

# SOCIAL CARE COMPLAINTS REPORT

April 2024 – March 2025



# Glasgow City Health and Social Care Partnership

## Social Care Complaints Report

**April 2024 – March 2025**

### *Index*

<i>Section 1</i>	<i>Executive Summary</i>	<i>3</i>
<i>Section 2</i>	<i>Complaints processes and report format</i>	<i>5</i>
<i>Section 3</i>	<i>Statistical information and commentary</i>	<i>7</i>
<i>3.1</i>	<i>Overall volume and volume by stage</i>	<i>7</i>
<i>3.2</i>	<i>Timescales overall and by service area</i>	<i>13</i>
<i>3.3</i>	<i>Complaints by client group overall and by service area</i>	<i>16</i>
<i>3.4</i>	<i>Complaints by issue</i>	<i>18</i>
<i>3.5</i>	<i>Complaint outcomes</i>	<i>22</i>
<i>3.6</i>	<i>Stage 3 Referrals to Scottish Public Services Ombudsman</i>	<i>25</i>
<i>3.7</i>	<i>Service Improvements / customer outcomes</i>	<i>30</i>
<i>3.8</i>	<i>Complaints Service Developments</i>	<i>45</i>

## Section 1 Executive Summary

- 1.1 This report covers complaints about social care services in the period April 2024 – March 2025 considered under the appropriate complaint procedure for Social Work Services. This consists of three stages of: Stage 1: 'Front-line resolution' (timescale 5 working days that may be extended to a maximum of 10 working days in certain circumstances); Stage 2: formal Investigation and written response (timescale 20 working days); Stage 3: Scottish Public Services Ombudsman (independent review that may lead to formal investigation, decision and recommendations or to a decision not to take matters further).
- 1.2 Figures are given separately for Social Work (including Homelessness) and Care Services complaints (primarily home care) as these are processed within two different recording systems.
- 1.3 Development continues on an integrated complaints recording solution, and we are currently working to a 'go-live' date of 26<sup>th</sup> November 2025 and the introduction of the new complaints system in 2025 will have a significant impact in terms of improving management information around all complaints.
- 1.4 Volumes of Social Work complaint activities increased in 2024/25, rising by 14% from 676 in the previous year to 769. As it remains impossible to link Stage 1 and Stage 2 complaints from data available, for clarity in this year's report Stage 1 and Stage 2 are identified as complaint activities, as opposed to complaint cases – once the new recording system is in place, reporting will be focussed on complaint cases.
- 1.5 Care Services Stage 1 complaints decreased by 35% from 445 to 290.
- 1.6 There has been little change in the distribution of Social Work complaints proportionately between the localities, with the most notable increases in complaints activity relating to Subject Access Request delays and Homelessness issues. Almost all Care Services complaints focus on Home Care, with more in South locality than the other localities, in line with the greater population and scope of services in South area.
- 1.7 Performance against timescale for stage 2 investigations of complaints has improved very slightly in 2024/25, from 61% in the previous year to 62%. While not a significant increase in compliance, and below the target of 70% compliance, current rate of compliance is attributed to the high volume of Stage 2 complaints, and also to the ongoing challenge of the volume of work unrelated to complaints handled by the team in relation to the Subject Access process. Significant additional resource has now been secured and introduced, however the focus of staff will remain on Subject Access Request processing until sufficient progress has been made in that regard, and so this additional resource is not projected to significantly impact on Stage 2 compliance in Qs 3 and 4 of 2025/26.
- 1.8 Timescales for Stage 1 complaints were not met for Social Work complaints in any area of the city, except North East. 57% of these were in time across GCHSCP, down slightly from 58% the year before. The target was, therefore, not met for complaints across both stages, with only 59% of all responses being within deadline, broadly consistent with the previous reporting year.

- 1.9 Section 3.3 summarises the particular client groups submitting complaints, with the majority of complaints relating to Children and Families involvement – this is typical, and directly related to the general dissatisfaction that many complainants feel towards social work involvement in their family lives. Complaints from those in the Homelessness Client Group remain high.
- 1.10 The significant number of complainants in the ‘Not Known’ client group primarily relate to complaints regarding delays to Subject Access Request processing – these complainants may not be current service users, or even where they are, any current SWS involvement is not ordinarily relevant to the matter complained about, and therefore these complainants will not generally be logged as belonging to one of the recognised client groups.
- 1.11 Section 3.4 summarises the main issues raised by service users across social work complaints and across care services complaints.
- 1.12 For Care Services the top three issues were quality of service, failure to arrive and competency of staff, which is consistent with previous years. Complaints about failure to arrive have dropped noticeably from 112 in 2023/24 to 51. Complaints about staff competency have also decreased noticeably, from 64 to 33.
- 1.13 Care Services carried out over 4.2 million visits during 2024/25, so less than 0.01% of care visits generated any sort of complaint.
- 1.14 30% of Social Work complaints have been upheld or partially upheld in 2024/25, consistent with figures from the preceding year. Care Services complaints upheld or partially upheld have increased slightly, from 62% to 65%.
- 1.15 25 cases were considered by the Scottish Public Services Ombudsman (SPSO) at stage 3 of the complaints process. Case summaries and outcomes are presented at section 3.6 of this report. None of the cases considered by the SPSO were upheld, although three await the final decision of the SPSO.
- 1.16 That each case that reached Stage 3 during 2024/25 and has been concluded was either not upheld, or not taken further by the SPSO following initial assessment, which equates to agreement with the stage 2 response issued to the complainant generally gives reassurance that the internal complaints process is functioning correctly, both in relation to the small percentage of complaints that reach the SPSO, and the small proportion of those that lead to any action by the SPSO.
- 1.17 One further case, first raised with the SPSO in 2021, was finally concluded during 2024/25 and details – appropriately anonymised – are included at the end of Section 3.7.
- 1.18 For social work complaints that were upheld at any stage, there is good evidence that actions were then taken to offer redress to complainers and/or to improve services or processes. These were largely confined to improvements at an individual case level, but were nevertheless important from the customer’s perspective, often involving increased financial and other support, improved engagement or the expediting of services. Relevant actions are listed in full at section 3.8.

- 1.19 In addition to the detailed report on complaints performance, some additional context and information in relation to the development activity of the Complaints, FOI and Investigations team is summarised at Section 3.9.



## Section 2 Complaints Processes and report format

This report covers social care (Social Work, Homelessness and Care Services) delivered by GCHSCP during the period April 2024 to March 2025. Operational Care Services subsume home care and related services, together with Day Care and Residential Services.

During 2024/25 these complaints were all subject to the model Complaints Handling Procedure, as directed by the Scottish Public Services Ombudsman Complaints Standards Authority. This involves three stages of complaint:

- Stage 1: 'Front-line resolution'. This has a timescale 5 working days that may be extended to 10 working days at the discretion of the service manager or with the agreement of senior staff in the Complaints, FOI and Investigations Team, if there is valid reason to do so. Complaint responses under this part of the process are composed and issued locally, either verbally or in writing.
- Stage 2: Formal Investigation. This has a timescale 20 working days and always involves written response. This part of the process is managed entirely by the central Complaints, FOI and Investigations Team (CFIT), who are responsible for fully investigating and responding to these complaints. Stage 2 may follow from an unresolved Stage 1 complaint, or one that is not responded to within appropriate timescales. A complaint may also be immediately escalated to Stage 2 based on complexity or seriousness of complaint.
- Stage 3: Scottish Public Services Ombudsman (SPSO) review. This is an independent review with no fixed timescale that may or may not lead to further formal investigation, decision and recommendations by that body.

