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



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

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

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



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

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

Dyddiad/Date: Dydd Iau, 21 Mai 2026

Annwyl Cyngorydd,

PWYLLGOR Y CABINET DROS FATERION RHIENI 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 drwy Microsoft Teams ar **Dydd Iau, 28 Mai 2026 am 10:00**.

AGENDA

- Ymddiheuriadau am absenoldeb**
Derbyn ymddiheuriadau am absenoldeb gan Aelodau.
- 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.
- Cymeradwyaeth Cofnodion** 3 - 12
I dderbyn am gymeradwyaeth y Cofnodion cyfarfod y 29/10/2025
- Diweddariad Blynnyddol y Bwrdd Rhianta Corfforaethol 2024/25** 13 - 34
- Arolygiad Arolygiaeth Gofal Cymru (AGC) o Wasanaethau Rheoleiddiedig Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr (BCBC) mewn Gofal Cymdeithasol i Blant** 35 - 46

6 Adroddiad Arolygu Arolygiaeth Gofal Cymru (AGC) ar Wasanaeth Mabwysiadu Bae'r Gorllewin Tachwedd 2025

47 - 74

7 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

C Davies

P Davies

M J Evans

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

Presennol

Y Cynghorydd J Gebbie – Cadeirydd

E L P Caparros
GC Haines

P Davies
JC Spanswick

M J Evans

N Farr

Presennol yn Rhithwir

F D Bletsoe
AJ Williams

J E Pratt
E D Winstanley

T Thomas

A Wathan

Swyddogion:

Daniel Bolton
Mark Galvin
Raeanna Grainger
Mark Lewis
Claire Marchant
Oscar Roberts
David Wright

Rheolwr Grŵp, Gwasanaethau Darparwyr
Uwch Swyddog y Gwasanaethau Democrataidd – Pwyllgorau
Rheolwr Grŵp, MASH, IAA a Diogelu
Rheolwr Grŵp – Gweithio Integredig
Cyfarwyddwr Corfforaethol – y Gwasanaethau Cymdeithasol a Lles
Prentis Gweinyddu Busnes - y Gwasanaethau Democrataidd
Dirprwy Bennaeth Gwasanaethau Plant a Theuluoedd

75. Ymddiheuriadau am Absenoldeb

Y Penderfyniad Wnaed	Derbyniwyd ymddiheuriadau am absenoldeb oddi wrth y Cynghorwyr M Jones a H Williams
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

Datganiadau o Fuddiannau

Y Penderfyniad Wnaed	Ni dderbyniwyd datganiadau o fuddiannau.
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

77. Cymeradwyo Cofnodion

Y Penderfyniad Wnaed	<u>PENDERFYNWYD:</u> Cymeradwyo cofnodion cyfarfod Pwyllgor y Cabinet ar Rianta Corfforaethol dyddiedig 7 Mai 2025 fel cofnod gwir a chywir.
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

78. Adroddiad Blynyddol y Gwasanaeth Adolygu Annibynnol 2024-2025

Y Penderfyniad Wnaed	<p>Cyflwynodd y Dirprwy Arweinydd ac Aelod y Cabinet dros Wasanaethau Cymdeithasol, Iechyd a Lles adroddiad oedd yn disgrifio'r gwaith a wnaed gan y Gwasanaeth Adolygu Annibynnol rhwng Ebrill 2024 a Mawrth 2025.</p> <p>Mae'r adroddiadau'n egluro'r fframwaith deddfwriaethol sy'n llywodraethu'r gwaith a wneir gan y Gwasanaeth Adolygu Annibynnol. Yn bennaf, rôl y Swyddog Adolygu Annibynnol (SAA) oedd sicrhau bod cynllun gofal y plentyn yn addas ac yn ateb ei anghenion datblygol, ei fod yn herio unrhyw broblemau o ran oedi cyn cyflawni amcanion y cynllun gofal a/neu unrhyw broblemau oedi. Mae'r rôl yn rhoi pwyslais cryf ar sicrhau ansawdd a herio'r Awdurdod pan na fydd yn fodlon mewn meysydd gwneud penderfyniadau.</p> <p>Mae'r SAA ym Mhen-y-bont ar Ogwr hefyd yn cadeirio Cynadleddau Amddiffyn Plant, ei rôl ef yw sicrhau bod gweithwyr proffesiynol yn gwneud penderfyniadau yn seiliedig ar dystiolaeth a gweithdrefnau diogelu. Yn bwysicaf oll, rhaid i Wasanaeth y SAA sicrhau bod llais y plentyn yn ganolog wrth wneud penderfyniadau a bod y plentyn yn gwybod am ei hawliau a'i amgylchiadau.</p> <p>Mae ffocws cryf ar ddata ansoddol yn yr Adroddiad Blynyddol a chyfraddau cydymffurfio ond hefyd prosesau sydd wedi cael eu cryfhau a sut mae'r gwasanaeth wedi cyflawni amcanion y cynllun blynyddol.</p>
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	<p>Roedd y Cynllun Blynyddol wedi ei ddiweddarau i'w weld ar ddiwedd yr adroddiad ac roedd hwn yn tynnu sylw at y nodau ar gyfer y cyfnod adrodd nesaf.</p> <p>Roedd Adroddiad Blynyddol y Gwasanaeth Adolygu Annibynnol ynghlwm yn Atodiad 1 i'r adroddiad, gyda'r Cynllun Gweithredu yn Atodiad 2.</p> <p>Gofynnodd yr aelodau ychydig o gwestiynau ar yr adroddiad, fel a ganlyn:-</p> <ul style="list-style-type: none"> • Rhan o rôl y SAA yw herio Cynlluniau Gofal ac felly pan wneir heriau, sut maen nhw'n cael eu holrhain a'u monitro. Hefyd, sut bydd y gwelliannau a wneir yn cael eu bwydo'n ôl i'r Adran ac i ba raddau mae'r plentyn a theulu'r plentyn yn rhan o'r broses honno? • O ran y Rhaglen Eiriol Ranbarthol, mae'n ymddangos bod y cyllid ar gyfer hyn yn dod i ben ym mis Mawrth 2026. Fydd cyllid pellach ar gyfer hyn yn parhau? <p><i>Cadarnhaodd y Cadeirydd y byddai cyllid pellach ar gyfer y fenter hon yn dilyn diwedd mis Mawrth 2026.</i></p> <ul style="list-style-type: none"> • Gyda golwg ar y rhaglen uchod, oes yna unrhyw dystiolaeth i awgrymu ei bod wedi cynorthwyo rhieni drwy eu hailgyfeirio oddi wrth yr angen am ymyrraeth statudol neu oddi wrth unrhyw weithdrefnau gofal neu amddiffyn plant ffurfiol? • O ran Archwiliad Sicrwydd Ansawdd y SAA – Arolygon Rhieni, pa themâu sydd wedi dod i'r amlwg o'r rhain, yn dilyn ymgynghori â rhieni, ac yn y blaen? <p>Atebodd Rheolwr Grŵp, MASH, IAA a Diogelu y cwestiynau uchod er budd yr aelodau.</p> <p><u>PENDERFYNWYD:</u> Bod Pwyllgor y Cabinet ar Rianta Corfforaethol yn nodi'r Adroddiad Blynyddol a'r Cynllun Gweithredu.</p>
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

Sirol Pen-y-bont ar Ogwr (CBSP)

<p>Y Penderfyniad Wnaed</p>	<p>Roedd yr adroddiad hwn, a gyflwynwyd gan y Dirprwy Arweinydd ac Aelod y Cabinet dros Wasanaethau Cymdeithasol, Iechyd a Lles, yn gofyn am gymeradwyaeth Pwyllgor y Cabinet ar Rianta Corfforaethol i weithredu Cynllun Taliadau Cymhelliant yn seiliedig ar atebolrwydd treth gyngor ar gyfer gofalmwyr maeth, gofalmwyr perthnasau a gwarcheidwaid arbennig ym Mhen-y-bont ar Ogwr, fel mesur i wella recriwtio a chadw. Mae'r Cynllun Taliadau Cymhelliant yn cyd-fynd â newidiadau deddfwriaethol diweddar ac yn cefnogi'r strategaeth leol i wella digonolrwydd a sefydlogrwydd lleoliadau i blant.</p> <p>At hynny, cadarnhaodd fod yr adroddiad yn dangos cynlluniau i gymhwyso cynnydd chwyddiannol o 2.6% (Mynegai Prisiau Defnyddwyr Mawrth 2025) i ffioedd a lwfans gofalmwyr maeth a gofalmwyr perthnasau i gyd o fis Ebrill 2025. Bydd y cynnydd hwn yn sicrhau bod taliadau'n cadw i fyny â chostau byw ac yn ffurfio rhan o'r rhaglen ehangach i gryfhau'r cynnig cyffredinol i ofalmwyr.</p> <p>Dangosodd modelu ariannol, er bod y Cynllun Taliadau Cymhelliant yn cynrychioli pwysau cost, y dylid ei ystyried yn fesur buddsoddi-i-arbed. Bydd cynyddu nifer y gofalmwyr maeth mewnol yn lleihau'r angen am leoliadau IFA a phreswyl cost uwch, gan sicrhau osgoi costau hirdymor a chefnogi canlyniadau gwell i blant.</p> <p>Yn dilyn cyflwyno'r adroddiad, cododd yr aelodau nifer o bwyntiau ac ymholiadau, gan gynnwys rhai cwestiynau, ac roedd enghreifftiau ohonynt yn cynnwys:-</p> <ul style="list-style-type: none"> • Nododd yr Arweinydd y byddai'r rhai sy'n gymwys o dan y Cynllun Taliadau Cymhelliant yn talu ffi i ddechrau, ond yna'n gallu hawlio hon yn ôl. Gofynnodd pam na ellid hawlio'r gostyngiad o'r cychwyn heb i unigolyn wneud y taliad cychwynnol. • Gofynnodd aelod a oedd yr awdurdod lleol wrth gynllunio ar gyfer y dyfodol yn ystyried cefnogaeth a gwelliannau anariannol i ofalmwyr maeth. • Er bod y cysyniad Buddsoddi i Arbed yn ymddangos yn gadarn, oes na fecanwaith i olrhain effeithiau'r cynllun, h.y. drwy ddarparu data'r canlyniadau • Hyd at ba derfyn oedran y mae'r budd-dal yn berthnasol? • Er bod y 2.6% o ffioedd a lwfansau wedi cael ei nodi, o ble mae'r cynnydd hwn yn dod, er enghraifft Mynegai Prisiau Defnyddwyr (CPI) ynteu Mynegai Prisiau Manwerthu (RPI)? <p><u>PENDERFYNWYD:</u> Bod Pwyllgor Rhianta Corfforaethol y Cabinet yn cymeradwyo'r adroddiad a'r camau sy'n cael eu cymryd i wella cadw gofalmwyr, annog trosglwyddiadau IFA a chynorthwyo mwy o blant i aros mewn lleoliadau lleol, mewnol.</p>
<p>Dyddiad Gwneud y Penderfyniad</p>	<p>29 Hydref 2025</p>

Gwasanaeth Eiriol Plant Rhanbarthol

Y Penderfyniad Wnaed	<p>Cyflwynodd y Dirprwy Arweinydd ac Aelod y Cabinet dros Wasanaethau Cymdeithasol, Iechyd a Lles adroddiad oedd yn rhoi crynodeb o'r Ddarpariaeth Gwasanaeth Blynyddol ar gyfer 2024-25 o eiriolaeth statudol i blant a phobl ifanc.</p> <p>Cafodd y Dull Cenedlaethol o Eiriolaeth Statudol (NASA) ei gyflwyno gan Lywodraeth Cymru ym mis Gorffennaf 2017.</p> <p>Y nod gyffredinol oedd darparu dull cyson a safonol o ddarparu gwasanaethau eiriol a sicrhau bod pob plentyn a pherson ifanc y mae ei gynllun gofal wedi'i ategu gan ganllawiau a rheoliadau statudol yn cael mynediad at hyn.</p> <p>Dywedai'r adroddiad fod Tros Gynnal Plant (TGP) yn darparu gwasanaethau eiriol ledled rhanbarth Cwm Taf Morganwg. Roeddent yn ddarparwr sefydledig i'r diben hwn ledled Cymru.</p> <p>Roedd tystiolaeth bod y ddarparwr gwasanaeth yn gweithio fel partner rhanbarthol rhagweithiol ac arloesol wrth ddarparu eiriolaeth statudol, ochr yn ochr â gwasanaethau eraill sy'n helpu plant, pobl ifanc neu eu teuluoedd.</p> <p>Ynghlwm wrth yr adroddiad fel Atodiad, roedd Adroddiad Blynyddol Eiriolaeth Rhanbarthol Cwm Taf Morganwg (CTM) 2024-2025.</p> <p>Nododd aelod fod cryn dipyn o ystadegau a data arall wedi eu cynnwys yn yr adroddiad, gwybodaeth oedd yn adlewyrchu rhwymedigaethau statudol y Cyngor fel awdurdod lleol. Gofynnodd a oedd gennym dystiolaeth bod 'llais y plentyn wedi cael ei glywed' ac wedi arwain at weithredu.</p> <p>Dywedodd Rheolwr Grŵp, MASH, IAA a Diogelu fod rhywfaint o dystiolaeth o hyn yn yr adroddiad a'r wybodaeth ategol, ond ychwanegodd hefyd y gallai fod o fudd pe bai modd cynnwys enghreifftiau o rai astudiaethau achos mewn adroddiadau ar y pwnc hwn yn y dyfodol.</p> <p>Ychwanegodd Dirprwy Bennaeth Gwasanaethau Plant a Theuluoedd fod prif gydrannau'r adroddiad, er mwyn sicrhau rhai canlyniadau oedd yn seiliedig ar dystiolaeth, yn dibynnu ar gwmpasu meysydd fel sicrhau ansawdd, rhai newidiadau sylweddol, materion eiriol eu hunain ynghyd â derbyn cwynion a chanmoliaeth i'r gwasanaeth i hysbysu'r Gwasanaeth Eiriol Plant Rhanbarthol am y ffordd y dylai</p>
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	<p>Gwasanaethau Cymdeithasol Plant fod yn gweithio gyda phlant a phobl ifanc, er mwyn gwella canlyniadau ymhellach yn y dyfodol.</p> <p>Dywedodd aelod hefyd y byddai o fudd i aelodau pe gallent dderbyn rhagor o fanylion am gost y gwasanaeth contract hwn sy'n cwmpasu 3 awdurdod lleol, y tu allan i'r cyfarfod.</p> <p><u>PENDERFYNWYD:</u> Bod Pwyllgor Rhianta Corfforaethol y Cabinet wedi ystyried a nodi'r ddau Adroddiad Blynyddol mewn perthynas â'r gwasanaeth eiriol rhanbarthol.</p>
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

