Preferred	99.97%	99.5%	99.5%	99.92%	99.93%		Quarterly Indicator Target Setting: To sustain high performance and ensure children are protected from harm and target takes account of occasional system glitches. Performance: Positive performance which is being sustained.
SSWB63 CP WBO4.5	Average waiting time (in days) on the Deprivation of Liberty Safeguards (DoLS) waiting list (SSWB) Lower Preferred	10 days	24 days	24 days	24 days	30 days		Quarterly Indicator Target Setting: 2023/24 was not a typical year due to additional commissioned resources to reduce the backlog. Current performance stands at 24 days- so we would recommend that for this year. Performance: There has been an increase in the days waiting for allocation during this quarter but we remain on target. This was due to the BCBC DoLS teams and independent BIA's taking time off over the summer as well as an increase in referrals. We do continue to manage the numbers and monitor the waiting times weekly.
SSWB77 CP WBO4.5	Percentage of Adult safeguarding inquiries which receive initial response within 7 working days (SSWB) Higher Preferred	83.08%	85%	85%	92.39%	76.47%		Quarterly Indicator Target Setting: The 7 days response relates to the Local Authority and other key partners. We will continue to improve our own performance and those of our partners. Performance: Positive performance which is being sustained.
SSWB62 CP WBO4.5	Percentage of child protection investigations completed within required timescales (SSWB) Higher Preferred	84.40%	80%	Annual Indicator - To be reported at Q4				

Commitments

Code	Commitment	Status	Progress this period	Next Steps
WBO4.5.1	Work as One Council to effectively safeguard children and adults at risk (SSWB)	YELLOW (Good)	Quarter 2: (SSWB) Corporate Safeguarding Board continues to lead safeguarding in BCBC bringing together representatives of all directorates. A revised Corporate Safeguarding Policy has been developed and approved by Cabinet. (EEYYP) The Cwm Taf Morgannwg Exploitation Strategy 2025-2028 is now live for the Cwm Taf Morgannwg region, but schools have not yet completed training in the toolkit. Training will be delivered in the Designated Safeguarding Person (DSP) Forum that is expected to take place in January 2026. Education Engagement Team Co-ordinators and Education Welfare Officers have received the training. We are awaiting the updated WG guidance for on safeguarding children in education: handling allegations of abuse against teachers and other staff. School safeguarding audits will be completed in the autumn term 2025-26 and an audit analysis will be completed in early 2026.	Each directorate needs to progress self-evaluation of their safeguarding performance.
WBO4.5.2	Identify children who are more likely to offend and provide them with support to reduce offending behaviour. (EEYYP)	YELLOW (Good)	Quarter 2: We have successfully linked with the Youth Support Service outreach workers to ensure that children who are engaging in anti-social behaviour and are on the Bridgend Youth Justice Service (BYJS) prevention waiting list, are receiving intervention. There is a police notification to BYJS of all children who have had involvement with them, allowing for timely intervention and early support for those at risk and further strengthening the service's preventative measures. A South Wales Police restructure has caused a delay in establishing an early notification process to identify those children at risk of harm related to offending behaviour at the earliest point. This work is still planned to go ahead in early 2026. The referral pathway for children referred via the Multi-agency Safeguarding Hub (MASH) and Early Help Team has been established. This pathway brings together representatives from various departments, including Children's Services, the EEYYP Directorate, the Anti-Social Behaviour Team, Exploitation Team and the Trauma Service for discussions on referrals from other sectors. This collaborative approach ensures that cases are reviewed holistically and that appropriate interventions are implemented. A three -year growth proposal for youth support services has been developed, costed and submitted to Cabinet Member for consideration. The service is awaiting feedback.	

Performance against MTFS Targets

Page 53	PI Ref & Type	PI Description	Annual target 25-26 £'000	Performance at Q2				Performance this period			
				Achieved Q2		Likely to be achieved by year end		Variance year end			
				£'000	%	£'000	%	£'000	%		
	DRE6.1.1 WOW	Percentage budget reductions achieved (Overall BCBC budget) Higher Preferred	8,379	5,593	67%	7,522	90%	857	10%	<p>Target Setting: To achieve all reductions outlined in the MTFS</p> <p>Performance: The most significant budget reduction proposals unlikely to be achieved in full are (> £100,000 shortfall):-</p> <ul style="list-style-type: none"> EEYYP5 – Reduction in Strategy, Performance and Support Group (£109,000 shortfall). The staff consultation process is due to commence in quarter 3 of 2025-26. Saving will be made in full in 2026-27. SCH1 – Efficiency saving against School Delegated Budgets – 1% in 2025-26 (£1.186 million). Whilst the saving is referenced as having been achieved due to the overall reduction in the Individual Schools Budget (ISB), the reduced budgets have resulted in total projected deficit balances for schools at year end of £5.087 million. Officers are working with schools to bring this overall deficit down. SSW8 – Reduction in provision of number of Supported Living Accommodation units (£190,000 shortfall). The service area is actively seeking means to achieve this budget reduction proposal. 	