Due to arrangements predating the transfer of Home Care and some related services from Cordia to GCHSCP, administration of complaints about those services has continued to be managed at Stage 1 of the process by Operational Care Services management, within their own systems. Because of this difference in management and recording, data is presented separately within this report for Home Care services and for Social Work and Homelessness complaints.

As previously reported, current recording arrangements replaced by the Granicus system which will be a common complaints recording system across GCC. In the previous year's report, it was noted that the estimated date for the introduction of this new complaints handling system would be during Q1 or Q2 in 2025/26, significantly later than the 1<sup>st</sup> April 2024 date predicted in the annual report for 2022/23. This has been subject to some further delay, however now has an agreed start date of 26<sup>th</sup> November 2025. CFIT staff have been directly involved in the development of the system to ensure the new system meets requirements.

The introduction of the new Contact us system will eliminate any inconsistencies in producing reports on complaints received and resolved. All complaints received will be recorded as a single case, in line with SPSO requirements, with each stage of any multi-stage complaint registered within that single case record, removing the necessity to log each stage of a multi-

stage complaint as a single 'complaint' in its own right. The ability to report on volumes of complaints activities at each stage will be retained.

In this report, Care Services Stage 1 complaint figures are produced by Operational Care Services staff. Social Work and Homelessness figures are produced via reporting arrangements based on C4 data records. Figures are presented on overall activity, timescales, client group, issue and outcome for the HSCP as a whole and by four localities - North West, North East, South and Centre. While Social Work and Care Services complaints are often complex, complaints are assigned to a primary service area and primary complaint issues only.

There are separate sections on third stage complaints considered by the Scottish Public Services Ombudsman (SPSO) and on service improvements for the Social Work complaints and those Care Services complaints dealt with by the central team at second and third stage.

## Section 3 Statistical information and commentary

### 3.1 Overall volume and volume by stage and locality

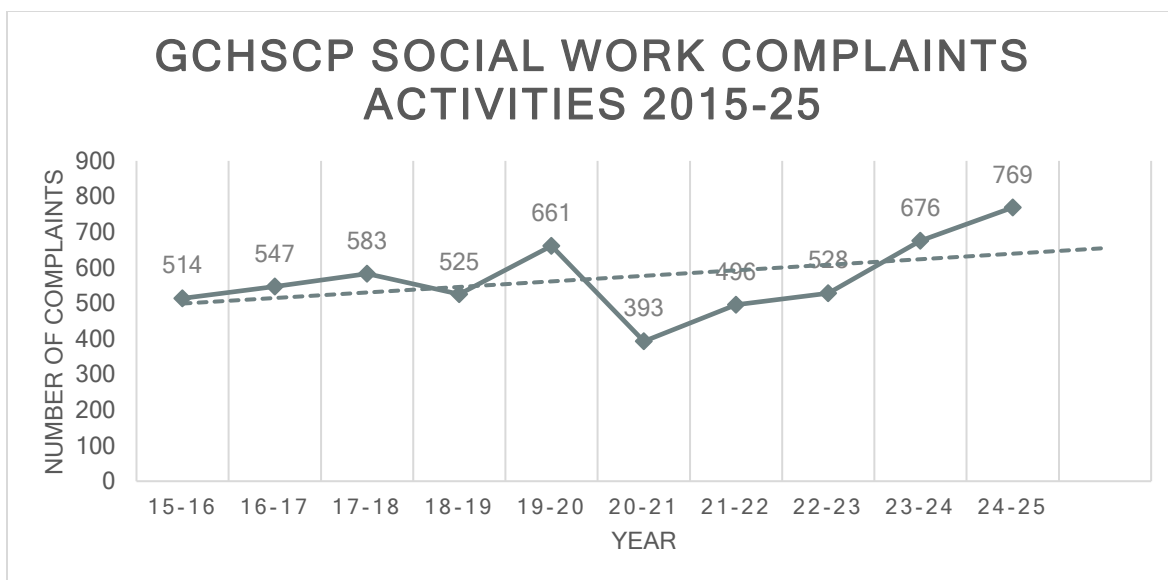
In all previous years, total volume of complaints were reported as the total of all Stage 1, Stage 2 and Stage 3 complaints with each recorded as a separate complaint for purposes of assessing volume. Currently, the recording system does not allow us to identify where a single complaint case has proceeded through all three stages of the complaints handling process, and so we are unable to provide a clear record of the total complaint cases, whereby a complaint case may consist of any of the following combinations:-

- Stage 1 only
- Stage 1 and Stage 2
- Stage 2 only
- Stage 1, Stage 2 and Stage 3
- Stage 2 and Stage 3

Absent the ability to provide a total number of complaint 'cases', and for the purposes of comparison to previous years, the total number of complaint 'activities' is recorded below. A complaint activity is defined as either a Stage 1 action, a Stage 2 action, or a Stage 3 action.

769 complaints were received in relation to Social Work and Homelessness services in 2024/25, a 14% increase on the previous year, and the highest total over the last decade. Chart 1 below shows the 10-year trend in complaint activities received and actioned by the Complaints, FOI and Investigations Team.

**Chart 1: Trend in total Social Work complaints activities across all stages 2015-2025**



The continued increase in received complaint activities now means that volumes of complaint activities have exceeded 'pre-pandemic' levels.



Of the 769 complaint activities, 333 (43%) were dealt with at Stage 1 (local resolution) and 411 (53%) at Stage 2 (formal investigation). 25 (3%) were Stage 3 complaints referred to CFIT by SPSO. There has been a substantial increase in Stage 2 complaint activities, both as a count and as a percentage share over the previous year. The proportion of Stage 2 complaint activities has almost returned to the same level as 2022/23, when it had reached 55%, however the total number of Stage 2 complaint activities has now reached the highest level recorded.

**Table 1: SWS Stage 1 and 2 Complaints by service area and locality 2024-2025**

Locality	Stage 1	Stage 2	Total
Centre	150	194	344
North East	53	51	104
North West	33	46	79
South	82	83	165
Care (non-HCS)	15	37	52
<b>Total</b>	<b>333</b>	<b>411</b>	<b>744</b>

'Centre' encompasses a range of teams. These are set out below in order of decreasing volume.

- **Homelessness** – not including fieldwork (done by the area teams) but including prison throughcare, TADS, HAC and emergency accommodation, Asylum and refugee support: **Complaints = 135** (increase from 109)
- **Business Development** – including the CFIT team and welfare rights: **Complaints = 79** (up from 50)
- **Finance** - including issues of invoicing, deprivation of assets and agreement of DRE waivers: **Complaints = 45** (up from 22)
- **Social Care Connect** – Service replacing the former Social Care Direct: **Complaints = 42** (down from 46)
- **Children and Families** – including fostering and adoption and some residential care: **Complaints = 32** (up from 22)
- **Centre Criminal Justice** – including Prison-based SW, MAPPA and specialist resources: **Complaints = 5** (down from 8)
- **Addictions** - **Complaints = 3** (down from 4)
- **Standby/Out of Hours** – **Complaints = 3** (no increase)
- **Centre Residential care** - Not including homecare etc: **Complaints = 0** (down from 3)

The Business Development group includes 28 complaints relating to delays in the handling of subject access requests (SAR), matching the previous year, each of which were upheld or partially upheld. The team continue to prioritise SAR activity, however there is a current

backlog of over 800 cases, and many of these are significantly overdue and are generating complaints activity – these cases are resource intensive to resolve, and so further dissatisfaction in relation to failures in this area is expected until the backlog can be cleared and demand returns to ordinary levels.

