Name of Audit / regulator	Oversight and Date	Recommendation / proposal for improvement	Responsible Officer	Delivery Date	Action Update Q2 2024-25	BRAYG Q2
Audit Wales, Financial Sustainability Review (Aug 2024)	COSC TBC	R1 To strengthen the Council's approach to financial sustainability, the Council should develop a savings plan across the timescale of the MTFP, to clearly show how the funding gap will be addressed or clearly communicate the challenge where this is not possible	Carys Lord	Feb-25	The level of savings that the Council will have to make in the coming 3 years are significant. The MTFS presented to Council in February 2025 for approval will be developed following completion of the following: • A detailed review of current year spend across all service areas • A more detailed review of some areas of spend to identify further efficiencies or a change in the operating model for that service. • A profile of anticipated savings over the life of the MTFP • Identification of areas requiring further review	AMBER
		R2 The Council should strengthen its arrangements to ensure the impact of its financial position and MTFP on communities and on the delivery of its well-being objectives is reported to members to enable them to monitor and address any impacts.	Carys Lord	Mar-25	Budget briefings are now in place for elected members on a quarterly basis. Details on the budget proposals will be shared with all elected members to enable them to comment on issues and identify the implications.	AMBER
CIW Inspection Report on	SOSC2 TBC	R1 Childrens views to be actively sought following placement endings.	n/a	n/a	Complete	BLUE
Foster Wales Bridgend (Jan 2024)		R2 Some children are not accessing statutory education, impacting on outcomes and increasing pressure on foster carers.	GM Placement and Provider Services	Quarterly	Placement stability meeting report run for May –September – 2/30 meetings had education issues as a factor but need to consider this is school holiday period. Discussed with Fostering Team who felt anecdotally that education remains an issue, however we would need evidence in order to discuss with our corporate parenting partners. New delivery date 31/03/2025	GREEN
		R3 Safeguarding procedures are not consistently followed. Information sharing between teams, consideration of risks and decision making is not robust.	GM Placement and Provider Services	Mar-24	Workshops have not taken place across the service as yet. Relationships have improved and observations are that the process is being followed supported by the introduction of a significant events form on WCCIS and mandatory training completed in the fostering team. The QA officer is currently completing an audit in relation to this process and will provide recommendations. New delivery date - 31/03/2025	AMBER
		R4 Foster care agreements and safer caring agreements are in place, but these are not completed thoroughly.	n/a	n/a	Complete	BLUE
		R5 There are shortfalls in the service considering the needs of all household members and carers capacity (matching)	GM Placement and Provider Services	Mar-24	Matching forms are live and monthly reports being run to check compliance. There have been some incidences of the form not being completed and signed off prior to placement that have been addressed with the individuals. Therefore, whilst the process and systems are in place to support this, adherence by the team remains inconsistent and requires manager oversight and enforcement to fully embed. The QA officer is currently completing an audit in relation to this process and will provide recommendations. New delivery date - 31/03/2025	AMBER
		R6 When foster carers have been subject to safeguarding concerns, delays have occurred in completing annual reviews and presenting these to foster panel.	n/a	n/a	Complete	BLUE

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		R7 Some children have experienced high numbers of moves, which impacts their stability and outcomes	GM Placement and Provider Services	Mar-25	There was a 47% reduction in children experiencing 3+ moves compared to the previous year. Whilst there has been a slight increase during this quarter it does not appear statistically significant.	GREEN
		R8 Demand on the service is high and many foster carers are often asked to care for more children than they are approved for. Additional resources are provided to try to support these arrangements. However, these are routinely used with carers who look after children with complex needs, without robust consideration of the impact and risks involved.	n/a	n/a	Complete	BLUE
		R9 As part of the matching process key information is shared during planning meetings, however, these meetings are not completed consistently.	GM Placement and Provider Services	Quarterly	As with the Matching forms practice is inconsistent and requires management oversight and enforcement from children's and fostering managers as well as the Independent Reviewing Officer service to embed. Consideration could be given to putting in place reflective sessions with teams to consider placement breakdowns and what could be done differently to embed this in the way that reflective sessions are being led by the locality teams Principal Officer. The Quality Assurance officer is currently completing an audit in relation to this process and will provide recommendations. New delivery date - 31/03/2025	AMBER
