



Slough Adult Social Care CQC Leadership Presentation

26 February 2025



Welcome and Introductions

Agenda

Introductions	
Slough context	David
Adult Social Care Overview	David
Strategic Commissioning	Jane
Market Management	Lynn
Localities & Transitions	Andrea
Safeguarding & DOLS	Sarah
Mental Health	Debra
Short Term & Therapy	Ilona
Strengths & where we are improving	David

Slough

- Slough is the smallest unitary authority at 33 km², however, not the least populated
- Proximity to London enhances its strategic significance, only 20 miles from central London
 - **Major transportation hubs**, including the M4 motorway and Great Western Railway, close to Heathrow and involved in discussions about the 3rd Runway
 - **Business** - Home to a mix of residential, commercial, and industrial zones. The largest industrial estate in Northern Europe
 - **Planning** - Simplified Planning Zone – specialised planning, allows for development of data centres, warehouses, research and development centres and ancillary retail and employment uses to be built without the need to apply for individual planning permissions
 - **Population** - Diverse and young



Slough 10 Key facts



With a population of 158,500, Slough is over 10 times more densely populated than the average for England



Slough has low healthy life expectancy - the average number of years that a person can expect to live in full health - at just 58 for men, and 60 for women



Slough's residents earn £28 less per week than the regional average, and there is a gap of £84 between residents and all those who work in Slough



There is an average of three people per household - the highest average size in England, and 16% of households are overcrowded



28% of year 6 children in Slough are obese, compared to a SouthEast average of 20% and only 52% of adults are physically active



Slough overall has good levels of educational attainment-with 63% of Key Stage 4 students achieving grade 5 or above in English and Maths GCSEs



Slough has the second youngest population in the country - with 25% of residents aged 15 and under



Slough has pockets of severe deprivation and 70% of neighbourhoods fall below the national average in the Index of Multiple Deprivation



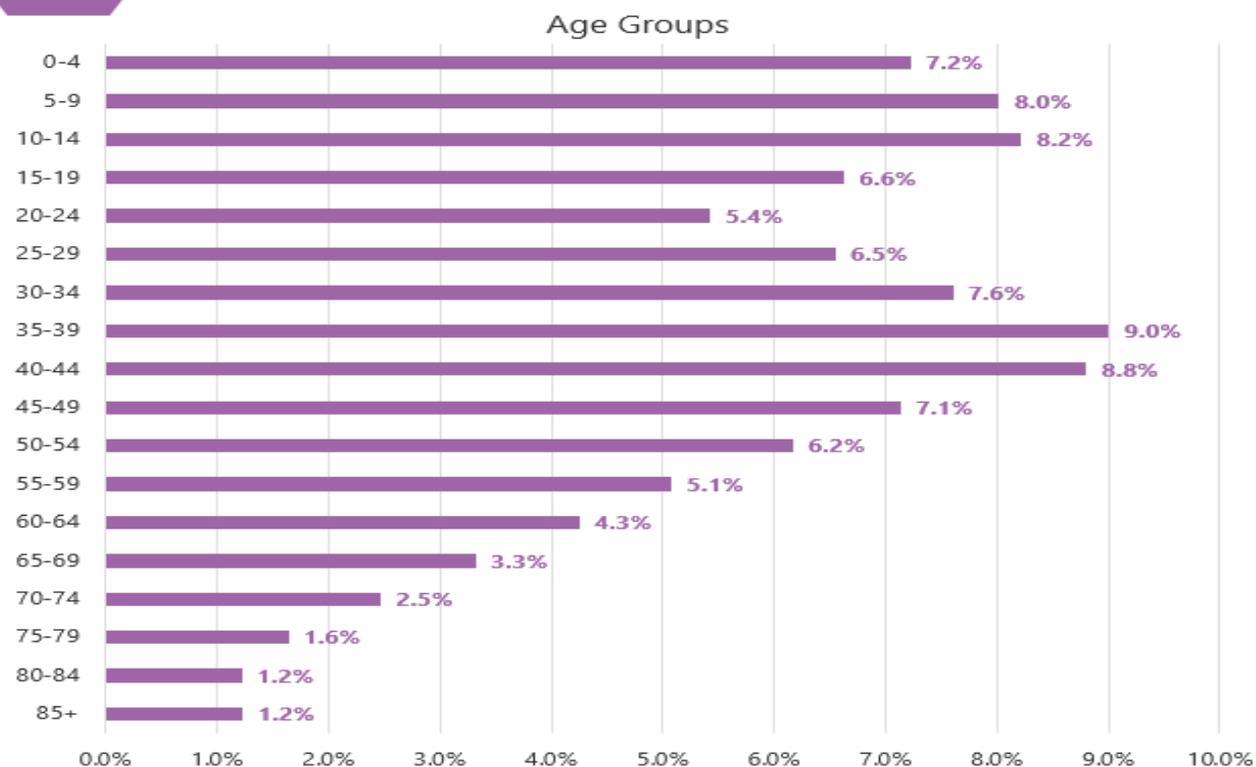
The town is also one of the most ethnically diverse in England and 44% of residents were born outside of the UK



Slough has a 45% higher crime rate than the average for the Thames Valley



Population - Age



25% of Slough's residents are aged 0-15, 65.1% are aged 16-64, and 9.9% are aged 65 or over.

Slough's average age is 35, compared to 41 for the South East and England.

Slough has the second largest proportion of children aged 15 or under in England and Wales, behind only Barking and Dagenham.

Age Group	Slough Number	Slough %	England %
0-15	39,800	25.0%	18.5%
16-64	103,600	65.1%	62.9%
65+	15,700	9.9%	18.6%

Life Expectancy



Boys born in Slough today can expect to live to 77 and will spend approximately 25% of their life in poor health (19 years)



Female life expectancy and health life expectancy is now significantly worse than the national average however remains higher than males. Girls are expected to live to 82 and spend approximately 26% of their life in poor health (21 years)

There is a 7.6 year difference in life expectancy between girls born in the least deprived areas of the borough and the most deprived.

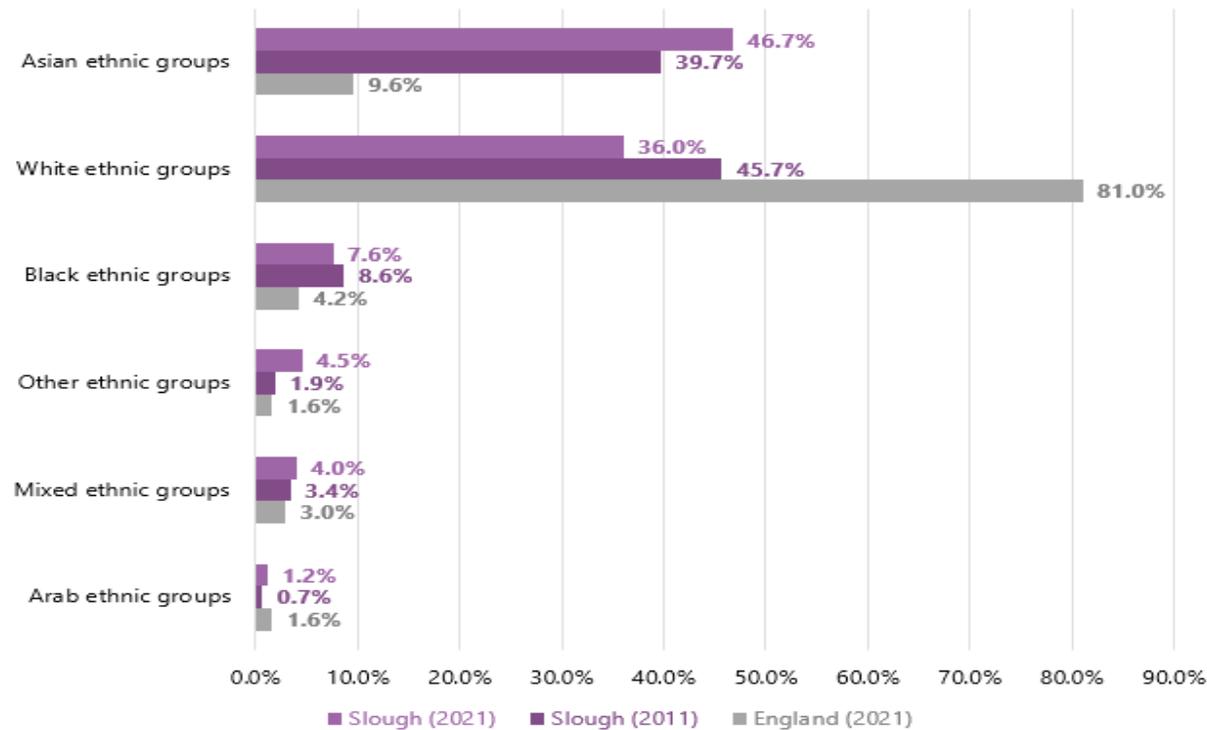
The gap in healthy life expectancy is higher at 8.6 years

Population - Ethnicity



Population – Ethnicity (1)

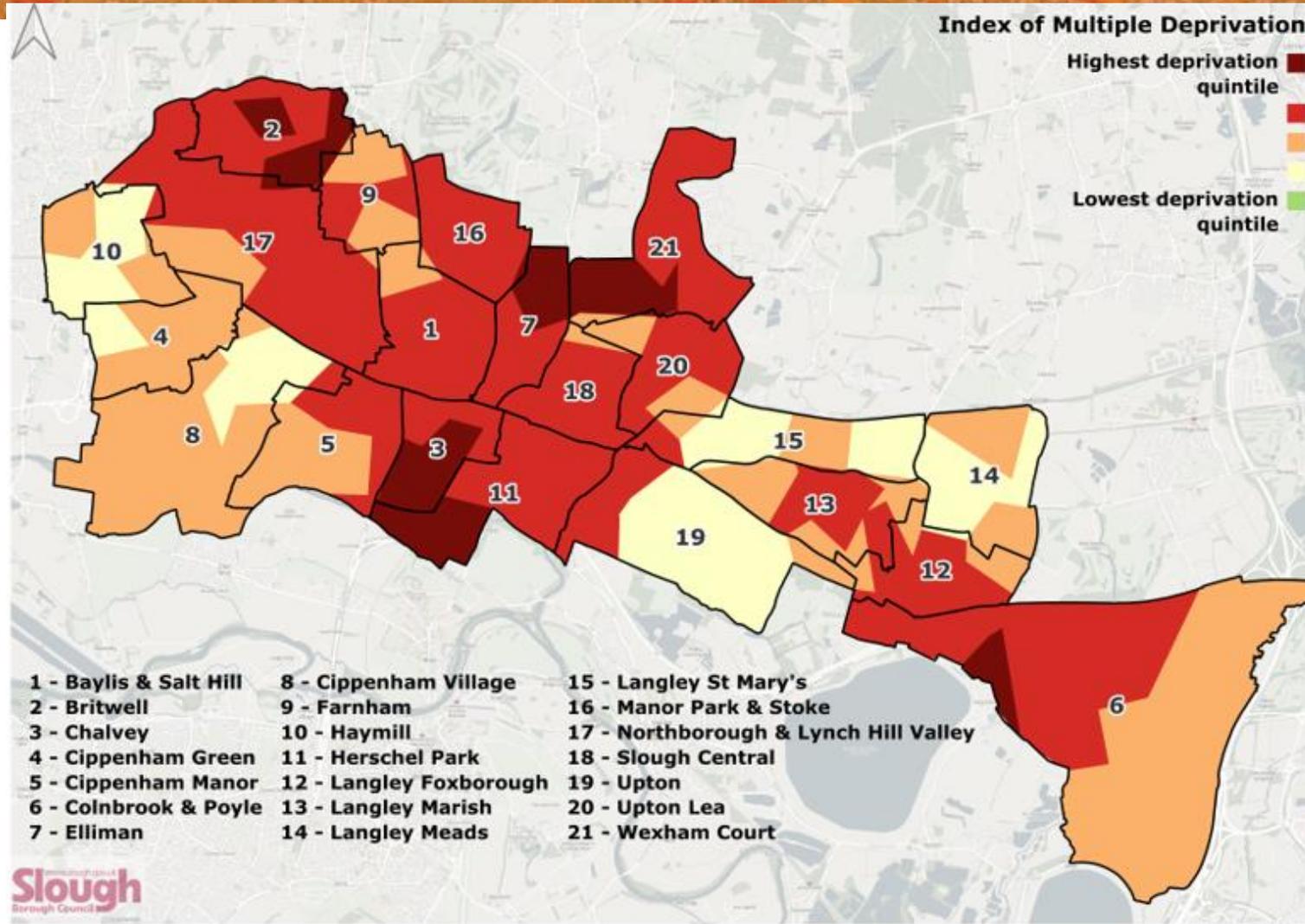
Broad Ethnic Groups



46.7% of Slough's population are from Asian ethnic groups and 36.0% are from White ethnic groups.

Broad Ethnic Groups: Number of Slough Residents	2021	2011	Change
Asian ethnic groups	74,093	55,697	+33%
White ethnic groups	57,134	64,053	-11%
Black ethnic groups	11,992	12,115	-1%
Other ethnic groups	7,144	2,628	+172%
Mixed ethnic groups	6,311	4,758	+33%
Arab ethnic groups	1,826	954	+91%

Deprivation



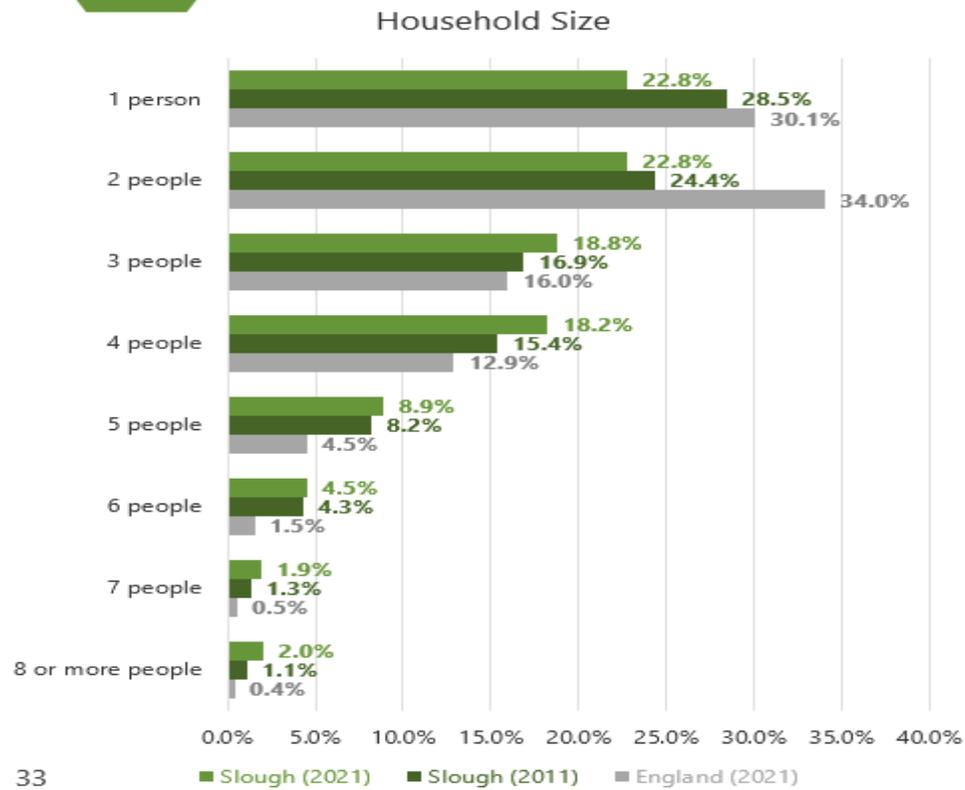
Pockets of deprivation:

- Britwell, (2)
- Chalvey, (3)
- Colnbrook & Poyle (6)
- Elliman (7)
- Herschel Park, (11)
- Wexham Court (21)

Household sizes



Built & Natural Environment – Household size



There are 52,423 households in Slough.