Homelessness complaints continue to increase, which is within the context of the housing emergency declared by the Council in late 2023, and with Glasgow acting as the main dispersal city in Scotland for successful asylum seekers, as well as historic problems with a shortage in social housing and unaffordable costs of private rent in the City. There is also a charity actively responsible for generating a high volume of Homelessness-related complaints activity. Homelessness Services continue to develop their strategy to address Homelessness in the City.

For Care Services 290 new Stage 1 complaints were received and managed locally where they were accepted as complaints within procedure and responded to, a substantial decrease from the previous year where 445 Stage 1 complaints were recorded. In addition, of the 411 Stage 2 complaints handled by CFIT, 37 were complaints relating to Care Services, for a total of 327 complaint activities across both Stage 1 and Stage 2 for the year.

The Care Services complaints are broken down by service area/locality in Table 2, below. Complaints are focussed on Home Care, as has been the case in previous years, with very few complaints about the Alarms service. The highest proportion of complaints were in South Glasgow, consistent with figures for the previous four years, however this area represents the largest Home Care Service in terms of geography, number of service users\* and staff so a higher number of complaints in South is proportional to scope of operations.

**Table 2: Care Services Complaints by service area and locality 2024-2025**

Valid Care Services complaints 2024-25		
Service Area	Count	%
Alarms	14	5
Assessment Team	4	1
Home Care - North East	80	28
Home Care - North West	87	30
Home Care - South	104	36
Operations	1	<1
<b>Total</b>	<b>290</b>	

\*additional demographic information is available separately for the period ending March 2024, in reports that can be found at: <https://glasgowcity.hscp.scot/performance-and-demographics>. At time of writing, this is the most recent Demographics and Needs Profile report.

### 3.2 Timescales overall and by service area

The performance targets for complaint handling is that 70% of complaint activities should be dealt with within the specified time period for each stage. That is a standard of 5 working days for Stage 1 (or up to 10 working days with local management approved extension) and 20 working days for Stage 2. There is no set timescale for resolution at Stage 3, as that is a matter for SPSO, so Stage 3 complaints are excluded from the figures given in this section.

195 of 320 Stage 2 complaints (61%) were responded to on time during 2023/24. In 2024/25, 253 of 411 Stage 2 complaints (62%) were responded to on time

In percentage terms, this appears only to be a slight increase in performance, however while the number of complaints responded to within time had remained roughly constant over the preceding three years, in 2023/24 we saw an increase of 9.6% in terms of complaints responded to within timescale and in 2024/25 we have achieved a further 30% increase. The overall number of Stage 2 complaints, however, has also increased by 28%. This increase in complaints performance is despite the competing demands on the resources available to the team, and reflects an exceptional effort on the part of the Senior Officers and Principal Officer within the team. The serious and ongoing impact of the exponential increase in the number and rate of Subject Access Requests (SARs) being received by the team has persisted throughout 2024/25 and so within this context, the increase in the volume of Stage 2 investigations completed within time is a marker of the success of the combined efforts of the team, within increasingly challenging contexts, despite still falling short of the target of 70% for the third year running.

Table 3 shows the performance against timescale for Stage 1 complaints by locality. The target of 70% of complaints responded to within the relevant time was not met for GCHSCP, with only 57% of Stage 1 complaints responded to within timescale.

**Table 3: Timescales for social work complaints at stage 1 by locality 2024/25**

Locality	Within time		Total Stage 1
	n	%	n
Centre	100	61	165
N. East	39	74	53
N. West	14	42	33
South	36	44	82
Total	189	57	333

For two consecutive years, no areas met the 70% target, however as noted above, North East did exceed target in 2024/25. There remains a failure to apply the extension available to stage 1 complaints in all cases, and this has been consistent since the introduction of this facility, and CFIT continue to look to encourage locality use of this facility to increase the number of complaints that are responded to within appropriate timescales.

As only 442 of the 744 total complaints activities across Stage 1 and Stage 2 (59%) were responded to in time, the target was not met overall. Stage 3 (SPSO) complaints are excluded from these figures as they have no indicative timescale.

It has previously been suggested that, if local managers wish to improve complaint performance they must either turn around Stage 1 complaints more quickly, or apply appropriate extensions in line with the terms of the Complaints Handling Procedures, or both. A further option for local managers to consider to improve Stage 1 performance is whether or not Stage 1 complaints allocated to them are, in fact, appropriate for frontline resolution.

As noted at section 3.8, below, CFIT have now developed a new guide to Stage 1 complaints handling to further assist frontline staff and their managers. This has been published directly to the new Staff Updates intranet resource to ensure all staff can access the most current guidance on this process, alongside additional resources to support effective complaints handling.

The overall performance for Stage 1 Care Service complaints was that 86% of complaints were dealt with in time, with every area of Care Services meeting the target of 70%. Table 4 below shows the stage 1 timescale compliance for individual Care Service teams.

**Table 4: Timescale compliance for care services complaints by service area 2024/25**

Stage 1 Valid Care Services complaints 2024/25	
<b>Service Area</b>	<b>% in time</b>
Alarms	71
Assessment Team	100
Home Care - North East	81
Home Care - North West	95
Home Care - South	83
Operations	100

### 3.3 Complaints by client group overall and by locality

Table 5 below first gives a summary of complaints by client group and then by client group for each locality. Not known (NK) is used where the complainant is not a service, user, or where the complaint does not relate to services used by the complainant, and in other circumstances where no suitable client group can be correctly applied. There is no client group breakdown for Care Services Stage 1 complaint activities processed by Care Services, as the client group is broadly consistent across Care Services complaints, where almost all complainants will be older people and adults with disabilities, or their representatives, however some classification takes place in relation to centrally-processed Care-related complaint activities.

**Table 5: Comparison of S1/S2 social work complaints by client group and locality 2024/25**

Client group	Locality					
	Centre (inc Centre Care)	North East	North West	South	Care	Total
Addictions	3	1	1	5		10
Children and Families	40	51	29	59		179
Criminal Justice	8	2	3	5		18
Homelessness	129	5	3	14		151
Learning Disability	4	12	7	14	1	38
Mental Health	10	7	8	14	2	41
Older People	46	12	10	31	42	141
Physical Disability	13	8	10	9	3	43
Not known	91	6	8	14	4	123
Total	344	104	79	165	52	744

### 3.4 Complaints by issue

The number of issues ordinarily exceeds the number of complaints, as complaints can be logged as related to more than one issue, although this can be complex to accurately capture with current recording limitations. As such, 'issues' do not map directly to numbers of complaints received. There is a degree of subjectivity involved by complaints handlers in categorising these issues.

Social work and homelessness complaints are categorised into thirteen separate headings in four groups. Care Services have 15 categories, reflecting the difference in the nature of services provided.

Tables 6 and 7, below, show the relative percentage of each issue as a percentage of all issues and compares them with annual figures 2023/24, first for Social Work and Homelessness and then for Care Services.