		R10 Children who need long term care, are matched with carers, without a thorough assessment of their long-term needs, how these change over time, carers commitment and understanding of these needs.	GM Placement and Provider Services	Mar-24	A process has been drafted but requires consultation to take forward and subsequently put into practice - awaiting feedback from the policy officer. New delivery date - 31/03/2025	AMBER
		R11 The service is reviewing how they can improve monitoring of children's personal outcomes.	n/a	n/a	Complete	BLUE
		R12 Feedback from foster carers has been mixed regarding the foster carer charter implementation, information sharing and decision-making needing to be improved.	GM Placement and Provider Services	Jun-24	Feedback from foster carers continues to indicate that this has not been achieved. The absence of the recruitment and retention officer and absence within the service has delayed attendance at Team Meetings. The Charter being part of all children's services inductions and meetings with liaison carers as part of this process remains outstanding. Whole service engagement with the charter is required to achieve this aim. New delivery date - 31/03/2025	AMBER
		R13 Several policies and procedures have been updated prior to inspection, to reflect the changes needed. The service is not currently operating in line with these policies and procedures which is impacting children's outcomes	n/a	n/a	Complete	BLUE

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		R14 The current recording systems do not support effective oversight and smooth operation of the service. Some key information, including the DBS checks for foster carers support networks are not monitored effectively.	GM Placement and Provider Services	Sep-24	There has been significant improvement in this area over the period, forms have been developed to enable oversight, however there are still some bugs in the system being worked through to enable the development of effective dashboards. New delivery date - 31/03/2025	GREEN
		R15 The service has experienced a high turnover of staff in all areas.	GM Placement and Provider Services	Jun-24	There continues to be turnover within the service, however, there have been significant positive achievements in this area with exit plans for current agency staff. The main challenge relates to recruiting the Kinship and Permanence Senior role. New delivery date - 31/03/2025	AMBER
		R16 Evidence of updated DBS checks for staff needs strengthening.	n/a	n/a	Complete	BLUE
		R17 Quality assurance and learning framework has not been implemented consistently.	GM Placement and Provider Services	Apr-24	Meetings have taken place with the QA officer to improve the process going forward, but this has not been achieved as yet. New delivery date - 31/03/2025	AMBER
		R18 Not all prospective foster carers have received the information and training they require prior to their assessment	n/a	n/a	Complete	BLUE
		R19 Some foster carers report training does not meet their needs fully as they care for children with more complex needs.	Group Manager Placement and Provider Services	Mar-24	We continue to experience challenges with compliance with training. Data has now been made available from SCDWP to assist in planning how we meet these needs on an ongoing basis. Achieving improvement in this area is reliant on regular data being provided by training to enable the team to support carers. Equally consideration needs to be given to amending the approach to carer training as there are high numbers of events that are being cancelled as a result of low attendance. Now there is a dedicated training officer in place it is hoped that this will improve. New delivery date - 31/03/2025	AMBER
		R20 Additional guides for children reflecting different ages and needs to be developed.	GM Placement and Provider Services	Nov-24	Foster Wales are developing a landing page for care experienced children which will include animations following feedback from the forum regarding our current guides. Consultation is taking place with Voices from Care to finalise this piece of work. New delivery date - 31/03/2025	GREEN
Audit Wales, Use of Service User Perspective and Outcomes (Jan 2024)	COSC March 2024	 R1 Information on the perspective of the service user The Council should strengthen the information it provides to its senior leaders to enable them to understand how well services and policies are meeting the needs of service users. 	Alex Rawlin	Apr-25	Performance Team are researching the four areas priorities by Corporate Overview and Scrutiny Committee - schools, waste, homelessness and customer services. This will be reported to the committee in January. The National Resident Survey (WLGA/Data Cymru) is open and findings will be available in late 2024	GREEN

