

Action Plan for Annual Governance Statement 2024/25

Action	Link to external auditor recommendation	Link to MHCLG Direction	Quarter 2 2025 – Update on progress
Financial governance – Lead Officer - Executive Director Corporate Resources (Chief Finance Officer)			
Demonstrable and collective compliance with CIPFA's Financial Management Code.	None specifically	Improvement and recovery plan to include: c) A review of the Authority against the CIPFA Financial Management Code to demonstrate its compliance, with recommendations to Commissioners to improve this activity within the first six months and implementation of improvements thereafter.	<p>A self-assessment of the CIPFA FM code was completed in May 2025 and a report presented to Audit and Corporate Governance Committee in July 2025 providing a baseline to measure compliance and progress against an action plan. Progress continues to be monitored quarterly with the leadership team and at the internal finance board.</p> <p>Internal audit has conducted an audit - Compliance with the CIPFA FM Code during Q2 and is in the process of preparing their report.</p> <p>The Council acknowledges there is still more work to be done on key areas, including budget setting and management of general fund and ring-fenced budgets.</p> <p>The Council has appointed an experienced interim s.151 officer and two new permanent directors of finance have commenced in role.</p>
Workforce plan to respond to recruitment gaps within finance directorate and ensure specialist capability within directorate.	None specifically	Improvement and recovery plan to include: d) A high-performance culture programme to rebuild trust between staff and the Authority, to include the development of a comprehensive workforce strategy focused on	<p>The Council has appointed an experienced interim s.151 officer and two new permanent directors of finance have commenced in role. We continue to recruit to other key roles in finance and are running active recruitment campaigns.</p> <p>Whilst key roles are being recruited to, interims are providing the capability within the Directorate to maintain</p>

		development, retention, and permanent recruitment.	operational activities including preparing the Statement of Accounts for 2024/25.
<p>Review of systems within Council for recording financial transactions, picking up from Grant Thornton's findings from previous audits and work of Ernst Young in reviewing balance sheet.</p>	<p>May 2021 statutory recommendation (SR3) The Council should develop a comprehensive project plan for the preparation of the accounts which ensures that:</p> <ul style="list-style-type: none"> • The entries are supported by good quality working papers which are available at the start of the audit • The financial statements and working papers have been subject to robust quality assurance prior to approval by the S151 officer, there is clear ownership and accountability for tasks across service areas to support the timely production of the financial statements. 	<p>Improvement and recovery plan to include:</p> <p>c) A review of the Authority against the CIPFA Financial Management Code to demonstrate its compliance, with recommendations to Commissioners to improve this activity within the first six months and implementation of improvements thereafter.</p>	<p>Work being undertaken to improve functionality and use of finance system. This has included migration to cloud based environment which is now being built to fully replicate the functionality of the virtual desktop environment. This project is also reviewing roles and responsibilities in response to the Grant Thornton systems report.</p> <p>The finance system has improved the internal control environment for budget holders including production of system generated reports providing monthly budget and forecasting data, a HR and salary forecast tool and procurement compliance reporting.</p> <p>The approval workflows for creating Purchase Orders has been strengthened. A recent internal audit advisory report has been issued on Procurement and Payments resulting in five recommendations which are contained within the finance improvement programme.</p> <p>There is also ongoing work on Council systems in directorates to ensure that accurate data is collected and retained to support invoicing. This includes work in the housing and education directorates. Quarterly reports have been presented to Cabinet on improvements in special educational needs, which include references to systems. A homelessness and temporary accommodation improvement plan was presented to Cabinet in October on work required in this directorate.</p> <p>There is still considerable work to be undertaken to improve systems and culture to ensure accurate record keeping. In</p>

			<p>addition to the work of Ernst & Young, the Council has also commissioned Mazars and PWC to undertake key activities to assist with discovery work and identify risks and issues that need to be addressed.</p> <p>A draft report has been received from Ernst & Young on a further review of the balance sheet for consideration by the leadership team.</p>
<p>Ensure financial management and governance are included in onboarding and manager development programmes, as well as being a feature in appraisals.</p>	<p>None</p>	<p>None</p>	<p>Finance is included in the corporate induction. The leadership and management programme has been rolled out.</p> <p>The Council needs to continue working on its culture programmes to ensure that service officers understand and comply with financial systems and policies. Recent evidence of purchase order compliance and expenditure control panel submissions indicate that officers do not always follow council processes in a timely manner and the evidence submitted to justify approval is not of the standard to be expected.</p>
<p>Ensure comprehensive accounts closing process, including review of reconciliation arrangements, to enable statements of accounts to be closed and audited within statutory timescales.</p>	<p>May 2021 statutory recommendation (SR3) The Council should develop a comprehensive project plan for the preparation of the accounts which ensures that:</p> <ul style="list-style-type: none"> The entries are supported by good quality working papers which are available at the start of the audit 	<p>None</p>	<p>Whilst a comprehensive project plan for the preparation of accounts was put in place for both the 2023/24 and 2024/25 accounts, the identification of significant issues relating to 2023/24 has meant a significant delay with regard to their publication highlights that despite the progress made, there is still much to improve upon. The absence of audited accounts for a number of years has posed significant financial risks, as highlighted by the issues identified as part of preparation of the 2023/24 statements.</p> <p>The Council recognises that it requires robust financial controls and assurance mechanisms across the</p>

