

Meeting of:	CABINET COMMITTEE CORPORATE PARENTING
Date of Meeting:	10 JANUARY 2025
Report Title:	CARE INSPECTORATE WALES (CIW) INSPECTION OF BRIDGEND COUNTY BOROUGH COUNCIL'S (BCBC) REGULATED SERVICES IN CHILDREN'S SOCIAL CARE
Report Owner / Corporate Director:	CORPORATE DIRECTOR, SOCIAL SERVICES & WELLBEING
Responsible Officer:	DAN BOLTON GROUP MANAGER, PROVIDER SERVICES
Policy Framework and Procedure Rules:	There is no effect upon the Policy Framework and Procedure Rules
Executive Summary:	<p>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 2024.</p> <p>The inspections in the accommodation services report against the following core themes:</p> <ul style="list-style-type: none"> • Well-being • Care and Support

	<ul style="list-style-type: none"> • 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 2024. This report relates to inspection activity detailed below:

Service	Visit Date
Sunny Bank Medium to long term residential service	15/01/24
Golygfa'r Dolydd (Meadow's View) Assessment and Emergency Service	19/09/24
Harwood House	05/06/24

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 2024 are as follows:

Sunny Bank – 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 three 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.

Golygfa'r Dolydd – 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 Group Manager for Provider 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 / proposal

- 3.1 The inspection reports have identified that the residential services all provide care tailored to meet the needs of the children and young people they support, helping them build independence, confidence, and positive relationships. Staff work hard to ensure that young people's voices are heard, and their well-being is prioritised, with strong input from families and other professionals. There have been improvements in training, oversight, and the quality of the environments, creating safe and supportive homes. While some areas still need attention, like better aligning plans with children's

progress, all three services inspected this year are committed to making a positive difference in young people's lives.

- 3.2 There are some areas for improvement identified within the reports, which will be addressed at the individual service level.

Key inspection findings for Sunny Bank:

- 3.3 Since the last inspection on 4th August 2022, the three areas for improvement identified at the last inspection have been met. Improvements have been made to the service provider's admission process, children are receiving more continuity in care with a reduction of agency staff use, and care staff are receiving regular support and training to develop in their roles and meet children's needs. Children feel their voices are heard and external professionals have provided positive feedback on how care staff support children to achieve their personal outcomes. Continued improvements are being made to the home environment and a number of facilities are available to children to support their well-being.
- 3.4 Children's voices are heard, and they are encouraged to make decisions that affect their lives. Children are happy to speak to care staff and make decisions on what they eat and what activities they want to complete. Minutes of these meetings are on display, to remind children of their choices and these are listened to.
- 3.5 The physical, emotional, and mental health of children is promoted. They are registered with local health services. Care staff are supporting children, to help them understand the benefits of engaging with services and reduce anxiety. Care staff have a good understanding of children's needs and work with other professionals and family members to promote their emotional and physical well-being. Children are developing independence skills, appropriate for their age and in line with their wishes. Care staff work closely with multi-agencies to support children and to reduce risks to their well-being. They are trained in safeguarding and understand their role and responsibilities in keeping children safe. Care staff are confident in using a trauma informed approach when supporting children. Numbers of incidents have reduced significantly, and care staff are receiving further training to understand children's needs.
- 3.6 **Care and Support** – Children can be confident; care staff have up to date guidance on how they should support them to achieve positive well-being. Children's personal plans include information on their history, strengths, needs, likes and dislikes, hobbies and aspirations. These are reviewed regularly. Children have told the service provider they feel their voices are heard and they make decisions about the care and support they receive. Children's views, wishes and feelings recorded in their records require further strengthening. Children receive support from care staff which aims to build their self-esteem, confidence and reduce risks to their well-being. Support plans are reviewed regularly to consider their effectiveness. Children are supported to better understand and process their past experiences. They are supported to develop their independence skills, including self-care and budgeting. Children told us they feel they receive good care and support, and care staff have helped them see their family. External professionals have provided positive feedback. They told us care staff support children to have daily routines, ensuring they are at the centre of decisions and plans about their life, and they are making positive progress.

- 3.7 **Environment** – Children live in a home which meets their needs. The home is clean and regularly redecorated. There are daily tasks for care staff to complete, which maintain good standards. Children make choices on the colour of their bedrooms, which are decorated, prior to them moving in. On arrival, children are supported to personalise their bedrooms further. They have adequate storage for belongings and a desk is available in their bedroom to complete schoolwork. Adaptations have been made to some children’s bedrooms to support their well-being. There are several areas to socialise or have privacy when needed. There are two lounges available which are warmly decorated and have a television and sofas. An education/games room is available to complete schoolwork and socialise.
- 3.8 **Leadership and Management** – There are effective governance arrangements in place which support the smooth operation of the service and ensures children receive good quality care and support. The registered manager is no longer overseeing the management of another service. They have the knowledge, experience and good oversight of the running of the home. The RI visits the home monthly, speaks with children and care staff, and reviews a selection of records. They identify actions and review if these have been achieved at follow up visits. Children can be confident there is thorough oversight of the service and their views are used to support continuous development and improvement of the care and support they receive. Reviews of the quality of care provided to children are carried out in line with regulation.

