

Public Document Pack

Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr

Bridgend County Borough Council

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



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

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



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

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

Dyddiad/Date: Dydd Iau, 23 Hydref 2025

Annwyl Cyngorydd,

PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL

Cynhelir Cyfarfod Pwyllgor Y Cabinet Dros Faterion Rhieni Corfforaethol Hybrid yn Siambr y Cyngor - Swyddfeydd Dinesig, Stryd yr Angel, Pen-y-bont ar Ogwr, CF31 4WB / o bell trwy Microsoft Teams ar **Dydd Mercher, 29 Hydref 2025 am 10:00**.

AGENDA

1 Ymddiheuriadau am absenoldeb

Derbyn ymddiheuriadau am absenoldeb gan Aelodau.

2 Datganiadau o fuddiant

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

3 Cymeradwyaeth Cofnodion

3 - 10

I dderbyn am gymeradwyaeth y Cofnodion cyfarfod y 07/05/2025

4 Adroddiad Blynnyddol y Gwasanaeth Adolygu Annibynnol 2024-2025

11 - 42

5 Gweithredu Cynllun Taliadau Cymhelliant yn Seiliedig ar Atebolrwydd Treth y Cyngor a Chynnydd Chwyddiannol mewn Lwfansau a Ffioedd ar gyfer Gofalwyr Maeth a Gofalwyr Perthnasau yng Nghyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr (BCBC)

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



43 - 54

6 Gwasanaeth Eiriolaeth Plant Rhanbarthol

55 - 72

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

73 - 106

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

107 - 126

9 Materion Brys

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

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

Yn ddiffuant

K Watson

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

Dosbarthiad:

Cynghorwr:

F D Bletsoe

E L P Caparros

P Davies

M J Evans

N Farr

J Gebbie

GC Haines

D M Hughes

M Jones

J E Pratt

JC Spanswick

T Thomas

A Wathan

AJ Williams

HM Williams

E D Winstanley

Ffon/Tel: 01656 643643

Facs/Fax: 01656 668126

Ebost/Email: talktous@bridgend.gov

Negeseuon SMS/SMS Messaging: 07581 157014 [Twitter@bridgendCBC](https://twitter.com/bridgendCBC)

Gwefan/Website: www.bridgend.gov

Cyfnewid testun: Rhowch 18001 o flaen unrhyw un o'n rhifau ffon ar gyfer y gwasanaeth trosglwyddo testun

Test relay: Put 18001 before any of our phone numbers for the text relay service

Rydym yn croseawu gohebiaeth yn y Gymraeg. Rhowch wybod I ni os yw eich dewis iaith yw'r Gymraeg

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

PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL - DYDD MERCHER, 7 MAI 2025

COFNOD O BENDERFYNIAD CYFARFOD O'R PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL A GYNHALIWYD MEWN MODD HYBRID YN SIAMBR Y CYNGOR - SWYDDFEYDD DINESIG, STRYD YR ANGEL, PEN Y-BONT AR OGWR, CF31 4WB DDYDD LLUN, 14 GORFFENNAF 2025 AM 16:00

Presennol

Y Cyngorydd J Gebbie – Cadeirydd

| | | | |
|----------------|----------|-----------|---------|
| E L P Caparros | P Davies | M J Evans | M Jones |
|----------------|----------|-----------|---------|

Presennol – O Bell

| | | | |
|------------------------------------|--------|------------|-----------|
| F D Bletsoe A Ulberini-Williams | N Farr | D M Hughes | J E Pratt |
|------------------------------------|--------|------------|-----------|

Ymddiheuriadau am Absenoldeb
Cyng J Spanswick

Swyddogion:

| | |
|--------------------------|-----------------------------------------------------------------------------|
| Claire Marchant | Cyfarwyddwr Corfforaethol Gwasanaethau Cymdeithasol a Llesiant |
| Claire O’Keefe | Pennaeth Diogelu – Cwm Taf Morgannwg |
| Steve Berry | Swyddog Rhianta Corfforaethol a Chyfranogiad |
| David Wright | Dirprwy Bennaeth Gwasanaethau Plant a Theuluoedd |
| Daniel Bolton | Rheolwr Grŵp - Gwasanaethau Darparu |
| Amy McArdle | Rheolwr Datblygu Rhanbarthol – Cwm Taf Morgannwg – Maethu Cymru |
| Nichola Rogers | Rheolwr Gwasanaethau Mabwysiadu Rhanbarthol - Gwasanaeth Mabwysiadu |
| | Rhanbarthol Bae'r Gorllewin |
| Jodi Farley-Morris | Rheolwr Recriwtio ac Asesu ar gyfer Bae'r Gorllewin - Gwasanaeth Mabwysiadu |
| | Rhanbarthol Bae'r Gorllewin |
| Christa Bonham-Griffiths | Rheolwr Strategol – Gwasanaeth Cyfiawnder Ieuenctid |
| Megan Apsee | Rheolwr Tîm Ymgysylltu ag Addysg |
| Michael Pitman | Swyddog Cymorth Technegol - Gwasanaethau Democrataidd |
| Oscar Roberts | Prentis Gweinyddu Busnes - Gwasanaethau Democrataidd |

Datganiadau o Ddiddordeb
Dim.

67. Cymeradwyaeth Cofnodion

| | |
|-------------------------------|-------------------------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | <u>PENDERFYNWYD</u> : Bod y Pwyllgor wedi cymeradwyo cofnodion y 10/01/2025 fel cofnod gwir a chywir. |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

68. Adroddiad Trosolwg O'r Gwasanaethau Iechyd a Ddarperir i Ofalu Plant A Phobl Ifanc Profiadol

| | |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | <p>Diben yr adroddiad hwn, a gyflwynwyd gan Bennaeth Diogelu Cwm Taf Morgannwg, oedd rhoi amlinelliad o'r gwasanaethau iechyd y mae Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg (CTMUHB) yn eu darparu i blant sydd wedi bod mewn gofal yn ogystal ag amlinellu cyflawniad amcanion o fewn Siarter Rhianta Corfforaethol – Addewid i Gymru.</p> <p>Gofynnodd y cynghorwyr gwestiynau ar y canlynol:</p> <ul style="list-style-type: none"> • Rhestrau aros ar gyfer plant niwroamrywiol • Rhestrau aros CAMHS • Llwybr y galw am wasanaethau CTM a'r adnoddau a ddefnyddir i ddiwallu'r galw hwnnw • Methu â chyflawni amcanion o fewn Siarter Rhianta Corfforaethol – Addewid i Gymru • A yw amserlenni o fewn deddfwriaeth yn cael eu bodloni <p>Cafodd y cwestiynau hyn eu hateb gan Bennaeth Diogelu Cwm Taf Morgan, y Cadeirydd, y Cyfarwyddwr Corfforaethol – Gwasanaethau Cymdeithasol a Llesiant a Dirprwy Bennaeth Gwasanaethau Plant a Theuluoedd. Cytunodd Pennaeth Diogelu Cwm Taf Morgan i drosglwyddo gwybodaeth am ostyngiadau mewn rhestrau aros ar gyfer plant niwroamrywiol ac unrhyw ôl-groniadau gwasanaeth cyfredol i Bwyllgor y Cabinet. Cytunodd y Swyddog Rhianta Corfforaethol a Chyfranogiad hefyd i rannu gwybodaeth CAMHS â'r Pwyllgor.</p> <p><u>PENDERFYNWYD</u>: Nododd y Pwyllgor Cabinet yr adroddiad a chyfraniad Bwrdd Iechyd Prifysgol Cwm</p> |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL - DYDD MERCHER, 7 MAI 2025

| | |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| | Taf Morganwg at gefnogi babanod, plant a phobl ifanc sydd wedi bod mewn gofal. |
| | Diolchodd y Pwyllgor i weithwyr gofal ym Mwrdeistref Sirol Pen-y-bont ar Ogwr am eu gwaith a'u cyflawniad yn erbyn amcanion yr adroddiad hwn. |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

69. Maethu Cymru Pen-y-bont ar Ogwr Diweddariad

| | |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | <p>Diben yr adroddiad hwn, a gyflwynwyd gan y Rheolwr Grŵp - Gwasanaethau Darparwyr a'r Rheolwr Datblygu Rhanbarthol - Cwm Taf Morgannwg - Maethu Cymru, oedd rhoi'r wybodaeth ddiweddaraf i Bwyllgor y Cabinet - Rhianta Corfforaethol ar Ddatblygiadau Gwasanaeth Maethu Cymru Pen-y-bont ar Ogwr.</p> <p>Gofynnodd y cynghorwyr gwestiynau ar:</p> <ul style="list-style-type: none"> • Y cynnydd yn nifer y plant ag anghenion cymhleth sydd angen eu maethu • Y rhesymau dros gyfraddau trosti isel o ymweliadau cychwynnol i asesiadau • Pwyntiau gwella o arolygiadau diweddar <p>Atebwyd y cwestiynau hyn gan y Rheolwr Grŵp - Gwasanaethau Darparwyr, y Rheolwr Datblygu Rhanbarthol - Cwm Taf Morgannwg - Maethu Cymru a'r Cyfarwyddwr Corfforaethol - Gwasanaethau Cymdeithasol a Llesiant.</p> <p><u>PENDERFYNWYD:</u> Nododd y Pwyllgor Cabinet gynnwys yr adroddiad.</p> <p>Diolchodd Pwyllgor y Cabinet i bawb a oedd yn rhan o gynhyrchu'r adroddiad a gofalmwyd maeth y Cyngor. Gofynnodd y Cadeirydd hefyd am anfon proffiliau a thudalennau enghreifftiol o'r ap Croeso Mawr newydd at y Pwyllgor Cabinet.</p> |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

70. Monitro Perfformiad a Chynnydd Gwasanaeth Mabwysiadu Rhanbarthol Bae'r Gorllewin

| | |
|------------------------|---------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | Diben yr adroddiad hwn, a gyflwynwyd gan Reolwr Gwasanaethau Mabwysiadu Rhanbarthol - |
|------------------------|---------------------------------------------------------------------------------------|

PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL - DYDD MERCHER, 7 MAI 2025

| | |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>Gwasanaeth Mabwysiadu Rhanbarthol Bae'r Gorllewin, oedd darparu gwybodaeth i Bwyllgor y Cabinet am berfformiad a chynnydd Gwasanaeth Mabwysiadu Rhanbarthol Bae'r Gorllewin, gan gynnwys gwybodaeth am berfformiad diwedd y flwyddyn. Roedd y cyflwyniad yn cynnwys fideo ar gyswllt rhwng brodyr a chwirydd a'r teulu.</p> <p>Gofynnodd y cynghorwyr gwestiynau ar:</p> <ul style="list-style-type: none">• Yr amserlen ar gyfer darpar rieni mabwysiadol yn cael eu hardystio• Nifer y mabwysiadwyr cymeradwy sy'n dod drwodd, a chyfradd drosi'r rhai sy'n cael eu cymeradwyo• Aelodaeth o'r Clwb Ieuenctid cysylltiedig <p>Atebwyd y cwestiynau hyn gan Reolwr Gwasanaethau Mabwysiadu Rhanbarthol - Gwasanaeth Mabwysiadu Rhanbarthol Bae'r Gorllewin, y Cadeirydd a Rheolwr Recriwtio ac Asesu Bae'r Gorllewin - Gwasanaeth Mabwysiadu Rhanbarthol Bae'r Gorllewin</p> <p><u>PENDERFYNWYD:</u> Ystyriodd a nododd y Pwyllgor Cabinet berfformiad a chynnydd y Gwasanaeth Mabwysiadu Rhanbarthol.</p> <p>Diolchodd Pwyllgor y Cabinet hefyd i bawb a oedd yn rhan o greu'r adroddiad, yn ogystal â'r rhwydwaith o fabwysiadwyr a rhieni mabwysiadol.</p> <p>Gofynnodd y Pwyllgor Cabinet hefyd am ddyddiadau penodol ar gyfer adolygiadau a gynhaliwyd o fewn y gwasanaeth.</p> <p>Gadawodd y Cynghorydd N Farr a'r Cynghorydd J E Pratt y cyfarfod yn dilyn yr eitem hon.</p> |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

71. Ffocws Ar Ymgysylltu - Llais Y Plentyn

| | |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | <p>Diben yr adroddiad hwn, a gyflwynwyd gan y Swyddog Rhianta Corfforaethol a Chyfranogiad, oedd rhoi trosolwg i Bwyllgor y Cabinet ar Rhianta Corfforaethol o weithgaredd Fforwm Ieuenctid Profiadol Gofal ar gyfer y flwyddyn Ebrill 2024 i Fawrth 2025.</p> <p>Gofynnodd y cynghorwyr gwestiynau ar y canlynol:</p> |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL - DYDD MERCHER, 7 MAI 2025

| | |
|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <ul style="list-style-type: none"> • Y rhesymau dros ddewis cartref y Fforwm yn Neuadd Evergreen • Cynlluniau ar gyfer ehangu presenoldeb yn y Fforwm • Cyfyngiadau ar bresenoldeb ar gyfer sesiynau unigol • Beth all aelodau etholedig ei wneud i gynorthwyo gyda nodau'r Fforwm leuenctid • Cynlluniau lleol i ddarparu offer i bobl ifanc sydd wedi profi gofal • Tafl-lwybr nifer y plant sydd wedi bod mewn gofal ym Mwrdeistref Sirol Pen-y-bont ar Ogwr <p>Atebwyd y cwestiynau hyn gan y Swyddog Rhianta Corfforaethol a Chyfranogiad a Dirprwy Bennaeth Gwasanaethau Plant a Theuluoedd.</p> <p>PENDERFYNWYD: Nododd y Pwyllgor Cabinet yr adroddiad a rhoddodd gydnabyddiaeth i'r gwaith y mae Fforwm Llais leuenctid Pen-y-bont ar Ogwr yn ei wneud.</p> |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

72. Diweddariad gan y Gwasanaeth Cyfiawnder leuenctid ar Blant sydd wedi Profiad o Ofal

| | |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | <p>Diben yr adroddiad hwn, a gyflwynwyd gan y Rheolwr Strategol – Gwasanaeth Cyfiawnder leuenctid, oedd rhoi'r wybodaeth ddiweddaraf i Bwyllgor y Cabinet ynghylch Rhianta Corfforaethol ar ddarpariaeth Gwasanaeth Cyfiawnder leuenctid Pen-y-bont ar Ogwr (BYJS) sydd ar gael i blant sydd wedi cael profiad o ofal sy'n dod i mewn i'r system cyfiawnder troseddol.</p> <p>Gofynnodd y cynghorwyr gwestiynau ar:</p> <ul style="list-style-type: none"> • Oedi y mae plant sydd wedi bod mewn gofal yn ei brofi wrth gael mynediad at wasanaethau CAMHS neu gamddefnyddio sylweddau • A yw'r plant yn yr adroddiad wedi bod yn hysbys i Gyfiawnder leuenctid o'r blaen, ac a yw unrhyw rai wedi'u nodi fel troseddwr toreithiog <p>Atebwyd y cwestiynau hyn gan y Rheolwr Strategol – Gwasanaeth Cyfiawnder leuenctid.</p> <p>PENDERFYNWYD: Pwyllgor y Cabinet:</p> <ul style="list-style-type: none"> • Ystyriwyd cynnwys yr adroddiad • Rhoddwyd adborth |
|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

PWYLLGOR Y CABINET DROS FATERION RHINI CORFFORAETHOL - DYDD MERCHER, 7 MAI 2025

| | |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | <p>Diolchodd Pwyllgor y Cabinet i'r tîm Cyfiawnder Ieuenctid am eu gwaith ar yr adroddiad hwn.</p> <p>Gadawodd y Cyngorydd F Bletsoe y cyfarfod yn dilyn yr eitem hon.</p> |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

73. Cefnogaeth Tîm Ymgysylltu Addysg ar gyfer Plant sydd wedi Profiad o Ofal

| | |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Y penderfyniad a wnaed | <p>Diben yr adroddiad hwn, a gyflwynwyd gan Reolwr y Tîm Ymgysylltu ag Addysg, oedd rhoi'r wybodaeth ddiweddaraf i Bwyllgor y Cabinet am Rianta Corfforaethol ar y gefnogaeth a ddarperir gan y Tîm Ymgysylltu ag Addysg (EET) i blant sydd wedi bod mewn gofal.</p> <p>Gofynnodd y cynghorwyr gwestiynau ar:</p> <ul style="list-style-type: none"> • Faint o blant sydd wedi profi gofal nad ydynt yn mynychu'r ysgol, neu sydd ar amserlenni llai • Lefelau cyrhaeddiad plant sydd wedi bod mewn gofal o'u cymharu â'r boblogaeth safonol • Cymorth pwrpasol i bobl ifanc hŷn • Y rheswm dros lefelau cyflawniad gan blant sydd wedi profi gofal <p>Atebwyd y cwestiynau hyn gan Reolwr y Tîm Ymgysylltu ag Addysg. Cytunwyd i gyflwyno adroddiad wedi'i ddiweddararu i Bwyllgor y Cabinet i roi'r wybodaeth ddiweddaraf am y nodau hyn ymhenn blwyddyn.</p> <p><u>PENDERFYNWYD:</u> Ystyriodd Pwyllgor y Cabinet ar Rianta Corfforaethol gynnwys yr adroddiad a rhoi adborth ac argymhellion.</p> <p>Diolchodd y Pwyllgor Cabinet i'r tîm Ymgysylltu ag Addysg am eu gwaith ar yr adroddiad.</p> |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

74. Materion Brys

| | |
|-------------------------------|------------|
| Y penderfyniad a wnaed | Dim. |
| Dyddiad gwneud y penderfyniad | 7 Mai 2025 |

PWYLLGOR Y CABINET DROS FATERION RHIENI CORFFORAETHOL - DYDD MERCHER, 7 MAI 2025

| | |
|--|--|
| | |
|--|--|

I arsylwi dadl bellach a gynhaliwyd ar yr eitemau uchod, cliciwch ar y [ddolen](#) hon

Terfynwyd y cyfarfod yn 12:30

This page is intentionally left blank

| | |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Meeting of: | CABINET COMMITTEE CORPORATE PARENTING |
| Date of Meeting: | 29 OCTOBER 2025 |
| Report Title: | INDEPENDENT REVIEWING SERVICE ANNUAL REPORT 2024-2025 |
| Report Owner: Responsible Chief Officer / Cabinet Member | CORPORATE DIRECTOR, SOCIAL SERVICES & WELLBEING DEPUTY LEADER, Cllr JANE GEBBIE |
| Responsible Officer: | RAEANNA GRAINGER GROUP MANAGER, MASH, IAA & SAFEGUARDING |
| Policy Framework and Procedure Rules: | There are no effects on the policy framework or procedure rules arising from this report. |
| Executive Summary: | <p>The report details the work undertaken by the Independent Reviewing Service between April 2024-March 2025.</p> <p>The reports sets out the legislative framework that governs the work undertaken by the Independent Reviewing Service. Primarily the Independent Reviewing Officer's (IRO's) role is to ensure the child's care plan is appropriate and meeting their developing needs, that they challenge any issues of delay in achieving the objectives of the care plan and/or any issues of delay. The role has a strong emphasis on quality assurance and challenging the Authority when they are not satisfied in areas of decision making.</p> <p>The IRO's in Bridgend also undertake the chairing of Child Protection Conferences, their role is to ensure professionals make decisions based on evidence and safeguarding procedures. Most importantly the IRO Service must ensure the child's voice is central to decision making and that they are informed of their rights and their circumstances.</p> <p>There is a strong focus on qualitative data in the Annual Report and compliance rates but also strengthened processes and how the service has met the annual plan objectives.</p> <p>The updated Annual Plan can be read at the end of the report and this highlights the aims for the next reporting period.</p> |

1. Purpose of Report

- 1.1 The purpose of this report is to provide the Corporate Parenting Committee with the Independent Reviewing Service Annual Report (Appendix 1) and Action Plan (Appendix 2).

2. Background

- 2.1 The appointment of Independent Reviewing Officers (IRO's) by Local Authorities is a legal requirement and their core functions are governed by legislation and guidance as follows:

- The Adoption and Children Act 2002.
- The Independent Reviewing Officers Guidance (Wales) 2004.

The Independent Reviewing Officer (IRO) service has an authoritative role, in assuring the quality of care planning is achieved. The Independent Reviewing Officers Guidance (Wales) 2004 states that the Independent Reviewing Service report must identify good practice but must also identify issues for further development, including those where urgent action is required. The guidance urges the Authority to make effective use of the reports from its IRO service so that it can be satisfied that its services can achieve best outcomes for the children and young people concerned.

3. Current situation / proposal

- 3.1 The Independent Reviewing Service report, , covers the work of the IRO service from April 2024 to March 2025. The report contains performance information in respect of the statutory reviewing of children who are Care Experienced, including children with plans for Adoption and Young People with Leaving Care LAC/Pathway Plans (under 18) by Bridgend County Borough Council. It also includes information on children subject of a child protection plan and reviews of these plans at Child Protection Case Conferences.
- 3.2 The report also includes information that relates to regulatory requirements in respect of resolution of case disputes, IRO caseloads, participation and consultation of young people in their Reviews, challenges and achievements in the reporting period, and service priorities for 2024-2025.
- 3.3 As described in the report the IRO's chaired/reviewed 169 Initial Child Protection Conferences, this is a reduction from the previous year (376) this reduction is linked to strengthen processes, greater management oversight and a more proportionate way of working with a strong focus on early intervention. 484 Review Child Protection Conferences were held compared to the previous year of 749. Compliance in both areas remains very high for Initial Conferences (94%) and the 6% of non compliance only related to 9 cases over the year. Compliance for Review Conferences is 99.6% which is an improvement from the previous year (98%) Compliance for Care Experienced Reviews remains high at 98.9% which is an improvement from the previous year (96%) The report details the reasons behind the significant reduction in numbers.

- 3.4 The reports highlight the significant impact the implementation of Signs of Safety has had on the team and the directorate as a whole.
- 3.5 Following each meeting the IRO completes a quality assurance audit. The audit forms are available to the Social Worker and the Team Manager to notify them of outstanding work/actions. The audit supports the IRO in the tracking of the case and supports the identification of good practice and areas for improvement. The audit also supports the Team Manager when carrying out supervision with the Social Worker.
- 3.6 The IRO service continues to work with the safeguarding teams, education, the Health Visiting services, School Nurses and Midwifery Services to improve practice around child protection conferences. The next stage is to work at improving the quality of Looked After Children reviews on a multi-agency basis. The IRO Service Manager in this period has facilitated training on the Wales Safeguarding Procedures and partner agencies are included in the roll out of Signs of Safety practice model and the training for this.
- 3.7 Continuous service improvement is always sought after and as such the IRO Service aims to continue to have a greater impact in terms of improving the quality of the lives of care experienced children and young people. The IRO Service Action Plan is incorporated towards the end of the report and reflects the areas of focus for improvement over the 12 months following the timescale of the reporting period for the service which will be under constant review.

