

Slough Borough Council

Report To:	Cabinet
Date:	28 th May 2026
Subject:	Improvement and Recovery Update and Refresh
Lead Member:	Leader of the Council
Chief Officer:	Will Tuckley, Chief Executive
Contact Officer:	Sonia Khan, Director of Strategy, Communities and Resident Engagement
Ward(s):	All wards
Key Decision:	NO
Exempt:	NO
Decision Subject To Call In:	YES
Appendices:	Appendix 1 – Programme Dashboard

1. Summary and Recommendations

1.1 This report provides an update on progress made against the Council's Improvement and Recovery Plan and summarises the key changes being made to the Plan for 2026/27. These changes are informed by the development of the Target Operating Model approved in November 2025 and the full Transformation Plan agreed in February 2026. They also respond to the most recent report from the Best Value Commissioners to the Minister for Local Government and Homelessness, published on 5 March 2026.

1.2 Recommendations:

Cabinet is recommended to:

1. Note the progress update provided for each of the existing workstreams set out in the dashboards at Appendix 1.
2. Agree the overall assessment of progress set out in paragraphs 3.5–3.8, taking into account the most recent report from the Best Value Commissioners.
3. Agree the overall direction for the Improvement and Recovery work summarised at paragraph 3.9 and in Appendix 1.

Reason:

1.3 To ensure that the Council continues to progress actions that move closer to being a Best Value Council, and to address the specific Best Value Directions, it is essential

to review the impact that Improvement and Recovery activities are having and to reset the direction where needed.

1.4 Furthermore, the Commissioners' Seventh Report (March 2026) to the Minister for Local Government and Homelessness sets out the improvement trajectory of the intervention at Slough Borough Council. The report states that the degree to which Commissioners can recommend to the Minister whether the intervention can end in November 2026, will be influenced by the level of significant progress towards:

- A strong, stable and effective corporate officer leadership team working collaboratively and at pace with the Council's administration
- An MTFs that demonstrates how the Council will balance its future budget, with appropriate levels of reserves to withstand financial shocks and a credible debt repayment strategy
- A transformation programme that demonstrably contributes to delivering a sustainable Council in the future
- Improving and sustainable service delivery with some services delivering a good standard and others moving in the right direction
- Effective governance arrangements across the Council that ensure transparency and accountability.

1.5 A new "Enabling Council" Target Operating Model (TOM) was approved as part of Slough Borough Council's Transformation Plan at Cabinet in November 2025. The TOM was developed with support from Boston Consulting Group (BCG). Their diagnostic was published along with the November 2025 Cabinet report and set out the key shifts in corporate functions that are needed to implement the TOM. This report sets out how these shifts have substantively informed the refresh of the Improvement and Recovery Programme.

1.6 Commissioner Review

This is a comprehensive report outlining progress to date. Commissioners are pleased to note the authenticity of progress reported here, where the Council is realistic about areas for further focus. Publishing dates for delivery in this report is helpful and creates a sense of accountability, but the council must be confident that dates are realistic given the heavy workload of the organisation. The Council will therefore the need to think carefully about how it prioritises its deliverables.

Introductory paragraph

2.1 The Improvement and Recovery Plan for 2025/26 provided the foundation for rebuilding core capability, improving governance, stabilising key services, and addressing statutory Best Value requirements.

2.2 Since the last update to Cabinet in September 2025, a new Target Operating Model (TOM) has been approved by Cabinet (November 2025) as part of the Council's Transformation Plan. The TOM sets a clear future direction for Slough as an "Enabling Council" — one that empowers residents, strengthens partnerships, simplifies access to services, and delivers high-quality, sustainable outcomes. Where possible, residents will be supported to live meaningful lives independently. As a result, the TOM places greater emphasis on prevention and early intervention.

- 2.3 Eight key shifts in corporate functions were identified as required to implement the Target Operating Model, as set out at paragraph 3.8. Aligning Improvement and Recovery plans to these key shifts is essential to ensure effort is focused on moving to the new operating model.
- 2.4 The Commissioners' Seventh Report (March 2026) to the Minister for Local Government and Homelessness sets out the improvement trajectory of the intervention at Slough Borough Council and the explicit priorities for improvement and recovery. These explicit priorities will substantively guide the focus of the refreshed plan which is outlined in this report.

Options considered

1. **Do nothing:** Maintain current Improvement and Recovery projects without refresh. *Rejected because* this would risk misalignment with the actions needed to move to the Target Operating Model and fail to embed the design principles agreed by Cabinet, limiting progress towards transformation and financial sustainability.
2. **Pause activity:** Pause Improvement and Recovery activity until the Target Operating Model is fully implemented. *Rejected because* this would create a loss of momentum, increase the risk of non-compliance with the Best Value Duty, and delay critical service improvements.
3. **Refresh projects (recommended):** Refresh Improvement and Recovery projects to align with the Target Operating Model, transformation priorities and the Best Value Commissioners' Seventh Report. *Preferred option because* it ensures continuity of improvement, embeds the agreed design principles, supports statutory compliance, and provides clarity on governance and delivery for the next 12 months.

2. Background

Context

- 3.1 The Council's improvement and recovery journey began in late 2021, following Government intervention, when Commissioners were appointed to oversee its management. This action was taken after the Council was found to have breached its statutory Best Value Duty and was underperforming in key areas.
- 3.2 Under the Local Government Act 1999, councils are required to secure continuous improvement in the way their functions are exercised, balancing economy, efficiency, and effectiveness. Carrying out improvement and recovery projects and delivering a new operating model is a core requirement set by the Best Value Commissioners.
- 3.3 Since March 2025, the Improvement and Recovery Programme has been delivering across the following areas:

Main Programmes

- Communication, partnerships, and engagement
- Vision and Evidence based decision making
- Political Leadership and Governance
- High performing workforce and culture
- Financial Improvement

Support Programmes

- Improve Complaint handling
- Digital and Technology
- Strategic Commissioning
- Risk Maturity and Internal Audit

3.4 Alongside these programmes, work has been ongoing to develop a Target Operating Model for Slough Borough Council.

3.5 Our overall assessment of progress and reset of priorities

The Council has reviewed progress against the plan which was adopted in March 2025.

An interim progress update was provided to Cabinet in September 2025 and a further review has been undertaken of the main programmes one year on from the full plan being adopted which is summarised at appendix 1.

The Commissioners' Seventh Report (March 2026) to the Minister for Local Government and Homelessness has just been published and sets out the improvement trajectory of the intervention at Slough Borough Council and the explicit priorities for improvement and recovery.

This summary of the Council's overall assessment is summarised below and aligned to the explicit priorities set out in the seventh letter:

1. Medium Term Financial Strategy
2. Leadership (Corporate and Political)
3. Transformation
4. Service Improvement.
5. Governance

Progress has been made to develop a three-year balanced Medium Term Financial Strategy and a Transformation Plan. The MTFS was approved by Council in March and signals the end of Exceptional Financial Support (EFS) by 2028/29. Implementing the MTFS as agreed is a critical next step for the Council, as set out in this report.

