

Slough Borough Council

Information needed	Details
Report To:	Corporate Improvement and Scrutiny Committee
Date:	23 September 2025
Subject:	CQC Local Authority Assessment Report – Adult Social Care Inspection
Chief Officer:	David Coleman-Groom, Executive Director People – Adults (DASS)
Contact Officer:	David Coleman-Groom
Ward(s):	All
Exempt:	NO
Appendices:	CQC Local Authority Assessment Report Adult Social Care Directorate Improvement Plan CQC Presentation

1. Summary and Recommendations

- 1.1 This paper provides an overview of the Care Quality Commission (CQC) Assessment Report and actions which will be taken to further develop the service. The onsite assessment visit was undertaken during March 2025 with the Council subsequently being awarded a rating of ‘Good.’

Recommendations:

Corporate Improvement and Scrutiny Committee is recommended to:

- Note and comment on the positive findings of the CQC Assessment Report
- Note and comment on the Adult Social Care Directorate Improvement Plan to support the ambitions of the Directorate to ensure continuous improvements

Reason: To ensure that Corporate Improvement and Scrutiny Committee is sighted on the positive outcome of the recent CQC assessment of Adult Social Care as well as areas of planned improvement.

To support the direction of the service in meeting its statutory duties in Part 1 of the Care Act

Commissioner Review

This report is outside the scope for pre-publication commissioner review; please check the [Commissioners’ instruction 5 to CLT to sign off papers](#) for further details.

Report

Introductory paragraph

- 2.1 The CQC utilises an Assessment Framework for Local Authority Assurance to assesses how well Adult Social Care Directorates are undertaking their duties contained within part 1 of the Care Act 2014.

In March 2025, the CQC undertook an on-site assessment visit following submission of a self-assessment and other documents comprising the Council's Information Return. The CQC also met with a range of key stakeholders, partners and providers along with members of the Co-production Network and people who draw upon adult social care to determine the overall rating of Good,

Scores were awarded against 9 quality statements spanning 4 themes as shown in the table below:

Theme	Area	Score
How the local authority works with people	1. assessing people's needs	2
	2. supporting people to lead healthier lives	3
	3. equity in experience and outcomes	3
Providing support	4. care provision, integration and continuity of care	2
	5. partnership and communities	3
How the local authority ensures safety in the system	6. safe pathways, systems and transitions	2
	7. safeguarding	3
Leadership	8. governance, management and sustainability	2
	9. learning, improvement and innovation	3

Scores for each area were determined on a scale 1-4 ranging from the evidence gather showing significant shortfalls in quality standards through to the evidence gathered showing an exceptional standard, as per the guide below

Scoring key:

1. Evidence shows significant shortfalls
2. Evidence shows some shortfalls
3. Evidence shows a good standard
4. Evidence shows an exceptional standard

Areas of Strength

1. There is a focus on prevention and promoting independence in its strategies, encouraging the use of technology-enabled care.
2. Reablement services worked well, with strong multidisciplinary support from social workers, occupational therapists, and physiotherapists. They had effective equipment provision agreements, with no delays for basic items. However, people waited longer for access to specialist equipment and adaptations.
3. Staff held relevant qualifications, including roles in mental health, sensory impairment, and occupational therapy. Leaders provided ample training, development, and career progression opportunities. They also made sure caseloads were manageable and monitored and regularly consulted with staff about capacity.
4. Many people accessed direct payments which gave them more control over their care. Staff made sure they could access ongoing advice and support. In 2023/24, 30.31% of service users received direct payments—exceeding the national average of 25.48%.

5. Staff have identified their diverse communities, understand their cultural needs well and the barriers to care and support with positive work being undertaken with those communities
6. The authority now recognises care-experienced children as a protected characteristic, aiming to improve support during their transition to adult services and address care gaps.
7. The authority implemented clear, effective safeguarding policies to protect people from harm.
8. The authority has undertaken lots of work to improve the quality and safety of commissioned services.
9. Slough Borough Council and Frimley Integrated Care Board funded 31 local voluntary and community sector groups through the 'One Slough' Community Fund. They funded projects focused on health, wellbeing, reducing loneliness, and tackling poverty. Co-production network members contributed to funding discussions and decisions.
10. Staff reported strong partnerships with health, housing, police, and fire services. Regular audits reviewed their work, and teams shared learning through meetings and training. A local authority audit of safeguarding cases involving domestic abuse identified key development areas. These findings were shared at the Safeguarding Adults Managers Forum.
11. The Directorate leadership Team was views positively with the open and approachable leadership style of the Executive Director being valued by staff.
12. There is a strong culture of listening to staff and people with lived experience as who are involved in all manner of ways including decision making and influencing strategies. Staff were unanimous about the successful input of the co-production network in everything they do.

Areas of Development:

1. The authority's care and support services didn't always meet demand. Some gaps exist in adapted housing, respite for autistic people, services for those with learning disabilities and complex dementia, nursing for younger adults with bariatric needs, and day services. Staff reported these issues, and leaders acknowledged them and are developing capacity and development plans.
2. Staff put in place flexible assessments and tailored support for unpaid carers, including training and community activities. However, carers had mixed feedback as some carers missed assessments or said that they weren't aware of support, despite records suggesting otherwise. This highlights the ongoing need for clearer communication and consistent follow-up.
3. People's transitions from children to adult services remained a challenge. Families told us about confusion about care act rights, delays, and inconsistent communication. The authority now involves adult social care earlier in transition planning, although this is still work in development.
4. The national data from 2024 in relation to Slough was quite negative and on the whole Slough were performing worse than England averages in most metrics, however the findings from our assessment suggested an improving picture.
5. The website appeared to be a valuable resource for information and advice, and it was able to be translated, converted to large font and had audio options. However, most people and partners said they wanted more non-digital options
6. Scrutiny was adequate but there was no dedicated scrutiny panel for adult social care, instead the Council Improvement and Scrutiny Committee used separate task and finish sub-groups to support decision-making.