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

Y Penderfyniad Wnaed	<p>Disgrifiai'r adroddiad hwn, a gyflwynwyd gan y Dirprwy Arweinydd ac Aelod y Cabinet dros Wasanaethau Cymdeithasol, Iechyd a Lles, ganfyddiadau ymweliad Gwiriad Gwella (IC) Arolygiaeth Gofal Cymru (AGC) â gwasanaethau plant a theuluoedd Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr (BCBC) ym mis Mehefin 2025. Canolbwyntiai'r gwiriad gwella ar ddeall pa mor dda yr oedd y Cyngor wedi symud ymlaen â'r argymhellion ar gyfer gwella oedd wedi cael eu nodi mewn Arolygiad Gwerthuso Perfformiad a Gwiriad Gwella a gynhaliwyd ym mis Mai a mis Rhagfyr 2022 ac Arolygiad ar y Cyd o Drefniadau Amddiffyn Plant (JICPA) dan arweiniad AGC a gynhaliwyd ym mis Mehefin 2023.</p> <p>Canfu'r Gwiriad Gwella fod arweinwyr CBSP wedi rhoi blaenoriaeth i wasanaethau plant a theuluoedd yn gyson, er mwyn cefnogi gwelliannau cynaliadwy ac amserol. Roedd hyn, yn ei dro, wedi cryfhau ansawdd a chyflawniad swyddogaethau gwasanaethau cymdeithasol yr Awdurdod yn sylweddol.</p> <p>Roedd yr adroddiad hefyd yn gofyn i Bwyllgor y Cabinet ystyried yr adroddiad a chymeradwyo'r Cynllun Gweithredu cysylltiedig, oedd wedi cael ei ddatblygu er mwyn ymateb i'r argymhellion oedd yn weddill oedd yn parhau heb eu datrys, a châi'r Cynllun Gweithredu hefyd ei alinio â Chynllun Strategol 3 blynedd y Cyngor ar gyfer Plant a Theuluoedd. Câi gweithredu'r Cynllun Gweithredu yn llawn ei fonitro drwy'r Bwrdd Gwella Gwasanaethau Cymdeithasol, oedd yn cael ei gadeirio gan yr Arweinydd, ac y gwahoddwyd pob arweinydd grŵp i fod yn rhan ohono.</p> <p>Cyfeiriodd aelod at Egwyddor 2 y Cynllun Gweithredu lle ceid sôn am yr angen i wella'r Strategaeth Gyfathrebu, fel bod staff a phartneriaid yn glir ynghylch rhai gwasanaethau oedd yn cael eu darparu.</p>
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	<p>Gofynnodd hefyd, pa dystiolaeth oedd gennym i gadarnhau bod unrhyw ddryswch y cyfeiriwyd ato mewn perthynas â 'llwybrau atgyfeirio' wedi cael ei gywiro.</p> <p>Cadarnhaodd Dirprwy Bennaeth Gwasanaethau Plant a Theuluoedd fod yna ddau lwybr atgyfeirio wedi bod o'r blaen, ond bod hyn bellach wedi newid i un mynediad atgyfeirio 'drws blaen', ar gyfer cefnogaeth i blant a theuluoedd. Ychwanegodd, fodd bynnag, fod rhai heriau yn dal i fod o ran ble roedd ysgolion yn cael mynediad at gefnogaeth, h.y. ym meysydd addysg, y blynyddoedd cynnar a phobl ifanc. Roedd Bwrdd Comisiynu Cymorth i Deuluoedd hefyd wedi cael ei gyflwyno i wneud atgyfeiriadau ac yn y blaen yn haws eu deall.</p> <p>Nodwyd bod yr adroddiad wedi cael ei gyflwyno i Bwyllgor Trosolwg a Chraffu y Gwasanaethau Cymdeithasol, Iechyd a Lles ar 25 Medi 2025 a'i fod wedi cael derbyniad da. Er budd yr Aelodau, rhoddodd Cyfarwyddwr Corfforaethol y Gwasanaethau Cymdeithasol a Lles rywfaint o adborth llafar ynghylch rhai o'r argymhellion a wnaeth y Pwyllgor o ganlyniad i'r Gwiriad Gwella a'r Cynllun Gweithredu a bod y rhain wrthi'n cael eu hystyried.</p> <p>Gofynnodd aelod i'r Swyddogion a oeddent yn hyderus y byddai'r holl derfynau amser a nodwyd yn y Cynllun Gweithredu yn cael eu cyrraedd, a'u hateb oedd eu bod yn hyderus y caent eu cyrraedd.</p> <p><u>PENDERFYNWYD:</u> Bod Pwyllgor y Cabinet ar Rianta Corfforaethol wedi ystyried yr adroddiad ar ganfyddiadau AGC ac wedi cymeradwyo'r Cynllun Gweithredu cysylltiedig.</p>
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

**82. Arolygiad y Gwasanaeth Maethu gan Arolygiaeth Gofal Cymru (AGC)
Mehefin 2025**

Y Penderfyniad Wnaed	<p>Diben yr adroddiad hwn a gyflwynwyd gan Reolwr Grŵp y Gwasanaethau Darparwyr oedd cyflwyno i Bwyllgor y Cabinet ar Rianta Corfforaethol adroddiad arolygu Arolygiaeth Gofal Cymru (AGC) yn dilyn arolygiad gwasanaeth maethu Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr (BCBC) ym mis Mehefin 2025, ac i ofyn iddo gymeradwyo'r cynllun gweithredu cysylltiedig.</p> <p>Cyflwynwyd yr adroddiad i'r Pwyllgor Trosolwg a Chraffu ar y Gwasanaethau Cymdeithasol, Iechyd a Lles ar 25 Medi 2025 a chafodd dderbyniad da ac mae'r gwasanaeth ar hyn o bryd yn disgwyl am adborth gan</p>
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	<p>y Pwyllgor.</p> <p>Mae'r adroddiad hwn yn cyflwyno canfyddiadau arolygiad Arolygiaeth Gofal Cymru (AGC) o wasanaeth maethu Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr. Roedd yr arolygiad yn dilyn arolygiad blaenorol ym mis Tachwedd 2023, pan nodwyd wyth maes fel rhai oedd angen eu gwella'n sylweddol.</p> <p>Cadarnhaodd Rheolwr Grŵp y Gwasanaethau Darparwyr fod AGC wedi canfod i gynnydd gael ei wneud ym mhob maes, gyda rhai angen gwelliant pellach. Roedd cryfderau penodol yn ymwneud â diogelu, goruchwyllo, a'r gefnogaeth a ddarperid i ddarpar ofalwyr. Mae'r gwasanaeth wedi elwa o arweinyddiaeth sefydlog yn ddiweddar a ffocws strategol clir ar wella canlyniadau i blant.</p> <p>Fodd bynnag, ychwanegodd fod tri maes yn parhau i fod angen gwelliant pellach, sef cadernid prosesau cydweddu, cysondeb wrth adolygu a monitro gofalwyr maeth, ac ansawdd a chyflwyniad hyfforddiant i ofalwyr.</p> <p>Nid oedd AGC wedi cyhoeddi unrhyw Hysbysiadau Camau Blaenoriaeth oedd yn adlewyrchu bod rhai gwelliannau wedi cael eu gwneud ar draws pob maes. Mae'r Awdurdod eisoes wedi cymryd camau i fynd i'r afael â'r meysydd hyn fel rhan o raglen ailfodelu'r gwasanaeth yn ehangach. Roedd cynllun gwella yn ei le a châi ei fonitro drwy fecanweithiau llywodraethu'r Cyngor, gan gynnwys y traciwr rheoleiddio, ac adroddir wrth y Pwyllgor Llywodraethu ac Archwilio, a bydd craffu cadarn yn rheolaidd ar amseroedd i'w penderfynu gan y Pwyllgor.</p> <p>Cyfeiriodd aelod at Atodiad 1 a gofynnodd a allai gael rhywfaint o eglurder ac esboniad mewn perthynas â rhai o'r newidiadau a'r gwelliannau a wnaed i'r gwasanaeth cydweddu. Gofynnodd hefyd pa ddulliau a fabwysiadwyd oedd wedi arwain at wella gweithio cydweithredol o fewn y tîm.</p> <p>Yn olaf, gofynnodd hefyd am ddiweddariad ar adroddiad BRAG (cyfeiriwyd ato yn Atodiad 2 yr adroddiad).</p> <p>Atebodd cyflwynydd yr adroddiad a Dirprwy Bennaeth y Gwasanaethau Plant a Theuluoedd yn eu tro y cwestiynau hyn.</p> <p><u>PENDERFYNWYD:</u> Bod Pwyllgor y Cabinet ar Rianta Corfforaethol wedi ystyried adroddiad canfyddiadau AGC ac yn cymeradwyo'r Cynllun Gweithredu cysylltiedig.</p>
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

Eitemau Brys

Y Penderfyniad Wnaed	Nid oedd dim eitemau brys
Dyddiad Gwneud y Penderfyniad	29 Hydref 2025

I wyllo rhagor o'r ddadl a gafwyd ar yr eitemau uchod, cliciwch y [ddolen](#) hon.

Daeth y cyfarfod i ben am 11:16

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Agenda Item 4

Meeting of:	CABINET COMMITTEE CORPORATE PARENTING
Date:	28th May 2026
Report Title:	CORPORATE PARENTING BOARD ANNUAL UPDATE 2024/25
Report Owner: Responsible Chief Officer / Cabinet Member	CORPORATE DIRECTOR SOCIAL SERVICES AND WELLBEING DEPUTY LEADER / CABINET MEMBER SOCIAL SERVICES & WELLBEING
Responsible Officer:	KATHRYN SILLMAN PRINCIPAL OFFICER – SOCIAL WORKER TRANSFORMATION
Policy Framework and Procedure Rules:	There are no implications for the policy framework and procedure rules.
Executive Summary:	An update report to inform Cabinet Committee of the annual activity of the Corporate Parenting Board and its partners

1. Purpose of Report

- 1.1 The purpose of this report is to provide the Cabinet Committee Corporate Parenting with an overview of the Corporate Parenting Board in 2024-2026.

2. Background

- 2.1 In 2023, alongside care experienced young people, the Corporate Parenting Board and its priorities were developed. During 2024-25 those priorities continued to direct the Board and to structure the focus of the Local Authority and its partners, ensuring the things that are important to care experienced young people are at the centre of the Board's priorities. The annual update for 2024-26 will expand on the Board's workplan for the year and provide a forward look into 2026/27.

3. Current situation/ proposal

- 3.1 Bridgend County Borough Council (BCBC) has statutory responsibilities towards all care experienced children. Care experienced children under 18 have allocated social workers and care leavers have allocated personal advisors. The allocated worker is responsible for developing and overseeing the care plans to ensure that

all children and young people are working towards their identified outcomes and are having their needs met. There were 316 care experienced children on 31st March 2026.

The number of care experienced children steadily decreased over the course of the year. In 2024-25 BCBC launched its Safe Reduction of Care Experienced Children and Young People strategy which has supported the downward trend of our care experienced population over the last two years. BCBC has worked closely with families to identify those where children and young people are safe to exit care and reunify with their families. The practice model of Signs of Safety has also contributed towards safe risk management, keeping children within their families and reducing the need to become looked after.

As a Board the priorities in 2024-26 have been around increasing the voice of our care experienced young people, ensuring we, and the young people themselves, understand and meet their rights and entitlements.

2024-25 saw an increase in the amount of young people moving 3 or more placements due to lack of placement stability and sufficiency. The impact of this was brought into the Senior Management forum where robust strategies were developed to meet the need for stability in placements.

As a result in 2025/26 there was a significant reduction in the number of children experiencing 3 or more placement moves with 7.81% having 3 or more moves over the year. This was a 14% reduction compared to 2024/25.

Educationally, care experienced young people in Bridgend struggled to meet the outcomes of those of their peers who were not care experienced. As a Board we have worked together to consider the opportunities afforded to care experienced young people within their educational setting and have developed a systemic trauma informed response, attempting to work collaboratively with preventative services, fostering services and families to support care experienced young people within their education settings. Data from education systems remains a barrier and is something the Board is working on over the next year.

2024-26 saw an increase in vocational offers from the Fire Service and well-being and leisure activities. The schemes available have been successful for those who have engaged. The focus for 2026/27 will be to ensure the awareness and accessibility of these offers is increased to support more care experienced young people.

Housing services continue to work closely with Children's Services in developing their support of care leavers who access their service. In 2024-26 the joint assessment protocol was under development. The Joint protocol is now being rolled out in Q2 of 2026/27 with a view to the protocol offering a service that is young people focused and puts the needs of care experienced young people at the center.

During 2024-26 there were opportunities where the Board have been able to learn from limited data about the offer and experience of care experienced young people looked after by BCBC. Moving forward into 2026-27 the Board will continue to work alongside young people to understand the barriers to positive outcomes and how, as one, together with partners internally and externally, we are able to improve our

offer for our care experienced young people and support them to thrive now and as they progress into adulthood.