A new Corporate Leadership Team (CLT) and structure has been put in place to drive financial accountability. There needs to be a focus on supporting continuity and ensuring the MTFS and Transformation Plan are embedded and implemented, which will be supported by the procurement of a transformation implementation partner and ongoing work to track milestone delivery against the approved programme. Closely monitored spending controls will be critical to the Council's financial recovery and to ending reliance on Exceptional Financial Support by 2028/29, with firm oversight of all key financial drivers, including demand pressures, income, reserves, savings delivery, and capital and treasury management.

The **corporate leadership and Cabinet** need to be working more collegiately to provide effective leadership. There have also been the challenges that come with consensus building in a no-overall-control Council and this even more emphasises the importance of unified corporate and political leadership.

At this critical juncture, these issues could undermine the progress that has been made, previously acknowledged by commissioners, to put in place the building blocks required to become a sustainable, transformed Council. Commissioners described this progress as “plateauing” in their seventh report.

The Council has not made sufficient progress on the main services that need improving in Children’s and in Housing. Deep concerns remain around the extent to which the Council is open to feedback, residents are frustrated with the state of the public realm and with service quality. This is borne out in the nature of complaints and feedback from inspections. More action is needed, beyond improvements to workforce plans and to communications and engagement, to have the impact needed to achieve a high-performance culture. More dedicated focus is needed on performance management and a continuous improvement and learning culture.

The Council is **in the process of publishing service improvement action plans** but these are at different stages of maturity. It does not have a consistent set of service improvement plans across all these priority areas, including clearly defined milestones, deliverables, against an articulation of what good looks like. **There needs to be a clearer golden thread linking to an overarching improvement narrative and cross Council improvements.** Service performance remains inconsistent, although a higher proportion (42% compared with 28%) are at or above target compared with this time last year, and further substantial and sustained progress is required.

In the case of **Children Services** the position has worsened in the last year, as evidenced in the Focused Visit on Care Leavers in November 2025 and the SEND Inspection in July 2025. The Council received a C3 rating from the **Social Housing Regulator** following the inspection in April 2025 and is only at the stage of stabilising its approach to meeting **housing needs and temporary accommodation.** **Adults Services** received a “Good” rating from the CQC following the inspection in July 2025. **Residents’ experience** of the Council often remains poor. The Council’s front door is frustrating for residents, there are multiple ways to register issues, call wait times can be too long and it can be difficult to resolve issues first time.

Inspections raise **common issues that require improved corporate support- to enable improvements to data integrity, strategic use of data and resident engagement.** The Council does not yet have consistent service improvement plans across all service areas, including clearly defined milestones and key deliverables. Where they exist they have been developed in response to regulatory requirements or inspections, and lack a coherent golden thread that connects them to an overarching vision for improvement and the overall change needed. These issues will not be addressed without achieving greater financial stability and providing the corporate and political leadership needed from across the Council to turn around services under one unified improvement framework.

The Corporate and Political culture guides the broader culture of the organisation. The full 2024 staff survey reports significant improvements in views of leadership compared with 2023 which have been sustained in the shorter 2025 “pulse” survey. A workforce plan is also in place, with a full suite of management tools required to embed standards and expectations in teams including good appraisal completion rates.

The Council has made progress in developing more open routes to **communications and engagement** including an e newsletter and more consistent approaches to consultation and engagement. Resident surveys show improved satisfaction, value for money perceptions, and optimism about the town as regeneration plans take shape. This is starting from a very low base.

Member development activity has been reviewed and re-established, with greater focus on governance, scrutiny and Best Value responsibilities. Work has begun to improve **corporate forward planning** with a longer time frame for executive decision making. **Reviews of scrutiny and democratic services** are underway to improve support to governance services to improve governance and decision making. The LGA have continued to support Cabinet Members and Committee Chairs through mentoring arrangements, leadership development for key cabinet members. Impact remains uneven, reports are published late, and leadership behaviours and governance maturity are not yet consistently embedded. There needs to be more focus on improving relationships and culture between members and officers with a view to ensuring greater trust, collaboration and clarity around roles, responsibilities and expected behaviours. Member development needs to concentrate on operating confidently within the revised governance environment.

The Operating Model diagnostic identified the key shifts to transform the corporate and enabling support required to deliver sustainable change covering- strategic planning and governance, workplace culture, commissioning and procurement, data and digital and a streamlined corporate estate. Without these shifts, it will be difficult to sustain the changes needed to improve services and move to a transformed Council.

3.6 Overall assessment of measures of success identified in Improvement and Recovery Plan

	Baseline	Current Position (trend)	LGA Benchmark (Oct 2024)
Residents: Council provides value for money	21% (2023)	31% (2025) <input type="checkbox"/> ▲ +10pp	36%
Understanding the Council's vision (staff)	70.57% (2024/25 staff)	Next update 2026/27 <input type="checkbox"/>	N/A
Members: culture & good ways of working	38% → 40% (2024/25)	Next update 2026/27 <input type="checkbox"/>	N/A
Resident satisfaction with the council	30% (2023)	48% (2025) <input type="checkbox"/> ▲ +18pp	56%
Resident trust in the council	25% (2023)	49% (2025) <input type="checkbox"/> ▲ +24pp	50%
Council acts on residents' concerns	28% (2023)	(no 2025 result provided) <input type="checkbox"/>	53%
Residents feel well informed	38% (2023)	44% (2025) <input type="checkbox"/> ▲ +6pp	47%
Optimism about Slough's future	35% (2023)	48% (2025) <input type="checkbox"/> ▲ +13pp	N/A
Understand reasons for Council decisions	New measure	31% (2025) <input type="checkbox"/>	N/A

Corporate KPI Category	Q2 2024/25	Q2 2025/26 (trend)
Total KPIs in scorecard	47	36
At or above target	28%	42% ▲ +14pp
Marginally worse than target (Amber)	11%	8% ▲ +3pp (lower is better)
Below red threshold	28%	25% ▲ +3pp (lower is better)
Monitored for trends	32%	22%
In development	2%	3%

3.7 Overall priorities

In response to the issues summarised above, the following actions have now been prioritised.

3.7.1 Medium-Term Financial Strategy (MTFS)

Progress

The MTFS to 2028/29 has been approved, including a £40m three-year savings programme, which is tied to a three year Transformation Plan. The MTFS included a Debt Repayment Strategy and a Reserves Strategy, linked to the level of financial risk faced by the Council. The Council's financial position remains acute and Exceptional Financial Support (EFS) for 2026/27 has been approved in principle. Budget re-basing has addressed pressures in Adult Social Care, SEND, Children's services, and Temporary Accommodation. Stronger processes for forecasting, savings tracking and accountability are being embedded. The budget includes placeholders for future pressures and savings, and work will need to commence immediately to set a balanced budget for 2027/28, in line with the level of EFS set out to MHCLG. A timetable for refreshing the MTFS to 2029/30 and setting the budget for 2027/28 is set out on the agenda for April Cabinet.

