

Date of issue: 20 November 2023

MEETING:	CORPORATE IMPROVEMENT SCRUTINY COMMITTEE Councillors Manku (Chair), Shaik (Vice Chair), Escott, Hulme, Iftakhar, Mann, Matloob, Mohindra, O'Kelly and Stedmond
DATE AND TIME:	TUESDAY, 28 NOVEMBER, 2023 AT 6.30 PM
VENUE:	COUNCIL CHAMBER - OBSERVATORY HOUSE, 25 WINDSOR ROAD, SL1 2EL
DEMOCRATIC SERVICES OFFICER: (for all enquiries)	MANIZE TALUKDAR 07871 982 919

NOTICE OF MEETING

Scrutiny Committee Members are requested to attend the above Meeting at the time and date indicated to deal with the business in the agenda set out below.



STEPHEN BROWN
Chief Executive

Press and Public

Attendance and accessibility: You are welcome to attend this meeting which is open to the press and public, as an observer. You will however be asked to leave before any items in the Part II agenda are considered. For those hard of hearing an Induction Loop System is available in the Council Chamber.

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AGENDA

<u>AGENDA ITEM</u>	<u>REPORT TITLE</u>	<u>PAGE</u>
APOLOGIES FOR ABSENCE		
CONSTITUTIONAL MATTERS		
1.	Declarations of Interest	
	All Members who believe they have a Disclosable Pecuniary or other Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Section 9 and Appendix B of the Councillors' Code of Conduct, leave the meeting while the matter is discussed.	
2.	Minutes of the last meeting	1 - 16
	a. Minutes of the meeting on 24 October 2023 b. Attendance record c. Action Tracker and Recommendations Register	
SCRUTINY CHALLENGE ITEMS		
3.	Verbal presentation: Budget Setting and financial update	
	Verbal Update from the Portfolio Holder and Director of Finance on:	
	a. The in-year position (High level, indicating areas of significant variance); and	
	b. Progress on the budget setting process including deep dive into in-year pressures for Adults and Temporary Accommodation.	
4.	Report from the Task and Finish Group on the Preparedness of Adults Social Care for an assessment by the Care Quality Commission.	17 - 44
	This is the report from a Scrutiny Task and Finish Group established at the beginning of September 2023. Its role was to investigate the preparations, by Adult Social Care, for an assessment of its services by the CQC, which is likely in the early part of 2024.	

AGENDA
ITEM

REPORT TITLE

PAGE

5. Proposals for the Scope (terms of reference) for a Task and Finish Group on resident engagement and re-building trust. 45 - 52

The Committee will be asked to agree the scope of a Task and Finish group investigation into resident engagement and building trust. It will also invite members to sign up to the Task and Finish Group, with an expectation of it reporting back in February 2024.

6. Forward Work Plan 53 - 64

Committee members will review Agenda items for forthcoming meetings of the committee.

Proposals will also be tabled for a process by which members can propose future agenda items, the criteria by which they will be assessed and the key determinants to rank their priority, in relation to existing items on the Forward Plan.

7. Date of Next Meeting

The date of the next meeting will be 4 January 2024,

The 2 main agenda items will be:

- Q2 update from the Improvement and Recovery Board
- A report from Human Resources to provide an update on improvements to its services and its further plans for improvement.

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Corporate Improvement Scrutiny Committee – Meeting held on Tuesday, 24th October, 2023.

Present: Councillors Manku (Chair), Escott, Hulme, Iftakhar, Matloob, Mohindra, O’Kelly and Stedmond

Also present: Councillors Chahal and Smith

Apologies for Absence: Councillors Shaik and Mann

1. Declarations of Interest

No declarations were made.

2. Minutes of the last meeting, held on 26 September 2023

Members asked that it be noted that the CISC tracker only covered the 26 September Committee, with a recommendation that the tracker should cover all actions and recommendations, including those prior to September 26. There was also a request for a separate tracker to cover further requests for information.

The Scrutiny and Governance Officer gave an update on the Action Tracker (Appendix A to the minutes), which he explained included requests for further information. There were 6 actions, Action A003 on monies carried forward was outstanding and it was agreed to extend the deadline for this, which the Scrutiny and Governance Officer would follow-up and update the action tracker ASAP. The remaining actions had later deadlines .

Resolved – That the minutes of the meeting held on 26 September be approved as a correct record.

3. ICT & Digital Update

The Chair welcomed to the meeting Committee Members, Lead Members for Financial Oversight, and Improvement and Recovery, and officers. He invited the Lead Member for Financial Oversight, in the absence of the Lead Member for IT, to speak about the ICT and Digital Update Report.

The Lead Member outlined the main points of the report, which provided an update on the progress of the ICT and digital modernisation and remediation work approved by Cabinet in March 2022. Overall the work on ICT resilience and security was progressing, the pace of work was linked to the need to balance driving change while managing risk. The Lead Member outlined the highlights detailed in the report including the move to a cloud-based system, significant progress on cyber-resilience, replacement of the telephony system and the rollout of Microsoft 365. Further planned changes in the months ahead included moving to a new core data centre. The Lead Member

emphasized that IT underpinned everything the Council did and needed to be robust, this was a key driver going forward.

The Executive Director for Strategy and Improvement explained that it had been agreed that officers would report every 6 months to Cabinet on the ICT transformation programme. CISC members were being given the chance to challenge and make recommendations to Cabinet as part of this process.

The AD Chief Digital & Information Officer re-emphasised that the programme was a delicate balance of pushing for change but also managing and mitigating risk. Progress had been made in improving the digital presence for residents. There were 2 core areas of focus; the move to an area-wide network, and the move to a new data centre which was scheduled for November, both of which would make savings.

The Chair appreciated the introduction and outlined that CISC members had held a pre-meeting during which they had identified key lines of enquiry on the ICT report as:

- Outcomes and impact on people;
- Action plan and financial implications; and
- Resilience and cyber-security.

- 3.1** On outcomes and impact on people the Chair asked what the desired outcomes of the strategy were in terms of the improvements residents and workforce members would experience, as the corporate indicators were very much output indicators rather than outcome indicators.

In answer the AD Chief Digital & Information officer advised that ICT formed part of the customer service improvement group, so one outcome would be through improved ICT to directly impact on the efficiency of the customer service and lower waiting times for residents. This would however be heavily dependent on services residents received matching what was offered through the digital services, and the customer experience needed to meet expectations to enable residents to trust ICT. In terms of action plans and timescales some of the work associated with this was imminent, eg the introduction of a 'chatbot' facility on the website, which was anticipated within a few months, and the move to a new datacentre in November.

- 3.2** In answer to questions on what checks were undertaken, recovery of data loss, and the datacentre move, the AD assured members that all processes involved checks and balances, eg on moving to the cloud a testing regime had been implemented to ensure best practice was being followed. Risks were carefully managed to ensure any potential issues were highlighted. In terms of data loss there were technical tools to manage this, plus ensuring back-up facilities were kept up-to-date. Challenged on why a number of planned cyber security and resilience works were rated red on the milestone chart (Appendix A), the AD explained that there had been some delays and the need to get the right people on board to take this area of work forward, but this was now moving in the right direction. In terms of the datacentre move

and difference in tiers, the AD advised that he would need to come back with clarification on this, but that moving to a cloud-based disaster-recovery system would also give more resilience and better value.

- 3.3** Members recommended a further report on how ICT improvements would impact residents, with more detail on how it would enable the council to improve services for residents, including those with wider IT-accessibility issues who may not fit the norm in terms of customer services. In reply the ED agreed that a resident-focused IT report could be included in the forward plan, also explaining that the two main issues for ICT transformation were core corporate functions, and how improved technology could be used to help other departments; this report focused on the first of these.

Asked about further phases to the strategy, the AD agreed to provide further detail on subsequent phases, and also in sharing results of SBC website use monitoring, of which a limited degree of monitoring had been undertaken. In terms of strategic services the AD reported that as part of business continuity plans the ICT team were reviewing their approach to disaster recovery at the current time.

- 3.4** At the conclusion of discussions the Scrutiny and Governance Officer summed up the action points:

- To provide further detail on the data centre supplier refresh, including the Ark data centre suppliers
- To have a separate report to the task group on public engagement on the impact of the ICT strategy on residents and how it would enhance customer service delivery
- More detail to be provided on Phase 2 & 3 projects
- Bring back to Committee in January a refresh of the IT strategy
- An update on progress of ICT digitisation and modernisation work to be provided at a future Committee
- To share information on resident interactions with online services and forms

4. Public Sector Equality Duty and SBC (Slough Borough Council) Equality Objectives

The Lead Member for Improvement and Recovery introduced the report which provided details on the proposed 2023-2027 statutory equality objectives for SBC in line with the Public Service Equality Duty. The council was committed and had a desire to improve collection of data around individual employees and equality. The purpose of this was so that SBC could become more data-driven and data-led in its actions, and to improve inclusion and equality in the workforce. The Lead Member was pleased that SBC leaders worked to ensure that diversity in the workforce was valued and was representative of the diverse local community. The Lead Member also drew members' attention to para 3.8 of the report which provided a quote from the Equality and Human Rights Commission which had written acknowledging the council's progress in

this area in difficult circumstances. This showed that through incremental progress, SBC was delivering important improvements for the benefit both of staff and for local residents.

The ED added that the objectives outlined in the report flowed on from the Corporate Plan objectives agreed by Council and Cabinet. These were being brought to CISC at this formative time for members' thoughts and input.

The Chair stated the Committee was happy to receive the report and was pleased with the commitment of SBC to improve equality in terms of services and workforce in line with its public service equality duty, and putting inclusion at the heart of policy. The Committee's key lines of inquiry centred around workforce diversity and residents and services.

- 4.1** Members appreciated the report and areas of improvement, but considered that it might be better to have two separate strategies, with one for the workforce and the other for residents, as they had different, albeit related outcomes, and as the report concentrated mainly on the workforce with too little detail on the impact for residents. The ED explained that it was common practice to have a workforce objective alongside an objective focussed on residents, as the workforce needed to reflect the community it served. Members appreciated this point but requested to see more focus on the marginalised residents in the community, which could need a different type of report in the future. The Lead Member and ED agreed that they could try to reflect this in future reports, and also clarified that census data had led the report, and this would be made clearer going forward.
- 4.2** There were questions on whether property implications should be included in the report, and on the key indicators for early years outcomes for children. It was explained that the report outlined how the council used the objectives to target services, with the corporate plan focusing on children and health inequalities. While housing could be seen as being related to children, this particular report was neutral in terms of the impact of housing on the policy. With regard to the below-average statistics for Slough in terms of the percentage of early years children with SEND support, it was explained that this was part of the evidence-gathering that had formed the objectives for improving outcomes for disadvantaged children and health inequalities.
- 4.3** On equality data collection for residents, it was acknowledged by ED Strategy and Improvement that this had been patchy and was an area for improvement. Data was not normally collected at point of contact though this was being worked on, with a note of caution that any statistics also had to be mindful of the data gap, ie people who were not accessing or able to access the services. All council decisions also required an equalities impact assessment, and performance on filling these out was not where it should be, with members encouraged to challenge any reports they encountered which fell short in this area.

The Chair asked what steps were being taken to create the culture change needed to meet equality objectives. The ED and Chief Executive explained

that this formed part of a culture-change programme, with workshops about to take place to discuss what kind of culture SBC wanted within its workforce, working with recruitment consultants on how to reach out to as diverse a range of candidates as possible for recruitment.

- 4.4** The Lead Member and ED summed up that SBC was in the initial stages of a journey in terms of its equality impact, with roadshows for staff, leaders listening more to staff, more access for staff with special needs and valuing respect and inclusion. Council leaders were also committed to providing every member of staff with an annual appraisal going forward. Significant progress had been made since January in this area as recognised by the Equality and Human Rights Commission.

At the conclusion of the discussions members made two recommendations, as noted by the Scrutiny and Governance Officer:

- a. To increase the data collected on PCs of services users on a priority basis to enable better understanding of whether services carried unconscious bias for example to the detriment of any communities of place, interest or association (including PCs as a priority). This should be reflected as an equality objective in the strategy.
- b. That future reports on PSED offered greater emphasis/detail about objectives and work carried out in relation to residents and services. Officers would reflect and come back to members on the frequency of future reports to Committee.