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

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

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

A summary of the Well-being of Future Generations (Wales) Act 2015 assessment is listed below:

- 5.1 Long term – the establishment of the Corporate Parenting Board addresses how agencies can address their responsibilities for Corporate Parenting in a strategic manner to make robust plans for the future.
- 5.2 Prevention – the responsibilities we all have for Corporate Parenting are identified and established into what we need to report on. Measuring and reporting on these responsibilities through the Corporate Parenting Board will enable us to take early action on any issues identified.
- 5.3 Integration – the Corporate Parenting Board has a multi-agency membership. This membership is intended to provide sufficient representation to cover who has specific responsibilities for our children and young people in particular circumstances and regular liaison between the Youth Forum and the Board is undertaken through the work of the Corporate Parenting Officer.
- 5.4 Collaboration – the success and effectiveness of our Corporate Parenting in Bridgend is dependent on how well agencies work together to achieve shared goals and aspirations for our children and young people. These goals and aspirations are cited within the ‘Bridgend Corporate Parenting Strategy – Our plan for you....’
- 5.5 Involvement – due consideration has been given to how different ‘providers of care’ are involved in the proposals around Corporate Parenting. Specific attention and proposals are given to enabling the voice and lived experience of our children and young people.

6. Climate Change and Nature Implications

- 6.1 There is no direct impact on Climate Change and Nature through the implementation of this report.

7. Safeguarding and Corporate Parent Implications

- 7.1 All safeguarding implications have been fully considered within Corporate Parenting development. No safeguarding issues were raised within the work cited in this report.

7.2 The subject matter of this entire report relates directly to Corporate Parenting and any implications are discussed within it.

8. Financial Implications

8.1 Corporate Parenting development does not have a specific allocated budget. Where costs have arisen to support participation of children and young people, engagement, meetings and training of professionals the costs have been met from within the Children's Services core budget.

9. Recommendation(s)

9.1 Ongoing work on a corporate parenting data set to support our understanding of needs and outcomes in 2026/27

Background documents

None



BRIDGEND CORPORATE PARENTING ANNUAL REPORT 2024 - 2026

2024 - 2026





Introduction

Within Bridgend County Borough, the corporate parenting Board offers a space for the Local Authority and its partners to come together to hold each other accountable to the care experienced children and young people of Bridgend.

In 2023, alongside care experienced children and young people of Bridgend, the Board’s priorities were set. Below are the 6 priorities which the Board focuses their work.

Our Priorities

1. Having a voice.
2. Good health and well-being.
3. A comfortable, safe, stable home whilst in care and afterwards.
4. Educational achievement, training, and employment.
5. Getting ready for independent living.
6. Celebrating our children and young people’s important achievements and events.

The Work of the Board

The Corporate Parenting Board met 5time in the year April 2024 – March 2026.

Attendance of Board members

[Table key: **Y** – attended **N** – no attendance **Rep** – represented by a colleague of their organisation]

Board member	14 th May <i>Civic Offices</i>	5 th July	27 th September <i>Ogmore Vales Fire Station</i>	13 th December <i>Kenfig Hill RFC</i>	11 th February <i>Maesteg Fire Station</i>	8 th April 2025	15 th July 2025	9 th September 2025	18 th November 2025 CANCELLED	20 th January 2025
Corporate Parenting Officer, Bridgend CBC	Y		Y	Y	Y	Y	Y	Y		Y
BCBC children’s services	Y		Y	Y	Y	Y	Y	Y		Y
Education and Early Help, Education and Family Support Directorate BCBC	Rep		Rep	Rep	Rep	REP	REP	REP		REP



Prevention and Wellbeing, BCBC	N	N	Y	N	N	N	N	N
Partnership Services, BCBC	Rep	Y	Rep	Rep	REP	REP	N	N
Learning Disability, Mental Health and Substance Misuse, BCBC	N	N	N	N	N	N	N	N
Employability BCBC	N	N	N	N	N	N	N	N
Safeguarding and Looked After Children, Cwm Taf Morgannwg University Health Board	Rep	Rep	Rep	N	REP	REP	N	N
South Wales Police	Y	Y	Rep	Y	N	N	N	Y
Bridgend College	Y	Y	Y	N	Y	N	N	N
Fire & Rescue Service	Y	Y	Y	Y + rep	Y	Y	Y	N
Awen Cultural Trust	N	N	N	Rep	REP	REP	N	N
Tros Gynnal Plant	N	N	N	N	N	N	N	N
Halo Leisure	N	Y	N	N	N	N	N	N
Western Bay Adoption Service	N	Y	N	N	Y	N	REP	N
Youth Justice Service BCBC	Y	Y	Y	Rep	N	Y	N	N

It must be noted that each of the above meetings had additional non Board members invited to present or to attend for their expertise on a topic being discussed.

Over the course of the year the Board has been determining baseline data to understand how we are meeting the needs and priorities of our care experienced children and young people.



Bridgend Cabinet Committee Corporate Parenting

Whilst the Corporate Parenting Board is not a statutory body, it is closely aligned with Bridgend County Borough Council's (BCBC) governance through its relationship with the Cabinet Corporate Parenting Committee that receives reports that provide oversight and accountability to the Councils' statutory functions in regards to care experienced children, young people and care leavers.

Children and Family Services and other Council departments provide quarterly reports to the Cabinet Corporate Parenting Committee. Reports presented to the Committee are also shared with the Corporate Parenting Board. Reports presented over during 2023-34 and 2024-25 include:

- Corporate Parenting quarterly update
- Employability Service update
- Basic Income Pilot
- Youth Justice Service update
- Children & Families 3-year Plan
- Independent Reviewing service Annual Plan
- Annual Report of Inspections
- Regional Advocacy Service Annual Report
- Regional Adoption Service Annual Report
- Inspection updates
- Foster Wales Bridgend Annual report
- Policy and strategy updates
- Annual report of Inspections on BCBC registered homes
- Housing Pathways for Care Experienced Children children's homes and Young People

Listening to the views of our children and young people

The Board has worked closely with care experienced children and young people, ensuring that their voices lead the Board's direction.

In October 2025, the Board held a Care Experienced Summit. This was the first of its kind in Bridgend County Brough Council. The Summit offered an opportunity for professionals and young people to come together, to build relationships and for professionals to understand the lived experience of our care experienced young people. The Summit focused on 4 topics:

- Your Voice
- Your Future
- Your Education
- Your Health

A workshop was held for each topic and the young people were offered a space to offer their views, wishes and feelings.



Some quotes from our young people from the workshops included:

Your voice

“Just give them a voice (listen to YP views) as may have good ideas about what options are available”

“Make sure young person knows why they in care and don’t blame themselves”

Your Future

<i>My hopes for the future:</i>	<i>My worries about the future are:</i>
<i>“To be a pharmacist”</i>	<i>“Losing relationships with the people I know”</i>
<i>“I want to go to university to study PE and get a PGCE”</i>	<i>“Not having a successful job and not passing my GCSEs”</i>
<i>“Always change myself - every little second”</i>	<i>“AI”</i>
<i>“Getting a good job to help my future”</i>	<i>“Securing a good job”</i>

Your Education

There are staff at school who are kind and understanding and want to help

“[It’s] annoying and upsetting when communication is poor. We need school staff to sometimes acknowledge that they have caused us to be in a difficult situation by not telling other teachers our circumstances”

“School is too focused on us knowing what we want to do next and if we are going to college or going to get a job. We feel our friends don’t have the same pressures because they are not care-experienced”

Your health

“In a recent hospital stay staff were friendly and supported me, I felt listened to and they got to know my likes and dislikes”

“don’t just talk to my carer”

“it’s hard to open up about private things to someone new”

With this feedback children’s services and its partners can work with young people to improve services to ensure they are inclusive and respond to the learning we have had from this event. The feedback will also feed into the priorities for the next year will be explored and agreed.



Alongside the Summit, the Board held a care experienced fun day to celebrate our children and young people. The day was hosted by Bridgend College at their Pencoed Campus. Together with partners, there was a wide range of stalls and activities that included: face painting, silent disco, giant jenga, bracelet making, clay modelling, giant connect 4, mega darts, bean bag toss, catching sticks, story telling, smack the rat, rock painting, Halloween activities, wooden pumpkin carving, drawing competition, photo booth, name the teddy, card competition and Beti the dog mentor. Cardiff City Football and Bridgend Ravens Rugby tested skills in the sports hall with some great give aways and a chance to meet Ronnie the Raven.

Over 150 children, young people, carers and staff attended the event with feedback on the day, and messages from carers since, providing extremely positive comments stating that our children and young people had lots of fun and thoroughly enjoyed themselves!



Board Member support for our children and young people

Children and Family Services



Number of Care Experienced Children by Age and Gender:

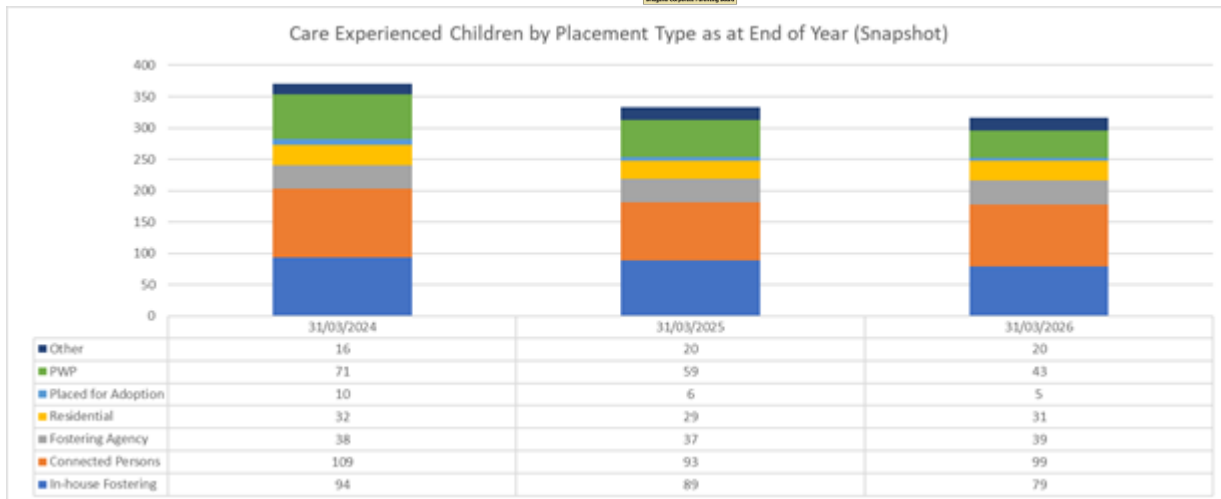
	As at 31/03/2024			As at 31/03/2025			As at 31/03/2026		
No of Care Experienced Children	Female	Male	Total	Female	Male	Total	Female	Male	Total
Under 1	3	8	11	7	2	9	3	7	10
1-4 Years Old	28	32	60	19	30	49	18	18	36
5-9 Years Old	37	48	85	34	48	82	40	49	89
10-15 Years Old	73	72	145	66	59	125	58	60	118
16-17 Years Old	29	40	69	27	41	68	23	40	63
Total	170	200	370	153	180	333	142	174	316

The local authority (LA) has responsibility for all care-experienced children. Care experienced children under 18 have allocated social workers and care leavers have allocated personal advisors. The allocated worker is responsible for developing and overseeing the care plans to ensure that all children and young people are working towards their identified outcomes and having their needs met. There were 333 care experienced children and 245 care leavers supported by the Local Authority on 31st March 2025. By March 2026 this figure has further reduced to 316 (-4.8%) care experienced children.

At its highest in April 2024 with 373 care experienced young people being supported. The number of care experienced children has steadily decreased throughout 2024 – 2026. In 2024 the Local Authority launched its safe reduction of care experienced children strategy. The Local Authority has worked closely with families to identify those where children and young people are safe to exit care and reunify with their families. The practice model of Signs of Safety has also contributed towards the safety planning, keeping children within their families and reducing the need to become looked after.

There is a systemic approach to the process of discharging care orders which provides clear expectations for social workers working with children and families. There is joint working between the Care Experienced Children's Team, Kinship and Permanence Team and Independent Reviewing Services which supports working together to ensure high quality care planning and timely progression of care plans.

The graph below shows the placement types within which our care experienced young people reside.



Connected Person placements continue to be the greatest proportion of placements with in house fostering being the second highest. The service continues to strategically evaluate its exit from care strategies and as such this is reflected in the number of Care experienced young people decreasing over the last 12 months in particular.

In 2024-2025 there was a 21% increase in children experiencing 3 or more placements over the course of this year compared with the previous year. The main impacting factor for this was placement sufficiency.

These strategies have proved effective as in 2025-2026 there was a **14% decrease** in children experiencing 3 or more placements over the course of this year compared with 2024/25. The main impacting factor for this is placement sufficiency of the right accommodation care and support arrangements to meet children’s needs. Addressing this is a priority with many plans in place to support the right placements and placement support for children and carers. In 2025/26 **7.81%** of care experienced young people experienced 3 or more placement moves during the year.

In the year 2024-2025 there was a change in the through care team who now work with children from 15 not 16 years. Young people are allocated a Personal Advisor (PA) up until the age of 25. Legislation dictates that pathway plans only have to be reviewed up until this age unless a young person is being supported through a programme of education (largely university). The PA service is now fully staffed but did experience some staffing challenges due to this period as a number of PAs were seconded to undertake social work training. Continuity of PA is key for young people as they transition from childhood to adulthood. The 15+ team continues to support those who are eligible for the Basic Income Pilot for Care Leavers. All our care leavers who were eligible for the scheme signed up. Benefits have been seen for our young people in this scheme and plans are in place to ensure there is no ongoing impact when the pilot ends. Young people aged 16-25 have access to the St David’s Day fund which is used to support with access to opportunities to assist with their development and successfully transition into adulthood. This is often used for course fees and study materials, equipment, transport etc.

The Independent Reviewing service offers accountability and oversight of Care Experienced children and young people’s care plans. Throughout 2024-2026 the IRO service has worked closely with the



children’s social workers across the service alongside the Advocacy service offered by TGP to ensure the voices of our Care Experienced children are heard and acted on as part of the Care Experienced Review process.