In the medium term, the Council has set out a plan to achieve financial sustainability without dependency on EFS by 2028/29. The MTFS balances the budget through programmes that seek to achieve greater financial grip, operational improvements and an ambitious programme of transformation. The transformation plans encompass the move to the new operating model as an Enabling Council.

The finance team have begun preparation for the 2027/28 budget and MTFS refresh, with proposals agreed at April Cabinet. This work will be timely, transparent, and subject to appropriate scrutiny through the Council's constitutional processes, with early political and resident engagement built in.

To ensure the Council remains prudent with expenditure, in year spending controls remain in place with all General Fund expenditure over £20k requiring CLT approval; each submission must confirm budget compliance and much tighter controls will apply where services or directorates are overspending. All recruitment and pay related expenditure - regardless of value - will continue to be scrutinised by CLT to ensure rigorous control and oversight.

Key actions needed

By June 2026:

- Establish and track financial benefits – operational and financial
- External resource to undertake a diagnostic to develop a procurement improvement programme in line with best practice

By September 2026:

- Finance Business Partner capacity and capability to be reviewed and optimised

By December 2026:

- Company exit strategies to be developed and progressed
- Work to address reserve levels and resilience

Ongoing:

- Keep **pressures and mitigations under review**
- Ensure **tight programme management of savings** from financial grip, operational improvements and transformation
- Continue to **implement the Finance Improvement Programme** (see appendix 1), promote budget accountability and embed tools for budget management.

Internal audit

Cabinet and CLT recognise the need to strengthen our overall audit position. We are building on the positive progress with Internal Audit and Counter Fraud which has been acknowledged in both the Commissioners' report and the Minister's response. Internal Audit Plan delivery and coverage is increasing positively:

25 Audit Reviews/Reports Finalised - a further 14 audits are live, 4 of which are at draft report stage and 1 Deferred to 2026/27. 4 of the 8 school audits are complete; 1 at draft and 3 underway.

Planning for the 2026/27 Internal Audit Plan has commenced. c.555 audit days will be included in the final Plan and this will be approved by Audit & Corporate Governance Committee at their meeting on 11 March.

Progress on accurate reporting of historical recommendations' implementation has ramped up over recent weeks with significant engagement and progress being made. Owners have:

- o Provided evidence to close, or
- o Prompted a discussion/evidence regarding relevance/currency and/or
- o Have requested amended deadlines

Recommendations becoming overdue now being reported, proactively, on a monthly basis

Publication of multiple years of audited accounts and progress against the CIPFA Financial Management Code has materially improved financial transparency and assurance. The Council expects to deliver its 2025/26 accounts by the statutory deadline in June, although it recognises that the accounts will be disclaimed because of the unaudited opening balances. We are working with our external auditor to achieve a full audit and opinion for the 2027/28 accounts.

The External Auditor's Value for Money process has started for 2025/26. There are 3 statutory recommendations and 12 key recommendations outstanding. The statutory recommendations are with regards to reserve levels, preparation of accounts and financial governance and monitoring. The Financial Improvement Programme is driving and managing the resolution of these recommendations. However, the retrospective nature of the process and requirement for evidence of embeddedness means that the council will not be able to achieve completion of all recommendations until 2028/29.

Key actions needed:

- To deliver the **Internal Audit Plan** to the input and quality performance targets set out.

- To ensure **audit recommendations are appropriate**, based upon evidence and implemented in a timely manner
- To provide an **impactful, quantifiable counter fraud service** that raises fraud awareness, deters fraud from happening and investigates thoroughly when it does

3.7.2 Corporate Leadership

Progress

A review of the Corporate Leadership Team (CLT) has been implemented by the Managing Director/ Commissioner. This aligns CLT portfolios with the organisational capacity needed to deliver sustained improvement, transformation and related benefits including savings, and focus support on critical areas.

A new set of values and behaviours have been introduced for CLT that will be monitored by 121s. This builds on the coaching that has been in place to develop the Corporate Leadership Team. Strategic support for the CE/MDC and to develop the role of CLT has been provided by a Chief of Staff, initially with support from the Local Government Association.

Baseline staff survey results (2024/25) identified leadership credibility, morale during change and confidence in senior leadership as priority areas for attention although there was an improvement compared with the staff survey in 2023. The latest staff survey was launched in April 2026 and results will be shared later in May.

This insight informed a structured leadership development offer for managers, shifting leadership development from ad-hoc to planned and targeted activity, currently standing at over 60% completed.

Current overall turnover has reduced from 10.5% in Dec 2024 to 9.8% in December 2025. This will be impacted in the short term by leadership turnover at 1st and 2nd tier.

Engagement in the appraisal process has improved and last year's completion rate was 92% and it is expected that this year will also be around 90%. This is supported by clearer expectations and alignment between service objectives, individual objectives and the Corporate Plan.

The delivery of a coproduced Workforce Strategy has allowed focus on monthly workforce metrics which have strengthened leadership oversight alongside a refreshed recruitment framework. Slough Children First (SCF) has recently commissioned a culture review, which will provide a report including recommendations for improvement. These findings will sit alongside a scheduled wider review of the Council's culture for Q2 2026.

Key actions needed

By July 2026:

- Data from the survey will be analysed and presented in May with further work delegated to all of the directorates to produce action plans addressing the results in their areas.

By September 2026:

- Stabilise senior leadership and implement the resulting change from the review of corporate leadership in line with improvement priorities and achieving consistency of leadership culture and behaviours are key priorities.
- Implement **the new values and behaviours** to reset a corporate leadership culture – with scheduled touch points as a group and in 1:1s to reflect on progress against reviewed and agreed values
- Introduce a **Council Culture Framework** with clear expectations and measurable indicators.

By December 2026:

- **Performance management** will be used to drive and evidence cultural change - a high completion rate, quality data and alignment to service objectives in end of year reviews will be key indicators that steps are being taken towards an improved performance culture.

3.7.3 Political Leadership and Strengthening Governance

Progress to date:

The Council is entering into its 4th year of the election cycle. Further work is required to strengthen Cabinet/CLT's relationship and leadership to drive the improvements required. Efforts are now focused on ensuring a unified Cabinet/CLT set clear priorities and has shared clarity and expectations regarding roles, responsibilities and expected behaviours.

The LGA have continued to support Cabinet Members and Committee Chairs through mentoring arrangements, leadership development for key cabinet members and sessions with LGA peers, including a review of progress and a session on homelessness.

Member development activity has been reviewed and re-established, with greater focus on governance, scrutiny and Best Value responsibilities. Work has begun to formalise governance arrangements, including scrutiny and democratic services reviews.

Key actions needed

By April 2026

- New Monitoring Officer appointed (Full Council consideration on 23 April 2026) to reset and strengthen relationships with group leaders and members. Impact will be measured by feedback from group leaders and members on a six-monthly and annual basis.