Slough has the largest average household size in England and Wales at 3 people per household (England: 2.4).

There has been an increase of 49% in the number of households with 7 people and an increase of 92% in the number of households with 8 or more people.

There are now 2,078 households consisting of 7 or more people.

Council Political Leadership



Cllr Smith - Leader of the Council and Lead Member for Improvement & Recovery, Governance and HR



Cllr Chahal - Cabinet member for Finance, Council Assets and Transformation



Cllr Shaik - Cabinet member for I.T., Customer Services, Revenue & Benefits, Procurement and Performance



Cllr Wright - Cabinet member for Adult Social Care



Cllr Ahmed- Cabinet member for Community Cohesion, Leisure and Sport



Cllr Shah - Cabinet member for Equalities, Public Health and Public Protection



Cllr Bedi - Cabinet member for Education and Children's Services



Cllr Kelly - Cabinet member for Housing, Highways, Planning and Transport



Cllr Manku - Cabinet member for Environment, Environmental Services and Open Spaces

Corporate Leadership Team



Will Tuckley, CEO & Managing Director Commissioner



Pat Hayes, Executive Director Regeneration, Housing & Environment



Tessa Linfield, Director of Public Health and Director of Public Protection



David Coleman-Groom, Executive Director People – Adults and DASS



Sue Butcher, CEO Slough Children First & Executive Director People – Children's



Sonia Khan, Director of Strategy, Change & Resident Engagement



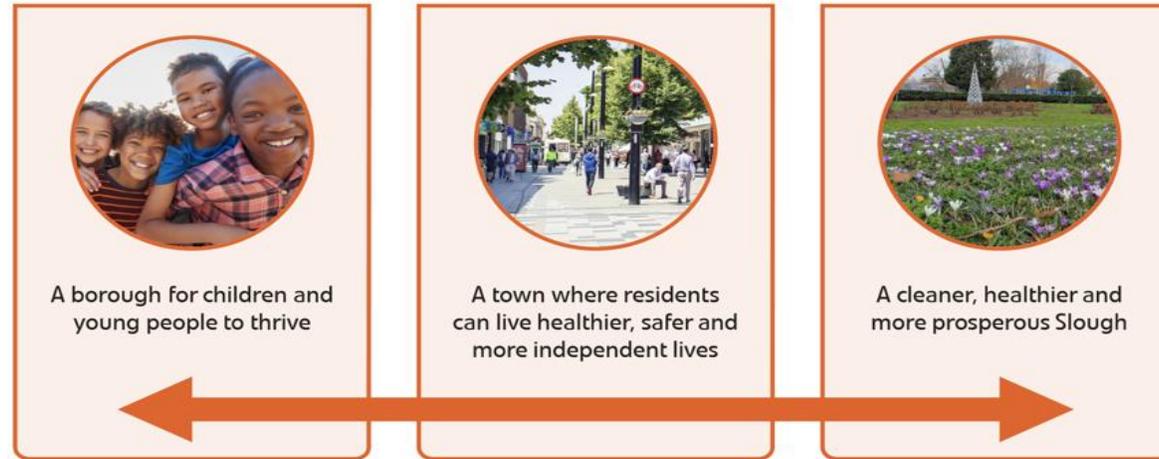
Annabel Scholes, Executive Director Corporate Resources



Sukdave Ghuman, Monitoring Officer

Corporate Strategy –A Fresh Start 2023-2027

Our strategic priorities



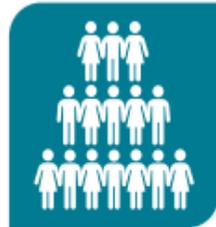
Our Approach



Resident
Focused



Providing
financial
sustainability



Enabling
residents and
communities



Strengthening
partnerships



Building
trust

Frimley Integrated Care System

Creating Healthier Communities

The focus will continue to be defined by delivering improvements against the following two headline measures:

Reducing Health Inequalities for all our residents who experience unwarranted variation in their outcomes or experience

Increasing Healthy Life Expectancy for our whole population, ensuring an improvement not just in length of life but in the quality of those years as well.



Slough Vision 2040

In 2021 a partnership of organisations working together in Slough published the **Slough 2040 Vision**. It outlines the shared ambitions of these organisations for the future of Slough. The vision was created by engaging with the local people of Slough - the residents, elected councillors, and the organisations that serve the people of Slough



Slough Health and Well Being Strategy

Priority One: Starting Well



This priority is an area where the Slough Wellbeing Board will have an influencing role in the work being done to address these ambitions. The Starting Well theme will be led by the Children and Young People's Partnership Board.

Priority Two: Integration



This priority is an area where the Slough Wellbeing Board will have an influencing role in the work being done to address these ambitions. The Integration theme will be led by the Health and Social Care Partnership Board.

Priority Three: Strong, Healthy and Attractive Neighbourhoods



This priority is an area where the Slough Wellbeing Board will directly lead on the work being done. To achieve these ambitions the board will work with local communities to understand the issues facing them, co-design SMART neighbourhood plans together, and work together to implement the actions outlined in these plans.

Priority Four: Workplace Health



This priority is an area where the Slough Wellbeing Board will directly lead on the work being done. To achieve these ambitions, the board will build connections with local businesses in Slough to promote information about Workplace Health, establish a set of Wellbeing Awards to celebrate best practice from employers, create a toolkit of resources relating to Workplace Health, and promote culture change surrounding Workplace Health in employers across the borough.

There are four priorities which aim to **reduce health inequalities** across Slough

Joined up Working

- Health and Social Care Partnership reports into the Health and Wellbeing Board expanding to include an expert by experience - Section 75 with BCF projects and funding
- Strong connections with Public Health and collaboration to develop and deliver our strategies
- Reaffirmed the commitments and ambitions to joint commissioning at Place, setting out our ambitions for levels of integration for each area of commissioning, which are now starting to gain momentum
- Reviewed spend and applied a commercial approach to our provision with the aim of maximising strengths-based approaches to assessing and commissioning care and support, identifying and reviewing key initiatives to determine whether to keep, grow or decommission
- Blueprint for the BCF Plan 2023/25 to move towards more enhanced levels of integration, streamline the system design, releasing funding to support more preventative, successful initiatives, improving pathways, greater focus on digital transformation. <https://www.slough.gov.uk/strategies-plans-policies/adult-social-care-strategies-plans-policies/7>
- Established clear roles and responsibilities for the Council and ICB regarding leading and overseeing the Better Care Fund (BCF) plan development and monitoring, including the BCF Delivery Group

Section 75 Agreement

Better Care Fund

- 2024/25 £15m
 - BCF
 - Discharge grant
 - Equipment
 - DFG

Q3 Performance

91.8% of people discharged to their normal place of residence

112 new people supported at home with reablement

7 people in short term care home likely to require longer term placement. Q2 this was 18

7% increase in equipment recycle

Section 75 Agreement

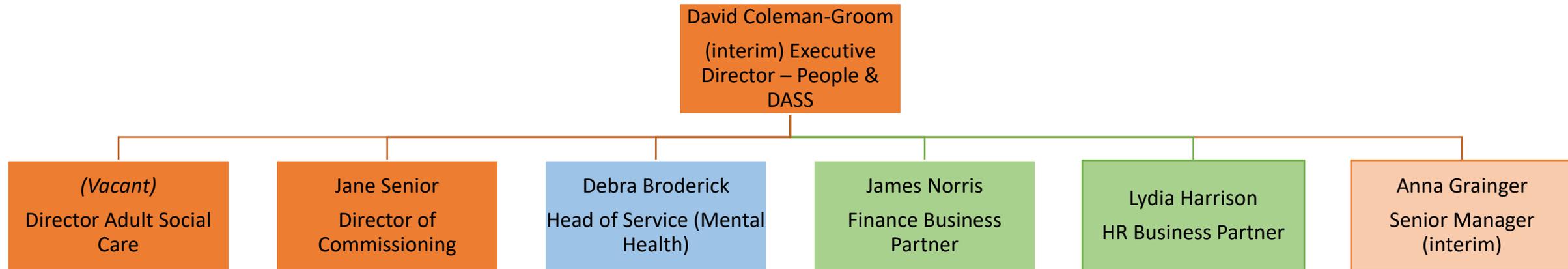
Integrated Community Equipment Service

- The Integrated Community Equipment Service (ICES) offers a range of loan equipment to support the care needs and promote the independence and reablement of people living in Slough and enables timely discharge from hospital, includes grab rails, walking aids, beds, seating and bathing equipment
- A S75 agreement is in place to cover the Integrated Community Equipment Service which is commissioned with six other Local Authorities and two Integrated Care Systems across Berkshire funded through the Better Care Fund.
- The rapid access to a wide range of aids and equipment is essential in helping people to be supported to remain as independent as possible and remain in their own home, reducing or avoiding higher levels, and associated costs, of direct care provision.

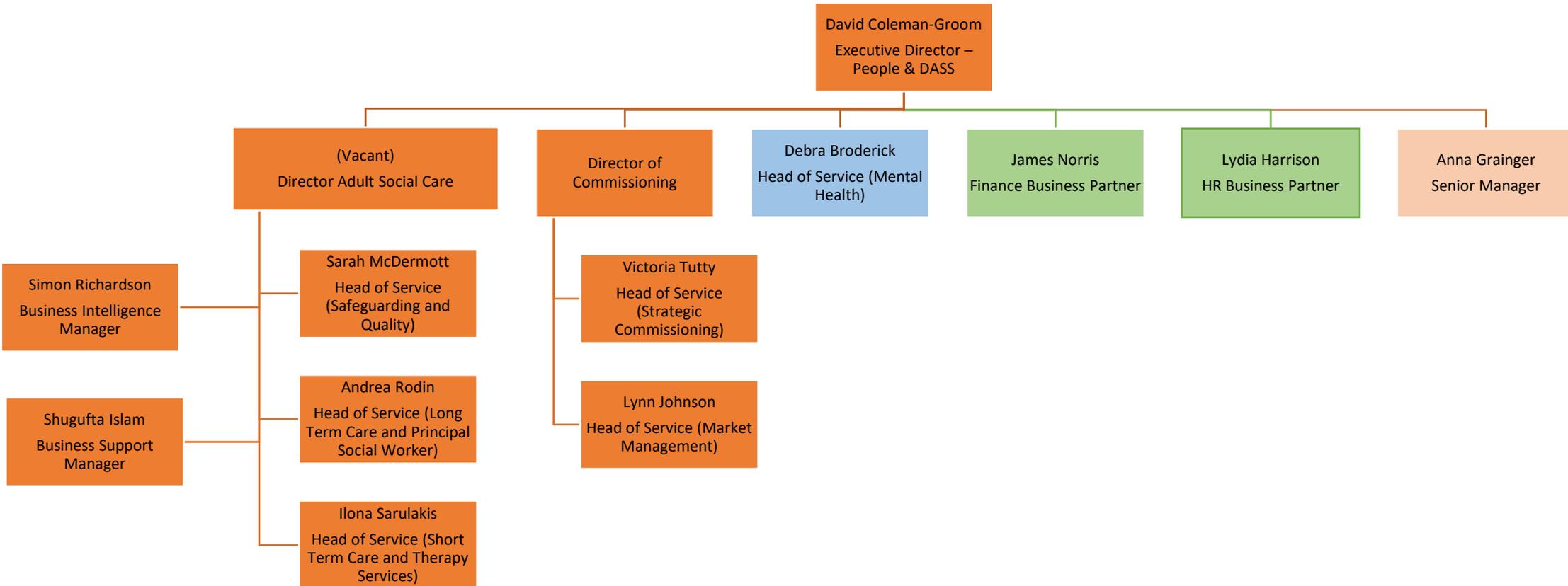


Adult Social Care Overview

Directorate Leadership Team



Extended Leadership Team

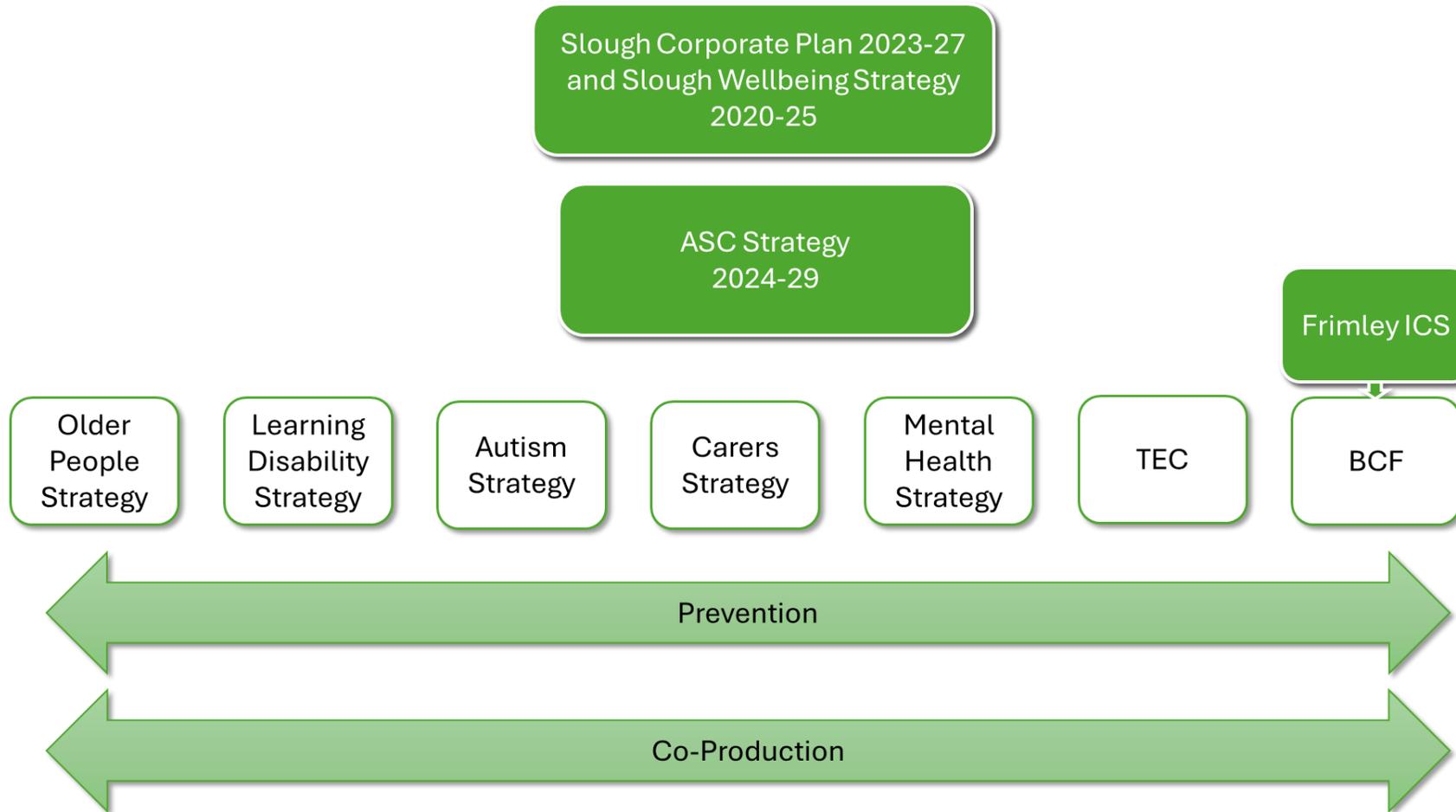


Staying in touch

- Newsletters – staff, corporate and co-production groups
- Monthly Staff engagement session
- Extended DLT
- Whole service meetings and workshops
- Lunch and Learn events
- Attending team meetings and co-production forums/boards
- Getting out and about - community events
- Meeting with Members
- Networking with others – e.g. Principal Social Workers/Occupational Therapists/Safeguarding leads
- ADASS regional events and LGA
- Listening to People and responding – consultations and co-production