	<ul style="list-style-type: none"> The financial statements and working papers have been subject to robust quality assurance prior to approval by the S151 officer, there is clear ownership and accountability for tasks across service areas to support the timely production of the financial statements. 		<p>organisation to provide assurance of the integrity of the financial statements, and the Council's financial standing. External audit of the 2024/25 accounts will provide independent review of the progress made, but it is acknowledged significant further improvements are required to ensure adequacy of accounting records and clear audit trails for accounting entries, as well as continued review of balance sheet items. Those improvement actions form part of the Council's ongoing Finance Improvement Plan. The detailed project plan for the 2025/26 accounts will be completed prior to the end of the financial year and will include appropriate resources to enable quality assurance reviews by senior management. (February 2026)</p>
<p>Review process for budget setting and medium-term financial strategy to increase opportunities for resident engagement and scrutiny involvement in reviewing financial savings and priorities in accordance with CfGS guidance on financial scrutiny.</p>	<p>May 2021 Key recommendation (KR1) Officers and members should continue to work together to deliver financial sustainability in the medium-term.</p>	<p>Improvement and recovery plan to include: b) A refreshed rolling Medium-Term Financial Strategy, Capital Strategy, and Treasury Management Strategy, aligned with the new TOM and transformation plan and demonstrating the Authority's financial sustainability and resilience, over the period of the strategies. i) Improving resident and public engagement.</p>	<p>The Council submitted a 2026/27 MTFS update to Cabinet on 21 July 2025. The Council presented a Q1 budget monitor report to Cabinet in September 2025. This highlighted a significant forecast in-year gap of £20m with identified mitigations of £7m. The Council's worsening budget position has resulted in a commissioner instruction on budget management and the re-introduction of strict expenditure control processes.</p> <p>Scrutiny has again set up a task and finish group focused on reviewing the budget, however there is less clarity on the extent to which this will focus on key areas of spending or on a line by line review of proposals.</p> <p>There are examples of individual proposals which have been reported and approved in a way that increases</p>

		<p>2. To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough, focussing in the first six months on a review of the action plan for the scrutiny function ... to accelerate any improvements required in these areas.</p>	<p>opportunities for public engagement and scrutiny activity. For instance Cabinet approved a council tax support scheme proposal for the purposes of consultation in October 2025. Cabinet are also due to receive an update on homelessness and temporary accommodation, setting out the pressures arising in this area and linking this to national level pressures. This provides an opportunity for scrutiny to consider what work it could conduct to assist with financial management of this service.</p> <p>The Council has reviewed the terms of reference of its internal Design Authority, so this panel is focused on reviewing organisational change proposals against a set of design principles. The Council has also approved a resident engagement framework, setting out expectations on how and when it will engage with residents on service delivery.</p> <p>Despite this, the severity of the situation means that focus is on reducing areas of overspend, delivering approved savings, boosting income collection and delaying expenditure where possible to achieve a balanced budget. This provides limited capacity to consider opportunities to engage both scrutiny and the public in a wider conversation about the medium-term financial plan.</p>
<p>Review of debt collection processes to ensure debt is collected effectively and write off policies and</p>	<p>September 2025 – Key recommendation (KR10) The Council needs to improve its data quality and foster a positive culture and capacity around data quality to support robust service</p>	<p>Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.</p>	<p>The Council has set up a cross-council debt board. However the effectiveness of this is in its infancy, having only met twice since June 2025.</p> <p>Cabinet has received a write off report on corporate property arrears and has previously received reports on council tax and NNDR arrears, but does not yet appear to</p>

<p>procedures are appropriate</p>	<p>planning and reporting, based on high-quality data, including benchmarking.</p>		<p>be in a regular pattern of reviewing its historic debts and identifying those to be written off.</p> <p>Significant areas of debt are current TA tenancy arrears and former tenancy arrears for TA. Whilst there are outstanding debts for secure tenancies, these appear to be at a much lower level. ASC debt and housing benefit overpayments are other key areas of arrears, alongside council tax and NNDR arrears. Officers are considering use of other enforcement methods such as charging orders in addition to bailiff activity.</p> <p>For sundry debt, finance system reports are now sent out monthly to budget holders with further development planned during 2025/26 to incorporate these into the monthly budget monitoring report.</p>
<p>Review of reserves position and treasury management arrangements to reduce risk of urgent debt refinancing to preserve liquidity</p>	<p>May 2021 Statutory recommendation (SR1) Urgent action to address low levels of unearmarked and earmarked reserves, develop MTFS, clear proposals to develop savings requirements and ownership, monitoring and reporting process.</p>	<p>b) A refreshed rolling Medium-Term Financial Strategy, Capital Strategy, and Treasury Management Strategy, aligned with the new TOM and transformation plan and demonstrating the Authority's financial sustainability and resilience, over the period of the strategies.</p>	<p>The 2023/24 statement of accounts are due to be published for public inspection imminently. In response to the general fund financial position, the Council is seeking additional Exceptional Financial Support (EFS), through increased Capitalisation Direction (CD) of £14.75m. This additional EFS will enable £1m to be added to reserves meaning a general fund balance of £22.465m.</p> <p>The 2024/25 draft accounts are being finalised in the next few weeks, it is expected that the £1m budget reserve contribution will be added to the general fund balance making the figure held in reserves at the end of 2024/25 of £23.465m.</p> <p>The approved 2025/26 budget and MTFS identified an additional year on year contribution of £1.0m to the General Reserve,</p>

			<p>however the in year financial position means this is extremely unlikely to be possible.</p> <p>The Council acknowledges there is still significantly more work to be done, particularly in the context of significant General Fund and DSG forecast overspends reported in the first quarter 2025/26 but remain committed to deliver on working towards a balanced MTFS by February 2026 including a clear reserves strategy that supports long term financial sustainability. It is recognised that can only be achieved by significantly reducing net GF spend further. It is also recognised that further work must be done to ensure savings are owned by senior officers and lead members.</p>
<p>Political leadership and democratic governance – Lead Officer Sukdave Ghuman – Director of Law and Governance (Monitoring Officer)</p>			
<p>Evidenced improvement in report clearance processes, with Executive Directors and DLTs taking responsibility for early engagement with legal and finance to improve quality and timeliness of reports and improve forward planning.</p>	<p>September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking.</p>	<p>g) Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.</p>	<p>Quarterly report to Full Council on urgent decisions now includes reporting on Cabinet reports not being published within statutory deadlines. This may be extended to cover all key committees and is a positive step to increase transparency of the issue.</p> <p>The commissioners agreed to step back from reviewing all reports, placing more responsibility on the Council’s QA process, however the review of reports to Cabinet in October has shown that commissioners are having to undertake significant work and seek clarification before being prepared to sign-off reports.</p> <p>Officer training on report writing is included in the officer governance training programme. However, without understanding the barriers to production of high-quality reports this is likely to be insufficient on its own. CLT</p>