By end of May 2026:

- Cabinet to have implemented fortnightly informal Cabinet meetings and have dedicated progress reviews on becoming a Best Value council.
- Mandatory away days for Cabinet/CLT scheduled for the following 12 months, with a focus on improving relationships and culture between members and officers with a view to ensuring greater trust, collaboration and clarity around roles, responsibilities and expected behaviours.
- Centre for Governance and Scrutiny workshops delivered involving:
 - Corporate Improvement Scrutiny Committee

- Cabinet
- Corporate Leadership Team (CLT)

This external support for members and officers should lead to increased opportunity for scrutiny to hold Cabinet members to account and to contribute to delivery of efficient public services. Effectiveness will be reported in the CISC's annual report.

By end of autumn 2026:

- Cabinet–CLT away-day completed to review:
 - Progress against improvement implementation
 - Priorities
 - Roles and responsibilities
 - Expected behaviours
- The effectiveness of lead member / director briefings will have been reviewed, measured by feedback from cabinet members and CLT.
- The effectiveness of private political meetings and Cabinet/CLT meetings. This will also be measured by feedback from Cabinet and CLT.

Ongoing / Annual:

- Wider work underway includes a refreshed officer governance programme in 2026/27 to improve understanding of member roles, constitutional decision-making and democratic accountability, measured through report timeliness, urgency procedures, officer decisions and training feedback
- This helps focus a collective approach to ensuring compliance with statutory and good governance compliance.
- Completion of the review by the Centre for Governance and Scrutiny in relation to effectiveness of scrutiny work will underpin this work in addition to the development of the way CLT and Cabinet Members work together through series of away days.
- Supporting Members in their strategic leadership role within the Target Operating Model (TOM), ensuring residents' concerns are reflected and solutions are embedded into service design.
This will reinforce Members' central role in shaping the future direction of the Council and strengthen the democratic legitimacy of TOM-driven changes.
- Reviewing the structure of the Democratic Services Team to ensure it aligns with the Council's design principles and the shifts required under the TOM.
The restructure is complete and recruitment is taking place to fill vacancies.
- Working with Members, Commissioners and the CLT to identify support and development needs.
This will ensure support and development is better targeted, enhances Members' ability to operate confidently within the revised governance environment, and supports continuous improvement in decision-making standards.

A Members Survey has been delayed and is urgently needed to ensure that member officer relations can be understood against 2024 baseline.

3.7.4 Transformation

Progress

The Council approved a new Transformation Delivery Model, a multi-year cross Council Transformation Programme and investment in February 2026. Plans were also set out in the Council budget and MTFs report in March and will generate over £30m of savings over

the three-year period. A substantial proportion of the programme is already under way with support from an in house team. The Transformation Programme is aligned with the Target Operating Model, which was approved by Cabinet in November 2025. As part of the mobilisation, we are reviewing the governance, financial management and programme management arrangements, and a readiness assessment is being conducted. A transformation delivery partner will be procured to provide capacity and expertise and assure continuity over the three-year programme.

- Transformation governance has been established (CLT Board, Design Authority, Member Oversight Board).
- A dedicated transformation team now operates across adults, housing, children and customer services.

Key actions needed .

By July 2026

- Anticipated contract commencement with a delivery partner on 20 July 2026. The delivery partner will be expected to establish an independent Portfolio Office, PMO, assurance, commercial and financial advisory capability from July – November.
- To maintain momentum, the Transformation Board and the in-house PMO will continue to oversee delivery and monitor progress across all current projects.

By November 2026:

- The delivery partner is embedding and accelerating key transformation workstreams with support from a strengthened PMO. In addition, separate lots will be let for specialist support for transformation in areas such as Adults, Children's, Housing, and digital technology.

Alongside this, priorities will be to:

- Build internal capacity and capability through a long-term Strategic Partner
- Strengthen governance further and ensure stronger CLT accountability.
- Strengthen the Design Authority to maintain alignment with TOM principles.

3.7.5 Service Improvement

Children's

The Council has a lead role to play in ensuring children and young people with special educational needs and their families receive the support they need to thrive and the new Director of Children's Social Care, CLT and Cabinet are driving the work across the Council and wider system. This will require substantial financial investment. They all recognise that previous improvement activities have not had the impact needed. Last year's Local Area Inspection found that there were systemic weaknesses. In response, Cabinet approved a Priority Action Improvement Plan (PAIP) this February that was co-produced with partners and families. Actions focus on creating a dynamic and joined up

view of need that need to be met and gaps filled, informed by lived experience and underpinned by better assessments.

Early years and schools

Slough's children benefit from good support in their early years:

- In 2024, all of Slough's Children's Centres were judged to be 'Good', with Romsey Close rated 'Outstanding'.
- Slough, along with one other local authority, has the smallest "disadvantage gap", in the country when children start school at 5. This means that children who are expected to face a disadvantage do not lag too far behind their peer group- 1.9 months compared with 4.7 months nationally.

Ofsted reports show how strong Slough schools are and only 3 out of 51 do not currently carry Good or better grades for all judgements. At age 16, Slough young people have the 11th best average attainment in the country, significantly higher than the national and regional averages. At age 19 the percentage of young people with a Level 2 qualification including English and mathematics is the 13th best in the country.

SEND Services

The total number of children and young people supported through an EHCP is now approximately 2,800, with around 1,870 in mainstream settings and around 930 in specialist or alternative provision, including 400 out-of-borough placements (this is data for 2025 reported to DfE in 2026). According to the latest SEND Sufficiency Strategy 2025-2028, the number of EHCP plans has increased by 51% between 2019 and 2025 and had increased by 19% in one year –2024-2025, in part this sharper increase can be explained due to a backlog.

Backlogs in EHCP assessments and weaknesses in SEND data quality have historically undermined the Council's ability to plan effectively, leading to misalignment between resource allocation, sufficiency planning and actual need. There was a backlog in overdue EHCP assessments – this was 116 cases in April 2025 and is now reduced to 40, with the backlog expected to be cleared by early 2026/27.

Concurrently, demand has continued to rise, with an average of 43 new EHCP requests per month (although this is expected to reduce a little in 2026/27). The increase continues to exceed previous assumptions and to continue over the next five years. As a result, local specialist provision is close to capacity, meaning and without mitigations a higher proportion of children will need to be placed in out-of-borough settings at substantially higher cost. Our latest SEND Sufficiency Strategy predicts that the number of children needing specialist education in the borough could increase by 16% or 450 over the next five years. In response, the Council has worked with schools that offer specialist provision to expand classrooms and facilities - expanding provision by 35 in Arbor Vale School which opened in 2025, investing in additional Special Educational Needs and Mental Health places in the Millside unit that is part of Haybrook College due to open imminently and work is nearing completion on a satellite base for Arbour Vale School that will open in the first half of 2026.