Adult Social Care – Strategic Context



Adult Social Care – ASC Strategy

Vision: To improve the outcomes of our residents and their carers by enabling people to do more for themselves. Focusing on people's strengths even when at a point of crisis in their lives, by connecting them to their interests and communities and a network of wellbeing, care and support services

Core Purpose

- Clearer and fairer care and support to both service users and carers
- Improved physical, mental and emotional wellbeing of both the person needing care and their carer
- Preventing and delaying the need for care and support
- Putting people in control of their lives
- Improved and more personalised approaches to safeguarding for both the carer and the cared for person

Our Priorities

- Enable people to maintain their health and wellbeing
- Prevent the need for take up of adult social care
- Safeguard our Vulnerable Population
- Embed Co-Production at the heart of care and support
- Enable people to manage their own care and support needs
- Progress Integration
- Create a sustainable workforce

How we can achieve this

We can achieve our vision and deliver our priorities if we continue to work together with the people we support and their carers. The strategies, action plans and progressive work streams we have in place are supporting us in driving these outcomes; by setting out what we want to achieve, and defining how success will be measured, it will provide the residents of Slough with the template to better hold us to account.

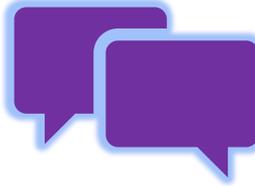
Adult Social Care Facts & Figures



12,813 contacts April 24- January 25, **14% increase** compared to the previous year



70% referrals converted to the start of an assessment. **8% increase** compared to 23/24



1,216 completed assessments, 80% within 28 days, **increase from 60%** in 23/24



- 20 new 65+ permanent admissions, **decrease from 40 in 23/24**
- 5 new 18-64 admissions a **decrease from 8 in 2023-24.**
(rate per100,000)

Internal Workforce

Sex	Religion
45% female 28% preferred not to say 16% male 10% not declared	27% Christian 11% Muslim 4% Hindu 3% Sikh 58% Not declared or Prefer not to say
Disability	Ethnicity
77% Prefer not to say 10% Not Declared 8% Yes 3.7% No	39% Not declared or Prefer not to say 23% English, Welsh, Scottish, N. Irish or British 12% African 10% Indian 8% Pakistani 7% Chinese, Caribbean, Bangladeshi, Irish

People We Support with an ongoing service

Adult Social Care support 2130 people as at December 2024



Female 58%



Male 42%

Age breakdown:

- 18-64 48%
- 65+ 52%

Learning Disabilities	17%
Physical support	47%
Support to Carer	16%
Social support	2%

Memory/cognitive	5%
Mental Health	11%
Social Isolation	2%
Sensory	1%



Adult Social Care Operations

Long Term Care

Andrea Rodin
Head of Service
(Long Term Care) and
Principal Social Worker

Tracey Preedy
Locality Manager
(East)

Katarzyna Mekla-Banas
Locality Manager (North-
South)

Uma Macarov
CTPLD Manager

Long Term Care Operational Teams

East Locality

North-South
Locality

Community Team for People with a Learning Disability (CTPLD) - works across the whole borough

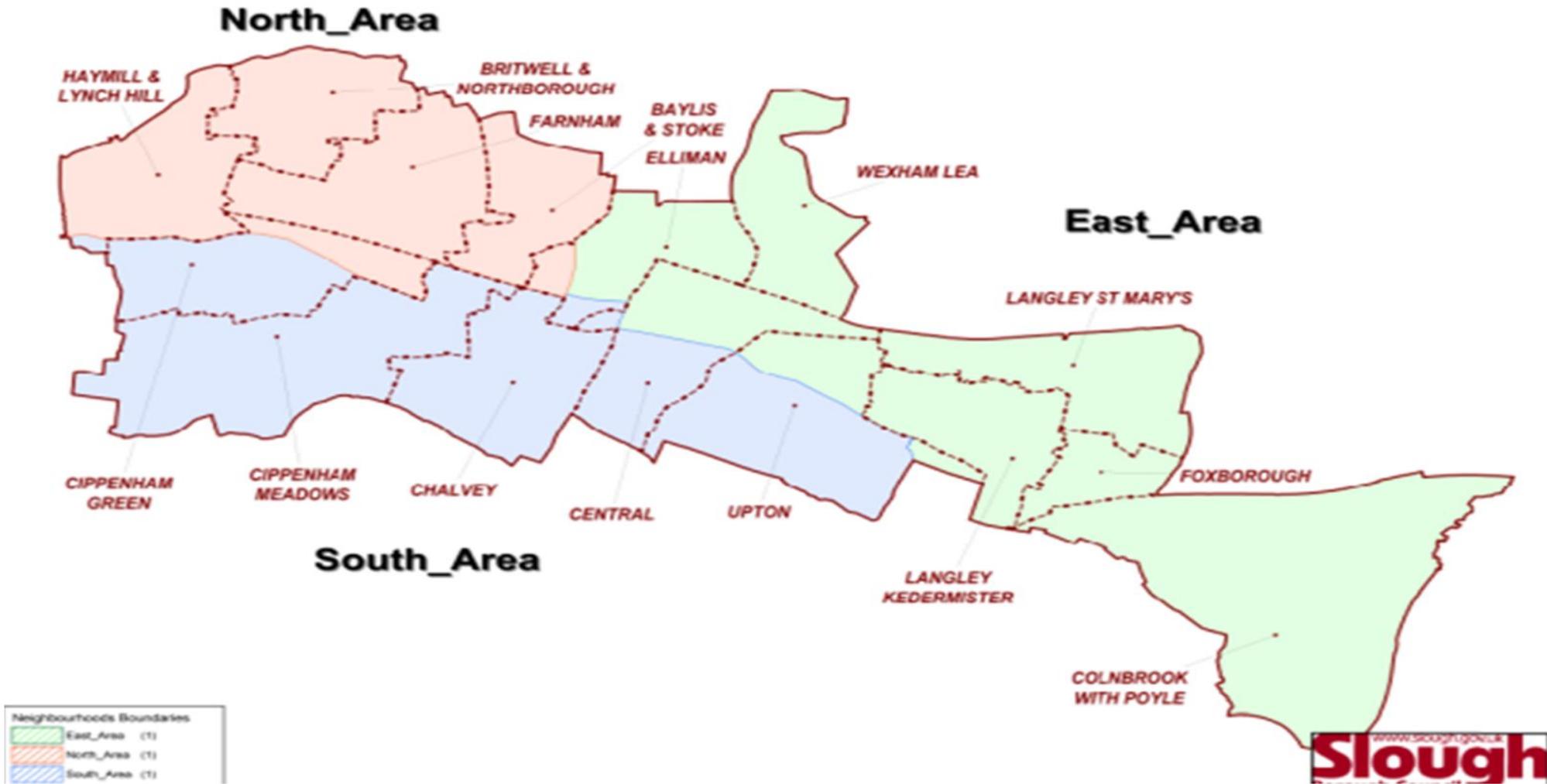
Also works as part of the Berkshire Healthcare multi-disciplinary LD Service

East Locality Manager leads on Sensory Needs Service and Carers

North-South Locality Manager leads on Extra Care Housing

CTPLD Manager leads on Transition Pathways

Adult Social Care Teams



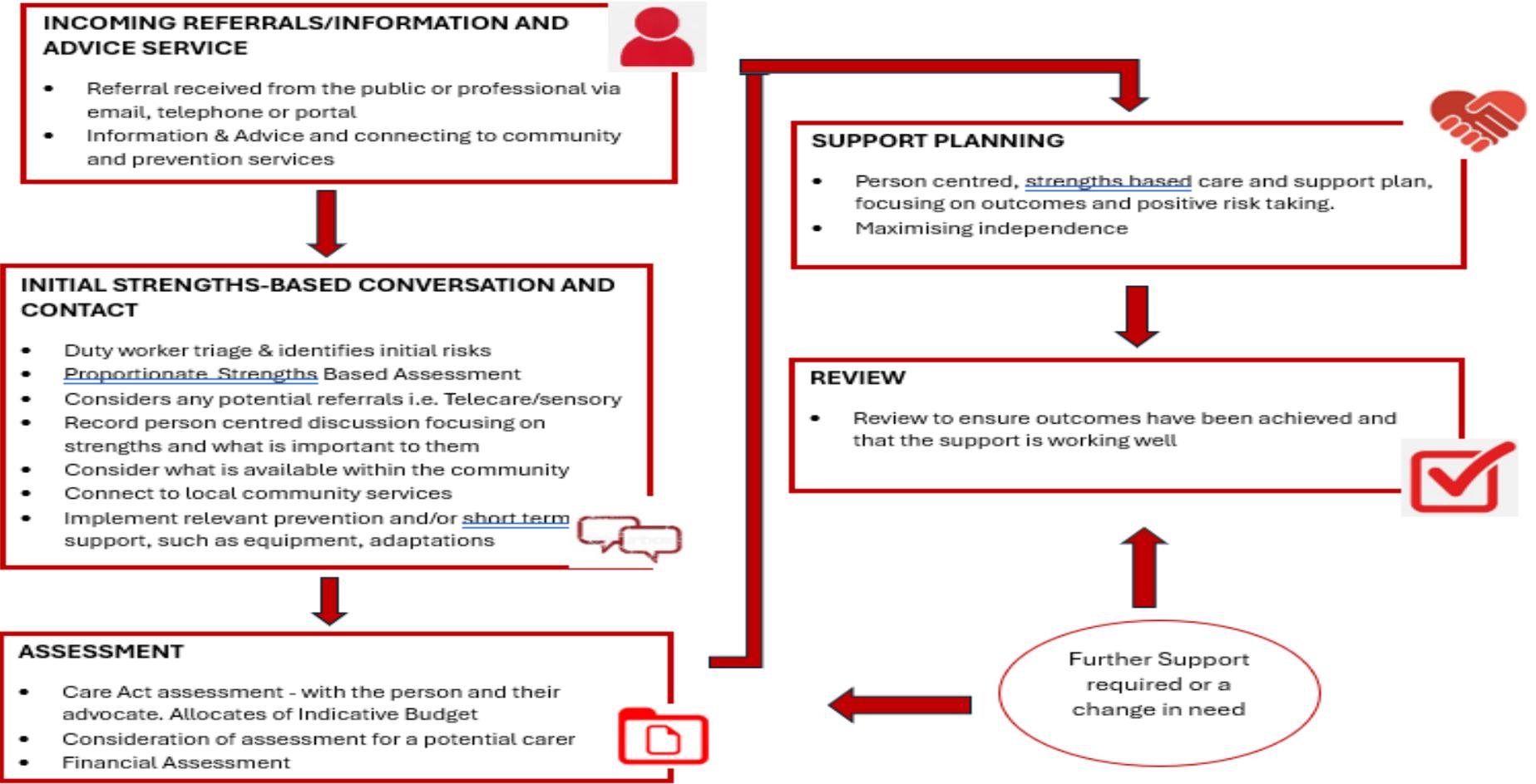
Specialist Support

- Sensory Support – ROVI
- Specialist support can be provided to ensure all people receive a holistic and strength-based assessment/review so that they can actively participate in life to the best of their ability.
- Specialist Visual Impairment Officer – supports people with visual impairment through the provision of in-person specialist sensory needs assessments, the provision of aids/equipment and rehabilitation where appropriate
- Matrix - Independent Advocacy
- ONCALL Language Service - Interpretation and Translator Service: Staff have quick and easy access to a variety of interpreter and translator services such as video conferencing, language line, in-person interpreters to ensure language is not a barrier to the assessment and care and support planning process.