**Table 6: Main social work issues complained of 2024–25 compared with 2023-24**

Issue	2024/25	% 2024/25	2023/24	% 2023/24
<b>Finance</b>	<b>47</b>	<b>6</b>	<b>26</b>	<b>4</b>
<b>Policy</b>	<b>6</b>	<b>1</b>	<b>10</b>	<b>2</b>
Attitude/conduct of staff	220	26	238	36
Lack of response to customer	134	16	196	30
Poor information or communication	87	10	49	8
Breach of confidentiality/privacy	15	2	12	2
Discrimination or breach of Human Rights	19	2	11	2
Poor quality of service	122	14	82	13
Poor level of service	14	2	13	2
Short-term wait issues	2	<1	1	<1
Long-term delay issues	71	8	32	5
Procedures not followed by SWS	88	10	44	7
Service refused or withdrawn	28	3	14	2
<b>Total of main issues</b>	<b>853</b>		<b>656</b>	



A high proportion of complaints focussing on issues related to staff (particularly around staff attitude, lack of response to customer, or information/communication issues) is a typical feature of social work complaints. The fact such complaints are made should not be assumed to indicate generally unacceptable performance or personal conduct on the part of staff. There is a tendency on the part of some service users to focus their complaints on the person with whom they are engaging, even if the circumstances to which they are objecting stem from policy and procedure or decisions and actions taken collectively. This is particularly true in cases where the relationship is an enforced one such as in criminal justice, child and adult protection cases. It remains the case that the majority of such complaints are not upheld.

It is not currently possible to make a definitive link between issues and outcomes with available reporting arrangements as systems do not allow for outcomes to be mapped directly to issues – for example, where a complaint covering three issues (e.g. attitude or conduct of staff; lack of response to the customer; and a financial issue) is partially upheld, current recording and reporting arrangements do not allow us to identify which element or elements of the complaint were the matters which were upheld and which were not. Given that many complaints are identified by either complainant or staff as relating to staff conduct when they might be more accurately considered relating to the policy or processes that staff are required to adhere to, it is likely that this figure is exaggerated.

Complaints regarding both quality of service, delays and failures to properly follow procedure have risen significantly and while the majority of these have not been upheld, the significant increases mean there are more upheld complaints regarding these matters than in previous years. Many of the complaints in relation to delays relate to delays in processing Subject Access Requests – an issue that is known, recognised and which is being addressed – and so these complaints are generally upheld.

**Table 7: Care Service complaints by issues 2024/25, compared with 2023-24**

<b>Issue</b>	<b>N 2024/25</b>	<b>% 2024/25</b>	<b>N 2023- 24</b>	<b>% 2023- 24</b>
Arrived Late	10		4	0.9
Failed to arrive	51		112	25.2
Fail complete tasks	0		5	1.1
Failure to stay allocate time	0		2	0.4
Quality of service	129		198	44.5
Level of service	35		8	1.8
Consistency of care	0		17	3.8
Staff attitude	27		33	7.4
Staff competency	33		64	14.4
Breach of confidentiality	1		3	0.7
Vehicle issues	4		8	1.8
Organisational policy	0		0	0
Poor comms/info	0		0	0
Lack of information	0		0	0
Not classified	0		0	0
<b>Total issues addressed</b>	<b>290</b>		<b>454</b>	

### 3.5 Complaint outcomes

Table 8 below shows the outcomes of Social Work complaint activities in terms of whether they were upheld for Stages 1 and 2. Table 10, below, shows the outcomes for Care Services. Third stage SPSO complaint outcomes for GCHSCP as a whole are given in section 3.6. Complaints that do not complete the process are those that are withdrawn, repeated or vexatious complaints, those addressed through other processes (claims, legal, HR, Child and Adult Protection) or fall within the complaints procedure of a different body. These can be considered a specific category of 'Not Upheld' complaints, in that they are not valid and cannot be upheld. They are equivalent to those that are recorded as 'withdrawn/invalid' for Care Services.

**Table 8: Social Work Complaints Outcomes 2024/25 compared to 2023/24**

<b>Outcome</b>	<b>2024/25</b>	<b>2023/24</b>
Transfer To Other Process	7	6
Not Accepted	61	68
Informally Resolved	24	8
Not Upheld	389	344
<b>Partially Upheld</b>	<b>122</b>	<b>126</b>
<b>Upheld</b>	<b>99</b>	<b>71</b>
Withdrawn	11	8
None (failed to respond)	31	27
<b>Total</b>	<b>744</b>	<b>658</b>

Where locality teams fail to respond within a reasonable timescale and without reasonable explanation, complaints may be closed as having no outcome – these complaints are then escalated to Stage 2 for response by CFIT due to the locality failure to respond. Failure to respond may also very occasionally be an outcome noted for outstanding extended Stage 2 complaints not resolved by the reporting deadline.

Table 9, below, provides the breakdown of outcomes per team.

**Table 9: Social Work Complaints Outcomes 2024/45 per team**

<b>Outcome</b>	<b>Centre</b>	<b>Home Care</b>	<b>North East</b>	<b>North West</b>	<b>South</b>	<b>Sum</b>
Transfer To Other Process	6			1		<b>7</b>
Not Accepted	34		8	8	11	<b>61</b>
Informally Resolved	13	2	3	1	5	<b>24</b>
Not Upheld	144	31	64	44	106	<b>389</b>
Partially Upheld	50	10	22	14	26	<b>122</b>
Upheld	71	6	5	7	10	<b>99</b>
Withdrawn	9	2				<b>11</b>
None	17	1	2	4	7	<b>31</b>
<b>Total</b>	<b>344</b>	<b>52</b>	<b>104</b>	<b>79</b>	<b>165</b>	<b>744</b>

For 2023/24, the proportion of complaint activities with either an ‘upheld’ or ‘partially upheld’ outcome – meaning some kind of failure was identified – was 30%. This rate has been maintained for 2024/25. However, it should be noted that only a very small number of complaints have been fully upheld across each of the locality areas – between five and ten complaints in each area – and the bulk of fully upheld complaints activity sits with Centre. Much of this upheld complaint activity related to delays in Subject Access Request processing, with the second most common area of complaint relating to Homelessness services.

There has been an increase in the number of complaints that have been informally resolved, suggesting that additional guidance on this route to complaint resolution that has been provided to area teams has been beneficial. While informal resolution is a viable outcome at any stage of the complaint handling process, it is most likely to be appropriate and effective at Stage 1. New formal guidance published to the staff intranet includes reinforces the messaging around this useful route to resolution.

As noted above, limitations on reporting from the outdated complaints systems currently in use mean it is not possible at present to link outcomes (which are linked to overall complaints rather than specific issues) to issues complained about, which are logged in a manner that allows us to report on them to a degree but not in adequate detail. Our incoming complaints handling system will allow us to report in a more detailed way around outcomes and issues.

**Table 10: Care Services Complaints Outcomes 2024/25**

<b>Service Area</b>	<b>Upheld</b>	<b>Not Upheld</b>	<b>Partially Upheld</b>	<b>Total</b>
Alarms	7	6	1	14
Assessment & Review	0	3	1	4
North East	40	15	25	80
North West	33	39	15	87
South	50	39	15	104
Ops	1	0	0	1
	<b>131</b>	<b>102</b>	<b>57</b>	<b>290</b>

Table 10 above shows Care Services Stage 1 complaints by outcome overall and by service area for 2024/25. Care Services generally uphold or partially uphold around 60% of Stage 1 complaints received, although in 2023/24 this was 62% and has now risen to 65%.