The Safety Valve agreement is an agreement whereby Government pays off Slough's historic High Needs SEND deficit, subject to the Council committing to a long-term plan to run the system sustainably. Rising demand is now putting the "safety valve agreement" under major pressure with updated modelling now shows a forecast cumulative deficit of £33.4m by the end of 2026/27, driven in large part by increased demand and the need for more out-of-borough placements.

Decisive action needs to continue to improve the quality and consistency of SEND services as well as transformation of SEND to meet rising demand. In July 2025, the Local Area inspection carried out by Ofsted / CQC identified systemic weaknesses across the SEND system, including delays in key processes, inconsistency in the quality and timeliness of Education, Health and Care (EHC) plans, weak communication pathways, and insufficient coordination across education, health and social care. In response, Cabinet approved a Priority Action Improvement Plan (PAIP) this February that was co-produced with partners and families. Actions focus on creating a dynamic and joined up view of need that need to be met and gaps filled, informed by lived experience and underpinned by better assessments.

Key Actions Needed

By April 2026

- Monthly SEND Improvement & Assurance Board (SIAB) established, chaired by the DfE appointed SEND Commissioner with subgroups for data, communication and finance.
- Operational Delivery Group and PAIP Transformation Impact Groups established.
- LGA review of the Local Area governance completed.
- New Parent Carer Forum launched and parent/carers represented across all seven PAIP priority areas and at the SIAB board.

By August 2026

- Inclusion Support Grant actions completed and findings used to meet increased demand in a more agile and effective way through the graduated approach.
- Coproduction of the Local Area Reform Plan (by June 19th).
- Following a capacity review, new staffing structure agreed that is fit for purpose and meets statutory responsibilities.
- Updated SEND and Inclusion Strategy shared.
- Coproduced Education Health Care Plan template established, supported by multi agency training and including exception pathways for at risk groups.

- Following a DfE deep dive, a new Preparation for Adulthood Toolkit codesigned with young people.

By January 2027

- An improved data system in place to provide a holistic, system-wide view of SEND need, provision and outcomes across education, health and social care.
- A comprehensive SEND Joint Strategic Needs Assessment in place aligned to refined Joint Sufficiency and Commissioning strategies and action plans reflecting current and future demand.
- Full implementation of the East Berkshire Integrated Therapies Contract.
- Building on Young Inspectors work to ensure young people effectively evaluate how commissioned provision meets their needs and preferences.

Children's Social Care

The Youth Justice inspection was on 23rd Sep 2024 and the outcome of the inspection was a finding of inadequate. A plan was developed in January in 2025 following publication of the report which is overseen by the Youth Justice Board. The oversight manager for the England and Wales Youth Justice Board meets to review updates and progress monthly with the service with quarterly updates with the local Youth Justice Board.

Recent audit and inspection activity in Children's social care (delivered by Slough Children First) would indicate there is an overly optimistic assessment of practice, with insufficient grip of the lived experience of children and their families leading to an inconsistent offer of support to children in need of help and protection. This limits the organisation's ability to identify and respond to areas of weakness at pace. However, new, strengthened and experienced leadership from Debbie Jones, Interim DCS and CEO SCF, and Rashida Baig, Interim Director of Operations SCF commencing in March 2026 have already started to identify the challenges and put mitigations in place to manage risk and vulnerabilities.

A focused visit was carried out by Ofsted in November 2025. The inspectors considered the care leavers' service and arrangements in place for care leavers aged 18-25, focusing on young people with additional needs and at risk of harm in line with the Inspection of Local Authority Children's Services (ILACS) Framework.

Inspectors identified that care leavers in Slough receive an inconsistent level of support. A significant number of young people were not being kept in touch with and did not have an allocated personal adviser, resulting in reduced access to services and for some, welfare not being adequately safeguarded

Inspectors noted areas of stronger practice including the positive impact of the following areas:

- virtual school
- improvements in participation
- and effective specialist support for unaccompanied asylum-seeking young people

They concluded that key aspects of practice remain inconsistent. These include pathway planning, case recording, supervision, management oversight, performance management and quality assurance

Consequently, Ofsted issued an Area for Priority Action relating to keeping in touch with and supporting care leavers over 18 alongside associated improvement needs concerning management oversight, workforce capacity and caseloads, planning consistency, and quality assurance arrangements

This focused visit took place within the context of the local authority's improvement journey following the last formal ILACS inspection which recognised progress in stabilising services while also highlighting systemic challenges in consistency, oversight, and workforce pressures. The focused visit findings reaffirm that, although there are committed practitioners and examples of relational, strengths based practice, variability in management grip, supervision, and performance infrastructure continues to affect the reliability of the care leavers offer.

Key actions needed:

By end of June:

- Family Help model formally confirmed and communicated across partners
- Corporate Parenting Board refreshed with clear priorities linked to focused visit finding
- Slough academy for workforce development-phase 2

Keeping in touch in place with all care leavers over the age of 18 to ensure their welfare is safeguarded and promoted in line with statutory duties and care leaver entitlements.

Areas to improve social work practice

- Roll out mandatory training to include 5 key areas
- Quality Assurance/audit activity
- To provide assurance that the quality of recording and the engagement of the service offer
- Continue to roll out and embed QA framework and training
- Service Review

Short breaks for disabled children are rated Excellent by Ofsted which means that children can expect an excellent experience, which also gives a chance to have a break from caring. Looked after children also receive sound support from a Good rated Foster Care Service, a rating maintained since 2021.

By end of March 2027:

- Clear evidence Family Help is changing trajectories, not delaying intervention
- Grow our Children in Care Councils, Care Leaver Forum, and the Young Ambassador Model.

Adults

In July 2025, the Care Quality Commission awarded Adults an overall good rating with positives highlighted: This was the first inspection for 12 years and involved residents.

- The way people were supported at times of change, especially from hospital to home.

- Preventative approaches were in place, and a high proportion of residents are able to access direct payments, and a lower proportion are in residential care. These are all indications that residents are being supported to remain independent for longer; something was recognised as a strength in the inspection.
- There was a strong commitment to equality, diversity, and inclusion, to co-production and partnership working and safeguarding policies.

The inspection found that there were gaps in care and support services, which did not always meet demand in adapted housing, respite for autistic, services for those with learning disabilities and complex dementia, nursing for younger adults with bariatric needs, and day services. Transitions from children to adult services remained a challenge. Carers provided mixed feedback, and, in the last year, changes have been progressed at pace- increasing investment to carers groups, increasing number of carers being registered and launching digital help online for carers. Slough held its second Carers Forum in September 2025, attracting 70 carers and we are enhancing the discounts and perks carers can access through their Carers' Card.

Alongside this, co-production is firmly in place through a co-production network that is influencing development and improvement.

Key actions needed:

- Preventative work
- Developing initial assessment
- Supporting people to stay at home for longer and be more independent
- Reviewing mental health support
- Complex Care reviews
- Tech enabled support
- Continuing to improve carer support
- Developing support services where gaps were identified
- Developing transition from children to adults
- Process improvement

Housing

With a growing number of homeless people in Slough, more people, including children, are living in insecure conditions. This is not unique to Slough, but poor data, underclaiming housing benefits, weak contract management, and under-resourced teams have meant a focus on fixing the basics. We are now developing the transformational plans needed to address the scale of the issue by looking at housing affordability and more preventative working.

