

**Joint inspection of services for children of asylum seekers in  
the Glasgow City Council area**

**June 2007**

<b>Contents</b>	<b>Page</b>
<b>Introduction</b>	<b>1</b>
<b>1. Context and background</b>	<b>2</b>
<b>2. Key strengths</b>	<b>4</b>
<b>3. How well do services in Glasgow meet the needs of children of asylum seekers and their parents?</b>	<b>5</b>
<b>4. How good is the delivery of services for children and young people?</b>	<b>12</b>
<b>5. How good is the management of services for children of asylum seekers?</b>	<b>14</b>
<b>6. How good is the leadership of services for children of asylum seekers?</b>	<b>16</b>
<b>7. Main points for action</b>	<b>17</b>
<b>8. Next steps</b>	<b>18</b>
<b>9. Quality indicators used to evaluate services</b>	<b>19</b>
<b>10. List of inspection activities</b>	<b>20</b>
<b>How can you contact us?</b>	<b>24</b>

## Introduction

In May 2006, the Minister for Education and Young People requested that Her Majesty's Inspectorate of Education (HMIE) lead an inspection of services and support for the children<sup>1</sup> of asylum seekers in the Glasgow City Council area. Services delivered by Glasgow City Council, NHS Greater Glasgow and Clyde, Strathclyde Police, the Scottish Children's Reporter Administration (SCRA) and the voluntary sector were included in the inspection.

*A Guide to Evaluating Services for Children and Young People Using Quality Indicators*,<sup>2</sup> a generic quality indicator framework for services for children, was used for the inspection. Appropriate quality indicators were selected from the framework and used with their associated illustrations to evaluate services. The national vision for Scotland's children, that they should be safe, healthy, achieving, nurtured, active, respected and responsible and included, was used to consider how well services met the needs of children of asylum seekers.

The multi-disciplinary inspection team included inspectors qualified and experienced in social work, health, education, policing and community learning and development. As part of these activities, inspectors met with around 170 children and 45 parents, individually and in groups. The experiences and views of children and parents contributed substantially to the evidence gathered by the inspection team.

---

<sup>1</sup> Throughout this document 'children' refers to persons under the age of 18 years as defined in the Joint Inspection of Children's Services and Inspection of Social Work Services (Scotland) Act 2006, section 7 (1)

<sup>2</sup> 'A Guide to Evaluating Services for Children and Young People Using Quality Indicators', HM Inspectorate of Education 2006

## 1. Context and background

Glasgow is Scotland's largest city with a population of 578,790 and has higher levels of deprivation than any other area in Scotland. Almost 40% of Glasgow residents live in areas that are amongst the 10% most deprived in Scotland. More than one in four residents (28%) are claimants of either income support or incapacity benefit. Although this has reduced in the last ten years, it is still the highest in Scotland. The proportion of recorded crimes, and the proportion of areas which are classed as crime deprived from the Scottish Index of Multiple Deprivation (2006) are higher than any other council area in Scotland.

In 2000, Glasgow City Council agreed a contract with the National Asylum Support Service (NASS) to accommodate people seeking asylum. In this contract Glasgow City Council was the sole provider of accommodation. However, in the most recent contract in 2006, Glasgow Housing Association (GHA), under contract to Glasgow City Council, provides 81% of the accommodation, the Young Men's Christian Association (YMCA) provides 9% and Angel London Ltd provides 10%.

The first families with children arrived in May 2000. At the time of the inspection there were 2,026 asylum-seeking families with 1,411 children of school age in Glasgow. There was a high number of families whose asylum application had been refused and had lived in the city for a number of years, as well as families who had recently arrived. Parents and children arrived in Glasgow from around 54 different countries of origin.

The process for claiming asylum is set out in United Kingdom immigration legislation and relevant guidance. In late 2006, the New Asylum Model was introduced, with the aim of processing new claims and making decisions more quickly. Asylum seekers have to follow strict timescales and provide evidence to support claims. Once an asylum claim is made, accommodation and financial support is provided to individuals and families by NASS. Financial support from NASS is provided at 70% of income support levels for adults and 100% for children. Parents do not receive child benefit or any additional financial support. While living in Glasgow asylum seekers are required to regularly report and 'sign in' at the offices of the Immigration and Nationality Directorate<sup>3</sup> (IND). At the end of the process of claiming asylum a decision is made on whether or not the asylum seeker can stay in the UK. If they are not allowed to stay they are expected to leave the country. NASS support, both financial and accommodation, can be withdrawn. The IND can take action to detain and forcibly remove families.