South area represents around 40% of the overall service delivery, and so it would be reasonable to expect slightly higher numbers of complaints and upheld complaints – 38% of upheld complaints were in South area, which is consistent with the demographics. This is an improvement over last year, where there were a significantly higher number and proportion of upheld complaints in South area related to significant staffing challenges during 2023/24. This included a high absence rate and recruitment challenges, with low numbers of suitable candidates available during recruitment exercises. In response to these issues, Care Services implemented a new recruitment plan and worked with the Wellbeing & Attendance Team and have seen improvement in both absence and recruitment rates as a result, and this has now been reflected in improved complaints figures.

### 3.6 Stage 3 Referrals to Scottish Public Services Ombudsman (SPSO)

Across Social Work, Care Services and Homelessness Services, 25 complaints were recorded as being referred to the SPSO during 2024/25, up from 18 in the previous reporting year. A longstanding case from a previous year was also concluded, and detail is provided below.

The disposition of these cases is as below followed by a brief summary of each case. No Stage 3 complaint activities first raised with the SPSO during 2024/25 were upheld by the SPSO following investigation, although three cases remain open awaiting SPSO decision. In each concluded case, the SPSO decided not to take the matter further following either a preliminary screening assessment, or a brief investigation and consideration of the response already issued by the Complaints, FOI and Investigations Team. In the majority of cases, the SPSO recognised that the Stage 2 response issued by GCHSCP has been satisfactory and nothing further could be achieved by SPSO investigation, with the remaining cases being refused by the SPSO as inappropriate for their consideration either due to time passed since events complained about, or failure on the part of the complainant to exhaust the GCC complaints process before attempting to progress to the Stage 3, or because the complaints themselves were demonstrably unreasonable in the view of the SPSO.

The fact that so few complaints are escalated to SPSO and that none of those that have been escalated to Stage 3 during 2024/25 were upheld, is a strong indication that the second stage of the process is generally operating in correct manner - identifying failings and offering redress when these are accepted and otherwise stating a full and well-evidenced rebuttal of the complaint.

---

#### **Case A:** SPSO Ref 202309373

**Summary of Case:** A complaint regarding service quality from Care Services.

**SPSO Findings/Outcome:** Not taken further by SPSO as prematurely escalated to them by complainant – no Stage 2 response had yet been issued.

---

#### **Case B:** SPSO Ref 202308979

**Summary of Case:** Dissatisfaction with social work services response to allegations made against ex-partner, and with other actions taken by SWS in relation to complainant's own behaviour.

**SPSO Findings/Outcome:** SPSO decided not to investigate on the basis that the matters raised are time-barred

---

**Case C:** SPSO Ref 202308230

**Summary of Case:** Complaint about Adult Support and Protection (ASP) processes.

**SPSO Findings/Outcome:** SPSO not taking complaint further, determining that the HSCP's response accurately explained the process in relation to reporting and investigating safeguarding concerns.

---

**Case D:** SPSO Ref 202308739

**Summary of Case:** Complaint regarding decision to take into account Independent Living Fund aware in relation to the funding of care.

**SPSO Findings/Outcome:** SPSO decision outstanding.

---

**Case E:** SPSO Ref 202210928

**Summary of Case:** Complaint regarding North East Alcohol & Drug Recovery Service, however this related to nursing staff and was therefore referred to NHSGG&C processes.

**SPSO Findings/Outcome:** SPSO decision outstanding.

---

**Case F:** SPSO Ref 202402544

**Summary of Case:** Complaint regarding refusal to install wet-room to a property where complainant was awaiting rehousing.

**SPSO Findings/Outcome:** SPSO declined to take further action on the basis that the Stage 2 response had been appropriate.

---

**Case G:** SPSO Ref 202310978

**Summary of Case:** Complaint regarding HSCP response to safeguarding concerns raised in relation to the complainant's mother.

**SPSO Findings/Outcome:** SPSO declined to take further action on the basis that the Stage 2 response had been appropriate.

---



**Case H:** SPSO Ref 202403342

**Summary of Case:** Complaint regarding the loss of personal items from temporary accommodation, which had been disposed of following the complainant's admission to prison and related failure to make provision for storage of same.

**SPSO Findings/Outcome:** SPSO declined to take further action on the basis that the Stage 2 response had been appropriate.

---

**Case I:** SPSO Ref 202400445

**Summary of Case:** Complaint regarding kinship care placement, and aspects of support provided to complainant and their child.

**SPSO Findings/Outcome:** SPSO confirmed that they were not taking the matter further as the matter was considered time-barred.

---

**Case J:** SPSO Ref 202403930

**Summary of Case:** Complaint regarding issues with service from Homelessness.

**SPSO Findings/Outcome:** SPSO declined to take further action on the basis that the Stage 2 response had been appropriate.

---

**Case K:** SPSO Ref 202402810

**Summary of Case:** Complaints regarding assessment and support for service user.

**SPSO Findings/Outcome:** SPSO declined to take further action on the basis that the Stage 2 response had been appropriate, but did provide feedback in relation to communication.

---

**Case L:** SPSO Ref 202405500

**Summary of Case:** Complaint regarding SWS response to direct payment funding that had been spent inappropriately.

**SPSO Findings/Outcome:** SPSO determined that no further action required as Stage 2 response was reasonable.

---

**Case M:** SPSO Ref 202406995

**Summary of Case:** Complaint related to the disposal of personal items.

**SPSO Findings/Outcome:** SPSO determined that the complaint was time-barred and therefore that they would not consider the matter further.

---

**Case N:** SPSO Ref 202404439

**Summary of Case:** Complaint regarding an alleged data breach from a repeat complainant.

**SPSO Findings/Outcome:** SPSO to take no further action, as Information Commissioner's Office would be the appropriate body to consider data breach reports.

---

**Case O:** SPSO Ref 202404432

**Summary of Case:** A multi-point complaint from a repeat complainant regarding care arrangements and multiple issues with assessment process and decision making.

**SPSO Findings/Outcome:** The SPSO concluded that they would not take the matter further as the complainant had no authority to pursue matters on behalf of the service user without the agreement of the service user's Attorney.

---

**Case P:** SPSO Ref 202406027

**Summary of Case:** Complaints made regarding alleged domestic abuse instances reported to have been perpetrated by a member of staff against the complainant.

**SPSO Findings/Outcome:** The SPSO concluded that the response by SWS had been reasonable and no further action was required on the part of either SPSO or SWS, given the matter of complaint was a private matter and did not relate to service delivery.

---

**Case Q:** SPSO Ref 202401544

**Summary of Case:** Complaint regarding communication with complainant and alleged neglect by services during a period of homelessness.

**SPSO Findings/Outcome:** SPSO determined that no further action required as Stage 2 response was reasonable.

---

**Case R:** SPSO Ref 202404388

**Summary of Case:** Complaint regarding communication and care of elderly service user, and about the attitude of staff involved in service user's care.

**SPSO Findings/Outcome:** SPSO decision was that no further action was necessary as SWS complaint handling had been appropriate.

---

**Case S:** SPSO Ref 202409479

**Summary of Case:** Complaint regarding processes and actions taken in relation to a child protection case, in the context of the complainant no longer having care of their own children.