BCBC (and all UK local authorities) is part of the Home Office National Transfer Scheme (NTS) for unaccompanied asylum seeking children and young people. The NTS is a United Kingdom (UK) government scheme which enables the planned transfer of an unaccompanied seeking child from one LA to another. All Councils in the UK are subject to a mandatory duty to comply with the scheme. The purpose of the NTS is to ensure a fairer and equitable distribution of care to unaccompanied asylum seeking children and young people.

In 2025/26, of the 30 UASC the table below shows how many reside in and out of the LA as at 31/3/26:

11 are Care Experienced and 19 are Care Leavers.

	UASC	Former UASC Care Leavers
Placed within Local Authority	7	8
Placed outside of Local Authority	4	11

The Local Authority continues to work as Foster Wales Bridgend to recruit more local authority foster carer households. There is ongoing recruitment activity to increase the number of high-quality foster carers for children and young people. Foster cares have access to their own supervising social worker and training packages and events to ensure they are supported and have opportunities for development. There are opportunities for planning for placements within our monthly placements planning meetings and out of authority panels. Children services have now appointed a When I’m Ready and Supported Lodgings Social Worker dedicated to recruiting and supporting providers of this

service to enable stable and secure placements as the young person makes the transition into adulthood.

Education

As at March 2025 there was 207 statutory school age Bridgend care-experienced children in Education.



The Education Engagement Team support Bridgend care experienced children and children placed in Bridgend by other local authorities. Each school has a designated co-ordinator as a point of contact. There are two seniors are a point of contact for BCBC children placed outside of Bridgend County.

From September 2024 to September 2025 the number of children looked after accessing intervention from the Youth Justice Service increased from 6 to 10, suggesting that while fewer children are subject to early or high-level safeguarding interventions, a small number now require more stable care arrangements.

Care-experienced learners generally show improved stability and increasing participation in education, training and wellbeing support. Attendance and attainment remain variable, but targeted support has helped many learners sustain placements, re-engage with school, and access specialist emotional and behavioural support.

Care experienced children in Bridgend face greater barriers to educational success than their peers. Outcomes align broadly with regional patterns: higher Additional Learning Needs (ALN) rates, more complex needs, and a greater likelihood of disrupted education. However, Bridgend's focus on early intervention and multi-agency working places it in line with, or ahead of, other comparable authorities.

Strong corporate parenting arrangements, robust multi-agency collaboration, and early-help approaches (including trauma-informed practice) underpin improving outcomes. Many care experienced learners benefit from bespoke tutoring, stable foster placements, targeted wellbeing support, and consistent relationships with social workers and education advisors. Engagement in positive activities and post-16 progression opportunities is increasing.

Challenges include attendance fluctuations, higher exclusion risk, emotional and mental health needs, placement instability for a small cohort, and delays in securing specialist provision. Transition points (Year 6–7 and post-16) remain pressure points. Limited capacity in health, ALN services and specialist education settings affects timely support.

The local authority is strengthening trauma-informed practice in schools, expanding personal tuition and mentoring, enhancing multi-agency planning, and improving transition support. Work is underway to reduce exclusions, increase post-16 participation, and ensure earlier identification of ALN needs. Future actions include widening access to wellbeing services, increasing placement stability, and strengthening data tracking to target support more precisely.



Bridgend Youth Justice Service

Bridgend Youth Justice Service (BYJS) works with children aged 10–17 who are care-experienced, on the edge of care, or experiencing risk factors such as exploitation, school exclusion, emotional dysregulation or unsafe environments.

Many of the children we support have multiple and complex needs, and a significant proportion are already open to Children's Social Care. BYJS plays a vital role in safeguarding these children, ensuring their voices are heard, and helping them to navigate adversity safely.

BYJS responsibilities during the year included providing a trauma-informed, relational, and child-centred service, with early engagement at the prevention stage through to statutory court orders, resettlement and custody and we operate a multi-agency, safety and wellbeing approach. We deliver direct work across safety, wellbeing, education, health, family relationships and community reintegration while ensuring children feel understood, supported and included.

The Youth Justice Service work closely with Social Care, Education, Police, Health, Child and Adolescent mental Health Services (CAMHS), Substance Misuse services and the wider third sector to ensure that care experienced children receive personalised and proportionate interventions. BYJS also supports families and carers, recognising the important role they play in stability and recovery. Throughout 2024–26, BYJS strengthened its approach to contextual safeguarding, the management of exploitation, early identification of the child's safety and wellbeing needs, trauma embedded practice and the use of restorative practice to keep children and communities safe.

Care experienced children made up approximately 12% (11) of the BYJS caseload, though their needs were often more complex than the wider cohort. All care experienced children were screened for trauma, exploitation, speech and language needs, mental health, substance misuse, and their wider family and contextual risks.

Health & Emotional Wellbeing

BYJS continued to benefit from a dedicated CAMHS practitioner who provided consultation, screening and direct intervention for children with neurodevelopmental or mental health concerns. Many children also received additional help through our health practitioner, who coordinated referrals into paediatrics, substance misuse services, GPs and sexual health clinics. Children with complex trauma were supported through structured, trauma-informed sessions and external therapeutic services when required.

Education

Education outcomes remained a priority, particularly as many care-experienced children face exclusion, anxiety or disengagement from learning. BYJS engaged schools, Education Otherwise Than At School (EOTAS) provision, the Bridge, and college partners to secure personalised re-engagement plans. Children accessed vocational pathways such as bike mechanics, construction tasters, agriculture, outdoor learning and the Building Skills Project. Transport support, attendance monitoring and daily contact were used to maintain consistency.



Safety & Stability

All care experienced children were jointly reviewed at multi-agency safety and wellbeing meetings, where current risks and protective factors were analysed. Exploitation screening tools, risk management plans and contextual safeguarding mapping were used where deemed necessary in conjunction with our Childrens Services partners. BYJS worked with housing to secure emergency accommodation, prevent homelessness and support safe transitions. When children were at risk of going missing, exploitation or self-harm, BYJS coordinated fast-time planning with police and social care to reduce harm and improve stability.

Priorities for Q4 2025/26 moving into 2026/27 will be to improve safety, stability and life chances for care experienced children open to YJS through a trauma-informed and co-ordinated planning, alongside strengthening participation, voice and influence of care experienced children within the service processes and development.

Bridgend Council Housing Department

The housing department oversees the Council's statutory responsibility for homelessness, rehousing and housing support. Applications for the above services are received directly from care experienced children, young people and care leavers. The department, in conjunction with colleagues in Children and Family Services complete a quarterly return with regards to care leavers who have presented throughout the year.

In 2024/25, 13 care leavers presented as homeless, that is a reduction of more than 50% (27) from 2023/24. In strategic response to care leavers presenting as homeless, the LA has developed a joint protocol between Children's services and Housing. This assessment will be completed by the 15+ team alongside housing ensuring a holistic assessment of need is completed when any young person 16+ is presenting as homeless to the Local Authority.

Health

Cwm Taff Morgannwg University Health Board (CTMUHB) provides all universal and secondary health services to care experienced children within its footprint and is responsible for any health referrals to regional centres of care. The health board are also responsible for completing the health assessments required under the Social Services and Wellbeing (Wales) Act (2014). 261 health assessments were completed with 44 outstanding for care experienced young people. Steps have been taken to manage this which included recruiting into the team leader role alongside an administration role. CTMUHB currently collects information on the number of health assessments completed, along with the number of care experienced children who attend our emergency departments. This will include the number of children registered with the General Practitioners and Dental services.

Cwm Taf Morgannwg University Health Board is participating in the national CIVICA survey, which gathers feedback on how children and young people experience their health assessments. In addition,



a Children's Rights Oversight Board provides strategic direction across all directorates, ensuring that the rights of children and young people are embedded throughout service delivery. The launch of the Cwm Taf Morgannwg Baby and toddler voice is a charter that captures and represents the rights and needs of very young children. There is an experience and engagement service level meeting in Children's Social Care Bi-monthly where any issues are discussed escalated or celebrated. CTMUHB children's charter included the views of local children and young people.

TGP Cymru – Advocacy Support

TGP Cymru is the statutory independent advocacy service commissioned for children open to Child and Family Services which includes those open on a Care and Support basis, Child Protection and Care experienced children and young people in Bridgend. According to information received from Bridgend, TGP report 132 children and young people across the service 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 received IBA, 27 less than in the previous year. A focus in 2026/27 will be to create more visibility to our Care experienced young people of the opportunities that come from professional advocacy. Alongside TGP advocacy services, BCBC is also working alongside the Parent Advocacy Network in developing a parent peer advocacy model to further support the outcomes of children and families in Bridgend.

Alongside the Active Offer, TGP Cymru also facilitate the care experienced youth forum (Bridgend Youth Voice) and ensuring children and young people are reminded of their rights and entitlements at regular intervals and referring into advocacy service or other support services as and when required. Bridgend Youth Voice (BYV) Forum has a regular cohort of children and young people aged between 12 and 22 yrs old who meet on a monthly basis and school holidays.

TGP Cymru actively promotes rights around education, training and employment via independent advocacy provision. 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 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" and "I know more about the fact that I have my own choices and my own voice".



South Wales Fire and Rescue

South Wales Fire and Rescue Service (SWFRS) has delivered 103 REFLECT sessions to 1,001 attendees aged between 11 -25 years old. The REFLECT Project aims to engage with young people to raise awareness and educate them in the dangers of Arson, Car Crime and Anti-Social Behaviour, developing confidence, citizenship and promoting positive behaviours to champion the needs of children and young people wherever they are on their life journey, ensure we give them a voice and provide support and education to enhance positive decision making.

In addition, the service has completed 39 Phoenix project sessions to 267 attendees. The Phoenix Project provides an opportunity for both primary and secondary schools, colleges, alternative education agencies, and pupil referral units to refer young people to a five day interactive course where they learn all about the Fire and Rescue Service, who we are, what we do and how we engage with the communities we serve. The aim of the programme is to address issues experienced by young people, ranging from low self-esteem and lack of confidence to anti-social behaviour and/or fire related problems. It provides an opportunity for children and young people to learn new skills, interact as part of a team and unearth previously under used or undiscovered talents against a Fire Service backdrop. The Phoenix Project provides attendees with the opportunity to take part in a wide variety of activities such as working with real fire service equipment, using specially adapted fire engines, climbing ladders, and taking part in staged rescue scenarios.

The service also provides a Fire cadet programme at 12 locations through the service area for 13 to 16-year-olds. The programme offers young people an unique insight into working within an emergency service. The service offers fun and challenging inclusive opportunities for young people and work to develop personal and social skills through activities which promote self-discipline, teamwork and citizenship. The programme offers the opportunity to gain awards and work towards achieving a recognised qualification.

In addition, South Wales Fire and Rescue Service has delivered road, fire and water safety education to 49,156 children and young people in key stages 1-4.

South Wales Fire & Rescue offer the following educational opportunities through their youth intervention projects and programmes and these:

- Enhancing key citizenship skills and build confidence.
- Developing transferable, practical skills for future training or employment.
- Gaining a nationally recognised BTEC qualification.
- Playing supportive roles in their local community and develop positive peer relationships. • Attending a local fire station one evening a week, work alongside SWFRS
- Representing SWFRS at prestigious events.

Bridgend College

Bridgend College take on a pivotal role in supporting our care-experienced children, young people, and care leavers, ensuring that they receive consistent and professional support throughout their educational journey. Along with curriculum-based support, their responsibilities include regular



liaisons with their social workers, support teams, and foster carers. This collaboration helps in maintaining a unified approach to each student's welfare. Each care experienced student is assigned a safeguarding lead, and has a safeguarding lead care experienced champion, enhancing the personalised care by establishing a reliable point of contact for students to approach when in need. These leads play a crucial role in managing the students' reviews and fostering a supportive environment where students can develop trust and rapport.

From April 2024 – March 2026, Bridgend College have actively engaged in providing essential services like advocacy and housing support and have directed students to necessary external agencies for further assistance, such as Assisting Recovery in the Community (ARC) and Barod. This comprehensive support structure not only addresses immediate educational needs but also ensures a broader spectrum of welfare and guidance, reinforcing our commitment to the well-being and success of our care-experienced students.

There were 77 enrolled care experienced students in the academic year 2024/25. In 2025-26 28 care experienced young people enrolled in full time education with a marked improvement in retention figures recorded for the first term with 100% recorded with all 28 learners remaining in education following October 2025 half term. Retention of care experienced young people has previously been noted as below the overall college retention rate (-5.9% in 2025) and as such, this has been added as a priority area of focus and improvement within the colleges quality improvement plan for 2025/26.

In 2024 and 2025 the college also hosted the celebration event and young people's summit, working with the local authority to provide an accessible venue to celebrate and engage care experienced young people of all ages.

AWEN Cultural Trust

Awen Cultural Trust works with partners to ensure that care experienced children can access, feel safe and enjoy cultural opportunities that will support social development and career pathways. Over the past year, Awen has supported the Corporate Parenting Board to further its celebration of the achievements of care experienced young people, while at the same time developing its own policies and activities that fosters better opportunities for young people, carers and families.

Awen provides opportunities and activities that support the well-being of young people, creating new experiences that enhance emotional and physical health. These include activities at Bryngarw Park where we know care experienced children enjoy school visits, access to events such as events at Maesteg Town Hall. Awen also works with partners to develop schemes for young carers which in 2024 included an iBroadcast project based on the Grand Pavilion. <https://ow.ly/sSG650SG2uI>

At Bryngarw, we organised a 'relaxed' Santa's grotto (Santa's Grotto: A Relaxed Encounter | Awen Box Office), providing a safe and inclusive space for families to enjoy a Christmas experience and which may support care experienced young people.



Awen became a Fostering Friendly place means that they:

Organisation this year, having the policy in

- offer flexible working for foster carers and those going through the approval process.
- can allow up to 5 days of paid leave. This could be for foster carer training, meetings with social workers or settling a child into their new home for instance.
- will promote Foster Care Fortnight™, The Fostering Network's annual campaign, which raises the profile of fostering.