			reviews the corporate schedule on a weekly basis, however insufficient time is spent on identifying key strategic proposals that require more discussion at CLT prior to inclusion on a forward plan. Effective discussions at an earlier stage should make reports easier to draft and more focused.
Effective use of Lead Member and Directors' meetings and other internal non-decision-making boards to focus on strategic planning and transformational change.	May 2021 Key recommendation (KR1) Officers and members should continue to work together to deliver financial sustainability in the medium-term.	Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.	<p>There has been an improvement in use of LM&Ds meeting, with the chief executive continuing to provide corporate updates and with focused discussions on key risk services. There has been an increase in internal boards, covering areas such as risk and a new design authority. These have more recently been reviewed to ensure they are not duplicating work carried out elsewhere and there is a key purpose.</p> <p>The new arrangements for managing transformation activity need to be tested to ensure that meetings are focused and delivering value, bearing in mind the cost of senior officer attendance.</p>
Implement a refreshed member development programme reflecting the changes in political groups and committee membership	May 2021 Key recommendation (KR1) Officers and members should continue to work together to deliver financial sustainability in the medium-term.	To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough, focussing in the first six months on an effective internal audit function, with organisational independence, objectivity,	<p>A refreshed member development programme has been launched and sessions have started in 2025/26. An update was provided to members in the Standards Committee in October 2025.</p> <p>There are detailed training programmes for key committees such as Audit and Corporate Governance Committee and it is positive to see the external auditor reference a more effective committee taking responsibility for oversight of governance arrangements. Debates at Full Council have been more akin to that seen in well-functioning authorities, indicating a better understanding of rules and procedures for such meetings.</p>

		<p>separate administrative reporting and a strong functional reporting relationship to the Audit and Corporate Governance Committee, and a review of the action plan for the scrutiny function and Audit and Corporate Governance Committee to accelerate any improvements required in these areas.</p>	<p>The lack of overall political control by one party and relatively frequent changes in cabinet portfolios and chairing arrangements does present challenges in provision of support to members, however in recent sessions on governance and member officers relations, members have been engaged.</p>
<p>Implement a refreshed officer governance programme, taking account of staff turnover and the need to embed a system of good governance</p>	<p>May 2021 Key recommendation (KR1) Officers and members should continue to work together to deliver financial sustainability in the medium-term.</p>	<p>Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.</p>	<p>A refreshed officer governance programme has been devised and governance officers are attending DLTs to discuss further support that may be needed.</p> <p>The turnover in interim support for democratic services manager has hindered progress.</p> <p>In general officers do take advice and follow governance processes and this is reflected in the external auditor lifting the recommendation around key decision making. However, there is still a lack of early engagement and cross council ownership of key proposals, risks and issues.</p>
<p>Ensure the Standards Committee meetings are convened through the municipal year and reporting on</p>	<p>None</p>	<p>None</p>	<p>The Standards Committee met in October 2025, receiving 3 reports on Code of Conduct complaints, proposals for new standards regime and member development programme. There was good debate on member complaints, including noting the delay in progressing such complaints and whether changes to processes and procedures would make any difference to this.</p>

<p>member complaints, survey results, member development and ethical framework reporting is presented.</p>			<p>There was no update on member survey or plans for whether such a survey will be run in the future and no general update on the ethical framework. The annual reports are due to be presented to the next committee in March 2026.</p>
<p>Review the effectiveness of the Corporate Improvement Scrutiny Committee and publicly report on such a review.</p>	<p>None</p>	<p>To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough, focussing in the first six months on a review of the action plan for the scrutiny function to accelerate any improvements required in these areas.</p>	<p>CISC set a work programme in June 2025. It had meetings in July and September. These meetings indicate that members are receiving update reports and asking questions on these. However, this activity is not leading to recommendations to Cabinet, instead actions are focused on bringing forward further update items and inviting representatives to future meetings, without clarity on the purpose of such activity.</p> <p>A new permanent Head of Service has commenced in role and will fulfil the role of statutory scrutiny officer.</p> <p>Some members are indicating a need for additional scrutiny committees, but without clarifying the benefit this will bring. Members and officers should review the CfGS from 2022. For instance this report highlighted that scrutiny appeared to operate separately from the core priorities and decision-making of the council or activities of Cabinet and was not sufficiently focused on scrutinising the Council's critical path of recovery and stability. It noted that some members were not reading reports in advance and did not engage outside of formal meetings. It also noted that if Cabinet members and senior officers are asked to attend, there is clarity over what is expected and that Cabinet members should present to scrutiny with officers in attendance to provide technical support.</p>

			<p>The lead commissioner addressed Full Council in September 2025 and noted a concern that scrutiny improvement had stalled or gone backwards, which was an area of concern.</p> <p>There is no current plan in place to conduct an external review, although this may be a focus of the new head of service.</p>
<p>Conduct a review or audit of significant officer decision-making to ensure that decisions are made in accordance with written schemes of delegation and significant officer decision reports are submitted to democratic services and published.</p>	None	<p>A review of the Authority's progress to risk maturity and how well its functions and processes enable risk-aware decisions that support the achievement of strategic objectives. Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.</p>	<p>Included on Internal Audit Plan for 2025/26. This audit will identify whether current systems are being complied with, however it may lead to a need for additional recommendations if it highlights a lack of compliance.</p>
<p>Ensure a system is in place for approval of policies in the Policy Framework and for other statutory plans, policies and strategies</p>	None	<p>Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.</p>	<p>There remains no formal system in place to review the policy framework, although key plans that form part of this are being reported to Full Council for approval.</p> <p>There are several key statutory policies and strategies that appear to be out of date and no system in place to report on this and plans to address any gaps. For instance a report to Scrutiny in October highlighted gaps in housing strategies, but no clear timetable for when updated strategies will be prepared and approved.</p>