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		R2 Information on progress towards outcomes • The Council should strengthen the information provided to senior leaders to help them evaluate whether the Council is delivering its objectives and its intended outcomes.	Alex Rawlin	Apr-25	The information COSC consider in January 2025 will be translated into performance indicators for the 2025/26 Corporate Plan Delivery Plan (to be presented to Cabinet / Council in Spring 2025)	GREEN
		R3 Quality and accuracy of data • The Council needs to assure itself that it has robust arrangements to check the quality and accuracy of the service user perspective and outcomes data it provides to senior leaders.	Alex Rawlin	Sep-24	The Council has piloted a series of PI audits of 2023/24 Q4 outturn. These will be evaluated and reported to CMB / CCMB in December 2024/January 2025.	GREEN
CIW Improvement Check Children's Social Care Services (Nov 2022)	SOSC2 27 March 2023	Pe9 - Continue to work towards ensuring a sufficient and sustainable workforce, with the capacity and capability to consistently meet statutory responsibilities	Director and Workforce Board	Continuous	We have seen gradual improvement across teams in reducing use of agency staff and permanent recruitment with international, qualified and newly qualified staff joining the service. Our Grow our Own model continues to receive extensive applications and we are now at a point where we are shaping a workforce strategy to ensure we have enough vacancies across teams for the future recruits. A Directorate wide workforce board has been established and will meet monthly to monitor and oversee workforce performance data and analysis - understanding trends and themes with a focus on what is working well and areas for improvement in key areas including: O Retention and recruitment, o Agency usage, o Workforce wellbeing including sickness rates, o Disciplinary and resolutions, o Workforce morale and wellbeing. This will in turn enable the Board to oversee workforce planning for the social care and social worker workforce in Bridgend, through the development of comprehensive workforce data and evidence including age profile of the workforce, workforce turnover, workforce requirements, and career pathways. New delivery date 31/03/2025	GREEN
		Pe10 - Continue to monitor the quality of social care records ensuring recording in relation to siblings, ethnicity, language, religion is strengthened, and a consistent approach taken	PO Training	Apr-23	Quarterly Quality Assurance case file auditing is now undertaken by group managers for oversight of monthly Quality Assurance random sampling by teams. Process and procedure is also in place to monitor and review audit activity that is requested and/or taking place. New delivery date - 31/03/2025	GREEN
		Pe11 - Ensure people consistently feel listened to and treated with dignity and respect	HoS	Sep-23	A draft charter has been produced and feedback from SMT will be considered and further work will be undertaken in partnership with Tros Gynnal Plant Cymru to develop a final version. New delivery date 30/09/2025	YELLOW

Name of Audit / regulator	Oversight and Date	Recommendation / proposal for improvement	Responsible Officer	Delivery Date	Action Update Q2 2024-25	BRAYG Q2
		Pr6 - Continue to closely monitor the position of children's social services and early help services to ensure any indicators of risks to achieving and sustaining improvement and compliance with statutory responsibilities, and pressure/ gaps in service provision are quickly identified and the required action is taken	Director/HoS/ Deputy HoS	Jun-23	Bronze and silver meetings continue to take place as indicated where comprehensive data/dashboards are presented by every part of the service. Performance reports are also presented to the Improvement Board and Group Managers present performance for their specific service areas at quarterly performance meetings with the Statutory Director and Heads of Service/Deputies.New delivery date 31/03/2025	AMBER
		PR7 - The local authority should ensure systems are in place to provide all staff, with up-to-date information regarding availability and accessibility of early help services and records relating to intervention of early help services	n/a	n/a	Complete	BLUE
		PR8 - Ensure children are not placed in unregistered services and must continue its efforts to identify suitable, registered placements	GM Commissioning	Continuous	In addition, monitoring and analysis of cross directorate activity and performance is monitored by the shared dataset that is presented at every Early Help and Safeguarding Board meeting. With the change of directorates, the Social Services Improvement Board will monitor early help performance from Q1 of 2024/25 onwards. New delivery date 31/03/2025	AMBER