Western Bay Adoption Service

Western Bay Adoption Service provides the adoption service for Bridgend. The service recruits and assesses any potential adopters from Bridgend, twin tracks and family finds for children in Bridgend who have a plan of adoption being considered or agreed by the court and provides an adoption support service to adoptive family and birth parents who reside in Bridgend.

From April 2024 to March 2025, the service worked with 20 twin tracking (potential adoption) referrals, 7 Bridgend children were made subject of a placement order, i.e had an agreed plan of adoption, and the service placed 6 children. The service recruited and approved 5 adoptive families.

In the year 2025-26, the service worked with 24 twin tracking referrals, 11 Bridgend children were made subject of a placement order, and the service placed 6 children with adopters. 7 children were made subject of an Adoption order. 6 adoptive families were also approved from Bridgend.

The service has a wide variety of support services available to adopted children and their families, including Virtual Hub consultations, birth parent support groups which are held monthly, access to a youth club specifically for adopted young people, support with life-journey work and identity, play group for adoptive families, and numerous support events in which adoptive families can come together. They also offer support to adopted adults to access their adoption information.

Celebrating our children and young people's important achievement and events

In October 2025 the Corporate Parenting Board held their first Care Experienced Summit and Fun day events for care experienced children, offering a space to share their voices to support service development and a space to be celebrated and praised for their achievements. Below are some photos from the day...





Next steps - our priorities in the coming year 2026/27

Over the past 2 years, the corporate parenting board has offered some accountability and oversight for partners and the Local Authority in relation to their duties and responsibilities to Care Experienced young people. There has been some great success between the services and in collaborating with care experience young people; putting the voice of our young people at the centre of what we do within our different systems, however there remain challenges in relation to how our systems work together to ensure we achieve the best possible outcomes for our Care Experienced children and young people. The data set continues to be a challenge with many elements of the data required to understand the impact of the board's initiatives on outcomes alongside themes that support strategic direction are missing.

In the coming year, the Board will continue to develop a performance framework that can reflect how Board member agencies are meeting the rights and needs of our children and evidence this in an outcome focused way. The Boards main priorities will be understanding who our Care Experienced young people are, how are they achieving in education, understanding their current outcomes and their trajectories; working together on a plan which aims to ensure we are meeting the needs of our young people and their outcomes are the best they can be.

As we continue to offer space and time to work with children and young people, to listen to their lived experience and collaboratively work together to improve services for care experienced children, the aim of the Board is to ensure the needs, rights and entitlements of our care experienced young people are met by the Local Authority and its partners and that they are offered opportunities to thrive.

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Agenda Item 5

Meeting of:	CABINET COMMITTEE CORPORATE PARENTING
Date of Meeting:	28th MAY 2026
Report Title:	CARE INSPECTORATE WALES (CIW) INSPECTION OF BRIDGEND COUNTY BOROUGH COUNCIL'S (BCBC) REGULATED SERVICES IN CHILDREN'S SOCIAL CARE
Report Owner: Responsible Chief Officer / Cabinet Member	CORPORATE DIRECTOR SOCIAL SERVICES & WELLBEING DEPUTY LEADER / CABINET MEMBER SOCIAL SERVICES AND WELL-BEING
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>Care Inspectorate Wales (CIW) are the independent regulators of social care and childcare services in Wales and inspect care service providers against the requirements of relevant legislation including the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA) and the Social Services and Well-being (Wales) Act 2014.</p> <p>CIW are required to:</p> <ul style="list-style-type: none"> • Carry out functions on behalf of Welsh Ministers to provide assurance on the quality and safety of services • Decide who can provide services • Inspect and drive improvement of regulated services and local authority social services • Undertake national reviews of social care services • Take action to ensure services meet legislative and regulatory requirements <p>This report provides the Committee with information on the regulatory activity undertaken by CIW across Bridgend County Borough Council's Children's Residential Services in 2025.</p> <p>The inspections in the accommodation services report are against the following core themes:</p>

	<ul style="list-style-type: none"> • Well-being • Care and Support • Leadership and Management • Environment <p>Summaries of the inspections are contained in this report and include:</p> <ul style="list-style-type: none"> • Key findings of how we have performed against standards in our residential regulated services • Activity undertaken to meet regulatory standards • Actions to address areas of improvement and non-compliance notices
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1. Purpose of Report

- 1.1 The purpose of this report is for the Committee to consider the outcome of the Care Inspectorate Wales (CIW) inspections of Bridgend County Borough Council's (BCBC) Regulated Services in Children's Social Care in 2025. This report relates to inspection activity detailed below:

Service	Visit Date
Hillsboro	23/01/2025
Sunny Bank	17/02/2025
Harwood House	03/06/2025
Sunny Bank	07/08/2025
Meadows View	03/11/2025

2. Background

- 2.1 CIW undertake inspections in line with their Inspection framework for accommodation-based services, to evaluate the service's adherence to legislative and regulatory requirements, principally The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017, the conditions of registration and the individual service's statement of purpose. The inspections also evaluate the service's ability to provide the Welsh Language active offer. In doing so, CIW are aiming to ensure that people using the services are supported to achieve the best possible quality of support, achieve their identified outcomes, are not placed at risk and do not experience harm. The inspections are undertaken in consideration of four core themes:

- The wellbeing of individuals receiving care and support
- The quality of care and support provided to individuals
- The leadership and management of the service
- Environment

The inspection reports are presented with a short summary, followed by findings under these core themes.

2.2 The Residential provisions that were inspected during 2025 are as follows:

Hillsboro – This service provides a single-occupancy short-term bridging placement for children and young people aged 8 to 25 whose needs are best met individually. Children are supported to achieve their personal outcomes, reduce risks, and make positive progress while longer-term plans are identified.

Sunny Bank (two inspections) – This service provides four placements of varying lengths to children/young people in the age range of 8 to 17 years who cannot live with their own immediate or extended family. Young people moving into adult services / independent living may remain at Sunny Bank post 18 for up to 7 days to support their transition plan.

Harwood House – This service provides a high quality 52-week residential service for up to two children/young people with complex needs, including learning disability, aged from eight to nineteen years (nineteen age limit applies to any young person with Additional Learning Needs.) Children/young people are usually enrolled in Heronsbridge School.

Meadows View – This service has been designed to provide a home for up to seven children/young people and is set up as two separate services or provisions within the same building, each having their own entrance and both being self-contained. The Emergency provision of the home can provide accommodation for up to three young people for up to 28 days. The Assessment provision of the home is split over two floors. This side of the service provides placements for up to four children/young people for up to 12 months.

2.3 During the inspection, the inspectors review a range of information including policies, statements of purpose, written guides, complaints information, incident reports, supervision data, training data, safeguarding referrals and quality assurance reports. The inspector may ask for this information to be provided electronically and uploaded onto the secure portal CIW Online. Inspectors aim to engage with individuals in receipt of care and support and professionals to gather first-hand feedback about the services they receive.

2.4 All reports are initially received prior to publication from CIW along with an Inspection Response Form, which can be used to comment on the factual accuracy or the fairness and proportionality of findings within the reports.

2.5 There is a requirement under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA) to have a nominated Responsible Individual (RI) which for these services is the Principal Officer for children's residential services. The RI is legally accountable for the provision of care and support and is required to have oversight of the running of the services. In addition, there are also registered managers (RM) in post, who are suitably qualified and registered with Social Care Wales as required under RISCA.

3. Current situation

- 3.1 The 2025 CIW inspection cycle found that the four regulated residential services inspected are providing good-quality care, with clear progress since the 2024 inspection year. Across the estate, CIW highlighted consistent strengths in children’s well-being, personalised support, partnership working, and improved stability in staffing. Three services — Sunny Bank (August 2025), Harwood House, and Hillsboro — achieved Good across all inspection themes. Meadows View continues to show improvement in care and support and leadership, with the environment remaining the key area requiring further development.

A Priority Action Notice was issued to Sunny Bank following the February 2025 inspection in relation to transition planning; however, this was addressed, with inspectors confirming at the subsequent August 2025 inspection that the required improvements had been made. There are some areas for improvement identified within the reports, which will be addressed at individual service level.

- 3.2 Across the 2025 inspections, CIW emphasised:

- Children’s voices are consistently heard, with positive use of advocacy and child-friendly guides.
- Care and support is tailored, trauma-informed, and delivered by increasingly stable core staff teams.
- Health, education and independence skills are actively promoted in all homes.
- Behaviour support and clinical input (including Behaviour Analysts) are now embedded, improving outcomes.
- Leadership and management across services is strong, with effective oversight from managers and the RI.
- Improvements were required in transition planning at Sunny Bank earlier in the year, which have since been addressed.
- Environment remains the only service-wide area needing further work, though this relates specifically to Meadows View.

Key inspection findings for Hillsboro

- 3.3 Hillsboro was inspected on 23rd January 2025 and continues to provide a short-term single occupancy bridging placement. Inspectors found the service supports children to make meaningful progress, reduce risks, and develop confidence during their time at the home. Children feel listened to and enjoy positive relationships with staff. Improvements have been made in transition planning and leadership oversight, and the service has secured a stable permanent staff team. No areas for improvement or Priority Action Notices were issued.
- 3.4 **Well-being** - Children understand their rights and entitlements and have access to advocacy. They feel their voices are heard and are supported to make decisions about their lives. Physical and emotional health is promoted, with healthy routines, good diets, and specialist involvement where needed. Children re-engage with education or tutors when needed and are offered activities that align with personal interests. Children maintain relationships with family and friends and benefit from incentives and confidence-building approaches.
- 3.5 **Care and Support** - Assessments of suitability are detailed and consider risk and impact. Children are involved in planning and reviewing their care. Personal plans

reflect their priorities, routines, and well-being outcomes. Behaviour support plans and risk assessments provide clear guidance. Behaviour Analysts work closely with children and staff, providing reports, direct work, and recommendations. Children have made positive progress and are proud of their achievements. Staff relationships with children are strong, and feedback from professionals is highly positive.

- 3.6 **Environment** – The environment is safe, homely and well adapted, with personalised bedrooms, suitable communal areas, and a large garden with gym equipment. Some maintenance has been identified relating to overhanging trees and required works at the front of the home, which the provider is addressing. The home is clean, well furnished, and offers appropriate privacy and storage.
- 3.7 **Leadership and Management** – Leadership is strong, with a committed manager and a stable permanent staff team. Recruitment processes are largely robust, with a need to ensure all employment history gaps are fully recorded. Agency use has reduced significantly. Staff report good supervision, strong support, and valuable opportunities for development. Quality assurance arrangements, including RI visits and monthly audits, are effective and drive improvement.

Key inspection findings for Sunny Bank (first inspection)

- 3.8 Sunny Bank was inspected on 17th February 2025. Inspectors found children were making positive progress and were supported by a committed and experienced staff team, with effective management oversight. Improvements previously identified in relation to staff fitness had been addressed, and risks to children’s well-being had reduced. However, inspectors identified significant concerns in relation to transition planning, with children not consistently supported to prepare for moving on and not always involved in decisions about their future. A Priority Action Notice was issued in relation to standards of care and support, requiring urgent improvement.
- 3.9 **Well-being** – Children have access to advocacy and are supported to understand their rights, although some reported they were not always consulted about decisions affecting their future. Health needs are met, and children are supported to engage with education, develop independence skills, and maintain important relationships.
- 3.10 **Care and Support** – Assessments and care planning are generally robust, with children making positive progress and risks reducing over time. However, transition planning was not consistently effective, with limited involvement of children and staff in decision-making. This resulted in some children experiencing short notice moves, prompting the issue of a Priority Action Notice.
- 3.11 **Environment** – The home environment is generally safe and suitable, with some improvements made since the previous inspection. However, aspects of the environment, including restricted access to communal areas at times, were not always reflective of a homely setting and required review.
- 3.12 **Leadership and Management** – The service benefits from an experienced and committed management team with effective oversight and quality assurance processes. Staffing arrangements are stable, with reduced reliance on agency staff. However, improvements were required to ensure care staff are fully involved in planning processes, particularly in relation to transitions.

Key inspection findings for Harwood House:

- 3.13 Harwood House was inspected on 3rd June 2025 and was rated Good across all four themes. The service provides long-term placements for young people with learning disabilities and/or autism, and inspectors found improvements since the previous inspection in care planning, agency vetting, and leadership oversight. Young people experience strong routines, excellent relationships with staff who know them well, and stable staffing arrangements. The environment is well maintained and adapted to young people's needs. No areas for improvement or Priority Action Notices were issued.
- 3.14 **Wellbeing** – Young people are treated with dignity and respect and supported to make choices. Communication systems, including interactive software and PECS (Picture Exchange Communication system) , enable young people to express their views. They have positive routines, healthy diets, and regular access to education and community-based activities. Emotional well-being is supported through consistent staff relationships and multi-agency collaboration. Parents and external professionals provided very positive feedback about the caring and committed approach of the team.
- 3.15 **Care and support** – Care planning is detailed and responsive. Staff know young people well, and personal plans and independence plans provide strong guidance. Transitions are generally well planned, and any concerns about suitability prompt multi-agency discussions. Medication administration is mostly robust, and errors are quickly addressed. Risks are well understood and managed safely, with a least-restrictive approach. Behaviour support plans and safeguarding arrangements are clear and embedded in practice. Inspectors noted staff dedication and high-quality work during challenging circumstances.
- 3.16 **Environment** - The home is well maintained, safe, and tailored to the needs of young people. Communal areas are warm and equipped with sensory resources. The garden is attractive and accessible, with sensory equipment and suitable facilities. Bedrooms reflect young people's preferences. While limited space can become challenging as young people grow older, the RI is reviewing future placement suitability to ensure the service continues to meet needs appropriately. Routine maintenance and health and safety checks are in place.
- 3.17 **Leadership and Management** – Harwood House has effective governance, strong leadership, and a compassionate staff team. The manager and deputy provide clear direction and promote a positive culture. The RI visits more frequently than required, completes thorough monitoring, and drives continued improvement. Recruitment processes have strengthened since the last inspection, and permanent staffing has increased, reducing reliance on agency support. Staff report good access to specialist and bespoke training, regular supervision, and strong managerial support.