Transformation and organisational design governance – Lead officer Will Tuckley – Chief Executive (Head of Paid Service)			
<p>Ensure effective member oversight of the Council’s transformation programme at formal, constituted and public member meetings, including:</p> <ul style="list-style-type: none"> • Effective monitoring and oversight of any externally commissioned resource • Monitoring and management of financial budgets 	<p>October 2024 key recommendation (KR3) The Council must devise a transformation programme which is supported by adequate and defined funding which has the ultimate goal of the Council exiting intervention and securing its best value duty. The programme must include how the Council is addressing the recommendations raised from previous reviews or these must be tracked centrally to ensure resolution.</p>	<p>Prepare, agree and implement an Improvement and Recovery Plan to the satisfaction of the Commissioners, with resource allocated accordingly. This may include or draw upon improvement or action plans prepared before the date of these Directions. The plan is to set out measures to be undertaken, together with milestones and delivery targets against which to measure performance, in order to deliver rapid and sustainable improvements in governance, finance and commercial functions, thereby securing compliance with the best value duty. There must be a focus on deliverable milestones within six months and the Plan should include at a minimum:</p> <p>a) A new Target Operating Model (TOM) that enables both financial stability and</p>	<p>The Council reported on its Improvement and Recovery Action Plan to Cabinet and Full Council in September 2025. The Council has replaced officers in the team supporting delivery of this and wider transformation plan, has commissioned a strategic partner to carry out a time-limited review of current plans and has identified key workstreams. However the scale of the plan and the emerging financial issues has resulted in a delay in presenting the target operating model proposal to Cabinet from October to November. There remains work to continue to ensure that Cabinet members and CLT are aligned on the areas of focus.</p> <p>Investment in transformation activities is likely to exceed that currently set aside and the Council will need to have a strict prioritisation approach to its areas of focus.</p>

		the delivery of core services and priorities.	
Embed a culture of continuous improvement	September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking.	To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough.	<p>The best value guidance highlights characteristics of a well-functioning authority in relation to continuous improvement. This includes an organisational wide approach driven by an established transformation programme, performance indicators, an effective scrutiny function, being open to external challenge, including via corporate and finance peer reviews, a willingness to work with external auditor and ombudsman, professional development at all levels, a meaningful AGS, innovation within a mature risk management framework, effective resident engagement and a sense of collective responsibility for sector performance.</p> <p>There is good evidence that the Council has become more outwardly focused and is more welcoming of external challenge. It can demonstrate that it is listening and learning via public reporting on complaints, an effective AGS, formal updates on service delivery in areas where significant improvement is required and cooperation with regulators and inspectorates.</p>
Ensure there is an effective and consistent system of service planning in directorates, informed by a programme of external review and challenge	September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking.	To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough.	<p>Whilst the Council introduced a standardised process for service planning, there is a lack of evidence to demonstrate how this is linked to savings and growth proposals and organisational change. There is limited evidence of a programme of external review and challenge outside of formal inspections, however there is clear evidence that some directorates are open and commissioning external challenge.</p> <p>For instance the housing directorate are working with MHCLG on pressures in temporary accommodation and</p>

			have commissioned Mazars to support with audit work. The Council commissioned Mutual Ventures to undertake a high level review of SCF and children’s social care performance. The LGA conducted a peer review of equalities work. It would benefit the Council to see this activity as part of a wider programme clearly linked to service and transformation plans.
Training and development programme to support with business case development	September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking.	g) Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.	The risks and issues arising from in-year pressures in the 2025/26 budget raise concerns about the quality of business cases to inform decisions. The Council needs a culture whereby officers see business case development as a key part of decision-making, helpful to test options and identify a preferred approach, instead of seeing this as a governance step that is required to progress through a gateway.
Property assets governance – Lead officers Pat Hayes – Executive Director RHE, Peter Hopkins – Director of Property			
Review of asset disposal programme to ensure it is based on robust, appropriate and reasonable assumptions and publicly report on the review to Cabinet Committee	October 2024 – key recommendation (KR2) The Council must review the basis of the Asset Disposal Programme to ensure that it is based on robust, appropriate and reasonable assumptions. This review must include collaborative working between the finance function and the asset disposal/property expertise to ensure that financial implications are considered	Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.	An update report were taken to Cabinet Committee in September 2025 on disposals. This provided information on capital receipts to date and planned performance to the end of FY 2026/27. The report flagged issues with impairment, whereby the up to date valuation is below that carrying value in the Council’s accounts and situations where an asset is surplus, but is bringing in a significant revenue contribution outweighing the financial benefit of sale. The report notes that the broader property market remains in a challenging position across asset classes including office and retail, but that development land, residential and industrial assets remain stable. The report makes clear the approach to capital receipts for HRA land under a “no detriment” principle. The financial implications,

	in the final programme. The Council should ensure transparency in its reporting around the impact of underperformance in asset disposals, budget delivery and savings targets on its day to day liquidity position.		particular in relation to treasury management, are set out alongside the legal duties in relation to both best consideration reasonably obtainable on disposal and a need to meet the Council's best value duty. If quarterly reporting continued on the basis of the September report and there are clear recommendations to members on assets to be declared surplus and those to be sold, where reserved to members, this action can be marked completed.
Complete and publicly report on an asset stock review to provide assurance that assets are held at the correct value and accurately accounted for.	September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking	Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking.	The report to September Cabinet Committee did highlight some issues with valuations being less than that recorded in accounts. This highlights the need to ensure that stock condition is reviewed regularly, impairment issues are correctly recorded and valuations are of a satisfactory standard.
Approve a strategic asset strategy for use of the Council's operational assets, ensuring this is aligned with the Council's new operating model and MTFS.	September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking	a) A new Target Operating Model (TOM) that enables both financial stability and the delivery of core services and priorities. b) A refreshed rolling Medium-Term Financial Strategy, Capital Strategy, and Treasury Management Strategy, aligned with the new TOM and transformation plan and	This is aligned to the Council's target operating model and transformation plans. A review by the Council's strategic partner indicated an opportunity to reduce the Council's physical assets by a change in working practices. Cabinet made a decision in December 2024 to approve high level principles to establish an Asset Management Strategy and introduce a Corporate Landlord Model. Cabinet also agreed that Observatory House, The Curve and Britwell Centre would be retained for the foreseeable future with consideration being to making these key public facing access points. However there has been limited progress on agreeing future investment in these assets as this is aligned