Customer Journey



SCIE Prevention Model



Out of Borough (OOB) Placements



117 individuals

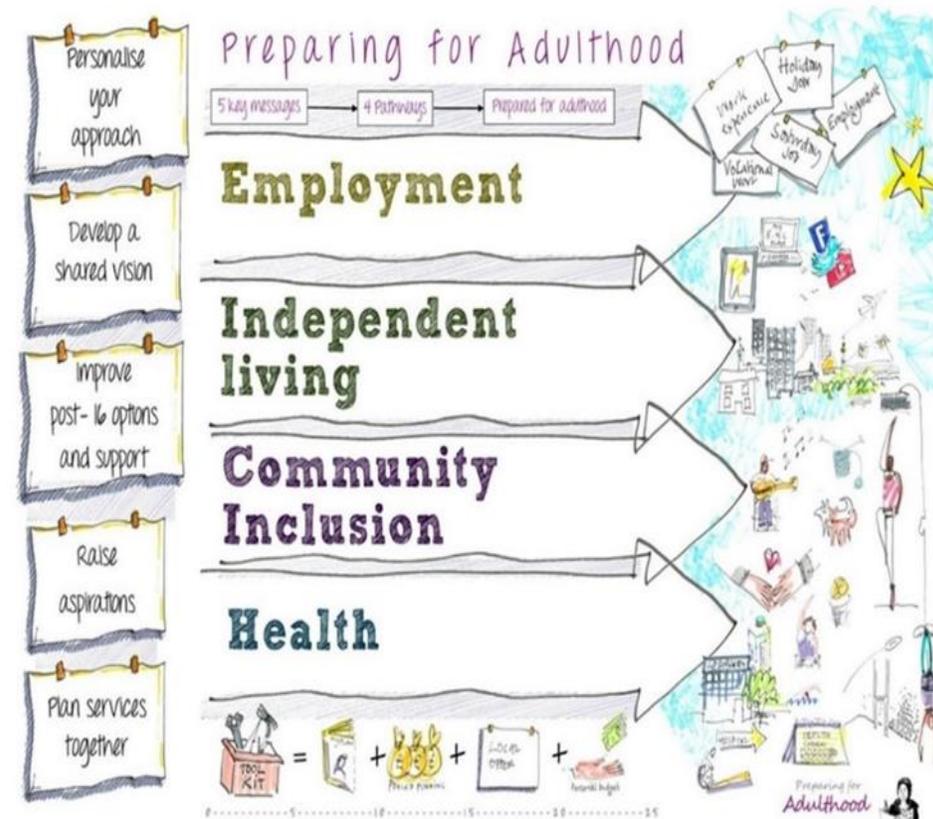
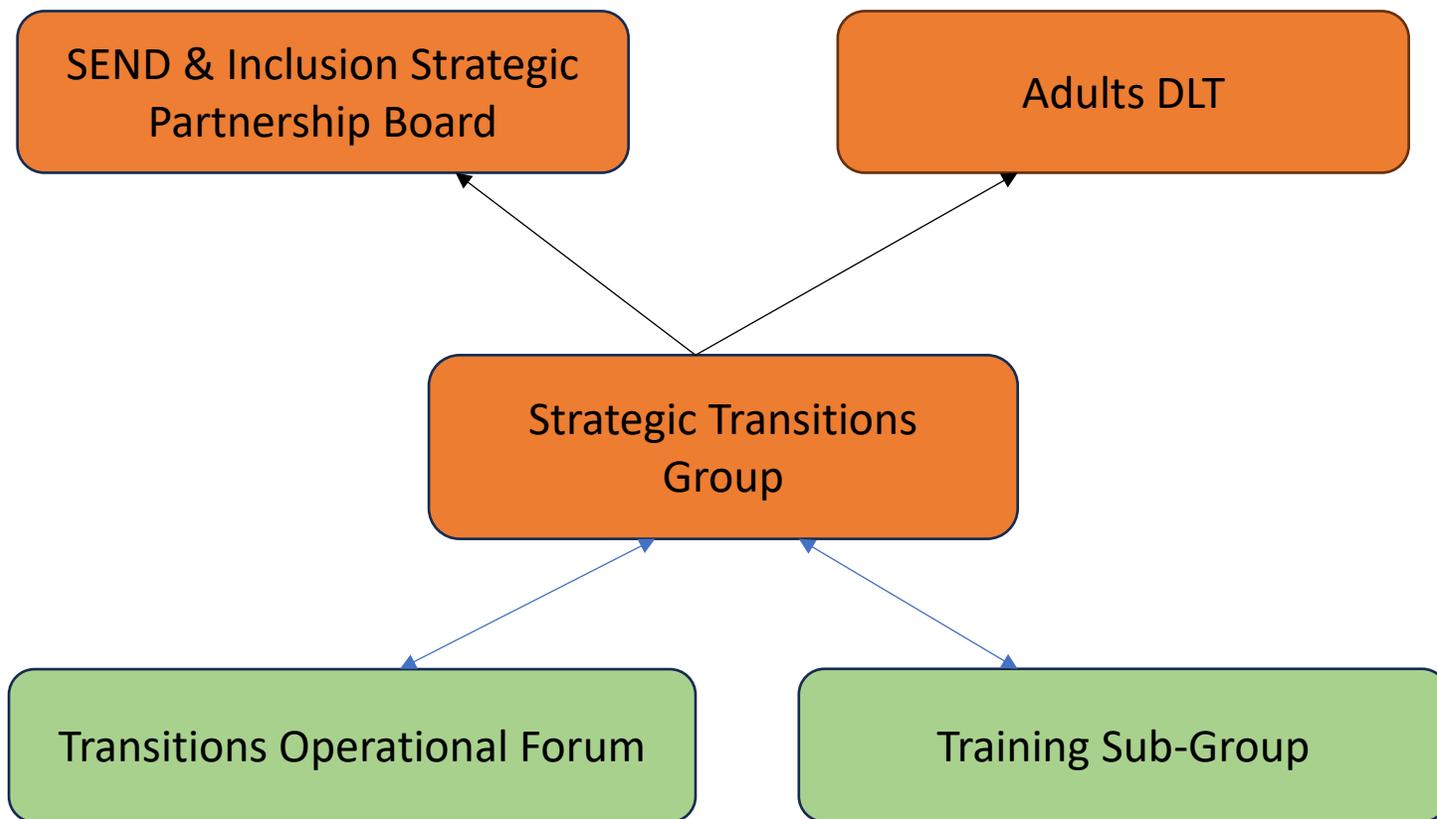


£207.5k per week

Family choice often dictates placements and just under half (48%) of “OOB Placements” are in Windsor and Maidenhead, and Buckinghamshire (which is an “extension of our local market”)

- A quarter (25%) are elsewhere in the SE ADASS region
- 30% are more specialist placements where no local provision available (LD/MH)
- Prior to an OOB placement the allocated worker requests the completion of a check by the Quality Assurance Team.
- Due diligence includes checking the CQC Rating, host authority costs and whether the host authority has any concerns about the provision from a quality or safeguarding perspective.
- There are no placements made in Inadequate rated homes, 8 homes are rated Outstanding, 42 are rated Good and 14 are Requires Improvement
- 21 placements have been made out of area in the last 12 months

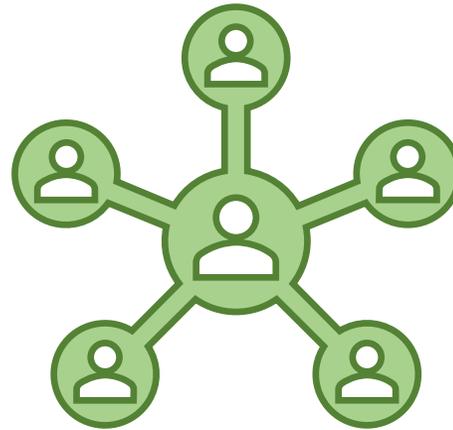
Preparing for Adulthood & Transitions



Pathway for Transitions

Planning for transition starts as early as possible, to identify those young people who may be eligible for Adult Social Care support and to prepare for a transfer to Adult Social Care at a time that is right for them

The preparing for adulthood process starts when the young person reaches the age of 14, with more detailed discussion/tracking at the Transition Forum from age 16

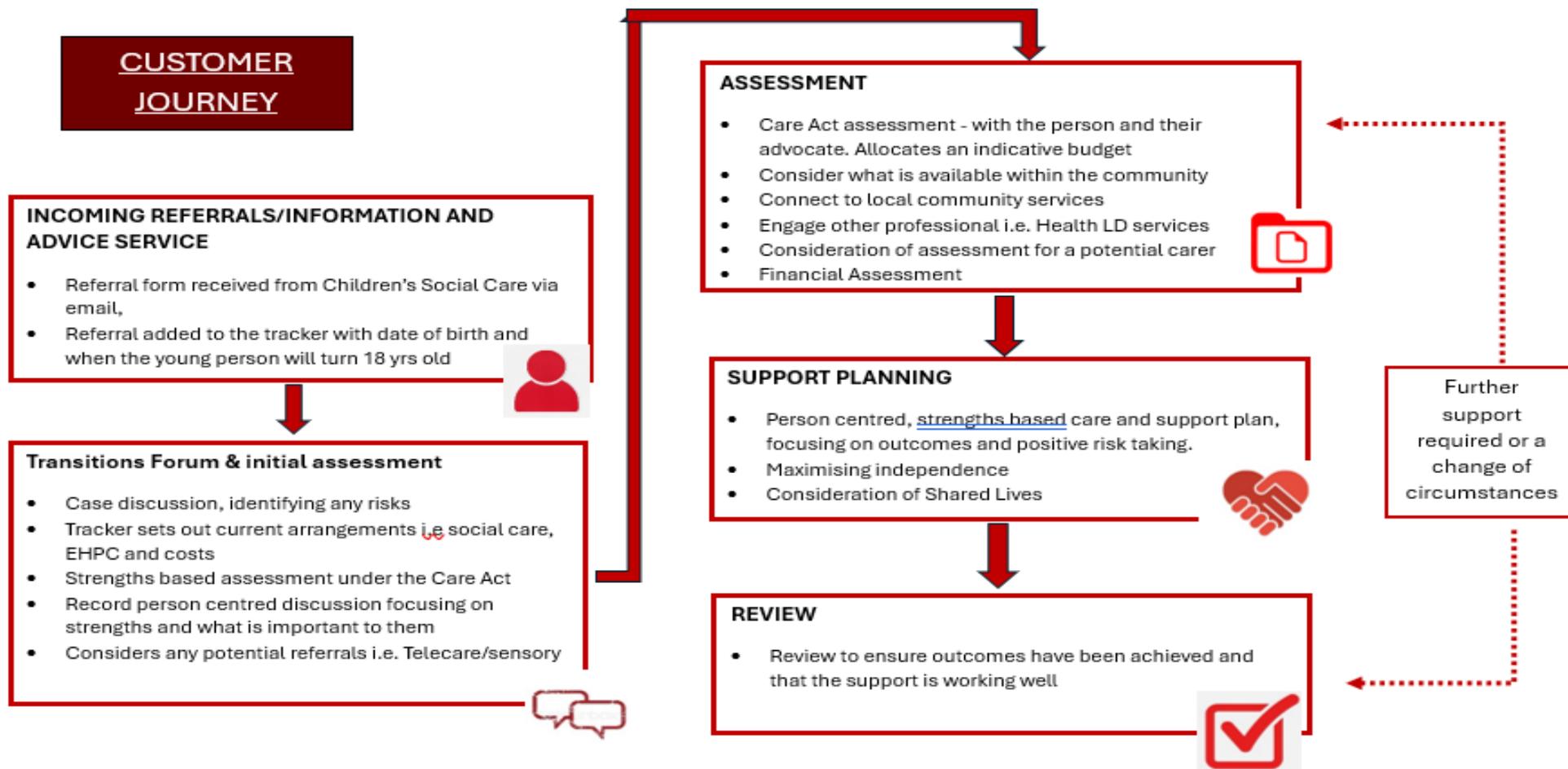


Children's and Adult's services work jointly and proactively to prepare the young person and their families for adulthood

The Transitions Operational forum is a multi-agency forum which meets quarterly to identify young people, discuss their needs and the anticipated most appropriate support post-18

Closely with families, ensuring assessments are completed in a timely manner – strengths-based assessments may be undertaken initially, looking at prevention and information/advice strategies where appropriate

Transition - Pathway



Safeguarding and Quality

Sarah McDermott
Head of Service
(Safeguarding and
Quality)

Vivian Ndukwe
DOLS Team Manager

Safeguarding and Quality- Accountability

Slough Safeguarding Partnership

We play an active role in the Partnership and its subgroups being members of:

- Safeguarding Executive
- Advancing Adult Safeguarding Practice
- Safeguarding Adult Review Panel
- One Communication Group
- Learning and Development Forum
- Multiagency Child Exploitation Group
- Pan Berkshire Policy and Procedure Group
- Pan Berkshire Quality Assurance Group

Assurance and continuous improvement of our safeguarding adults work is driven through our Safeguarding Adult Practice Forum which will feed into the Practice Assurance Board which is in early development.



Safeguarding and Quality – Safeguarding Adults pathway

Our operational teams ensure that the 6 principles of safeguarding adults are considered

Our safeguarding adults work is person-centred and strength-based; ensuring that Making Safeguarding Personal is embedded throughout the process

Incoming referrals

Referral received into ASC from public or professionals

Initial triage by locality teams

Determine most appropriate team to triage referral
Immediate risks identified and managed
Information gathering to determine if criteria for safeguarding concern met

Safeguarding Concern

Are the 3 criteria met?

- Adult with care and support needs
- Experiencing or at risk of abuse or neglect
- As a result of care and support needs unable to protect themselves

Oversight by manager on decision making to proceed to S42 safeguarding enquiry

Undertake S42 safeguarding enquiry

Establish if a 'caused' enquiry is indicated
Ensure advocacy as required

Safeguarding Plan

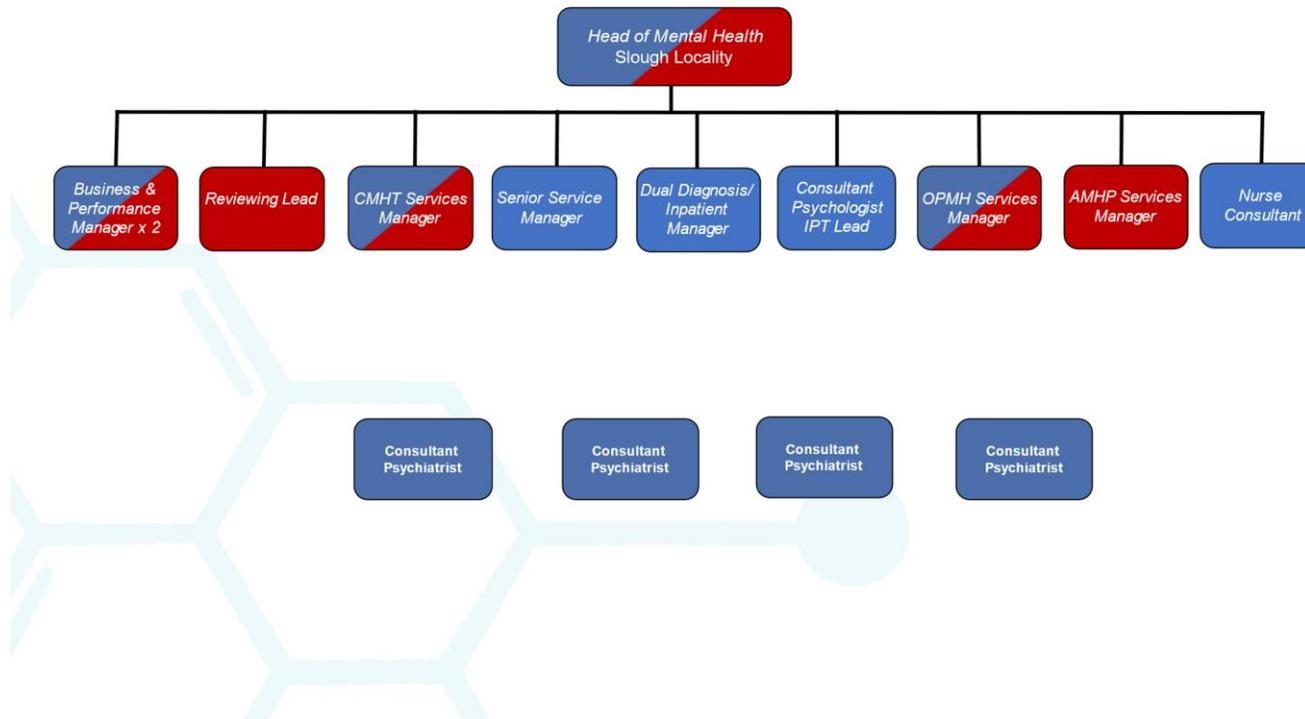
Determine protective measures

Deprivation of Liberty Safeguards (DoLS)