Key inspection findings for Sunny Bank (second inspection):

- 3.18 Sunny Bank was inspected on 7th August 2025 and was rated Good across all four themes. Since the previous inspection, inspectors found clear improvements in transition planning, the consistency of care provided, and the overall oversight of

children's well-being. The service now demonstrates effective child-centred transition processes, strengthened risk assessments, and an improved guide to the home. Children reported feeling safe, listened to, and supported to understand and reduce risks to their well-being. Inspectors noted strong leadership, a trauma-informed approach, and continued improvement in the environment. No areas for improvement or Priority Action Notices were issued.

- 3.19 **Well-being** - Children benefit from a supportive and stable environment which promotes their well-being. Children's voices are clearly recorded in case records and they are involved in decisions about their day-to-day lives. Advocacy services visit regularly, and the updated written guide to the home provides better information about rights and entitlements in a child-friendly format. Children attend appointments, understand healthy lifestyles, participate in planning activities and meals, and engage well in education. Care staff promote independence skills appropriate for children's ages and needs. Risks to well-being have reduced, with care staff demonstrating strong safeguarding knowledge and confidence in trauma-informed practice. Relationships are positive, nurturing and consistent.
- 3.20 **Care and Support** – Children receive care and support designed around their individual needs and wishes. Assessments of suitability are thorough and consider the impact on children already living at the home. Transition planning, both into and out of the home, has significantly improved and the previous Priority Action Notice has been met. Personal plans and risk assessments are detailed, current, and reviewed regularly. The external behavioural analyst provides weekly consultation, contributing clear strategies to support children's development and emotional regulation. Records show children making positive progress, reinforced by strong communication with social workers.
- 3.21 **Environment** – Sunny Bank provides a warm, welcoming, and well-maintained environment. Communal areas are comfortable, clean, and appropriately furnished. Recent refurbishments include damp-proofing and redecoration, with further environmental improvements planned. Children personalise their bedrooms and contribute to decisions about decor. Outdoor facilities include a garden, bikes, a basketball hoop, and a small gym, alongside a temporary summer swimming pool. Health and safety is monitored through regular checks, and the removal of locks in communal areas has created a more homely atmosphere.
- 3.22 **Leadership and Management** – Sunny Bank benefits from strong leadership, good oversight, and a stable management structure. The RI visits regularly, completes detailed monitoring, and seeks feedback from children and staff. Monthly audits, quarterly performance reviews, and biannual quality-of-care reviews demonstrate a robust quality assurance process. Staffing is improving, with a mix of qualified and developing care staff. Agency use is limited and consistent, with risks mitigated. Staff receive regular supervision, extensive training, and speak positively about the support they receive.

Key inspection findings for Meadows View:

- 3.23 Meadows View was inspected on 3rd November 2025 and continues to operate across two provisions: emergency and assessment. The service was rated Good across Well-being, Care & Support and Leadership & Management, but Requires

Improvement in Environment. Inspectors noted significant progress since the previous inspection in relation to provider assessments, medication management, care planning, and trauma-informed practice. However, the environment still requires substantial work to create a homely, nurturing setting, and one Area for Improvement was identified relating to domesticity and emotional well-being.

- 3.24 **Well-being** - Children are treated with dignity and respect and supported to express their views. Advocacy is readily available, and guides to the home are accessible and child-friendly. Health needs are met, with strong links to education, routines, and positive activities. Children enjoy a wide range of leisure opportunities and benefit from token-based incentives linked to goals. Relationships with family and peers are supported, and celebrations and memory books are maintained. Safeguarding arrangements are robust.
- 3.25 **Care and Support** – Admissions are well managed, with thorough assessments that now reflect children’s ongoing stays and include children’s views. Personal plans are being developed further to strengthen the clarity of key information. The Behaviour Analyst provides structured assessments, direct work, and regular clinical reviews, ensuring care staff have clear guidance. Staff demonstrate increased confidence in trauma-informed approaches, and incidents are followed by debriefs. Medication management has improved, with regular oversight and prompt action where needed. Feedback from social workers and staff indicates holistic, child-centred practice.
- 3.26 **Environment** – The environment, while safe and functional, does not currently provide a sufficiently homely, nurturing atmosphere. Communal furniture and fixtures (such as bolt-locked kitchen doors and heavy-duty fittings) detract from domesticity. Outbuildings are underused, and some outdoor spaces are inaccessible due to risks. While some areas have improved—with softer carpets and better decor—much of the building still feels institutional. Inspectors confirmed a need for continued investment and redesign to support children’s emotional well-being.
- 3.27 **Leadership and Management** – Leaders and managers have addressed most areas from the previous inspection and are committed to ongoing improvement. Delayed transitions continue to create pressure on the service, although the RI and manager work to minimise impact. Quality assurance systems are strong, with regular RI visits, audits and developing quality of care reports. Staffing is stable, with consistent use of agency where required and strengthened recruitment processes. Staff receive training aligned with children’s needs, and morale is improving.

Areas of Improvement and Priority Actions Notices

- 3.28 It is noted that a Priority Action Notice was issued at Sunny Bank following the February 2025 inspection; however, this was subsequently addressed and confirmed as met at the August 2025 inspection. Previous areas for improvement have been progressed across services. One area for improvement was identified within the 2025 inspections and is set out below.
- 3.29 CIW identified one Priority Action Notice at the inspection of Sunny Bank in February 2025, however this was confirmed as met at the second inspection of the service in August 2025 –

Priority Action Notice – Sunny Bank	
Regulation	Summary
21	<p>Children were not consistently supported to prepare for moving on, with limited involvement of both children and care staff in transition planning. This related to a specific transition during the inspection period, which the Local Authority subsequently challenged through the inspection response process.</p> <p>The required improvements were addressed and confirmed as met at the subsequent inspection in August 2025.</p>

CIW identified one area of improvement across all inspections in 2025 –

Area for improvement – Meadows View	
Regulation	Summary
43/44	<p>It was identified that the building is not homely enough, the design of the building has been noted previously. CIW have given some guidance on how this can be further improved, and this will be actioned.</p>

3.30 The area for improvement is being addressed and achievement of the actions is monitored through the Council's regulatory tracker which is reported to Governance and Audit Committee and through the Corporate Performance Assessment process.

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.

4.2 Despite no equality impact assessment being conducted the information contained in the report positively describes support being made available to those providing care.

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 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 - Develop sustainable residential care strategies that provide stability and continuity for children and young people, ensuring their long-term well-being and successful transitions into adulthood.
- Prevention – Implement proactive measures to reduce placement disruptions, focusing on early intervention and support for children and families to avoid crises requiring emergency placements.
- Integration – Strengthen the coordination between residential services, education, health, and other agencies to ensure seamless delivery of care that addresses the holistic needs of children accessing our services.
- Collaboration – Foster partnerships with external professionals, families, and communities to enhance the quality of care and ensure children’s voices are central to all decisions affecting their lives.
- Involvement – Ensure children’s voices are at the heart of all decision-making processes by engaging them meaningfully in the planning, reviewing, and development of their care plans. Actively seek their feedback and input to shape services that reflect their needs, wishes, and aspirations, empowering them to have a direct role in decisions that affect their lives.

6. Climate Change and Nature Implications

6.1 There are no climate change and nature implications associated with this report.

7. Safeguarding and Corporate Parent Implications

7.1 It is a regulatory requirement that BCBC’s Safeguarding Policy meets Part 8 of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 which is to ensure service providers have in place the mechanisms to safeguard vulnerable individuals to whom they provide care and support. This includes arrangements that:

- Support vulnerable individuals using the service;
- Support and underpin staff knowledge, understanding and skill in identifying risks and action to take where abuse, neglect or improper treatment is suspected or identified; and
- Ensure the service provider works collaboratively with partners to prevent and take action where abuse, neglect or improper treatment is suspected or identified.

8. Financial Implications

8.1 There are no financial implications associated with this report.

9. Recommendation

- 9.1 Corporate Parenting Committee is recommended to note the outcome of the CIW Inspections of the Council's Regulated Services in Children and Families Service.

Background documents

None

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Meeting of:	CABINET COMMITTEE CABINET CORPORATE PARENTING
Date of Meeting:	28 MAY 2026
Report Title:	CARE INSPECTORATE WALES (CIW) INSPECTION REPORT OF WESTERN BAY ADOPTION SERVICE NOVEMBER 2025
Report Owner / Responsible Chief Officer/Cabinet Member.	DEPUTY LEADER / CABINET MEMBER FOR SOCIAL SERVICES AND WELLBEING CORPORATE DIRECTOR – SOCIAL SERVICES AND WELLBEING
Responsible Officer:	NICHOLA ROGERS – REGIONAL ADOPTION MANAGER
Policy Framework and Procedure Rules:	The content of the report does not have any impact on policy frameworks or procedures.
Executive Summary:	The report is to update the Cabinet Committee Corporate Parenting of the recent Care Inspectorate Wales inspection of the Regional Adoption Service which was undertaken in September 2025 with the final report being published in November 2025. The Regional Service is based on the old Western Bay footprint (Bridgend, Neath Port Talbot and Swansea), and this is set out in legislation. The report highlights a number of areas of good practice that is being undertaken by the service and concludes with identified areas of improvement.

1. Purpose of Report

- 1.1 The purpose of this report is to provide information to the Cabinet Committee Corporate Parenting about the recent Care Inspectorate Wales inspection report which can be found in **Appendix 1**. Care Inspectorate Wales (CIW) inspected Western Bay Adoption Service (WBAS) between 1 September and 5 September 2025.

2. Background

- 2.1 CIW reviews Local Authority social services functions, including functions in relation to adoption, on behalf of Welsh Ministers in accordance with Section 149B of the Social Services and Well-being (Wales) Act 2014. The last inspection of the service took place in 2018.
- 2.2 The inspection considered the following key questions under relevant headings.

Well-being

- Are children's well-being needs appropriately safeguarded in achieving permanence?
- Is the service provided accessible, safe and responsive to people's needs?

Care and Support

- Do children, birth and adoptive families achieve good outcomes through the provision of support which promotes their overall well-being?

Leadership and Governance

- Do the leadership and governance arrangements ensure the provision of high quality services for people?

3. Current situation/ Findings

3.1 Summary of Inspection Findings

The service has a central management structure, pooled budget, and shared IT systems enabling coordinated decision-making and consistent delivery of adoption services. Senior leaders from each authority participate in regular management board meetings to oversee strategic direction, resource allocation, and service development, underpinned by a formal partnership agreement.

WBAS applies National Adoption Service (NAS) policies and procedures consistently. The Statement of Purpose (SOP) is reviewed annually and is accessible. Some governance documents require minor updates to ensure alignment with current requirements.

Assessments for prospective adopters are comprehensive, with safeguarding and trauma-informed practice embedded throughout. Adopters feel supported and informed, and quality assurance processes help maintain standards.

Family finding and matching processes prioritise children's needs. Collaborative planning and trauma nurture timelines support positive outcomes. Transition arrangements (the planned process of moving a child from their present carers into their adoptive family) are managed with input from foster carers and adopters.

Adoption support services for children, adopters, and birth families include therapeutic interventions, peer groups, and practical assistance. The adoption support team provides advice and regular check-ins. Families report positive experiences, and there are no waiting lists for support.

Leadership is visible, with clearly defined roles and responsibilities. The

workforce benefits from supervision and professional development. Managers monitor performance and service delivery, with ongoing work to strengthen quality assurance and learning from audits.

Recruitment of prospective adopters is supported by targeted marketing and flexible budgeting, with campaigns delivered in English and Welsh. Recruitment campaigns are shaped by input from the Adopters Marketing Group.

WBAS securely manages and safely stores records, with clear arrangements for access and retention. Embedded systems facilitate efficient file retrieval, and the premises are suitable and meet the needs of the service.

Strengths include therapeutic support, robust assessment and matching, and a skilled workforce. Areas identified for improvement are updating governance documents and improving communication about adoption support services and entitlements.

3.2 Areas of Good Practice Identified:

WBAS works in partnership with birth parents through sensitive and flexible approaches.

Life journey work is embedded in planning for children and aligns with the NAS Life Journey Work Good Practice Guide.

Adoption support services are a key strength. The team provides responsive, accessible, and tailored support to meet the needs of children, adopters, and birth families.

The Psychological and Therapeutic Service delivers a robust, multi-disciplinary model that is proactive, accessible, and responsive.

Practitioners focus on the emotional significance of contact for adopted children, birth parents, siblings, and significant others.

WBAS delivers timely and accessible intermediary services that support adopted adults and birth relatives to understand their histories and access information.

WBAS promotes a strong, supportive culture where practitioners feel well supported by colleagues and managers. Leaders ensure regular supervision, peer support, and a focus on well-being. The team ethos is described as positive, inclusive, and outcome focused.

WBAS delivers a proactive and well-resourced marketing approach, supported by a dedicated marketing officer and a predetermined budget. Campaigns are routinely delivered in English and Welsh, and the website includes an interactive adoption checker to support early engagement.

3.3 Areas for Improvement

These are considered in two separate categories:

3.4 Priority Areas for Improvement

WBAS **must** ensure that quality-of-service reviews fully comply with Regulation 39(1) of the Local Authority Adoption Services (Wales) Regulations 2019, with effective arrangements in place for monitoring, reviewing, and improving the quality of the service, including the evaluation of engagement, incidents, complaints, and audits to inform future service development.

WBAS **must** ensure that its records management arrangements fully comply with the requirements of Regulation 28(1) and Schedule 3 of the Local Authority Adoption Services (Wales) Regulations 2019.

3.5 Recommendations

WBAS **should** continue to strengthen its use of Welsh Early Permanence (WEP) to ensure consistent and timely permanence planning.

WBAS **should** strengthen communication and written materials so that all adopters are fully informed about the range of adoption support services and entitlements available to them at every stage.