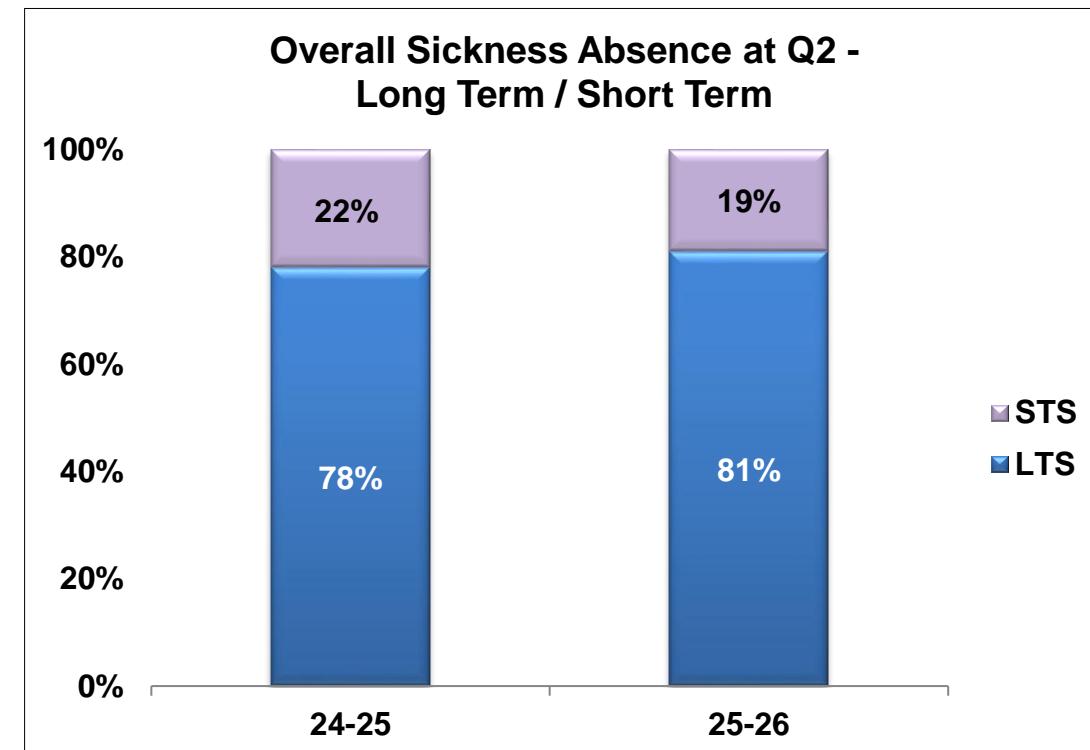
Additional Sickness Information

Directorate	FTE 30.09.2025	QTR2 2024/25			QTR2 2025/26			Cumulative Days per FTE 2024/25	Cumulative Days per FTE 2025/26
		Number of FTE days lost	No. of Absences	Days per FTE	Number of FTE days lost	No. of Absences	Days per FTE		
Chief Executive Directorate	416.70	1052.31	91	2.50	1673.81	101	4.02	4.71	7.06
Communities Directorate	480.26	2186.44	153	4.41	1690.26	139	3.52	8.16	7.12
Education, Early Years and Young People Directorate	464.70	1128.76	180	2.42	1152.67	208	2.48	5.49	5.40
Schools	2134.34	4091.73	739	1.90	3704.13	629	1.74	5.13	4.69
Social Services and Wellbeing Directorate	1020.48	4650.28	416	4.57	4449.56	346	4.36	8.59	7.56
BCBC TOTAL	4516.48	13109.52	1579	2.88	12670.44	1423	2.81	6.22	5.89

Sickness Absence by Reason

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BCBC Overall		Number of FTE days lost			
Absence Reason		Q1	Q2	Total	% of Cumulative days lost
Bereavement Related		1154.75	845.28	2000.03	7.52%
Cancer		433.44	369.14	802.58	3.02%
Chest & Respiratory		577.15	474.25	1051.40	3.95%
Eye/Ear/Throat/Nose/Mouth/Dental		656.39	538.63	1195.02	4.49%
Genitourinary / Gynaecological		257.35	249.24	506.59	1.90%
Heart / Blood Pressure / Circulation		461.68	556.56	1018.24	3.83%
Infections		1006.44	711.25	1717.69	6.46%
MSD including Back & Neck		2289.36	2462.66	4752.01	17.86%
Neurological		720.16	543.61	1263.77	4.75%
Other / Medical Certificate		0.00	0.00	0.00	0.00%
Other Mental illness		62.38	94.96	157.34	0.59%
Pregnancy related		113.10	124.30	237.40	0.89%
Stomach / Liver / Kidney / Digestion		1317.15	1023.00	2340.15	8.80%
Stress/Anxiety/Depression not work related		3163.10	2928.12	6091.22	22.89%
Stress/Anxiety/Depression work related		1723.23	1749.42	3472.65	13.05%
TOTALS		13935.67	12670.44	26606.11	



Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
Audit Wales, Arrangements for Commissioning Services (June 2025)	R1 Establish commissioning arrangements The Council should strengthen and formalise current practice, to assure itself that the decisions it makes to commission services are consistently shaped by: • an understanding of the service to be commissioned and its intended outcomes (para 17); • setting out how it will assess and monitor the value for money of commissioned services over the short to longer term (para 18); • an appraisal of all the options to deliver the service from the perspective of economy, efficiency and effectiveness over the short to longer term (para 19); • planning over an appropriate timescale (para 20); • an understanding of long-term resource implications (para 21); • ensuring that wider impacts of the service are maximised (para 22); • working with the right people and partners to design and deliver the service (para 23); and • sharing lessons across the organisation (para 25)	Chief Executive/CMB	Dec 2025	A report was presented to Corporate Overview & Scrutiny Committee (COSC) on 23 October 2025 which included the full Audit Wales report along with the Council's Management Response. We are awaiting the publication of the National Report before revised guidelines can be produced.	n/a	YELLOW
	R2 Strengthen compliance with its commissioning arrangements To ensure that the Council's corporate approach to commissioning is consistently used across service areas, the Council should introduce arrangements to monitor compliance with its corporate approach to commissioning (para 25).	Chief Executive/CMB	Dec 2025	As above	n/a	YELLOW
	R3 Introduce regular review of the Council's commissioning arrangements To ensure the Council identifies opportunities to improve value for money, it should routinely evaluate the effectiveness of its corporate commissioning arrangements across the organisation (para 25).	Chief Executive/CMB	March 2026	As above	n/a	YELLOW
CIW Improvement Check Children's Social Care Services (June 2025)	PE1 - Retain focus on implementing Signs of Safety model of practice, achieving consistent ways of working across all staff and teams: *Workforce Transformation workstream meets 6-weekly and governs SofS implementation including QA activity ensure that SofS is embedded across teams. *Consultant Social Worker will support specific teams to ensure SofS is embedded across all teams.(RIF funded). *SofS Champion event to be held to ensure full understanding of role and responsibility for each team *CIG to continue to be used as a practice forum to celebrate good practice and areas for development *Reflective Sessions involving partners to continue to be held.	Principal Officer Social Work Transformation	March 2026	The Principal Officer is developing a work programme to continue to enhance teams understanding of signs of safety. They are also working with external partners to raise awareness of the model. Ongoing quality assurance activity is being undertaken to monitor the implementation of the approach across all teams	n/a	GREEN

Name of Audit / regulator Page 56	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
	Pr1 - 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: *Implement the recommendations and actions contained within the Family Support Commissioning strategy. *Multi-Agency board to monitor implementation of the strategy	PO Family Support	March 2027	The Family Support Commissioning strategy was taken to corporate management board in July. An action set was to convene a multi-agency strategic board to monitor the implementation of the recommendations. This board will meet for the first time at the beginning of November.	n/a	YELLOW
	Pr2 - Continue to implement plans in the local authority commissioning strategy, to support timely improvements: *Implement the Eliminate Profit action plan to develop services to prevent children from becoming looked-after and those that need to exit care.	Commissioning and Sufficiency Lead	March 2027	Work continues to progress in relation to the development of internal residential provision with one premises due to go live in February 2026. Children currently placed in out of county or high-cost placements are being identified for this provision. A further premises is being explored during this quarter.	n/a	RED
	Pr3 - Ensure that children are not placed in unregistered services and continue efforts to identify suitable, registered placements: *To increase foster carer availability and capacity. *Increase internal residential provision capacity. *Ensure there are clear and timely plans for children's move on from care. *Use the re-modelling fostering board to monitor progress linked to the above actions	Commissioning and Sufficiency Lead	June 2026	This continues to be an area of challenge due to placement sufficiency issues being experienced across Wales. During Q2 we have children placed in unregulated placements but are exploring regulated options for them on a weekly basis.	n/a	RED
	Pr4- Ensure the fostering service and CECT retain priority focus, to ensure improvements are made in a timely way: *To continue to monitor performance, compliance, staff surveys, outcomes, staffing to prevent any impact on service delivery *IRO service to continue to monitor quality of care planning and escalate issues to TM's and GMs when required to do so. *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	Group Manager Placement and Provider Services	June 2026	The Group Managers for case management and transition and provider services continue to monitor the performance of teams and follow up on practice issues. Joint workshops have been held to ensure positive working relationships which appear to be having an impact. This will continue to be monitored in coming months given the scrutiny around foster placements and high-cost residential placements.	n/a	GREEN
	W1 - 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: *To implement the exploitation strategy and develop our exploitation service and then monitor the impact of the service on outcomes for children. *Multi-agency training to be delivered to teams via Regional Safeguarding board. *Exploitation Champions to continue to meet and promote the exploitation strategy and approaches to working with children and families.	Group Manager Locality Hubs	June 2026	The regional exploitation strategy has been launched, and an exploitation team is being developed within Edge of Care services. Training has been delivered to teams on the strategy. Next steps will involve the recruitment to the exploitation team and development of the practice model once staff are in post.	n/a	YELLOW