		<p>demonstrating the Authority's financial sustainability and resilience, over the period of the strategies.</p>	<p>to the Council's operating model and wider transformation plans.</p>
<p>Company governance – Lead officer SCF Sarah Wilson Assistant Director Legal and Governance, other companies - Executive Director Corporate Resources (chief finance officer) and Pat Hayes Executive Director RHE</p>			
<p>Publicly report on effective management of Slough Children First, evidencing quality of service and value for money</p>	<p>May 2024 – key recommendation (KR5) The Council should ensure it effectively manages Slough Children First Ltd (SCF), the wholly owned company which from April 2021 delivers its children's social care services, so that the Council is able to demonstrate that the services provide both quality and value for money services to families and children in Slough.</p> <p>October 2024 – key recommendation (KR13) The Council should make all the necessary steps to continue to work with the Department for Education to improve performance in children's services and SEND.</p>	<p>a) A new Target Operating Model (TOM) that enables both financial stability and the delivery of core services and priorities.</p> <p>To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough</p>	<p>Report on Annual Report and external review by Mutual Ventures reported to Cabinet in September 2025 and annual governance update to Audit and Corporate Governance Committee in the same month. The external review explicitly covers value for money, business improvement planning, financial sustainability and governance.</p> <p>The Council has approved its Youth Justice Plan and SCF have reported on its action plan for youth justice to Cabinet and Scrutiny.</p> <p>The Council accepts that children social care services have remained under statutory intervention for over a decade. However there are positive signs of improvement, reflected in the DfE's decision to appoint an improvement advisor as opposed to a commissioner from summer 2025.</p>

<p>For each Council company, review and report to Cabinet Committee on:</p> <ul style="list-style-type: none"> • contractual and governance documentation • decision-making, • risk and performance reporting arrangements, including financial performance, statutory compliance, including filings of annual reports and accounts and board director performance, • annual business plans 	<p>May 2021 Statutory recommendation (SR4) The Council should review and implement effective financial governance and monitoring arrangements for group relationships to mitigate exposure to additional financial risk. As a commercial entity subject to separate legal, tax and accounting considerations, there should be clear separation financial transactions of Slough Council and James Elliman Homes, in a separate financial ledger, with clear and distinct financial controls and monitoring in place for both the Council and the company. The Council should review its overall approach to using council officers on the boards of its group companies and other similar organisations. This should be informed by a full understanding of the role of and legal requirements for company board members.</p>	<p>Re-examining the review by the Authority of their companies that considered the roles and case for continuing with each subsidiary company of the Authority (except Slough Children First), to make proposals in relation to financial viability and improving company governance.</p>	<p>The Council approved a new Part 5.9 Company / Connected Entities' Protocol in May 2025 setting out the expected reporting cycle for Council companies.</p> <p>For JEH, accounts have now been filed. Whilst an interim business plan has been approved, a planned options appraisal for JEH aligned to wider housing strategy has not been presented to October cabinet as anticipated.</p> <p>For GRE5 there is an approved business plan and this is due to be refreshed in December 2025. Two new directors have been recruited with expertise in managing a residential property holding company. Leaseholders have set up a management company and therefore focus is on ensuring warranties and liabilities are correctly novated, records are transferred, ground rent is collected and an exit strategy formulated to allow the Council to consider disposal of the company.</p>
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When allocating roles on Council-owned organisations to individual officers, the Council should ensure that the scope for conflicts of interest is minimised, with a clear divide between those in such roles and those responsible for holding them to account or overseeing them.

The Council should ensure it is actively and routinely monitoring the financial performance of its group entities to consider and protect any unintended financial exposure on the Council's financial position.

May 2024 – key recommendation (KR6)
The Council should ensure it effectively manages all its subsidiaries and winds up those subsidiaries which are not delivering value to the Council.

Internal controls - Lead Officer – Ian Kirby – Interim Head of Internal Audit (functioning of IA service), Will Tuckley – Chief Executive / Executive Director Corporate Resources (management response and engagement)

<p>Internal Audit:</p> <ul style="list-style-type: none"> • stabilise internal audit team, • ensure annual audit plan informed by risk, • ensure effective escalation procedures including reporting on key risks at member level, • Commission independent external quality assurance review in accordance with requirements of GIAS to evaluate effectiveness of internal audit function. 	<p>September 2025 – key recommendation (KR8) The Council should ensure it has a fully-resourced Internal Audit function, capable of proving essential assurance challenge to the Council and of delivering a full and robust annual internal audit programme each year.</p>	<p>To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough, focussing in the first six months on an effective internal audit function, with organisational independence, objectivity, separate administrative reporting and a strong functional reporting relationship to the Audit and Corporate Governance Committee.</p>	<p>The Internal Audit team is headed by an experienced Interim Head of Internal Audit, commissioned from CIPFA. This resulted from major disruption in 2024/25 resulting in a no assurance opinion from internal audit.</p> <p>The team is making good progress on delivery of the 2025/26 plan and there is now a cycle of robust reporting to CLT and Audit and Corporate Governance Committee. 2025/26 audits completed at the mid-year was already in excess of that achieved for the whole of 2024/25. This will provide more comprehensive assurance coverage with which to inform the Head of Internal Audit’s opinion for 2025/26.</p> <p>There is a proposal to recruit permanently to the team and to commission an external review, but progress has yet to be reported on this.</p>
<p>A review of the Council’s risk management strategy, risk maturity and how this links to decision-making to achieve strategic objectives, such review to the</p>	<p>None</p>	<p>Improvement and recover plan to include: e) A review of the Authority’s progress to risk maturity and how well its functions and processes enable risk-aware decisions that support the achievement of strategic objectives.</p>	<p>The Council has improved its risk reporting both to CLT and to Audit and Corporate Governance Committee, however it does not have a refreshed risk management strategy or reported review on risk maturity. There is better evidence that risks are being monitoring by directorate and at a corporate level, although still examples of a lack of alignment between the corporate centre and directorates on the level of risk and how it is being managed.</p>