WBAS **should** continue to finalise arrangements to ensure equitable medical advice for all children across the region.

WBAS **should** continue prioritising diversity in panel members to ensure the panel represents the population it serves.

WBAS **should** ensure that Agency Decision Maker (ADM) decisions are clearly recorded in the minutes, including analysis and rationale, to strengthen transparency and accountability in line with best practice.

WBAS **should** continue to strengthen its marketing strategy and ensure it remains dynamic, inclusive and aligned to national priorities to support the recruitment of sufficient adopters.

WBAS **should** ensure the partnership agreement is updated as a priority to support effective governance and compliance.

3.6 Actions and Next Steps confirmed By CIW

- CIW required that WBAS compile an improvement plan and share this with CIW by 30 December 2025.

- CIW will review the improvement plan and seek further assurance of progress. This will be through a meeting with the Head of Children’s Services of the host local authority as well as the Regional Adoption Manager (RAM) within 18-24 months of publication of the report.
- CIW will consider further activity to be assured of continued improvement and will consider bespoke engagement activity to support its ongoing monitoring.

The service completed the required action plan (**see Appendix 2**) and this was submitted to CIW in November 2025. The action plan is reviewed quarterly by the Management Board and CIW are provided with quarterly updates in respect of the identified actions. Many of the actions identified are already complete.

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 Act (Wales) (SSWBA) 2014, 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 Wellbeing 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 relevant well-being goals have been considered in this report:

- Long Term – Social Services is demand led and the SSWBA focuses on sustainable wellbeing 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 transformation of services continues to be a priority.
- Integration – the implementation of the SSWBA and the Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015 requires local authorities to work with partners, particularly the NHS and Education, to ensure care and support for people and support for carers is provided. The report evidences work with partners to enable children to be placed in permanent arrangements.

- Collaboration – The collaborative approaches described in the report, are managed and monitored through the regional collaborative management board and the National Adoption Service Advisory Group and Governance Board where there is local authority and sector stakeholder representation.
- 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.

6. Climate Change and Nature Implications

- 6.1 The service strives to work in line with the Councils climate change ambitions.

7. Safeguarding and Corporate Parent Implications

- 7.1 The service works under Bridgend County Borough Council's Safeguarding Policy to safeguard and promote the wellbeing of children, young people and adults at risk of abuse or neglect and to ensure that effective practices are in place throughout the Regional Adoption Service.

8. Financial Implications

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

9. Recommendation(s)

- 9.1 It is recommended that the Cabinet Committee Corporate Parenting considers and notes the CIW inspection report and acknowledge that the Management Board will oversee the identified action plan.

Background documents

None

Inspection Report

Western Bay Adoption Service



This document is also available in Welsh.
Mae'r ddogfen hon hefyd ar gael yn Cymraeg.

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1. Introduction

- 1.1 Care Inspectorate Wales (CIW) inspected Western Bay Adoption Service (WBAS)¹ between 1 September and 5 September 2025.
- 1.2 CIW reviews local authority social services functions, including functions in relation to adoption, on behalf of Welsh Ministers in accordance with Section 149B of the Social Services and Well-being (Wales) Act 2014.
- 1.3 The Adoption and Children Act 2002 (Joint Adoption Arrangements) (Wales) Directions 2015 places statutory duties on local authorities to work collaboratively with each other. The primary purpose of these directions is to ensure that effective joint arrangements are in place between local authorities, to ensure consistent and effective adoption services across Wales. Regional Adoption Services across Wales form part of a three-tier structure to provide adoption services across Wales. The three-tier structure forms the National Adoption Services (NAS). Whilst the focus of this inspection is on WBAS, it is clear they benefit from support provided by other structures in the national service.
- 1.4 The WBAS Regional Adoption Collaborative comprises of the following local authorities, Swansea, Neath Port Talbot and Bridgend. Swansea local authority is the host local authority for this region.
- 1.5 The focus of the inspection was on how the service promotes the well-being and safety of children through the provision of permanency with adoptive families, who can safely meet their needs and improve the likelihood of them achieving the best possible outcomes. We evaluated the leadership and governance arrangements that support service delivery, and how effective it is in achieving quality outcomes for children.
- 1.6 We considered the following key questions under relevant headings.

Well-being

- Are children's well-being needs appropriately safeguarded in achieving permanence?
- Is the service provided accessible, safe and responsive to people's needs?

Care and Support

- Do children, birth and adoptive families achieve good outcomes through the provision of support which promotes their overall well-being?

¹ The Western Bay Regional Adoption Collaborative refers to itself as Western Bay Adoption Service (WBAS) This term will therefore also be used throughout the report.

Leadership and Governance

- Do the leadership and governance arrangements ensure the provision of high-quality services for people?

1.7 Glossary of Terminology and Quantity Definitions See Appendix 2 and 3.

2. Summary of Inspection Findings

- 2.1 WBAS is a regional collaborative formed by Swansea, Neath Port Talbot, and Bridgend local authorities. The service has a central management structure, pooled budget, and shared IT systems enabling coordinated decision-making and consistent delivery of adoption services. Senior leaders from each authority participate in regular management board meetings to oversee strategic direction, resource allocation, and service development, underpinned by a formal partnership agreement.
- 2.2 WBAS applies NAS policies and procedures consistently. The Statement of Purpose (SOP) is reviewed annually and is accessible. Some governance documents require minor updates to ensure alignment with current requirements.
- 2.3 Assessments for prospective adopters are comprehensive, with safeguarding and trauma-informed practice embedded throughout. Adopters feel supported and informed, and quality assurance processes help maintain standards.
- 2.4 Family finding and matching processes prioritise children's needs. Collaborative planning and trauma nurture timelines support positive outcomes. Transition arrangements (the planned process of moving a child from their present carers into their adoptive family) are managed with input from foster carers and adopters.
- 2.5 Adoption support services for children, adopters, and birth families include therapeutic interventions, peer groups, and practical assistance. The adoption support team provides advice and regular check-ins. Families report positive experiences, and there are no waiting lists for support.
- 2.6 Leadership is visible, with clearly defined roles and responsibilities. The workforce benefits from supervision and professional development. Managers monitor performance and service delivery, with ongoing work to strengthen quality assurance and learning from audits.

- 2.7 Recruitment of prospective adopters is supported by targeted marketing and flexible budgeting, with campaigns delivered in English and Welsh. Recruitment campaigns are shaped by input from the Adopters Marketing Group.
- 2.8 WBAS securely manages and safely stores records, with clear arrangements for access and retention. Embedded systems facilitate efficient file retrieval, and the premises are suitable and meet the needs of the service.
- 2.9 Strengths include therapeutic support, robust assessment and matching, and a skilled workforce. Areas identified for improvement are updating governance documents and improving communication about adoption support services and entitlements.

3. Findings



Well-being

- 3.1 WBAS adopts and implements NAS policies and guidance across its work. Practitioners regularly review these frameworks to ensure consistent practice. The service reviews its SOP annually, setting out the aims, objectives, and standards of WBAS. The SOP supports transparency, accountability, and continuous improvement.
- 3.2 The service demonstrates a clear commitment to the Welsh language and accessibility. Practitioners promote the active offer in line with the ²'More Than Just Words' framework and ensures people can access services in their preferred language. Practitioners routinely provide information in Welsh and English, and they offer translation support where needed. Adopters confirm they receive information in their language of choice, and marketing materials are produced bilingually.
- 3.3 Advocacy is embedded in practice. Practitioners actively support children, young people and birth parents to express their views, and ensure these are considered in planning and decision-making. People are engaged in assessing and improving the service through youth groups, support forums and feedback channels. Practitioners gather feedback and use it to shape service delivery, demonstrating a clear commitment to meaningful and inclusive participation.

² More than just words is Welsh Government's strategic framework for promoting the Welsh language in health and social care. A link to the document can be found here: [More than just words \(gov.wales\)](https://gov.wales/more-than-just-words).

- 3.4 The service embeds safeguarding as a shared priority. Practitioners understand their responsibilities, identify and respond to risk confidently, and escalate significant events appropriately. They use accessible policies and procedures, and routinely address safeguarding in supervision, planning, and panel discussions. Disruption meetings are held when needed and share learning across the service. Practitioners maintain a person-centred focus on well-being and safety, applying trauma-informed practice to reflect peoples lived experience.
- 3.5 Assessment of prospective adopters is robust and comprehensive, delivered by an experienced workforce. WBAS follows NAS guidance and uses structured templates to ensure consistency across the region. Practitioners complete assessments in a timely and thorough manner, providing clear analysis of strengths, vulnerabilities and support networks. Quality assurance mechanisms are in place, and managers provide feedback to improve documentation. Adopters report feeling well supported and informed during the process. One adopter commented, *“our experience of WBAS has been nothing but positive, professional, supportive and wonderful. We were kept up to date throughout the process.”*
- 3.6 Training for prospective adopters is reflective of modern adoption practice. Sessions cover key topics including trauma, sibling adoption, contact arrangements and the realities of parenting children with complex needs. A range of professionals deliver training, including psychologists, legal advisors and birth parent support workers. Observed workshops were well-paced and facilitated open discussion. Adopters value the opportunity to reflect on their parenting and understand the impact of early life experiences. While most feedback is positive, a small number of adopters suggested training could include more practical content.
- 3.7 WBAS works in partnership with birth parents through sensitive and flexible approaches. Practitioners demonstrate persistence in engaging birth families and ensuring their views are heard. Birth parents are supported to contribute to life journey materials and are offered facilitated meetings with adopters where appropriate. Birth parents report feeling informed and supported, with one noting, *“the service helps me write to my son... they understand my disabilities and difficulties and help me the best they can.”* A dedicated birth parent support group is in place, and practitioners provide practical assistance such as transport and signposting to other services. **This is good practice.**
- 3.8 WBAS is embedding the Welsh Early Permanence (WEP) framework³ with support from the fostering service. At the time of inspection, two children had

³ [Welsh Early Permanency Framework.pdf](#)

been placed under WEP, with additional prospective adopters progressing through the scheme. Practitioners introduce WEP early in adopter training, and information materials have been developed in collaboration with the Adopters Marketing Group. Panel members have received training on the framework. The framework is not yet fully embedded, and there is a need for more consistent understanding and application among practitioners. **WBAS should continue to embed the WEP framework and ensure a coherent and systematic approach to recording decisions and rationale in care plans, Child's Assessment Reports for Adoption, and Prospective Adopter Reports, in line with the NAS Good Practice Guide.**



Care and Support

- 3.9 The family finding team is proactive and knowledgeable. Practitioners work closely with local authority colleagues, to ensure children's needs are central to decision making. Delegated budget arrangements enable timely decisions about external placements, helping to avoid unnecessary delay. Practitioners remain attentive to children's identity and cultural background and gather information from birth families to inform profiles.
- 3.10 Most matching decisions are thorough, trauma-informed, and child-centred. Practitioners use trauma nurture timelines for every child. For children over three, sibling groups, or those with complex needs, an 'Understanding the Child's Day' session to explore the child's history and experiences is prioritised. Where this is not held, practitioners work with prospective adopters and their social workers to clarify the child's background. Matching is described by practitioners and adopters as collaborative and well explained, with careful analysis and professional advice embedded in practice. Managers chair matching meetings to provide leadership, and regular review by the Regional Adoption Manager (RAM) promotes consistency. Most children are placed without avoidable delay, though a few adopting families report delays or gaps in communication, particularly during practitioner changes or absences.
- 3.11 Practitioners manage transitions by working closely with foster carers, adopters, and other professionals to ensure each move is well prepared and paced according to the child's individual needs. Adopters receive key information about the child's background and daily life, enabling them to provide informed care. Regular reviews track progress and address emerging needs. Both foster carers and adopters report feeling included and supported.

- 3.12 Adoption support plans are developed collaboratively with adopters and relevant professionals, tailored to individual circumstances, and include input from specialists where appropriate. Practitioners review and update support plans regularly.
- 3.13 Life journey work is embedded in planning for children and aligns with the NAS Life Journey Work Good Practice Guide. Practitioners co-produce life journey materials in collaboration with foster carers, birth families, and adopters. Specialist life story workers support practitioners to improve quality and consistency of this work. All life journey work undergoes a robust quality assurance process, with practitioners, managers, and the adoption panel reviewing materials. The WBAS Therapy and Psychology Team also delivers life journey work as part of its multi-disciplinary offer, supporting children's understanding of their backgrounds and identity. **This is good practice.**
- 3.14 Adoption support services are a key strength. The team provides responsive, accessible, and tailored support to meet the needs of children, adopters, and birth families. WBAS has developed a virtual hub and a dedicated life journey/contact hub, enabling families to access advice and support promptly, with clear signposting to appropriate interventions and workshops. A wide range of support groups are available for adopters, birth parents, and young people. Regular check-ins at 12 months and three years' post-adoption help identify emerging needs at an early stage. The youth group and Leaplets sensory playgroup are well regarded by young people and their families, supporting well-being and ensuring their voices are heard. **This is good practice.** However, not all adopters are aware of the full range of adoption support services available, including their entitlement to lifelong support. **WBAS should strengthen communication and written materials to ensure all adopters understand what support is available and how to access it at any stage post-adoption.**
- 3.15 The Psychological and Therapeutic Service delivers a robust, multi-disciplinary model that is proactive, accessible, and responsive. **This is good practice.** Early identification of needs and a flexible approach to support ensures timely interventions, with no waiting lists. Families benefit from a wide range of therapeutic interventions. The service is funded by Neath Port Talbot and Swansea, enabling a substantial and experienced team to deliver support. While all families can access group activities, consultations, and core support, WBAS provides individual therapeutic input directly for Swansea and Neath Port Talbot families. For Bridgend families, this is managed externally, resulting in some variation in access and approach. WBAS works closely with Bridgend to minimise any impact from these differences and ensure all families receive support.