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

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

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

- 5.1 The implementation of the duties and responsibilities under the Social Services and Well-being (Wales) Act 2014 (SSWBA), in turn, supports the promotion of two of the seven goals of the Well-Being of Future Generations (Wales) Act 2015 within the County Borough of Bridgend. By promoting an environment that maximises people's physical and mental well-being and by supporting children, young people, adults and their carers and families to fulfil their potential no matter what their circumstances, the well-being goals of a healthier and more equal Bridgend and Wales are supported.
- 5.2 The Well-being of Future Generations (Wales) Act 2015 provides the basis for driving a different kind of public service in Wales, with five ways of working to guide how the

Authority should work to deliver well-being outcomes for people. The following is a summary to show how the five ways of working to achieve the well-being goals have been considered in this report:

- **Long Term** – The IRO Service has a legal requirement to assure the quality of care planning is achieved for children and young people enabling them to reach their full potential in life.
- **Prevention** –the IRO service works closely with safeguarding practitioners and Early Help services in developing a comprehensive outcome focused plan for the child or young person, to maximise their opportunities and identify focused support at the earliest stage.
- **Integration** – the implementation of the SSWBA requires local authorities to work with partners, to ensure care, support and protection of all and more specifically its most vulnerable. The report evidences consultation between professionals and partner agencies with a specific focus to the safe care planning and protection for children and young people within the County Borough of Bridgend.
- **Collaboration** – This is currently managed in order to provide the best possible intervention for children and young people across Bridgend.
- **Involvement** – the key stakeholders are the care experienced children and young people of Bridgend. The IRO service's engagement with these individuals is essential to ensure their voices are heard and included in their meetings. The IRO service speak to children and young people and utilise consultation documents, quality monitoring forms, complaints process and advocacy services to support this. The provision of accessible information and advice helps to ensure that the voice of children and young people is heard and responded to.

6. Climate Change Implications

- 6.1 There are no specific climate change implications arising directly from this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 This report sets out the work undertaken by the IRO Service in respect of safeguarding and promoting the well-being of children, young people and families. The report sets out the role of the IRO Service in ensuring there are effective practices are in place throughout the Council and its commissioned services.

8. Financial Implications

- 8.1 There are no specific financial implications arising directly out of this report.

9. Recommendation

- 9.1 It is recommended that the Cabinet Committee Corporate Parenting notes the Annual Report and Action Plan.

Appendix 2.

Service Priorities – Action Plan

| | |
|------------|----------------------------------------------------------------------|
| B | Completed |
| R | A problem needs serious attention and action now |
| A | Issues are being managed and if addressed should not affect delivery |
| G | On track, in progress, any minor risks/ issues being managed |
| NYS | Not Yet Started |

| IRO Service | | | | | | | | |
|-------------|-----------------------------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----|
| | Owner | Due date | Recommendation | Action | Evidence | Update | Last RAG | RAG |
| 1 | IRO Service Manager and each IRO. | Sept 2025 | Signs of Safety. To fully implement the Signs of Safety model of practice into child protection conferences and increase contact between IRO and child/YP. | Each IRO will ensure they give the child/YP the opportunity to meet with them to discuss their CER or CP Conference. Sign off conference animation. Work with business support to ensure they understand their role in the conferences. Support teams and partner agencies in their | This is monitored in Supervision between the Service Manager and each IRO. QA to be undertaken by the QA Officer and via the surveys. This will feed into the Meaningful Measures forums. | The conference animation went live in October 2024. IRO consistently make the offer to meet with children, but further dip sample work is required. Parental and agency surveys were conducted and baseline data gathered. Mock conferences took place and de-brief sessions. | | |

| | | | | | | | | |
|---|-----------------------------------|-----------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | | <p>understanding of the model in conferences.</p> <p>To developing reflective sessions and provide a shared learning space for the IRO Team</p> | | | | |
| 2 | IRO Service Manager and each IRO. | Sept 2025 | <p>Quality Assurance.</p> <p>To collate thematic practice trends identified from the quality assurance forms and surveys.</p> <p>To implement recommendations from audit activity</p> <p>Improve compliance for Initial and Review Child Protection Conference (IPCP & RCPC)</p> | <p>IRO Service Manager attends the Meaningful Measures forum to support the implementation of quality assurance work.</p> <p>Service Manager to continue to meet with Business Support to improve compliance.</p> <p>IRO Service Manager to work with the Quality Assurance Officer to support the dissemination of learning.</p> | <p>Dip sampling and data analysis will inform the success of QA learning.</p> <p>Group Manager quarterly performance reports will consider performance improvement.</p> | <p>Monthly interface meetings are taking place between the Service Manager and Business Support Managers.</p> <p>Group Manager and Service Manager attend the Meaningful Measures forum.</p> <p>The Quality Assurance forms are being used currently to identify out of date Care Plans as a theme and this is being addressed by the IROs with the Social Workers and their Team Managers.</p> <p>Audit work has continued in this period and has evidenced good practice in terms of direct work with children and timeliness of decision making.</p> <p>Compliance remains strong.</p> | | |

| | | | | | | | | |
|---|-------------------------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | Improve compliance for CER | | | | | |
| 3 | Service Manager and all IROs. | Sept 2025 | <p>Child's Voice.</p> <p>To continue to promoting advocacy services the IRO Service will ensure it provides an 'Active Offer' of advocacy to children. The IROs will make these referrals where consent has been given to support the child/young person's voice.</p> <p>Ensure the child's voice is present when undertaking the IRO Monitoring form.</p> <p>To develop the consultation/survey process for children and</p> | <p>Dip sample audit work to be undertaken by the IRO Service Manager.</p> <p>The child surveys will inform the rates of children feeling they have been heard and central to decision making.</p> <p>This will form part of the Quality Assurance Officer role and wider audit framework.</p> | <p>Quarterly audit activity and performance reports will inform success rates.</p> <p>IRO monitoring forms will identify trends and themes.</p> <p>IRO Service Manager will raise in supervision and IRO Team Meetings to ensure this stays on the agenda.</p> | <p>The IRO Service sits on the Meaningful Measures forum and works closely with the Quality Assurance Officer.</p> <p>Surveys were undertaken with families to gather baseline data of their experience of conferences.</p> <p>These surveys will be undertaken again in the next period to compare the impact of Signs of Safety Conferences on families.</p> <p>Further work is required in this area to increase children's participation at their CP Conferences.</p> | | |

| | | | | | | | | |
|---|-----------------------------------|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | young people to ensure that there are a range of methods offered to every child to meaningfully participate in their meetings | | | | | |
| 4 | IRO Service Manager and each IRO. | Sept 2025 | To work alongside safeguarding colleagues to achieve permanency for all children and reduce the numbers of Care Experienced Children within a safe and appropriate plan. | <p>IROs to check at the 2nd CER the plan for the child is clear. If the plan isn't clear, the IRO will track the case and inform the appropriate Safeguarding Team Manager.</p> <p>IROs to ensure they consider all appropriate options for Care Experienced Children such as SGOs and/or a return to their family.</p> | <p>IRO Service Manager to attend the CER reduction Strategy Meeting held on a bi-monthly basis.</p> <p>IRO Service Manager will identify any children who may be suitable for alternative Orders and will discuss this with the allocated IRO.</p> | <p>This process is currently working well. IRO Service Manager has identified several cases where alternative care options could be considered resulting in the child no longer being Care Experienced.</p> <p>Over this period the rates of Care Experienced children have decreased as has the number of children subject to the CPR.</p> <p>Cases where there isn't a permanency plan at the second review is due to care proceedings not being finalised.</p> | | |

| | | | | | | | | |
|---|-----------------------------------|-----------|-------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 5 | IRO Service Manager and each IRO. | Sept 2025 | To work alongside Safeguarding Teams and the training department to improve practice around Care Experienced Children and their meetings. | <p>IROs will ensure they complete the IRO Quality Assurance document following every CER. This will automatically be sent to the Safeguarding Team Manager for their scrutiny.</p> <p>Should the IRO identify concerning practice, they will raise this with the IRO Service Manager and the Safeguarding Team Manager. They will track the progress to a resolution and initiate the IRO Protocol where necessary.</p> <p>IRO Service Manager will facilitate training alongside the Training Department to support and improve practice.</p> <p>IRO Service Manager will facilitate induction sessions to new starters and newly qualified Social Workers to support their professional development.</p> | IRO Service Manager will attend all IRO protocol Meetings to support the IROs and facilitate resolution. | <p>IRO Service Manager continues to raise cases of concern with the individual Social Workers, their Team Managers and Group Manager where appropriate.</p> <p>IRO Service Manager continues to present training alongside the training department and is facilitating introductory sessions to new starters and newly qualified staff.</p> <p>The IRO Service regularly send compliments and good practice examples to the Complaints and Compliments Officer and present these at the Continuous Improvement Group.</p> | | |
| 6 | IRO Service Manager and each IRO. | Sept 2025 | To ensure appropriate care plans are progressing in a timely manner to prevent and | At every CER the IRO will check the child has a Care Plan that is up to date and meets the child's needs. The IRO will recommend at each CER that the Care | The rates of IRO Quality Assurance forms being completed is increasing and this | As the workforce in the Hubs and the Care Experienced Team has stabilised over this period, we have seen improvements in the numbers of Care Plans being | | |

| | | | | | | | | |
|---|-----------------------------------|-----------|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| | | | <p>avoid drift in children's cases.</p> | <p>Plan is updated to reflect the changes agreed at the current CER.</p> <p>The IRO will track each child and ensure their Care Plan has been updated. The IRO will hold mid-point meetings to prevent drift and act where drift is identified.</p> <p>Each IRO will complete the IRO Quality Assurance form following each CER as this informs the SW and their Team Manager of any out-of-date Care Plans.</p> | <p>will continue moving forward.</p> <p>IROs are holding mid-point meetings for each child who is Looked After, however, there are times the child's SW does not respond. In these cases, the IRO will raise this with their Service Manager and the safeguarding Team Manager.</p> | <p>completed and updated within timescales.</p> <p>IRO Service Manager attends Complex case Panel and uses this forum to ensure the case records are up to date and of good quality. Any deficits are escalated and tracked appropriately.</p> | | |
| 7 | IRO Service Manager and each IRO. | Sept 2025 | To continue to focus on increasing consultation and participation of children and young people at CERs. | IROs to ensure they offer to consult with each CER child as appropriate for their age and level of understanding and to use a means of communication that the child opts for. This includes face to face meeting, phone and MS Teams. | This is monitored in Supervision between the Service Manager and each IRO. | <p>The implementation of the Signs of Safety practice model and the roll out of Signs of Safety conferences will require the IRO to meet with the child before each conference.</p> <p>IRO consistently make the offer of a meeting to children who are Care Experienced.</p> | | |

| | | | | | | | | |
|---|---------------------------------------|-----------|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|--|--|
| 8 | Group Manager and IRO Service Manager | Sept 2025 | Parents to be fully supported in CP Confernces and be provided with the offer of advocacy. | Advocacy options for parents to be explored to ensure parents are supported in these meetings. | Group Manager to discuss at a senior management level and with Adult Services our offer/contract with adult advocacy services. | Parents are routinely offered advocacy for child protection confernces. | | |
|---|---------------------------------------|-----------|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|--|--|

| | | | | | | | | |
|---|---------------------------------------|-----------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----|--|
| 9 | Group Manager and IRO Service Manager | Sept 2026 | All Care Experienced Reviews will be facilitated in line with the Signs of safety model. | <p>IRO Service Manager is working with the Principal Officer - Social Work Transformation to develop the implementation of this.</p> <p>IRO Service Manager to work with Voice in Care to support collaboration in this area.</p> <p>IRO Service Manager to work with the Corporate Parenting Officer to support collaboration in is area.</p> | Once a live date is agreed, dip sampling, quality assurance activity and surveys will explore what is working well and areas of development. | Implementation planned for the next year. | NYS | |
|---|---------------------------------------|-----------|------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----|--|

This page is intentionally left blank

Independent Reviewing Service
Annual Report for the period
April 2024 to March 2025



Report Contents:

- **Introduction**
- **Legal context**
- **Core IRO functions**
- **Composition of the IRO service**
- **Caseloads**
- **Signs of Safety Model**
- **Continuous Improvement Strategy**
- **Child Protection registration**
- **Chart 1 additions and deregistration to the CPR April 2024 - 2025**
- **Chart 2 – Number of ICPCs and Number Held Within Statutory Timescales**
- **Chart 3 – No. of CP Reviews Held and No. in Compliance**
- **Chart 4 - CPR Categories**
- **Chart 5 – Children on CPR by registration category at Month End**
- **Definitions of the categories of abuse**
- **Chart 6 - Re-registrations within 12 months:**
- **Chart 7 - Children subject to the CPR for more than 18 months.**
- **Chart 8 - Children whose names were removed from the child protection register at first review conference (less than 90 days on CP register)**
- **Childrens participation at child protection conferences**
- **Care Experienced Population**
- **Chart 9 – Number of Child who became looked after and those who ceased to be looked after**
- **Chart 10 – No. of Care Experience Reviews (CER) and No. Held in Compliance**
- **Chart 11 & 12 – Care Experienced Children (CEC) by Gender and Age**
- **Advocacy**
- **Chart 13 – Number of children receiving Active Offer of Advocacy and those provided with service.**
- **Business Support**
- **Team Meetings**
- **Case Dispute Resolution and Complaints**
- **IRO Quality Assurance Audit**
- **Independent Legal Advice**
- **Cafcass Cymru**

Introduction

The Independent Reviewing Officer (IRO) service has an authoritative role, in assuring the quality-of-care planning is achieved. The Independent Reviewing Officers Guidance (Wales) (2004) states this report must identify good practice but must also identify issues for further development, including those where urgent action is required. The guidance urges the Local Authority to make effective use of the reports from its IRO service so that it can be satisfied that its services can achieve best outcomes for the children and young people concerned.

This Independent Reviewing Service report focuses upon the work of the IRO Service from April 2024 to March 2025. As part of the service's quality assurance role, the report contains performance information in respect of the statutory reviewing of children who are Care Experienced, including children with plans for Adoption and Young People with Leaving Care Pathway Plans (under 18) by Bridgend County Borough Council. It also includes information on children subject of Child Protection plans and reviews of these plans at Child Protection Case Conferences.

The report also includes information that relates to regulatory requirements in respect of resolution of case disputes; IRO caseloads; participation and consultation of young people in their Reviews, challenges and achievements in the reporting period and service priorities for 2025-2026.

Legal Context

The appointment of the IRO Service by local authorities is a legal requirement and their core functions are governed by the legal regulatory framework outlined below:

- The Children Act 1989
- The Human Rights Act 1998
- The Adoption and Children Act 2002 (detailed the requirement on local authorities in respect of the appointment of IROs)
- The Independent Reviewing Officers Guidance (Wales) 2004
- Social Services and Wellbeing (Wales) Act 2014
- Care Planning, Placement and Case Review (Wales) Regulations 2015
- Wales Safeguarding Procedures.

Glossary

| | |
|------------------------------------------|----------|
| Independent Reviewing Officer | IRO |
| Care Experienced Review | CER |
| Care Experienced Child | CEC |
| Initial Child Protection Case Conference | ICPC |
| Review Child Protection Case Conference | RCPC |
| Child Protection Register | CPR |
| Advocacy Active Offer | AO |
| Advocacy Issue Based | IB |
| Social services and Well-Being Act 2014 | SSWB Act |
| Personal Education Plan | PEP |
| Multiagency Safeguarding Hub | MASH |
| Signs of Safety | SofS |
| Cwm Taf Morgannwg | CTM |

Core IRO Functions

The Independent Reviewing Service has an important quality assurance function and works towards ensuring all children within the care of Bridgend County Borough Council have a robust effective care plan. This plan is aimed towards improving outcomes for children and young people in providing a stable and secure childhood where their health, education and emotional wellbeing is promoted through effective care planning. It is the function of the Independent Reviewing Service to ensure the care plan is appropriate and progresses safeguarding for children and young people whilst ensuring all their identified needs are being met.

IROs are required to independently review the care plans of all CEC and those children with a Child Protection Plan and whose names are on the CPR. The Local Authority has a duty to review the care plan for all CEC. These meetings are multiagency and include relevant agencies such as health and education and will usually include the child/young person, their Social Worker, carers, and family members.

Time scales for Reviews are set out in the Children Act (1989) and Part 6 of the SSWB Act, with the first review taking place within 20 working days of placement. The next review is held within three months following the initial review and then subsequent reviews are held within six months from the second review. Subsequent reviews are held every six months unless there has been an unplanned change of placement where a CER must be held within 20 working days.

The IRO Service has a statutory responsibility under the SSWB Act, Wales Safeguarding Procedures and the IRO Standards. Within Bridgend County Borough Council, the IRO Service has the following roles and responsibilities:

- To review and oversee the effectiveness and the appropriateness of the care plans for those children and young people for whom the local authority has responsibility and who are subject of a child protection plan and those children and young people within its care.
- The IRO Service are responsible for ensuring all CERs, ICPC and RCPC take place within compliance as outlined in the regulations. To provide a report following each meeting to include recommendations as to any changes to the child/young person's care plan.
- To monitor the progress of the care plan by tracking cases between reviews, to hold a Mid-Point Review with the child's Social Worker to ensure progression of the agreed recommendations.
- To ensure the child/young person's rights are protected and enhanced.
- To ensure the voice of the child is heard throughout the care planning process and to monitor the child's wishes and feelings and ensure they are recorded.
- To provide support, advice and mentoring to social work staff in relation to effective care planning.
- To raise IRO concerns through the agreed resolution protocol and to escalate unresolved concerns regarding care planning to the appropriate level of the local authority management structure. To consider the need to seek independent legal advice and possible referral of a case to CAFCASS.
- The Quality Assurance function of the IRO Service aims to highlight concerns around specific cases and any trends relating to care planning practice. It also has a duty to highlight good practice within the service. The IRO Service will be linked to service wide Quality Assurance strategy.
- To ensure all CEC and young people are subject of health plans to promote health and development. The IROs have the responsibility to ensure the health plans are monitored and meeting the children's needs.

- All CEC and young people are subject to PEP. The social worker and school are responsible for ensuring this is in place, but the child's IRO will ensure this and make any recommendation and timescale in the CER should a PEP not be in place.

Composition of the IRO Service

The current IRO cohort have a wealth of experience, and all have been qualified social workers for a substantial period. Currently the team is comprised of:

One full-time Manager (Permanent)

Seven full-time IROs (permanent)

One permanent member of staff who works three-and-a-half days per week

One permanent member of staff who works 2.5 days per week.

One permanent member working 2 days a week.

One agency staff member full time hours.

During the period under review, the team has experienced periods of long-term sick leave, and three full time people remain on sick leave. Due to one member of staff leaving to start a new post in June 2025 the team are currently recruiting for one full time staff member interviewing 29th August 2025. There is also 3 months agreed agency post commencing 15th September 2025 to support the service to complete its statutory functions during the period in which Team members will be on phased return to work.

The service is actively recruiting to replace agency staff and interviews are planned for August 2025.

Caseloads

The average full time IRO caseload is currently between 55 - 65 cases and part time equivalent which is the same as the period 2024 – 2025. Previous Annual reports have highlighted the caseload pressures and high caseloads in Bridgend comparatively to other local authorities in 2020 - 2023 and the comparative data. Bridgend Childrens Services Locality Teams caseloads have slowly decreased since this time meaning referrals to our service for an allocated IRO have also reduced. This is due to a service wide focus on strategies to reduce and look for alternative family-based safety plans for children and early intervention diverting families away from statutory services.

As a team we have successfully managed to meet our statutory duties in terms of compliance in both the Care Experienced and the Child Protection arena.

An over-arching principle of the service has been to maintain the same IRO wherever possible so that children and young people have an element of continuity in their lives. Often the IRO is the only person who has remained consistent for the children who are often faced with changes of social workers, team structures and placements. This strategy also ensures that valuable information held by IROs, particularly knowledge of the child's history and family dynamics is not lost. We also seek to reconnect the allocated IRO with a family should they require our services in the future to maintain continuity.

The IROs continue to complete quality assurance documents following every CER, ICPC and RCPC, this document requires cross reference against the child's file and is used to identify any outstanding pieces of work or documents to which the child's/young person's social worker and team manager are alerted. The IRO Standards require the IRO to undertake far greater levels of tracking in between CERs, this also includes a formal mid-point review to ensure the recommendations are on-track and to ensure progress is being made and the child's care plan continues to reflect their needs.

The 2023/24 annual report noted the start of a reduction in the number of children subject to the child protection register, this reduction has continued in this reporting year and currently fluctuates around 80 children.

Signs Of Safety Model

The Signs of Safety model of whole system Social Work practice that the Local Authority has committed to requires Child Protection Conferences to be held in person, with families, their safety network and our partner agencies. The belief for our Service is that this model of practice is a way to support family safety planning and strengthen existing practice. The IRO Service are trained in Signs of Safety and continue to develop month by month, currently preparing our practice and systems to be in alignment with the model via MOSAIC database system.

Since October 2024 we (the IRO Service) have been completing all Initial Child Protection conferences and subsequent review conferences in person using this model.

We have procured and fitted white boards in specific conference rooms in Civic Offices to complete the conferences using this model.

We have developed a short animation to help children, families and social workers explain the process.

We have developed our invitation process and information for families and professionals and added a feedback QR code to the invitation letter.

We have offered de brief sessions following each initial conference for all professional parties to learn and develop alongside our partner agencies.

With our partners in Training and Development we have offered 8 live practice sessions for other Professionals who may wish to “practice” being at a conference and ask questions about the model. We will be offering more in the last quarter of 2025.

We have worked closely with our colleagues in Business Support who have been invaluable in helping to arrange the conferences, record meetings and offer ideas.

We have worked with colleagues in other agencies to develop Signs of Safety style reports and within Childrens Services Fostering and Edge of Care.

We have developed a padlet that helps the team, colleagues and newer members of the Social Work teams in their Care Experienced and safeguarding conferences practice.

We will be moving to use Signs of Safety within Care Experienced work, and this will be called Signs of Stability. Training starts in September 2025 with our colleagues in the CECT and 15+ Team.

Feedback from families and professionals has been sought via QR code and de briefs. This has generally been positive, and both professionals and family have suggested being in person is a more meaningful way to be working than online. It is challenging to gain meaningful feedback in writing or online as families and children can feel reluctant to do so, the IRO Team manager and Quality assurance link person for the Local Authority will be looking to develop this area in October as take up has been low.

The IRO team are now committed to meeting in person regularly, to working together via online and in person sessions to embed the new model of practice and to continue to address areas that need development. We regularly have speakers to our team meetings to support our continued understanding of the continued transformation of the service as a whole and research academic materials. IRO Team Manager has met with Training and development to explore additional team development and there is a whole team development day in September.