7. There was a corporate risk board and directorate risk register which fed in to the corporate leadership team

Options considered

A number of options were considered with regard to the next steps following receipt of the CQC Assessment Report which are considered in the table below

Option	Pro	Cons
Option 1 Do Nothing	Turn attention to focus on other priorities such as delivering savings whilst celebrating recent achievements.	Could lead to complacency and failure to innovate and / or deliver improved services for local people, Inspection is not a one off.
Option 2 Develop and progress an Improvement Plan which is presented to Cabinet. Recommended	Transparent way forward to delivering improvements which Members and the Public are sighted on and can hold the Directorate to account for implementing the Improvement Plan.	Additional pressure for hardworking staff to both implement and demonstrate improvements which are being made along with other pressures such as delivering against a savings programme.
Option 3 Develop and progress and Improvement Plan which is contained and overseen within the Directorate.	Minimises time spent on demonstrating improvements.	Activity is hidden and there is a lack of transparency and accountability both to Members and to the Public,

Option 2 is recommended as it provides transparency and accountability in delivering continuous improvements in adult social care whilst acknowledging achievement to date

Background

The Health and Care Act 2022 brought significant changes to Local Authority Adult Social Care inspections, granting CQC new powers to assess their delivery of their duties contained within part 1 of the Care Act 2014.

In October 2024 the local authority was notified of its inspection and there were a number of steps as part of the inspection process.

7 October 2024: formal notification

25 October 2024: deadline for information return evidence across all four themes.

27 January 2025: second notification

7 February: 50 case file audits

24 February 2025: 10 cases deep dive speaking with residents.

26 February 2025: Directorate Leadership presentation to the Inspection Team

24 March 2025: onsite inspection

May and June 2025: Verification and quality checks

18 July 2025: Assessment Report published

From the point of 27 January the second notification the inspection team made contact community and voluntary sector partners, providers and statutory partners, reviewed the council's website and reviewed formal published documentation. The onsite visit included a mix of meetings with staff, leaders, elected members and partners.

The Council viewed the report as being a fair and balance reflection of the current level of performance.

3. Implications of the Recommendation

3.1 *Financial implications*

3.1.1 There are no environmental implications from the assessment outcome.

3.1.2 Demand reminds high for Adult Social Care in Slough and nationally, with around 80% of councils with the Adult Social Care duty overspending in 2024-25, up from 72% in 2023-24 and 63% in 2022-23. The current improvement plan looks to address business as usual activity to ensure delivery of statutory duties within the Care Act 2014.

3.1.3 This report it to note the CQC outcome and acknowledge the improvement plan to ensure the directorate understands the demand, pressures and has access to data to inform effective decision making.

3.2 *Legal implications*

3.2.1 The Health and Care Act 2022 brough new powers to the Care Quality Commission to assess Local Authority's delivery of Adult Social Care duties contained within part 1 of the Care Act 2014.

3.3 *Risk management implications*

3.3.1 There are no risks associated to this report or recommendations. The directorate continues to improve its delivery of their duties contained within part 1 of the Care Act 2014.

3.3.2 Risk is managed within the directorate via a number of routes. Commissioning and Market Management risks are monitored and mitigated at the Commissioning and Market Management Board which reports in to the 'Assurance' Directorate Leadership Team. The is a directorate risk register which is monitored and reviewed monthly.

3.4 *Environmental implications*

3.4.1 There are no environmental implications from the assessment outcome.

3.5 *Equality implications*

3.5.1 There are no direct implications to any specific group as a result of this paper. The inspection highlighted the areas of achievement; the improvement plan captures a targeted approach is required to ensure consistent support to carers and a more sustainable transitions pathway.

3.5.2 The work of the directorate underpins three of the 6 council equality objectives.

Equality objective 2 – working with partners, including housing providers to target health inequalities and well-being between those from different protected groups.

Equality objective 4 – robust and comprehensive set of employment data to inform its workforce strategy and management practice, as well as benchmarking and sharing good practice.

Equality objective 5 – The council actively ensures that the profile of its workforce (including the profile of major providers of commissioned services) broadly reflect the community it serves.

3.6 *Corporate Parenting Implications*

3.6.1 There are no corporate parenting implications from the assessment outcome.

3.7 *Procurement implications*

3.7.1 *There are no procurement implications from the assessment outcome.*

3.8 *Workforce implications*

3.8.1 The continuous improvement in Adult Social Care is dependent on experienced, skilled and sustainable workforce. Reductions in workforce will impact on the delivery of the service and the outcomes for residents. Currently progress is underway in those areas where there are waiting lists.

3.8.2 A bespoke workforce strategy was launched for Adult Social Care in 2024, setting out our ambition to strengthen and sustain our workforce, extending our 'Grow your own' support enabling staff to progress into Social Worker or Occupational Therapy roles.

3.8.3 The demographics of the existing workforce in Adult Social Care is reflective of the citizens supported.

3.9 *Property implications*

3.9.1 There are no property implications from the assessment outcome.

4. Background Papers

None