- Slough DoLS Team works across the Borough
- Has strengthened links with the hospital, residential and nursing homes and advocacy provider (Matrix)
- Additional capacity for the team included in the 2025/26 budget

Mental Health Services (Adults)

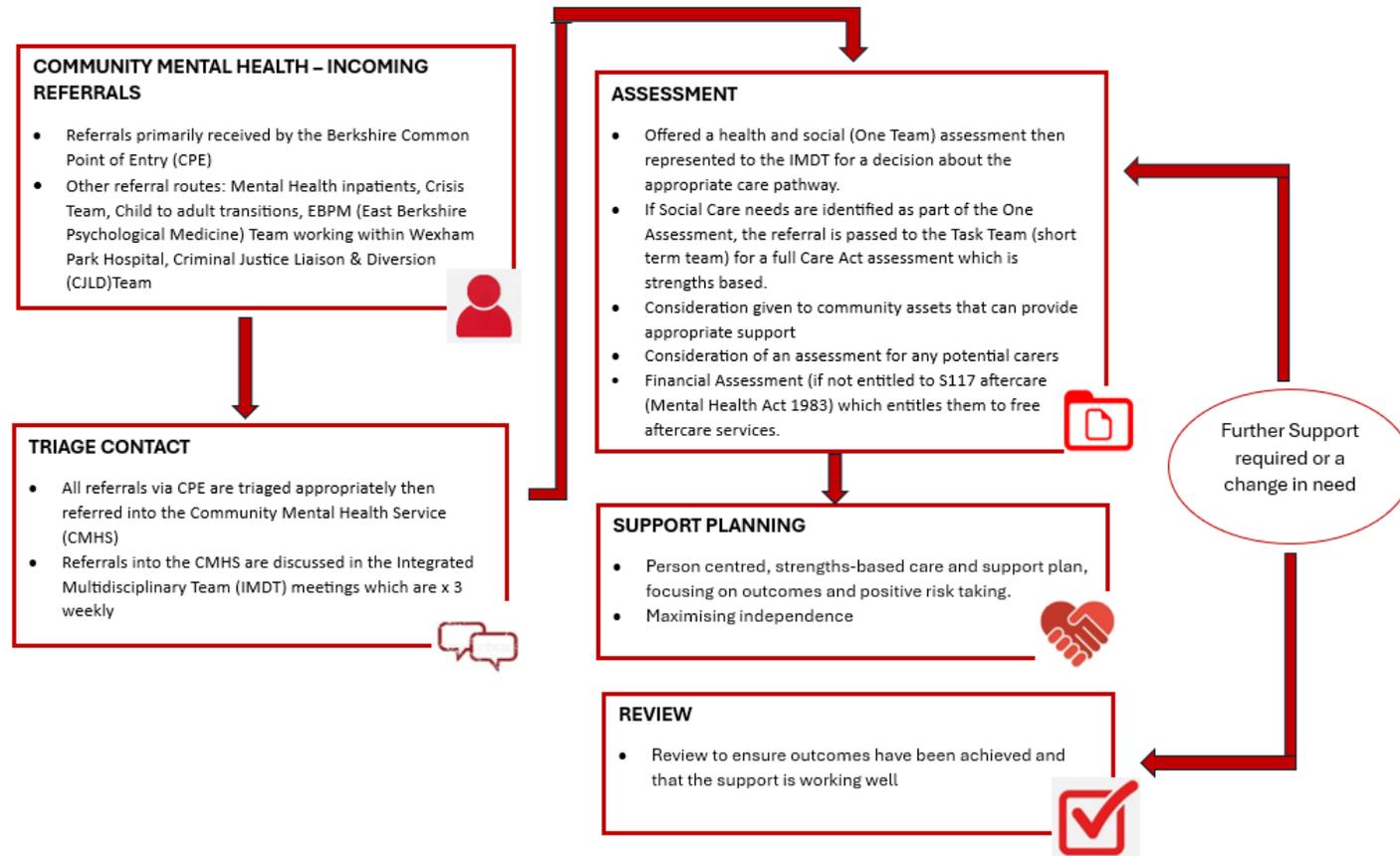
HoS – Supervision Structure Slough - Community Mental Health Team



Mental Health Services

- The Community Mental Health Services are joint funded Teams between Berkshire Healthcare NHS Foundation Trust (BHFT) and Slough Borough Council (SBC). The Adult Service is based a New Horizons and the Older Adult Service is based at Upton Hospital, Slough.
- Care Act functions are enacted by Care Co-ordinators (Social Workers) within the core team or by members of staff within the Task Team (Adults short term). team.
- Referrals into the team are managed in accordance with details contained in the next slide

Mental Health



Mental Health

- **Celebrations**

- Development of the Living Well service within Older Adults Mental Health. The service offers interventions to promote cognition, independence, and wellbeing; offering a range of activities to promote wellbeing that is tailored to the person's preferences. The service also offers group Cognitive Stimulation Therapy to people living with mild to moderate dementia.
- The offer of support from the Living Well Service is extended to carers, family and friends.
- Opening of a Communal garden that is managed and maintained by experts by experience and their carers.

Mental Health

Co-Production Pathway

- Over the last 11 years, Berkshire Healthcare and Slough Borough Council have been developing an innovative and comprehensive pathway for the population of Slough, by creating an 'Enabling Town Slough' an umbrella term for its co-produced mental health services.
- This pathway relies on co-produced interventions jointly delivered by people with lived experience in different settings across the town. Using a strength-based approach, alongside evidence-based psychotherapeutic and psychosocial approaches, we ensure that the requirements of different people are met.

[Enabling Town Slough](#)

Mental Health

- Hope Recovery College
- **It all starts with a co-produced individualised care plan, which allows people who use our services to feel safe and empowered to choose what happens and how their mental health is managed.** Personal goals always focus on several areas, including a management of mental health difficulties by learning new skills, as well as developing a sense of purpose and belonging. This strength-based approach allows people to have a sense of ownership of both the interventions they get, but also of the service. Hope College, directly involves people in co-production on a daily basis and the interventions are co-delivered with people with lived experience of using our services. Once their planned care and interventions are completed and their recovery goals are reached, people are discharged or transitioned to other community services. They then have different options, for example to train as Peer Mentors or Ambassadors and return to contribute to the service as registered Berkshire Healthcare volunteers. Should they choose to, as the next step after this, there are also paid posts of Lived Experience Practitioners available.

Mental Health

- Case Study

- Sunita's journey:

- 21-year old Sunita was referred to Slough mental health services by her GP as a result of experiencing hallucinations and hearing voices. Following assessment, a care plan was co-produced, which included support by a Care Co-ordinator, and outpatient appointment with a psychiatrist to stabilise her medication. Sunita struggled with daily living tasks and lost hope and motivation to do anything for herself. She was offered an assessment with a Specialist Occupational Therapist who worked with Sunita to develop a care plan that would enable her to be less dependent on her mother. Sunita also engaged in Cognitive Behavioural Therapy for Psychosis with our Psychological Therapies team. Sunita was then supported to access Hope College workshop Hearing Voices, which was co-produced and co-delivered by a Volunteer Peer Mentor. Sunita's mother was offered a carer's assessment, which helped her to learn how to both support Sunita in a healthy way, but also how to look after herself as a carer. Sunita was very creative and enjoyed attending Hope College workshops, especially art, photography and music. These helped Sunita to reconnect with her creative abilities, which in turn helped her with her self-esteem. As Sunita progressed, she agreed to be seen by our Employment specialist, who supported Sunita to consider some work opportunities. Sunita was keen to work as a barista in a café and this was enabled, and with some negotiation, she secured a part-time position in a high street café chain. Sunita was supported back to the care of her GP.

Mental Health Integrated Approach

- Integration between Health, Social Care and the Voluntary sector is embedded within both the Adult and Older Adults Team. Both Teams share a joint multi-disciplinary approach which enables a person's needs to be considered holistically.
- The Hope Recovery College is joint funded between SBC and BHFT
- Peer Mentors work across both Health and Social Care, offering a preventative service that is strengths based.
- A Mental Health Professional is employed by BHFT to work within the LAP allowing direct access to the IMDT.

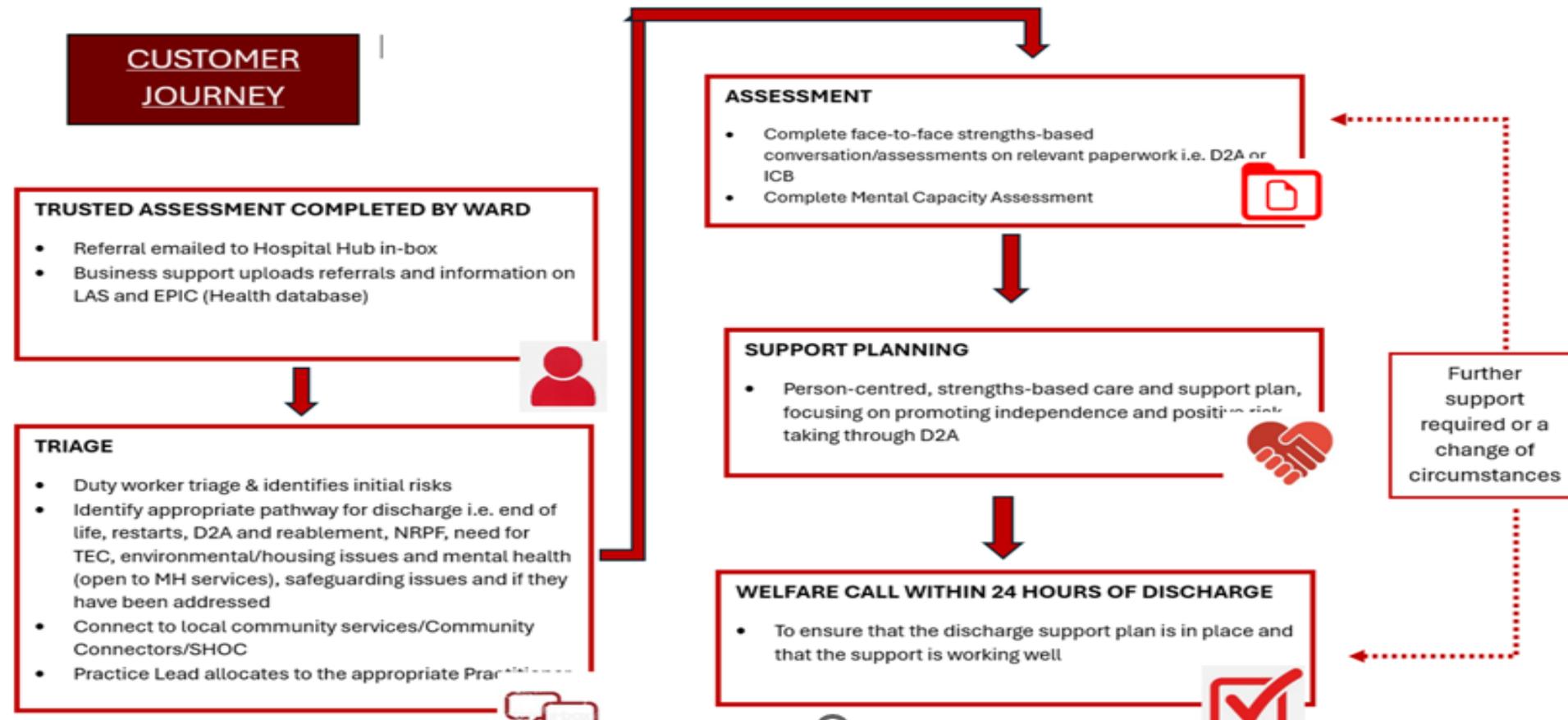
Short Term Care and Therapy Services



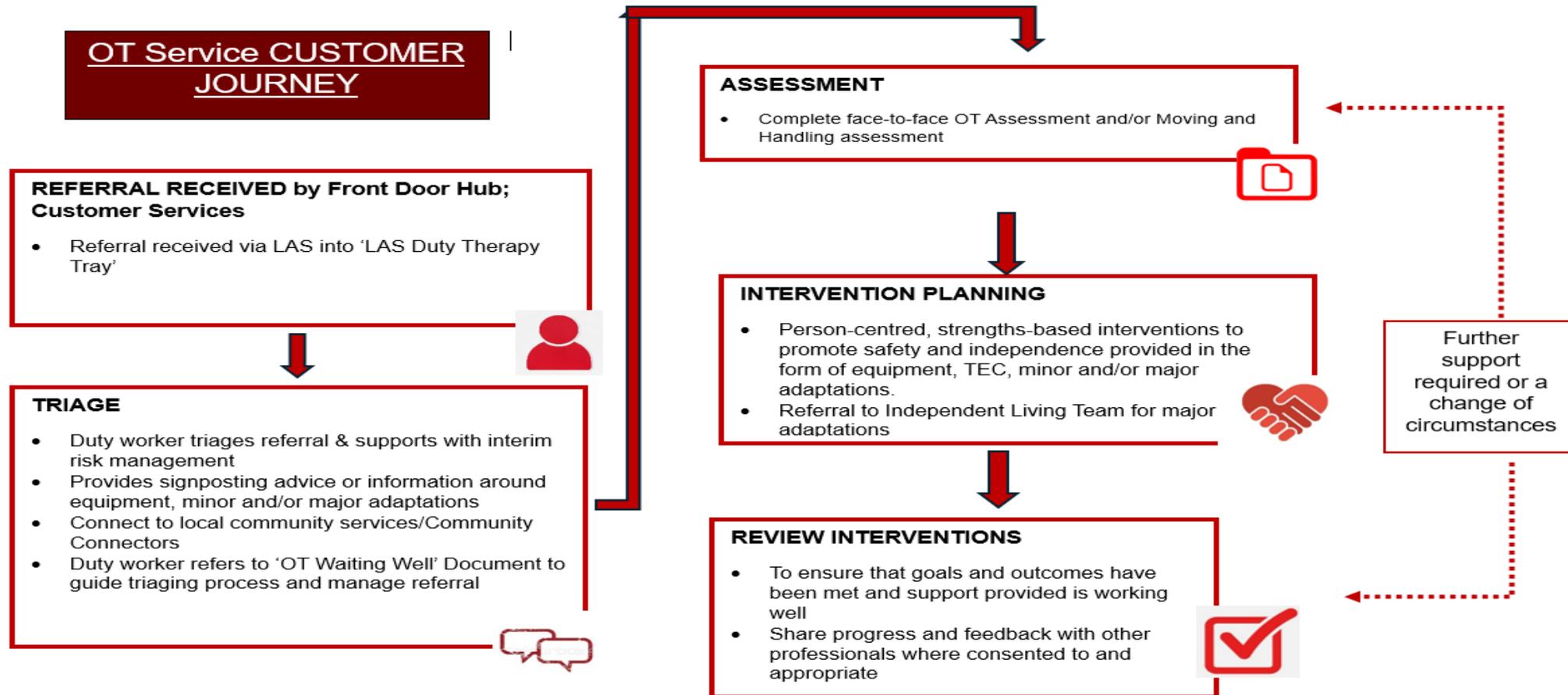
Teams

- **Long Term Occupational Therapy** team works borough wide.
 - Part of the Front Door Hub with Customer Services. Dedicated day of the week for staff to be co-located.
- **Reablement and Independence Service including Discharge to Assess Team**
 - Occupational Therapy
 - Physiotherapy
 - Social Workers
 - Provider Arm
- **Independent Living Team (ILT)**
- **Hospital Discharge Team**