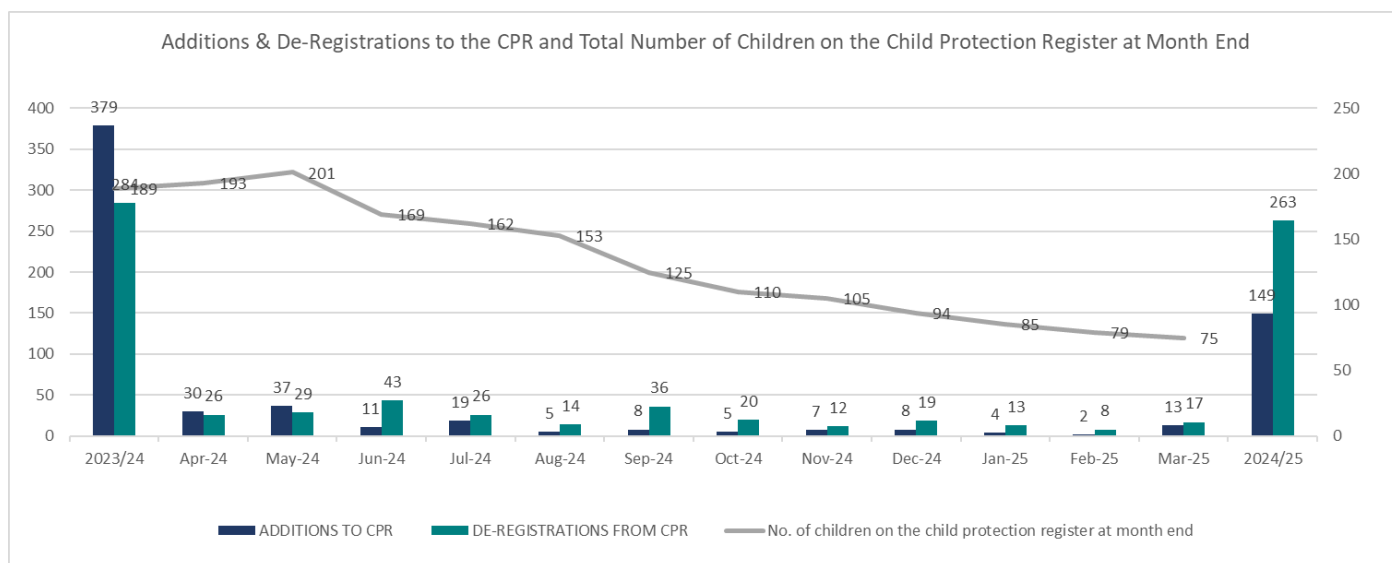
Continuous improvement strategy

In this period some changes have been implemented to support the local authority's objectives of reducing the length of time children's names remain on the CP register:

- Monthly meetings between the IRO Service Manager and the Group Managers and relevant personnel focussing on continuous improvement.
- IRO Service Manager attends a panel for children who are currently Looked After under Section 76, children who are subject of PWP (Placed with Parents regulations) and children with Kinship carers who could consider Special Guardianship Order; or in High Cost out of County Placements with a view to sharing information and having oversight of planning and quality assurance issues.
- Weekly reflection meetings with Service Manager for Safeguarding and core personnel in connection with targeted themes- this commences with identified group of children removed from register at first review.
- Signs of Safety meaningful measures meetings with regards to the workstreams for Signs of Safety implementation and learning.
- IRO Service Manager audits all requests for an ICPC and considers good practice, compliance and any areas for improvement.
- Where IRO's identify cases at the second RCPC where limited progress has been made, they inform the Group Manager of their concerns. The Group Manager then examines the case and where appropriate arrange a consultation with the Social Worker to consider all options to progress the plan and prevent drift.
- If a conference chair recommends legal advice should be sought, they will inform the Group Manager to raise awareness of the cases being escalated.
- IRO Manager Links with Principal Officer for Locality teams with regards to data for Children whose names have been on the Child Protection register for 12 months with regards to planning Case Mapping to which the IRO is invited. The Principal Officer also shares the legal tracker for all Children who are currently subject of Care proceedings and PLO which assists the IRO team in planning and organising their feedback to the Children's Guardian and ensuring they have sight of the relevant Care Plan.
- IRO Manager has bi-monthly interface with Group Manager for Care Experienced Children to discuss core themes. The IRO remains the responsible person for monitoring the Care plan of the individual child.
- Attendees at Child protection conferences – professionals, family and child are offered online feedback option which is sent directly to the Team Manager .
- Development of Quality Assurance scheme for the IRO service with Quality Assurance manager with a view to engagement and feedback from children and families being key to continuous learning. This will be in place by December 2025.
- Team members have attended training in Appreciative enquiry and active learning cycles are key to future continued development of the service.

Child Protection Register Population

Chart 1 additions and deregistration to the CPR April 2024 - 2025



We have seen a targeted and steady reduction in the numbers of children subject to child protection registration. We have historically had disproportionately high numbers of children subject to registration when making comparisons with other Local Authorities.

There have been strengthened processes and targeted work throughout the directorate to reduce the numbers subject to the CPR.

Updated forms and training have supported improved screening and decision making in MASH, this has helped to divert families away from statutory intervention in favour of a more proportionate response. The more robust screening of referrals ensures that only cases requiring statutory intervention progress to a Care and Support assessment or strategy meetings.

Better-informed decision making reduces unnecessary Section 47 investigations, ensuring resources are focused on children at highest risk. This prevents families from being escalated unnecessarily, avoiding the emotional and practical disruption of child protection processes.

Further improved have been made in MASH in terms of What Matters conversations (further enquires) What Matters conversations focus on families lived experiences and what is available to them in their own family and friendship networks and community that can support them to find a solution to the challenges they are experiencing.

More thorough What Matters conversations had led to a more proportionate responses—stepping in with early help rather than defaulting to child protection pathways.

In cases where a Care and Support assessment is required, the use of the tools such as mapping and family network meetings means families and their wider support systems are directly involved in planning solutions. This increases family's investment in making positive changes, reducing reliance on statutory interventions.

We have continued to build on our partnership working as this supports a better coordinated multi-agency response, providing holistic support, reducing duplication and ensuring children's needs are met earlier. This impacts on the number of children subject to the CPR as more effective partners working reduces drift on cases and this supports cases not deteriorating and requiring a child to be made subject to child protection processes.

Most significantly, the Signs of Safety framework provides a strengths-based approach which helps practitioners and partners balance strengths, risks, and worries. The model provides clarity which results in interventions being targeted and timely, with real clarity of what will make the biggest difference for child safety and wellbeing. This avoids unnecessary registration while still safeguarding children effectively.

Across the directorate considerable activity has been undertaken to secure a stable, permanent and experienced workforce. Greater workforce stability means consistent relationships for children and families, leading to more trust and sustained progress.

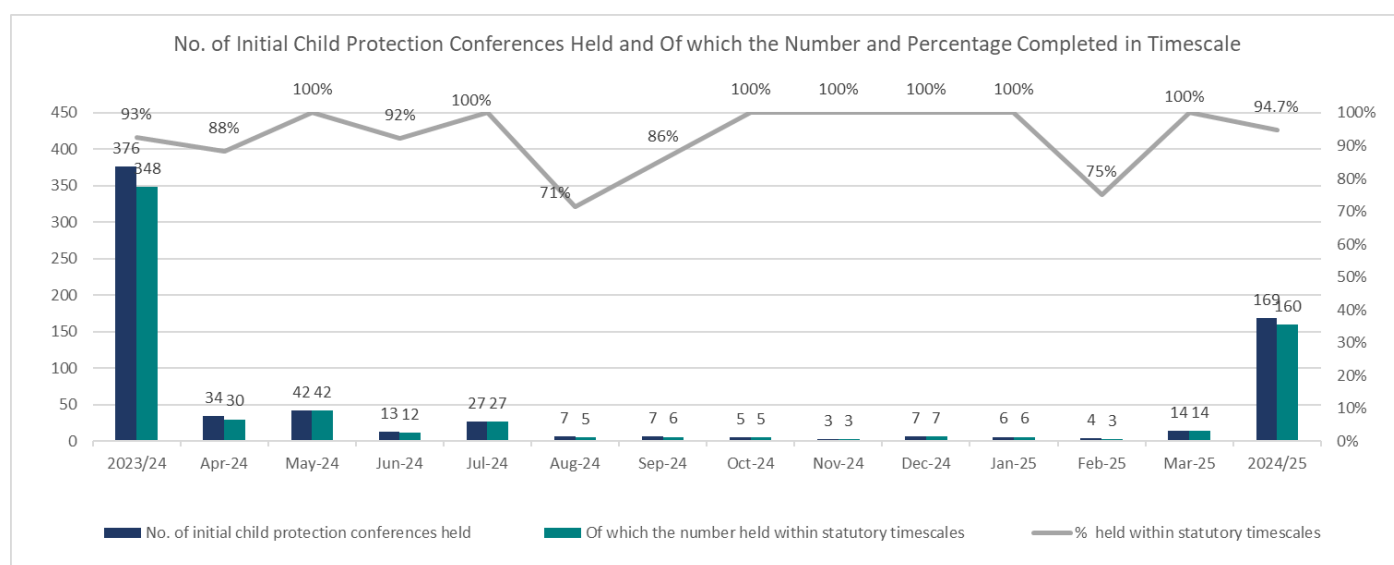
Experienced practitioners bring professional confidence in risk assessment and decision-making and stronger management oversight ensures quality and consistency in thresholds, planning, and reviews.

These factors combined improvements create a more proportionate, family-focused, and strengths-based safeguarding system.

Ultimately the implementation of the SofS practice model has helped to reduce CPR figures because children are safeguarded effectively without over-reliance on registration. However, quality assurance work and dip sampling continues to sense check our decision making, identification of themes, the sharing of good practice but also where there is learning from case work.

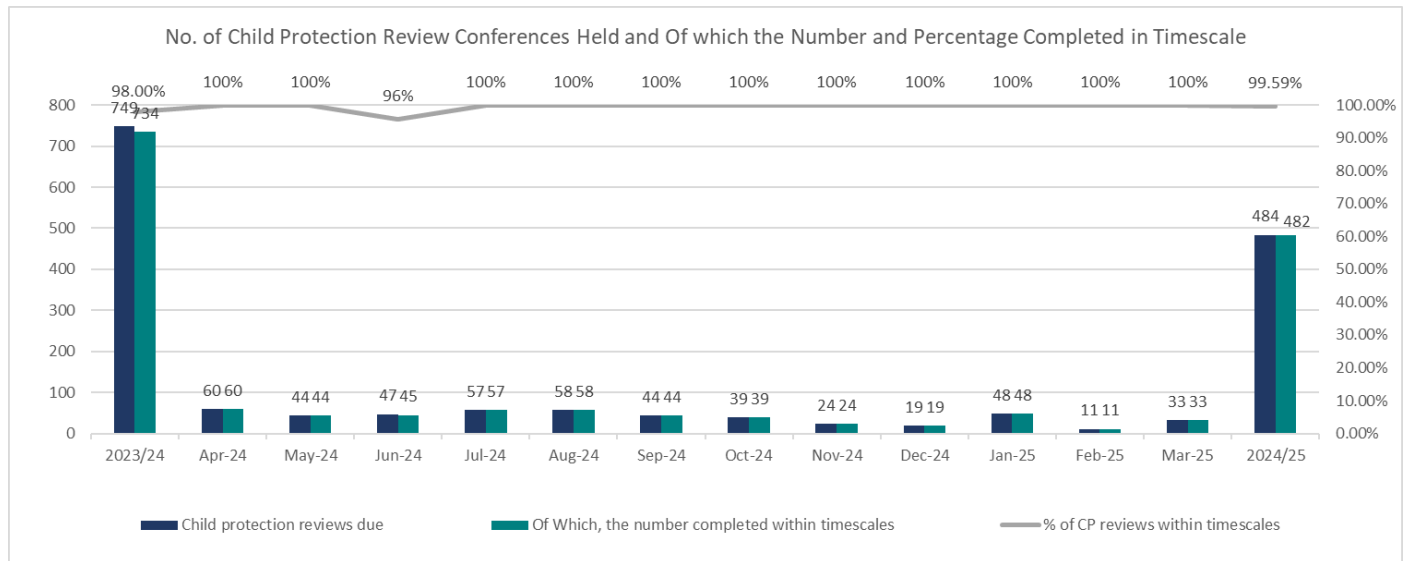
Our numbers of children subject to the CPR now aligns with our regional Local Authorities and more widely with Welsh Local Authorities.

Chart 2 – Number of ICPCs and Number Held Within Statutory Timescales



Compliance remains high in this area, the reduction seen in February only related to one case. In more recent months the IRO Service has experienced high levels of IRO sickness, this has had a slight impact on compliance. We have successfully recruited a full time IRO who converted from agency. Overall, our compliance in this area remains strong when compared to other Local Authorities and regionally.

Chart 3 – No. of CP Reviews Held and No. in Compliance

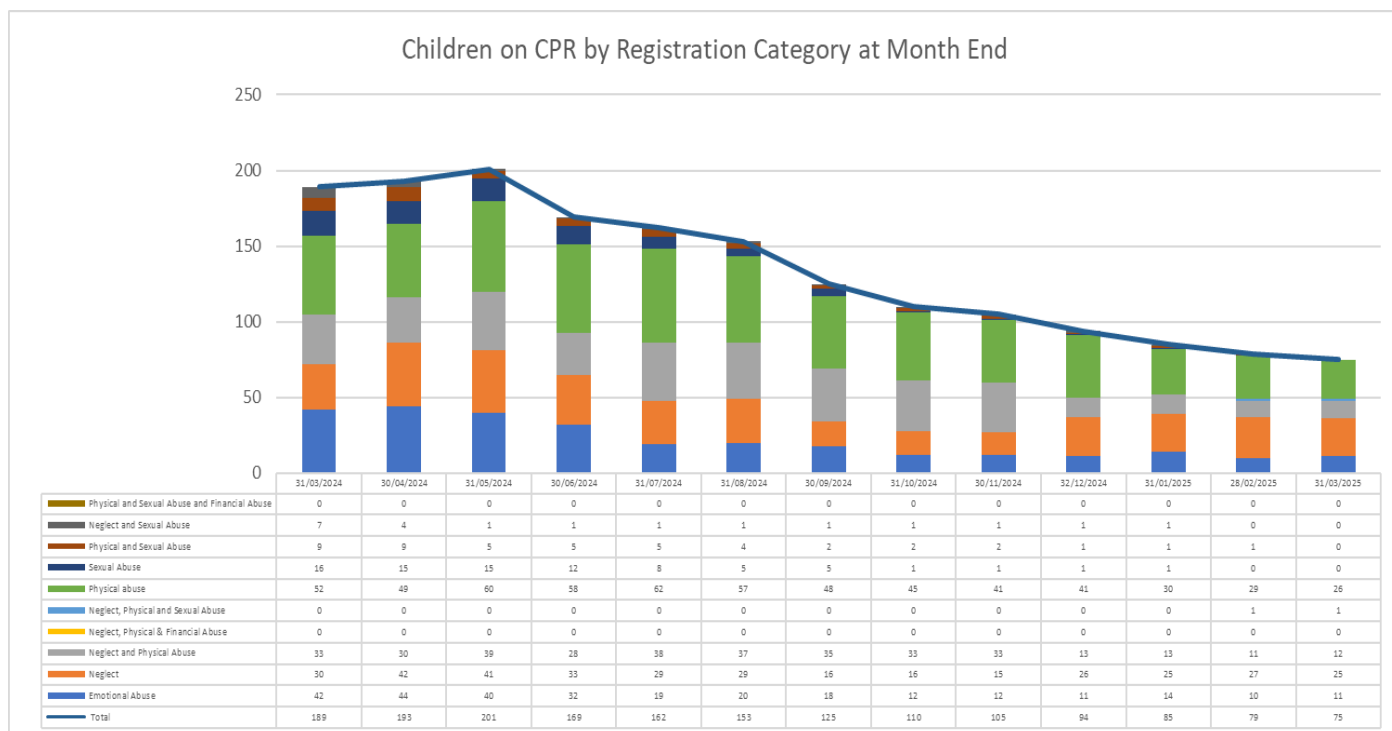


Compliance in this area is very strong, the first case out of compliance was due to there being no suitable interpreter for the family. The second case due to human error in calculating the compliance date.

Chart 4- CPR Categories

| Category | 31/03/2024 | 30/04/2024 | 31/05/2024 | 30/06/2024 | 31/07/2024 | 31/08/2024 | 30/09/2024 | 31/10/2024 | 30/11/2024 | 32/12/2024 | 31/01/2025 | 28/02/2025 | 31/03/2025 |
|-----------------------------------------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Emotional Abuse | 42 | 44 | 40 | 32 | 19 | 20 | 18 | 12 | 12 | 11 | 14 | 10 | 11 |
| Neglect | 30 | 42 | 41 | 33 | 29 | 29 | 16 | 16 | 15 | 26 | 25 | 27 | 25 |
| Neglect and Physical Abuse | 33 | 30 | 39 | 28 | 38 | 37 | 35 | 33 | 33 | 13 | 13 | 11 | 12 |
| Neglect, Physical & Financial Abuse | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Neglect, Physical and Sexual Abuse | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Physical abuse | 52 | 49 | 60 | 58 | 62 | 57 | 48 | 45 | 41 | 41 | 30 | 29 | 26 |
| Sexual Abuse | 16 | 15 | 15 | 12 | 8 | 5 | 5 | 1 | 1 | 1 | 1 | 0 | 0 |
| Physical and Sexual Abuse | 9 | 9 | 5 | 5 | 5 | 4 | 2 | 2 | 2 | 1 | 1 | 1 | 0 |
| Neglect and Sexual Abuse | 7 | 4 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 0 | 0 |
| Physical and Sexual Abuse and Financial Abuse | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 189 | 193 | 201 | 169 | 162 | 153 | 125 | 110 | 105 | 94 | 85 | 79 | 75 |

Chart 5 – Children on CPR by registration category at Month End



As can be seen from this chart, there has been a change since the previous report in that Physical Abuse is the most common category of registration overall. However, if we consider the data overall and combine the categories which include Neglect, it remains high throughout the period under review. It is common that Emotional Abuse is frequently used when the issue of the case is parental domestic abuse.

Definitions of the Categories of Abuse:

Physical Abuse

Physical abuse means deliberately hurting a child or young person. It includes physical restraint, such as being tied to a bed, locked in a room, inflicting burns, cutting, slapping, punching, kicking, biting, or choking, stabbing, or shooting, withholding food or medical attention, drugging, denying sleep, inflicting pain, shaking, or hitting babies, fabricating or inducing illness (FII).

Emotional or Psychological Abuse

This describes physical, sexual, psychological, emotional, or financial abuse (and includes abuse taking place in any setting, whether in a private dwelling, an institution, or any other place).

Sexual Abuse

There are two different types of child sexual abuse. These are called contact abuses and non-contact abuse. Contact abuse involves touching activities where an abuser makes physical contact with a child, including penetration. It includes sexual touching of any part of the body whether the child's wearing clothes or not, rape or penetration by putting an object or body part inside a child's mouth, vagina, or anus, forcing, or encouraging a child to take part in sexual activity, making a child take their

clothes off, touch someone else’s genitals or masturbate. Non-contact abuse involves non-touching activities, such as grooming, exploitation, persuading children to perform sexual acts of the internet and flashing. It includes encouraging a child to watch or hear sexual acts, not taking proper measures to prevent a child being exposed to sexual activities by others, meeting a child following sexual grooming with the intent of abusing them, online abuse, including making, viewing or distributing child abuse images allowing someone else to make, view, or distribute child abuse images, showing pornography to a child, sexually exploiting a child for money, power, or status (child exploitation).

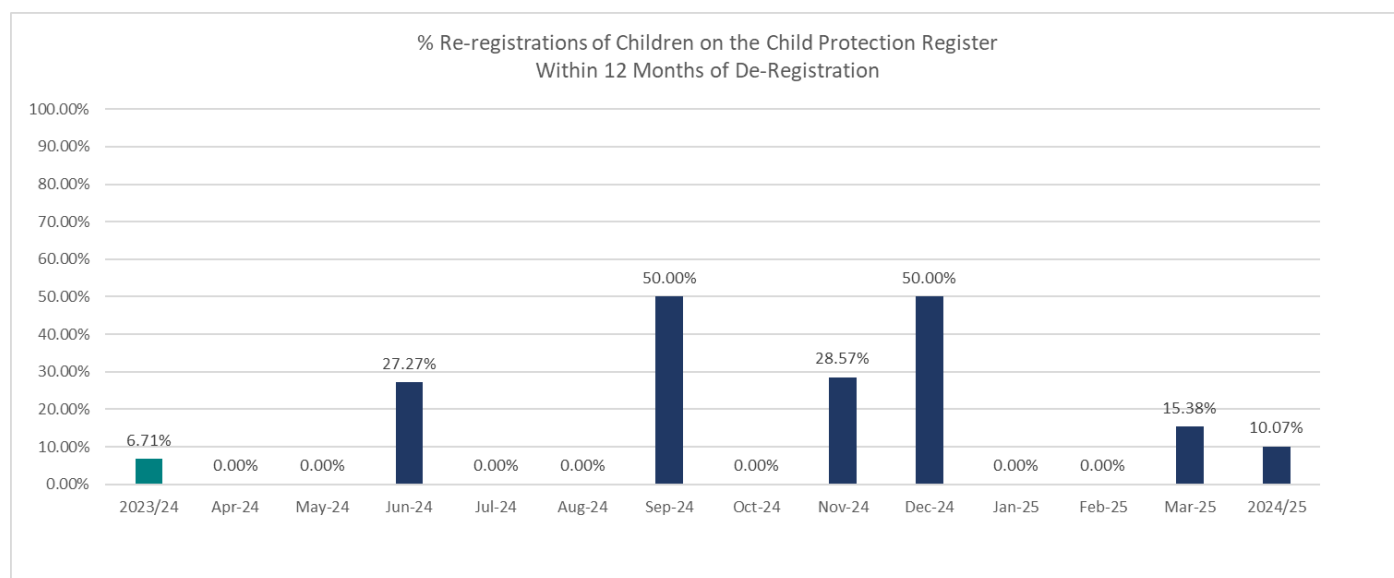
Financial Abuse

Financial abuse includes theft, fraud, pressure about money, misuse of money.

Neglect

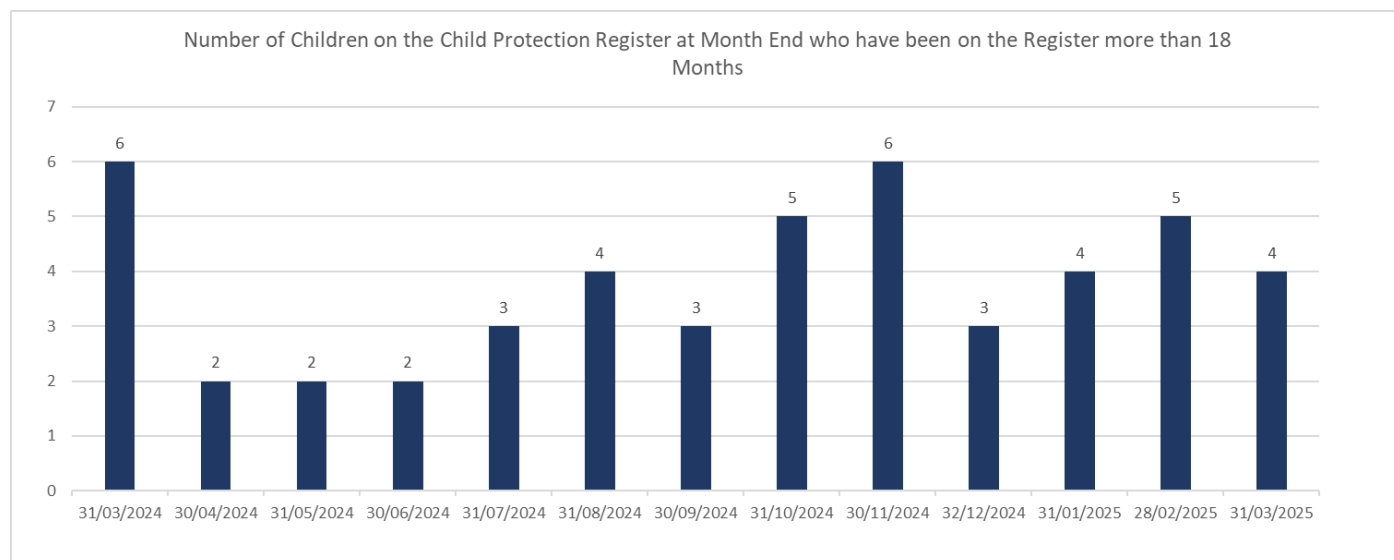
This means failure to meet a child’s basic physical, emotional, social, or psychological needs, which results in an impairment of the child’s wellbeing (for example, an impairment of the child’s health)

Chart 6 - Re-registrations within 12 months:



Any case that returns to an ICPC within 12 months of being de-registered will be audited by the IRO Service Manager to scrutinise the processes that were followed and consider themes and any lessons that can be learnt. Our numbers of re-registrations compared to our regional partners is significantly lower. This demonstrates we are removing children from the CPR safely and appropriately with the right support and strategies in place to prevent an escalation and a further period of registration within a year. As the overall numbers of children subject to the CPR has significantly reduced, the percentage will appear greater however when scrutinising the data it only equates to a very small number of children.

