

SPSO decision report

Case: 201300210, Glasgow Housing Association
Sector: housing associations
Subject: applications, allocations, transfers & exchanges
Outcome: not upheld, no recommendations

Summary

Ms C, an advocate, complained on behalf of her client (Miss A) about the way the housing association dealt with her application for housing, including that other tenants had been allocated properties not in accordance with the allocations policy; and that the association did not assess Miss A's medical priority in line with their policy.

Miss A had young children, and lived in a property with stairs. After a pregnancy in 2010, she was advised not to lift anything heavy for three months and to take it easy for a year. She, therefore, found it difficult to carry the childrens' pushchair up and down the stairs. As a result of this, and other medical conditions from which she suffered, Miss A became isolated. In 2011 she applied for a larger, ground-floor property, which was considered under the association's housing allocation policy in force at the time. She was allocated to a queuing group for two- and three-bedroom properties for tenants regarded as living in overcrowded conditions. Ms C was concerned that another tenant, in a similar situation to Miss A, had said publicly that she had been rehoused, and also that other tenants had been rehoused ahead of Miss A in properties suitable for Miss A.

In mid-2012, Miss A also applied for medical priority points but that application was refused. Miss A was, however, advised that if the Department of Work and Pensions approved her application for disability living allowance (DLA) this could be reconsidered. In January 2013 she asked for a review of the decision on her medical priority and as she had been granted DLA in June 2012, the association granted Miss A medical priority points from then. Their housing allocation policy was then revised in April 2013. At the time of making the complaint to us, Miss A had still not been successful in being rehoused.

Our investigation found that Miss A's various applications, including the original application for medical priority, were correctly considered under both the old and current allocations policies. Miss A had correctly been put into a queuing group for tenants waiting for rehousing due to overcrowding. When she was granted medical priority points, her grouping was changed to that for a medical priority. We were unable to comment on the allocations of housing to other tenants but overall found no evidence that Miss A's applications were not dealt with appropriately under the relevant policies.

We were, however, critical of the fact that when at one point the association told Miss A about a housing decision, they gave her insufficient explanation of the reasons for that decision. The association also acknowledged during our investigation that the wording of their policy was not as clear as it could be in some areas and they intended to revise it. Therefore, although we did not uphold the complaint and did not make any recommendations, we asked them to bring the requirement to provide clear explanations for decisions to tenants to the attention of staff making decisions on allocations. We also asked them to let us know when the allocations policy has been revised.