This will be driven by a new Housing Service Improvement and Transformation Board, covering both Housing Needs and Support and Housing Services and taking a whole-council approach. This is in development, with the inaugural meeting taking place on 23rd April 2026. This will include revised service improvement priorities focussing on highest impact areas that will make the most difference to the service's performance and services to residents.

Housing –Landlord Services

Slough has over 6000 Council homes, and our tenants and leaseholders do not receive the standard of service or level of engagement they should expect from their landlord. In June 2025, the regulator gave a C3 non-compliant rating, highlighting serious shortcomings in the transparency, influence and accountability standard, as well as the tenancy standard. It also identified weaknesses in the safety and quality, and neighbourhood and community standards. The Council is progressing through the final stages of agreeing a Voluntary Undertaking, ahead of submission to the Regulator. The Voluntary Undertaking outlines a structured programme of improvement actions that will be implemented to achieve compliance with each of the Regulator's Consumer Standards. The landlord function will continue strengthening its operational foundations and compliance position.

Key progress so far includes:

- Upgrading housing stock to meet net zero targets, Decent Homes standards, and new damp and mould regulations.
- Launching a compliance dashboard to ensure health and safety checks are completed and holding quarterly building safety meetings for residents in high-rise blocks.
- Cutting the number of empty homes from 189 to just 49, with many ready to let.
- Converting flexible tenancies to secure tenancies by January 2026 and introducing a modern Choice-Based Lettings system later in 2026.
- Hosting virtual housing priorities events so residents can help shape services. Residents were also invited to the Housing Directorate's away day so staff could hear feedback directly.
- Improving complaints handling through a dedicated task force, achieving better compliance with the Social Housing Ombudsman's code.
- Publishing annual tenant satisfaction results- with tenant satisfaction embedded into goals for staff.

Key actions needed:

The Council is entering into a voluntary undertaking with the Social Housing Regulator, setting out the council's explanation of the root causes of non-compliance within the housing service and identifying how these issues have arisen from corporate-wide challenges experienced since 2020.

Key actions needed:

By June 2026

- Publishing Slough's Housing Strategy for 2026-2031

By November 2026 we will have:

- Created a Tenant Voice Framework with structured engagement routes (tenant board, digital panels and neighbourhood events)

- Commence the procurement process for a new long-term repairs, maintenance, and investment contract, scheduled for award in April 2028.
- Complete tenancy audits for 35% of tenants, enhancing data quality, identifying vulnerabilities earlier, and strengthening tenancy sustainment.
- Updated or redrafted 20% of housing management and property services policies, ensuring they reflect current legislation, regulatory expectations, and best practice.
- Achieved full compliance with the new Competency and Conduct Standard, demonstrating the service's commitment to professional standards and regulatory readiness.
- Established a new framework for tenant and resident engagement, creating clearer routes for involvement.

By April 2027 we will have:

- Stock condition surveys completed on 40% of homes, progressing towards 80% coverage.
- Robust asset data and informed future investment decisions.
- These actions accelerate the modernisation of Landlord Services, with a greater focus on prevention and, compliance, supported by strengthened resident engagement, and lay the groundwork for longer-term transformation.
- In addition, the stabilisation of services will be reinforced by the housing restructure and revised governance that will also strengthen Commissioner oversight.

Temporary Accommodation and Homelessness Support

Slough takes a coordinated approach to supporting rough sleepers. However, the borough faces some of the most severe homeless pressures in the country. Over 2,800 households are engaged with homelessness services, including 1,038 cases accepted under statutory duty and 685 under assessment. Homelessness presentations have risen by 28% in three years, and the number of households in temporary accommodation (TA) has grown to around 1,300, including families living in B&Bs. This has led to a forecast annual spend of £34.8 million and a housing benefit subsidy gap of £22 million.

These challenges are not unique to Slough but have been worsened by poor data, underclaiming housing benefits, weak contract management, and under-resourced teams. The focus of improvement has therefore been in stabilising the service and foundational improvements.

Since late 2024, emergency measures have stabilised the service, including:

- Reconciling 500 temporary accommodation cases so housing benefit claims can be submitted
- Negotiating lower accommodation rates
- Reducing the number of families in B&Bs

- Standardising leases
- Taking a whole-Council approach to case management across finance, IT, property, and audit
- This approach and ongoing engagement with central government has helped unlock an additional grant of £500k from central government at the end of 2024.

Key Actions Needed:

A five-year plan, to be published in June 2026, sets out a strategic shift towards intervention and prevention, including increased use of compliant and lower cost TA options, and stronger pathways into long term, settled accommodation, which will reduce temporary accommodation usage from 1,300 to around 900 households and to reduce the subsidy loss by up to 50%.

Over 2026/27 TA numbers to reduce to 1250 as the impact of improvement plans materialises.

Over the next 6 months the service will:

- Prevent or relieve homelessness for 350 households through advice and intervention
- Procure and implement a choice-based lettings system by July 2026;
- Produce and implement a new Housing Allocations scheme by July 2026
- Develop and consult on a New Homelessness & Rough Sleeping Strategy to be presented to Cabinet in September 2026

Customer Services and Front Door

Customer Services leads on the front door for incoming queries relating to a range of services. The service responds to between 3500 and 4500 calls per month and aims to respond to at least 80% of calls within 8 minutes. A further 3500 emails and e forms are responded to. The service also sees between 700-800 people in person.

The Complaints, Casework & FOI team manages corporate complaints Last year the service dealt with 819 stage 1 complaints and 55 Adults Social Care complaints. They also dealt with 1500 service requests and enquiries. Housing Repairs continue to attract the most complaints with over 33.6%. The main root cause for complaints continues to be communication delays and quality of service. 83% of complaints were satisfactorily resolved at stage 1. The council had 74 complaints referred to the LGSCO, 11 were investigated, and 10 were upheld.

Customer Services has struggled to maintain its call response target time of 80% this year, as it did in 2024/25 and the current rate is 70%. Work is underway with services to try to manage demand differently- with council tax and housing, as well as building the team back up to full capacity. Footfall at the customer access points has increased by 20%

compared with the same period last year rising from 6,417 to 8,068 visits between April and December.

Physical Front Door The Council is testing a new way for people to access services in person. The trial is in Britwell Hub and was launched in January 2026 and focuses on key services that are the most difficult for residents to access or that are driving demand on the call centre that is difficult to resolve in a phone call..

Digital Front Door- The Council is progressing work to enable residents to access services online instead of by phone. The key focus is on seven projects in Revenues and Benefits. This will include redesigning processes and creating better digital options. We'll also look at simplifying and improving the current digital entry points, including webforms, automated workflows, inboxes, data, and systems. Improving complaint handling and getting better at continuously improving and tackling the root causes behind complaints and developing a more positive continuous improvement culture.