		Pi4 - Ensure clarity and consistency of thresholds for access to early help and statutory services. The local authority must prioritise this work to ensure children and families access the right support at the right time and ensure smooth access to services, and where required smooth transition between early help / preventative and statutory services	Director/Head of Service	Jun-23	Ongoing review continues to be undertaken of Early Help following restructure and new referral pathways being developed and agreed with partners see PR 1 above. New delivery date 31/03/2025	AMBER
		W6 - Performance indicators in relation to timeliness of meeting statutory requirements - maintain focus and scrutiny on ensuring compliance with all its statutory responsibilities	Director/GM Business	Continuous	Performance framework and associated monitoring mechanisms are embedded across the Directorate. Dashboards have been developed to monitor compliance and provide management oversight on a weekly basis. A Performance framework is in place and ensures that monitoring takes place through quarterly quality and performance meetings with the Director and Heads of Service and scrutiny by the Social Services Improvement Board.	BLUE
		W7 - Implement and embed consistent practice regarding identifying and responding to child exploitation, progress work as a matter of urgency	GM Practice improvement	Jun-23	Complete	BLUE
		W8 - Closely monitor contact arrangements for children and their families	GM Case management and transition	Jun-23	A manager for a central contact service has been appointed to ensure a model that is fit for purpose is developed and delivered in the future. New delivery date - 31/03/2025	AMBER

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Audit Wales, Springing Forward – Strategic Workforce	COSC	R1 The Council needs to urgently develop its strategic workforce approach, embedding the sustainable development principle at its core, to enable it to address the significant workforce issues it faces.	n/a	n/a	Complete	BLUE
Management (Oct 2022)		R2 The Council should develop a suite of strategic quantitative and qualitative measures to enhance its ability to understand the impacts and affordability of its workforce plans and actions.	Kelly Watson	Sep-23	The current budget position has meant that all services have had to review how they deliver in the future, it is envisaged that this will be the immediate workforce priority. Whilst we have developed some revised data, we are continuing to grow this to support directorate requirements. Revised delivery date March 2025.	AMBER
		R3 The Council should also explore opportunities to benchmark its own performance over time and its arrangements with other bodies to provide a different dimension to its performance management data. Whilst also offering an insight to how other bodies are performing and discovering notable practice elsewhere.	Kelly Watson	Jun-23	Work is underway developing our own performance measures. Benchmarking with others is a challenge, however improvements have been seen with the timing of certain data collected by the data unit. Revised delivery date March 2025.	GREEN
Transformation al Leadership Programme Board – Baseline governance Review – Cwm Taf Morgannwg Regional Partnership Board (Aug 2022)	SOSC2	R1 Strategic planning and applying the sustainable development principle Our work found opportunities for the TPLB to strengthen its planning arrangements and demonstrate how it is acting in accordance with the sustainable development principle (as set out in the Well-being of Future Generations (Wales) Act). The principle should be integral to the TPLB's thinking and genuinely shaping what it does by: A) taking a longer-term approach to its planning beyond five years, b)ensuring greater integration between the long- term plans of the four statutory bodies of the TPLB, and c)improving involvement of all members of the TPLB to ensure an increased voice for non-statutory partners and a better understanding of the purpose of the RPB more generally.	Head of Regional Commissioning Unit	2023-24	Complete	BLUE

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		R2 Governance Arrangements The Cross-Cutting Programme Board is yet to be established. It is intended to oversee the development and delivery of regional cross-cutting services and could have a role ensuring a more coherent and impactful integrated community model. The TPLB should establish the programme board to ensure that decision making arrangements are in place to help resolve cross- cutting issues and risks brought to the attention of the RPB	Head of Regional Commissioning Unit	2023-24	Partnership development is focusing on a regional Memorandum of Understanding and Section 33 Agreement between statutory organisations.Pathway Development Project Brief and PID being developed to re-set Integrated Hospital Discharge Teams that work with community teams at the front and back doors. Aiming to have new footprint in place ahead of Winter 2024/25. Joint work with the Six Goals program. Agreement secured on initial steps to align Councils' Single Point of Access with Clinical Navigation Hub. Social Care Services staff members attended Nav Hub on 9 August. 'Rightsizing' demand and capacity model for intermediate care being developed to inform joint commissioning decisions. Early version of model reviewed by Regional Commissioning Group. Funding awarded from Health Foundation 'Q' quality improvement program.Population Health Management Pathway development on hold pending further engagement with CTMUHB officers. Senior officers met on 30 April to progress development of a regional Memorandum of Understanding with a view to a regional Section 33/ Part 9 Agreement to support new community pathways. Discussion centred on scope, aims and objectives, metrics, culture and timetable. New delivery date 31/03/2025	GREEN