5. Update on Procurement and Contract Management

The Lead Member for financial oversight, council assets, procurement and revenues & benefits introduced the report, emphasising that strong governance in this area was critical. The report updated the Committee on the improvements implemented to procurement and contract management at SBC over the last 2.5 years; on the implementation of the recommendations from the overview and scrutiny task and finish group on contract management; and on further planned improvements in this area. Challenges that remained included recruitment, development of regional networks, ensuring the social value policy was fit for purpose for Slough residents, and ensuring the contract management strategy was tailored correctly.

The Head of Commercial Services outlined that improvements were reported to Cabinet in October 2022, since then the focus had been on embedding the improvements and developing regional networks and relationships. Now that the basics were right, the focus going forward was on contract management and giving staff the framework and toolkit to enable them to work effectively, as well as looking for innovative ways to recruit to vacant positions.

The Chair thanked both for the update and agreed that procurement and contract management was an essential tool in delivering the council's wider

financial, social, economic and environmental aims and objectives. The Chair then invited members to ask questions and discuss the report.

- 5.1** Questions from members included what steps were taken to scrutinize contracts to check that work had been done satisfactorily, as there had been complaints from residents on maintenance contracts, and also what risk assessment was done regarding contracts. The Head of Commercial Services and Lead Member explained that, while they could not comment on individual cases, a number of contracts including the maintenance contract in question had been reviewed recently including at the overview and scrutiny task and finish group, and recommendations would be made to December Cabinet. On risk assessments, this was acknowledged to be an area of development, and officers were establishing a toolkit on contract management which would include a risk assessment framework.
- 5.2** In answer to further questions from members the Head of Commercial Services confirmed that finance training was in-house training on council financial policies and procedures, and benchmarking was undertaken on contracts, including on joint network contracts. In terms of how SBC measured up to the national procurement strategy, the HCS acknowledged that the council had undergone self-assessment on this which showed that it was moving in the right direction, with work still to do. The council's procurement strategy was also currently being re-written according to national strategy guidelines. Questioned on the statistics given in Appendix A on Quarter 1 Performance Indicators, the HCS explained that this table only showed new procurement activity for that quarter, and did not include existing activity or contracts entered into before that period. HCS agreed to ensure this was clarified in future reports.
- 5.3** Members raised further questions on progress against the task and finish group's recommendations detailed in the report; on shared contracts; and on adding value. In answer the Head of Commercial Services confirmed that the recommendations on development of key performance indicators (KPI's) for contracts, and implementation of a standardised framework for contracts were both on schedule to be in place by the end of March 2024. On shared contracts this was a work in progress, and in the early stages. There had not been an appetite historically to work collaboratively in the region, but work had recently been done to develop regional contacts. On adding value to contract management the Finance Director explained that procurement could be done quickly with the right information, but it had to be born in mind that implementation of contracts was often the part that took more time. The FD could not comment on the specific contract example given but would follow up with the member concerned.
- 5.4** Finally the Chair asked what importance was given to social value in tendering contracts and the HCS explained that this was another area of work the finance team were developing. A social value policy was being piloted within the procurement team, with the aim of ensuring that any social value built into a contract would benefit the residents of Slough specifically, and

would also need to be measurable in order to follow up on progress and results.

At the conclusion of discussions the Scrutiny and Governance Officer summed up the action points:

- future procurement reports or updates to clarify the context of reports and whether new or existing contracts are included.
- Cllr Iftakhar to provide details of the procurement issues and possibilities of in-cab IT
- Cllr Stedmond to provide details regarding outstanding issues with a number of housing repairs for residents in his ward.

3. Verbal Updates from Chairs of Task & Finish Groups

A verbal update was provided by Cllr Hulme, Chair of the Task and Finish Group on ASC preparedness. She explained that the group were still waiting for the draft report, they had held their final meeting on 28 September. Cllr Hulme had also attended a webinar which highlighted a number of issues to be aware of prior to the inspection, and which would feed into the draft report.

4. Forward Work Programme

The Scrutiny and Governance Officer suggested two changes to the forward work programme. With regard to the 30 January Committee, he suggested the Adult Social Care Transformation Programme item be deferred to a later Committee with the agreement of the ED Adults as this item would not be ready for the January Committee. This meant the full 30 Jan meeting could be spent on scrutiny of the Council's draft budget proposals 2024/25.

The second possible change related to the SEND item for the 22 February meeting, which in consultation with ED Children's Services could be subject to change

A member also suggested that discussion of the housing maintenance programme contract should also be included in the forward work programme, and the Scrutiny and Governance Officer agreed to follow-up this issue offline with the member.

Resolved: That the suggested amendments to the forward work programme be agreed and noted.

5. Attendance Report

Resolved – That the attendance report be noted.

6. Date of Next Meeting - 28 November 2023

The date of the next meeting was confirmed as 28th November 2023.

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MEMBERS' ATTENDANCE RECORD 2023/24
CORPORATE IMPROVEMENT SCRUTINY PANEL

	COUNCILLOR	27 June	25 July	26 Sept	24 Oct	28 Nov	04 Jan	30 Jan	22 Feb	26 March
1.	Manku (Chair)	P	P	P	P					
2.	Shaik (Vice-Chair)	P	P	P	Ap					
3.	Escott	AP	P	P	P					
4.	Hulme	P	P	P	P					
5.	Iftakhar	P	P	P	P					
6.	Mann	P	P	P	Ap					
7.	Matloob	P	P	P	P					
8.	Mohindra	P	P	P	P					
9.	O'Kelly	P	P	P	P					
10.	Stedmond	P	P	AP	P					
11. ¹										

P = Present for whole meeting
P* = Present for part of meeting
Ap = Apologies given
Ab = Absent, no apologies given

As = Apologies, substituted
S = Substitute
C = Co-optee

¹ Co-optees or Substitutes

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REF (CISCREC)	Committee Date	Agenda Item	Detail of recommendation:	Letter To Chair / Portfolio Holder	Copy to Relevant Director / Snr Officer	Cabinet Date	Response received to date	Date of Response	Response Detail	Accepted?: Y/ N/ P[ARTIAL]	Notes
0.01	31-Jan-23	5	Ensure that SBC is appropriately considering the risks to children and families when commissioning and designing services to target mental health, domestic abuse and substance misuse.			27-Feb-23	Y		Jane Senior Public Health Domestic Abuse Strategic Group meets Quarterly to put in place the agreed strategy and review local arrangements. There is a dedicated DA coordinator.	Y	
0.02	31-Jan-23	5	Ensure SBC's education service is appropriately supporting the private, voluntary and independent early years workforce to develop their skills in supporting vulnerable children and families.			27-Feb-23			Neil	Y	
0.03	31-Jan-23	5	SBC education services to work with schools to reduce prevalence of children missing education, inappropriate home schooling and exclusions and off[1]rolling.			27-Feb-23			Neil	Y	
0.04	31-Jan-23	5	SBC to review its capacity and resources for joint commissioning of services with health.			27-Feb-23	Y		Jane Senior Public Health / SCF has a dedicated procurement and commissioning manager who is in the process of reviewing all of the processes and QA processes for SCF commissioning arrangements. There are agreed processes in place to agree shared funding through the IRAP panel which the ICB is a member of	Y	
0.05	31-Jan-23	5	All council departments to consider and assess the impact of their work on children and families within Slough.			27-Feb-23	Y		SCF consider impact on children within all strategies and are engaging with Participation People to strengthen co-production with children and young people. Council recently adopted protected characteristic of 'care leaver' so all new strategies are expected to address 'impact as Corporate Parents' in their design and impact.	Y	
0.06	31-Jan-23	5	SCF Retention strategies need to focus on non-pay elements. The business case for retention packages is not supported by the evidence presented to the group.			27-Feb-23	Y		Retention package was not progressed. Focus on career development frameworks and wellbeing of staff has been progressed.	Y	
0.07	31-Jan-23	5	SCF strategies need to have a greater focus on impact on the child and family and creating stability for children and families. The Edge of Care Team business case should be supported, however the Family Hubs should be considered on a wider multi-agency partnership basis.			27-Feb-23	Y		Sufficiency Strategy has clear impact focus and intention. Participation Strategy sets our clear ambition for engagement and co-production. These are examples of the revised approach, Business and Improvement Plan sets out clear vision and objective with clear focus on impact for children and their families	Y	
0.08	31-Jan-23	5	Ensure managers have access to good quality management data that supports them to make decisions on caseloads that take account of the context and skills of the team. This should include those on child protection plan and not just children who are looked after.			27-Feb-23	Y		SCF managers have access to data systems to support	Y	
0.09	31-Jan-23	5	Utilise Slough's diverse population as a positive and avoid focus on Slough being similar to London boroughs, complexity of casework and negativity of the Ofsted rating. Many social workers see the cohort of children and families as a key opportunity to make a real difference.			27-Feb-23	Y		The SCF Business and Improvement Plan sets out our vision for children, young people and their families in Slough. We recognise the uniqueness of Slough and whilst appreciating similarities with some London Boroughs We Are Slough	Y	
0.1	31-Jan-23	5	Focus constrained resources on leadership and management development and career progression opportunities for internal staff, as well as loans and payments to support staff with capital outlay.			27-Feb-23	Y		Management development programmes are in progress, with a specific focus on HoS, with a top down focus being implemented, ready for further roll out. All roles are available to all staff to apply for and there has been a notable increase in the number of internal promotions in the last 12 months.	Y	
0.11	31-Jan-23	5	Ensure SCF's model of practice is appropriately strength based / restorative in approach.			27-Feb-23	Y		Slough's Practice Approach is STAR S = strengths based T = Trauma informed A - attachment understanding R = Restorative This anchors our practice - we are in the process of All Services and individual Service workshops where we talk about this all of the time. We also bring this through into Practice Development programmes.	Y	
0.12	31-Jan-23	5	Embed hearing the voice of the child into all records and decision-making and monitor this on a qualitative basis.			27-Feb-23	Y		We have a Practice Improvement Programme in place with funding provided by DFE - within the programme is a strong audit programme alongside practice learning sets, service wide learning and Quality Assurance Support to strengthen our evidence	Y	
0.13	31-Jan-23	5	Explore opportunities for children and families to be part of delivering training and developing and influencing decision-making at a strategic level.			27-Feb-23	Y		Young people have been invited to be part of interviews for strategic posts. Young people have also been invited to be part of a session at Practice Learning Week. Increased focus is being given to participation and the responsibilities of all staff. The Participation Strategy is due for sign off in the November cabinet.	Y	
0.14	1st Feb 2023	5	Move to a 2-stage corporate complaint process with extended timescales at each of the two stages			27-Feb-23				Y	
0.15	1st Feb 2023	5	Introduce accessibility of different languages on the council's website reflective of the ethnic makeup of the borough, to make it easier for customers to access service and navigate information relating to service requests			27-Feb-23				Y	
0.16	1st Feb 2023	5	Make the online complaint page more robust			27-Feb-23				Y	
0.17	1st Feb 2023	5	Encourage officers to use various communication methods when investigating complaints			27-Feb-23				Y	
0.18	1st Feb 2023	5	Strengthen the learning and improvements captured through complaints and ensure that these are incorporated in all future complaints' report			27-Feb-23				Y	