Chart 7 - Children subject to the CPR for more than 18 months.



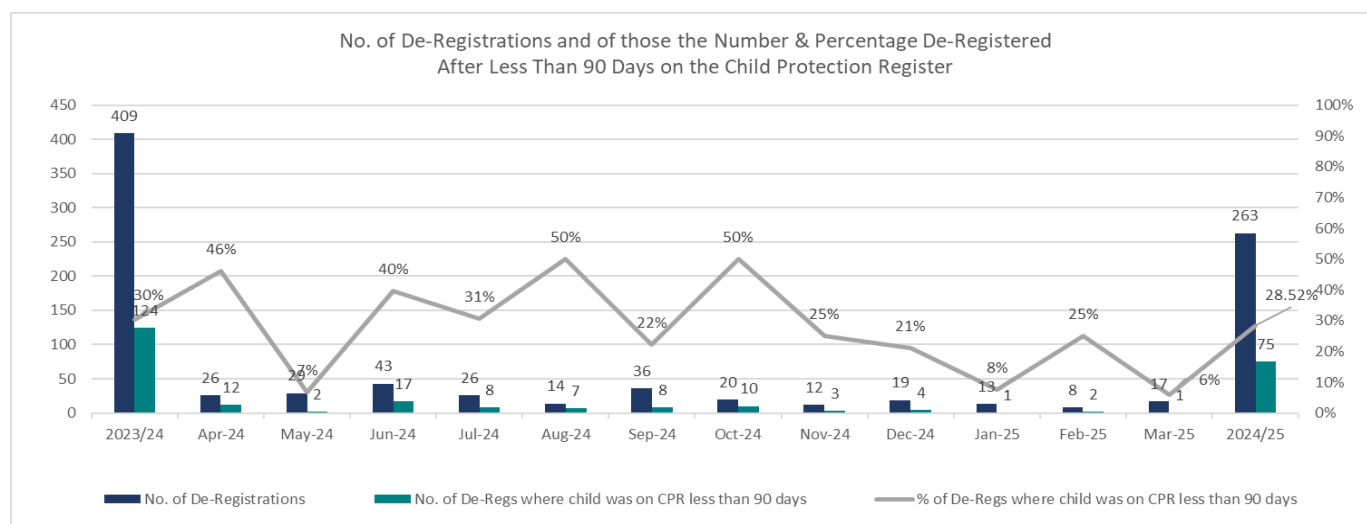
The IRO Service Manager and the Principal Officer for the Safeguarding Hubs have agreed to meet monthly to consider the children who have been subject to the CPR for more than 18 months. The Principal Officer requests the team manager and team seniors to hold case mapping sessions with the Social Workers to assist in moving the case on and creating change. Of the four children who have been subject to the CPR for this length of time I can provide the following reassurance.

Two of these children have been de-registered since the reporting period and have become Care Experienced.

One child has been de-registered and is currently open to the Safeguarding Team via Care and Support.

The 4th child the Local Authority is seeking a Court Order in respect of this child.

Chart 8 - Children whose names were removed from the child protection register at first review conference (less than 90 days on CP register)



When a child is de-registered from the CPR at the first review, this could suggest they were made subject to the register prematurely or de-registered too quickly. We have undertaken audit activity to explore this and are starting to see a reduction in this area. The yearly figure is 28% however following targeted work we are starting to see a reduction of de-registrations at first review (Quarter 1 –14%)

Children’s Participation at Child Protection Conferences

Children’s participation at their ICPC and RCPC is hugely important and something we would like to see an increase in. The Signs of Safety model supports this. We accept it may not be appropriate for children or young people to attend part or all the meetings but there are mechanisms in place to enable them to attend part of the meeting, the use of advocates has also supported children to attend and understand their meeting.

It remains a continued challenge for the IRO service to gain children's participation in Child Protection conference meetings; the chairperson will encourage and discuss this in preparation for every conference. To support children’s understanding of what to expect at a conference, we have developed an animation to explain what a child and their family can expect on the day of their conference and this can be viewed on Youtube:

https://www.youtube.com/watch?v=vH_m76RYLwg

Care Experienced Population

All children who are placed with Foster Carers are allocated a named IRO on the same day the IRO Service receive the notification from the Childcare Teams. This is a statutory requirement and is consistently met by the service.

Chart 9 – Number of Child who became looked after and those who ceased to be looked after

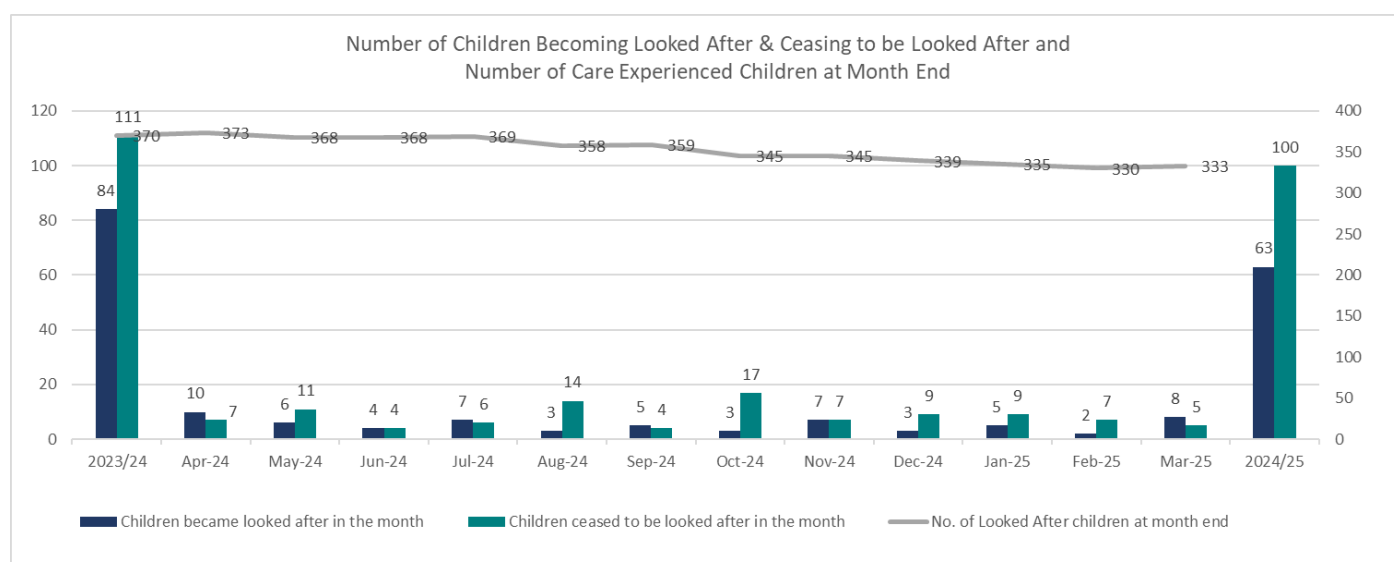


Chart 11 details the number of children who were in the care of Bridgend County Borough Council over the period from April 2024 – March 2025. We have continued to decrease our care experienced population over the last 3 years.

Targeted work has been undertaken to further reduce our numbers of care experienced children and young people, it is pleasing to see the steady reduction has taken place in this period from 370 to 333.

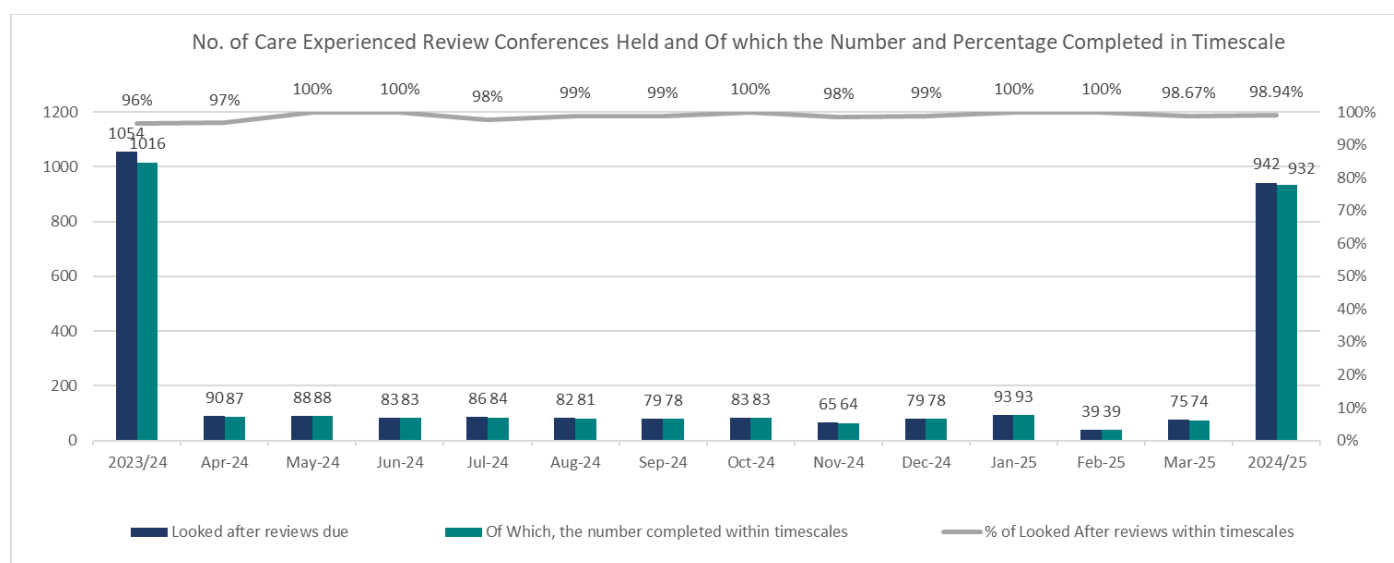
There are robust processes in place to ensure is targeted work in place to ensure that children who can remain with family or return home, do so in a planned and safe way.

The Signs of Safety (SOS) model also supports children being diverted from becoming care experienced. The model emphasises the importance of families finding their own solutions to problems within their own network of family members, friends and community services. The model makes identifying the risks much clearer but also recognises the strengths and what is working well. This enables families to feel empowered and part of the solution.

The Signs of Safety model complements our reunification framework to set clear plans that work towards a clear return home for children to their families. Focus on driving this forward through continued development of the SOS model has been key in progressing child led and co-produced plans for children.

In CTM the number of care experienced children per 10,000 remains higher than the Wales average. Wales has considerably higher rates of children who are care experienced per 10,000 of the population compared to England. On 31st March 2023, 116 per 10,000 of the population were care experienced compared to England where 71 per 10,000 of the population were care experienced.

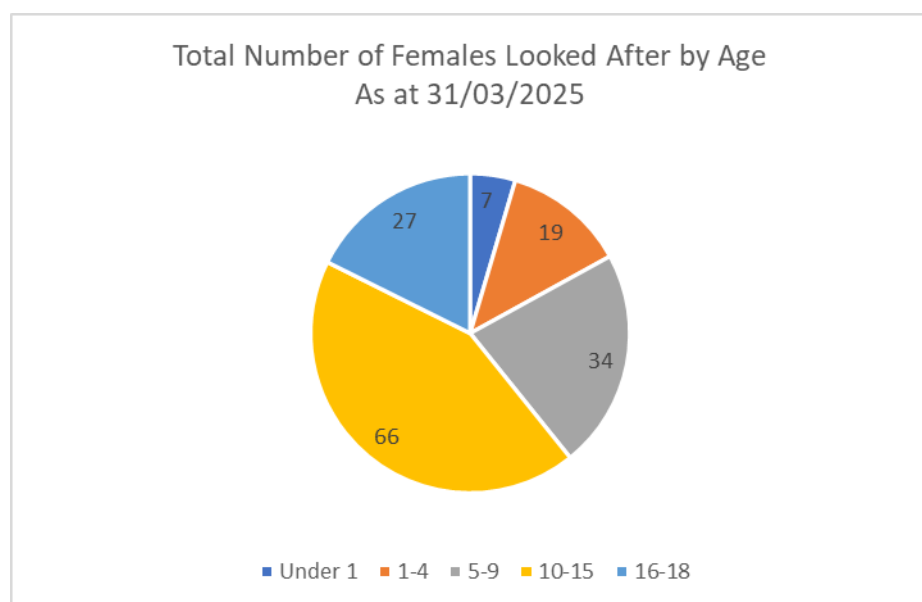
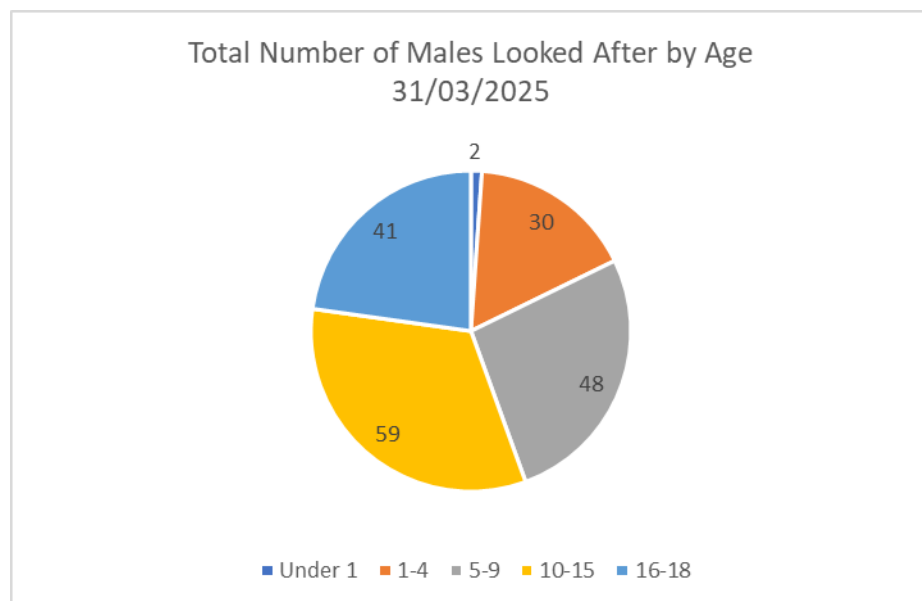
Chart 10 – No. of Care Experience Reviews (CER) and No. Held in Compliance



We have increased our compliance from last year (96%)

Every effort is made to arrange the review within timescales, but this is not always possible due to a multitude of factors including social worker availability, and the availability of the young person should they wish to attend. The IRO Manager monitors this figure on a monthly basis, and highlights concerns to senior managers where necessary.

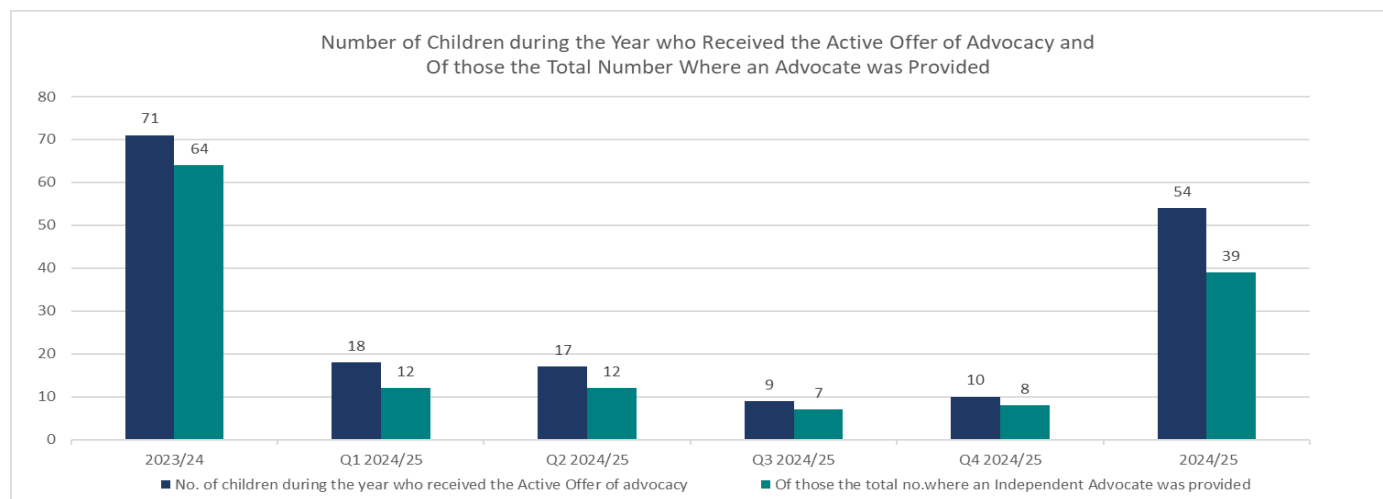
Chart 11 & 12 – Care Experienced Children (CEC) by Gender and Age



The largest age group continues to be those between the ages of 10-15 years for both male and female children this has not changed from the last reporting period.

Advocacy

Chart 13 – Number of children receiving Active Offer of Advocacy and those provided with service.



Since the introduction of the SofS practice model, we have seen a reduction in referrals to the Advocacy services. The SofS model placed much greater emphasis on putting the child at the centre of interventions and decision making. As such we envisaged we would see a reduction because Social Workers are now undertaking a greater level of direct work with children to ascertain their lived experience and wishes, this has negated the need for independent advocacy in many cases, however the offer is still made.

In the last reporting period 64 children had received a service, so we can see this year this figure as slightly reduced to 54.

As part of the IRO consultation with young people, they consistently raise the offer of advocacy and revisit these conversations throughout their involvement.

We have increased our use of Parental Advocacy in this period.

Parent Advocacy aims to reduce the number of children entering the care system in Wales. The Parent Advocacy Programme, funded by Welsh Government as part of its Radical Reform of Social Services, provides choice and control to parents by creating compassionate communities. The goal is to empower families and keep families together wherever possible. We will do this by taking preventative and positive action. The Parent Advocacy Programme supports parents to navigate systems and to be fully involved in the decision-making processes when social services intervention is required. (National Framework for Parent Advocacy)

Regional Service TGP Cymru received funding from Welsh Government to roll out regional services, following the same footprint as the established Children's and Young People's Statutory Advocacy regions. This includes Mid and West Wales, North Wales and Cwm Taf Morgannwg. The funding runs from April 2023 until end of March 2026. The funding made available by Welsh Government was allocated to regions based on their Child Protection population. Following discussions with local authorities, we decided to concentrate the service on child protection related meetings. Bridgend has an allocation of 82 meetings per year and this covers Initial Child Protection Case Conferences, Core Groups and Review Child Protection Case Conferences. We limited the number of meetings per parent/couple per year to try and make the service as accessible to as many parents as possible, so three meetings per year were agreed. Following recent discussions with Bridgend, we have now added CASP (Care and Support Plan) to the referral criteria as take up of the service has been lower than

expected, perhaps linked to the decreasing child protection population. We may further review this with a view to supporting parents of Children Looked After, if it is felt a parent would benefit from advocacy support.

This service is in the early stages of development but to date 11 parents have been supported in meetings. Positive feedback has been received from a number of families;

“It was great being shown the Code of Practice app and the Safeguarding Procedures as we could check for ourselves if things were being done right and we were being treated as we should be. This will help us to speak up for ourselves in the future”.

“You were able to say exactly how things were for us. We think that you being independent made this possible. You were able to represent us when we felt overwhelmed”. “We felt we had a voice.”

Business Support

The previous IRO Annual report discussed the relatively new business support model. In this period, it's pleasing to report this model is now embedded and working well. The model does present some challenges for the IRO Service and has had a slightly detrimental impact on compliance, generally the model is embedded and working well. The IRO Service Manager has regular interface with the team leads for business support to resolve any issues at the earliest opportunity.

Team Meetings

The IRO Service continue to have monthly in person team meetings. The meetings provide a shared learning space for the team and enable learning, themes and practice guidance and directorate priorities and changes to be disseminated. The Team invites speakers and uses this space and additional sessions to work on practice and support.

The IRO Service Manager continues to have quarterly meetings Western Bay Adoption Service, Cafcass Cymru, and other attends forums with regional partners in Cwm Taff Morgannwg. Links have been made with the IRO Team managers for neighbouring Local Authorities to share development and learning for Signs of Safety.

The Team have also embedded a programme of Action learning Sets which acts as a peer support forum focussing on sharing the wealth of expertise within the team.

Case Dispute Resolution and Complaints

In this period the formal case resolution process has been initiated twice regarding care planning for a Care Experienced child. Any escalating concerns have been resolved at an informal stage. There have been complaints managed at team level and feedback has been received regards complaints made via the stage two and independent investigation. The service has received compliments also from colleagues and families.

IRO Quality Assurance Audit

The IRO's complete quality assurance audits after every CER, ICPC and RCPC. The quality assurance audit form provides data on practice standards and captures data and information relating to the IRO standards. Once completed by the IRO following the meeting, the form automatically goes to the Safeguarding Team Manager of the case holding team for their scrutiny and management oversight.

This form also alerts the Safeguarding Team Manager to any outstanding pieces of work, compliance issues and identifies areas of good practice and this has continued during this period.

The IRO Service Manager is also meeting regularly with the Quality Assurance Officer to identify a shared process within the Local Authority for themes, learning and improving practice. The IRO Team Manager has been an active participant of the Reflective Sessions held across the directorate, these sessions have focussed on learning and improving in the areas of Section 47 investigations, strategy meetings and Care and Support Plans and subsequent review meetings.

The IRO team manager has met with the Quality Assurance Manager with a view to compiling a programme of Quality assurance work which enables the team to access both the qualitative data in a meaningful way and the quantitative data about active and lived experience of Children and families. This will be fed back to practitioners and inform the cycle of continuous improvements and active learning within the service.

Parental surveys have been undertaken to gather baseline data for parents' experiences of child protection conferences prior to holding SofS conferences. We now plan to run the same surveys to understand how SofS conferences have provided a different experience. I look forward to reporting the findings as we envisage parents to feel more positive about our new approach.

Independent Legal Advice

The reciprocal agreement with Neath Port Talbot remains in place and enables the IRO Service to have independent legal advice when needed. This has previously been used on several occasions but not in this reporting period.

Cafcass Cymru

The IRO service has a positive working relationship with Cafcass Cymru, and quarterly interface meetings are held. The CAFCASS liaison has commented to D Wright deputy head of Service as follows : *“It was commented that [IRO Team manager] have been very consistent in your commitment to the interface meetings and seem very focussed on practice. ”*

The resolutions protocol allows the IRO Service to refer a case to Cafcass if the IRO believes the child's human rights are not being met by the local authority and they have been unsuccessful in resolving this via the resolutions protocol. In this period the IRO Service has not referred any case to Cafcass, however, they do liaise with Cafcass regularly and ensure Cafcass is invited to CERs for any children who has an allocated Cafcass officer. As a result, IROs are alerted more quickly to issues arising in the court process and can liaise at an earlier stage where disputes arise with the Local Authority. This relationship provides Children's Guardians with the means to communicate issues arising directly with the IRO that are relevant to the on-going development and monitoring of a care plan, either during proceedings or following an Order being granted. IRO's are required to give feedback on Court Care Plans and ADM decision making. IRO feedback is sought when care planning for children changes such as when a Placement with Parents is being considered for a Care Experienced child or when a Child is Placed for Adoption.

Lisa French-IRO Service Manager.