		R3 Performance Management The outcomes and performance framework was still being finalised at the time of our review. The TPLB needs to finalise and implement the framework, ensuring it contains quantitative and qualitative measures that will enable the RPB to demonstrate outcomes and impact	Head of Regional Commissioning Unit	n/a	Complete	BLUE
		R4 Risk Management Our work found areas of risk management that need to be improved, particularly in relation to regional workforce planning. The TPLB should strengthen regional risk management arrangements by improving the identification and prioritisation of shared risks and ensuring mitigating actions are robust and clearly articulated.	Head of Regional Commissioning Unit	ongoing	Risk registers maintained for funding programmes. The Housing with Care Funding (HCF) forms a 4-year programme, having begun in 2022/23 with an annual budget for the first three year of £8,729,000 per annum. This means the fourth year is yet to be confirmed by Welsh Government. New delivery date 31/03/2025	AMBER
		R5 Regional Commissioning Unit Our work found that the lack of capacity within the RCU was leading to some delays in progressing actions. The work of the RCU is crucial to the continuing success of the TPLB. The TPLB needs to consider how it can build capacity and maximise resources to support the TPLB and minimise overreliance on a small team.	Head of Regional Commissioning Unit	2023-24	Number of new Regional Posts established within the Regional Commissioning Unit. Two additional Capital Programme Managers commenced during October 2024. NEST Co-ordinator in April 2024. Two programme manager posts commenced during September 2024 to support Integrated Pathways programme. New delivery date 31/12/2024	AMBER

Name of Audit / regulator	Oversight and Date	Recommendation / proposal for improvement	Responsible Officer	Delivery Date	Action Update Q2 2024-25	BRAYG Q2
		R6 Use of Resources Improving the health and social care outcomes of the region will require efficient and effective use of combined resources. Our work found that there had been some limited examples of pooled budgets and other arrangements for sharing resources. The TPLB needs to explore more innovative ways of sharing and pooling core resources across the region to maximise its impact and outcomes for the Cwm Taf Morgannwg population	Head of Regional Commissioning Unit	2023-24	Memorandum of Understanding being progressed through Sovereign Body Governance October/November 2024 with a view to having Section 33 Agreement in Place during 2025. New delivery date 31/03/2025	AMBER
		R7 Regional Workforce Planning Like many parts of the public sector, the region is experiencing significant workforce challenges. The TLPB needs to consider how it can facilitate a regional and strategic approach to addressing these challenges and to help it deliver its priorities.	Head of Regional Commissioning Unit	ongoing	Clarity over development of further integrated teams across the region will require greater alignment of workforce planning and development. This a key feature of programme management plans going forward to implement Pathways. New delivery date 31/03/2025	AMBER
CIW, Performance Evaluation	SOSC2 3 Nov 2022	PE1 - Opportunities for children's views to be consistently sought and appropriately recorded need to be strengthened	n/a	n/a	Complete	BLUE
Inspection of Children's		PE2 - Limited Evidence of Direct Work	n/a	n/a	Complete	BLUE
Services (May 2022)		PE3 - Inconsistent use of chronologies and genograms	n/a	n/a	Completed	BLUE
		PE4 - Strengthen business support for practitioners	n/a	n/a	Completed	BLUE
		PE5 - Variable evidence of management oversight/Quality of supervision	n/a	n/a	Complete	BLUE
		PE6 - Practice model – implementation of Signs of Safety	n/a	n/a	Complete	BLUE
		PE7 - Review of direct payments scheme	n/a	n/a	Complete	BLUE
		PE8 - Consistent offer of a carers assessment	Dep HoS/ GM Case Management and Transition/Carer s Development Officer	Mar-23	A carers strategy will be finalised by March 2025. New delivery date 31/03/2025	AMBER
		PR1 - Opportunities to prevent escalation of need continues to be a challenge for the local authority given the persistently high volume of referrals together with the complexity of needs of children and families, and workforce challenges	Director/ Workforce Board, Head of Children's Social Care/ Head of	Jun-23	Early Help was fully restructured into SSWB on 1 July 2024. The Family Support Services Manager was appointed in July and started in post in October. Ongoing review of Early Help via Institute of Public Care continues to be undertaken and the outcome will inform our commissioning strategy. Performance management continues to be	AMBER