Name of Audit / regulator Page 57	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
	<p>W2 - Work with practitioners to develop and embed agreed standards for record keeping:</p> <ul style="list-style-type: none"> *Refresh record keeping guidance and ensure teams are implementing consistently via QA activity. *Training to be developed and delivered to teams to ensure consistency in recording. 	Principal Officer Social Work Transformation	June 2026	AI developments will assist with this area of consistency. However, in the meantime Quality Assurance work is being undertaken to identify best practice in relation to this area.	n/a	RED
	<p>W3 - Continue to review the quality of assessments and plans and share learning to support practice improvements:</p> <ul style="list-style-type: none"> *Continue to implement the QA framework, MSC and service based audits to identify good practice and areas for development. *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 	Principal Officer Social Work Transformation	June 2026	The QA framework is now well embedded into the local authority. Themes being identified are being fed back to teams and via training on areas for improvement. The most significant change model will continue to support this area.	n/a	GREEN
	<p>W4 - 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:</p> <ul style="list-style-type: none"> *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 	Principal Officer Social Work Transformation	June 2026	Through the development of Signs of Safety Conferences, children are now always invited to meetings. However, up take on this from children is low at this moment. Ongoing work to encourage children's attendance will be undertaken via teams and the IRO service.	n/a	GREEN
	<p>W5 - Ensure case conference record keeping is in line with the requirements of the WSP:</p> <ul style="list-style-type: none"> *To review the approach to minute taking and that notes are proportionate and reflect the strengths, risks and needs within families clearly. *Training to be provided to business support staff on expectations on minute taking. 	Group Manager Business Strategy, Performance and Improvement	June 2026	AI developments will assist with this area of consistency. However, in the meantime Quality Assurance work is being undertaken to identify best practice in relation to this area.	n/a	GREEN
	<p>W6 - Continue to ensure improvements to the conference process are co-produced with people:</p> <ul style="list-style-type: none"> *To continue implement SofS conferences consistently and ensure that the voice of children and families are at the centre. *Increase the number of children participating in their CP conference through the child's social worker having early discussions with families regarding attendance. 	Group Manager IAA and Safeguarding	June 2026	Through the development of Signs of Safety Conferences, children are now always invited to meetings. However, up take on this from children is low at this moment. Ongoing work to encourage children's attendance will be undertaken via teams and the IRO service.	n/a	GREEN

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
Page 58	<p>Pa1 - Continue to work with education partners to develop a shared understanding of roles and responsibilities:</p> <ul style="list-style-type: none"> *To continue with attendance at Team Bridgend, Primary Federation and BASSH. *Continue with interface with EEYP directorate *SofS multi-agency training to commence with Education services by end of 2025 	Group Manager IAA and Safeguarding	June 2026	We continue to attend relevant forums with Education, Early Years and Young People Directorate (EEYYP) and continue to look at opportunities for joint working. Training has been provided to schools and EEYYP staff in regard to Signs of Safety.	n/a	GREEN
	<p>Pa2 - Continue to work with partners to implement threshold guidance in a timely and robust way:</p> <ul style="list-style-type: none"> *To launch local threshold guidance and hold raising awareness sessions of the guidance with relevant partners. *Reflective sessions continue to be held with partners to develop shared understanding of thresholds. *SofS multi-agency training to delivered to all partners. 	Group Manager IAA and Safeguarding	June 2026	A regional threshold document continues to await sign off via the regional safeguarding board. It is anticipated that this will now be agreed by December 2025.	n/a	GREEN
	<p>Pa3 - Continue to work with partners and seek feedback on specific areas of practice - exploitation, professional concerns, and the operational response to the Children (Abolition of Defence of Reasonable Punishment) (Wales) Act 2020 - to ensure improvements are made in a timely way:</p> <ul style="list-style-type: none"> *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. *Reflective sessions continue to be held with partners to develop shared understanding of thresholds. *SofS multi-agency training to delivered to all partners 	Deputy Head of Service	March 2026	The Joint Operational Group meets monthly where issues related to exploitation, professional concern and other areas are discussed regularly to ensure there is a full understanding from a partner agency perspective. These meetings will continue to address the issues identified by CIW.	n/a	GREEN
	<p>Pa4 - Continue to work with partners to develop an agreed approach to multi-agency training and practice:</p> <ul style="list-style-type: none"> *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 	Workforce Development Manager	March 2026	There are already aspects of joint training undertaken. However, ongoing work will be explored by Social Care Workforce Development team to identify further partner training.	n/a	GREEN
	<p>Pa5- Work with regional partners to review EDT arrangements and promote improvements in a timely way:</p> <ul style="list-style-type: none"> *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. 	Group Manager Locality Hubs/ Group Manager IAA and Safeguarding	March 2026	Children's and Family services are now represented at the EDT management board and a monthly interface meeting has been created to discuss any potential working issues in a timely way. Additional investment has been agreed to provide more resilience into the service. Discussions are progressing with regional partners to agree the scope for a wider review of the service.	n/a	GREEN
CIW Inspection Report on Foster Wales Bridgend June 2025	<p>R1 - Matching processes do not always fully assess risks to children's emotional well-being or placement stability:</p> <ul style="list-style-type: none"> * Revise and embed updated matching documentation and guidance; include rationale, risk matrix, and voices of children and carers in matching decisions. 	Group Manager Placement and Provider Services	Nov 2025	A clear action plan is in place following the June inspection. Work has begun to strengthen matching processes, including improved oversight of placement decisions and risk documentation. New recording tools are being embedded, with progress monitored through QA activity.	n/a	YELLOW