Appendix 1-Action Plan

Appendix 2-Team Plan

Agenda Item 5

| | |
|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Meeting of: | CABINET COMMITTEE CORPORATE PARENTING |
| Date of Meeting: | 29 OCTOBER 2025 |
| Report Title: | IMPLEMENTATION OF AN INCENTIVE PAYMENT SCHEME BASED ON COUNCIL TAX LIABILITY AND AN INFLATIONARY INCREASE OF ALLOWANCES AND FEES FOR FOSTER CARERS AND KINSHIP CARERS IN BRIDGEND COUNTY BOROUGH COUNCIL (BCBC) |
| Report Owner: Responsible Chief Officer / Cabinet Member | CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING CABINET MEMBER FOR SOCIAL SERVICES, HEALTH AND WELLBEING |
| Responsible Officer: | DAN BOLTON GROUP MANAGER PROVIDER SERVICES |
| Policy Framework and Procedure Rules: | There is no effect upon the policy framework and procedure rules. |
| Executive Summary: | <p>This report provides information on the implementation of an Incentive Payment Scheme based on Council Tax liability for foster carers, kinship carers and special guardians in Bridgend, alongside a 2.6% inflationary uplift in fees and allowances.</p> <p>Both measures form part of the wider programme of work under the Fostering Remodelling Board to strengthen Bridgend's fostering offer. They are designed to improve the recruitment and retention of carers, reduce reliance on Independent Fostering Agencies (IFAs), and increase placement sufficiency for children.</p> <p>The Incentive Payment Scheme reflects good practice already operating across several Welsh authorities and was strongly endorsed by local carers during consultation. It provides a visible financial incentive, recognises the contribution of carers, and helps sustain long-term placements. The 2.6% uplift ensures Bridgend County Borough Council's fees and allowances remain competitive with IFAs and in line with the cost of living.</p> <p>Financial modelling shows that while the Incentive Payment Scheme represents a cost pressure, it should be regarded as an invest-to-save measure. Increasing the number of in-house foster carers will reduce the need for higher-cost IFA and residential placements, delivering long-term cost avoidance and supporting better outcomes for children.</p> |

1. Purpose of Report

- 1.1 This report seeks Cabinet Committee Corporate Parenting Committee endorsement on the implementation of an Incentive Payment Scheme based on council tax liability for foster carers, kinship carers and special guardians in Bridgend, as a measure to enhance recruitment and retention. The Incentive Payment Scheme aligns with recent legislative changes and supports the local strategy to improve placement sufficiency and stability for children.
- 1.2 In addition, the report sets out the plans to apply a 2.6% inflationary increase (March 2025 Consumer Price Index) to all foster carers and kinship carers fees and allowances from April 2025. This uplift will ensure payments keep pace with the cost of living and forms part of the wider programme to strengthen the overall offer to carers.

2. Background

- 2.1 Bridgend County Borough Council (BCBC) continues to face significant challenges recruiting and retaining foster carers, resulting in increased reliance on Independent Fostering Agency (IFA) placements. The Health and Social Care (Wales) Act 2025 requires a transition towards a not-for-profit fostering model by 2030, emphasising the urgent need to strengthen internal fostering provision.
- 2.2 Bridgend has experienced a net loss of foster carers over the past three years. There is a well-documented shortage of foster carers across the UK, with some movement between fostering agencies, but an overall decline in foster care capacity in both Wales and the wider UK.
- 2.3 Locally, Bridgend faces a significant shortage of skilled and experienced foster carers particularly those who are equipped to meet the long-term needs of children and young people who:
 - Are aged between 10 and 15 years old
 - Present with trauma-related behaviours and require support for emotional wellbeing
 - Are at risk of exploitation or exclusion from education
 - Have disabilities
- 2.4 The BCBC Placement Sufficiency Strategy (2024) identifies a notable decline in local foster carers and highlights an ageing carer demographic, with only 29% aged 50 or younger. This trend exacerbates retention concerns and raises questions about long-term fostering sustainability.
- 2.5 Consultation with foster carers during the Information and Consultation Event (ICE) meeting on 18 March 2025 highlighted council tax reduction and fees/allowances as a highly valued incentive. Several Welsh local authorities

have successfully introduced council tax reduction schemes, resulting in improved recruitment and retention. These include:

- Conwy: 100% reduction (Implemented September 2024)
- Wrexham: 75% reduction (Implemented July 2020)
- Flintshire: 50% reduction (Implemented 2019)
- Anglesey: 50% reduction (Implemented 2018) 100% reduction (Implemented April 2025)
- Merthyr Tydfil: 50% reduction (Implemented 2019)
- Monmouthshire: 30% reduction (Implemented May 2024)
- Pembrokeshire 100% Reduction (Implemented May 2025)

LA X service manager:

'We have had a number of enquiries off the back of the council tax subsidy, and it has also helped in terms of foster care retention'

LA Y Recruitment Officer:

'The scheme has been a factor for many enquires when deciding to apply with us rather than an independent agency, this is where we have found the biggest advantage'.

LA Z Foster Carer:

We think that it's a great incentive for prospective foster carers and great for us existing carers, it feels like a big thank you for helping children in our community.

- 2.6 To increase Local Authority foster carers and effectively compete with Independent Fostering Agencies (IFAs), BCBC must develop a unique offer for current and prospective carers.
- 2.7 This report forms part of a wider programme of work aimed at strengthening our overall offer to foster carers in Bridgend. Alongside the Incentive Payment Scheme, we have reviewed foster carer fees and allowances, as well as our broader support offer through the Fostering Remodelling Board. For example, we have recently extended our free leisure offer to include access to soft play facilities. These actions demonstrate our commitment to strengthening the overall offer to carers, improving retention, and ensuring Foster Bridgend remains competitive and sustainable within a changing fostering landscape.
- 2.8 BCBC has not increased foster carer and kinship carer fees and allowances since 2023-24. During this period, the cost of living has continued to rise and Independent Fostering Agencies (IFAs) operating locally have implemented uplifts for 2025/26 across providers and there is an average percentage of 4.93% set out in 8.7 below from our six most used agencies. Without action, there is a risk that BCBC's offer will become less competitive, making

recruitment and retention of foster carers more difficult. This adjustment is therefore necessary to maintain the real-term value of payments and to remain competitive within the fostering market.

- 2.9 This work is critical not only in responding to the national shortage of foster carers but also in preparing for upcoming legislative changes that will prohibit private fostering providers from operating in Wales by 2030. By improving our offer now, we can better compete in a challenging market and ensure that more children are supported in high-quality, local authority placements.
- 2.10 While an Incentive Payment Scheme is a valuable incentive, evidence from other local authorities such as Anglesey highlights that such a measure is most effective when introduced as part of a broader, long-term strategy. Anglesey developed their enhanced package for foster carers over a period of time, gradually strengthening their offer through increased allowances, simplified skills payments, and extended council tax discounts. They are now actively promoting this as a comprehensive benefits package. This phased approach has contributed to a significant reduction in their reliance on Independent Fostering Agencies—from 75% down to 20%.

3. Current Situation / Proposal

- 3.1 The Health and Social Care (Wales) Act 2025 creates an unprecedented opportunity to encourage foster carers currently affiliated with IFAs and living in Bridgend to transition fostering directly to Foster Bridgend. The Incentive Payment Scheme is an attractive incentive that IFAs are unable to offer, positioning BCBC favourably to recruit and retain carers within this changing legislative landscape.
- 3.2 The proposed Incentive Payment Scheme based on council tax liability for Foster Carers, Kinship Carers and Special Guardians:-
- Provides a 50% incentive payment based on council tax liability for foster carers, kinship carers and special guardians who have offered care for 90 days or more in the previous financial year.
 - Will be based on council tax liability being initially paid in full by Foster Carers, Kinship Carers and Special Guardians.
 - Recognises the vital role of kinship carers and special guardians, helping to close the gap in support compared to foster carers and encouraging long-term placement stability.
 - Eases financial pressures on families, making it more sustainable for them to continue caring for children within their communities.
- 3.3 Alongside the Incentive Payment Scheme, an inflationary increase of 2.6% will be applied, and backdated, to all foster carer and kinship carer fees and allowances from April 2025. This will be the first increase since 2023-24 and is intended to ensure payments remain competitive with other providers. The tables below show the current and revised rates with a 2.6% increase for Fees and Allowances and the Welsh Government Minimum Allowance.

| Allowances | | | |
|-------------------|------------|-------------|------------|
| Age | 0-4 | 5-15 | 16+ |
| Current Rates | £225.77 | £206.58 | £257.38 |
| Revised Rates | £231.64 | £211.95 | £264.07 |
| NMA | £224.00 | £204.00 | £255.00 |

- NMA – National Minimum Allowances from Welsh Government

| Fees | | | | |
|---------------|------------|-------------|--------------|------------|
| Age | 0-4 | 5-10 | 11-15 | 16+ |
| Current Rates | £168.08 | £168.08 | £214.03 | £214.03 |
| Revised Rates | £172.45 | £172.45 | £219.59 | £219.59 |

Approach and Justification

- 3.4 It was agreed at Corporate Management Board that a 50% Incentive Payment based on council tax liability for all approved foster carers, kinship carers and Special Guardians would be adopted as the most impactful and equitable model. This provides the strongest financial support, aligns with successful practice in other Welsh authorities such as Pembrokeshire and Anglesey, and reflects Bridgend's ambition to build a sustainable and competitive not-for-profit fostering service.
- 3.5 This exemption will continue where a kinship foster carer transitions to a Special Guardianship Order (SGO) and for existing Special Guardians and is included in the costings below. This approach aligns with the principle of avoiding financial detriment, which is supported through provisions in the Code of Practice on the Exercise of Social Services Functions in Relation to Special Guardianship Orders (2018). While the term "no detriment" is not explicitly used in legislation, the Code recognises the potential financial disadvantage for foster carers who become Special Guardians and permits enhanced financial support under Regulation 7(4) of the Special Guardianship (Wales) Regulations.
- 3.6 Bridgend's own Special Guardianship Order Financial Policy also reinforces this approach. Section 2.1 of the policy states that *"financial support should not be the sole reason for a Special Guardianship arrangement failing to survive"*, underlining the need for continuity of support during legal transitions.
- 3.7 Encouraging kinship carers to pursue SGOs also directly contributes to reducing the Care Experienced Children population in Bridgend, aligning with national and local priorities around placement sufficiency, permanence, and the right of children to grow up in stable family environments outside of the care system.

- 3.8 This policy consistency supports BCBC's wider goal of ensuring permanence, cost-effective service delivery, and sustainable support for local carers/guardians.
- 3.9 In addition to the Incentive Payment scheme, the 2.6% inflationary increase to foster carer and kinship carer fees and allowances will further strengthen BCBC's position in a competitive fostering market. The uplift will ensure that payments remain in line with sector trends, particularly considering recent increases by Independent Fostering Agencies averaging 2.95% for 2025/26. Together, the Incentive Payment Scheme and the fee uplift form a balanced financial package designed to improve recruitment and retention, support placement stability, and reduce reliance on higher-cost external placements.

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

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

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

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

- **Long-term** - The introduction of an Incentive Payment Scheme alongside an inflationary uplift in fees, is designed to strengthen the sustainability of the local fostering service in Bridgend. By making fostering more financially viable, the scheme helps secure long-term placement sufficiency and stability for children, reducing reliance on costly external provision.
- **Prevention** - Supporting and retaining local foster carers and kinship carers reduces the risk of placement breakdown, avoids escalation to higher-cost residential placements, and helps prevent

children from being placed far from their communities. This contributes to better outcomes for children and reduced future financial pressures on the authority.

- **Integration** – Supporting corporate priorities around financial sustainability, social care transformation, and the national objective of eliminating profit from children’s care by 2030. It also integrates with the Placement Sufficiency Strategy, the fostering remodelling programme, and the council’s role as corporate parent.
- **Collaboration** - The scheme has been developed in consultation with foster carers and informed by learning from other Welsh local authorities who have implemented similar approaches. It aligns with Welsh Government legislation and works collaboratively with the wider national agenda to strengthen not-for-profit fostering provision.
- **Involvement** – Foster carers have directly shaped the proposal through consultation at the March 2025 Information and Consultation Event (ICE). Their feedback highlighted the importance of council tax incentives and fee uplifts as incentives. This demonstrates active involvement of those most affected, ensuring the scheme reflects their views and priorities.

6. Climate Change and Nature Implications

- 6.1 There are no direct climate change or nature implications associated with the report.

7. Safeguarding and Corporate Parent Implications

- 7.1 There are no safeguarding or corporate parenting implications associated with the report.

8. Financial Implications

- 8.1 Financial modelling has been undertaken in relation to the estimated annual cost of implementing the 50% Incentive Payment Scheme, based on the current number of eligible carers. It is acknowledged that the number of carers accessing the scheme may increase over time, and this will be monitored and reviewed. While this could increase the overall cost of the scheme, the recruitment and retention of additional in-house foster carers will contribute to placement sufficiency, reducing reliance on high-cost residential provision and independent fostering agencies, which are significantly more expensive.

- 8.2 For carers living outside of the Bridgend County Borough Council area, eligibility will be confirmed through the provision of documentary evidence of their Council Tax liability in the local authority where they reside (for example, a Council Tax bill or statement). This will allow the rebate to be calculated accurately on an individual basis. The costs for these carers are excluded from the table below as their current bandings and council tax liabilities are not currently available, however an estimate for carers living outside of BCBC has been calculated in 8.6.
- 8.3 Carers who are BCBC residents that are already in receipt of the full Council Tax Reduction Scheme would not be eligible for the Incentive Payments Scheme due to having a nil Council Tax liability and therefore have also been excluded from the calculations below.

| Kinship and General Carers | # | Estimated cost of Incentive Payments |
|-----------------------------------|-----------|---------------------------------------------|
| | | 50% |
| Number of current Carers | 127 | |
| Live outside of BCBC | -25 | |
| Full Council Tax Reduction Scheme | -21 | |
| Estimated cost | 81 | 82,659.31 |

| Special Guardianship Orders | # | Estimated cost of Incentive Payments |
|------------------------------------|-----------|---------------------------------------------|
| | | 50% |
| Number of current SGOs | 124 | |
| Live outside of BCBC | -22 | |
| Full Council Tax Reduction Scheme | -22 | |
| Estimated cost | 80 | 63,889.64 |

- 8.4 A comparison of the cost of 10 young people being placed in alternative placement to in- house fostering is shown below.

| | Weekly cost £ | Annual Costs £ | Annual Cost for 10 CYP £ | Annual Cost for 10 CYP In-House Fostering £ | Cost Avoidance if Placed with Inhouse fostering £ |
|--|--------------------------|---------------------------|-------------------------------------|--------------------------------------------------------|--------------------------------------------------------------|
| | | | | | |

| | | | | | |
|-----------------------------------------------|-------|---------|-----------|---------|-----------|
| Independent residential placements | 5,935 | 309,451 | 3,094,509 | 218,988 | 2,875,521 |
| In-house residential placements (MV) | 3,040 | 158,500 | 1,585,000 | 218,988 | 1,366,012 |
| Independent Fostering Agency (IFA) placements | 1,034 | 53,913 | 539,128 | 218,988 | 320,140 |

8.5 This scheme represents an invest-to-save opportunity, with the potential to reduce long-term placement costs by strengthening our in-house fostering service and reducing reliance on more expensive external placements. The proposal sits within a broader, time-bound programme of improvement under the Fostering Remodelling Project, which runs until March 2026. During this period, BCBC is committed to enhancing our overall offer to foster and kinship carers— this includes the Incentive Payment Scheme, the review of foster carer fees and allowances, and the development of a broader package of financial and non-financial support for carers.

8.6 In addition to the Incentive Payment Scheme is the proposal for BCBC to apply a 2.6% inflationary increase (March 2025) to all foster carer and kinship carer fees and allowances from April 2025. The current total weekly cost of allowances and fees is £98,334.83; applying the 2.6% increase will raise this to £100,891.54, a weekly variance of £2,556.71. This equates to an additional £133,306.63 per annum and is evidenced below. This increase will be funded from the central pay and price inflation budget. This uplift will ensure BCBC's payments remain competitive and in line with sector trends.

| Fees & Allowances increased by 2.6% inflation | Total weekly Cost - March 25 | New Total after adjustment | Variance | Annual Cost |
|----------------------------------------------------------|-------------------------------------|-----------------------------------|-----------------|--------------------|
| | £ | £ | £ | £ |
| All allowances and fees with 2.6% added | 98,334.83 | 100,891.54 | 2,556.71 | 133,306.63 |

8.7 The table below provides a snapshot of six of our main Independent Fostering Agency (IFA) providers and the percentage increase in their fees from 2024/25 to 2025/26. This comparison illustrates that these IFA providers have implemented uplifts averaging 4.93%, (overall increase across all IFA's is 2.95%) reinforcing the need for BCBC to maintain parity to remain competitive in the fostering market as we approach the Health and Social Care (Wales) Bill 2025.

| Provider | 2024/25 | 2025/26 | Percentage Increase |
|-------------------------------|----------------|----------------|----------------------------|
| National Fostering Agency | 872.19 | 915.8 | 5.00 |
| Foster Care Associates Ltd | 1598.03 | 1654.32 | 3.52 |
| TACT | 927.2 | 973.58 | 5.00 |
| Family Fostering Partners | 804.26 | 832.33 | 3.49 |
| Compass Wales | 892.49 | 959 | 7.45 |
| Action For Children | 831.33 | 873.71 | 5.10 |
| Total average increase | | | 4.93 |

- 8.8 The anticipated costs as a result of the Incentive Payment Scheme for carers residing in BCBC is set out in 8.1 and, based on the current number of carers, is £146,548.95. If carers residing outside of BCBC who are entitled to the Incentive Payment Scheme have a similar council tax liability the total cost of the scheme is estimated to be £190,555.95. This will be met from the Welsh Government Social Care Workforce Grant. The use of the grant for this purpose meets the terms and conditions of the grant. The grant value and terms and conditions are confirmed annually on receipt of the grant offer letter. Should the terms and conditions change, or the funding cease/reduce or, either the Incentive Payment Scheme would be withdrawn or to enable the scheme to continue, the service would have to demonstrate it was affordable from savings elsewhere in the Care Experienced Children's budget.
- 8.9 The financial return of this scheme will not be immediate, but by strengthening our in-house fostering capacity now, we can position BCBC to significantly reduce reliance on high-cost IFA and residential placements over the coming years. For example, placing just 10 children with in-house foster carers instead of residential placements would deliver an avoided cost of over £2.8 million per year compared with the estimated annual cost of £190,555.95 for the 50% Incentive Payment Scheme. This investment is particularly critical as we approach the 2030 Welsh Government Eliminating Profit policy deadline, when local authorities will no longer have the option of using for-profit fostering providers. Building a sustainable, competitive in-house service ahead of this transition will protect BCBC from future cost pressures and placement shortages.
- 8.10 We will pilot this approach as a new way of working, designed to incentivise and recognise the contribution of our carers, with a full review of its impact to take place after two years. The pilot will apply specifically to our in-house general foster carers and will not extend to Independent Fostering Agencies (IFAs) or carers approved by other local authorities who reside within Bridgend County Borough Council.

8.11 This work is directly aligned with the Health and Social Care (Wales) Act 2025, which received Royal Assent in March 2025. The Act sets out a clear phased approach to phasing out profit from children's care services:

- From 1st April 2026, no new for-profit fostering providers can register in Wales.
- From 1st April 2027, existing providers can no longer expand or recruit new carers.
- From 1st April 2030, no new placements can be made with for-profit fostering providers unless approved in exceptional cases.

8.12 These legislative milestones underline the urgency of developing a strong, competitive, not-for-profit local authority fostering service. Introducing an Incentive Payment Scheme along with the inflationary uplift in fees and allowances is a timely and strategic step within this wider transformation, helping to improve carer retention, encourage IFA transfers, and support more children to remain in local, in-house placements.

9. Recommendations

9.1 It is recommended that the Cabinet Committee Corporate Parenting endorses the report and the steps being taken to improve carer retention, encourage IFA transfers and support more children to remain in local, in-house placements.

Background documents

None

This page is intentionally left blank

| | |
|----------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Meeting of: | CABINET COMMITTEE CORPORATE PARENTING |
| Date of Meeting: | 29TH OCTOBER 2025 |
| Report Title: | REGIONAL CHILDREN'S ADVOCACY SERVICE |
| Report Owner / Corporate Director: | CLAIRE MARCHANT CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING |
| Responsible Officer: | RAEANNA GRAINGER, GROUP MANAGER, MASH, IAA, IRO SERVICE |
| Policy Framework and Procedure Rules: | There is no effect upon the policy framework or procedure rules |
| Executive Summary: | <p>Summary of annual service delivery for 2024-25 of statutory advocacy for children & young people.</p> <p>The National Approach to Statutory Advocacy (NASA) was introduced by Welsh Government in July 2017. The overall aim was to provide a consistent and standardised approach to the delivery of advocacy services and ensure that all children and young people whose care planning is underpinned by statutory guidance and regulation have access to this.</p> <p>Tros Gynnal Plant (TGP) provides advocacy services across the Cwm Taf Morgannwg region. They are a well-established provider across Wales.</p> <p>There is evidence of the service provider working as a proactive and innovative regional partner in delivering statutory advocacy, alongside other services that help children, young people or their families.</p> |

1. Purpose of Report

- 1.1 The purpose of this report is to provide the Cabinet Committee Corporate Parenting with a summary report to highlight the key aspects of service delivery from our regional provider of advocacy services, Tros Gynnal Plant. Detailed performance reports are included as appendices as follows:

Appendix 1:

Appendix 2: Cwm Taf Morgannwg (CTM) Regional Annual Advocacy Report 2024-2025

2. Background

- 2.1** The regional service is based on the National Approach to Statutory Advocacy (NASA), which is prescribed by Welsh Government. The National Approach to Statutory Advocacy (NASA) for children and young people in Wales was introduced in July 2017. The national approach ensures that children and/or young people whose care planning is underpinned by statutory guidance and regulations have a clear entitlement to the offer of advocacy services. This enables children and young people to have an increased voice in their planning and to have their rights upheld under the United Nations Convention on the Rights of the Child. The national approach aims to standardise advocacy, its eligibility criteria, and provision across Wales.
- 2.2** When a child or young person aged five and over becomes care experienced or subject to child protection proceedings, they are eligible for the Active Offer of Advocacy (AO) and there are statutory responsibilities to ensure that all eligible children and young people are made aware of their rights to access this service. For children under five years of age, a referral to advocacy services is determined on a case-by-case basis following the social workers assessment of their ability to understand the information shared within the meeting. The Issue Based Advocacy (IBA) element of the advocacy service is intended to provide support to a child or young person to address a particular issue or situation.
- 2.3** Tros Gynnal Plant (TGP) provides a regional advocacy service in the Cwm Taf Morgannwg (CTM) region. TGP has delivered advocacy services in Bridgend for many years and is a well-established provider locally, as well as being the largest provider of advocacy to children and young people in Wales.
- 2.4** Bridgend County Borough Council (BCBC) receives an element of Welsh Government funding towards this service, which is administered by Rhondda Cynon Taf County Borough Council (RCT), on behalf of the CTM region. RCT are also the contracting authority for this regional service. TGP provides quarterly and annual reports both to individual local authorities and across the region as a whole. Additionally, there are quarterly meetings to discuss their content, service development and provide opportunities for partnership working to continuously improve service delivery.

3. Current situation / proposal

- 3.1** Detailed quarterly performance reports are provided by TGP. TGP also provide an annual report for both Bridgend locality and the CTM region. They cover the key service aspects of the Active Offer (AO) of advocacy, and Issue Based Advocacy.
- 3.2** In BCBC, during 2024/2025, 132 children and young people became eligible for the AO. 94 were eligible due to becoming subject to child protection procedures and 38 were eligible due to becoming care experienced. Out of the 132 eligible for AO, 66 were referred to the service. This equates to 50% of the eligible cohort being referred, compared to 27% in the previous year, and demonstrates an overall

increase in the percentage being referred. Of those children and young people refusing the AO, there are a number of reasons which are reported to be including, but not exclusive to, feeling they are able to share their own wishes and feelings and a preference for their allocated social worker to support them in this area. Children and young people also have requested that they have further discussions regarding advocacy services at a later date so wish to take the time to consider the offer.