Customer journey - Hospital Discharge Team



Customer journey – Occupational Therapy



Joint Working

- Hospital Discharge is based on a multi-disciplinary partnership approach between the local authority, hospital teams, VCSE organisations and housing teams where appropriate
- Range of options available to people as part of their discharge and reablement journey that reflect peoples differing needs:
 - Discharge to Assess/Short-term home care intervention – up to 2 weeks
 - Reablement service in the community – up to 6 weeks.
 - Community Rehab Beds/BHFT (St. Marks, Jubilee Ward/Upton Hospital)
 - Discharge to Assess Beds (Care Homes)
 - Weekly meetings with ICB Complex Care Team
- The Locality Access Point (LAP) **“to prevent hospital admissions and improve the quality of life and experience for local residents”** is part of the Frimley Integrated Care System, brings together health and social care staff. Multi-agency Integrated Care Pathway acts as "one stop shop" for anyone with multiple needs. Works closely with Urgent Community Response (UCR) which provides a rapid assessment, diagnostic and treatment service to prevent hospital admission. The UCR operates 365 days a year.
- People with complex care needs are referred to Cluster Multi-Disciplinary Teams. The Primary Care Network (PCN) holds a monthly Cluster Meeting which combines reactive patient discussion and anticipatory care (proactive care). Referrals can be made by health, social care, care homes, for a case discussion and action planning.
- Allied Health Professionals Board - Frimley ICS. Provides clinical care professional leadership to the integrated care system and supports culture of collaboration and the delivery of integrated care pathways across the care continuum.
- Frimley ICS Discharge and Flow Steering Group.

Arrangements for working with Housing

Independent Living Team (ILT)

- Facilitates Disabled Facilities Grant (DFG) applications for tenants of Registered Social Landlords (RSL's), private home-owners and private renters.
- Work closely with RSLs who provide homes in Slough
- Established working group forum with RSLs. Bi-annual meetings in place.
- Through close working with Occupational Therapy Team and Housing providers, ILT ensures that where possible people can remain in their homes with appropriate adaptations in place.
- Slough Borough Council manages adaptations for council-owned housing from its own budget.

Hospital Discharge Team

- A linked Housing Manager from SBC attends MDT meetings twice weekly to discuss homeless/housing issues for Slough residents due to be discharged.
- These meetings are also attended by various stakeholders including Clinical Lead for MH (Berkshire Health Care NHS Foundation Trust and Slough Community Mental Health Team), ICB Place, OT Lead for NHS, and Discharge Team.

• Extra Care Housing

- Team Manager sits on the extra care housing allocation panel which brings together Landlord, Care Provider, operational ASC, contracts management and SBC Housing.

Strengths – Director Adult Social Care

- **Direct Payments** - helping people to exercise independence through freedom, choice and control. 31.6% of people we support have a Direct Payment higher than the South-East and National averages and 97.3% of carers have a Direct Payments
- **Carers** - Positive increase in the proportion of carers who report they have been included in discussions about the persons they care for, this has increased by 9.4% in 24 months
- **Support at Home** - We recognise and hear from residents that the place they want to be is at home with family and in their communities, we are in the 1st Quartile for the number of people whose needs are being met by admission to residential or nursing care; better than the average for the number of people admitted into residential or nursing care.
- **Social Work Health Check** - 38 out of 138 organisations completing the RSW survey - and 44th out of 124 on the Social Care Workers survey
- **Assessments** – 80% of assessments are completed within 28 days
- **Emergency Duty Service** – effective arrangements in place with Bracknell

Areas We Are Improving – Director Adult Social Care

- To increase and expand our **digital portals**, such as a professional and provider portals to improve efficiency and business process
- Identify and maximise **transformational opportunities** in Adult Social care that embrace the values of the new Target Operating Model whilst embedding the best value principles such as our approach to a front door that will underpin our demand management approach.
- Expand our approach to gathering and learning from customer feedback to ensure it is **sustainable and systemic** in influencing and shaping practice and future service design
- Evidencing how we are **removing inequalities** from care and support. Actions are embedded into our 2024/25 business plans, as we continue to embed strength-based practice and the way that we evidence person centred decision making in all instances.
- Further improve the quality of the data and to turn our data into service intelligence that is digitally accessible to all managers through the creation and implementation of a performance framework linked to practice standards and reporting which is supported by a digital solution
- Reduce dependency on agency staff, to enable sustained consistency of practice and developing sufficient staff to deliver on our statutory duties

Challenges

Demand Management

- Increasing demand continues to grow, people living with multiple conditions

Adult Social Care Market:

- Increased costs for care provision if not fully funded may lead to contract hand back, and some providers may exit the market entirely
- There may be disruption to people's lives and care and less choice in the future
- Additional time and costs incurred in identifying alternative provision
- If providers seek to offset some of their increased costs by reducing spend on non-mandatory training, this may impact on the quality of the care received.

Financial Constraints:

- Balancing budget limitations with increasing service demands due to demographics, increased acuity, increased demand and costs – additional government funding secured.

Strengths and journey into the future

- **Internal Workforce Strategy** - A well-trained and supported workforce with investment in ongoing professional development and training is resulting in strong staff morale and a positive culture.
- **Slough Borough Council Our People Poll** - 61% directorate completion rate. 100% said they have good working relationships with colleagues and 98.53% have a sense of pride about their job.
- **Communication** – Monthly newsletter, staff events and monthly staff engagements sessions: looking to deliver podcasts
- Building on performance and outcomes– **Thematic approach** to audits and safeguarding
- A strengthened **Quality Assurance Framework** and the establishment of a **Practice Assurance Board**
- **Continue to work in partnership with providers and the community in the spirit of co-production**
- Demonstrable evidence of collaboratively working with a diverse range of community organisations with a **strong coproduction framework** where people with lived experience are actively involved in shaping services.
- **Health and social inequalities** - targeted strategies in place to engage underserved populations and those people from seldom heard groups/communities with culturally sensitive practices in place.
- Early intervention, prevention and reablement services are well developed and people are supported to **maintain their independence**.

Why we do all of the above.....

“ The worker stood out from the rest.....she dealt sensitively with X. It was a breath of fresh air just at the right time...”

“My mother felt very comfortable with you and your colleague.....so delighted with the support on offer....”

....your department, and the Council (you) are worthy of my praise; "you" stepped in and helped my mother at a life changing time when she was on a pathway of tribulation and distress. You stepped in and helped change the experience of my mother, and indeed myself and my brother.

"You" helped us regain the hope and peace that was needed to make the best of my mother's remaining months; My mother is now able to move forward with an increased level of peace and also slowly, return to being feeling human again and to start to be herself, helping to others in her community.

"You" were the key to unlock that.

(From email feedback)

Why we do all of the above.....

"Following a successful Interview with Legoland X started a full-time job . After six months of being in paid work, the transformation in him is significant. His confidence has grown, he has lost weight through being active and being able to afford to attend a gym on a weekly basis. Best of all he has made many new friends at work and enjoys talking about his very active social life which has had a significant positive impact on his mental health"

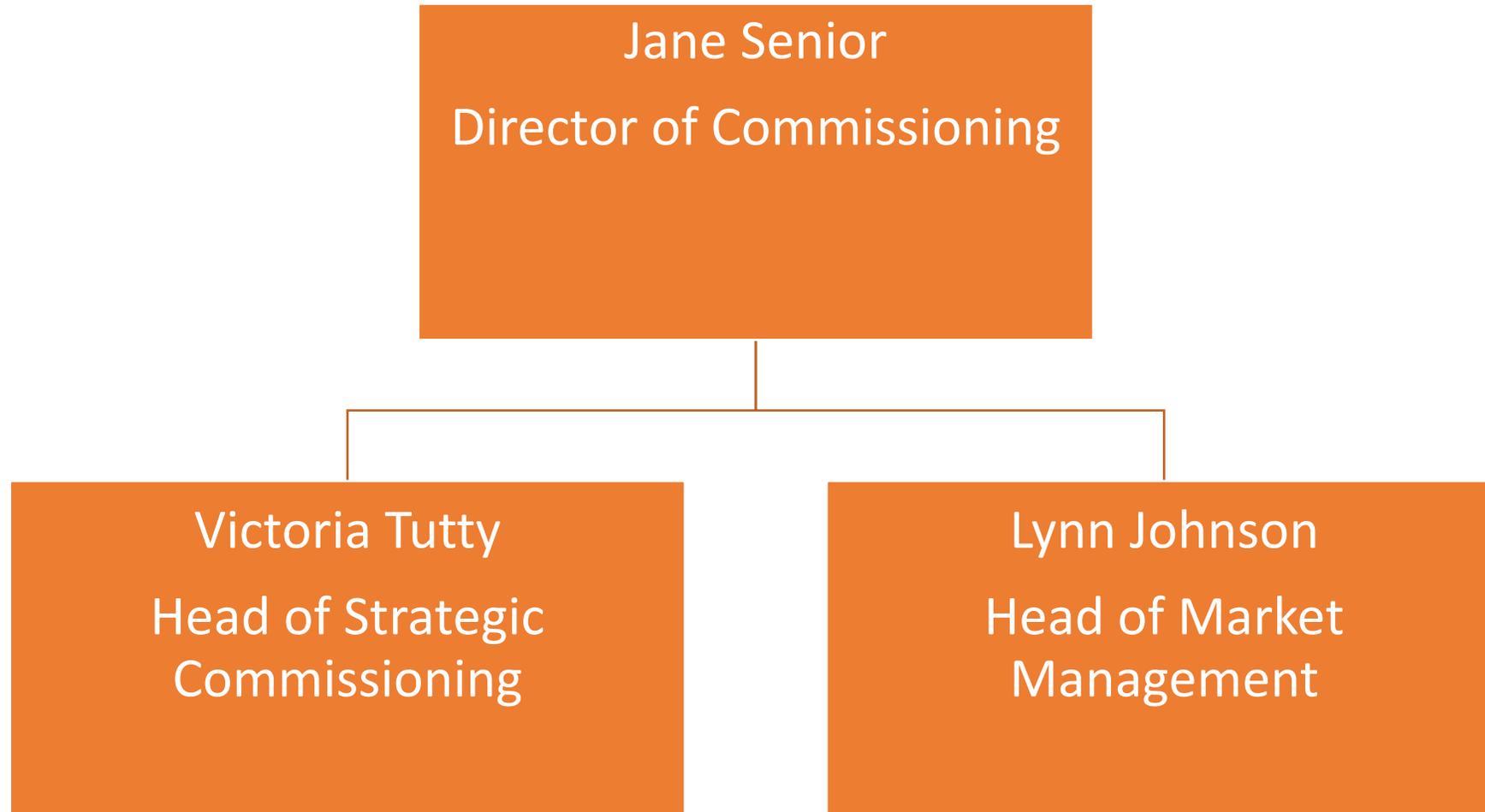
".....Wanted to share and say, good outcome! And thank you for the visit".

"...xx was a breath of fresh air and a real relief after the trauma of WPH's OT and my mother's terminal and life changing prognosis. She was able to move quickly to visit my mother and fairly assess her abilities, needs and our cultural situation. She was very sensitive to my mother and her needs and wishes and crystalised action to get extra hand rails for the stairs, a key safe, a "falls alarm", shower stool plus the option of guide rails to enable my mum the possibility of leaving the house. She had a "can do" and "positive" attitude as well as being clearly proficient as an OT. We greatly appreciate the role that xx played and the sensitive and engaging manner. XX refused to accept a gift from us to let us express our gratitude but, we understand that as being SBC policy. If there are any awards in Slough Borough Council for excellence, customer service, and proficiency, then please take this as a nomination for XX"



Strategic Commissioning

Commissioning Senior Leadership Team



Director of Commissioning - Strategic Commissioning Structure



Adult Social Care – Linked Strategies

- Highly innovative, community-oriented and successful approach towards developing and delivering key ASC strategies.
- **All Strategies (Older People, Carers, Autism, Learning Disabilities, Mental Health) have been co-produced with local people – golden thread to ASC Strategy, Health and Wellbeing Strategy and Corporate Plan.**
- Delivered by multi-party steering groups chaired by officers and experts by experience.
- Include task and finish groups led by officers, local people, partner agencies (statutory and voluntary sector), members of the co-production network. Working together to deliver effective change and make improvements.
- **Emphasis upon early intervention and prevention (see statement of prevention), managing demand and ensuring that commissioned services operate effectively.**
- Scrutiny, oversight and accountability for strategy development and delivery through approval and annual reporting to Cabinet. Strong support from Lead Member.
- Enables a strong strategic foundation for transactional commissioning of services to take place.
- Commitment to Equalities through the Equalities in Commissioning Position Statement.
- [Adult social care strategies, plans and policies – Slough Borough Council](#)

Adult Social Care – Older People Strategy

Older People Strategy & Steering Group – Key Successes

- Steering Group Co-chaired by Officer and Expert by Experience (member of co-production network and 50+ Forum)
- OP Question Time Event
- Production of Dementia Leaflet and Dementia Information Pack for Professionals.
- Presentations on Health Needs Assessment for Falls Prevention by Public Health , Review of End- of-Life Pathway led by Thames Hospice, TEC Support for maintaining independence for longer.
- How to Guide for Quality Conversations with Co-Production Network.
- Dementia Action Week May 2024.
- [AGENDA ITEM](#) One year update to Cabinet November 24.

Slough Older People's Steering Group & Slough 50plus Forum present

Question Time!

A chance for older residents to ask those burning questions of an expert panel.
Chaired by: Rob Deeks, Chief Executive, Together as One.