0.19	23-Jan-23		The start of the procurement process must be well managed, with clear outcomes and deliverables in the procurement specification, which include outcomes-based deliverables, gateways, monitoring, timelines, milestones and reporting.			27-Feb-23	Y	October 24 2023	The Commercial service works closely with service areas to plan timely procurement activity which is assisted by a robust forward plan, this ensures that the procurement process is well managed and tenders are scored against the outcomes and deliverables in the specification. The service ensures that comprehensive records are maintained including a register of the progress of live procurements.	P	P indicates response suggesting that relevant mechanisms were already in place
0.2	23-Jan-23		When assessing tenders for work they should be scored against the outcomes and deliverables in the specification and the results retained as evidence.			27-Feb-23	Y	October 24 2023	as above	P	P indicates response suggesting that relevant mechanisms were already in place
0.21	23-Jan-23		Where authority is delegated to Officers for the award of a high value/high risk contract, this should be in consultation with the lead member. Members must be properly consulted with evidence of decisions in writing and their agreement clearly sought.			27-Feb-23	Y	October 24 2023	The Council has updated its constitution with a list of significant officer decisions which require a formal decision report to be published. This includes contracts over the financial threshold of £180k and any decision exercised following specific delegation from Cabinet. Such record should record the consultation process and comments from the consultee. This takes place during briefings between the appropriate lead member and executive director. Where a record of the consultation is required for contract sealing purposes, an email confirming the outcome of the briefing between the lead member and executive director is requested.	Y	
0.22	23-Jan-23		Council staff must follow a proper governance process, as set out in the updated Contract Procedure Rules, including having an effective and up to date forward procurement plan.			27-Feb-23	Y	October 24 2023	The Council has an annual procurement plan agreed by Cabinet and this is updated throughout the year as required, with the last one approved at September cabinet.	P	P indicates response suggesting that relevant mechanisms were already in place
0.23	23-Jan-23		Cabinet reports for procurement must set out the evidence base for a particular recommendation and have an effective options appraisal as part of the report. Consideration should be given to phasing procurement and reserving future decisions to Cabinet for high value / high impact commissioning.			27-Feb-23	Y	October 24 2023	All procurement activity that require a cabinet report, have an options appraisal, however it is important that a business case methodology is used and cabinet authority is sought at the most appropriate time during the procurement cycle. Where cabinet authority is not required, a full business case is developed which sets out case for change, the options appraisal and the cost/benefit of the proposal. In addition, the forward plan report to cabinet in April and September provides an outline of the procurement including deliverables and outcomes.	P	P indicates response suggesting that relevant mechanisms were already in place
0.24	23-Jan-23		Contracts on the Council's contract register must be risk assessed to identify the scale of the risk for each contract. This should be done using a standardised risk assessment matrix that considers contract value, business value and impact, sourcing and contractual complexity, and performance. This will ensure that mitigations are put in place to proactively manage risks.			27-Feb-23	Y	October 24 2023	These actions are underway as part of the development of the contract management strategy and toolkit, which will assist contract managers to appropriately contract manage high risk contracts. This is due to be in place by the end of October 2023.	Y	
0.25	23-Jan-23		There must be a dedicated contract manager for high-value/impact contracts identified through the risk assessment process. This officer should be appropriately trained and should have responsibility for monitoring the contract and ensuring compliance with the contractual requirements. The officer should keep records of contract meetings and should convene formal monitoring meetings as required by the contract. The officer should raise any risks with the relevant Executive Director. The officer should have access to legal and finance advice, as required, to assist with their role.			27-Feb-23	Y	October 24 2023	as above	Y	
0.26	23-Jan-23		Meaningful Key Performance Indicators must be developed for contracts and reviewed and followed up regularly at contract review meetings to ensure that any performance issues are discussed and challenged accordingly. For more significant commissioning arrangements, contract review meetings should include operational and strategic meetings with key officers in attendance. These meetings should be confidential to allow for full and frank discussion, with opportunity to agree minutes to be put in the public domain where updates are to be provided to a formal member meeting. If a contractor is invited to attend a formal Member meeting, consideration should be given to allowing this to take place in Part 2 to allow for a more detailed discussion about any issues.			27-Feb-23	Y	October 24 2023	This action is underway as part of the development of the contract management framework. The council's contract management support lead is involved at the earliest stages of procurement of high risk contracts to ensure that appropriate KPI's are identified and a contract management plan is in place to monitor them. This is due to be in place by the end of March 2024.	Y	
0.27	23-Jan-23		A standardised framework for contracts should be implemented, which includes a contract management plan for each contract, tailored to take account of value and impact of the contract. This considers important mechanisms for the management of a contract, including roles, responsibilities and governance, dispute resolution, key performance indicators, and exit plans.			27-Feb-23	Y	October 24 2023	as above	Y	
0.28	23-Jan-23		When commissioning management consultancy, consideration should be given to the payment mechanism and if this is on a time and materials basis, there should be close monitoring of the value being delivered via this arrangement and consideration of alternatives, such as recruiting in[1]house resource.			27-Feb-23	Y	October 24 2023	Careful consideration is given to the commissioning of management consultancy and consideration of the options through development of the procurement business case that is scrutinised at procurement review board.	P	P indicates response suggesting that relevant mechanisms were already in place
0.29	23-Jan-23		When commissioning services, ensure that decisions are informed by data, including benchmarking data where available, to demonstrate value for money for Slough's residents.			27-Feb-23	Y	October 24 2023	This is done through improvement of business cases and cabinet reporting. Business cases are scrutinised at internal strategic boards to ensure that they meet the intended strategic aims.	P	P indicates response suggesting that relevant mechanisms were already in place
0.3	23-Jan-23		Ensure there is an effective mechanism to review commissioning activity, including reviewing whether the arrangement delivered on the intended strategic aims and capturing any lessons learned. Regular reports should be presented to CLT and the Lead Member responsible for contract management.			27-Feb-23	Y	October 24 2023	as above	P	P indicates response suggesting that relevant mechanisms were already in place

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A	B	C	D	E	F	G	H	I	J	K	L
Action Number Cisca	DETAIL	Lead Member/ Officer	Delegated to	Deadline	Actioned Y/N	Date Completed	Detail of action taken	Date of CISC	Related Item No	Notes	
0.1	In relation to Improvement and recovery the Director undertook to provide the most up to date information on delivery of actions to Members after the meeting.	Adele Taylor						27/06/2023	5		
0.2	Noted that Members could request the inclusion of KPIs in the scrutiny work programme at appropriate times during the procurement and commissioning cycle, and officers would be available to help Members shape their key lines of enquiry	AT		Future relevant scrutiny items				27/06/2023			
0.3	AT asked Members to provide feedback about how future such scrutiny reports could be better structured.	AT	All committee members	20-Oct-23				27/06/2023			
0.4	The Lead Member for improvement and Recovery undertook to investigate concerns about Nova House and request that an update report be provided to a future meeting of the Committee	Cllr Smith AT									
1	Revised information going forward that reconciles the RAG status of the Directions with Outcomes and the workstreams to deliver them with actions, outputs and milestones that will indicate progress	Cllr D Smith Sarah Hayward (SH)		28 November 2023				26/09/2023	3		
2	That in future quarterly reports, the commentary includes a summary of the direction of travel and momentum for the Directions.	Cllr D Smith SH	Dean Tyler	28 November 2023				26/09/2023	3		
3	More information to be provided to understand the reasons and plans for the carry forward monies related to drug and alcohol Table 7 in item 4 alongside budgeted activity in Appendix 1 item 5	Cllr Chahal Adele Taylor (AT)	Neil Haddock	23 rd October 2023	Y	25/10/2023	The carry forward relates to the Public Health funding allocation in respect of the Drug and Alcohol Team programme for 2022/23 of £38k with the programme underspending by £14k. The underspend was due to slippage in the delivery of the programme mainly relating to a small number of rehab and detox placements not going ahead as originally planned. The carried forward budget of £14k will be added to this year's budget with commitments to match resulting in no impact on the current forecast variance in 2023/24.	26/09/2023	4&5	This was requested to assist members to 'follow the money' and to inform their understanding of budgeting for scrutiny of 24/25 budget. Circulate to members via scrutiny officer	
5	Scrutiny members have offered their support to Adele Taylor and finance officers to trial budget dashboarding	AT		TBA by officer				26/09/2023	4&5	Possibly link it to budget setting cycle for 24-25 budget.	
6	Scrutiny officer to develop and propose process to suggest new potential agenda items for forward plan	Stephen Brown	Michael Edley (MTE)	28 November 2023	Y			26/09/2023	6	Members need a process that they can have confidence in and manages stakeholders expectations. Proposal to be circulated in advance prior to formal adoption on 28th Nov.	
7	Request for more detail on the projects in Phases 2 and 3	Simon Sharkey- Woods SSW		28-Nov-23				24/10/2023	3		
8	Further information regarding the Ark data centre suppliers	SSW		28-Nov-23				24/10/2023	3		
9	Residents' access to the council through new IT and its availability to particular communities to be referred to the Task Group on Public engagement	SH & MTE		28-Nov-23	Y			24/10/2023	3		
10	Refresh of IT Strategy in January to be brought to Committee	SSW		May onwards 2024				24/10/2023	3		
11	Share information of resident interaction with WEBSITE forms etc	SSW		28-Nov-23				24/10/2023	3		

	A	B	C	D	E	F	G	H	I	J	K	L
17	12	Progress report on ICT digitisation and modernisation to come to CISC in 6 months	SH		May onwards 2024				24/10/2023	3		
18	13	Propose progress report on PSED to fall a few months after T&F report on engagement and to include self assessment against EDI framework	SH		Jun-24				24/10/2023	4		
19	14	Information on how the council will actively draw upon the diversity of SBC workforce to moderate and inform service development and improvement	SH		Jun-24				24/10/2023	4		
20	15	Request that, in future procurement updates, where new procurements are reported, there is clarification that this relates to new contracts not existing contracts reported in the over £500 spend reports	Clare Priest (CP)		June 2024 onwards				24/10/2023	5		
21	16	Cllr Ifakhar to pass on details of the procurement issues and possibilities of in-cab IT	AT		Jan-24				24/10/2023	5		
22	17	Cllr Stedmond to pass on details regarding outstanding issues with a number of housing repairs for residents in his ward	CP		Jan-24				24/10/2023	5		
23	18	Cllr Hulme to pass on information to MTE gleaned from pilot CQA authorities to include in Task group report	MTE		November 28 2023	Y			24/10/2023	5		
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Slough Borough Council

Report To:	Corporate Improvement Scrutiny Committee
Date:	28 November 2023
Subject:	Scrutiny Task & Finish Group report: Preparedness of Adult Social Care for CQC Inspection
Chief Officer:	Marc Gadsby, Executive Director Adult Social Care
Contact Officer:	Alexander Polak, Statutory Scrutiny Officer Amanda Halliwell, CQC Project Manager
Ward(s):	All
Exempt:	No
Appendices:	Appendix 1 – Report of the Corporate Improvement Scrutiny Committee’s Task & Finish Group: Preparedness of Adult Social Care for CQC Inspection

1. Summary and Recommendations

- 1.1.** The Health and Care Act 2022 established a new duty for Care Quality Commission (CQC) to independently review and assess the performance of local authorities in delivering their adult social care functions, as set out under Part One of the Care Act 2014 (Care and support). Guidance is provided at www.cqc.org.uk that includes the assessment framework and the consequences of a poor assessment.
- 1.1** Appendix 1 is the final report of the ‘Preparedness of Adult Social Care for CQC Inspection’ Task & Finish Group, which was commissioned by the Corporate Improvement Scrutiny Committee at its meeting on 25 July 2023. It summarises the research undertaken by the committee in the limited time available and makes a series of recommendations.

Recommendations:

- 1. That the committee thanks the members of the Task and Finish Group, and the officers who supported it, for their work to produce the report at Appendix 1;**
- 2. That the report and its recommendations are endorsed by the committee; and**
- 3. That the following recommendations by the ‘Preparedness of Adult Social Care for CQC Inspection’ Task & Finish Group are recommended to Cabinet for the particular attention of the Cabinet Member for Health, Social Care & Wellbeing:**
 - a) Focus resources on those areas where self-assessment has identified the most opportunity for improvement. Consideration should be given to whether some areas could be safely deprioritised in order to deliver more impactful improvements in another areas.**

- b) Carry out an audit of officers' data analysis skills to identify the analytical skills and capabilities of officers in different departments across the organisation. Staff with data skills should be used to help mitigate those risks identified by the self-assessment that are dependent on data collection, analysis and interpretation (recognising that not all risks are addressed by this skillset).**
- c) Prepare an 'inspection visit action plan' that will be used to guide the council upon receipt of notification of a pending inspection.**
- d) Ensure that the Integrated care systems/Board continues to be engaged with and that it understands its role and relevance in an inspection of Adult Social Care (noting that they will be subject to their own CQC inspection too).**
- e) Document the Slough Story and a Vision for ASCs ambition as soon as possible and circulate it to stakeholders as the first phase in the Council's engagement on the pending CQC assessment.**

Commissioner Review

The Commissioners noted the report.