**SPSO Findings/Outcome:** SPSO decision was that no further action was necessary as SWS complaint response had been reasonable, although feedback provided to complaint handler regarding adopting an empathetic approach to such complaints.

---

**Case T:** SPSO Ref 202406006

**Summary of Case:** Complaint regarding access to free personal nursing care for elderly service user.

**SPSO Findings/Outcome:** Awaiting SPSO decision.

---

**Case U:** SPSO Ref 202409619

**Summary of Case:** Complaint regarding refusal of SWS to allow complainants to employ family members as carers, and refusal to approve funding for treatment at overseas resort.

**SPSO Findings/Outcome:** SPSO determined that no further action required as Stage 2 response was reasonable. The SPSO agreed that there was no assessed need for the service user to travel abroad to receive services in the resort in question.

---

**Case V:** SPSO Ref 202405683

**Summary of Case:** Complaint regarding the decision by social work to take child into care, after the child had been found to have been left alone while the complainant was being held by police.

**SPSO Findings/Outcome:** The SPSO decided not to take this complaint further as they would be unable to achieve the outcomes sought by the complainant – specifically, in this

case, a significant compensatory award of over £200,000 and the dismissal of all staff involved in the matter complained about.

---

**Case W:** SPSO Ref 202400725

**Summary of Case:** Complaint regarding failure to provide appropriate services and assessment to autistic adult.

**SPSO Findings/Outcome:** SPSO determined that no further action required as Stage 2 response was reasonable.

---

**Case X:** SPSO Ref 202405608

**Summary of Case:** Complaint regarding delays in adoption support, the placement of a young person in unsuitable accommodation, and a lack of communication regarding an adoption disruption meeting.

**SPSO Findings/Outcome:** SPSO determined that no further action required as Stage 2 response was reasonable.

---

**Case Y:** SPSO Ref 202410390

**Summary of Case:** Complaint regarding insufficient levels of personal care and the refusal of SWS to accept an externally sourced assessment of needs.

**SPSO Findings/Outcome:** SPSO determined that no further action required as Stage 2 response was reasonable.

---

In addition to these cases, there was one further case, originally submitted to the SPSO during 2021/22, that was finally concluded during 2024/25. This specific case related to complex matters regarding a kinship care placement, whereby the SPSO has chosen to uphold the complaint but CFIT, SWS management and Legal Services challenged that decision via the SPSO's review process. The previous year's report advised that there would be an update on this case, and any implications.

**Case Z:** SPSO Ref 202106598

**Summary of Case:** A complaint had been made following grandparents assuming care of children whose mother had died. The original complaint taken to the SPSO had been two-fold: that the HSCP failed to properly consider the children 'at risk of becoming looked after' but should have done so solely on the basis that there was no-one with parental rights and responsibilities for them; and that SWS failed to meet the children's mother prior to her death, denied her the opportunity to 'sign her children over to the care of SWS under Section 25 of the 95 Act' and subsequently failed to oversee the welfare of the children.

**SPSO Finding/Outcome:** Following significant representations made by HSCP, the SPSO made amended recommendations in reference an amended complaint that “SWS failed to provide kinship assistance” which was upheld by the SPSO to the extent that there was a failure to conduct appropriate assessments.

While this complaint was ultimately upheld, the decision to uphold was taken in relation to a matter that was narrower in scope than the initial issues raised with the HSCP and considered under Stage 2 of the complaints process. Had the original decision of the SPSO not been challenged, there could have been significant financial repercussions in relation to the processes around kinship care. The final decision of the SPSO on this matter was accepted by all parties, and while some initial recommendations were also challenged, the final recommendations in this case were also acceptable to all parties and actioned by SWS. These involved providing a written apology to the aggrieved party; undertaking a review of previous decisions to determine whether a different conclusion would have been reached taking into account the SPSO’s findings; and feedback of findings and refresher training to relevant staff.

SWS undertook the required review, but found that the decision made was appropriate and that it would not be appropriate to reach a different conclusion on reviewing the matter, even in light of the SPSO’s investigation. The SPSO were satisfied that all recommendations were implemented as required.

### 3.8 Service Improvements / Customer Outcomes

A service improvement is defined as either some tangible outcome for the customer consistent with their objectives in making the complaint, or a more systematic organisational benefit, learning or improvement process generalised throughout the particular team or whole service. 106 service improvements have been formally recorded.

Notable examples this year included:

- Protected time to be given to individual young people within a children's residential house. Additional staff to be placed on shift at peak times to ensure young people have 1-1 staffing which then allows other carers to spend time with other young people.
- It was identified that information available to the public did not make clear that the Community Alarms Service is still a chargeable service where a person is away from their home, for example during a hospital stay. The website has now been amended and changes to the hard copy leaflet are in process.
- A complainant who was being incorrectly charged had charges waived for 2023, and additional work was then undertaken this year to do the same for 2024, which will both pay any current arrears and maintain the weekly service in place going forward.
- SWS apologised to another service user who was subject to an order and waived fees they had been incorrectly charged. Relevant teams were advised to ensure anyone on an order (only in the community not a residential setting) should have their fees waived as agreed by finance.
- A new referral form for sign language interpreters is to be developed on a different platform so changes can be made more easily.
- Families for Children (FFC) have identified practice concerns with a foster carer and notified the Care Inspectorate, as per their processes. The foster carer will be brought back to a Foster Panel imminently for a wider discussion around these concerns. The foster carer will continue to be supported by FFC and the carers safe care policy will be updated. FFC will discuss the issue of confidentiality and social media use with the foster carer during supervision and will be revisited this regularly. Although this activity resulted from a complaint that was not upheld, these issues came to the attention of FFC through the complaints process.
- Many service improvements describe staff being reminded to adhere to appropriate complaints handling procedures – this is being further addressed with revised and updated guidance.
- Additional supports, guidance and training identified for various staff members to prevent recurrence of matters of complaint.



Reference	Outcome Description	Service Improvement Type Description	Service Improvement Details
GCC75273	Partially Upheld	Process & Procedures	CHP to be reiterated to staff members.
GCC75288	Not Upheld	Service Provision	A meeting will be held to discuss further actions.
GCC75290	Partially Upheld	Service Provision	Outstanding balance credited to account. There is now a £0 balance.
GCC75343	Upheld	Service Provision	Balance reduced to nil and appropriate person will now receive the bills.
GCC75346	Upheld	Service Provision	Telephone assessment to be carried out with service user.
GCC75367	Upheld	Process & Procedures	Team reviewing practices and will address via supervision and management.
GCC75433	Partially Upheld	Service Provision	New worker allocated w/b 22 April 2024.
GCC75542	Not Upheld	Service Provision	Team Leader to contact lawyer to verify changes made to S11 Order. Team Leader to meet with family to discuss family time and the form that it takes.
GCC75593	Upheld	Service Provision	Staff called service user to apologise and rearrange a home visit to discuss progress.
GCC75598	Partially Upheld	Process & Procedures	Team note the importance of sharing information with parents who retain their parental rights and responsibilities when their children are in foster care and doing this sensitively and timeously.
GCC75624	Partially Upheld	Service Provision	Appointed a new social worker, team to look for new supported accommodation.
GCC75686	Partially Upheld	Process & Procedures	Views should have been considered more explicitly in the investigation. This will be addressed internally with the relevant parties.