The process of claiming asylum, and the consequences of decisions made, had a substantial impact on children and their parents. Worry about the future affected the emotional and mental health of children and parents and was a common experience. Many parents and children had lived in Scotland for a number of years and were well integrated in their local communities. This made the possibility of return to their country of origin a particularly concerning prospect. Removals of families by IND had led to protests in local communities. There had been expressions of concern by services over the disruptive effect of removals on community relations.

United Kingdom immigration legislation and relevant guidance set out what services those seeking asylum are entitled to. Families can access all National Health Services (NHS) while

---

<sup>3</sup> The Immigration and Nationality Directorate is now known as the Border and Immigration Agency.

their claim for asylum is being considered. If an application is finally refused families remain entitled to emergency medical treatment but may be charged for other health services. The NHS Greater Glasgow and Clyde Health Board provided a full range of health services to parents and the children of asylum seekers which were well used.

In Glasgow, there were approximately 150 unaccompanied asylum-seeking children. This group included children who were young parents, children who were carers and children who had suffered loss and trauma. The needs of these children varied widely and many were vulnerable. Glasgow had developed existing services and a range of targeted services to meet the needs of this group.

Local authorities have a duty to provide nursery places for all three and four year old children regardless of their immigration status. Children of asylum seekers aged 5 to 16 have a right to school education. Sixteen to eighteen year olds can continue their education in school, attend further education full or part-time in English for Speakers of Other Languages (ESOL) courses and attend other courses, up to Higher National Diploma (HND) level, in further education for not more than 16 hours a week. Children are not entitled to financial support for higher education and are usually required to pay overseas students fees.

Working with communities where there were many different ethnic groups was a challenge for services in Glasgow. Almost all children and parents reported that they experienced racial harassment that affected their daily lives, their sense of belonging in communities, and their safety. Staff across services worked hard to promote integration and positive relationships. Work had been done to challenge stereotypes and misunderstandings that contribute to racial harassment.

Services in Glasgow, including Glasgow City Council, Strathclyde Police, Scottish Children's Reporters Administration, NHS Greater Glasgow and Clyde Health Board, and voluntary sector organisations, were required to work within a framework of United Kingdom and devolved policy and legislation.

## 2. Key Strengths

The inspection team identified the following key strengths in the services provided for the children of asylum seekers.

- The positive impact of local services on children and their parents in promoting well-being and inclusion.
- The work of schools in promoting inclusion and integration, and supporting children's learning, particularly in English language.
- The provision of services by the voluntary sector, including local initiatives and groups.
- The work of specialist services, particularly the Glasgow Asylum Seekers Support Project and the jointly funded and managed Glasgow Translation and Interpreting Service.
- The high level of innovation, dedication and enthusiasm for working with children demonstrated by staff across services.

### 3. How well do services in Glasgow meet the needs of children of asylum seekers and their parents?

*Overall, services in Glasgow were good, with some very good features, at meeting the needs of children of asylum seekers. Universal and specialist services worked well in supporting children to feel safe, healthy, achieving, nurtured, active, respected and responsible, and included. Services were very good at meeting the needs of parents. While children and parents had good experiences of using services, they reported that their daily lives were affected by racial harassment, and that their opportunities for education and employment were restricted.*

Education Services worked well to keep children **safe** in their schools, particularly primary schools. Their safety was actively promoted by all teaching staff. Headteachers mostly led a strong ethos of inclusion in schools. There were quick and effective responses to racial harassment and bullying from most school staff. Children felt less safe in secondary school settings, where they had lower confidence in reporting racial harassment or bullying.

Children were less safe in their communities. Almost all reported that they had experienced forms of racial harassment, with incidents varying from verbal abuse to physical attacks, although they did not always report these to Strathclyde Police. Children and parents tried to prevent these incidents by staying at home. This limited children's access to outdoor play and contact with friends.

Staff across services were aware of these difficulties for children. There were a range of service developments, initiatives and partnership projects with the voluntary sector, such as the Prince's Trust ShaRed Road Project, which promoted integration and children's safety. A helpful personal safety booklet, 'Staying Safe', had been produced for children and families in 16 languages. Strathclyde Police had led a number of initiatives, including Operation Reclaim, which involved the children of asylum seekers and local children in football. Local crime rates fell when Operation Reclaim was running.