Key inspection findings for Harwood House:

- 3.9 Young people are supported to make choices and have control in their day-to-day life. They are provided with a range of activities and opportunities to achieve positive well-being.
- 3.10 **Care and support** – Is delivered to young people by those who know them best. Care staff are motivated and feedback from external professionals regarding the quality of care and support is positive. Plans provide care staff with guidance on how to meet young people’s needs and keep them safe, but these have not always been followed. Care and support is designed in consultation with those that know them best. The views of young people’s families and key professionals are sought when developing and reviewing personal plans. Young people are supported to make as many choices as possible and have control in their day-to-day life. We observed young people making choices in the activities they undertake. Young people receive care and support from skilled care staff who know them well. Personal plans provide care staff with the information they need to meet their needs. This includes information about what is important to young people, their likes and dislikes, and how best to prevent and respond to behaviours which challenge. Risk assessments are detailed giving clear guidance to care staff. External professionals have provided positive feedback on the care and support delivered to young people. They told us they regularly undertake unannounced visits and have no concerns. They told us *‘Care staff are always positive, motivated and care a great deal about the well-being of young people’*. They regularly receive feedback from young people’s families, who are happy with the communication and care and support delivered.
- 3.11 **Environment** - Young people live in an environment which is safe, clean and meets their needs. There are clear arrangements in place for the oversight and quality assurance systems which drive forward improvements. Care staff feel supported

through regular supervision and training. Young people live in a home which supports them to achieve positive well-being. Care staff photographs are on display as you enter the home. This helps young people to know who will be working with them. There are two lounge/dining room areas on the ground floor which young people use to socialise with care staff, watch television, enjoy meals, complete activities and relax. These are decorated warmly, with photographs of young people completing activities on display. Each young person has a dedicated space which is personalised for them and includes sensory toys. Each communal space has adequate seating and has been adapted to meet the needs of young people. The kitchen has all the equipment required to meet young people's needs. The garden is secure and has a range of activities which young people can use, including sensory equipment and a paddling pool in warmer weather. Young people enjoy using this space.

- 3.12 **Wellbeing** – Young people receiving care and support are non-verbal but are supported to make choices and have their views understood. Picture Exchange Communication System (PECS) are used to communicate with young people and their choices are listened to. Young people's families are regularly involved in discussing and planning the care and support delivered. Young people are supported to manage their money. They have savings and make choices on how they want to spend their pocket money. Young people do things which matter to them and have consistent predictable routines. They attend education. Care staff work closely with education professionals to develop and review plans to ensure young people reach their full potential. Young people are supported to develop independence skills and do things which make them happy. They engage in activities daily which support positive well-being. This includes going on well-being walks, the cinema, trips to castles, meals out, trips to farms and a range of sensory activities. Care staff have recently supported young people to go on their first holiday abroad to Disneyland. Photographs are regularly taken of young people completing activities to keep as memories of their time living at the home.
- 3.13 **Leadership and Management** – The service provider has clear arrangements for the oversight and governance of the service. The Responsible Individual (RI) visits the service every month and completes checks as required by regulation. This includes observing young people, speaking with care staff and reviewing a section of records. Actions are identified with timescales and reviewed at subsequent visits. Quality of care reviews are carried out every six months and take into consideration actions identified during internal audits. These consider how young people's voices are heard, if they are happy and supported, safe and protected from abuse and neglect and how the environment supports their well-being. Feedback is sought from families and external professionals. Feedback regarding the RI is positive. Care staff told us, the RI is approachable, knowledgeable and provides support to drive forward improvements. The RI acts, when incidents occur, to ensure lessons are learnt and steps are taken to reduce risks.

Key inspection findings for Golygfa'r Dolydd:

- 3.14 **Wellbeing** – Children receive a written guide to the service outlining their rights and entitlements, with a version suitable for all ages being developed. Care staff discuss the guide with children to ensure understanding, and children have regular visits from advocates. Their views are considered in house meetings where they plan meals, activities, and discuss goals. However, children's involvement in developing and reviewing their personal plans is limited.