Key actions needed:

By September 2026:

Launch full front door transformation programme and governance

- rolling out face to face front doors elsewhere
- developing direction of travel for the hub model
- digital front door redesign – all email in boxes
- support channel shift
- agreeing new KPIs
- -complaint handling- adopting a new system; moving team to problem solving/ continuous improvement rather than logging / chasing and support integration of SCF function

In the meantime, continue with tactical work to improve call responses times and complaint response times

Establish work to transition SARs and FOI to Info Governance (have held post vacant to enable this)

3.8 Target Operating Model – what kind of Council will Slough be?

A new “Enabling Council” Target Operating Model (TOM) was approved as part of Slough Borough Council’s Transformation Plan at Cabinet in November 2025. The TOM was developed with support from Boston Consulting Group (BCG).

Working with Residents

The Council seeks to help residents to help themselves as much as is possible:

- Making it simpler to find and use information when they need it.
- Supporting people to do things for themselves wherever possible.
- Building trust and working closely with local communities and partners.
- Focusing on prevention and early help

Improving the Town

The Council aims to shape a better place to live by:

- Creating a lively town centre and green, welcoming neighbourhoods.
- Making our town well-connected globally and environmentally sustainable.
- Growing a strong economy and promoting lifelong learning.
- Supporting health and wellbeing across the town.
- Celebrating our diverse community.
- Building strong connections with residents, businesses and partners around shared goals.

Strengthening Our Organisation

The Council aims to transform resident and customer experience:

- Listening, learning, and improving based on feedback.
- Creating a culture where everyone feels included, responsible and empowered.
- Putting the right systems in place to support our staff.
- Ensuring there is a digital entry point to all services, so that any transaction that can be completed digitally is and this digitisation helps us resolve significantly more issues at first point of contact and service access points are based on need
- A workforce that is stable, with predominantly permanent staff, who know their communities and will confidently engage with residents
- Members and officers work constructively together

The Council aims to transform outcomes and places:

- Having a clear vision and priorities.
- Focusing on outcomes and value, not just delivering services

The Council aims to prevent new demand and reducing existing demand:

- Tackling root causes.

- Working in a more preventative way with partners across the system
- Involve communities in shaping services and creating stronger support and self-help in communities.

The Council aims to achieve efficiency and financial sustainability:

- Operating out of fewer buildings.
- Making the changes and savings needed.

Improvement and Recovery priorities have now been aligned to the strategic intent of the target operating model.

Furthermore, the priorities have taken account of the following key organisational shifts identified by Boston Consulting Group. Their diagnostic was published along with the November 2025 Cabinet report. The key shifts are:

- Strategic alignment - strategy, services plans, budget
- Managing Change
- Data and digital- including Automation and digitisation opportunities
- Strategic Commissioning
- Workforce: culture change and enabling support services- review against benchmarks
- Improving contracting
- Workforce strategy- spans and layers and automation / digitisation
- Assets-corporate landlord / property disposal – reducing operating costs

3.9 Improvement and Recovery Plan Priorities – overview for 2026/27

The refreshed Improvement and Recovery Plan Priorities identify the key actions needed in line with the improvement trajectory required to become a Best Value Council as outlined above at 3.7. They show how the priorities align to the operating model and the shifts required:

Priority	Required Position by end of 2026/27	How this supports the Enabling Council TOM and key shifts
Medium-Term Financial Strategy & Financial Sustainability	<ul style="list-style-type: none"> • Balanced 2027/28 budget with reduced dependency on EFS • Refreshed MTFS aligned to Transformation Plan • £15m savings for 26/27 on track; £40m savings by 28/29 in progress • Clear accountability by budget holders 	<p>TOM intent: Achieving financial sustainability to enable prevention, early intervention and better outcomes rather than crisis response.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Strategic alignment –

		<p>linking Corporate Plan, service plans, transformation and the MTFS into a single, coherent system</p> <ul style="list-style-type: none"> • Managing change – creating financial headroom to support redesign rather than incremental cuts
Finance Improvement Programme	<ul style="list-style-type: none"> • Reserves strategy and resilience strengthened • Spending controls embedded and effective • Financial capability and capacity optimised • Procurement diagnostic completed and improvement programme underway • CIPFA FM Code embedded 	<p>TOM intent: Strengthened enabling finance function that supports services to make better decisions and deliver value.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Value-for-money procurement and contracting • Managing change through better financial insight and benefits tracking
Internal Audit	<ul style="list-style-type: none"> • Audit Plan delivered to quality and timescale • Audit recommendations implemented promptly • Embedded counter-fraud culture with measurable impact • Reliable assurance environment 	<p>TOM intent: Effective governance and assurance that enables confidence, transparency and accountability.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Strategic alignment – audit focusing on highest-risk areas linked to TOM priorities • Corporate enabling functions that support continuous improvement rather than reactive compliance
Transformation Programme	<ul style="list-style-type: none"> • Strategic Delivery Partner mobilised • Portfolio Office and strengthened PMO in place • Design Authority embedded • CLT accountability for delivery clear 	<p>TOM intent: Delivering a sustained shift to an Enabling Council through redesigned services, prevention, and simpler resident journeys.</p> <p>Key shifts enabled:</p>

	<ul style="list-style-type: none"> • Transformation milestones and savings on track 	<ul style="list-style-type: none"> • Managing change at scale and pace • Strategic commissioning and service redesign • Design Authority embedding TOM principles consistently
Corporate Leadership	<ul style="list-style-type: none"> • Stable and coherent CLT • Consistent leadership behaviours and values embedded • Culture Framework adopted • High-quality performance management and reviews • Staff survey results analysed and acted on 	<p>TOM intent: A confident, enabling leadership culture that empowers staff and partners to deliver better outcomes for residents.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Workforce culture change • Enabling corporate support rather than siloed leadership • Managing change through visible, consistent leadership
Governance & Member / Officer Relations	<ul style="list-style-type: none"> • Unified Cabinet with regular informal working and Best Value focus • Improved Cabinet–CLT relationships • Stronger scrutiny supported by Centre for Governance & Scrutiny • Fully staffed Democratic Services • Improved Member–Officer culture evidenced through Member Survey 	<p>TOM intent: Constructive political–officer relationships that support shared ownership of outcomes and resident trust.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Governance maturity and strategic alignment • One Council culture • Members operating confidently within the Enabling Council model
Service Improvement	<ul style="list-style-type: none"> • Clear CLT and Cabinet ownership of service improvement • Consistent service improvement plans linked to corporate priorities • Shared improvement framework across priority services 	<p>TOM intent: Shifting from fragmented, reactive improvement to consistent, outcome-focused service design.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Strategic commissioning • Prevention and early intervention

