

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