<p>presented to the Audit and Corporate Governance Committee</p>			
<p>Senior officers to prioritise engagement with, responses to internal audit on current audits and completion of outstanding audit actions and to present updates to Audit and Corporate Governance Committee on a directorate basis.</p>	<p>September 2025 – key recommendation (KR8) The Council should ensure it has a fully-resourced Internal Audit function, capable of proving essential assurance challenge to the Council and of delivering a full and robust annual internal audit programme each year.</p>	<p>To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough, focussing in the first six months on an effective internal audit function, with organisational independence, objectivity, separate administrative reporting and a strong functional reporting relationship to the Audit and Corporate Governance Committee.</p>	<p>Reports are presented to Audit and Corporate Governance Committee on compliance with historic audit recommendations. In addition key directorates have presented reports on progress against internal audits.</p> <p>There has been increased transparency on reporting of Internal Audits, including taking full audits to committee where there have been limited assurance.</p>
<p>Put in place corporate system to test business continuity and emergency plans</p>	<p>None</p>	<p>None</p>	<p>There has been increased reporting to CLT on emergency planning and business continuity.</p> <p>The Council has successfully managed emergencies and has experienced staff in place to support with this, however responses are still reliant on a relatively small group of officers. The Council is due to bring in additional resources to support with business continuity plans.</p>

<p>External review of corporate anti-fraud policies, procedures and practices by another local authority or sector body to review extent to which current practice is preventative based and proactively managing risks.</p>	<p>None</p>	<p>Improvement and recover plan to include: e) A review of the Authority's progress to risk maturity and how well its functions and processes enable risk-aware decisions that support the achievement of strategic objectives.</p>	<p>The CIPFA Code of Practice on managing the risk of fraud and corruption emphasises five key principles to:</p> <ul style="list-style-type: none"> • acknowledge the responsibility of the governing body for countering fraud and corruption • identify the fraud and corruption risks • develop an appropriate counter fraud and corruption strategy provide resources to implement the strategy • take action in response to fraud and corruption. <p>Following concern about housing fraud, the Council commissioned forensic auditors to review systems. This has identified further evidence of fraud. An initial report was presented to committee in September with an informal briefing given to members in October.</p>
<p>To commission an external audit of risk of fraud in housing directorate, including considering effectiveness of internal controls.</p>	<p>September 2025 – Key recommendation (KR11) The Council should develop a plan to strengthen the performance of its housing service, to meet the requirements of the Regulator of Social Housing's (RSH's) Standards. The current non-compliance with the Standards should be reflected in the Council's Annual Governance statement</p>	<p>None</p>	<p>The Council has commissioned forensic auditors to review systems in housing. This has identified failures in internal control and further evidence of fraud. It is positive that the Council took action in response to the risks and issues identified. It now needs to translate any findings into a detailed action plan to reduce these risks.</p>
<p>Workforce governance – Lead officer Bal Toor – Director of HR</p>			
<p>Develop and stabilise the top three tiers of leadership,</p>	<p>October 2024 – key recommendation (KR) The Council and Commissioners should aim</p>	<p>d) A high-performance culture programme to rebuild trust between staff and the Authority, to include</p>	<p>There is more stability in the top three tiers, as new directors have progressed their restructures. This inevitably leads to some instability where existing staff are not matched to roles and their existing roles are redundant. It is</p>

<p>providing an effective management and leadership development programme.</p>	<p>to maintain the permanence of senior leadership team so far as is reasonably practicable. This should include second tier posts.</p>	<p>the development of a comprehensive workforce strategy focused on development, retention, and permanent recruitment.</p>	<p>also important to recognise there may be a need to rely on interim support to bring in the capability required to manage transformation and recovery activities. An example of this is the new s.151 officer who is an experienced interim having supported other authorities under intervention. Further examples are the interim head of internal audit and interim risk management lead. Two new permanent directors of finance have commenced in role, bringing stability to that directorate, alongside the new interim executive director.</p> <p>A new management and leadership development programme has been rolled out and reporting presented to Employment Committee. CLT is also undertaking some group coaching to support team dynamics and collaborative working.</p> <p>Restructures are being developed across directorates, but will need to be kept under review as the Council's finalises its target operating model.</p>
<p>Put in place effective workforce development plans for services that are overly reliant on interim staff or with identified skills and capability gaps.</p>	<p>None</p>	<p>d) A high-performance culture programme to rebuild trust between staff and the Authority, to include the development of a comprehensive workforce strategy focused on development, retention, and permanent recruitment.</p>	<p>Specific directorates are pursuing restructures and there are some high-level design principles. The Design Authority has reviewed its terms of reference to ensure there are consistent approaches across directorates. Restructures have moved away from a focus on an arbitrary savings target to link with a new operating model and design principles.</p> <p>The new arrangements are relatively new and the Council needs to increase the pace of delivering of organisational change and financial savings, therefore it is too early to say whether this will be delivered in year.</p>

Improve completion of mandatory training	None	None	Mandatory training data is presented to directorates for discussion at DLTs and to CLT.
Develop a “permission culture” whereby officers are empowered to take decisions within approved schemes of delegation and governance systems	None	None	More work is required on embedding internal scheme of delegation and supporting staff to take decisions. This needs to be a key aspect of any new target operating model.
Information governance – Lead officer Martin Chalmers – Director of Data, Digital and Technology			
Adopt and implement a Data Strategy, approved at a member level, and ensure that data is used appropriately, consistently and effectively and retained in accordance with legal requirements	September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting, based on high-quality data, including benchmarking	h) An appropriately resourced digital strategy that supports effective business operations and links to the Authority’s future operating model.	<p>The Council is developing a data strategy this year, guided by the Local Government Association Data Maturity Model. Key areas for decision – and then implementation – will include:</p> <ul style="list-style-type: none"> • Where responsibilities for aspects such as data quality, data analysis and data exploitation are placed in the organisation • The skills development and performance monitoring arrangements necessary to ensure these are effectively discharged. Proposals for additional funding for training are being considered as part of the budget process <p>In parallel with this, work to develop the Council’s technical data warehousing and analytics capabilities is in train.</p> <p>Microsoft Power BI is being adopted as the corporate standard reporting tool, and early implementation has been</p>