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
Page 59	R2 -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 Placement and Provider Services	Nov 2025	A plan is in place to ensure all annual reviews are completed within required timescales. The introduction of the deputy manager role provides additional oversight and ensures consistent monitoring of review completion.	n/a	YELLOW
	R3 - 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 Placement and Provider Services	Oct 2025	A refreshed training offer is being finalised as part of the service remodelling. The new framework will link core and advanced learning to carer development pathways. Interim measures are in place to ensure access to mandatory training while the new programme is launched.	n/a	YELLOW
	R4 - 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	Group Manager Placement and Provider Services	Oct 2025	Trauma-informed training has been commissioned through Eliminate funding, offering both one-to-one and group sessions for carers. This supports the shift toward more reflective and therapeutic practice, with delivery scheduled throughout Q3 and Q4.	n/a	YELLOW
	R5 - 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 Placement and Provider Services	Oct 2025	Processes for managing exemptions have been reviewed to ensure compliance with regulations. The introduction of the deputy manager role has strengthened management oversight and ensures timely monitoring and review of all exemptions.	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: • 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	Corporate Policy and Performance Manager	Jun-25	This is included in the Council's draft self-assessment 2024/25 which was presented to Governance and Audit committee in July and will go to Cabinet / Council in October 2025.	n/a	BLUE
	R2 The Council should build on its current approach to engagement by considering ways to: • 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	Corporate Policy and Performance Manager	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	Corporate Policy and Performance Manager	Apr-25	This information was included as part of the directorate business planning process.	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.	n/a	n/a	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	BLUE

Name of Audit / regulator Page	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
Page 60	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.	n/a	n/a	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 Responsible Individual during statutory and quality assurance visits.	n/a	BLUE
	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	Continued efforts have been to soften the environment of the service. No further improvements can be made unless there is significant spend on the layout and design of the service and as it is a brand-new building this would not be feasible. The service is due to be inspected before the end of the year where we feel these areas for improvement will be lifted.	n/a	GREEN
	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	Sept 2025	The emergency side of the provision is more able to transition children out of the service within the SOP and into more long-term provision as there is an improved understanding between teams what these beds are for. There are still occasions children stay longer than 28 days, but this is usually with a plan in place which can be clearly communicated when the service is inspected.	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	Sept 2025	Review of Medication audit process. The system now involves a weekly audit on Wednesdays. Medication cabinet keys to be locked away when not in use. Responsible Individual overseeing this providing oversight during QA visits and Reg73 visits. All staff trained in medication. All staff have competency assessments. Medication procedure reviewed and read by all staff	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.	n/a	n/a	Complete	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.	Head of Service	Aug-25	Work is underway in relation to the corporate vision and aspirations around transformation which will need to be reflected within the Digital Strategy. However, 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.	March 2026	AMBER
	Arrangements for monitoring value for money R3 To help ensure that the Council can effectively monitor and	Head of Service	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	March 2026	AMBER

Name of Audit / regulator Page 61	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
	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.			implementing an improved process to monitor progress and impact over the short, medium and long term		AMBER
Audit Wales, Use of Service User Perspective and Outcomes (Jan 2024)	R1 Information on the perspective of the service user • 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.	Corporate Policy and Performance Manager	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. Findings have been analysed and will be communicated soon.	April 2026	AMBER
	R2 Information on progress towards outcomes • 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.	n/a	n/a	Complete	n/a	BLUE
	R3 Quality and accuracy of data • 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.	n/a	n/a	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	n/a	n/a	Complete	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	n/a	n/a	Complete	n/a	BLUE
	Pe11 - Ensure people consistently feel listened to and treated with dignity and respect	Head of Service	Sept 2023	Signs of Safety is becoming more embedded into practice and the adoption of the most significant change model is assisting us in gaining feedback from families about their experiences of working with us. TGP Cymru continue to develop advocacy work, and we have recently utilised some regional funding in relation to co-production work within early help. However, these are all relatively new developments so more work required to understand the themes coming from the activity.	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	n/a	n/a	Complete	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	Group Manager Commissioning	Continuous	This continues to be an area of challenge due to placement sufficiency issues being experienced across Wales. During Q2 we have children placed in unregulated placements but are exploring regulated options for them on a weekly basis.	March 2030	AMBER