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			Education & Family Support/		reviewed. This will inform any future decisions around the operating model of Early Help. New delivery date 31/03/2025	
		PR2 - Missed opportunities to thoroughly explore and mitigate risk and a lack of professional curiosity	n/a	n/a	Complete	BLUE
		PR3 - Placement sufficiency and support	HoS/GM Placements and Provider Services	Mar-23	A business justification case has been developed and approved by the relevant boards in respect of increasing capacity of provision in this area. Property has been identified for a multi-occupancy residential service and offer accepted pending minister approval and planning. Search continues for the second property. Revenue funding to be secured to continue to run our existing provision to full capacity and open new services. The regional children's board have also agreed an ambiton to develop a regional residential accommodation facility for children and young people with complex emotional wellbeing needs. To support this, three Project Managers will work with partners to develop facilities across CTM; one will focus on children's residential accommodation, and the other two will be available to support the findings in the 10-year Regional Capital Strategy. In relation to fostering dedicated recruitment officer is in place to coordinate recruitment activities that are scheduled throughout the year with support from Foster Wales. Whilst there are increases in the numbers of assessments, we are not recruiting sufficient carers to achieve a net gain of placements. A Fostering Board is being established to enhance recruitment and retention of foster carers within BCBC alongside the ongoing work of foster Wales. A Regional Approach to the recruitment and support of parent and child carers has been drafted alongside 'Support Care,' which aims to provide fostering support to children in the care of their family in order to prevent them from becoming care experienced. Both drafts will be subject to foster carers by adopting the Pioneer Carer scheme. This will increase the support available to carers by having a more targeted approach that utilises the skill sets of specific carers. New delivery date 31/03/2025	RED
		PR4 - Accessibility of information, advice and assistance	n/a	n/a	Complete	BLUE
		PR5 - Strengthening of Quality Assurance (QA) framework and alignment of performance and quality assurance systems	Director/HoS/ Principal Officer Training	Mar-23	An internal audit of our Quality Assurance Framework and its effectiveness was undertaken in July 2024. The auditors were reasonably assured, identifying some key strengths and areas for improvement. An action plan will be implemented; a wider review of the QA framework will commence and particularly focus on wider activity that is needed other than case file audits. New delivery date - 31/03/2025	AMBER
		PI1 - Inconsistent thresholds and standards of practice	n/a	n/a	Complete	BLUE

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		PI2 - The local authority will need to ensure its communication strategy is sufficiently robust to effectively communicate to staff and partners the vision for children's services and the many developments taking place/planned to take place	n/a	n/a	Complete	BLUE
		PI3 - Share learning from audits and reviews with staff and partners	n/a	n/a	Complete	BLUE
		W1 – Further work is required to improve the timeliness of meeting statutory responsibilities	n/a	n/a	Complete	BLUE
		W2 - Facilitation of supervised contact	GM Case Management & Transition/GM Locality Hubs/Contract Monitoring Officer	Mar-23	A manager for a central contact service has been appointed to ensure a model that is fit for purpose is developed and delivered in the future. New delivery date - 31/03/2025	AMBER
		W3 - Consistent high quality written records	n/a	n/a	Complete	BLUE
		W4 - CSE and CCE – strengthen interventions and mapping	n/a	n/a	Complete	BLUE
		W5 - First year of practice – ensure competence and confidence of staff and provide consistent supervision and oversight	n/a	n/a	Complete	BLUE
Audit Wales, Review of Arrangements to Become a 'Digital	COSC	P1 The Council could improve its digital strategy	Martin Morgans	Dec-23	The new digital strategy is currently being developed and will be completed by December 2024. Audit Wales have recently conducted a separate Digital Strategy Review which was published in April 2024, and these findings and recommendations will be used to support the development of the new strategy.	AMBER
Council' (June 2021)		P2 The Council should strengthen some governance arrangements to deliver the strategy	n/a	n/a	Complete	BLUE
		P3 - The Council should consider improving communication with staff / members to evoke the culture necessary to change	Martin Morgans	Dec-23	A proof of concept was developed and tested; the results are currently being evaluated with regards next steps. This work will be complete by March 2025.	AMBER