			<p>done in Housing, Adult Social Care and the corporate performance team, developing new management dashboards and replacing more manual Excel-based reporting.</p> <p>The Council plans is adopting Microsoft Fabric – which includes Power BI alongside broader data warehousing and analytics capabilities – as its core data tool. A proof of concept has been done with Slough Children First to confirm the viability of this approach.</p>
Conduct a review of information published against the Government’s Transparency Code.	None	Improvement and recovery plan to include: g) Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking	A review has been conducted and an action plan produced. Responsibility for driving implementation of that action plan has been placed with the Information Records Manager, to which an interim appointment has recently been made.
Monitor and report on compliance with FOI and SAR requests to CLT at least quarterly and publicly to members at least annually	None	Improvement and recovery plan to include: g) Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking	Compliance is being reported to the monthly Assurance CLT. A report to members is being scheduled.
Complete and report on review of website and other	None	Improvement and recovery plan to include:	The Council has an officer in its digital team specifically focused on accessibility. Council sites and portals have been prioritised into 5 levels based on demand and income

<p>publicly accessible sites to ensure compliant</p>		<p>g) Improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and insight functions, undertaking benchmarking</p>	<p>generation. Audits involve reviewing accessibility, getting issues fixed where possible, and creating accessibility statements viewable on the sites.</p> <p>The audit of priority 1 websites will be completed in FY 25/26. This covers 7 websites including the SBC main site.</p> <p>The review of priority 2 and 3 sites will take place in FY 26/27. The audit of remaining sites will begin (most likely that year) once those have completed.</p> <p>An indicator of success is that the Silktide Accessibility Index, which tests sites against the relevant standard, places Slough as the 28th highest of UK Local Authorities.</p>
<p>Children's Services Governance – Lead Officer Sue Butcher, Executive Director of Children's Services</p>			
<p>Continue to report regularly to Cabinet on SEND improvements.</p>	<p>October 2024 – key recommendation (KR13) The Council should make all the necessary steps to continue to work with the Department for Education to improve performance in children's services and SEND.</p>	<p>a) A new Target Operating Model (TOM) that enables both financial stability and the delivery of core services and priorities.</p> <p>To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough</p>	<p>The Council has a SEND inspection in the summer, but awaits the published outcome of the inspection. The Council has been reported quarterly on the improvement plans to Cabinet and there is an established Improvement Board. The DfE have appointed a new DfE Commissioner to support this work. The outcome of the inspection may result in alternative or additional actions being proposed.</p> <p>There are improvements needed to data collection and analysis and the outcome of the inspection must be taken into account to inform future improvement plans.</p> <p>The budget monitor in September 2025 noted that the Dedicated Schools Grant was forecasting an overspend of £11.978m, solely related to the high needs block and based on the backlog of assessments being fuller cleared. In July</p>

			Cabinet received a report on the SEND Sufficiency Strategy and it is due to receive a report on a Capital Programme for schools in October 2025.
Continue to work with the Schools Forum to ensure full delivery of the Dedicated Schools Grant (DSG) management plan in order to stop the increase in the DSG deficit, including approving a public and up to date Schools Sufficiency Strategy to reduce the risk of high needs block overspends	May 2024 – Key recommendation (KR1) Officers and members should work together to deliver financial sustainability by continuing to work with the Schools Forum and partners to ensure full delivery of the agreed DSG management plan in order to stop the increase in the DSG deficit.	To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough	The budget monitor in September 2025 noted that the Dedicated Schools Grant was forecasting an overspend of £11.978m, solely related to the high needs block and based on the backlog of assessments being fuller cleared. In July Cabinet received a report on the SEND Sufficiency Strategy and it is due to receive a report on a Capital Programme for schools in October 2025. The Schools Forum have supported the Council’s request to allocate 0.5% of the schools block to the high needs block. However the latest forecast there are more new plans being issued than plans ending and without mitigation the expected deficit on the DSG be the end of 2026/27 is forecast to be £32.5m.
Resident engagement governance – lead officer Sonia Khan, Director of Strategy, Change and Resident Engagement			
Improve compliance and reporting on LGSCO and Housing Ombudsman complaints, including regular (at least quarterly) reporting to CLT and annual report to Audit and Corporate Governance	None	To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough	CLT has re-established reporting on complaints data, however the level of detail and analysis needs to be considered to ensure the right discussion and actions. The annual report to A&CG Committee was in September 2025 and there was a detailed presentation to members. Complaints handling is a workstream under the improvement and recovery plan, however more work is required to demonstrate that complaints data is being used to identify and implement service improvements.

<p>Committee, together with complaints analysis included in service improvement reporting to Cabinet.</p>			
<p>Adopt Resident Engagement Strategy, setting out expectations on participation, resident experience and digital inclusion.</p>	<p>None</p>	<p>Prepare and implement an improvement and recovery plan including as a minimum:</p> <ul style="list-style-type: none"> i) Improving resident and public engagement 	<p>A Resident Engagement Framework has been approved by Cabinet in October, meaning this will be marked closed in Quarter 3 update</p> <p>Resident survey results by MET and BCG both show a positive direction of travel, albeit from a low base.</p> <p>The CQC inspection for Adult Social Care recognised the good work undertaken in terms of co-production and working with representative network groups.</p> <p>There continue to be good examples of celebration and engagement events with key community groups, including care experienced young people, children and young people and older persons.</p>
<p>Devise an effective system for capturing data and evidence of local need and ensure this is utilised to inform decision-making</p>	<p>September 2025 key recommendation (KR10) The Council needs to improve data quality and foster a positive culture and capacity around data quality to support robust service planning and reporting,</p>	<p>Prepare and implement an improvement and recovery plan including as a minimum:</p> <ul style="list-style-type: none"> g) improving the systems and processes to enable better and evidence-based decision making, including enhancing the data and 	<p>This is a key strand of the target operating model. The Council has lots of data and has improved access to data held in the joint strategic needs assessment, but it is still unclear how data is being used to inform decision-making. Progress links to other actions, including adoption of a data strategy and resident engagement.</p> <p>The Corporate Performance Indicators have been refreshed to provide benchmarking data with statistical neighbours,</p>