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
Page 62	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	n/a	n/a	Further actions for this recommendation will be recorded under recommendation Pa2 (Y3/404) CIW Improvement Check Children's Social Care Services (June 2025)	Sept 2025	BLUE
	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
	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	n/a	n/a	Complete	n/a	BLUE
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 Partnership Agreement (RPA) has been approved by CTMUHB and the three Local Authorities at respective Board and Cabinet meetings in July. The practical implementation of the RPA is being progressed, with resolution of a data sharing issue that is impacting negatively on hospital discharge as an example of a 'quick win'. The RPA was also reviewed at the Joint Overview Scrutiny Committee on 3rd October 2025. The Partnership Leadership Team (PLT) will receive a draft ICCS Business Case at the end of October. This will support future investment decisions including on the Regional Integration Fund (RIF)	March 2026	GREEN
	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

Name of Audit / regulator	Recommendation / proposal for improvement	Responsible Officer	Initial Delivery Date	Action Update Q2 2025-26	Current Delivery Date	BRAYG Q2 25-26
Page 63	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	The development of a demand and capacity model, to help shape services within the Integrated Community Care System, is being undertaken however, the creation of a pathway between the Clinical Navigation Hub (CNH) and local authorities' Single Point of Access is on pause due to competing priorities on the CNH. The objective to 'align' health and care community teams across RCT and Merthyr Tydfil by this Autumn will not now be met due to the ongoing organisational development process for the new Hospital@Home Service.	March 2026	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	Limited schedules agreed within the Partnership agreement. Further detail required to determine staffing models and resources.	March 2026	YELLOW
	R7 Regional Workforce Planning Like many parts of the public sector, the region is experiencing significant workforce challenges. The TPLB needs to consider how it can facilitate a regional and strategic approach to addressing these challenges and to help it deliver its priorities.	Head of Regional Commissioning Unit	ongoing	Workforce planning is largely progressed in individual local authorities and within the NHS rather than on a regional footprint. Social services workforce planning has been a success in Bridgend with a considerable reduction in reliance on agency workers and improvement in retention and recruitment. There is a regional Strategic Social Care Workforce Board which shares information and looks for opportunities to work regionally.	March 2026	AMBER
Audit Wales, Review of Arrangements to Become a 'Digital Council' (June 2021)	P1 The Council could improve its digital strategy	Head of Service	Dec 2024	Draft Strategy was completed and the public consultation carried out during June/July 2025. Corporate vision and aspirations around digital transformation are currently being reflected within the Strategy.	December 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:	23 JANUARY 2026
Report Title:	FORWARD WORK PROGRAMME UPDATE
Report Owner: Responsible Chief Officer / Cabinet Member	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 It also provides for the Committee 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.

APPENDIX A

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; and Group Manager – Prevention and Wellbeing.

Thursday, 4 December 2025 at 10.00am
POSTPONED

APPENDIX A

Friday, 23 January 2026 at 10.00am (Postponed from 4 December 2025)		
Report Topic	Information Required / Committee's Role	Invitees
Healthy Living Partnership – Agency Model	Including plans and various programmes provided e.g. carer's offer.	<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 Head of Development and Partnerships – Greenwich Leisure Limited</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
Western Bay Adoption Service Inspection Report		<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 Children and Family Services; Deputy Head of Children and Family Services.</p>

APPENDIX A

2026-27 Draft Forward Work Programme

Thursday, 9 July 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.	<p>Members and officers for the Briefing and Workshop – TBD.</p> <p>To be scheduled in early 2026 in partnership with IT.</p>
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	This will form part of the Digital Strategy which will be reported to the Corporate Overview and Scrutiny Committee Pre-Decision.

	Services and Wellbeing Directorate and how it is envisaged it could safely aid a reduction in staff numbers.	To be scheduled after the Digital Strategy has been considered at COSC.
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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)
- Review of the Regional Operating Model of the Emergency Duty Team
- Review of the Fostering Service (9-12 months from October 2025)
- External Review of Strength Based Outcome Focused Practice Model being embedded into Adult Social Care
- Further Report regarding the Community Hubs Strategy (at the appropriate time early in 2026)

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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	Members were advised that the Early Intervention and Prevention Hub operates an answerphone service and returns calls within set timescales which allows them to have detailed and meaningful discussions to enable proportionate assessments and that there is an alternative number for emergencies. The Committee expressed concern that the information on the Council's website does not make this clear and recommended that the information relating to the Hub be updated to provide clarity for the public.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Draft Social Services Annual Report 2024/25	The Committee recommended that correspondence be sent to the Welsh Government expressing the following concerns: <ol style="list-style-type: none"> The sustainability of service delivery which is often reliant on grant funding including short term funding when recurring funding is required, e.g. Elimination of Profit Grant Funding; Short notice of funding impacting on the Council's financial planning and implementation; 	Scrutiny/Chair of Committee	Letter sent and response received.	Follow link here

