Report for: Cabinet - 11 November 2025

Item number: 13

Title: Local Government & Social Care Ombudsman Public Report

Report authorised by : Sara Sutton, Corporate Director, Adults, Housing & Health
Fiona Alderman, Director of Legal & Governance (Monitoring Officer)

Lead Officer: Jo Baty, Director of Adult Social Care

Ward(s) affected: All

Report for Key/ Non Key Decision: Non Key Decision

1. Describe the issue under consideration

1.1. The Local Government & Social Care Ombudsman (LGSCO) has issued a public report (Ref: 24 014 203) following an investigation into a complaint concerning Adult Social Care. The Ombudsman upheld the complaint and found fault and injustice relating to delays in responding to safeguarding concerns and shortcomings in complaint handling.

1.2. In accordance with Section 31(2) of the Local Government Act 1974, the Council is required to formally consider the Ombudsman's report and agree its response within three months of publication. This report sets out the findings, actions already taken, and the improvement work underway to address the issues identified.

2. Cabinet Member Introduction

2.1. As a council we recognise the seriousness of the findings in this case. We fully accept that mistakes were made and apologise unreservedly for those errors. We are working tirelessly to improve both our Adult Social Care provision and our complaint handling practice.

2.2. We provide care for thousands of residents every day in Haringey, often supporting people in very challenging and difficult moments in their lives. Feedback in all its forms is a critical tool for understanding how residents and their carers experience that support. It is vital that we learn from complaints and put things right quickly without residents needing to seek the support of the Ombudsman.

2.3. Historic practices have changed fundamentally since the events that gave rise to this case. We no longer have backlog of unread emails and safeguarding concerns are triaged in a timely manner. Relevant staff have received training and complaint handling is being improved.

2.4. The Council is focused on the right things, as set out in this report and also our Adult Social Care Improvement Plan. We are determined to continue to improve how we deliver for our residents and those who care for them.

3. Recommendations:

Cabinet is asked to:

3.1. Note the findings of the Local Government & Social Care Ombudsman's public report (Ref: 24 014 203) Appendix 1.

3.2. Approve the Council's response and endorse the action plan set out in Appendix 2.

3.3. Authorise the Director of Adult Social Care to provide evidence to the Ombudsman of the Council's compliance with the recommendations by 19 November 2025.

3.4. Agree to that further assurance updates will be provided to the Adults and Health Scrutiny Panel

4. Reasons for decision

4.1. The decision will ensure that the Council meets its statutory duty under Section 31(2) of the Local Government Act 1974 to formally consider the Ombudsman's public report within three months of publication.

4.2. The recommendations also provide assurance that the Council is taking appropriate steps to address the issues identified, provide redress to those affected, and strengthen systems to reduce the risk of recurrence.

5. Alternative options considered

5.1. There are no alternative options. The Council is legally required to formally consider the Ombudsman's report and to respond within the required timeframe. It is not mandatory to follow the Ombudsman's recommendations, but it is recommended that the Council does.

6. Background information

6.1. The Ombudsman's public report relates to how the Council communicated and managed safeguarding concerns regarding a resident in 2023/24. The Ombudsman upheld the complaint, finding that the Council could not evidence timely action in relation to safeguarding referrals, and identified shortcomings in the handling of the complaint. The Council has accepted the

Ombudsman's findings and recommendations in full, and formal apologies and compensation payments have been made to those affected.

6.2. The public report was published by the Ombudsman on 2 October 2025. The Council has arranged for the statutory public notices to be placed and for the report to be available at Council offices, in line with legal requirements.

6.3. The Council has already taken forward a number of improvements to strengthen safeguarding arrangements and enhance service delivery since the implementation of the localities model in 2024. This report highlights the actions already completed, and the further work underway to ensure continued progress and accountability.

6.4. Actions completed to date include:

- **Safeguarding Pathway Transformation**: Referral pathways have been redesigned and the safeguarding operating model strengthened
- **Backlog clearance:** We no longer have backlog of unread emails and safeguarding concerns are triaged in a timely manner.
- **Workforce Development**: Staff at the 'Front Door' have received targeted training to improve safeguarding awareness and response times.
- **Governance and Oversight:** Governance and escalation procedures have been enhanced to ensure timely escalation and improved senior-level oversight.
- **Complaint handling:** Implemented a streamlined approach to managing complaints and ombudsman cases within the adult social care service.
- **External Validation:** The Council received a rate of "Good" for the safeguarding theme within the recent Care Quality Commission (CQC) inspection.

6.5. In addition to the actions already completed, further work is underway to ensure sustained improvement and accountability. This includes a formal independent review of our safeguarding service and practice, that is being conducted in partnership with the newly appointed Chair of the Adult Safeguarding Board and will provide an objective assessment of current arrangements, identify further areas for improvement, and inform future service development. The review is expected to be completed by January 2026.

6.6. Further workforce development is also planned, led by the newly appointed Interim Principal Social Worker, with a focus on targeted training and embedding best practice across the service.

6.7. As part of a wider corporate approach to improve complaint handling across the organisation, the Feedback and Resolutions Team are taking proactive steps to improve performance. This includes:

- Quarterly performance presentations the Council Leadership Team (CLT)

Training for staff drawing on the learning from this and other Ombudsman cases

- New triage arrangements implemented to ensure complaints are accurately categorised first time
- Procuring and implementing a new, modern case management system to support improved complaint handling
- Monthly performance reviews with the key services leadership teams, focusing on Ombudsman outcomes, maladministration decisions, reducing upheld complaint rates, and minimising Complaint Handling Failure Orders.