Featuring Panel members including: Cllr Dexter Smith - Leader of the Council, council senior leaders, Martha Earley - Frimley Health and Care ICS, and Vicki Atherton - Operations Manager, Slough CVS, Jane Senior, Director of Commissioning and Sonia Khan, Director of Strategy, Change and Resident Engagement, Slough Borough Council.

Advice on benefits, income, energy saving and health and wellbeing!

**Tuesday
26 November
2024, 1-3.30pm**
Kingsway United
Reformed Church,
11 Church Street,
Slough SL1 1SZ

Please register your attendance and questions in advance by email or phone. Places are strictly by booking only.
Email: BelInvolved@slough.gov.uk | Mobile: 07873 703435



Adult Social Care – Older People Strategy



Adult Social Care – Autism Strategy

Autism Strategy & Steering Group – Key Successes

- Steering Group Co-chaired by Officer and Expert by Experience (member of co-production network and mum to autistic son)
- Autism Acceptance Celebration Spring 2024.
- Establishment of Autism Community Coffee Morning now Slough Autism Together.
- Promoting Independence: Currently working with Autism Berkshire (Frimley ICB funded for East Berkshire) to develop a drop-in service led by Autistic advocates at the libraries.
- Employability: Weekly drop-in sessions for work opportunities at the Curve provided by Ways into Work to enhance job search opportunities and support in finding employment for autistic adults
- Workforce Development: Expert by experience staff training being developed by Autism Community Coffee Morning Group. SBC to work toward meeting Neurodiversity in employment index (NDEI) by December 2024 with guidance and support from Autism Steering Group
- Integration of Health and Social Care: Discussed health initiatives with ICB and Public Health to implement sensory friendly health checks and improve uptake of health screening in the community (starting Spring 2025)
- Health Consultation with Frimley ICS and Autism Berkshire.
- [Cabinet Report template 2022.23](#) 1 year update on progress of Autism Strategy – Cabinet February 2025.



The poster features a warm orange and yellow color scheme. At the top right, there is a circular inset photo of a woman smiling. The main title 'Autism Community coffee morning' is in a large, dark font. Below it, the location 'Chalvey Community Hub, Ladbrooke Road, Slough, SL1 2SR' and the date '10.30am-1pm, 13 February 2025' are listed. To the right, a text box invites attendees to 'Join us for a special event dedicated to the Autistic community in Slough!' and encourages them to 'Pop down, have a cuppa and chat.' Below this, a paragraph describes the event as a 'drop-in/drop-out friendly' one open to autistic individuals and carers, with a quiet area available. Another circular inset photo shows a group of people talking. A final circular inset photo shows a woman writing in a notebook. At the bottom, there is an RSVP instruction to contact 'beinvolved@slough.gov.uk' and the Slough Borough Council logo, which includes a yellow infinity symbol and the text 'www.slough.gov.uk Slough Borough Council'.

Autism Community coffee morning

Chalvey Community Hub,
Ladbrooke Road, Slough, SL1 2SR
10.30am-1pm,
13 February 2025

Join us for a special event dedicated to the Autistic community in Slough!

Pop down, have a cuppa and chat.

This drop-in/drop-out friendly event is open exclusively to Autistic individuals and their carers. A quiet area will be available on site.

Join us for a discussion on creating an identity for our group moving forward.

RSVP: Please contact beinvolved@slough.gov.uk to book and ensure we stay within venue capacity.

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Adult Social Care – Autism Strategy (Slough Autism Together)

- Autism Coffee Morning now called Slough Autism Together
- 2 meetings to date
- Intention to be a self-managing group and provide self-support and social opportunities for autistic adults in the town.
- One member is designing a logo for the group.
- Most recent meeting attracted 16 autistic people to the group – including some new joiners.



Adult Social Care – Learning Disabilities Strategy

- Learning Disability Partnership Board - 45 active participants – providers, people with LD and carers.
- The LD Partnership Board has established a strong link with Empower Slough to promote self-advocacy and improve the accessibility of information resources.
- An agreement with Matrix Advocacy (contracted Advocacy provider) has been reached to provide regular drop-in advocacy sessions at The Curve library for LD service users and their carers.
- Focused on accessing Direct Payments to hire personal assistants, manage care independently, and personalize support
- Will be developing LD Accommodation Strategy for agreement at the Board.
- [Cabinet Report template 2022.23](#) One year update to Cabinet on the LD Strategy November 24.



Adult Social Care – Carers Strategy

Carers Strategy and Carers Steering Group

- Carers Strategy Steering Group co- chaired by an officer and a carer.
- Carers Rights Day and Carers Week Celebration event held over the past year. Support and sponsorship of local businesses.
- Successfully bidding for ARF funding with East Berkshire Councils to improve TEC offer and respite offer.
- Additional funding for carers through the BCF and One Slough Grant Funding Programme (including Asian Carers, Cippenham Carers and Parenting Special Children)
- Establishment of Carers Forum
- Setting up an unpaid male carers group in Slough a gap identified in the carers strategy.

[Carers Strategy Appendix 1 year update on carers strategy.pdf](#)
One year update to Cabinet on Carers Strategy October 2024.

Slough Carers Support invites all unpaid carers from Slough to our

Carers Week celebration

FREE EVENT

Monday 10 June 2024
11am-3pm

Ditton Manor, Ditton Park Rd, SL3 7JB

Relax and recharge at beautiful Ditton Manor with:

- Live entertainment (magician and dance show)
- A delicious buffet
- Laughing Yoga
- Taster massage treatments
- Art therapy
- Taster beauty treatments
- Seated exercise demonstrations
- Employment and financial information for carers
- Stalls: NHS Health Bus, Solutions for Health, Community Connectors
- Free car parking on site.
- And lots more!

Booking is essential - to book your free place call: 07519 751640 or email Ramandeep.gogna@slough.gov.uk



Adult Social Care – Mental Health Strategy

- New MH Commissioning strategy – approved at Cabinet in February 2025. Jointly presented by SBC and BHFT. Agreed at HSCP Board.
- Steering Group being established with strong interest for co-chairing from an expert by experience who is a member of Hope College and the Co-production network.
- Priorities within the strategy co-produced. Consultation via Citizen Space and Co-production network amongst other places.
- Priority 1: Focus on early intervention and prevention
- Priority 2: Improve access to mental health services
- Priority 3: Integrate mental health with physical health and social care
- Priority 4: Provide effective crisis support
- Priority 5: Support vulnerable and diverse populations
- Priority 6: Develop a skilled and compassionate workforce
- Priority 7: Enhance mental health awareness and reducing stigma.

[Microsoft Word - 4a. Appendix 1 - Slough Adults Mental Health Commissioning Strategy 2024-2029](#)



Co-production



- Co-production network established in 2019. Highly active and engaged. A trailblazer for Adult Social Care. Praised in LGA Peer Review from Equalities perspective.
- Wide reach across multiple initiatives including over 2024-2025:
- Co-production of ASC Strategies and Co-chairing of Strategy Steering Groups and Task and Finish Groups.
- Service Design – Integrated Wellbeing Service
- One Slough Bid Assessments for Grant Funding
- Development of Winter Blues Leaflet.
- Quarterly Newsletters
- Senior Leader Recruitment (Director, PSW and DASS Level) Carers Support Officer etc.

Co-production

Slough
Co-production Network Newsletter

Summer
2024



How to contact us

If you want more information about the Co-production Network or want to get involved please:

Email: Belinvolved@slough.gov.uk
Visit: www.slough.gov.uk/co-production

Well done and thank you Marcia!

A very special congratulations to Marcia, one of our committed volunteers for the work she has done to support the Over 50's Forum in Slough. The forum celebrated 25yrs with lunch at the Kingsway United Reformed Church.

The mayor was in attendance along with the Leader of the Council, and other partner organisations and residents, to celebrate and mark the achievements of the forum.



Welcome!

Welcome to our first edition of the quarterly Slough Co-production Network Newsletter which we are launching to mark National Co-production Week 2024. It has been developed with the help of our volunteers and we do hope you will enjoy reading it.

The newsletter aims to:

- Promote the importance and benefits of co-production in Slough.
- Provide regular updates about the work the network has been involved in.
- Be a direct channel from members about their experiences of being part of the network.



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- Co-production celebration event for Co-production Week.
- Recommissioning of advocacy and residential provision.
- Out of hospital task and finish group.
- Supported the Slough Safer Partnership Board in developing training for various agencies across Slough – how people can stay safe from harm and abuse.
- Peer Mentors planning for World Mental Health Day
- Help shaping ASC Fees and Charges consultation.
- For more information check out: [Co-production in Slough – Slough Borough Council](#)

Prevention and Early Intervention

Strong Preventative Offer in Slough

Tiered Preventative Approach as set out in Preventative Services for Adults in Slough.

[Preventative Services for Adults in Slough Feb 2024](#)

Some Key Components are:

- Slough Community and Voluntary Sector (SCVS)
- Technology Enabled Care (TEC)
- Independence and Wellbeing Service
- Disabled Facilities Grant (DFG) and Home Adaptations
- Advocacy
- Hope College
- To name a few....

Technology Enabled Care Offer



- TEC-First Mindset
- Comprehensive Practitioner Training
- Proactive Use of Mainstream & Specialist Technology
- Wraparound Support for Independence
- Falls Prevention & Rapid Response
- Partner Collaboration for Safety and Wellbeing
- Evidence-Based Assessments (Canary Care)
- Safe Discharge & Reablement
- Embedding TEC & Preventative Services in Organisational Culture
- Accessible Resources & Empowerment

Voluntary and Community Sector

- Effective Voluntary and Community Sector. Funding of Advice and Information Service and Slough CVS Infrastructure Service through the Better Care Fund and Public Health at £2.6M over 5 years. Provides key element of ASC preventative approach. Includes:
- Support to and Capacity Building of VCS organisations
- Bringing in match funding to VCS organisations of £2.5M over 24/25
- Volunteering and Volunteer Matching through improved Volunteering Platform
- One Slough Community Fund (increased by £65K over 25/26) with bids assessed by officers with partners and co-production network.
- New and Improved Directory of Services
- Community Connectors.
- Strong and Positive relationships with SCVS. Joint presentation by Officers and Director of SCVS on 1 year update on the new contract to Cabinet January 2025
- High engagement with strategic initiatives, steering groups etc.
- [Report and Appendix One.pdf](#)

SLOUGH CVS,
READING VOLUNTARY ACTION &
INVOLVE BRACKNELL
PRESENT

FUNDING FAIR

FOR CHARITIES & VOLUNTARY GROUPS
DISCOVER NEW FUNDING INSIGHTS AND DEVELOP RELATIONSHIPS WITH NATIONAL AND LOCAL FUNDERS



**THURSDAY
13TH FEBRUARY 2025
9:30AM – 3PM
WINDSOR RACECOURSE
MAIDENHEAD ROAD, WINDSOR, SL4 5EZ**

Case Study 1 – Community Connectors

- **Case study 1 D**

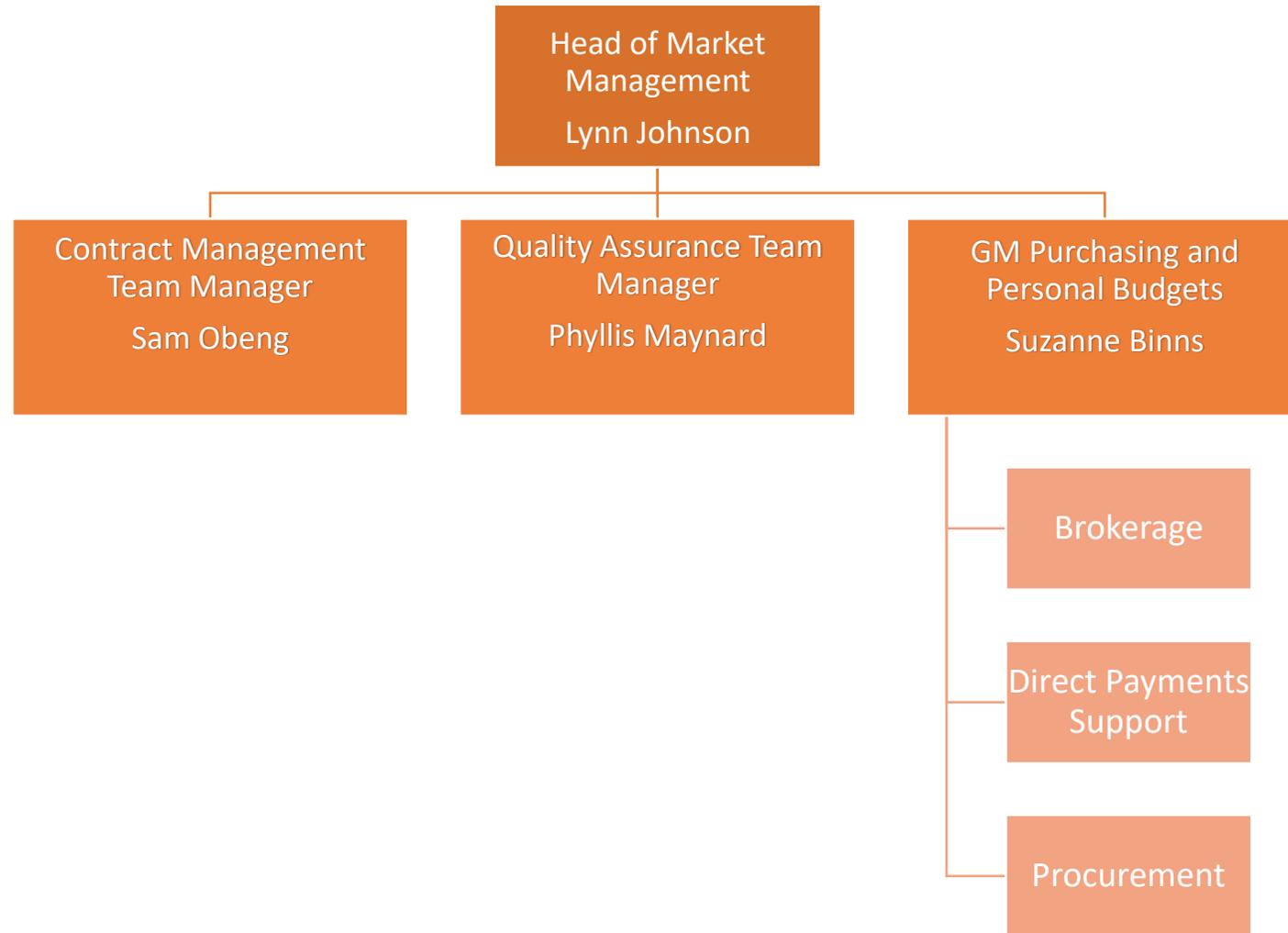
- **Background** :D was referred via ASC. He uses a wheelchair due to an amputated leg. D was not comfortable using technology and doesn't have mobile/ email. He was signposted to a variety of options, by relaying the information over a landline phone.
- **Outcomes** : Found D a transport club in Slough that met his interests. He was signposted to a community group in Slough that runs activities, including archery with wheelchair access. His biggest love is football and following contact with Slough FC, he was given complimentary tickets.
- The biggest outcome was that when D's social worker contacted him, he said because of the community connector intervention he no longer needed to be supported by the ASC team as he could now manage with the support he had found in the community.