Date of Meeting	Agenda Item	Action	Responsibility	Outcome	Response
		<p>c. That national policy commitments resulting from legislative changes should be fully funded both in terms of capital funding and ongoing revenue funding including a commitment to fund employer national insurance payments for individuals employed by agencies who provide services to the Council;</p> <p>d. The unavailability of all-Wales. comparative data.</p>			
11 Sep 25	Draft Social Services Annual Report 2024/25	<p>The Committee requested weekly costs for the following:</p> <p>a. Foster Placement and Residential Placement for a Care Experienced Child; and</p> <p>b. Residential Placement for an adult (including information regarding contributions from Health).</p>	Corporate Director – Social Services and Wellbeing / Head of Adult Social Care / Deputy Head of Children and Family Services	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Draft Social Services Annual Report 2024/25	The Committee requested a written briefing paper to better understand the proposed 'core and cluster' model of supported living for people with learning disabilities.	Corporate Director – Social Services and Wellbeing / Head of Adult Social Care	Recommendations circulated requesting response - to be provided. Chased.	

Date of Meeting	Agenda Item	Action	Responsibility	Outcome	Response
11 Sep 25	Draft Social Services Annual Report 2024/25	The Committee requested an all-Member Briefing detailing the <i>Building Resilient and Co-ordinated Communities</i> programme and highlighting the role of the Local Community Connectors, Navigators and Co-ordinators.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Draft Social Services Annual Report 2024/25	The Committee queried how the Council is making the public aware of and encouraging them to utilise community-based services and requested that consideration be given to using the Council Communications team and social media to raise awareness.	Corporate Director – Social Services and Wellbeing / Head of Adult Social Care	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Draft Social Services Annual Report 2024/25	The Committee requested further information regarding the Australian 2.0 step care model relating to mental health referenced during the meeting.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Draft Social Services Annual Report 2024/25	The Committee requested that future Annual Social Services Reports contain comparative data from comparable Welsh local authorities, where available.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Social Services Representations and Complaints Annual Report 2024/25	In relation to Table 4 – Complaint Themes, the Committee requested the number of complaints for each of the percentages shown.	Corporate Director – Social Services and Wellbeing / Compliments and Complaints	Recommendations circulated requesting response - to be provided. Chased.	

APPENDIX B

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Date of Meeting	Agenda Item	Action	Responsibility	Outcome	Response
			Resolution Manager		
11 Sep 25	Social Services Representations and Complaints Annual Report 2024/25	The Committee requested that future Annual Reports contain comparative data from comparable Welsh local authorities, where available.	Corporate Director – Social Services and Wellbeing / Compliments and Complaints Resolution Manager	Recommendations circulated requesting response - to be provided. Chased.	
11 Sep 25	Social Services Representations and Complaints Annual Report 2024/25	The Committee requested copies of the Accessible Complaints Information referred to in the Objectives section of the report and the Child-Friendly version that has been produced.	Corporate Director – Social Services and Wellbeing / Compliments and Complaints Resolution Manager	Recommendations circulated requesting response - to be provided. Chased.	
25 Sep 25	Care Inspectorate Wales (CIW) Improvement Check of Childrens and Family Services June 2025	The Committee discussed the regional operating arrangements of the Emergency Duty Team and were advised that the arrangement was to be reviewed exploring what constitutes emergency out of hours social work and to provide clarity to prospective callers of the appropriate service to contact when necessary. The Committee recommended that Members are engaged in the review for their views.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	

Date of Meeting	Agenda Item	Action	Responsibility	Outcome	Response
25 Sep 25	Care Inspectorate Wales (CIW) Improvement Check of Childrens and Family Services June 2025	The Committee discussed the resources required to implement the fostering aspects of the Action Plan and to recruit more in-house foster carers and requested a Briefing paper for all Members highlighting the importance of promoting becoming a foster carer for Bridgend.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
25 Sep 25	Care Inspectorate Wales (CIW) Fostering Service Inspection June 2025	The Committee recommended that the abbreviations and acronyms in the Foster Care Recruitment Strategy in Appendix 3 are removed or that a glossary be added to assist the Committee and the public.	Corporate Director – Social Services and Wellbeing / Group Manager – Provider Services	Recommendations circulated requesting response - to be provided. Chased.	
25 Sep 25	Care Inspectorate Wales (CIW) Fostering Service Inspection June 2025	The Committee expressed concern regarding the impact on service delivery of the Directorate's reliance on grant funding and recommended that this be added to the topics for discussion at the Deep Dive Group and requested that a list of all grant funding the Directorate has received in the last financial year and a breakdown of which services are funded by which grants, and which are one-off grants and which are recurring be provided to the Group and Members of the Committee.	Scrutiny/Chair of Deep Dive Group / Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
25 Sep 25	Care Inspectorate Wales (CIW) Fostering	Having discussed their concerns regarding the reliance on grant funding in	Chief Officer – Finance,	Recommendations circulated	