- 3.3 Of the total number of AO referrals, 39% were for care experienced children and young people and 61% were for those who had become subject to child protection procedures.
- 3.4 With regards to demographics of those accessing the AO during 2024/2025, 34 were female and 32 were male. The 6-11 age group represented the highest number of referrals at 32, closely followed by the 12-16 age group at 30. There was 1 referral from the 0-5 age group and 3 from the 17-19 age group.
- 3.5 Following the referral, 60% of children and young people received the AO within 5 working days. Where there were delays to the AO being received, the primary factors for this were due to requests from children, young people and carers to meet at timescales outside of this.
- 3.6 Of the 66 children and young people referred, 54 AO meetings took place. 39 accepted the AO and subsequently received IBA.
- 3.7 During 2024/2025, 133 children and young people accessed the IBA service, presenting with 172 issues. The number has decreased slightly compared to the previous year, where 145 accessed the service. The Authority expected to see a reduction following the implementation of the Signs of Safety practice model as this places much greater emphasis on direct work between the child and their Social Worker and puts their voice at the centre of any intervention. This in many cases has negated the child's wish to be supported by an advocate.
- 3.8 Of the 133 children accessing IBA, 81 were care experienced, 29 were subject to child protection procedures, 13 were open to the Authority on a care and support basis and 10 were care leavers over the age of 18. This represents a continued increase in the number of Care Experienced children and young people referred for IBA and a decrease in the number of children and young people subject to child protection procedures. However it must be noted our numbers of children subject to Child Protection processes has significantly decreased in this period, leading to an overall reduction in referrals to advocacy.
- 3.9 In 2024/2025 with regards to gender, 76 referrals for IBA were female and 57 were male. The 12-16 age group represented the majority of referrals with 58, followed by the 6-11 year age group which was 43. The 0-5 age group had 4 referrals for IBA, 17-19 year olds accounted for 23 referrals and 20-25 year olds equated to 5 referrals.
- 3.10 With regards to the referral source for IBA, the majority of these were self-referrals with 73 of the 133 overall total. The second highest referral source was from social services at 49. This demonstrates good awareness of the service amongst the young people it is designed for.

- 3.11 A total of 172 issues were recorded across the IBA referrals. There were a wide range of issues that young people need support with but contact with family was the most prevalent with 34 children and young people requesting support with this issue. 29 young people raised issues relating to their placement and 23 with issues relating to social services.
- 3.12 One role of an advocate is to support young people to share their views, wishes and feelings at meetings. Support at meetings was highlighted 26 times during 2024/2025, however, advocates supported children and young people at 59 meetings. The type of meetings young people were supported with include Child Protection Conferences, Care Experienced Children Reviews, Core Group meetings, Planning meetings and School meetings. It is positive to note that advocates have seen an increase in young people's attendance at meetings this year.
- 3.13 TGP continues to be responsible for facilitating young people's participation and consultation groups in Bridgend - called Bridgend Youth Voice Forum, or 'BYV' Forum. The aim of the group is to allow care-experienced young people and care leavers to have a voice in wider Bridgend forums, including the Bridgend Corporate Parenting Board, whilst sharing their views, wishes and feelings in relation to what matters to them with the overall aim to support with service design and delivery.
- 3.14 TGP provide a Residential Visiting Advocacy Service (RVA) to BCBC's children's residential homes. During visits, the advocate supports young people living in the homes to share their views, wishes and feelings with home managers and has supported them to access the BYV forum if they wish.
- 3.15 TGP continue to develop new and innovative ways for young people to provide feedback to help improve the advocacy service, e.g. through the use of a QR code that they can scan from their mobile phones and which links to a short questionnaire. They have also introduced a monthly prize draw whereby children and young people who provide feedback have the chance to win a gift voucher.
- 3.16 There is a close partnership working between TGP and BCBC with a view to improving service delivery and develop strategies which will support an increase in the take up of the service. This has included TGP attending relevant team meetings to raise awareness of the service, discuss referral routes and the roles and responsibilities of staff within this process. The performance team are liaising with team managers on a quarterly basis to share information on those who have become eligible for the AO and gather data on the response to the offer, whether the referral has been made and any reasons for refusal.
- 3.17 TGP have recruited to a number of posts to its CTM team during the year including a casual advocate to take over the RVA role and two new part time Independent Professional Advocates. Training completed by the team includes but is not limited to Non-Instructed Advocacy, Restorative Engagement, Applied Suicide Intervention Skills Training, and Personal Safety and Lone Working.

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

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

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

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

Long Term. The operation of a statutory advocacy service is prescribed by Welsh Government and the service operates in a similar way across Wales and into the long term.

Prevention. Advocacy includes providing people with information, advice, and support to help people prevent issues from escalating further.

Integration. The regional service operates across the three CTM local authority areas as a single service.

Collaboration. The regional authorities work in close partnership with our service provider.

Involvement. One of the basic principles of advocacy services is the inclusion and involvement of the children and young people who use the service. Voice and choice are key principles of the Social Services and Well-Being (Wales) Act 2014, and the overall aim of advocacy services is to achieve this.

6. Climate Change and Nature Implications

- 6.1 Beyond necessary staff travel and operational administration activities, there is no direct impact on Climate Change through the provision of this advocacy service.

7. Safeguarding and Corporate Parent Implications

- 7.1 The provision of statutory advocacy is a key element in ensuring the safety and welfare of children and young people.

8. Financial Implications

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

9. Recommendation

- 9.1 It is recommended that the Cabinet Committee Corporate Parenting considers and notes both Annual reports in relation to the regional advocacy service.

Background documents

Bridgend Annual Advocacy Report 2024-2025

National Approach to Statutory Advocacy

Local Authority Report Bridgend 2024 - 2025

Collated Annual Report

April 24 - Mar 25

Headline Report

During the year, 133 children and young people accessed the Issue Based Advocacy (IBA) service, presenting with 172 issues. This represents a decrease of 12 young people accessing IBA when compared to the previous year, when 145 young people accessed IBA in Bridgend. Some 58 young people accessed the service for the first time, compared to 76 in the previous year. We also observed a small decrease in Active Offers (AO), with 66 received this year, compared to 71 last year.

Active Offer

According to information received from Bridgend, 132 children and young people became eligible for the AO during the year, 130 less than in the previous year. A total of 66 children and young people were referred, meaning that if we assume those referred became eligible in the year, 50% of those eligible were referred, compared to 27% last year. Of the 66 young people referred, 54 AO meetings took place, and 39 young people accepted the AO and went on to receive IBA, 27 less than in the previous year.

Children and young people in the CP arena made up 61% of those referred for AO throughout the year, compared to 65% in the previous year. Although we have noted a small decrease in AO referrals for children and young people in the CP arena, AO referrals for Care Experienced young people rose from 25 in the previous year, to 26 this year. As in the previous year, most AO referrals were for females making up 52% of the total number.

Most young people referred for AO were aged between six and 11 years, followed very closely by those aged between 12 and 16 years. Three young people aged 17 and over were referred for AO as well as one young person aged five or under.

Some 60% of young people referred for the AO received it within five working days of referral. Some visits were delayed as the advocate was instructed to wait until after the summer holidays to arrange a visit in school. Other reasons include young people changing their mind about meeting with an advocate after the referral was made, being unable to contact parents or carers and annual leave and illness affecting capacity in the advocacy team.

Issue Based Advocacy

This year, there has been a decrease in young people accessing IBA with 133 young people being referred this year, compared to 145 in the previous year.

Despite an overall decrease in the number of young people accessing IBA, the number of Care Experienced children and young people referred for IBA increased by 16 and made up 61% of the total number of IBA referrals this year. The decrease in the number of children and young people in the CP arena accessing advocacy services this year could in part be explained by the decrease in this group of young people becoming eligible for the AO. We also received 13 IBA referrals for young people subject to Care and Support plans and ten referrals for Care Leavers during this year.

The gender split remains as it was in the previous year with most IBA referrals being made for females.

Headline Report Cont'd

Despite decreasing by 19, as in the previous year, the majority of IBA referrals were made for young people aged between 12 and 16, making up 44% of the total number of IBA referrals, compared to 54% last year.

'Self-referral' continues to be the most popular route into the IBA service, followed by social services referrals. This year, seven IBA referrals were also made by third sector organisations, mostly TGP Cymru's Family Group Conferencing Service. Only four referrals came from other sources: one each from parents, residential staff, a foster carer and a school.

This year advocates supported children and young people to share wishes and feelings at 59 meetings, 37 of which they attended all or part of either virtually or in person. The meetings were made up of 22 Child Protection Case Conferences (including ten initial conferences), 20 CLA Reviews, 11 Core Group meetings, four planning meetings, one school meeting and one Pathway Plan meeting. This year, advocates have continued to note an increase in young people's attendance at their meetings.

This year, most young people accessing IBA wanted support to help share wishes and feelings about issues at home; either recorded as 'placement issues' or 'home life'. 'Homelife' is mostly used when young people want to share general wishes and feelings about their homelife in CP meetings, while 'placement' is used to describe specific issues care experienced young people may have in relation to their foster or residential home. This year, almost all the 21 'Homelife' issues were about relationships at home. The 29 placement issues mostly consisted of young people wanting to leave their placement or who were struggling with relationships with carers and rules and boundaries. Four young people wanted to share their wish to stay in their current placement.

Contact was recorded as the main issue for 34 young people this year. Some young people wanted to raise contact issues relating to more than one person. Most young people shared that they wanted to spend more time with family, this was 14 times in relation to parents, seven times in relation to siblings, six times in relation to wider family, five times in relation to grandparents and twice in relation to a stepparent or partner of a parent. Wanting to stop contact or spend less time with someone was raised just twice, both in relation to a father.

One young person wanted arrangements in place to spend time with their previous carers family members to remain unchanged. This type of contact issue usually comes about when a family member suggests to the local authority that a young person wants more or less time with a family member, but following exploration and discussion with their advocate, the young person shares they are happy with current arrangements.

Young people also wanted their advocate to support them to share wishes and feelings in relation to social services issues, school or education issues, access to services, care leaver issues, complaints and emotional wellbeing issues.

During the year, 72% of young people had contact with their advocate within five working days of the IBA referral being made.

Residential Visiting Advocacy (RVA)

RVA in Sunnybank and Meadowview is currently being undertaken by TGP's Bridgend participation worker, who will also support young people living in these homes to access the Bridgend Youth Voice Forum (BYV) if they want to. The RVA has offered residents to add agenda items to the BYV forum agenda during RBA visits even if they decide they don't want to attend forum meetings. The RVA reports excellent communication with both homes, particularly Meadowview where she is informed when someone new moves in, and when a young person requests an advocacy visit. The visiting advocate has dealt with several issues during her visits by supporting young people to share their views, wishes and feelings with community home managers. Several young people living in community homes have also accessed IBA throughout the year.

The RVA for Bakers Way and Harwood House initially experienced some difficulties in contacting home managers to arrange a visit. The RVA contact the Deputy Residential Manager and a visit to Bakers Way was carried out in quarter three, but the manager feels regular monthly visits will not be beneficial at this time. The RVA also met with the manager of Harwood House in quarter three who explained the young people in residence had no current issues and were well supported by professionals, she therefore also felt visiting advocacy was not beneficial at this time. The RVA has offered to attend a team meeting to discuss advocacy and share information about Non-Instructed Advocacy (NIA) in both homes. We have agreed that the managers will let the RVA know if they would like her to attend in the future.

Consultations have been prepared and have been shared with both young people and staff in Bridgend community homes during the quarter four. This will allow us to review and evaluate the service and inform any necessary changes to improve our service.

Service Information

TGP Cymru continue to be responsible for facilitating the young people's participation and consultation group in Bridgend; Bridgend Youth Voice Forum, or 'BYV' Forum. The aim of the group is to allow care experienced (CE) young people and care leavers to have a voice in wider Bridgend forums, including the Bridgend Corporate Parenting Board.

In June, following a decline in young people in the child protection arena being referred for AO, the Advocacy Team Manager and the Advocacy Operational Manager met with the Bridgend Group Manager for Case Management and Transition, along with a member of the Bridgend Commissioning Team. During the meeting, the Active Offer Activity Spreadsheet, along with guidance for completion was shared and discussed, along with referral information and general information about advocacy and the AO designed to be shared with young people.

In September, the advocacy team manager attended the Children's Continuous Improvement Group in Bridgend Civic Centre, to promote and discuss the advocacy service, as well as discuss the AO referral pathway and referral rates. Following this, the team manager also attended the Care Experienced Children's Team (CECT) meeting where information on referral pathways and the advocacy process was shared.

Both team meetings were very positive, and the team manager was able to answer questions from both team managers and social workers, as well as share feedback from advocates about recent pieces of work undertaken. Social workers in the CECT team also shared some recent case examples describing positive advocacy interventions, which the team manager shared with the advocacy team. Later in the year, the advocacy team manager attended the West team meeting and the 16+ team meetings and the Information Advice and Assistance team meeting in Bridgend Civic offices.

Following the meetings, literature was sent via email, containing information on referral pathways, the AO and the advocacy process. Several IBA referrals were received as a result of attendance at Children's Services team meetings.

The advocacy team manager met and shared information on the advocacy service and referral process with a trainee social worker in quarter four as part of her induction. A meeting was also held with a social worker from the Care Experienced team to discuss and share information on the Non-Instructed Advocacy (NIA) service. We welcome the opportunity to share and discuss advocacy provision with social workers across CTM.

Following recruitment in the previous year, a new full time senior advocate role was created, and the successful candidate started her role at the beginning of April. A casual advocate has also been recruited to take over the residential visiting advocacy (RVA) role. Two new part-time Independent Professional Advocates (IPA), one working four days per week, and one working three days per week have also been recruited. Following an increase in referrals in this period, we considered starting the recruitment process for a new full-time advocate to adjust our capacity but have decided to put this recruitment on hold for now, until the outcome of the current tendering process is known.

During quarter one, the CTM team completed internal training in Non-Instructed Advocacy (NIA) and internal Restorative Engagement. The advocacy team have also completed training in Applied Suicide Intervention Skills Training (ASIST), Personal Safety and Lone Working Training with the Suzy Lamplugh Trust, and in response to the increase in referrals for Unaccompanied Asylum-Seeking young people, the Senior Advocate has completed a one-day training course with the Ethnic Youth Support Team (EYST).

The Senior Advocate has completed a Children in Wales training course about Care Experienced Young People Transition and the Care Leaver Journey. Team members who were unable to attend previously, completed a First Aid at Work training course in February.

TGP Cymru have identified a funding source which we plan to use to deliver a pilot project which will focus on the delivery of advocacy services to children and young people suffering with emotional and mental health difficulties but do not meet criteria for statutory services. Unfortunately, the recruitment process undertaken in quarter four was unsuccessful and we have decided to put this piece of work on hold until the current tendering process is complete.

Young People's Feedback

As a team, we are continuing to discuss different ways of making it as easy as possible for young people to evaluate the service they have received from TGP Cymru. Young people can scan a QR code which allows them to fill in a short questionnaire about the advocacy service on their own mobile phones. Advocates carry this code with them, and they are also sent to young people following the end of a piece of work. A paper copy of the feedback form is also sent by the Senior Advocate at the end of a piece of work along with a Freepost envelope. Young people can either post the form, scan the code or take a picture of the filled in form and email or text it to the service.

Advocates also carry the Freepost envelopes with them in case a young person wants to fill in the form during a final or closing visit and are encouraged to remind young people their thoughts and opinions about the service they receive are very important to TGP Cymru and they are welcome to share them in whichever way they feel comfortable. To further encourage young people to share their feelings about the advocacy service we have also introduced a monthly prize draw, whereby children and young people who provide feedback will have the chance to win a £20 gift voucher.

This year, 18 young people provided feedback about the advocacy service they received.

Of those 18:

17 stated they found the service helpful; 16 felt the service made a difference to their situation, 16 felt they knew more about their rights, 14 felt more confident since receiving support, 16 felt more included in decisions, and 17 felt their views were fully considered and their rights represented. All of the young people young providing feedback this year stated they would use the service again.

Whilst explaining why they felt the service was helpful, one young person said:

"Tony found out the answer of something I could not answer."

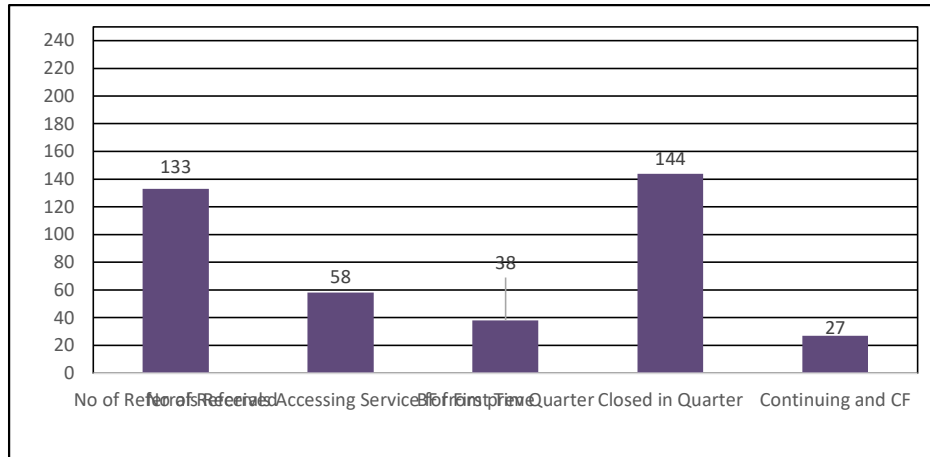
When explaining why they felt more confident about things since having advocacy support, one young person said:

"I now feel I can talk without being judged and looked at different with my opinions"

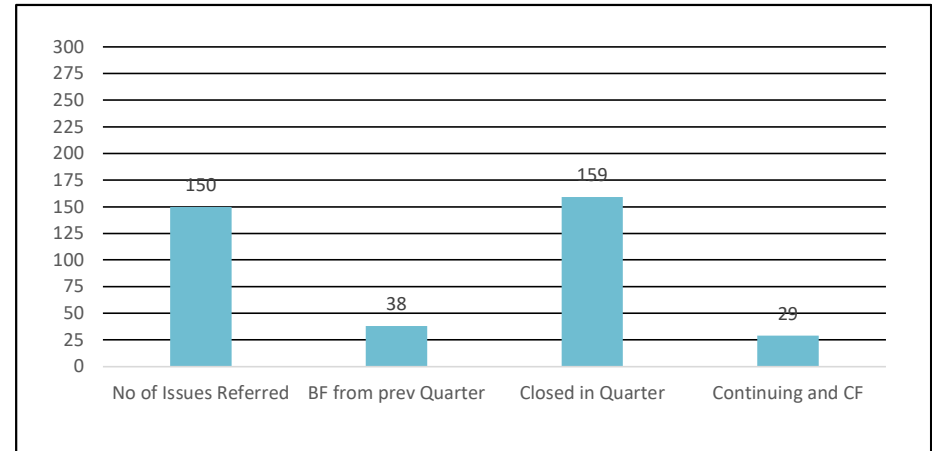
Whilst explaining why they felt the service made them feel more included in decisions, and led to them knowing more about their rights, one young person said:

"I feel I have more options in life and I feel that I can have my own say"
"I know more about the fact that I have my own choices and my own voice"

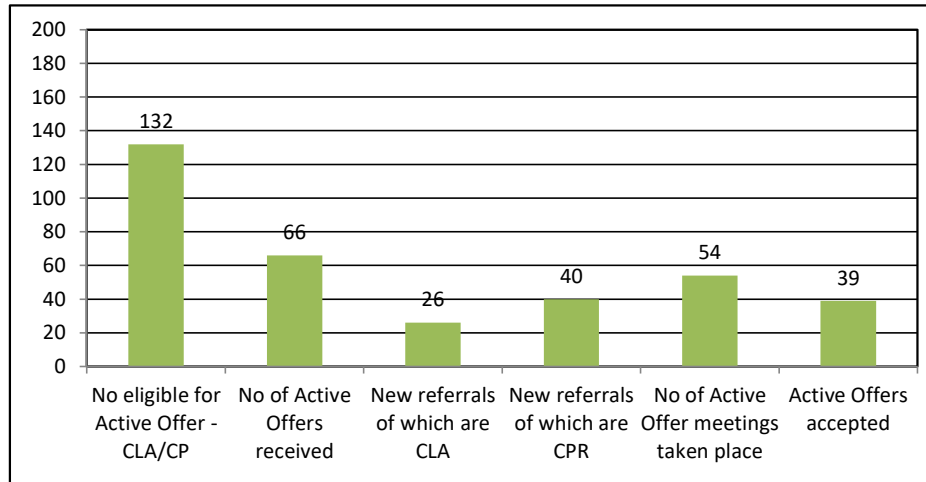
1a. Advocacy Cases - Young People - Issue Based Advocacy



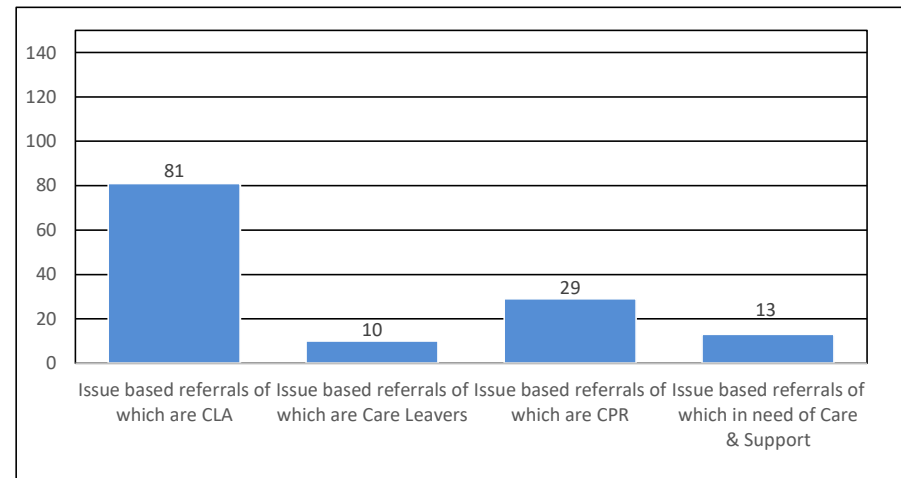
1b. Advocacy Cases - Interventions - Issue Based Advocacy