6.8. Implementing organisational change involves not just adjustments to processes, but also a shift in culture. Through our efforts to embed the principles of the Haringey Deal, we encourage staff to prioritise the resident experience and consider their perspectives at the heart of their work. A crucial element of this is improving how feedback is received and acted upon, enabling officers not only to address concerns but also to resolve underlying issues and enhance service delivery.

6.9. The service is committed to learning from this case and ensuring that safeguarding processes are robust, timely, and person-centred and the actions taken specifically in relation to the ombudsman's recommendations in this case are detailed in Appendix 2.

6.10. This report is presented to Cabinet alongside the Adult Social Care Improvement Plan that highlights the wider journey of improvement within Adults Social Care and it is proposed that the report and subsequent assurance updates will be considered by the Adults and Health Scrutiny Panel.

7. Contribution to the Corporate Delivery Plan 2024-2026 High level Strategic outcomes'?

7.1. This work directly supports the Council's priorities around providing high quality, safe, and responsive services for residents, and reflects a commitment to learning from feedback, strengthening safeguarding practice, and improving accountability. The improvement programme contributes to the delivery of the Adult Social Care Improvement Plan, ensuring services are sustainable and trusted by residents.

8. Carbon and Climate Change

8.1. There are no direct carbon or climate change implications arising from this report.

9. Statutory Officers comments (Director of Finance (procurement), Head of Legal and Governance, Equalities)

9.1. Finance

9.1.1. The Council the Council is required to formally consider the Ombudsman's report and agree its response within three months of publication. The Council's action plan and any associated costs have and will continue to be met within Adult Social Care's financial budget envelope.

9.2. Procurement

9.2.1. Strategic Procurement note the contents of this report and confirm there are no procurement related matters preventing Cabinet approving the Recommendations stated in paragraph 3 above.

9.3. Director of Legal & Governance

9.3.1. Under the Local Government Act 1974 (the Act), the LGSCO has the power to investigate the complaint and to issue a report where there has been maladministration causing injustice; a failure in a service that it was the Council's function to provide; and a total failure to provide such service. The LGSCO has the power to make recommendations to the Council on how to improve its services and to put things right for the complainant. However, these recommendations are not mandatory, and the Council does not have to accept or follow them.

9.3.2. Within 2 weeks of receiving the LGSCO's report, the Council is required to give public notice by advertisements in newspapers stating that copies of the report will be available to inspect by the public for a period of three weeks (s.30 of the Government Act 1974).

9.3.3. The Council complied with this requirement.

9.3.4. The Act provides that the report shall be laid before the "authority" for consideration. In the case of a local authority operating executive arrangements, "the authority" includes the Executive which under current governance arrangements means the Cabinet.

9.3.5. Where a finding of 'maladministration' is made the Council's Monitoring Officer is obliged to prepare a report for the Executive following the LGSCO

findings and to consult with the Head of Paid Service and Chief Finance Officer for this purpose.

9.3.6. This report must also be sent to each member of the Council, and the Executive must meet within 21 days thereafter. The Executive is required to consider this Monitoring Officer report on the findings of and response to the LGSCO's report.

9.3.7. Where the Executive considers a LGSCO's report and it is considered that a payment should be made or other benefit given to a person who has suffered injustice, such expenditure may be incurred as appears appropriate (s.31(3) Local Government Act 1974).

9.3.8. Within 3 months of receiving the LGSCO's report or such longer period as may be agreed in writing with the LGSCO, the Council must notify the LGSCO of the action which the Council have taken or propose to take (s.31(2) Local Government Act 1974). If the LGSCO is not satisfied with the action which the Council has taken or propose to take, the LGSCO shall make a further report. The LGSCO can also require the Council to make a public statement in any two editions of a newspaper circulating the area within a fortnight (s.31(2A) and (2D) Local Government Act 1974).

9.3.9. An Ombudsman's report should not normally name or identify any person (s.30 Local Government Act 1974). Therefore, the complainant should not be referred to by name and officers are not identified.

9.4. Equality

9.4.1. The *council* has a Public Sector Equality Duty (PSED) under the Equality Act (2010) to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share protected characteristics and people who do not
- Foster good relations between people who share those characteristics and people who do not

9.4.2. The three parts of the duty apply to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation.

9.4.3. Marriage and civil partnership status applies to the first part of the duty. Although it is not enforced in legislation as a protected characteristic, Haringey Council treats socioeconomic status as a local protected characteristic.

9.4.4. This report is regarding the Ombudsman's public report relating to how the Council communicated and managed safeguarding concerns regarding a resident in 2023/24. The Ombudsman upheld the complaint, finding that the Council could not evidence timely action in relation to safeguarding referrals, and identified shortcomings in the handling of the complaint.

9.4.5. Acknowledgement of the report and implementation of the action plan will have a neutral impact on equalities. Individuals with protected characteristics particularly disability, race, age, and sexual orientation, are disproportionately likely to be referred for safeguarding. This is not due to the characteristics themselves, but because of the systemic inequalities and barriers they may face. Factors like poverty, care experience, and overlapping vulnerabilities can increase exposure to harm. Therefore, failure to respond to the report and implement the action plan would have a negative impact on equalities in Haringey.

10. Use of Appendices

10.1. Appendix 1: LGSCO Public Report (Ref: 24 014 203)

10.2. Appendix 2: ASC Action Plan

11. Background papers

None