- 3.16 Practitioners focus on the emotional significance of contact for adopted children, birth parents, siblings, and significant others. Training is provided for adopters, and conversations with birth parents address the complexities of contact. Creative and flexible approaches are standard in care planning and reflect current adoption expectations. Practitioners revisit and review contact arrangements to ensure they remain in the child's best interests. Practitioners maintain a focus on the child's experience and emotional safety. **This is good practice.**
- 3.17 WBAS delivers timely and accessible intermediary services that support adopted adults and birth relatives to understand their histories and access information. Practitioners sensitively provide clear explanations, emotional support, and practical assistance, including counselling, accessing adoption records and making contact. Practitioners demonstrate skill and sensitivity in managing complex histories, and managers oversee the quality and responsiveness of the service. There is no waiting list for access to records or intermediary support. **This is good practice.**
- 3.18 Panel arrangements are robust. Members demonstrate strong professional scrutiny and receive induction, annual appraisal, and ongoing training. They bring diverse expertise, including lived experience in adoption and fostering, as well as backgrounds in health and education. Effective business support and professional advisors, including medical and legal input, strengthen the panel's work. However, attendance by the Bridgend Medical Adviser is inconsistent. **WBAS should continue to finalise arrangements to ensure equitable medical advice for all children across the region.**
- 3.19 Weekly panel meetings support timely decision-making. Panel members apply a welfare checklist to ensure recommendations are child-centred and evidence-based. Panel members take their responsibilities seriously, recognising the life-changing impact of their recommendations. They also provide constructive scrutiny to ensure robust oversight of assessments and matching decisions. Any shortfalls in the quality of materials are addressed by the panel advisor before meetings.
- 3.20 Prospective adopters are encouraged to express their views, with adoption social workers offering support through both face-to-face and virtual meetings. Panel members have identified the need to diversify membership to better reflect the community served. A recruitment drive is underway, and **WBAS should continue prioritising diversity in panel members to ensure the panel represents the population it serves.**
- 3.21 Panel minutes are mostly of a good standard, and regular business meetings address operational matters. **WBAS should ensure that the Agency**

Decision Maker (ADM) decisions are clearly recorded in the minutes, including analysis and rationale, to strengthen transparency and accountability in line with best practice.



Leadership & Management

- 3.22 Leaders demonstrate a clear vision and ambition for the service. Practitioners report that roles and responsibilities are well defined, with 100% of practitioners in the CIW survey confirming this. The Management Board meets regularly, maintaining oversight of collaboration, performance, budget, and safeguarding. Action logs support follow-through on decisions, and practitioners describe leaders as visible, approachable, and supportive.
- 3.23 Leaders model a strong commitment to partnership working, with clearly defined relationships with education departments, health boards, and voluntary adoption agencies. Practitioners and managers describe effective collaboration with partners and a shared understanding of how whole systems contribute to and promote well-being and permanence for children.
- 3.24 The pooled budget arrangement is a strength, enabling timely and regionally consistent decisions about resources and support. The Management Board receives detailed reports and collaborates closely with local authority finance teams to ensure transparency and accountability. The Management Board is currently reviewing the contribution formula to promote equity across local authorities.
- 3.25 Strategic plans are informed by regular analysis of need, with performance data and referral trends reviewed by the Management Board to shape operational priorities. The business plan aligns with national adoption objectives and is updated quarterly. However, the regional partnership agreement has not been substantively reviewed or updated since it was developed and does not fully reflect current legislation. Leaders have recognised this and have begun work to update the agreement, with plans to formally review and revise it following current budget and service structure work. **WBAS should ensure the partnership agreement is updated as a priority to support effective governance and compliance.**
- 3.26 Quality assurance arrangements are established, with regular Quality-of-Service Reviews and performance reports providing a clear overview of service activity and achievements. Managers and the Management Board maintain effective oversight, supporting a strong culture of learning and continuous

improvement. While a range of audit tools and processes are in place, not all audits are fully embedded or consistently used to inform service development. **WBAS must strengthen the systematic analysis of feedback, incidents, and audits within Quality-of-Service Reviews to ensure learning and improvement actions are clearly identified and documented.**

- 3.27 WBAS promotes a strong, supportive culture where practitioners feel well-supported by colleagues and managers. Leaders ensure regular supervision, peer support, and a focus on well-being. The team ethos is described as positive, inclusive, and outcome focused. Practitioners value the visible presence and clear communication of the RAM and team managers, who maintain robust oversight of practice. **This is good practice.**
- 3.28 WBAS demonstrates a strong commitment to delivering adoption services through a suitably qualified, experienced and competent workforce. Practitioners benefit from regular supervision and annual appraisal, with a strong emphasis on ongoing professional development and access to mandatory and specialist training. The workforce is stable and sufficient to meet current service demands, with practitioners reporting manageable caseloads and access to additional support when needed.
- 3.29 Practitioners are employed by different local authorities within the region, which can lead to differences in employment practices and access to certain resources. Despite this, practitioners describe a strong sense of shared purpose and collaboration.
- 3.30 WBAS delivers a proactive and well-resourced marketing approach, supported by a dedicated marketing officer and a predetermined budget. Campaigns are routinely delivered in English and Welsh, and the website includes an interactive adoption checker to support early engagement. The Adopters Marketing Group contributes to shaping communications by ensuring that materials reflect lived experience and promotes inclusive messaging. **This is good practice.** The service maintains regular contact with potential applicants and adapts its marketing activity to maximise interest. Despite these strengths, WBAS continues to face the national challenge of a limited pool of adopters. **WBAS should continue to strengthen its marketing strategy and ensure it remains dynamic, inclusive and aligned to national priorities to support the recruitment of sufficient adopters.**
- 3.31 Practitioners securely store records, with clear arrangements for ownership, access, and retention. Information is saved within a central IT system, and file retrieval is straightforward. The premises are suitable for secure storage, and systems are in place to maintain the adoption register. Practitioners demonstrate a clear understanding of data protection requirements. While local

authority retention policies are in use and broadly align with legislative expectations, the service lacks a records management policy that sets out the purpose, format, confidentiality, secure storage, and access arrangements for adoption records set out in the Code of Practice for Adoption Services. **WBAS must ensure its records management arrangements fully meet all statutory and practice requirements for adoption services.**

4. Priority Areas for Improvement

- 4.1 WBAS **must** ensure that quality-of-service reviews fully comply with Regulation 39(1) of the Local Authority Adoption Services (Wales) Regulations 2019, with effective arrangements in place for monitoring, reviewing, and improving the quality of the service, including the evaluation of engagement, incidents, complaints, and audits to inform future service development.
- 4.2 WBAS **must** ensure that its records management arrangements fully comply with the requirements of Regulation 28(1) and Schedule 3 of the Local Authority Adoption Services (Wales) Regulations 2019.

5. Recommendations

- 5.1 WBAS **should** continue to strengthen its use of WEP to ensure consistent and timely permanence planning.
- 5.2 WBAS **should** strengthen communication and written materials so that all adopters are fully informed about the range of adoption support services and entitlements available to them at every stage.
- 5.3 WBAS **should** continue to finalise arrangements to ensure equitable medical advice for all children across the region.
- 5.4 WBAS **should** continue prioritising diversity in panel members to ensure the panel represents the population it serves.
- 5.5 WBAS **should** ensure that ADM decisions are clearly recorded in the minutes, including analysis and rationale, to strengthen transparency and accountability in line with best practice.
- 5.6 WBAS **should** continue to strengthen its marketing strategy and ensure it remains dynamic, inclusive and aligned to national priorities to support the recruitment of sufficient adopters.

- 5.7 WBAS **should** ensure the partnership agreement is updated as a priority to support effective governance and compliance.

6. Next Steps

CIW requires that WBAS compile an improvement plan and share this with CIW by 30 December 2025.

CIW will review the improvement plan and seek further assurance of progress. This will be through a meeting with the Head of Children's Services of the host local authority as well as the RAM within 18-24 months of publication of the report.

CIW will consider further activity to be assured of continued improvement and will consider bespoke engagement activity to support its ongoing monitoring.

7. 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



Julie Heal
Head of Adult and Children's Services Inspection
Care Inspectorate Wales

Appendix 1

Methodology

Self-Evaluation

- WBAS was requested to complete a Self-Evaluation to reflect on their own performance in specific areas of service.

Fieldwork

We reviewed the experiences of 20 people through the review and tracking of their records. We reviewed 17 records and tracked three.

- Tracking a person's record may include having conversations with the person in receipt of services, their family or carers, adoption social worker, childcare social worker, manager, and where appropriate, other professionals involved.
- We engaged, through interviews and/or focus groups, with 25 people receiving services and/or their carers (This included adoptive parents, foster carers and birth parents).
- We engaged, through interviews and/or focus groups, with 52 practitioners and managers (This included childcare social workers, adoption social workers, team managers, Independent Reviewing Officers, fostering managers, the Regional Adoption Manager, and the Head of Children's Services for WBAS host local authority).
- We engaged, through focus groups, with 15 representatives from partner agencies.
- We spoke with one Panel Chair and nine panel members.
- We spoke with eight children with their adopted parents present.
- We reviewed a sample of staff supervision files.
- We observed an adoption panel, Adopters Marketing Group, adopters workshop training session, birth mum's support group and play group with adopters and their children.
- We reviewed supporting documentation sent to CIW for the purpose of the inspection.
- We administered surveys to WBAS practitioners and managers, partner organisations and people. We received responses from 49 practitioners/managers from WBAS, 84 from people and nine from relevant stakeholders. Six responses were received from birth families.

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

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.

Appendix 2

Glossary of Terminology

Term	What we mean in our reports and letters
Must	Improvement is deemed necessary in order for the RAC to meet a duty outlined in legislation, regulation or code of practice. The RAC is not currently meeting its statutory duty/duties and must take action.
Should	Improvement will enhance service provision and/or outcomes for people. It does not constitute a failure to meet a legal duty at this time; but without suitable action, there is a risk the RAC may fail to meet its legal duty/duties in future.
Good practice	Identified areas of strength within the RAC. This relates to practice considered innovative and/or which consistently results in positive outcomes for people receiving statutory services.
Well-being	A principle of the Social Services and Well-being (Wales) Act 2014 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.

Appendix 3

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%



Improvement Plan – Inspection September 2025 Updated April 2026

Green -Complete **Blue**- in process **Red** not yet started

Task	Actions	Date to be Completed by	Person responsible	RAG status
MUST	Priority Area for Development			
WBAS must ensure that quality-of-service reviews fully comply with Regulation 39(1) of the Local Authority Adoption Services (Wales) Regulations 2019, with effective arrangements in place for monitoring, reviewing, and improving the quality of the service, including the evaluation of engagement, incidents, complaints, and audits to inform future service development.		Ongoing	RAM	
WBAS must ensure that its records management arrangements fully comply with the requirements of Regulation 28(1) and Schedule 3 of the Local Authority Adoption Services (Wales) Regulations 2019	Record Management Policy to be Drawn up	Draft policy to be shared with the Three information LA Governance teams by 1 st December 2025.	RAM	Update - Policy drafted and send to NPT data officer for first consideration in January 2026

		To be presented to Management Board for final sign off February 2026		
Should - Improvements				
WBAS should continue to strengthen its use of WEP to ensure consistent and timely permanence planning.	WBAS WEP process maps finalised	10 th November 2025	R&A FF TM	Due to TM sickness this will be arranged for September 2026
	Focus within Marketing strategy on the recruitment of New WEP carers	Ongoing	RMO	
	Learning Event on for professionals across the region to raise the profile of WEP and to share learning from the WEP cases worked by the region	May 2026	R&A TM RAM	
WBAS should strengthen communication and written materials so that all adopters are fully informed about the range of adoption support services and entitlements available to them at every stage	Adoption support flyer to be designed Flyer to be sent to all community venues and services including statutory teams and education.	By end of November 2025	RMO Adoption Support Manager	Information being sent out 1 st February
	Website pages on adoption support to be refreshed.	By December 2025	MRO	Work underway to be completed by July 2026

	Adoption support blogs to be shared on Social media pages.	Ongoing – monthly post to be run.	RMO RMO	
WBAS should continue to finalise arrangements to ensure equitable medical advice for all children across the region.	Operate similar model for the arrangement of Adoption medicals as in NPT and SC For the MA in Cwm Taf to attend adoption panel for BCBC cases having read the panel pack.	By 1 st January 2026	BCBC MA BCBC lead PO CWM TAF HB	Initial discussions have taken place with the MA's in BCBC MA will be invited to attend BCBC cases at panel
WBAS should continue prioritising diversity in panel members to ensure the panel represents the population it serves.	New Panel Members (make adopters and recent adoptive parents) to be inducted and commence panel by 20 th November. Adopted Young person to be recruited.	20 th November 1 st January 2026	R & A TM YP and BP worker	Panel members start delayed due to IT equipment – will start end of Jan 2026 As a first step WBAS young people have put together questions that can be put to adopters at approval and matching

	Ways of introducing the voice of the adopted child and birth parents to be considered further.	1 st April 2026		panel. This to be discussed at the panel business meeting in April 2026
WBAS should ensure that ADM decisions are clearly recorded in the minutes, including analysis and rationale, to strengthen transparency and accountability in line with best practice.	Proforma to be developed for ADM decisions in respect of Matches and Adopter approvals	Immediate	RAM	Completed 10 th September -Proformas are in place.
WBAS should continue to strengthen its marketing strategy and ensure it remains dynamic, inclusive and aligned to national priorities to support the recruitment of sufficient adopters	Marketing strategy in place which is reviewed regularly. A full review of the marketing strategy will be presented to Board in April	New strategic plan will be developed in March 2026	MRO/R&A TM and RAM	Quarterly Review
WBAS should ensure the partnership agreement is updated as a priority to support effective governance and compliance.	Partnership agreement to be reviewed and amended	Management Board in Jan/Feb will approve updated Agreement	RAM WBAS Management Board	Draft to be presented to Board in April 2026 for wider approval by the 3 LA's
CIW requires that WBAS compile an improvement plan and share this with CIW by 30 December 2025	This plan will be updated and provided to CIW and reviewed at quarterly Management Board meetings	30 th December 2025	RAM	Provided to CIW in November 2025

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