- 3.15 Children are encouraged to stay healthy and active through home-cooked meals, sports, and activities like horse riding and bike rides. They also have access to local leisure facilities, which positively impacts their well-being. While children are supported to attend education, disruptions occur, and the manager works with professionals to resolve these issues. A token economy system is used to incentivise positive behaviour. Children maintain connections with important people in their lives, and memory books capture their time at the service. Care staff, trained in safeguarding, collaborate with behaviour analysts who assess children's needs and provide guidance.
- 3.16 Care and Support – The admissions procedure is followed with decisions made by the Manager and Responsible Individual (RI) on whether the service can meet children's needs, based on provider assessments. However, children are staying longer than outlined in the Statement of Purpose (SOP) due to placement shortages, and assessments are not updated to reflect the impact of these extended stays. Staff raised concerns that delays may hinder children's progress, and managing the needs of up to seven children is challenging. This will be reviewed at the next inspection.
- 3.17 An external behavioural analyst supports the emergency provision weekly, while an onsite analyst assesses children in the assessment provision, identifying work to reduce risks and plan for future placements. Weekly therapeutic sessions complement the support provided by care staff, who follow the Trauma Reparative Intervention Behaviour Evidence (TRIBE) care model, focusing on positive reinforcement. Although care staff report warm interactions and high standards, some question the model's effectiveness, and additional training is being provided. Some areas of improvement noted were there are inconsistencies in incident recordings, and children do not receive debriefs after incidents. Personal plans lack children's input and do not reflect progress in achieving outcomes, though improvements are planned. Care staff are not consistently documenting that they have read and signed important guidance, and medication records need more detail on safe administration.
- 3.18 **Environment** – Golygfa'r Dolydd is a large, two-story building with separate emergency and assessment provisions. The emergency provision is on the ground floor, and the first floor includes a large office space, occasionally used for parties and activities. The assessment provision spans two floors. While some efforts have been made to soften the service's appearance, it lacks the domestic feel of a nurturing home. Children noted the environment does not feel like a home, with communal seating being uncomfortable, and the staff entrance resembling a commercial building.
- 3.19 Children have personalised bedrooms with ensuite facilities, along with a bath in the assessment provision. Each kitchen and lounge is well-equipped, but there is insufficient space for all children and staff to eat together. Efforts to make the space more welcoming include paintings in the corridors, a games room, and therapy room. The outdoor areas feature a BBQ, pizza oven, garden huts for storing belongings, raised beds for gardening, and an outdoor games court.
- 3.20 **Leadership and Management** – The Responsible Individual (RI) plans to review the Statement of Purpose (SOP) to ensure the service provided aligns with its description. Monthly meetings have been introduced by the Local Authority to prevent delays in children's care planning. While most staff fitness checks are completed before

starting work, there is a need to ensure full employment histories are recorded. Although agency staff have been used, the provider has mitigated risks by using consistent personnel, and most positions are now filled, with no permanent staff leaving since the service opened.

- 3.21 Staff receive thorough inductions, core training, and shadow shifts, with opportunities for ongoing learning and development. Most staff are registered with Social Care Wales and are working toward relevant qualifications. The RI regularly visits the service, engages with staff and children, and reviews records. Actions are taken to address improvements, with findings feeding into the quality-of-care review.

Areas of Improvement and Priority Actions Notices

- 3.22 It is pleasing to note that the inspections did not result in the issue of any Priority Action Notices across services and that previous areas of improvements had been addressed in all cases.

- 3.23 The report for Sunny Bank did not identify any Priority Action Notices and previous Areas for Improvement had been actioned.

However, there was one area of improvement highlighted during this visit –

Area for improvement – Sunny Bank	
Regulation	Summary
35	<p>The service provider does not have a rigorous selection and vetting system in place to enable them to make a decision on the appointment or rejection of all staff. This includes the information set out in schedule 1 of the Regulations.</p> <p><i>This new area for improvement was due to our staff files not being available on the day of the inspection, this has since been addressed with HR and a much more robust process is in place for our own staff files.</i></p>

- 3.24 The report for Harwood House did not identify any Priority Action Notices and noted that previous actions for non-compliance with Regulation 12 (Policies and procedures) had been completed.

It did however identify new Areas for Improvement these being: -

Area for improvement – Harwood House	
Regulation	Summary
21	Young people have not received care and support in accordance with their personal plan.

	<i>The RI has put measures in place to review and monitor that care plans are delivered in line with identified need.</i>
35	<p>The service provider has not ensured agency staff have the same checks as permanently employed staff and have evidence to demonstrate checks have been undertaken. This may include confirmation and checklists supplied by any agency.</p> <p><i>The RI has put in place checklists to ensure the relevant checks are in place and the agencies the service works with has also been advised of expectations.</i></p>

3.25 The report for Golygfa'r Dolydd (Meadow's View) did not identify any Priority Action Notices.

It did however identify new Areas for Improvement these being: -

Area for improvement – Golygfa'r Dolydd	
Regulation	Summary
18	<p>The service provider has not reviewed the provider assessment when timescales for children's stays have been extended, to ensure the service remains suitable. Childrens views have not been considered as part of the provider assessment.</p> <p><i>Impact risk assessments and provider assessments have been updated moving forward to mitigate this area of improvement.</i></p>
21	<p>Childrens views are not included in the planning and review of their care and support. Reviews of plans, do not consider the progress being made by children to achieve their personal outcomes.</p> <p><i>Child friendly personal plans were in development at the time of inspection which CIW were made aware of and are now in operation.</i></p>
43	<p>The service provider must ensure the premises, facilities and equipment are suitable for the service and meet children's needs.</p> <p><i>An ongoing review of the internal environment has been made and will continue for the future linked to individual children's needs.</i></p>
6	<p>The service provider has not ensured the service is provided with sufficient care, competence and skill, having regard to the statement of purpose.</p> <p><i>A review of the SOP is taking place and will be concluded by March 2025.</i></p>

3.26 The areas for improvement are 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 wellbeing 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 Implications

6.1 There are no climate change 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