2. Report

- 2.1** Appendix 1 is the final report of the 'Preparedness of Adult Social Care for CQC Inspection' Task & Finish Group, which was commissioned by the Corporate Improvement Scrutiny Committee at its meeting on 25 July 2023. It summarises the research undertaken by the committee in the limited time available and makes a series of recommendations aimed at assisting the council to improve in this area. Adult Social Care improvement has come to be seen as one of the key drivers of the council's recovery journey although it is not covered specifically by any of the original improvement directions made by the secretary of state.
- 2.2** The topic was originally proposed to be considered as part of the overall issue of health inequality, however members resolved to commission a more focused piece of work from the Task & Finish Group, solely on the topic of CQC inspection readiness. This is because the issue was considered timely and urgent, based on the likely imminence of such an inspection at the commencement of a new inspection regime (see 'legal implications' below).
- 2.3** The report is self-explanatory.
- 2.4** The Task and Finish Group's report and recommendations are presented today for the consideration of the full committee. The Chair of the Task and Finish Group will introduce the report.
- 2.5** The committee is invited to explore the issues raised by the report and to ask questions of both the councillors and officers involved, in order to assure themselves of the value of the recommendations made.
- 2.6** The relevant cabinet member has been invited to attend along with the relevant executive director. They may provide an indication in the meeting of their openness to the various recommendations, however they may prefer to reserve their final views until the recommendations have been considered in full by their lead officers and the recommendations are received formally by cabinet.

- 2.7** If the committee is content to endorse the task and finish group's recommendations and refer them to Cabinet, then the cabinet member will be expected to provide, at that cabinet meeting, a response to the committee explaining which if any recommendations they are minded to accept or reject and a timeline for their implementation.
- 2.8** The Corporate Improvement Scrutiny Committee will then track the implementation of any recommendations which have been accepted by cabinet, via the committee's new 'recommendations tracker'.
- 2.9** This is the first Task and Finish Group which has been commissioned by the new Corporate Improvement Scrutiny committee, and the first undertaken within the new administration, with the support of a new scrutiny officer who joined the council after the T&F was commissioned. A number of the councillors on the group were new intake in May 2023, although the committee benefited from being chaired by a councillor with significant experience and expertise in this subject area as a former cabinet member. This exercise and the report at appendix 1 should therefore be viewed as both an important contribution to the ongoing improvement of the council and as part of the learning curve of the new committee. Members' and officers' feedback on the success of the process and the final report, will be valuable in assisting councillors and officers to continuously improve Slough Borough Council's Overview and Scrutiny arrangements over the course of this administration. One example of a lesson learned is as follows:
- 2.10** The scope of this task and finish group did not include, within the time or resources available for the work, a full assessment of the financial or workforce implications of the recommendations proposed. Furthermore, members of the Task and Finish Group recognised that a considerable body of related work was ongoing, which was outside of 'business as usual'. In responding to the committee's recommendations, the cabinet member may therefore be expected to give their views as to the financial and other implications of these recommendations.
- 2.11** In general, it would be better to include financial and legal implications within the scope of future reviews to provide higher quality recommendations, and this learning will be taken forward into future reviews.

3. Implications of the Recommendations

3.1 *Financial implications*

- 3.2** The act of referring these recommendations to cabinet does not in itself incur any financial implications.
- 3.3** However, were cabinet to accept those recommendations there are likely to be resource implications which may incur additional expenditure. For example, recommendations such as reallocating staff with data analysis skills to different projects may attract opportunity costs.
- 3.4** Whether these recommendations can be carried out within existing capacity is a matter which was not covered by the task and finish group's investigation and so will be a matter for cabinet to assess in its response to these recommendations.

3.5 *Legal implications*

- 3.6** The Health and Care Bill published in July 2021, provides a new legislative framework to facilitate greater collaboration within the NHS and between the NHS, local government, and other partners, and to support the recovery from the pandemic.
- 3.7** The Health and Care Act 2022 gave the Care Quality Commission (CQC) new regulatory powers to undertake independent assessment of local authorities' delivery of regulated care functions set out in Part 1 of the Care Act 2014
- 3.8** The Care Act contains five Parts and eight Schedules. Part 1 – Care and Support, sets out the legal framework for the provision of adult social care in England.
- 3.9** The Health and Care Act 2022, introduces a new power for the Secretary of State to intervene when it is considered that a Local Authority is failing to meet its duties.
- 3.10** The cornerstone of the new assurance system will be the assessment of compliance with legal duties and responsibilities. It is therefore implicit that there may be legal implications should any compliance issues be identified through the CQC Assurance process.
- 3.11** The recommendations in this report are designed to assist the council in addressing its duties, however a full consideration of their legal implications was not in scope of the T&F group's review and so this will be a matter for cabinet to assess in its response to these recommendations.

3.12 *Equality implications*

- 3.13** The CQC's new inspection framework has questions of equality running throughout. For example: under 'Theme 1' of the framework, titled 'Working With People' is an area of assessment titled 'understanding and removing inequalities in care and support'. Three of the five evidence categories CQC will use to assess Local Authorities entirely comprise feedback about people's experience, as reported by the people themselves, or by others, such as community and voluntary groups representing them. This includes feedback from people with protected equality characteristics and from the local authority's equality, diversity and inclusion leads, where available.
- 3.14** The recommendations in this report are designed to assist the council in demonstrating the effectiveness of the council's arrangements against this framework and, to the extent that this includes improving equalities outcomes, they can be expected to contribute positively. However, these recommendations do not specifically address equalities issues and there are no specific equalities implications associated with them.

4. Appendices

Appendix 1 – Report of the Corporate Improvement Scrutiny Committee's Task & Finish Group: Preparedness of Adult Social Care for CQC Inspection

**Report of the
Corporate
Improvement
Scrutiny
Committee's Task
and Finish Group:**



**Preparedness of Adult Social Care for CQC
Inspection.**

November 2023

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Foreword

In August 2023 the Corporate Improvement Scrutiny Committee agreed to convene a Task and Finish group to understand and investigate the preparations for the Care Quality Commission's inspection of Adult Social Care Services.

The inspection will be the first of any Adult Social Care department by a regulator in approximately twelve years. The Care Quality Commission (CQC), the independent regulator of health and adult social care in England, is reintroducing these in every Council, with a two-year programme starting in Autumn 2023.

The scope (Appendix A) of the Task and Finish group is to consider whether recommendations are needed to improve the accuracy of Slough Borough Council's CQC self-assessment and/or suggest further preparatory work which may improve the chances of a more favourable assessment by CQC inspectors, along with its costs and benefits.

I am very grateful to the members of the Task and Finish group for their input and contribution to our work. I would also like to thank the Scrutiny officer and the support provided by the Director of Adult Social Care.

Our review highlighted several themes concerning data, people and learning from the pilots which have informed the recommendations of the Task and Finish group. I hope the recommendations are endorsed by the Scrutiny Committee and approved by Cabinet, as these will support an improvement in the Council's preparedness as well as services and outcomes for Slough residents.

Councillor Christine Hulme
Chair
CQC Preparedness Task and Finish Group

Executive summary and recommendations

A Scrutiny Task and Finish group on preparedness for inspection of SBC's Adult Social Care (ASC) by the Care Quality Commission (CQC) was convened in September 2023.

Its task was to review the internal programme of activity to date and consider whether recommendations were needed to improve the accuracy of Slough Borough Council's CQC self-assessment and/or suggest additional preparatory work which could improve the chances of a more favourable assessment by CQC inspectors.

An accurate self-assessment leads to increased understanding, not only of what may need to improve, but also of what inspectors expect. This can support improvements in the quality of services by Adult Social Care and mitigation of risks, in turn improving the experiences and outcomes of service users, carers and others.

The Task and Finish Group have made the following recommendations to improve the ASC's preparedness for CQC inspection. Cabinet is recommended to:

- a. Focus resources on those areas where self-assessment has identified the most opportunity for improvement. Consideration should be given to whether some areas could be safely deprioritised in order to deliver more impactful improvements in another areas.
- b. Carry out an audit of officers' data analysis skills to identify the analytical skills and capabilities of officers in different departments across the organisation. Staff with data skills should be used to help mitigate those risks identified by the self-assessment that are dependent on data collection, analysis and interpretation (recognising that not all risks are addressed by this skillset).
- c. Prepare an 'inspection visit action plan' that will be used to guide the council upon receipt of notification of a pending inspection.
- d. Ensure that the Integrated care systems/Board continues to be engaged with and that it understands its role and relevance in an inspection of Adult Social Care (noting that they will be subject to their own CQC inspection too).
- e. Document the Slough Story and a Vision for ASCs ambition as soon as possible and circulate it to stakeholders as the first phase in the Council's engagement on the pending CQC assessment.

In addition, the task and finish group was instrumental in highlighting an issue which was dealt with during the life of the T&F group. As per section 3.2.1, Members expressed concern that a considerable body of work was underway which was outside of "business as usual". They also recognised the considerable financial pressures being faced by the Council and that additional resource in support of this work would be unlikely. Nevertheless, their discussions threw this issue into focus and the Portfolio Holder and Executive Director took action during the life of this task and finish group to ensure that CQC preparedness support continued to the end of the Calendar Year. This is a good example of how the process of carrying out a T&F can be as valuable as the recommendations themselves.

1. Introduction

Effective overview and scrutiny provides constructive ‘critical friend’ challenge and ensures the voice of the public is heard. It should be led by objectivity and evidence by people who take responsibility for their role and drive improvement in public services.

This report sets out the work and conclusions of a task group of the Corporate Improvement Scrutiny Committee (CISC) that was convened at the beginning of September 2023. The Task Group met on 4 occasions, the fourth meeting taking place on the 28th September 2023.

The benefits of this independent review are that:

- Slough Borough Council’s Cabinet can be more assured that the CQC self-assessment of July 2023 represents a fair account of Adult Social Care at that point in time; and
- Recommendations for further preparatory work may improve the chances of making service improvements which would amount to a more favourable assessment by CQC.

1.1 Membership

Councillors:

- Christine Hulme (Chair)
- Siobhan Dauti
- Andrea Escott;
- Fiza Matloob;
- Frank Mark O Kelly;
- Subhash Mohindra.

Supported by:

- Amanda Halliwell, Interim CQC Assessment Lead
- Marc Gadsby, Executive Director of Adult Social Care
- Michael Edley, Governance and Scrutiny Officer

1.2 Terms of Reference

At the July 2023 meeting of CISC, it was agreed that a task and finish group would be convened during four meetings in September to carry out a rapid review of ASC’s self-assessment and associated documents and data. The relatively short period of investigation was predicated on availability of officers and the need to report any findings to Cabinet before the end of the year on the assumption that the likelihood of CQC carrying

out their assessment increasing significantly in the New Year 2024. From a pragmatic point of view, the approach to this investigation was one of selected data forming the basis of question-and-answer sessions with officers and conversations about the key issues that emerged.

The group agreed to:

- Meet with relevant officers for the self-assessment to discuss and agree the key lines of enquiry; and
- Bring a report back to a future meeting of Scrutiny for consideration.

The objectives of the group set out in the terms of reference were to:

- consider whether recommendations are needed to improve the accuracy of Slough Borough Council's CQC self-assessment
- suggest further preparatory work which may improve the chances of a more favourable assessment by CQC inspectors, along with its costs and benefits.

The group agreed the scope of the work in its first meeting, along with the key issues that would be addressed at each of the three meetings that followed. (See Appendix A).

2. Background

The Health and Care Act 2022 established a new duty for Care Quality Commission (CQC) to independently review and assess the performance of local authorities in delivering their adult social care functions, as set out under Part One of the Care Act 2014 (Care and support). As well as identifying local authorities that are not able to demonstrate an acceptable level of service to their residents, the assessments will provide a greater understanding of practice and provision at local level, making it easier to see what is working well, and make good practice, positive outcomes and outstanding quality easier to spot and share nationally.

The performance of Adult Social Services has been measured, mainly, through the Adult Social Care Outcomes Framework (ASCOF) and by nationally co-ordinated surveys. The introduction of CQC Inspections for core functions is a new requirement that will bring greater transparency to this sector. It is reasonable to expect that this will incentivise many authorities to seek to drive up standards in ASC performance.

The ethos behind the CQC assessment is summarised in Figure 1 below. A summary of the assessment framework adopted by the CQC can be found in Appendix B.

