

Children's Social Care
June 2025 – Care Inspectorate Wales – Fostering Service Inspection
ACTION PLAN

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

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

APPENDIX 2

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

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