		<ul style="list-style-type: none"> • Managing change through consistent improvement methodology
<p style="text-align: center;">Corporate Strategy</p>	<ul style="list-style-type: none"> • Corporate Plan, MTFS, service plans and objectives fully aligned • Data strategy delivered with stronger analytical capability • Co-created long-term vision for Slough • Consistent, inclusive resident engagement • Strategic Communications Plan embedded 	<p>TOM intent: A Council that focuses on outcomes, value and prevention, shaped with residents and partners.</p> <p>Key shifts enabled:</p> <ul style="list-style-type: none"> • Strategic alignment across planning, finance and delivery • Data and digital enabling insight, targeting and accountability • High-perfo

The following 2025 Supporting Workstreams are now part of the Transformation Programme adopted by Cabinet in February 2026:

Digital, Data & Technology

Strategic Commissioning

Complaints- is part of Customer Services Transformation

3.10 Governance

- The Corporate and Service Improvement Board, chaired by the Leader, continues to have oversight of the Improvement Plan.
- The newly established Design Authority will review the development of the projects to ensure continued alignment to the Target Operating Model. We are using the Best Value criteria set out by the Ministry of Housing, Communities and Local Government (MHCLG) to help establish progress of the overall programme and the measures of success that were originally adopted in March 2025.
- The Governance and PMO function will need to be developed further to ensure it is fit for purpose. The following improvements have been identified:
 - Strengthen oversight by corporate leadership with challenge and interrogation
 - Monthly reporting against action plans and benefits. Workstream leads accountable for progress updates
 - PMO oversight & escalation: Regular review of action plans and benefits. Identify and track risks and issues early and escalate delivery concerns to CLT where required. Benefits baselined, tracked consistently and linked to objectives and milestones.
 - Monitoring impacts & progress- Regular reporting direct to CLT on expected benefits and impact.
- The Council will keep residents informed of the progress the Council is making through clear and timely communications. Updates will be shared via multiple channels, and individual programmes engage and co-design with partners and residents as appropriate. Appendix B sets Slough Borough Council's story of improvement to date.

4. Implications of the Recommendation

4.1. Financial implications

The 2026/27 budget and three-year MTFs included £31m of investment in Transformation, including Improvement and Recovery. This consists of £11m of revenue investment and £20m capital investment.

In February, Cabinet approved that this be supplemented by £2.7m from the Transformation reserve and £1.9m from Flexible Use of Capital Receipts, leading to a total of £15.6m revenue investment.

A breakdown of this investment was set out in the February Cabinet report and is summarised below.

Activity	2026/27	2027/28	2028/29	Total
	£	£	£	£
Direction, co-ordination, PMO				
Transformation Partner – core role Programme direction-cohesion and alignment with corporate strategy and operating model, providing critical friend and challenge based on benchmarking Programme co-ordination across programmes	930,000	930,000	260,000	2,120,000
Corporate PMO-assurance that programme is achieving agreed benefits in line with corporate strategy, MTFS and operating model and clienting	220,000	220,000	73,333	513,333
Implementation				
Programmes of recovery, service improvement and transformation: implementation	3,500,000	3,500,000	1,000,000	8,000,000
Implementation of corporate improvement to establish new operating model- digital, finance, estates and procurement	1,213,165	975,000	860,000	3,048,165
Corporate support to enable transformation				
Finance business partnering	115,000	115,000	38,333	268,333
HR & change support & culture change	616,000	616,000	-	1,232,000
Commercial / procurement/companies	70,000	70,000	70,000	210,000
Communications and engagement	80,000	80,000	80,000	240,000
Total	6,744,165	6,506,000	2,381,667	15,631,832

As the Transformation Programme is implemented and recovery continues, the requirement for investment will be kept under review and reported regularly to Cabinet.

Recovery, improvement and transformation are inextricably linked with the Council's medium-term financial sustainability and its ability to demonstrate that it meets the best value duty.

As set out above, at its meeting of 16th February 2026, Cabinet approved £15.6m of funding for Transformation, met from £11m included within the budget considered by Council on 5th March 2026, supplemented by £2.7m in the Transformation Reserve and £1.9m flexible use of capital receipts.

A further £20m of capital funding for Transformation has been included in the Capital Programme.

Delivering the MTFs, including the Transformation Programme is critical to achieving a balanced budget in each of the three years, in line with the level of EFS requested from MHCLG. This includes setting a balanced budget in 2028/29 with no EFS required.

Tracking, monitoring and taking prompt remedial action where necessary will be a fundamental part of achieving the outcomes set out in this report.

4.2 Legal implications

On 1 December 2021 the Secretary of State for Levelling Up, Housing and Communities made statutory directions requiring the Council to take prescribed actions and that certain functions be exercised from this date by appointed Commissioners, acting jointly or severally. The directions were extended on 1 September 2022 and on 20 November 2024. The directions are made under Part 1 of the Local Government Act 1999 due to the Council having failed to comply with its best value duty.

The general duty of best value is set out in section 3 of the Local Government Act 1999 and requires local authorities to “make arrangements to secure continuous improvement in the way in which its functions are exercised, having regard to a combination of economy, efficiency and effectiveness”. This requires consideration of overall value, including economic, environmental, and social value, when reviewing service provision. There is also a duty to consult when deciding how to fulfil the best value duty.

Annex A of the directions set out the action the Council is required to take. Annex B sets out the functions to be exercised by the Commissioners. This includes functions associated with governance and scrutiny of strategic decisions, requirements for the proper administration of financial affairs, functions associated with appointment of the three statutory governance officers and the scrutiny officer, as well as functions to define the officer structure at a senior level, determine recruitment processes and recruit relevant staff to these positions, functions relating to the appointment of persons to senior roles in council companies (except Slough Children First), functions associated with the Council’s operating model and redesign of services to achieve value for money and financial sustainability and functions relating to the development, oversight and operation of an enhanced performance management framework for officers holding senior positions.

4.3 Risk management implications

The following is a risk on the corporate risk register: Risk 13 - Improvement and Recovery Planning Failure to deliver on the wide range of improvement and recovery actions specified in the Directions and various Government reports leads to further intervention. Undertaking a review of progress against Best Value and the Directions is an essential part of assessing if the wide range of improvement and recovery actions are supporting the Council to become a Best Value Council.

4.4 Environmental implications

There are no direct Environmental implications from this report.

4.5 Equality implications

In 2024, the Council adopted new Equality Objectives, following consultation. These objectives cover both community facing and workforce diversity. They set out the long-term goals that will enable the Council to meet the Public Sector Equality Duty and community needs. They consider how the Council needs to proactively promote equality and tackle inequality, tackle discrimination and foster good relations. Becoming a Best Value Council is a key part of being able to deliver the Council's Equality Objectives, as foundational work is needed to be able to sustain work that progresses Equality Objectives. In September 2024, the Council participated in an LGA Peer Review looking at Equality. The Peer Review highlighted the importance of centring equality considerations in the Improvement and Recovery Plan. This is reflected in the focus on evidence-based decision-making and community engagement set out in the Corporate Strategy workstream.

5. Background Papers

None