Figure 1: The ethos behind the CQC assessment

Evidencing what we do



3. Preparations in Slough: Evidence and related Discussions

Task Group Members were provided with an overview of;

- Timeline of preparations for CQC Assessment that started in September 2022 (Appendix C)
- Results of the August Self-assessment (Appendix D)
- A 'CQC KPI scorecard'
- An 'ASC DLT Balanced Scorecard'

The Information in Appendices C and D were the main focus of discussions in relation to the work undertaken to predict the likely outcome of the CQC Assessment and the key areas of risk in terms of significant gaps in or unreliability of data.

Appendix C is self-explanatory, providing a detailed view of activity taken by the service so far to assure itself of its readiness and identify areas for improvement.

Appendix D is a summary document provided by SBC officers which provides a high-level self-assessment of the council's performance against its duties under Part 1 of the Care Act 2014. The methodology used, including the RAG-rating provided, is informed by the draft version of the assessment framework which the CQC has published online, but it is a locally-created system in order to assist the council to model the potential outcome of an assessment. It is important to note that this is an internal document showing progress at a point in time, at the beginning of August 2023. It is included so as to give an indication of areas which were covered in more detail by the 'CQC KPI scorecard' and 'ASC DLT Balanced Scorecard' reviewed by task and finish group members.

The KPI scorecard and DLT balanced scorecard were detailed operational documents which were shared with the T&F group members in confidence while still in draft. They

provided a useful insight into the operational situation, which assisted the group in their enquiries.

Implicit in the CQC framework was that weaknesses in any aspects of the assessment would be compounded if there were also gaps in data and documents that directly impacted on the council's ability to carry out and evidence a self-assessment with any degree of certainty. Such gaps would also presumably undermine the ability of the council to explain what it does (See Fig 1 above).

It was clear that a large amount of work was underway to collect and analyse data and other forms of evidence such as documents, evidence of arrangements, documents providing internal guidance for staff in order to best understand the council's position and any gaps which needed to be filled. This report does not attempt to reproduce or summarise the full breadth or depth of this information, as this was out of scope for the task and finish group.

3.1 The self-assessment

Prior to the work of the task and finish group, three self-assessments had been undertaken by the council's CQC lead officer, most recently in August 2023. Each iteration concluded that SBC would struggle to avoid a poor assessment. This was due, in part, to the unavailability of some items of evidence that would be needed to support the Slough response to the quality statements identified by the CQC.

Members' questions and discussions explored the issues identified by the self-assessments (such as gaps in data and documentary evidence, or evidence of unfavourable performance) and the work that was being undertaken to address these issues. Each self-assessment suggested improvement over the previous one, shown by the RAG rating of the assessment framework's themes and related quality statements (Appendix D) although the process also brought to light new issues that needed to be addressed.

Members also discussed with officers the degree to which they had confidence in the quality of the information being drawn together. Whilst it was clear that officers had put in place actions to cross-check and reconcile information, gaps in responses from officers in relation to QA of information is an area of improvement. Nonetheless, members were of the view that the approach to establishing the status of ASC (in relation to the self-assessment) was structured and rigorous and that, based on the available information (and all that this implies), the self-assessment was probably a fair reflection of ASC at that point in time.

Members then moved to the forward-looking action plan continuing the preparations for CQC inspection and to determine whether there was the potential for Slough to achieve a rating of "Requires Improvement" and thereby to avoid the lowest rating of "Inadequate".

3.2 Additional measures to prepare for assessment.

3.2.1 Actions related to people.

Members discussed at some length the work underway to continue preparing for a pending inspection. It was made clear to members that much of the work to date had been undertaken by the CQC Lead based upon information provided by officers in the directorate. A significant challenge facing the preparations was that the data collection, collation and evaluation activities would need to be owned by officers and managers within the 'business as usual' capacity of the service going forwards.

Members learned that an inspection would expect all officers to be broadly familiar with the 'Slough story' and to demonstrate a broad understanding of the borough's socio-demographics, and other drivers that contributed to the needs of Slough in relation to ASC and the performance of services as a consequence.

The CQC assessment would also include interviews with Slough BC members and a potentially wide range of stakeholders, including VCS organisations, service users, and colleagues in other public service organisations. The work to provide these stakeholders with relevant information about the pending inspection and the "Slough Story" had barely begun, due to the prioritisation of other crucial aspects of the preparedness work, such as collection and analysis of evidence to complete the full self-assessment and project management of that, along with the production of an internal guidance manual for staff.

Members expressed concern that the embedding of activities and the need to support officers and key stakeholders leading up to an inspection, coupled with the existing challenges in information collection and collation, represented a considerable body of work that would require ongoing monitoring and activity that was outside of "business as usual". They also recognised the considerable financial pressures being faced by the Council and that additional resource in support of this work would be unlikely. Their discussions did, however, bring into harsh focus the significant pressures officers were facing and the risks of not sustaining the focus and support on the CQC preparedness work that had been in place to date. This was acknowledged by the Portfolio Holder and Executive Director who took action during the life of this task and finish group to ensure that CQC preparedness support continued to the end of the Calendar Year. This is a good example of how the process of carrying out a T&F can be as valuable as the recommendations themselves.

3.2.2 Action related to data and optimising the outcome of a CQC assessment.

Members were interested in whether there was the opportunity to interrogate the RAG ratings in the self-assessment framework (Appendix D) to determine, for each Red or Amber Quality Statement whether additional work to move the RAG from Red to Amber or from Amber to Green might make a material difference to the overall assessment. Members understood that activity on some other Quality Statements may have to effectively

cease as a trade-off, and that there would be a risk that the RAG status of those other areas might drop.

Members favoured a pragmatic approach to focus resources where their impact might have the biggest potential to improve the assessment, albeit at the expense of other areas where further work would have little chance of changing the RAG rating. These discussions led to **Recommendation a** in Section 4.

Members discussed the view that the culture and practice nationally of service level data collection and analysis had become increasingly light touch over a number of recent years. Over the same period resources had become increasingly limited so that they had been directed to service provision, almost certainly at the expense of measurement, analysis, monitoring and reporting.

Preparations for the CQC and other interventions seemed to suggest that officers with the right numerate and analytical skills to support departments are now spread more thinly than before. Members were of the view that, whilst not proposing additional resources in this respect, there may be opportunities to maximise the relevant skills that exist across the whole organisation to develop a more flexible and effective resource that would focus on corporate priorities in a more focused, time managed way. This is expressed in **Recommendation b** in Section 4.

3.3 Learning from Pilot authorities

The committee chair attended an online seminar, where feedback was provided by two authorities (Lincolnshire and Suffolk) that had volunteered to be subject to a CQC assessment as pilot authorities prior to the full roll out of the new programme.

The Chair's notes on key points of learning are provided in Appendix E. There are several points that serve as confirmation on process rather than requiring specific action. The learning has however led to a further three **Recommendations c, d and e**, in Section 4.

It is understood that the matters addressed by recommendations c and e are already planned by the council, with the intention that they will proceed when resource constraints allow. These matters are the creation of an 'inspection visit action plan' and creating and disseminating a 'Slough Story' and a 'Vision for ASCs'.

4. Conclusion: Recommendations

The Task and Finish Group have made the following recommendations to improve the ASC's preparedness for CQC inspection. Cabinet is recommended to:

- a. Focus resources on those areas where self-assessment has identified the most opportunity for improvement. Consideration should be given to whether some areas could be safely deprioritised in order to deliver more impactful improvements in another areas.
- b. Carry out a data analysis skills audit to identify the analytical skills and capabilities of officers in different departments across the organisation, so that those staff with data skills can be redeployed to help mitigate risks identified by the self-assessment that are highly dependent on data collection, analysis and interpretation (recognising that not all risks are addressed by this skillset).
- c. Prepare an 'inspection visit action plan' that will be used to guide the council upon receipt of notification of a pending inspection.
- d. Ensure that the Integrated care systems/Board continues to be engaged with and that it understands its role and relevance in an inspection of Adult Social Care (noting that they will be subject to their own CQC inspection too).
- e. Document the Slough Story and a Vision for ASCs ambition as soon as possible and circulate it to stakeholders as the first phase in the Council's engagement on the pending CQC assessment.

In addition, the task and finish group was instrumental in highlighting an issue which was dealt with during the life of the T&F group. As per section 3.2.1, Members expressed concern that a considerable body of work was underway which was outside of "business as usual". They also recognised the considerable financial pressures being faced by the Council and that additional resource in support of this work would be unlikely. Nevertheless their discussions threw this issue into focus and the Portfolio Holder and Executive Director took action during the life of this task and finish group to ensure that CQC preparedness support continued to the end of the Calendar Year. This is a good example of how the process of carrying out a T&F can be as valuable as the recommendations themselves.

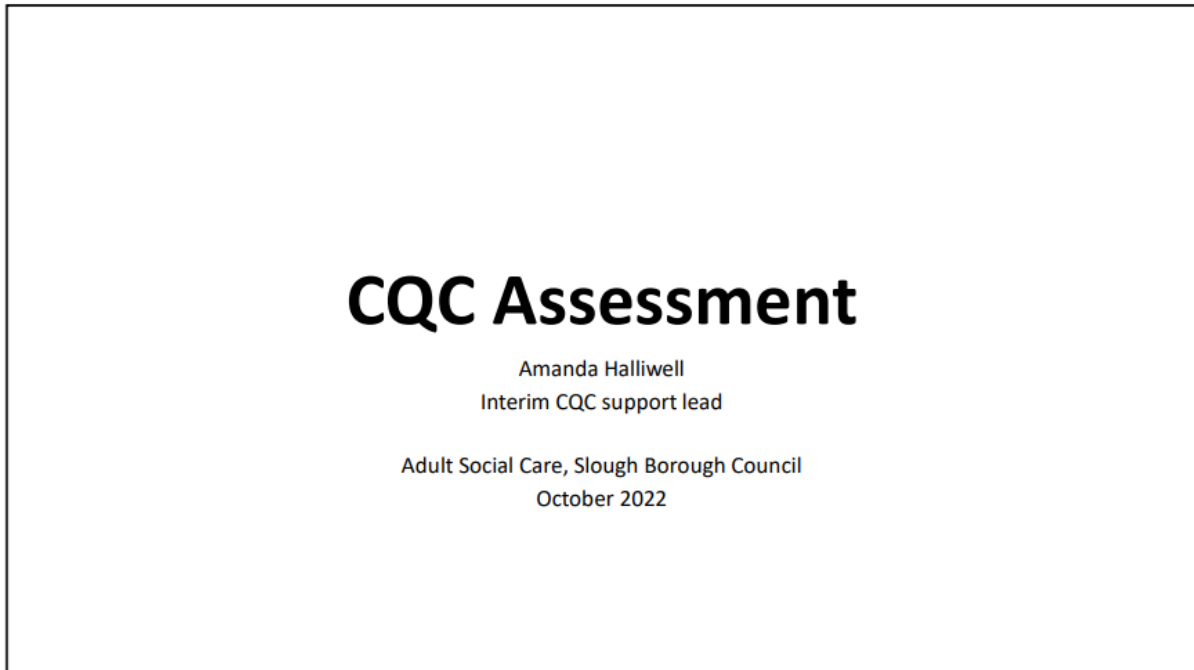
Appendix A: Scope of Scrutiny.

SUMMARY: Slough can expect to be an early candidate for CQC assessment of Local Authority Assurance in relation to its Adult Social Care (ASC) services. In preparation for this the Director has commissioned an independent Self-Assessment and some initial work in readiness for the CQC. This Scrutiny Task Group will seek assurance that the self-assessment is a true reflection of ASC services and explore further options to improve preparedness and any practicable options to improve aspects of the self assessment.