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	Service Inspection June 2025	the above point, the Committee recommended that consideration be given to a zero-based budgeting exercise being undertaken exploring the possibility of bringing the services or parts of the services supported by grant funding into the Directorate's core budget, where possible.	Housing and Change / Corporate Director – Social Services and Wellbeing	requesting response - to be provided. Chased.	
25 Sep 25	Care Inspectorate Wales (CIW) Fostering Service Inspection June 2025	The Committee discussed the improvements made in relation to workforce and recruitment which has resulted in a substantial reduction in agency staff and an increase in newly recruited or qualified social workers being employed. The Committee were mindful that there is a period of supervision and training which requires time to embed and expressed concern that this could be impacting on consistency of practice identified by the Inspectorate and requested a written update be provided.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
25 Sep 25	Information Report - Quarter 4/Year End Performance 2024-25	The Committee expressed concern regarding the continued downward trend in relation to sickness absence and requested an update on any actions being taken to try and improve the position.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
6 Nov 25	Annual Corporate Safeguarding Report 2024-25	Members referred to a planning application proposing an expansion to HMP Parc Prison and expressed their	Corporate Director – Social	Recommendations circulated requesting response	

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		<p>concerns regarding the increased pressures this could place on Social Services including the provision of additional social care and supportive arrangements on release including the provision of housing and the possible impact on the safeguarding of inmates. The Committee therefore recommended that the Corporate Director consider responding to the consultation highlighting the additional pressures this could place on the Service.</p>	Services and Wellbeing	- to be provided. Chased.	
6 Nov 25	Annual Corporate Safeguarding Report 2024-25	<p>The Committee acknowledged the improvements made at HMP Parc Prison to reduce rates of suicide and self-harm and improve relationships between the prison and the Social Services and Wellbeing Directorate and recommended that correspondence be sent to the Governor of the prison recognising the work and seeking clarification on how the prison proposes to continue to maintain and ensure safeguarding of all prisoners should the proposed expansion to the prison be approved and to invite them to attend and speak at a meeting of the Committee regarding safeguarding.</p>	Scrutiny/Chair of Committee	Letter sent. Response awaited.	Follow link here

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6 Nov 25	Annual Corporate Safeguarding Report 2024-25	<p>The Committee expressed concern regarding the significant corporate risk posed by the timescales involved around Digital System Replacement and recognising that the implications are Council-wide, recommended that:</p> <ul style="list-style-type: none"> a. the budgetary requirements to deliver the transformation within the tight timescale be quantified and that consideration be given to additional resources being allocated to achieve the transition; b. consideration be given to a dedicated ICT Lead Officer being allocated to the replacement project; c. Members receive an urgent written progress update regarding the transition; and d. that correspondence be sent to Lindsey Phillips inviting her to speak to Members regarding the Welsh Local Government Association's Digital in Social Care Framework which was launched in October 2025 and Bridgend's place within it. 	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
6 Nov 25	Annual Corporate Safeguarding Report 2024-25	Members expressed concern that home-educated learners may not have adequate contact with the Local Authority and the Committee were advised that the	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided.	

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		<p>level is set by National Guidance. The Committee recommended that legal advice be sought as to whether the Guidance can be tailored to have increased contact with the learners and ensure they are appropriately safeguarded.</p> <p>The Committee further recommended to refer the matter to Education and Youth Services Overview and Scrutiny Committee to consider adding the matter to their Forward Work Programme to monitor the situation.</p>			
6 Nov 25	Annual Corporate Safeguarding Report 2024-25	The Committee expressed concern regarding the perceived delay in utilising the £1m non-recurring budget approved by Cabinet to support schools in reducing permanent exclusions and requested an update regarding the use of the funding, when it will be utilised and the proposal being developed in partnership with schools including when it will be considered for decision.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
6 Nov 25	Community Hubs Strategy	Members were advised that key stakeholders in each community would be consulted on the proposed Strategy and their views sought to shape how the Hubs look in their particular area and the Committee recommended that an all-Member workshop be arranged to allow Councillors to also feed into the Strategy	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	

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		and that local Members are specifically consulted regarding proposed Hubs within their respective Wards.			
6 Nov 25	Community Hubs Strategy	The Committee discussed the lack of alignment between education and the Strategy and recommended that consideration be given to the possibility of utilising some of the school estate as potential Hubs and that this aspect be included in the Strategy.	Corporate Director – Social Services and Wellbeing	Recommendations circulated requesting response - to be provided. Chased.	
6 Nov 25	Community Hubs Strategy	The Committee discussed priority areas within Bridgend and requested a copy of the Regional Partnership Board Strategy which identified the seven priority areas for Bridgend County Borough based on level of need and current service provision.	Corporate Director – Social Services and Wellbeing	Complete	Follow link here
6 Nov 25	Forward Work Programme Update	The Committee requested that the following items be added to their Forward Work Programme: <ol style="list-style-type: none"> External Review of Strength Based Outcome Focused Practice Model being embedded into Adult Social Care; and Further Report regarding the Community Hubs Strategy (at the appropriate time early in 2026) 	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.	Item added to 'Reports to be Scheduled' part of the Committee's Forward Work Programme