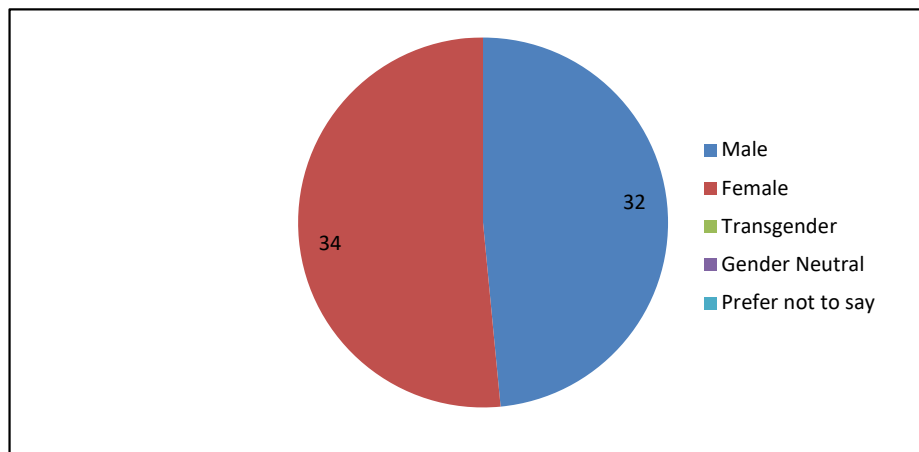
2a. Eligibility Criteria: Active Offer



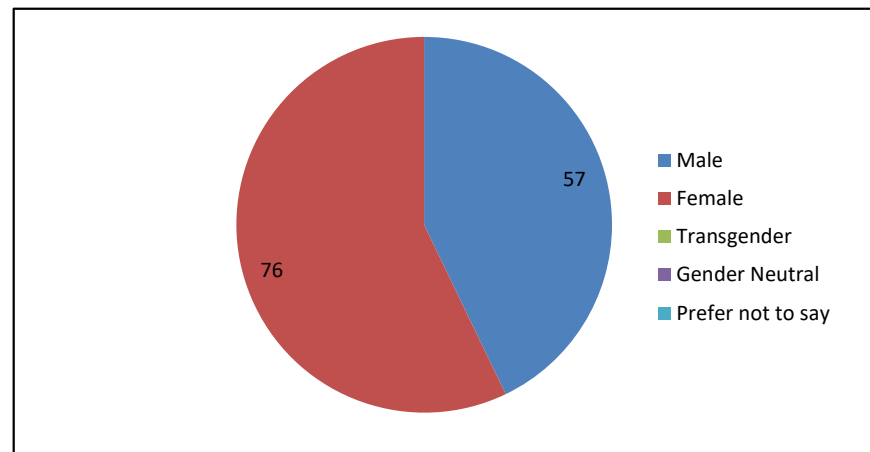
2b. Eligibility Criteria: Issue Based



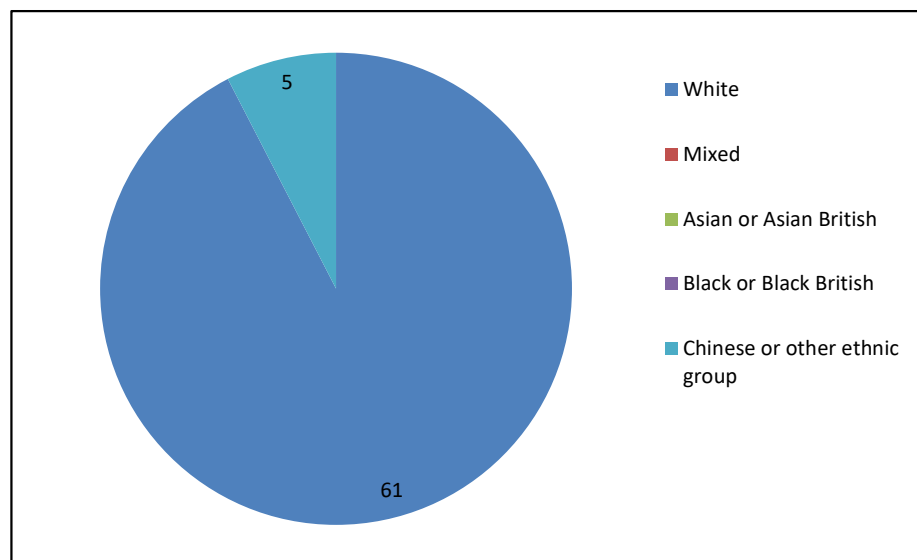
3a. Demographics: Gender - Active Offer



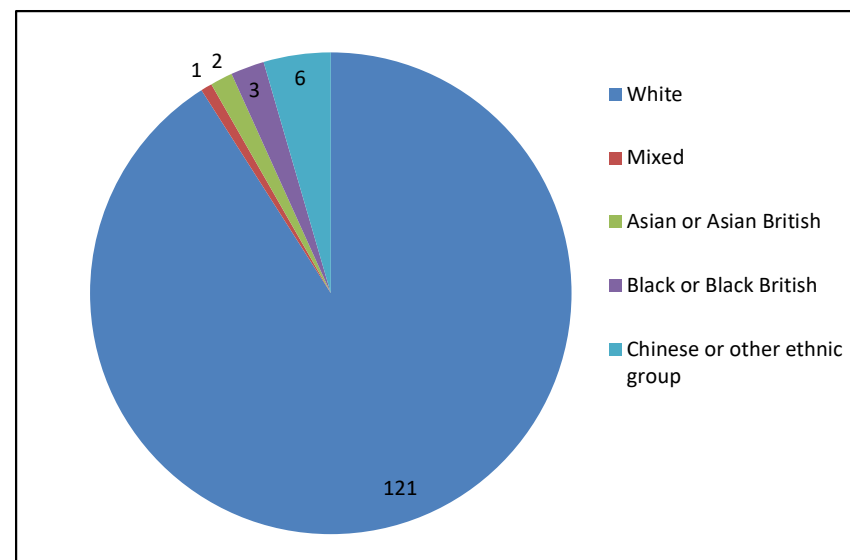
3b. Demographics: Gender - Issue Based

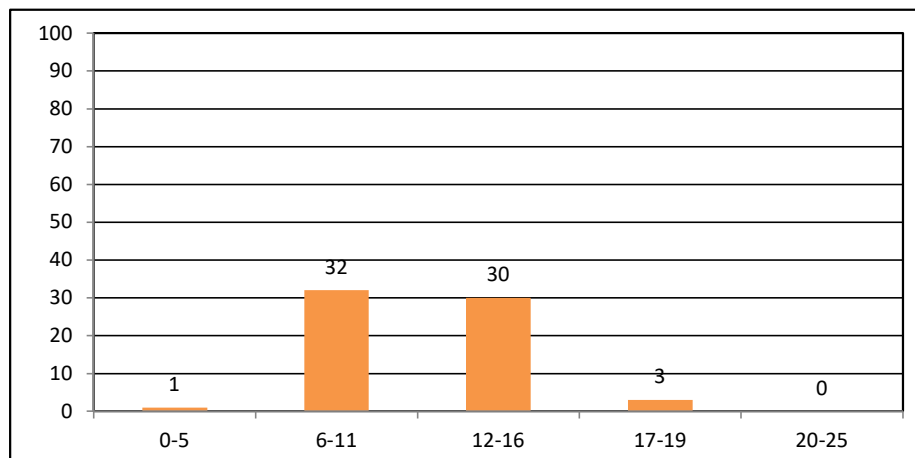
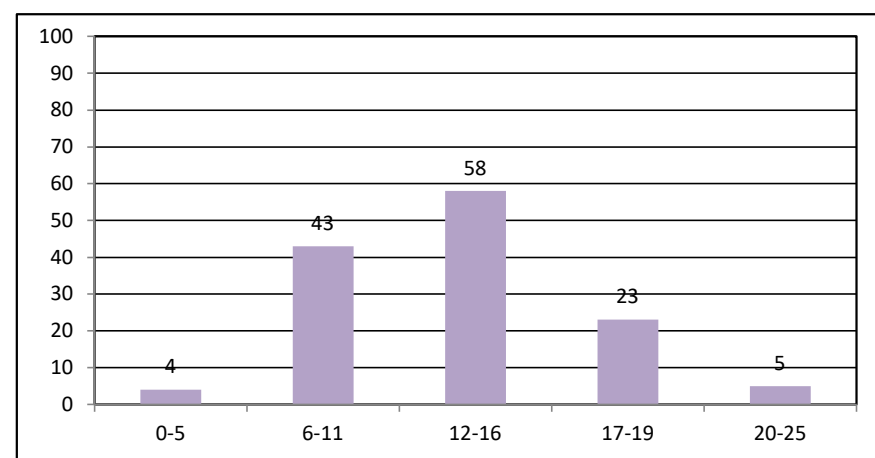
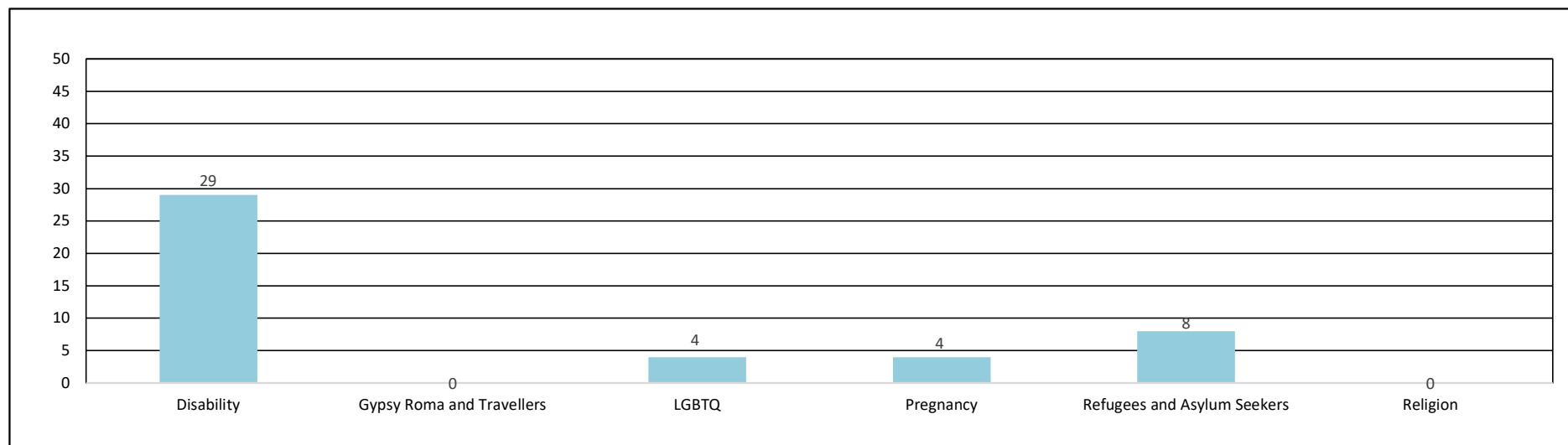


3c. Demographics: Ethnicity - Active Offer

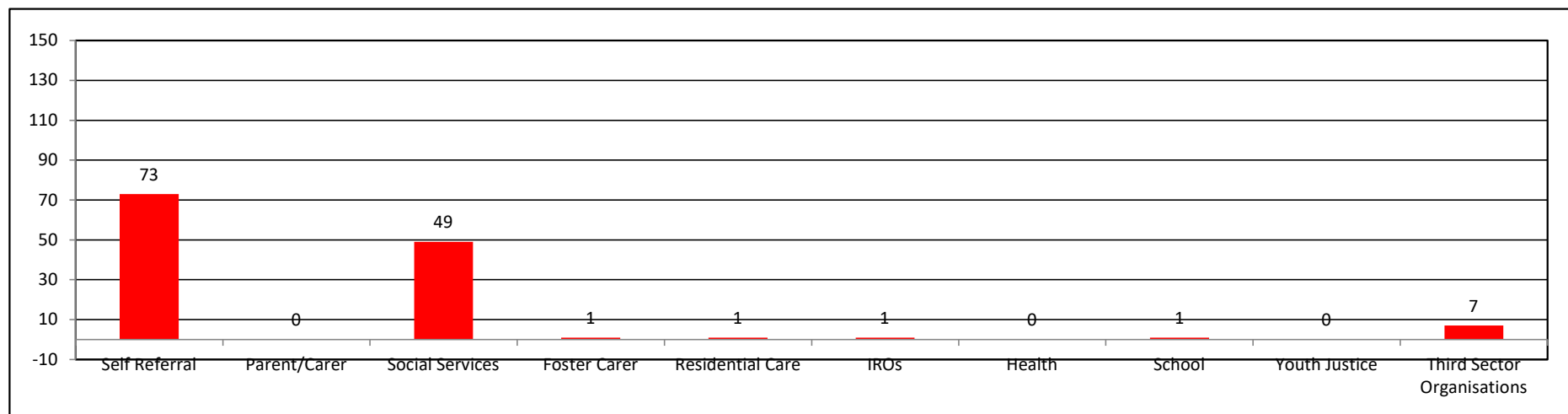


3d. Demographics: Ethnicity - Issue Based

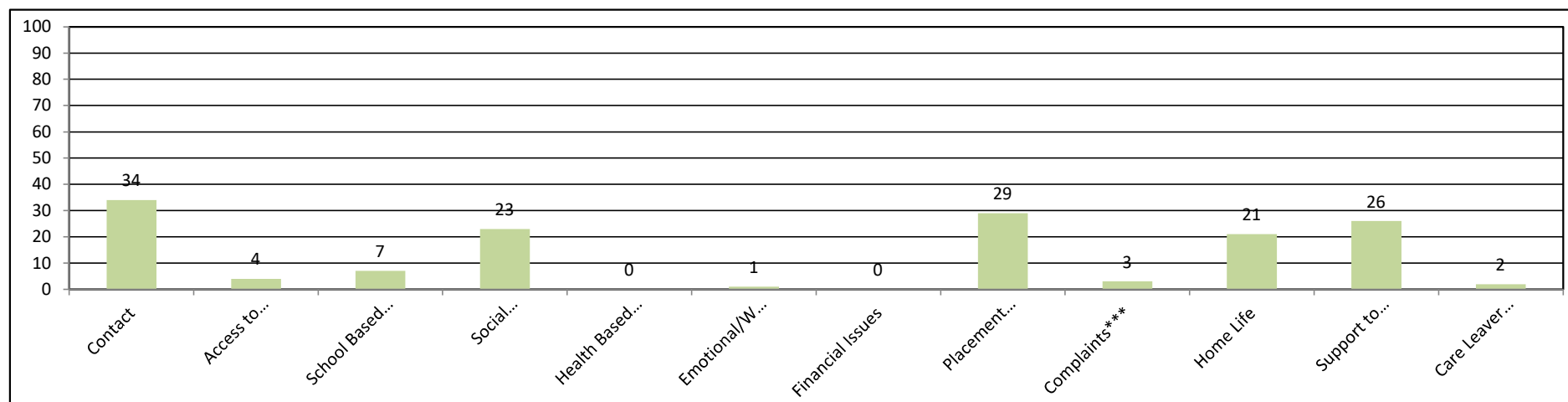


3e. Demographics: Age - Active Offer**3f. Demographics: Age - Issue Based****4. Protected Characteristics**

5. Referral Source per young person - Issue Based only



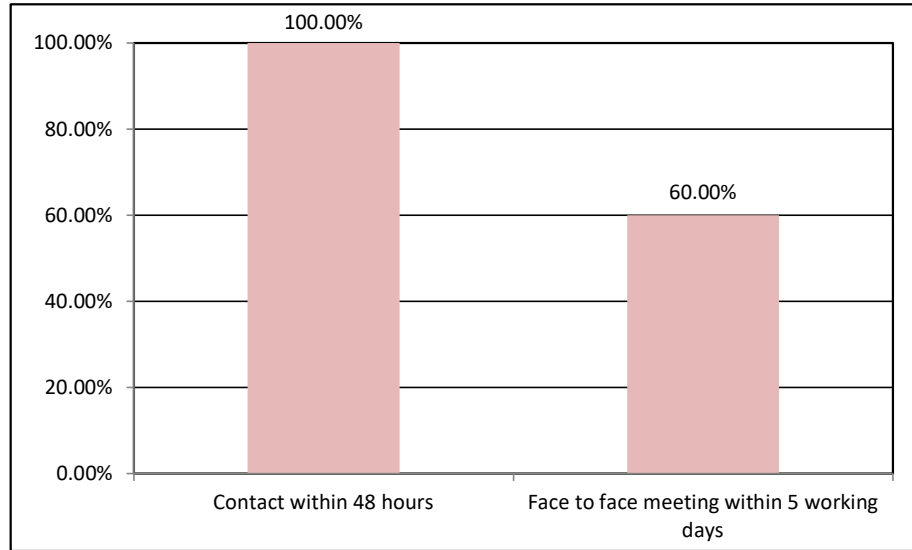
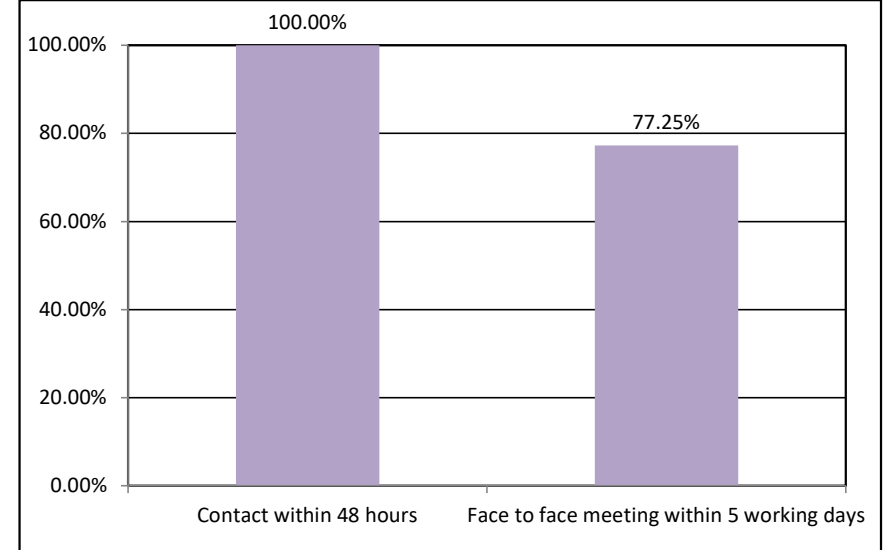
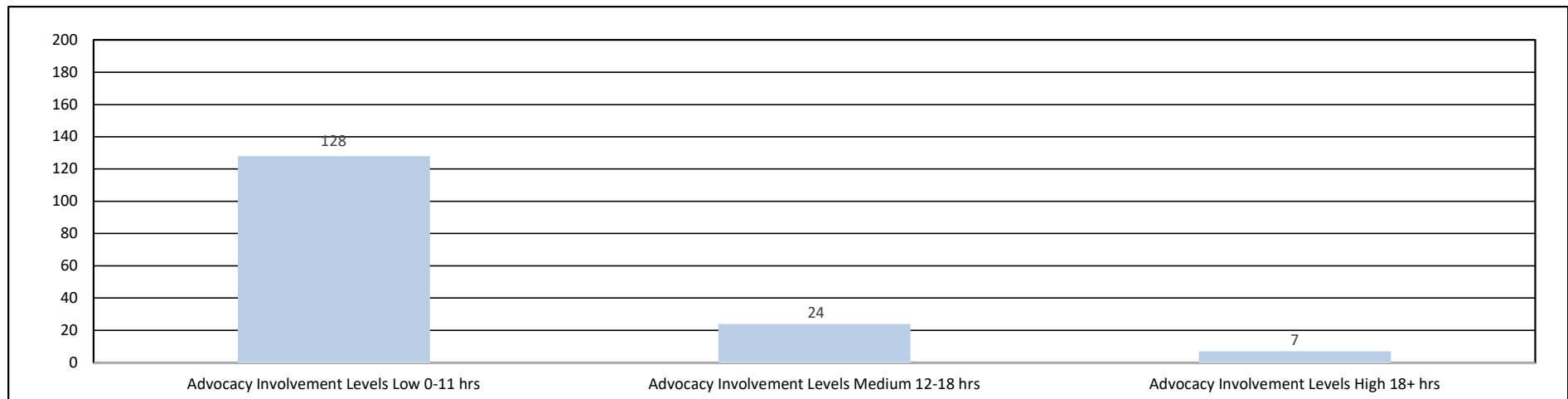
6. Issues Presented



* School based issues including: SEN/ALN, exclusions, bullying, transport.

** Social Services based issues including: relationship with worker, care plan, service provided.

*** Complaints refer to any complaints made against statutory services, including Social Service, Police, Health, YJS

7. Service Performance - Active Offer**Service Performance - Issue Based****8. Level of Advocacy Intervention at point of Issue Closure**

9.Outcomes: linked to The National Advocacy Standards & Outcomes Framework

| | | Comments |
|------------------|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outcome 1 | Children and young people find good quality independent advocacy easily available and accessible. | <p>This year, across the two service areas 69% of young people had contact with their advocate within five working days of referral.</p> <p>Advocates continue to support young people placed out of county, both virtually and in person if requested. Most young people live in neighbouring authorities, but we have also received referrals for young people living in London, Pembrokeshire, Monmouthshire and Newport among others this year.</p> <p>During the initial visit with a young person, the allocated advocate shares an advocacy pack with the young person. The pack includes lots of information about advocacy, our service and other support services available in Cwm Taf. The advocate is then able to use the pack as a resource to introduce some of the key concepts such as advocacy and Children's Rights, directly with the child or young person. The young person is then able to keep the pack and have access to this information, even if they choose not to continue with advocacy support. If the referred young person chooses not to meet with an advocate, they will still receive the pack by post and have the choice to request an advocacy visit later.</p> <p>As detailed above, consultations have now been shared with both young people and staff in Bridgend community homes. Information from the consultations will allow us to review and evaluate the service and inform any necessary changes.</p> |
| Outcome 2 | Children and young people have their privacy and confidences respected and their wellbeing safeguarded and protected. | <p>Direct work with young people continues to take place during face-to-face visits, although occasionally advocates will contact young people over the phone. This sometimes happens following a request from a young person, or it might be offered if a visit cannot be arranged before a specific meeting. The advocate will always offer a follow up face-to-face visit in this situation.</p> <p>We ask the referrer to tell us where the young person would like to meet the advocate at the point of referral, and the advocate will always attempt to visit the young person at a place they have specified. This is usually in their home or at school, and advocates report many young people find it easier to share how they feel about their home life while at school, where privacy and confidentiality is often easier to maintain. We ask referrers to inform parents and carers if young people request a visit at school to avoid potential delays in arranging visits.</p> <p>During quarter four, an advocate met one young person in a coffee shop as she lived in temporary accommodation and was not allowed to have visitors at home.</p> <p>One Bridgend safeguarding referral was made in quarter three. No formal feedback has been received but the advocate is still in contact with the young person.</p> |

| | | |
|-----------|--------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outcome 3 | Children and young people are valued for their diversity, treated with respect and all forms of discrimination against them are challenged. | <p>During this year, we have provided IBA to young people with a wide range of disabilities and communication needs. These included ADHD, ASD, Cerebral Palsy, Global Development Delay, Dyspraxia and a Brain Tumour.</p> <p>When young people have an additional learning need or disability that potentially affects communication, advocates always take advice from their social worker and others who know them best to communicate as effectively as possible. It is important to note that young people accessing the mainstream advocacy service must have some understanding of the role and function of advocacy, meaning they will be able to have control over the information they share and understand the possible outcomes.</p> <p>IPA's have supported unaccompanied asylum-seeking young people with 13 issues during this year. They have accessed IBA in the language of their choice via interpreter services. The languages are Arabic, Kurdish and Sudanese.</p> <p>Pregnant young people, and young people identifying as LGBTQ have also accessed IBA in Bridgend this year.</p> |
| Outcome 4 | Children and young people are empowered to take the lead in relation to advocacy services and their rights, wishes and feelings and championed. | <p>Young people consistently tell us they feel empowered to speak up for themselves following advocacy intervention and advocates always encourage young people to speak for themselves when they feel able to do so. This is echoed in young people's feedback, with almost 80% of young people providing feedback saying they felt more confident following advocacy support.</p> <p>We have continued to note an increase in young people attending virtual and face to face meetings with the support of their advocate. In most cases, the advocate and the young person prepare for the meeting beforehand, and the advocate then reads out the wishes and feelings at the meeting. As highlighted in the feedback section above, when young people have a positive experience following an advocacy intervention, they often gain confidence and will continue to share their feelings, and challenge decisions they are unhappy about, with or without the support of their advocate.</p> <p>During quarter two, an advocate supported a young person to co-chair his own CLA Review. This was something the young person requested and found to be a very rewarding experience.</p> <p>During quarter four, another young person was supported to attend a CP conference for her unborn child. She had initially told her advocate that she didn't want to talk at all, mainly because she was nervous about the questions she would be asked. After some encouragement and preparation with her advocate before the meeting, she felt she would be able to ask questions if needed, providing her advocate agreed to step in if she appeared uncomfortable. The advocate shared her views, wishes and feelings report, but the young person spoke for herself for the remainder of the meeting, and was able to ask some questions herself as well as answer questions from professionals.</p> |

| | | |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Outcome 5 | <p>Children and young people participate in the design, planning, delivery, monitoring and evaluation of advocacy services.</p> | <p>The CTM Advocacy Service Participation Lead will continue to be responsible for keeping up to date with participation and consultation opportunities within Cwm Taf Morgannwg.</p> <p>All young people receiving advocacy support will continue to be offered the opportunity to feedback to TGP Cymru to allow us to monitor the services provided and make improvements where needed. We will continue to make changes to our feedback process to ensure young people experience no barriers in expressing their views about the service they have received.</p> <p>As detailed above, the Residential Visiting Advocate, with the support of the Senior Advocate has begun consulting with young people living in local authority community homes to capture their thoughts about visiting advocacy. Consultations have been shared with both young people and staff in Bridgend community homes and will allow us to review and evaluate the service and inform any necessary changes.</p> |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| | |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Meeting of: | CABINET COMMITTEE CORPORATE PARENTING |
| Date of Meeting: | 29 OCTOBER 2025 |
| Report Title: | CARE INSPECTORATE WALES (CIW) IMPROVEMENT CHECK OF CHILDREN AND FAMILY SERVICES JUNE 2025 |
| Report Owner: Responsible Chief Officer / Cabinet Member | CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING |
| Responsible Officer: | LAURA KINSEY HEAD OF CHILDREN AND FAMILY SERVICES |
| Policy Framework and Procedure Rules: | There is no effect upon the policy framework and procedure rules. |
| Executive Summary: | <p>This report describes the findings of a Care Inspectorate Wales (CIW) Improvement Check (IC) visit to Bridgend County Borough Council (BCBC) children and family services in June 2025. The improvement check focused on understanding how well the Council has progressed recommendations for improvement set out in a Performance Evaluation Inspection and Improvement Check undertaken in May and December 2022 and a CIW led Joint Inspection of Child Protection Arrangements (JICPA) undertaken in June 2023.</p> <p>The IC found that BCBC leaders have consistently prioritised children and family services, to support sustained and timely improvements. This, in turn, has significantly strengthened the quality and delivery of our social services functions.</p> |

1. Purpose of Report

- 1.1 The purpose of this report is to present to the Cabinet Committee – Corporate Parenting the Care Inspectorate Wales (CIW) Improvement Check (IC) findings report and to request that the Cabinet Committee considers the report and approves the associated Action Plan.