Scrutiny Officer	Michael Edley	Steering Group	Cllrs: Christine Hulme (Chair) Andrea Escott, Siobhan Dauti, Fiza Matloob, Subhash Mohindra, and Frank Mark. O Kelly.
Project Lead	Amanda Halliwell		
Strategic Lead	Marc Gadsby (Director)	Other stakeholders	
Outcomes	Objectives		Outputs
The Cabinet is assured that, on the basis of the work undertaken, the CQC Self-assessment represents a true account of ASC as of July 2023	T&F Group to evaluate work in completing the self-assessment		<ul style="list-style-type: none"> Interim Report to OSC relating to scrutiny of the approach to self-assessment and any related recommendations.
The Cabinet is able to make an informed decision including an assessment of the costs and benefits regarding possible options for further preparative work going forward that might improve the chances of a more favourable CQC assessment.	T&F Group to identify further options to improve preparedness as well as propose any practicable actions that may improve elements of the self-assessment		<ul style="list-style-type: none"> Report to OSC and Cabinet regarding options and possible recommendations
In Scope	Out of Scope		Critical Success Factors
Those aspects of the CQC assessment framework for which data is available and has been collated.	Aspects of the assessment framework where data is unavailable/uncollated		Focus of inquiry and best use of members time

Work streams	Objectives	Outputs/milestones	Target Date / Completed
Meeting 1 (1 hour) 6th September	<ul style="list-style-type: none"> • Agree scope, timetable and key lines of enquiry. • Discussion regarding the self-assessment (slide 13) and members' direct experiences (personal or of constituents) provided after the meeting 	<ul style="list-style-type: none"> • Agreed scope (this doc) • Members' experiences will be collected and collated as part of the evidence base. 	6 September 7 September
Meeting 2 (1 Hour) 14th September Outcome 1	<ul style="list-style-type: none"> • Understand the work undertaken and the broad evidence base, quality assurance etc leading to the Self-Assessment. • Q&A with members focussed on the approach and degree to which the SA is fair 	<ul style="list-style-type: none"> • AH – approach timeline and feedback • Summary of main findings + any recommendation 	7th Sept 18th Sept
Meeting 3 (2 Hours) 20th September Outcome 2	Members in two groups (2 members + 3 members) to focus on different Quality statements and what further preparation is needed/add value going forward and if any practicable service improvements might have impact	<ul style="list-style-type: none"> • AH to supply 2 Info packs in terms of direction of travel and what is still planned and what else could be done in preparing the assessment, possibly in categories (information, people and communication) 1 pack relating to QS1 and QS2, the other relevant to QS4, QS6 & QS7¹ • Interim summary of main findings & recommendations 	Friday 15th
Meeting 4 (1 Hour) 28th September	Members to agree overall findings and recommendations as basis for final report	<ul style="list-style-type: none"> • Initial draft report comprising findings and recommendations in 2 interims. • Final Draft 	October 10th November

Appendix B: Summary of CQC inspection framework



1

CQC Assessment Framework	
Current	From January 2023
3 inspection frameworks	1 framework for all providers, LAs and ICSS
5 key questions: Safe, Effective, Caring, Responsive, Well led	5 key questions and 4 levels of rating are unchanged
4 levels of rating: Outstanding, Good, Requires Improvement, Inadequate	KLOES replaced by 34 Quality Statements
ASC has 24 KLOEs	8 will apply to local authorities and ICSS

Evidence for CQC

6 evidence categories (5 for LA)

Feedback from:

- Service users
- Staff (interviews & focus groups)
- Partner organisations

Processes

Outcomes

Evidence is specified

- Specific data indicators
- Specific documents
- Evidencing processes which CQC lists

Evidence will be *scored*

Evidence will be evenly weighted

3

Evidence for CQC

Self-assessment

Data indicators

- Statutory returns
- CQC ratings profile of local regulated services
- National capacity tracker metrics

Case notes – ‘tracking’

Documents

- strategic plans, commissioning strategies
- evidencing that learning has been implemented and embedded
- the effectiveness of policies and procedures

Quality statements

4 themes for LAs and ICSS How Local Authorities:

- work with people
- provide support
- ensure safety within the system

8 Quality statements

Leadership

5

Quality statements

Theme 1: How Local Authorities work with people

Assessing needs

Supporting People to live healthier lives

Care planning & review	Prevention
Direct payments	Information & advice
Charging arrangements	Wellbeing

Quality statements

Theme 1: How Local Authorities work with people

Assessing needs

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them

Supporting people to live healthier lives

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support

7

Quality statements

Theme 2: How Local Authorities provide support

- ***Care provision, integration and continuity***
- ***Partnerships and communities***

Focus includes: market shaping, commissioning, workforce capacity and capability

8

Quality statements

Theme 3: How the local authority ensures safety within the system

- *Safe systems, pathways and transitions*
- *Safeguarding*

Focus includes: continuity of care, Safeguarding Adults Board

9

Quality statements

Theme 4: Leadership

- *Governance, management and sustainability*
- *Learning, improvement and innovation*

Focus includes: culture and strategic planning

10

Appendix C: Self-assessment activity timeline

Date	Activity	Method	Outputs	QA	
Sept to early Nov 2022	AH starts as Interim CQC Lead Self-assessment 1 AH creates reporting format to mirror CQC's draft Assessment Framework	<ul style="list-style-type: none"> Weekly meetings with ASC CQC team AH one to one interviews of key ASC staff, small no of partners & wider council staff. See Interviewee list (F) AH gathers, reviews & logs evidence (data & documents) 	<ul style="list-style-type: none"> AH creates a findings report template to mirror CQC's Assessment Framework Detailed self-assessment report of findings & recommendations per Quality Statement Summary report 04 11 22 (E) 62 point action plan 04 11 22 consolidating basics Evidence bank on X folders DLT report 12 10 22 (C) CLT report 19 10 22 (D) CQC Awayday intro 10 10 22 (B) 	26 10 22	Discuss findings & recommendations with ASC CQC team per Quality Statement
				End Oct	AH makes any adjustments needed, gained from feedback
				12 & 19 Oct 22	Feed back to DLT & CLT
				28 10 22	Feed back summary points to People Too (Consultants assisting SBC)
Nov to Jan 23	ASC CQC team progresses the action plan (AH away)		Some meetings held but little progress made		
Early Jan to end Mar 2023	AH resumes work Monitor & support progression of action plan Self-assessment 2 – at summary	<ul style="list-style-type: none"> Weekly meetings with ASC CQC team up to 22 03 23 – monitoring, fact finding, updating team / AH ASC CQC team progresses action plan & AH liaises continuously AH gathers, reviews & logs progress & further evidence AH manages programme of policy development including editing & some drafting 	<ul style="list-style-type: none"> Action plan & meeting slides kept up to date Summary self-assessment report updated 23 03 23 Evidence bank on X folders - additions DLT report 30 03 23 (G) CLT report of 30 03 23 (H) at meeting of 10 05 23 CQC brief coverage at Awayday Jan 2022 	End Mar 2023	Discuss / email findings & recommendations with ASC CQC team per Quality Statement
				End Mar 2023	AH makes any adjustments needed, gained from feedback

Date	Activity	Method	Outputs	QA	
	level only (end Mar)	<ul style="list-style-type: none"> AH lists & prioritises further CQC prep work (not connected to evidence for Quality Statements) which needs resourcing (eg engagement, CQC visit logistics etc) 		30 03 23	Reviews effectiveness of weekly team meetings & proposes change of approach to DLT, to weekly one to ones - accepted
				Mar & May Oct	Feed back to DLT & CLT
April to early July 2023	Monitor & support progression of action plan	<ul style="list-style-type: none"> Change weekly meetings to (largely) weekly one to ones with individual members of ASC CQC team ASC CQC team progresses action plan AH gathers, reviews & logs further evidence AH manages programme of policy development including editing & some drafting, and version control 	<ul style="list-style-type: none"> Evidence bank on X folders - additions 		
July to early Aug 2023	Self-assessment 3 Responsibility for subsequent updates of self-assessments moves over to named staff on 02 08 23	<ul style="list-style-type: none"> Weekly one to ones on hold while AH updates detailed findings & action plan AH meets with Project Manager of inspection improvement work at SBC's Children First. As a result, puts the updated CQC action plan into same format as theirs, to include related text from CQC framework. This shows <u>why</u> each action is needed 	<ul style="list-style-type: none"> AH creates a RAG-rated one page table of ASC's performance against CQC's full Assessment framework (I) (No Summary report as used RAG rated table instead) Detailed self-assessment report of findings & recommendations per Quality Statement New 145 point action plan 03 08 23 (J) in new format 	July and 02 08 23	Share draft self-assessment per Quality Statement, and action plan, by email and meeting (K) with ASC CQC team 02 08 23
				July and 02 08 23	Sign sheet to log which staff confirm have read and agree findings – incomplete responses

Date	Activity	Method	Outputs	QA		
			<ul style="list-style-type: none"> Evidence bank on X folders - additions Evidence spreadsheet logging all evidence Email confirming ASC CQC team's nomination of individuals to update each Quality Statement from here 02 08 23 (L) 	<table border="1"> <tr> <td>End July / early Aug</td> <td>AH makes any adjustments needed, gained from feedback</td> </tr> </table>	End July / early Aug	AH makes any adjustments needed, gained from feedback
End July / early Aug	AH makes any adjustments needed, gained from feedback					
Aug 2023	ASC CQC team progresses the action plan (AH away)					
Sept 2023	ASC CQC team progresses the action plan (AH away) AH - Scrutiny project	<i>Intentions:</i> <ul style="list-style-type: none"> Catch up on progress of action plan inc full team meeting end Sept Focus on Scrutiny work If time – AH to progress preparing staff for CQC visit / engagement 	<i>Intentions:</i> <ul style="list-style-type: none"> Scrutiny final report 09 11 23 			
Oct 2023+	Self-assessment 4 – due Dec 2023	Aiming for 6 monthly update so that the document needs little adjustment at point of its request from CQC				

Appendix D: Internal Self-assessment as of August 2023

CQC SINGLE ASSESSMENT FRAMEWORK – Slough self-assessment 03 08 23 v16 D R A F T				Themes, Quality statements, Evidence: feedback, processes, outcomes							
Theme 1: Working with people				Theme 2: Providing support							
QS1: Assessing needs		QS2: Supptg ppl healthier lives		QS3: Equity in experience & outcomes		QS5: Ptnerships & communities		QS4: Care prov, integ & continuity			
Feedback: people; staff & leaders; partners		Feedback: people; staff & leaders; partners		Feedback: people; staff & leaders; partners		Feedback: people; staff & leaders; partners	?	Feedback: people; staff & leaders; partners	?		
Assessment, care planning & review processes & pathways from first contact w LA		Prevention strategy & assoc plans		Arrgmts for identifying & reducing inequality of experience & outcomes re Care Act, inc strategies, action plans, EIAs, evidence of impact & outcomes		Use of BCF		JSNA			
Arrgmts for ensuring timely assessment, care planning & care reviews		Preventative svces profile & other measures to prevent, delay & reduce need		Equality objectives & delivery plans		Ptnership wrkng & arrgmts to deliver shared local & national objectives, eg:		MPS & Market shaping plans			
Arrgmts for offering, allocating & overseeing DP		Arrgmts for access to equipment /adaptations		Annual reporting for Public Sector Equality Duty		- hospital discharge		Mkt sustainability plan			
Arrgmts for making Care Act eligibility & care funding decisions, inc appeals		Arrgmts for providing accessible info/advice		Arrgmts for engaging w people to understand their experience re Care Act duties		- inequalities		Cost of Care ex outputs			
% of carers: self-dir'd support	?	% of ppl 65+ received reablemt or rehab after hosp discharge		Inclusion & accessibility arrgmts eg BSL, Health Inequalities Dashboard		- Transforming Care		Comm strategies inc joint & specialist, & arrgmts for monitoring impact			
% of SU: self-dir'd support	?	% SU 65+ at home 91 days after discharge from hosp to reablement / rehab		No outcomes specified		Enabling mechanisms eg		Use of Out of Area placements & trends last 3 years			
% of long-term support clients reviewed (planned & unplanned)		% ppl w LD who live in own home / w family		CQC to assess via publicly available documents		- information-sharing		Arrgmts for quality monitoring & improving commissioned services, inc OOA			
% of carers: direct payments		% SU who received short term support who no longer need support				- roles & responsibilities		Workforce strategy to support LA wrkforce capacity & capability			
% of SU: direct payments						- accountabilities		ASC workforce pressure			
						No outcomes specified		Bed occupancy (residential) & spare hours (community)			
								CQC ratings profile: prov in LA			
Theme 3: How the LA ensures safety within the system				Theme : Leadership							
QS6: Safe systems, pathwys, transns		QS7: Safeguarding		QS8: Gov, mgt & sustainability		QS9: Learning, impr & innovation					
Feedback: people; staff & leaders; partners		Feedback: people; staff & leaders; partners		Feedback: people; staff & leaders; partners		Feedback: people; staff & leaders; partners		Contracts handed back & why			
Pathways when move between services & agencies: design, evaluation, review		SAB annual strategic plan & report		ASC vision & strategic plan(s)		Learning from feedback eg people's experience, WB info, serious incidents & serious case reviews		Embargoes in last 12 months			
Contingency planning & emergency preparedness for provider failure & service continuity		SAR reviews, learning & actions		Governance arrgmts for deliv Care Act duties inc QA, risks to delivery, impact on people's experience & outcomes		Coroner Reg 28 reports	0	Profile of Carers' services commissioned & other			
Information sharing protocols		Processes & pathways for mg'g safeg alerts, enqs & investigs		ASC risk register & arrangements for internal & external escalation		Accreditations with external organisations		No of regulated providers exiting the market last 12 mth			
No outcomes specified		Tracking, oversight & QA of safeg		Arrgmts for LA's compliance w UK data prot'n legislation		Co-production processes		CQC safe & effective staffing			
		Strategic governance of safeg themes, trends & outcomes		Carers' strategy		Innovation policy or strategy		QS scores of providers in LA			
		Processes for responding to repts/ reviews inc Coroner's Reg 28, domestic homicide, MH & serious incidents		No outcomes specified		No outcomes specified					
		NHS Digital trends & no of safeg refs made & proportion meet S42									
		% of people lacking capacity supported by advocate, family member or friend									

This summarises CQC's document: <https://www.cqc.org.uk/local-systems/local-authorities/assessment-framework>

Amanda Halliwell 2023

Appendix E: Update from Pilots in Lincolnshire and Suffolk.