Case Study 2 – Community Connectors

- **Case study 2 : C**

- **Background :** C, a 79-year-old female admitted to Wexham Park Hospital due to severe COPD and water retention. C sought support from the Community Connectors as she felt lonely and isolated and wanted to improve her mental wellbeing.
- **Impact/Action Taken:** C was referred a local knitting charity. This helped her to socialise and focus on her interest. She expressed a desire to become a volunteer for the Wellbeing Befriending Telephone Service upon discharge to help others who are isolated and lonely. C aims to stay engaged, meet people, and attend Community Café's Warm Spaces to overcome her loneliness and socialise with others to help improve her health and wellbeing.
- **Customer Feedback/Comments:** *"I want people to know that I've had a wonderful life, and even if it ends in the hospital, I'll do so gracefully. Meeting incredible people on this ward, especially through the Community Connectors Project, has been a highlight. It's a fantastic way to reach out to older folks like me who often have no visitors and no one to share their day with. The Connectors are a lifeline here; it can feel like a prison at times, but they advocate, signpost, and (they) can connect us with local health services and make a real difference."*

Director of Commissioning Market Management Structure



Provider Relations and Market Management

- We have been working strategically, alongside our care and support providers locally, to improve market stability and relationships with our market providers. In our approach to the market, we aim to:
 - Build strong relationships with the whole market to encourage innovation, choice, and availability, enshrined in good information and advice
 - Collaborate with providers and system partners, organisations, and suppliers to ensure our services are shaped and mobilised effectively
 - Signal plans and shape the market for high quality cost effective adult social care services through our Market Position Statement [Market Position Statement 2024-2027 \(slough.gov.uk\)](https://www.slough.gov.uk/market-position-statement-2024-2027)
 - Elevate service quality by working with providers to support and facilitate their improvement
 - Develop better relationships with providers through newsletters, proactive engagement at Care Connected forums [Adult Social Care providers – Slough Borough Council](https://www.slough.gov.uk/adult-social-care-providers) and specific collaboration for future procurements
 - Assess the effectiveness of our current and future workforce, supporting our social care workforce to meet growing demand and greater complexity of need
 - Maintain effective relationships with key partners, service providers and stakeholders to inform our market shaping work, identifying market trends, gaps, and opportunities

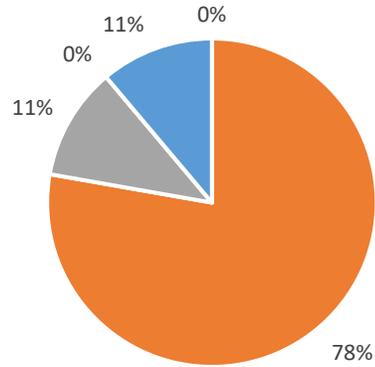
Care Market Quality

Our Revised Provider Quality Assurance Framework launched in January 2024

- Development of new provider quality assurance tools
- Provider Quality Assurance team visits and quality assures care providers across all markets at least annually
- Visits prioritised through the proactive use of the new provider Risk Assessment tool
- Working in a transparent and proactive way with providers to improve quality and to ensure safe and effective care for all residents.
- Working alongside NHS Frimley's ICB Care Quality team (nurses and pharmacists) to deliver specific support for care homes where improvement actions have been identified
- Reporting and oversight of the quality and sustainability of care provision, as a whole market approach is to the Commissioning and Market Management Board and Care Governance Board and to DLT by exception.
- Monthly provider RAG rated cautions list is shared with relevant teams across ASC and with neighbouring local authorities and reviewed monthly

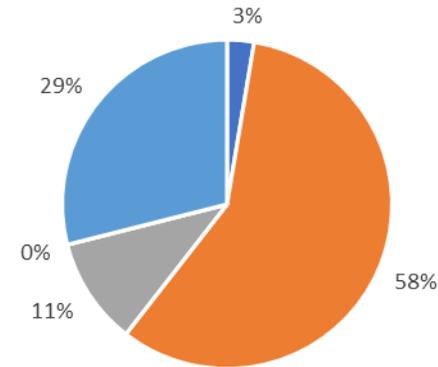
Care Market Quality – CQC Assessments

All Age Residential Care



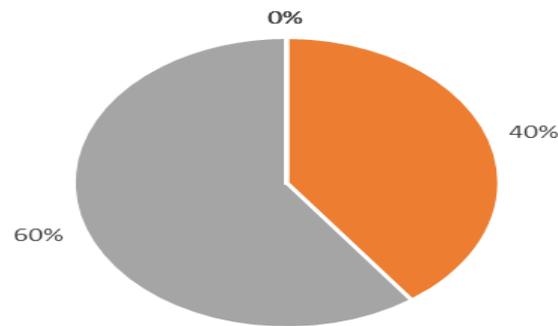
■ Outstanding ■ Good ■ Requires Improvement ■ Inadequate ■ Not yet inspected

Home Care



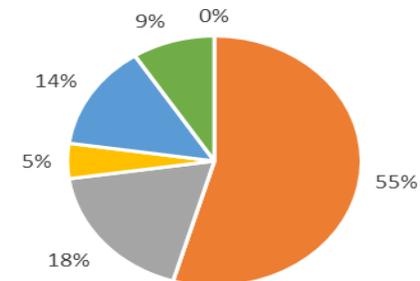
■ Outstanding ■ Good ■ Requires Improvement ■ Inadequate ■ Not yet inspected

All Age Nursing Care



■ Outstanding ■ Good ■ Requires Improvement ■ Inadequate ■ Not yet inspected

Supported Living



■ Outstanding ■ Good ■ Requires Improvement ■ Inadequate ■ Not yet inspected ■ Not Regulated

CQC ratings are updated daily

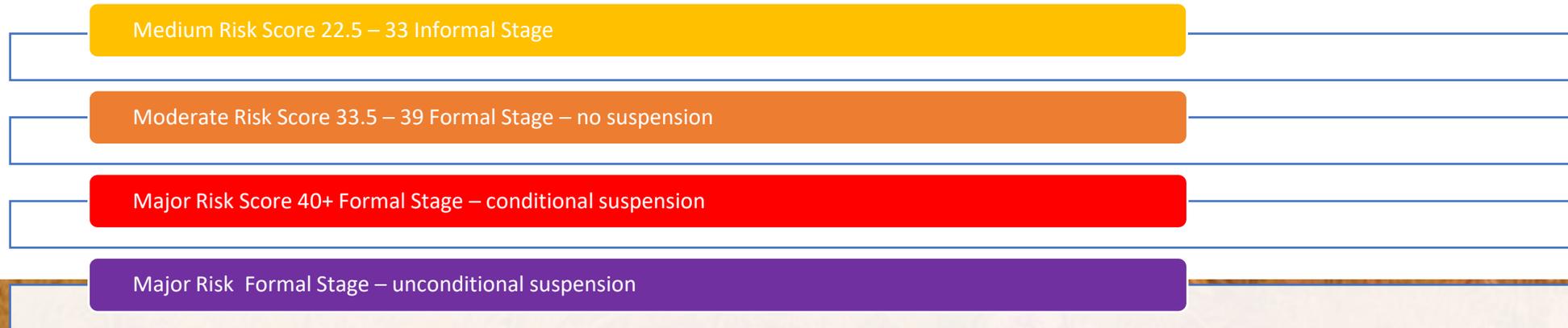
CQC ratings are correct as at 20 February 2025

Care Market Quality SBC Risk Rating

Care Provider Risk scores are informed by CQC ratings and other factors:

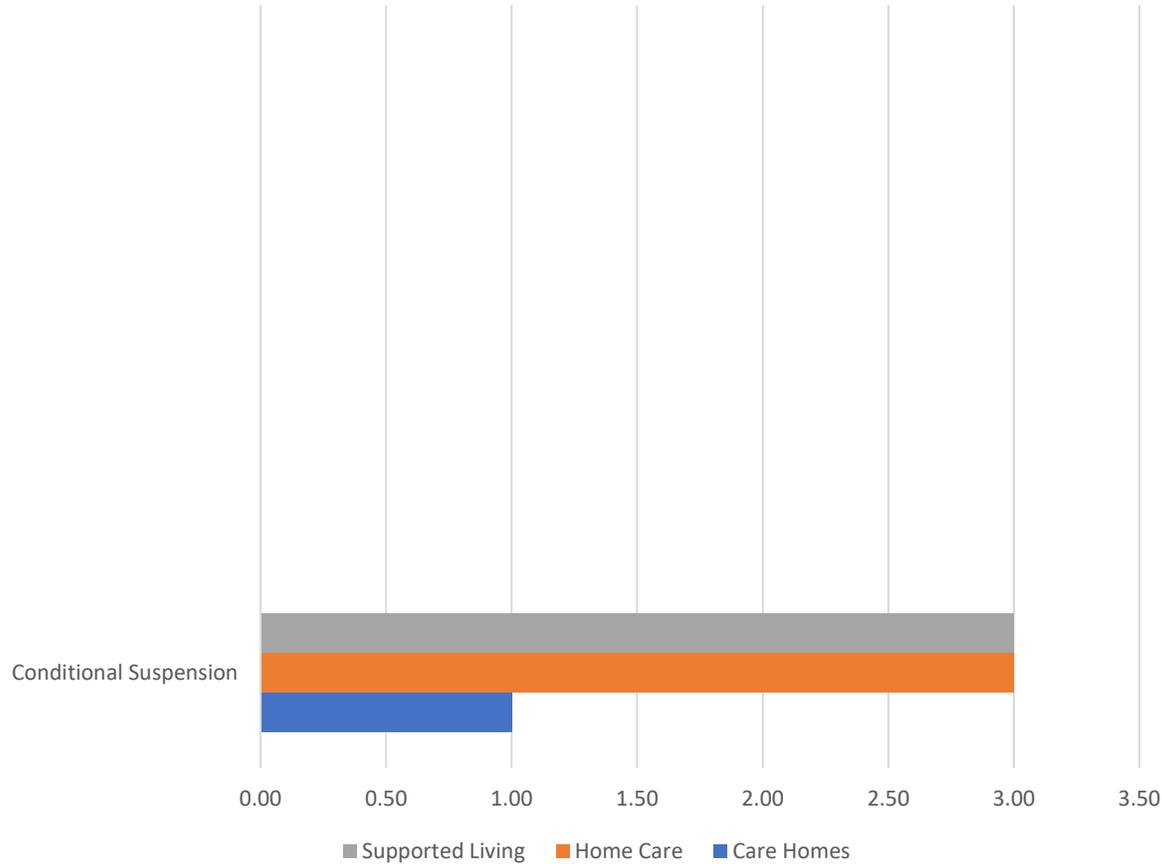
- Safeguarding
- Complaints
- Complexity of care and support provided
- Financial Health

Following a visit the risk assessment is revised and action taken in line with the QAF including escalation through to conditional suspension and Provider Concerns framework



Current Care Providers Suspended

Suspensions by Care Category



Quality Assurance Visits can include:

- Safe and Well Checks (unannounced)
- Focussed Visits (specific areas reviewed)
- Planned - Full Review (up to 2 days)
- Reactive – significant event impacts on risk scoring and re prioritise planned schedule
- Toolkits look across a range of domains including care plans and risk assessment, hydration and nutrition, medication management and environment
- Action Plans monitored through follow up visits for providers of concern can be every 2 – 4 weeks

Case Study – Supporting Quality Improvement – Residential Care

20 bed residential care home – most residents living with dementia

Following the sudden departure of the Registered Manager a follow up QA visit evidenced that the wider management team and owner were unaware of the QA Action plan that was in place.

Issues identified in the Action Plan included:

- Training non-compliance
- Incomplete Care Plans
- Poor Infection Control
- Medication Management issues
- Environmental works and redecoration which were not being prioritised and managed effectively.
- Lack of Governance – leadership, audits, systems and processes
- Limited Activities and no plans for residents to options to engage in community activities

Professionals meeting held and risk reassessed

Care Governance Board agreed to a temporary suspension (conditional) of new referrals.

Case Study – Supporting Quality Improvement – Residential Care

A new manager who had previously worked at the service was made responsible for delivering the action plan.

Ongoing communication with the QA Officer and biweekly updates were received from the provider to demonstrate which actions had been implemented.

QA team supported the care provider with a complaint which was resolved

The complaint also led to a positive outcome for one resident who received support with their mental health.

ICB's Medicines Optimisation and IPC Teams were commissioned to support the home
Review of medication and IPC audit completed with only a few actions required

Case Study – Supporting Quality Improvement – Residential Care

- The provider worked diligently and in full cooperation with the QA team and other professionals
- Follow up QA visits validated that all actions were completed and to time
- Improved outcomes for residents including the recruitment of an activity coordinator.
- Positive feedback from families
- Care Governance Board lifted the suspension
- Appreciation from the provider of the support offered by the QA Team and ICB professionals.

Market Sustainability

- We have a good understanding of the challenges faced locally through regular engagement with the provider market:
 - quality assurance visits
 - contract management meetings
 - Care Connected Provider Forums
- We have invested in the provider market to support them to develop and maintain a good quality workforce, with many local providers paying above NLW and benchmarking their rates with LLW
- Our approach to fee uplifts, rates and surveys undertaken with providers assures us that staff receive sick pay, holiday pay and that travel is paid in addition to the staff salary.
- Our Market Position Statement clearly signals current and future market opportunities.
- We have robust business continuity plans in place both within ASC and with commissioned providers, to ensure the uninterrupted delivery of care and support services in the event of potential service disruptions or provider failure.
- No contracts handed back for homecare, supported living, residential or nursing homes within the last 12 months.

Areas We Are Improving - Director of Commissioning

- Review of Out of Hospital Pathways and redesign of services supporting hospital discharge pathways
 - Home First
 - Reablement
 - Long Term Home Care
 - Intermediate Care and interim beds
- Developing accommodation strategies for Older People, Learning Disabilities, Autism and Mental Health
- Developing a Daytime Activities offer
- Extending our Direct Payment offer to include Individual Service Funds (ISFs)
- Automating and streamlining brokerage placement processes through investment in E Brokerage
- Roll out of Care-Cubed to support cost analysis of all new placements and reviews
- Developing market and workforce sufficiency, for complex dementia support in residential and nursing settings
- Improving interaction between Operational, Contracts Management and Quality Assurance teams to proactively inform market intelligence before provider concerns arise
- Establishment of monthly quality led Improvement cafes, to support the local market with thematic learning and development
- Clinical Pharmacist support to be extended to home care and supported living services (funded through BCF)