	based on high-quality data, including benchmarking	insight functions, undertaking benchmarking i) Improving resident and public engagement	however there may be an opportunity to further improve this. As part of thier brief, as diagnostic partner working on the operating model, Boston Consulting Group undertook a benchmarking exercise with statistical neighbours and this identified opportunities to improve the corporate performance dataset and area where the Council is out of line with other local authorities. This work is being used to instigate a more robust quarterly performance framework, to be agreed by corporate leadership and put in place from October 2025.
Build programme to rebuilt trust with communities, including transparent, public reporting to members on resident survey results with action plan on improving satisfaction levels.	None	Prepare and implement an improvement and recovery plan including as a minimum: Improving resident and public engagement	Resident survey results by MET and BCG both show a positive direction of travel in relation to trust, albeit from a low base, and the Council now more broadly aligns with other local authorities. These have been reported to Members in public. This action is now complete, although the commitment to improve trust should be built into business as usual operations.
Procurement and contract management governance – Lead Officer - Executive Director of Resources			
Prepare and publish a new procurement strategy to meet the new requirements of the Procurement Act and ensure value for money commissioning activity.	September 2025 – key recommendation (KR14) The Council should significantly strengthen its arrangements to oversee procurement and deliver value for money from when it procures and commissions its services.	To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough	The Council has not yet adopted a Procurement Strategy. There is inconsistency in approach and specialist skills across the Council, with strong commissioning and market management in Adult Social Care, but a lack of cross council strategies and consistent framework. An internal audit highlighted the issues in procurement and contract management.

			<p>There is now a new key recommendation from the external auditor on this area of improvement linked to the Council's need to improve economy, efficiency and effectiveness.</p>
<p>Ensure effective systems in place to commission and manage capital projects, including considering options to optimise social, economic and environmental wellbeing.</p>	<p>September 2025 – key recommendation (KR14) The Council should significantly strengthen its arrangements to oversee procurement and deliver value for money from when it procures and commissions its services.</p>	<p>Prepare and implement an improvement and recovery plan including as a minimum: b) a refreshed capital strategy and treasury management strategy.</p>	<p>A new Capital Board has been set up, however there are still issues with procurement of capital projects, including a need to call off from frameworks following failed procurement activity.</p> <p>The budget monitor to Cabinet in September 2025 highlighted slippage of £12.353m from 2024/25 in the General Fund capital programme. However there has been successful delivery of key projects including:</p> <ul style="list-style-type: none"> • 4 classroom block for Arbour Vale School • New annex for Haybrook College • A4 cycle lane and Destination Farnham Road have contractor on site • Replacement and renewal of fleet and equipment for environmental services, including to meet new duties relating to collection of food waste. <p>A capital programme for schools is due to be reported to Cabinet in November 2025.</p>
<p>Improve systems in place to ensure corporate oversight of contract management, picking up on recommendations from internal audit</p>	<p>September 2025 – key recommendation (KR14) The Council should significantly strengthen its arrangements to oversee procurement and deliver value for money from when</p>	<p>To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough</p>	<p>Strategic commissioning is a key workstream under the Council's improvement and recovery plans and seen as a key enabler under a future operating model. However there are no clear plans in place as yet to provide assurance that the issues raised in the internal audit are being prioritised.</p>

<p>on contract management in 2025.</p>	<p>it procures and commissions its services.</p>		
<p>Partnership governance – Lead Officer Tessa Lindfield, Director of Public Health / Sonia Khan, Director of Strategy, Change and Resident Engagement</p>			
<p>Ensure that each statutory partnership has clear terms of reference, approved strategies and appropriate action plans in place to meet strategic aims, represent best practice and meet its statutory requirements.</p>	<p>May 2024 Key recommendation The Council should develop its corporate oversight to ensure it delivers improvements in economy, efficiency and effectiveness and addresses current weaknesses in inadequate partnership arrangements to ensure the Council effectively delivers its role within significant partnerships</p>	<p>To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough</p>	<p>Statutory partnerships do have terms of reference. There are up to date plans for youth justice and community safety. The Health and Wellbeing Board has a clear plan for approving an updated strategy, including engagement activity.</p> <p>Further work is required to provide assurance on the Safeguarding Partnership arrangements for children and adults. Whilst a website exists with a published strategy, the last annual report published on the website was from 2023/24.</p>
<p>Ensure there is public reporting to members on effectiveness of partnerships.</p>	<p>May 2024 Key recommendation The Council should develop its corporate oversight to ensure it delivers improvements in economy, efficiency and effectiveness and addresses current weaknesses in inadequate partnership arrangements to ensure the Council effectively delivers its role within significant partnerships</p>	<p>To secure as soon as practicable that all the Authority’s functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough</p>	<p>There are no plans to commission external assurance on the effectiveness of partnerships. An internal review could be conducted and reported, however the Council needs to undertake a strict prioritisation exercise and determine whether this is an effective use of resources.</p>

<p>Review approach to transparency for partnerships, with an expectation as a minimum that each partnership produces a public annual report and considers whether to publish reports and minutes for meetings.</p>	<p>May 2024 Key recommendation The Council should develop its corporate oversight to ensure it delivers improvements in economy, efficiency and effectiveness and addresses current weaknesses in inadequate partnership arrangements to ensure the Council effectively delivers its role within significant partnerships</p>	<p>To secure as soon as practicable that all the Authority's functions are exercised in conformity with the best value duty thereby delivering improvements in services and outcomes for the people of Slough</p>	<p>There are improvements in relation to youth justice, and community safety and the health and wellbeing board publishes all reports and minutes as a formal committee of the Council. More work is required on reporting on the work of the Youth Justice Partnership and Safeguarding Partnerships.</p>
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