Selection of LAs and Timings

The next set of LAs to be inspected will be balanced in terms of geography and types of councils.

In terms of timescales, they suggest about 9 weeks' notice, but there is some fluidity around this.

The actual inspection on site 2 to 3 days and online about a week.

People

The CQC will meet with the Lead Member and Shadow Lead Member. A lot of questions about how they see things locally.

The CQC will want to see staff without their line manager present.

Members will need to understand the 'story' and explain different performance indicators. Understand the vision for ASC in the Council. What residents are saying. Governance, understanding oversight, outcomes and performance. Line Managers getting out and about talking to staff and providers. Relationships with the DASC. Developing must knows.

They will also speak to the Director of Public Health, Senior Social Worker, Chair of Wellbeing Board.

Adult Safeguarding Board – They will talk to the Chair.

The CQC will seek added views from the Vol Sector in addition to the written evidence. They went through the evidence submitted and decided what they wanted and what they did not want to use.

In terms of the Vol groups, they looked at how easy it was to engage with them, and they looked at wider groups that were not engaged with the LA.

Service users - they will also want to meet groups involved in co-production. Look at case tracking and want to speak to carers. They place importance on getting peoples view on how the LA capture peoples views.

The biggest learning curve is the onsite element to the assessment. I.e. meeting people and getting a sense of place and a sense of systems. Rich information on this should be provided prior to the visit.

Resources and systems

They will look at staffing and the size of teams.

They will assess systems ensuring that they meet the Care Act requirements.

They will avoid looking too much at the money/finances.

Integrated Care

They will look at the Integrated Care Systems locally. They will also look at other regulatory activity going on in councils? LAs will receive a letter with request for info.

Integrated Care System – They will look at leadership and what it means for a Line Manager. They will look at the LAs relationship with the Integrated Care Board, though not really a priority for the CQC. But will examine hospital discharges and moves into social care.

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Slough Borough Council

Report To:	Corporate Improvement Scrutiny Committee
Date:	28 November 2023
Subject:	Launching a Resident Engagement Task and Finish Group
Chief Officer:	Sarah Hayward, Executive Director for Strategy and Improvement
Contact Officer:	Caroline Adlem, Head of Communications & Resident Engagement Alexander Polak, Statutory Scrutiny Officer
Ward(s):	All
Exempt:	No
Appendices:	Appendix A – Draft Scope for Resident Engagement Task & Finish Group

1. Summary and Recommendations

- 1.1 This report recommends launching the committee’s next Task and Finish Group immediately, as per the committee’s forward plan. Appendix A sets out the draft scope. The topic is ‘Resident Engagement’. This contributes directly towards the council’s improvement & recovery, being linked to the council’s corporate plan.

Recommendation:

- a. That a ‘Resident Engagement Task and Finish Group be launched as per the draft scope at Appendix A, including appointment of its chair and, if possible, its membership.**

Commissioner Review

The Commissioners noted the report.

2. Report

- 2.1 In accordance with this committee’s work programme, most recently [considered by the committee on 24 October](#), this paper proposes to launch a ‘task and finish group’ on the topic of ‘resident engagement’.
- 2.2 This topic was originally recommended for the CISC forward plan due to the low levels of trust identified in our resident survey in early 2023, and the importance of this issue in terms of the overall improvement and recovery of the council.
- 2.3 [Slough Borough Council’s Corporate Plan 2023-27](#) sets out five principles, three of which relate to the interaction between residents and the council. This reflects that finding from the 2023 resident survey. Delivery of this strategy is a key driver of the

council's improvement and recovery journey, and effective resident engagement has been identified as key to successful delivery of the plan. This Task and Finish group will explore the degree to which the council has both a vision that sets out its resident engagement ambition and a plan for delivering it, aiming to make recommendations which would assist and improve the council's approach to engaging with residents and building their trust.



Resident Focused



Providing financial sustainability



Enabling residents and communities



Strengthening partnerships



Building trust

- 2.4 Appendix A is a new format for presenting a draft scope for a proposed task and finish group. Members' views on this format would be welcomed, to assist scrutiny officers with the continuous improvement of Slough Borough Council's overview and scrutiny arrangements.
- 2.5 If the committee wishes to commission this T&F to commence now, it must elect one of the councillors from its 'pool of chairs' to lead the work. The most important criterion for this choice is: "which councillor is most enthusiastically interested in the subject matter?" Experience has shown that this is by far the greatest determinant of a T&F group's success.
- 2.6 Ideally, the committee would also agree membership of the T&F group at this meeting. There must be a minimum of three to proceed. These do not have to be CISC Members – T&F members may be drawn from any councillor except members of the Cabinet. Again, enthusiasm should be the strongest criterion for inclusion in the group, however it is also desirable to ensure a degree of political proportionality ie members of at least two Groups being on the T&F.
- 2.7 If Group Leaders have provided the Chair with any suggested volunteers from outside the committee, the Chair will announce their names in the meeting.
- 2.8 The constitution allows for T&F groups to run for a maximum of 4 months but the T&F group can determine its own timescales within that if it wishes to conclude more quickly – subject only to the availability of officer and member resource to support a faster exercise. Extension beyond 4 months is possible with the approval of the chair of the parent committee.

3. Implications of the Recommendations

3.1 Financial implications

- 3.2 This is not a decision-making report so there are no direct financial implications. Where further work is required to respond to the issues identified, any recommendations from CISC will be made to the Cabinet.

3.3 Legal implications

- 3.4 The Local Government Act 2000 introduced a new political management system for local councils in England and Wales, requiring them to have a separate 'executive'

in the form of a leader, or elected mayor, and cabinet. To provide a counterweight for this, the Act also introduced the concept of 'overview and scrutiny' – sometimes referred to simply as 'scrutiny' – whereby every council with an executive management structure is required to have an overview and scrutiny committee. This enables the rest of the council to scrutinise the executive by investigating their decisions and policies, and issuing reports and recommendations where any shortcomings are identified.

3.5 Risk management implications

3.6 Overview and Scrutiny, commonly referred to as Scrutiny, is a statutory function and is currently subject to government direction in Slough. It is important that topics selected by the Corporate Improvement Scrutiny Committee clearly contribute to the overall improvement drivers for the council, in order to demonstrate that the conditions of the government intervention are being met.

3.7 Equality implications

3.8 There are no specific equalities implications arising at this stage, however it is intended that the work will identify ways to engage residents from all backgrounds with the councils work and so ultimately should improve equalities outcomes. A detailed assessment will be done on the T&F group's final recommendations.

4. Appendices

Appendix A – Draft scope for Resident Engagement Task and Finish Group

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APPENDIX A - SCRUTINY TASK & FINISH GROUP: DRAFT SCOPE



TOPIC	Public Engagement and Building Trust	UPDATED	20 November 2023
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1.1 **SUMMARY:** SBCs Corporate Plan 2023-27 sets out five principles, three of which relate to the interaction between residents and the council. Delivery of this strategy is a key driver of the council’s improvement and recovery journey, and effective resident engagement has been identified as key to successful delivery. This Task and Finish group will explore the degree to which the council has both a vision that sets out its resident engagement ambition and a plan for delivering it, aiming to make recommendations which would assist and improve the council’s approach to engaging with residents and building their trust.

Scrutiny Officer	Michael Edley	Chair & Members	TBC	
Project Lead	Caroline Adlem			
Strategic Lead	Sarah Hayward (Director)	Other stakeholders	Kate Pratt, Dave Hounsell	
Outcomes		Objectives	Outputs	
<p>Building Trust: A 2023 resident survey showed that 25% of Slough residents trusted the council ‘a great deal / fair amount’ compared with a national average of 59%. The survey also showed that residents most trust information from their local councillor, or from direct contact with the council.</p> <p>The outcome over time for SBC would be an increase in trust by our residents.</p>		<ul style="list-style-type: none"> To understand the drivers of this lack of trust. To understand the role of the councillor in providing information to residents. 	<p>Make recommendations relating to the council’s plans to:</p> <ul style="list-style-type: none"> restore resident trust & confidence. ensure we are reliable, responsive & open. empower and enable councillors to be able to directly provide information to residents. 	
<p>Resident Focused: The resident survey showed that 28% of Slough residents thought that the council acts on the concerns of local</p>		<ul style="list-style-type: none"> To understand processes in place to ensure resident focus, including 	<p>Make recommendations relating to:</p>	

TOPIC

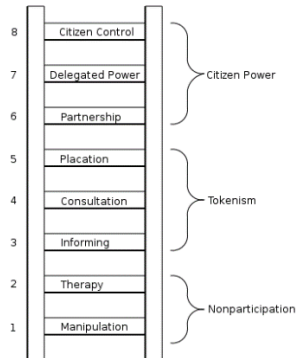
Public Engagement and Building Trust

UPDATED

20 November 2023

residents 'a great deal / fair amount' , compared with a national average of 52%
 The LGA defines engagement as 'anything that creates a stronger two-way relationship between council and the community. This runs from formal consultation to more deliberative and informal listening exercises. It can include co-production, crowdsourcing, events and public meetings.'
The outcome over time for SBC would be a stronger relationship with our residents.

Enabling Residents and Communities: [Participatory Methods has a ladder of citizen participation model](#) with a scale ranging from Nonparticipation to citizen power. The T&F group could consider using this as a tool to assess the council's current position and appetite within the available resources.



The outcome for SBC would be a clear understanding of ambition for citizen participation.

consultation & access to advice and information.

- To understand best practice in engaging with residents.

- Agreeing how residents should be consulted on key decisions.
- improvements to the availability of, and access to, advice & information.

- To understand where the council sees itself currently on this scale.
- To understand where the council aims to be.

Make recommendations relating to the council's plans to:

- address the gap between reality and ambition.

In Scope

Out of Scope

Resources

APPENDIX A - SCRUTINY TASK & FINISH GROUP: DRAFT SCOPE

TOPIC	Public Engagement and Building Trust	UPDATED	20 November 2023
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Comms & Engagement, complaints, local councillors' day-to-day engagement with residents, direct engagement in democratic processes, online meetings; scrutiny, reporting, Public Sector Equality Duty.	Services' engagement directly with defined service user groups (such as eg children looked after). The aim is to focus on the strategic approach to resident engagement, not the operational detail of services like consultation or customer services.	background
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Work streams	Objectives	Outputs/milestones
Research	Desktop research relating to other Local Authorities' approaches to this issue. Review any best practice information available from industry organisations such as LGA.	<ul style="list-style-type: none"> Shaping the T&F group's priorities, narrowing its scope and informing Cllrs about the issues involved.
Interviews	Council officers to be identified by T&F group. Any external sources to be identified by T&F group.	<ul style="list-style-type: none"> Exploring the topic and identifying potential recommendations
Workshop	To understand the role of members in engaging with their communities and developing an administration's priorities into a compelling narrative, the T&F group could commission the LGA to provide a workshop on this topic – this is from the LGA's standard menu of courses.	<ul style="list-style-type: none"> An LGA workshop may assist with the process of developing recommendations – this can be explored.