- 1.2 The report was present to the Social Services, Health and Wellbeing Overview and Scrutiny Committee on 25th September 2025 and was well received and the service is currently awaiting feedback from the Committee.

2. Background

- 2.1 CIW carry out inspection activity in accordance with the Social Services and Well-being (Wales) Act 2014 and the quality standards in the *Code of Practice in relation to the performance and improvement of social services in Wales*. This helps them determine the effectiveness of local authorities in supporting, measuring and sustaining improvements for people.
- 2.2 Further to a Performance Evaluation Inspection in May 2022 Care Inspectorate Wales (CIW) completed an Improvement Check in December 2022 and noted the *'local authority must continue to assure itself of the priority status, pace, quality, delivery, and impact of its improvement activity'*.
- 2.3 In June 2023 CIW and partner inspectorates carried out a Joint Inspection of Child Protection Arrangements (JICPA) in Bridgend. They found leaders and partners had a shared vision and positive approach to safeguarding. The local authority and partners had taken action to instigate learning following critical incidents, there were ambitious plans to drive forward improvements, and it was important to manage these changes with careful oversight. It was a relatively early stage in the Council's improvement journey and whilst there were indication positive changes were being progressed further work was needed to stabilize the workforce and embed a model of practice that would sustainably improve outcomes for children and families.
- 2.4 The most recent IC carried out in June 2025 focused on progress made in the areas for improvement, which were identified during the inspection activities of 2022 and 2023.
- 2.5 The scope of the inspection included:
- The experiences of people at the time of the improvement check.
 - The outcomes people achieve through their contact with social services
 - Evidence of improvements made following inspections in 2022/2023 and plans for service development and improvement
- 2.6 In advance of the inspection, a range of information/documentation was submitted including:
- Strategy and Structure
 - Key Documents and Operational Protocols
 - Cabinet/Committee Reports
 - Development Work

- Performance Data and Quality Assurance
- Workforce and Supervision information

- 2.7 The inspection team reviewed the experiences of people's journey through care and support through review and tracking of their social care record. The team reviewed 25 cases, with more detailed case tracking of 3 of these cases. This included a conversation with the person receiving support and/or their family, carers, advocates, or key workers afterwards interviewing the allocated case worker and their manager.
- 2.8 In addition CIW also sought the views of staff and stakeholders through focus groups and by using a range of surveys to gather information to inform the inspection. The latter included public surveys.
- 2.9 Other activities included observations of meetings and reviews of complaints and compliments.

3. Current situation/ proposal

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

3.2 Summary of findings

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

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

| | | |
|--------------|-------------------------------------------------------------------------------------------|-----------------------------------------------------|
| Partnerships | Thresholds for early help and statutory services | Improvements made and must be sustained |
| Partnerships | Learning from reviews and audits | Improvements made and must be sustained |
| Wellbeing | Compliance with statutory responsibilities | Improvements made and must be sustained |
| Wellbeing | Arrangements for supervised contact between children and their families | Improvements made and must be sustained |
| Wellbeing | Identification and response to child exploitation | Some improvements made – further action is required |
| Wellbeing | Ensuring priority status, pace, quality, delivery, and impact of its improvement activity | Improvements made and must be sustained |

3.3 Recommendations and Next Steps

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

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

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

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

- 5.1 The Well-being of Future Generations (Wales) Act 2015 provides the basis for driving a different kind of public service in Wales, with five ways of working to guide how the Authority should work to deliver wellbeing outcomes for people. The following is a

summary to show how the five ways of working to achieve the well-being goals have been considered in this report:

- Long Term – Social Services is demand led and the Social Services and Well-being (Wales) Act 2014 (SSWBA) focusses on sustainable prevention and well-being outcomes for the future. There is a requirement to meet the needs of people in the longer term and, because of rising demographics and increasing complexity, the remodelling and transformation of services continues to be a priority.
- Prevention – one of the four themes within the CIW inspection is Prevention. CIW have identified areas of strength for Prevention in their report. The areas for improvement are also included, and actions for improvement have been addressed within the Action Plan at **Appendix 2**.
- Integration – one of the four themes within the CIW inspection is Partnerships and Integration. CIW have identified areas of strength for Integration and Partnerships in their report. The areas for improvement are also included, and actions for improvement have been addressed within the Action Plan at **Appendix 2**. The SSWBA requires local authorities to work with partners, particularly the NHS and the Police, to ensure care and support for people and support for carers is provided. The report refers to work with statutory partners.
 - Collaboration – The collaborative approaches described in the report are managed and monitored through various strategic and collaborative boards across Directorates and with partners
 - Involvement – the key stakeholders are the people who use social care. There is considerable engagement including surveys, stakeholder meetings, feedback forms and the complaints process. The provision of accessible information and advice helps to ensure that the voice of adults, children and young people is heard.

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

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

6. Climate Change and Nature Implications

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

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

7. Safeguarding and Corporate Parent Implications

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

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

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

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

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

8. Financial Implications

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

9. Recommendation

- 9.1 It is recommended that the Cabinet Committee – Corporate Parenting considers the CIW findings report and approves the Action Plan.

Background documents

None

This page is intentionally left blank

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

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

Dyddiad / Date: 04/09/2025

Dear Director,

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

1. Introduction

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

| Principle | Areas of improvement identified in 2022-23 | Progress identified at this Improvement Check |
|------------------|------------------------------------------------------------------------------------------------------------|------------------------------------------------------|
| People | Seeking, hearing and recording the voice of the child | Improvements made and must be sustained |
| People | People consistently feel listened to and treated with dignity and respect | Some improvements made – further action is required |
| People | Workforce recruitment and retention | Improvements made and must be sustained |
| People | Recording demographics and associates | Improvements made and must be sustained |
| People | Management oversight | Improvements made and must be sustained |
| People | Staff support, supervision, and training | Improvements made and must be sustained |
| Prevention | Provision of information, advice, and assistance (IAA). People receive the right support at the right time | Some improvements made – further action is required |
| Prevention | Placement sufficiency | Some improvements made – further action is required |
| Partnerships | Thresholds for early help and statutory services | Improvements made and must be sustained |
| Partnerships | Learning from reviews and audits | Improvements made and must be sustained |
| Well-being | Compliance with statutory responsibilities | Improvements made and must be sustained |
| Well-being | Arrangements for supervised contact between children and their families | Improvements made and must be sustained |
| Well-being | Identification and response to child exploitation | Some improvements made – further action is required |
| Well-being | Ensuring priority status, pace, quality, delivery, and impact of its improvement activity | Improvements made and must be sustained |

2. Glossary of Terminology and Quantity Definitions

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

3. Summary of Improvement Check Findings

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

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

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

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

4. Key Findings and Evidence

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

People - We asked:

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

Strengths

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

² What Is Signs of Safety? - Signs of Safety

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

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

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

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

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

Areas for improvement

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

Prevention - We asked:

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

Strengths

- 4.9 The IAA team is responsible for receiving contacts and referrals, providing advice and assistance, assessing needs, and undertaking safeguarding enquiries. The MASH acts as the single point of contact for all new safeguarding concerns and brings together staff from BCBC, education, police, and health services. IAA and MASH work closely together, with a shared focus on improving access and pathways to support. **The partnership working and collaboration of agencies in the MASH is positive practice.**
- 4.10 In 2023–24, leaders developed their 3-year strategic plan for C&F services, entitled 'Think Family'. This committed the Council to introducing new arrangements for an integrated IAA, early help, locality social work, locality early intervention and edge of care services. A commissioning strategy was

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

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

Areas for improvement

- 4.12 The local authority works closely with an improvement partner to review service outcomes and areas for development. This process highlighted the need for family support to streamline systems, develop more intensive targeted support, and reform parenting support. There are some vacancies in key posts and gaps in service sufficiency, including services for adolescents, mental health, emotional well-being, neurodiversity, and vacancies for specialist exploitation workers and the integrated family support service. These gaps have led to some delays in people receiving timely support, and we identified examples where contingency planning for ending support could be improved. **Recruitment is underway, and leaders should continue to develop services in line with their Family Support Commissioning Strategy. The local authority should also review its communication strategy to ensure staff and partners are clear about available services and referral pathways.**
- 4.13 Leaders are working through local and national challenges, to develop placement sufficiency for supported accommodation and regulated services. A Children, Young Person and Transition Commissioning Strategy 2023-2028 outlines plans for improvement, but there remains a projected gap in sufficiency beyond 2028. The general shortage of foster carers and the specific shortage of skilled foster carers and residential care homes who can care for children with the greatest needs, are of particular concern. **Leaders should continue to implement plans in the local authority commissioning strategy, to support timely improvements.**

- 4.14 Whilst placements Operating without Registration (OWR) are only used in exceptional circumstances, and their use is reducing, there are a small number of children who are placed in services providing care and support that are not registered as required by law. **The local authority must ensure children are not placed in unregistered services and must continue its efforts to identify suitable, registered placements.**
- 4.15 Placement sufficiency in foster care is partly dependent on the support for carers and the local authority approach to retention. Leaders have plans to improve approaches with matching, training, and placement support. The fostering service and Care Experienced Children Team (CECT) have recently appointed permanent managers, and practitioners report improved practice and morale. Whilst the fostering service and CECT are increasingly working together to strengthen placement stability, foster carers report mixed views about the impact and sustainability of these changes. **Leaders should ensure the fostering service and CECT retain priority focus, to ensure improvements are made in a timely way.**

Well-being – We asked:

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

Strengths

- 4.16 The local authority responds to safeguarding enquiries in a timely way and responds to referrers as required in the WSP. Partners are consistently invited and contribute to the safeguarding process. Nearly all children receive visits in line with the requirements of the WSP, and child protection conferences and CEC Reviews are timely. The local authority has addressed improvements required from the JICPA and ensures minutes and plans are shared following these meetings. Core groups would be strengthened further if meetings were consistently in person and with improved focus on developing the outline plan from conference.
- 4.17 Practitioners mostly identify and make the active offer of advocacy. It is positive the offer of formal advocacy is expanding, and parental advocacy is now considered alongside advocacy for children. We saw examples of Independent Reviewing Officers (IRO) checking and ensuring children were provided with the active offer. Despite this, the uptake of advocacy is somewhat lower than expected and leaders are working with practitioners to better understand this issue. We identified examples where the offer of parental advocacy would have been appropriate and was not considered. However, informal advocacy is

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

- 4.18 The local authority has developed a central contact team who support supervised contact for CEC and children subject to the Public Law Outline (PLO) process. This dedicated resource is significantly improving the timeliness and quality of contact, whilst creating capacity for practitioners to focus on care and support planning.
- 4.19 Leaders have developed an effective Assuring Quality and Learning Framework to systemically monitor and evaluate practice. This aims to support learning and development, improved practice, and the best possible outcomes for people. An essential element of the framework is to promote critical thinking and professional curiosity through meaningful feedback from practitioners, partners, and people with lived experience. For example, staff complete appreciative enquiries⁴, and leaders have recently adopted the Most Significant Change⁵ method to hear people's stories and develop an understanding of how and when change happens for people. **This positive practice is rolling out across all teams and leaders should continue to support this advanced approach to learning and quality assurance.**

Areas for improvement

- 4.20 Leaders are aware of increasing concerns regarding the exploitation of children and the impact of online harm. A regional strategy was co-produced with people and partners in April 2025. Regional practice guidance, training, prevention panels, and tools were created for implementation. A local multi-agency plan has clear actions and a governance structure to oversee improvements. This includes exploitation training for the workforce and multi-agency partners. The local authority has invested in 3 specialist posts, which will strengthen the strategic and operational response to these concerns. This is a significant improvement following the JICPA 2023, and these developments are beginning to strengthen practice and management oversight. However, the strategy is not yet fully embedded, and there remains inconsistencies in how exploitation is identified across agencies. **Leaders should continue to embed consistent approaches to safeguarding children from exploitation. This should include continuing to explore opportunities for multi-agency training, reflection, and shared learning.**
- 4.21 Whilst the local authority generally records demographics and associates, we found case recordings were not always completed in a timely or consistent manner. Records should be accurate, objective, understandable, complete, and up-to-date. They should fully reflect and respect the views of the person

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

⁵ Deep handbook Eng.pdf

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

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

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

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

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

Partnership - We asked:

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

Strengths

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

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

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

- 4.27 Effective and mature partnership arrangements between agencies are supporting a coordinated multi-agency response to safeguarding concerns.
There is a positive focus on safeguarding across the local authority. A culture of safeguarding is promoted as everyone's collective responsibility.
- 4.28 Leaders have responded to areas for improvement identified through inspection activities. The initial response prioritised improvements required with workforce stability and safeguarding arrangements. Subsequent priorities included improvements to early help and prevention, fostering services, and contact arrangements. The local authority has also worked with partners to embed SoS and strengthen commissioned arrangements. Whilst some improvements are more established than others, leaders have retained focus on priorities and sought to maintain and sustain progress. **There has been a positive approach to change management.**
- 4.29 The local authority and multi-agency partners have developed an improved understanding of threshold for referrals into the MASH. MASH have developed a professionals advice line for discussions about safeguarding concerns.
Partners told us the professional advice line has had a positive impact. This is positive practice.
- 4.30 Operational partners work well together and there is confidence in decision making for safeguarding. This is supported by effective systems for escalation and a healthy culture of professional challenge. For example, fortnightly MASH interface meetings and a Joint Operational Group (JOG) provide opportunity for multi-agency reflection and constructive challenge. **This is positive practice and leaders should continue to strengthen these arrangements.**

Areas for improvement

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

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

- 4.33 Partners identified some inconsistent practice in relation to exploitation, professional concerns, and the operational response to the Children (Abolition of Defence of Reasonable Punishment) (Wales) Act 2020. **Leaders should continue to work with partners and seek feedback on these specific areas of practice, to ensure improvements are made in a timely way.**
- 4.34 Some partners would welcome further multi-agency training in respect of SoS, exploitation, thresholds, and safeguarding. **Leaders should continue to work with partners to develop an agreed approach to multi-agency training and practice.**
- 4.35 The Cwm Taf Morgannwg Emergency Duty Team (EDT) covers Bridgend, Merthyr Tydfil, and Rhondda Cynon Taf (RCT). The service must provide help in a crisis to vulnerable adults, children in need and their families. Partners and practitioners reported challenges with staff sufficiency, record keeping, and practice. **Leaders should work with regional partners to review these arrangements and promote improvements in a timely way.**

5. Next Steps

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

6. Methodology

Fieldwork

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

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

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

7. Welsh Language

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

8. Acknowledgements

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

Yours sincerely,



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

Appendix 1

Glossary of Terminology

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

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

Appendix 2

Quantity Definitions Table

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

This page is intentionally left blank



Children's Social Care

June 2025 – Care Inspectorate Wales – Improvement Check

ACTION PLAN


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

PRINCIPLE 2 – PREVENTION (Pr)

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

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

PRINCIPLE 3 – Wellbeing (W)

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

PRINCIPLE 3 – Wellbeing (W)

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

PRINCIPLE 3 – Wellbeing (W)

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

PRINCIPLE 4 – Partnerships (Pa)

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

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

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

| | |
|--|----------------------------------------------------------|
| | Action Not On Track, Not Yet Meeting Performance Targets |
|--|----------------------------------------------------------|

| | |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Meeting of: | CABINET COMMITTEE CORPORATE PARENTING |
| Date of Meeting: | 29 OCTOBER 2025 |
| Report Title: | CARE INSPECTORATE WALES (CIW) FOSTERING SERVICE INSPECTION JUNE 2025 |
| Report Owner: Responsible Chief Officer / Cabinet Member | CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING |
| Responsible Officer: | DAN BOLTON GROUP MANAGER – PROVIDER SERVICES |
| Policy Framework and Procedure Rules: | There is no effect upon the policy framework and procedure rules. |
| Executive Summary: | <p>This report presents the findings of the Care Inspectorate Wales (CIW) inspection of Bridgend County Borough Council's fostering service, which took place in June 2025. The inspection followed a previous inspection in November 2023, where eight areas were identified as requiring significant improvement.</p> <p>CIW found that progress has been made in all areas with some requiring further improvement. Particular strengths related to safeguarding, oversight, and the support provided to prospective carers. The service has benefited from recent leadership stability and a clear strategic focus on improving outcomes for children.</p> <p>However, three areas continue to require further improvement: the robustness of matching processes, consistency in the review and monitoring of foster carers, and the quality and delivery of carer training.</p> <p>CIW did not issue any Priority Action Notices which reflects that some improvements had been made across all areas. The Authority has already taken steps to address these areas as part of a wider service remodelling programme. An improvement plan is in place and will be monitored through the Council's governance mechanisms including the</p> |

| | |
|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | regulatory tracker which is reported to the Governance and Audit Committee and robust scrutiny at regular intervals to be determined by the Committee. |
|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------|

1. Purpose of Report

- 1.1 The purpose of this report is to present to Cabinet Committee - Corporate Parenting the Care Inspectorate Wales (CIW) inspection report following the inspection of Bridgend County Borough Council's (BCBC) fostering service in June 2025, and to request approval of the associated action plan.
- 1.2 The report was presented to the Social Services, Health and Wellbeing Overview and Scrutiny Committee on 25th September 2025 and was well received and the service is currently awaiting feedback from the Committee.

2. Background

- 2.1 CIW undertook an inspection of BCBC's fostering service between 23rd to 27th June 2025. The inspection follows a previous visit in November 2023, where whilst good practice was evidenced eight areas were identified as requiring significant improvement.
- 2.2 The fostering service comprises a general fostering team and a kinship and permanence team. The service recruits, assesses, supervises and supports foster carers (including connected persons) to provide safe, nurturing placements for children.
- 2.3 The inspection focused on the following themes:
 - Well-being
 - Care and Support
 - Environment
 - Leadership and Management
- 2.4 The inspection included case tracking, staff and carer focus groups, observation of practice, and review of documentation, complaints, compliments, and surveys.
- 2.5 CIW found that progress had been made in five of the eight areas previously identified as requiring improvement and needs to be sustained, including safeguarding, governance, and training and information provided to prospective carers.
- 2.6 CIW noted that recent management stability over the previous 6 months brought more consistency and clear strategic commitment to service improvement.

3. Current situation/ proposal

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

3.2 Summary of findings

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

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

3.3 Recommendations and Next Steps

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

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

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

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

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

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

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

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

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

6. Climate Change and Nature Implications

- 6.1 There are no direct climate or nature change implications associated with the report and associated action plan at this stage.
- 6.2 The importance of decarbonisation to help protect and sustain the environment over the long term and in line with our climate change ambitions will be considered and promoted as and when strategies identified within the action plan are implemented.

7. Safeguarding and Corporate Parent Implications

- 7.1 This inspection relates directly to the Council's responsibilities for safeguarding and corporate parenting within its local authority fostering service.
- 7.2 The CIW report acknowledges that safeguarding arrangements within the fostering service have improved, with stronger links between the fostering and safeguarding teams. Staff are included in safeguarding meetings, and the use of individualised safer care plans and safety agreements has been strengthened. Improvements in leadership and governance have also contributed to more effective oversight of safeguarding practice.
- 7.3 However, the inspection also identified areas where further improvement is needed to fully safeguard children — notably in relation to matching processes, consistency of carer reviews, and the availability and impact of training. Addressing these areas is key to ensuring children live in placements where their needs are fully understood and met.
- 7.4 The Council, as corporate parent, must ensure children in foster care are not only safe but are supported to thrive. The improvement plan addresses these expectations by embedding trauma-informed practice, strengthening carer support, and promoting placement stability. This reflects the Council's ongoing commitment to its corporate parenting duties and to improving the experience and outcomes for looked after children.

8. Financial Implications

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

9. Recommendation

- 9.1 It is recommended that the Cabinet Committee – Corporate Parenting considers the CIW findings report and approves the associated Action Plan.

Background documents

None



Foster Wales Bridgend



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



01656642336

Date of inspection visits:

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

Service Information:

| | |
|------------------------------------------|---------------------------------------------------------------------------------------------------------|
| Operated by: | Bridgend County Borough Council Adults and Children's Services |
| Care Type: | LA Fostering Service |
| Main language(s): | English |
| Promotion of Welsh language and culture: | The service provider anticipates, identifies, and meets the Welsh language and culture needs of people. |

Themes:



Well-being



Care & Support



Environment



Leadership & Management

Summary:

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

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

Findings:



Well-being

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

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

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

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



Care & Support

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

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

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

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

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

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

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

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



Environment

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

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

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



Leadership & Management

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

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

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

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

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

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

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

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

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

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

Areas identified for improvement

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

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

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

Welsh Government © Crown copyright 2025.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk You must reproduce our material accurately and not use it in a misleading context.

Children’s Social Care

June 2025 – Care Inspectorate Wales – Fostering Service Inspection

ACTION PLAN

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

Page 124

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

| | | | | | |
|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--|
| Page 129 | | | supports reflective practice and relationship-building. | | |
| Exemptions not always meet legislative criteria or have clearly recorded rationale | Implement a revised exemptions decision-making template and embed a monthly audit of all exemptions to ensure compliance with legal criteria and robust rationale | Group Manager/Team Managers | A revised exemption decision-making template will be implemented, and monthly audits will evidence that all exemptions meet legislative criteria and are supported by clear recorded rationale. | October 2025 | |

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

This page is intentionally left blank