GCC75690	Upheld	Service Provision	Additional contact mechanisms through new triage systems established. Workers have been advised that it is crucial to advise service users and families of processes, timescales and keep communication arrangement when cases are assigned.
GCC75797	Partially Upheld	Service Provision	Protected time to be given to each individual young people within the house. Additional staff at peak times to ensure the YP in question has 1-1 staffing which then allows other carers to spend time with the other kids.
GCC75803	Partially Upheld	Service Provision	Service Manager will arrange for a worker to make direct contact with complainant to share fuller details of the care plan for his son, as appropriate.
GCC75806	Partially Upheld	Process & Procedures	Staff advised to adhere to the CHP when responding to Stage 1 complaints.
GCC75810	Not Upheld	Process & Procedures	Information available to the public did not make clear that the Community Alarms Service is still charged for if a person is away from their home, for example during a hospital stay. The website has now been amended and changes to the hard copy leaflet are in process.
GCC75884	Partially Upheld	Process & Procedures	Staff - Reminder to ensure staff are aware of expectations re ID badge and directing complaints
GCC75890	Partially Upheld	Process & Procedures	Staff - reminder to check correspondence is finalised & approved before issue  Process - Advice and guidance given with regards to matters that should be considered under the CHP

GCC75943	Upheld	Service Provision	Charges waived for 2023. Work has been undertaken this year to do the same for 2024, which will both pay any current arrears and maintain the weekly service in place going forward.
GCC75965	Upheld	Process & Procedures	HSCC will review their processes to ensure that all referrals to HSCC have been satisfactorily triaged and concluded. Where HSCC have been unable to establish contact with a referrer and/or the adult, a letter should have been sent from HSCC detailing what actions taken and advising that case will be closed within 7 days if the person is not in contact. TL's will ensure all staff are aware and following the agreed process.
GCC75970	Upheld	Service Provision	Worker allocated to carry out a support needs assessment.
GCC76029	Partially Upheld	Service Provision	Case to be jointly worked with another Social Worker to alleviate some of the issues and for corroboration of information.
GCC76054	Partially Upheld	Service Provision	Agreed to consider reallocating case.
GCC76077	Upheld	Service Provision	There was a delay in processing the SDS plan partly because the plan required approval by Head of Service. TL has apologised for delay.
GCC76084	Upheld	Service Provision	New social care worker allocated to support service user
GCC76148	Partially Upheld	Service Provision	Team acknowledged failures around provision of emergency accommodation per legislation and a lack of communication and apologised for same.
GCC76190	Upheld	Service Provision	Team Leader phoned service user and apologised for the failure to respond. Provided direct contact details to avoid recurring issues.
GCC76200	Upheld	Service Provision	Review of Care Plan to be arranged.

GCC76278	Partially Upheld	Service Provision	Review of the management of the behaviours of young persons in Children's House
GCC76342	Partially Upheld	Process & Procedures	Team to ensure that information is appropriately recorded on relevant system in future to prevent issue recurring.
GCC76351	Partially Upheld	Process & Procedures	Staff member from Daisy Unit has been assigned to check service user's belongings.
GCC76352	Upheld	Service Provision	Issues will be discussed with carers at supervision and process for changing practices within the day care centre for service users who arrive in a wheelchair has commenced.
GCC76355	Partially Upheld	Service Provision	Prospects interview arranged.
GCC76406	Upheld	Service Provision	Complete review of care plan agreed and change of Social Worker.
GCC76506	Not Upheld	Service Provision	Direct Payment contract now signed. No requirement for a change of social worker, Team Leader currently offering supporting and progressing the plan in the absence of the allocated social worker
GCC76534	Partially Upheld	Service Provision	Change of Social Worker.
GCC76560	Upheld	Process & Procedures	Staff have been reminded about the importance of responding quickly to any instances of anti-social behaviour.
GCC76598	Partially Upheld	Process & Procedures	Allocation – Families for Children worker had been allocated prior to complaint response  Expediting – Independent Review Officer capacity issue, service exploring other staff to complete adoption breakdown investigation
GCC76781	Upheld	Process & Procedures	Ongoing work/intervention with residents of the Children's House
GCC76915	Partially Upheld	Service Provision	A permanent worker has now been allocated to the service user.

GCC77013	Partially Upheld	Process & Procedures	Staff to reflect on preparation and information sharing
GCC77117	Partially Upheld		The process for agreeing budgets has now been completed and supports are due to commence as of 9 September 2024 at the Sense Learning Hub. Service user's supports will also include input from East End carers.
GCC77169	Upheld	Process & Procedures	Team to review procedures and discuss at team meetings and with GCIL at our regular liaison meetings to ensure procedures are followed or updated if required.
GCC77184	Partially Upheld	Service Provision	Referral made for a Temporary Furnished Flat. Prospects interview to take place on Tuesday 3rd September at 3pm.
GCC77200	Not Upheld	Process & Procedures	Staff - Highlighted the requirement for full and accurate records
GCC77384	Upheld	Process & Procedures	System error resulted in a small number of final demand notices being issued for invoices that had already been paid. Our IT team are investigating why this happened and how to prevent this from happening in the future.
GCC77388	Partially Upheld	Service Provision	Discussion with worker re: communication with the family. Worker acknowledged a breakdown in communication and this will remain an item for discussion with him in supervision to ensure it does not recur.
GCC77426	Partially Upheld	Service Provision	Resettlement plan loaded, resettlement process explained and confirmed queued for requested areas.
GCC77432	Upheld	Process & Procedures	Medication administration processes need to be streamlined.
GCC77455	Partially Upheld	Service Provision	New Social Worker allocated.
GCC77456	Partially Upheld	Process & Procedures	Staff to address all correspondence to service users properly.

GCC77521	Upheld	Service Provision	New worker allocated who will visit in the next couple of days to discuss ongoing issues.
GCC77843	Upheld	Service Provision	The service user has been fully updated re progression of his application and has also been provided with contact details for South Homelessness reception in order that duty can deal with any queries he may have if his Social Care Worker is unavailable.
GCC77860	Partially Upheld	Service Provision	A referral has been submitted for a Temporary Furnished Flat. Service user will continue to be supported by his Social Care Worker, and has been provided contact details should he require to discuss his homelessness application further.
GCC77968	Partially Upheld	Service Provision	Worker will be allocated to carry out an assessment within 3 weeks. It will be emphasised that team leaders need to review clipboards and workers should forward activities timeously.
GCC78156	Upheld	Service Provision	The Service Agreement has now been ended and credits have been applied to offset invoices issued in error.
GCC78282	Upheld	Service Provision	Offered and accepted emergency accommodation.
GCC78366	Upheld	Staff Issues	Human error by officer, who scanned identifying documents, but sent them to her work email address (as opposed to the Data Protection mailbox). Error acknowledged by officer and manager. Covered as a training matter, but no further action to take/possible due to nature of mistake.
GCC78449	Partially Upheld	Staff Issues	Staff reminded of their responsibilities under the Complaints Handling Procedures.
GCC78473	Upheld	Service Provision	Reflection on the Complaint Handling required by staff