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26th September 2023

item	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
Page 53	Council-wide Improvement and Recovery monitoring following Government Directions.	Scrutiny Challenge – Quarterly Improvement and Recovery	To receive a report – scrutinise key areas and monitor progress of actions relating to improvement and recovery.	Holding to account – oversight, monitoring and scrutiny	Stephen Brown, Chief Executive Sarah Hayward, Executive Director, Strategy and Improvement
	Financial sustainability; closure of long-term budget gap across the Council’s Medium Term Financial Strategy (MTFS); and balanced financial forecast for 2023/24. (Annex A, Paragraph 3a of Government Directions to Slough on 1 September 2022)	Budget Monitoring Q1 23/24 and Budget Outturn 22/23	Strategic scrutiny and budget monitoring of 23/24 and 22/23 Outturn as this will inform the Council’s Medium Term Financial Strategy for 24/25 and beyond which will underpin the Council’s budget proposals.	Holding to account – oversight, monitoring and scrutiny.	Adele Taylor, S151 Officer and Executive Director
	Proper functioning of scrutiny. (Annex A, Paragraph 3c of Government Directions to Slough on 1 September 2022)	Revised Scrutiny Forward Work Programme	To agree the revised CISC Forward Work Programme after Commissioners’ feedback.	Critical friend role. Forward Planning	Alex Polak, Statutory Scrutiny Officer Kunwar Khan, Democratic Services and Scrutiny Manager

24 October 2023					
	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
4	<ul style="list-style-type: none"> • ICT strategy that enables service delivery and communications with residents. • Improvements in relation to the proper functioning of the procurement and contract management function. (Annex A, Paragraph 3e of Government Directions to Slough on 1 September 2022) • To meet the Council's statutory responsibility to publish equality information and objectives. 	Direction Deep Dive on: ICT; and	To receive a report about the Council's ICT and procurement (including contract management) functions as identified in the priority area/reference column by the Government and Commissioners.	In-depth review of the progress against the directions. Holding to account – oversight, monitoring and scrutiny. pre-decision scrutiny and policy development. Critical friend role.	Sarah Hayward, Executive Director, Strategy and Improvement
5		Procurement			Clare Priest, Head of Commercial Services
6		Public Sector Equality Duty (PSED) and Council Decision-making (compliance and new objectives)	To receive a report providing assurance to CISC on the Council's specific duties under the Equality Act to help comply with the public sector equality duty. Public authorities must publish equality information at least once a year to show how they've complied with the equality duty; they must prepare and publish equality objectives at least every 4 years.		Sarah Hayward, Executive Director, Strategy and Improvement

28 November 2023					
	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
4	Financial sustainability; closure of long-term budget gap across the Council's Medium Term Financial Strategy (MTFS); and balanced financial forecast for 2023/24.	Scrutiny of Council's 2024/25 Budget setting process	To receive a report about the budget setting process 2024/25. Seeking assurance in line with Directions relating to finance, MTFS and budget. Final details of the item to be confirmed by finance.	Oversight, monitoring and policy development. Pre decision scrutiny, oversight and monitoring .	Adele Taylor, Executive Director and S151 Officer (Annex A, Paragraph 3a of Government Directions to Slough on 1 September 2022)
5	ASC CQC new inspection regime – The ASC assurance programme touches a number of key improvement and recovery areas.	Adult Social Care and the new CQC Regime – Report back from T&F	To receive a report with recommendations from the ASC T&F as the parent committee before it goes to Cabinet.	development; in-depth review and critical friend role.	T&F Chair: Christine Hulme Marc Gadsby, Executive Director, Adult Social Care Amanda Halliwell, CQC Project Manager /CQC workstream.
6	Improving public trust and engagement with residents to enable better service delivery as part of wider organisational change.	Launch T&F 2 – Resident	To agree topic and scope of the T&F work.		Sarah Hayward, Executive Director Strategy and Development Caroline Adlem, Head of Communications and Resident Engagement

4 January 2024

	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
3	Council-wide Improvement and Recovery monitoring following Government Directions.	Quarterly Scrutiny Challenge – Improvement and Recovery	To receive a report – scrutinise key areas and monitor progress of actions relating to improvement and recovery	Holding to account – oversight and monitoring	Stephen Brown, Chief Executive Sarah Hayward, Executive Director, Strategy and Improvement
4	Assurance that HR function is fit for purpose	Deep Dive on Human Resources – Direction of travel and ‘fit for purpose’	To receive a report providing assurance and progress ensuring that business support services such as HR are ‘fit for purpose’	Holding to account – oversight and monitoring.	Sarah Hayward, Executive Director, Strategy and Improvement

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30 January 2024

	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
3.	Financial sustainability; closure of long-term budget gap across the Council’s Medium Term Financial Strategy (MTFS); and balanced financial forecast for 2023/24. (Annex A, paragraph 3a of Government Directions to Slough on 1 September 2022	Scrutiny of Council’s Draft Budget Proposals 2024/25 (Capital and Revenue – Savings, Growth, EqIA, Risks and MTFS)	To receive a report about the Council Draft Budget Plan 2024/25.	Pre decision scrutiny Critical friend and budget recommendations to Cabinet.	Adele Taylor, S151 Officer and Executive Director

22 February 2024

	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
	Practice improvement for Children with SEND – Ofsted	Children with Special Educational Needs and Disabilities (SEND).	Report on practice improvement for children with SEND – monitoring of actions taken and progress made to address the priorities identified by Ofsted and CQC in their inspection report	Oversight and monitoring.	Sue Butcher Chief Executive, Slough Children First. As it stands this is too big and wouldn't be adding value. Hold as marker for childrens but prob not this exactly
Page 57	Improving public trust and engagement with residents to enable better service delivery as part of wider organisational change.	Report from the T&F 2 (Resident engagement and building public trust) launched in October 2023.	Reporting progress to the parent committee.	In depth review; policy development and monitoring	Sarah Hayward, Executive Director, Strategy and Improvement Chair of T&F Cllr Manku, Chair of CIS

Subject to Chair

26 March 2024

	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
1	Participation/engagement is identified as an area of development by Ofsted	Launch of Task and Finish Group 3 – Journey to Good – SCF	To provide input to develop a plan of engagement with local communities including faith, disabled LD and other relevant groups.	Policy development and critical friend role.	Sue Butcher Executive Director – Children’s Services, Chief Executive, Slough Children First. Chair of CISC, Cllr Manku
	Implementation of an estates strategy to make clear how the Council will use its assets to enable service delivery. (Annex B, 2b of Government Directions to Slough on 1 September 2022)	Scrutiny of Council’s Estate Strategy and its implementation	To receive a report on the implementation of the Council’s estates strategy to review how the Council is using its assets to enable service delivery; value for money; impact on resident and council’s finances – what external validation or checks are in place; what have been/are the key challenges and opportunities.	Oversight, monitoring and critical friend.	Patrick Hayes, Executive Director Housing and Property

23 April 2024

	Priority Area, Reference / Directions	Topic / Issue	Purpose	Type of Scrutiny	Responsibility
	Council-wide Improvement and Recovery monitoring following Government Directions.	Quarterly Scrutiny Challenge –Improvement and recovery progress	To scrutinise key areas and gain wider insight into progress of actions relating to improvement and recovery.	Oversight, monitoring and policy development.	Stephen Brown, Chief Executive Sarah Hayward, Executive Director for Strategy and Improvement
	Statutory scrutiny responsibility for crime and disorder functions.	Crime and Disorder/Policing Report (Timing TBC, subject to all Member briefing)	To receive a report with a view to review or scrutinise decisions made, or other action taken, in connection with the discharge by the responsible authorities of their crime and disorder functions.	Monitoring and oversight. Annual attendance at scrutiny.	Matthew Barber, Police and Crime Commissioner Superintendent Lee Barnham

Subject to Change

May 2024 Onwards

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Subject to change

Annex A, Paragraph 6 of
[Government Directions to Slough on 1 September 2022](#)

Governance and operation of subsidiary companies

To receive a report demonstrating that Council has compiled or adequately progressing with the letter and spirit of the Direction 6 relating to review by Authority of its companies, including any subsidiaries but excluding Slough Children First (SCF). For those companies that it is agreed to continue, make sure that the Directors appointed by the Authority are appropriately skilled in either technical or company governance matters to make sure each Board functions effectively. For those companies which it is determined not to continue with in this form, to establish a plan to internalise, close or sell as appropriate.

Oversight and Monitoring.

Patrick Hayes, Executive Director Housing and Property

Annex A, Paragraph 3f of
[Government Directions to Slough on 1 September 2022](#)

To review and scrutinise progress relating to HR and ICT directions/commentary/report by Commissioners.

Oversight and monitoring.

Sarah Hayward, Executive Director for Strategy and Improvement.

To receive a quarterly performance report in order to review and scrutinise council's performance.

CORPORATE AND IMPROVEMENT SCRUTINY COMMITTEE

Forward Work Programme 2023-24

Last Updated: Monday, 20 November 2023



	<p>Monitoring of Corporate Performance</p>	<p>Progress against Directions: Scrutiny of ICT and HR improvements progress</p> <p>Quarterly Corporate Performance Report Organisational Culture Change Programme – <i>Flexibility to be taken as a report or a T&F.</i></p>	<p>A report to the main item or a T&F – TBC.</p>	<p>Oversight and monitoring.</p> <p>Policy development. Critical friend role.</p>	<p>Sarah Hayward, Executive Director for Strategy and Improvement.</p> <p>Sarah Hayward, Executive Director for Strategy and Improvement.</p>
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Subject to Change

Task and Finish Group Topics 'Taxi-rank' in Priority Order

Topic / Issue	Comments
Adult Social Care (ASC) Assurance Programme/New CQC regime	<p>The ASC assurance programme touches a number of key improvement and recovery areas.</p> <p>CQC will place a lot of emphasis on the importance of good Leadership and Culture as well as on Customer Service and experience.</p> <p>The initial assessment suggests opportunity for value to be added through scrutiny/T&F. Timely scrutiny engagement, through this Task and Finish Group will help assure that the service is focussing on the right priorities and making required improvements. This will also offer critical friend challenge around assurance programme and delivery of the outcomes through an action plan. Starting in September 2023.</p>
Resident Engagement and Building Trust	Building and maintaining public trust through resident engagement is an important component for SBC. Agreement in principle with the service.
Journey to Good – Slough Children First	<p>Participation/engagement is identified as an area of development by Ofsted so a T&F can add real value.</p> <p>A Task and Finish Group focussing on developing community and faith groups involvement in improving children services. This will ensure that enhanced partnerships bring different skillsets and experiences. Agreement in principle with the service.</p>
Organisational Culture Change Programme – <i>Flexibility to be taken as a report to the main committee if it was felt more appropriate.</i>	<p>Paragraphs 5 of the Commissioners' letter of 14 August 2023 as well as Government Directions to Slough on 1 September 2022</p> <p>Culture and behaviour change Task and Finish Group to review progress and provide input to comply with implementation of a programme of cultural change to rebuild trust between officers and members, to the satisfaction of the Commissioners. This should make sure both Members and Officers understand the scale of the challenge and their</p>

Task and Finish Group Topics ‘Taxi-rank’ in Priority Order	
	<p>respective roles in driving improvement and the way in which the Authority and its activities are regulated; governed and the way in which this is monitored, and breaches rectified. Introduction/review of (a credible and comprehensive) culture change programme with targets and measures of success (5f). Timing and the form to be confirmed in consultation with the service.</p>
<p><i>Any appropriate deep dive items can be suggested as a proposal for a future T&F Group subject to the following:</i></p> <ul style="list-style-type: none"> • <i>Alignment with the Directions/Council’s Corporate Plan (Improvement and Recovery Plan);</i> • <i>Slough’s progress and direction of travel;</i> • <i>Commitment and support from the CISC Chair and relevant Executive Director to enable effective and efficient delivery to add value – ‘But-For/So-What’ test.</i> • <i>Statutory guidance/constitution/remit.</i> 	<p>TBC.</p>

Subject to Change

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