GCC78552	Partially Upheld	Staff Issues	Occupational therapist was mis-advised as to the correct process order as regards major adaptations. This has been corrected through staff education.
GCC78585	Partially Upheld	Service Provision	Payment will now be made via BACS to ensure a consistent pay day.
GCC78615	Partially Upheld	Process & Procedures	Staff to apply more diligence in the completion of care plans and its associated budgets.
GCC78650	Partially Upheld	Process & Procedures	Staff - relevant staff have reflected and recognised note should not have been left
GCC78655	Partially Upheld	Staff Issues	General reminder issued to Home Carers about the need to properly secure client homes.
GCC78721	Upheld	Service Provision	We have apologised to the service user and waived the fees. The learning will be to inform the teams to ensure anyone on an order (only in the community not a residential setting )has to have their fees waived as agreed by finance.
GCC78800	Upheld	Service Provision	It was agreed that the previous accommodation offers were unsuitable and that one further offer would be made. The complainant was happy with this outcome.
GCC78829	Not Upheld	Process & Procedures	Issue of non-response to S1 complaint raised with Head of Service.
GCC78857	Upheld	Staff Issues	Will address issues via staff training.
GCC79886	Partially Upheld	Staff Issues	Head of Service to remind staff of Complaints Handling Procedure and how to process Data Protection-related requests.
GCC79956	Upheld	Service Provision	Temporary Furnished Flat requested.
GCC79966	Partially Upheld	Process & Procedures	Staff - Reminders to staff on appropriate handling/directing of S1 complaints

GCC79968	Partially Upheld	Process & Procedures	Staff - Level/quality of case recordings was raised with relevant staff to ensure future records are clear and adequate/in line with the relevant procedure.  Information - complainant was provided with a response to their questions (as far as DP legislation/confidentiality would allow).
GCC79987	Partially Upheld	Service Provision	Further training for call handler.
GCC79999	Upheld	Service Provision	Communication issues addressed by line manager through supervision and additional customer care training.
GCC80079	Upheld	Staff Issues	Explanation and apology given for communication issues, permanent home offered.
GCC80096	Upheld	Staff Issues	Staff to be reminded of the need to check the status of requests before providing requestors with updates on their requests.
GCC80220	Partially Upheld	Staff Issues	Remind staff to record notes of all their interactions with service users on Care First.
GCC80230	Not Upheld	Process & Procedures	Staff - Reminders to staff on appropriate handling/directing of S1 complaints
GCC80290	Not Upheld	Process & Procedures	Staff - Reminders to staff on appropriate handling/directing of S1 complaints
GCC80404	Upheld	Staff Issues	Communication errors to be brought to senior management's attention
GCC80514	Upheld	Service Provision	Caseworker changed and Prospect Interview arranged.
GCC80572	Partially Upheld	Service Provision	Partially upheld due to letters not being sent to service user despite several requests. This has been updated.
GCC80574	Partially Upheld		New social worker allocated. Direct contact no. of the Service Manager

			provided. Agreed to start steps to transfer case to North Lanarkshire.
GCC80594	Partially Upheld		Training and supervision need has been identified and highlighted to Senior Management.
GCC80620	Partially Upheld	Staff Issues	North West Community Homeless Team Manager to follow up with responsible staff members about making negative decisions relating to Homeless Applications, and the need to issue Decision Notices at all times. She will also contact the complainant to take a new application and to offer temporary accommodation if required.
GCC80622	Upheld	Service Provision	Invoice paid and ongoing discussion regarding how to prevent late payments in the future.
GCC80664	Partially Upheld	Process & Procedures	Information - position relayed to complainant within complaint response.  Staff - Locality staff reminded to keep accurate and complete records, and provide timely response. CFIT staff reminder to seek advice from staff at Senior Officer level or above if unable to issue S1 response.
GCC80675	Not Upheld	Process & Procedures	Staff - Reminders to staff on appropriate handling/directing of S1 complaints
GCC80689	Partially Upheld		HCS to review their hospital discharge process.
GCC80706	Upheld	Process & Procedures	Staff reminded of their responsibilities under council correspondence standards and complaints procedure to respond to customers within agreed timescales.
GCC80789	Upheld	Staff Issues	Staff member to attend relevant training.
GCC80903	Partially Upheld		Staff reminded of customer care standards and response timescales.

GCC80904	Not Upheld	Process & Procedures	Staff - Reminders to staff on appropriate handling/directing of S1 complaints
GCC80997	Upheld	Service Provision	A new referral form for sign language interpreters is to be developed on a different platform so changes can be made more easily.
GCC81176	Not Upheld		Whilst the complaint has not been upheld, Families for Children (FFC) are taking this matter seriously. FFC have identified practice concerns with the foster carer and they have notified the Care Inspectorate, as per their processes. The foster carer will be brought back to a Foster Panel imminently for a wider discussion around these concerns. The foster carer will continue to be supported by FFC and the carers safe care policy will be updated. FFC will discuss the issue of confidentiality and social media use with the foster carer during supervision and will be revisited this regularly.
GCC81189	Partially Upheld	Staff Issues	Proper record-keeping addressed with responsible social worker during Supervision. Feedback also provided from Service Manager to explain that she disagreed with decision not to conduct a home visit in relation to this case - also to be addressed during Supervision.
GCC81204	Partially Upheld	Process & Procedures	Staff - Reminded of the importance of delivering key updates  Information - Clarity on the progress provided within the response

GCC81330	Not Upheld		Service failure identified that was not part of the complainant's points of dissatisfaction. It came to light as part of the investigation that the Social Worker had not been carrying out their role in supervising the Welfare Guardian to ensure they were appropriately exercising their functions in line with the principles of Adults with Incapacity legislation. This service failure will be rectified and supervision completed.
GCC81341	Not Upheld		Head of Service to reiterate to staff the importance of case recording.
GCC81427	Upheld	Service Provision	Agreed to move family to another Temporary Furnished Flat once available.
GCC81470	Partially Upheld	Service Provision	Information to be cascaded to teams to ensure teams are aware of processes around private fostering.
GCC81511	Upheld	Service Provision	Offered and accepted a Temporary Furnished Flat.
GCC81656	Partially Upheld	Service Provision	Social Worker allocated.
GCC81712	Not Upheld	Process & Procedures	Staff – Homelessness team advised to consider a consistent response when asked about position in a queue or waiting time for accommodation. Preferably to explain why an accurate and reliable position cannot be given.

### **3.8 Complaints Service Developments**

In addition to the work undertaken around processing and investigation complaints, the Complaints, FOI and Investigations Team are continually reviewing and improving processes.

Current and ongoing developments are primarily focused on improving knowledge of procedures, ensuring confident and competent complaints handling across the organization, and the continued development of a new case management system for all complaints handling.

#### **Improving knowledge of procedures:-**

A detailed guide to Stage 1 processing and best practice has been developed and made available to all staff via the new Staff Updates intranet platform. This includes templates and a checklist to encourage consistency of approach and presentation across the organization.

In addition, a more detailed guide to Stage 2 processing is in development for internal use within CFIT.

#### **New case management system:-**

In development since 2018, the implementation of a new case management system has been subject to repeated delay due to matters outwith the control of GCHSCP. Complaints management within the HSCP have committed fully to supporting this project have committed significant time over the past two years to supporting design and implementation. Go-live is planned for 26<sup>th</sup> November 2025, and once implemented, the new system will provide immediate benefits in terms of data accuracy and early identification of complaint trends.

#### **Recruitment activity**

During 2024/25, the case for additional staff was progressed, to increase the capacity of the team on a temporary basis to address the unsustainable level of demand in relation to Subject Access Request processing. This is intended to address the SAR backlog, which in turn should reduce complaints activity relating to SAR processing delays and ultimately increase capacity in the team for complaints handling.