#### ***Good Practice : Safety First***

*Specialist health visitors from NHS Greater Glasgow and Clyde Health Board audited the number of accidents happening within the north Glasgow area and identified a higher risk of accidents involving cooking and heating appliances. To address this, specialist health visitors and Strathclyde Fire and Rescue Officers from the fire services worked together to provide advice about fire safety in the home. Under the banner of Integration Through Safety in Glasgow, an excellent DVD and flyer were produced to raise awareness of home and fire safety and reduce risks to children. Asylum seekers were involved in acting in the DVD and the flyer was selected from a competition for school children. Peer educators were identified from the asylum seeking community and trained in the promotion of safety messages. Initial feedback from asylum seekers and professionals was very positive.*

The **health** needs of children were well met. Overall, children had access to health services, including dentistry and more specialist services, when they needed them. All children and adults were registered with a General Practitioner (GP) and had a health assessment within 48 hours of arriving in Glasgow. A few unaccompanied children attended Accident and

Emergency Departments for advice or treatment when they had difficulties in registering with a GP.

Children and their parents valued the health services they received. They used them regularly, including presenting in high numbers for immunisation. Health staff generally worked well with children. Family planning and youth counselling services were available in local centres across Glasgow. Specialist health visitors worked effectively and creatively with parents and children. When a nursery placement was not available for a child, they often found a place in a crèche.

Children of asylum seekers received free meals at school. There was a good range of healthy choices available. Halal food was available and all children in primary schools were given free fruit. Children demonstrated a good knowledge of healthy eating.

Being part of a family seeking asylum often affected children's emotional and mental health. They worried about the future and had limited opportunities to appropriately share past or current experiences with others. School staff understood these needs and were aware of the challenges children faced. Staff in health and social work services working with asylum-seeking families also had a good knowledge of children's needs and worked sensitively with them.

***Good Practice : British Red Cross International Tracing and Message Service***

*Children who had lost contact with sisters, brothers, parents or members of their family could use the Red Cross tracing and message service. This service helped find family members and sent and received messages. Staff in the Red Cross had developed expertise in working with children and carefully discussed with them the process of tracing relatives and sending messages. Children were ensured confidentiality, treated with respect and their views were taken seriously.*

The children of asylum seekers were **achieving** in many different areas of their lives. They had very good support from teaching staff to learn English and to achieve in school. Children and parents valued the education provided in schools. On arrival in Glasgow, the Glasgow Asylum Seekers Support Project (GASSP) and schools worked together effectively to ensure children were allocated to a suitable school placement. Placements in further education colleges were appropriately identified for older children.

Overall, children were integrated well in schools and further education colleges. Attendance levels were high, and very few children were excluded. Children often worried about their futures and their families while they were at school or trying to study. This sometimes affected their ability to concentrate in school. Almost all children were successful in learning and developing confidence. Schools provided new experiences, opportunities for friendships and a caring environment which was valued by children. Children who accessed extra curricular activities achieved well in these. Some organised an international fashion show, won awards for Burns solo singing and excelled in sporting activities.

The achievement of children was often related to their length of stay in the United Kingdom and their competence in English language. Almost all children made very good progress in acquiring English language. In primary schools, most children made good progress in

reading, writing and mathematics. Overall, the majority were achieving national levels of attainment. By the end of S4, children performed very well overall, but did particularly well in science and mathematics. In 2006, children from asylum-seeking families performed on average better in Scottish Qualification Authority (SQA) examinations than other pupils. Almost all children worked hard at school and valued their educational opportunities. A number of children were exceptionally successful in education, both in SQA examinations and in the wider opportunities provided for them to achieve.

***Good Practice : Careers Scotland***

*Careers Scotland supported children of asylum seekers as they moved on from secondary education. Staff held focus groups with children to explore what information would be useful for school leavers. Resource information was produced for professionals, parents and pupils. Children were directly involved in producing a DVD and participated in a photo shoot which provided images of young asylum seekers for leaflets. Dedicated Careers Scotland staff for this project held awareness raising sessions for other careers advisors and worked in effective partnership with teachers responsible for pastoral care. The project won an Institute of Careers Guidance Award in 2006 for working with young people.*

Further education colleges worked well with the children of asylum seekers, providing practical support, English classes and a range of courses. Children and parents were frustrated with the lack of opportunities for progression to higher education. High-achieving children were not always able to undertake study at degree level. Children found being limited to studying on a part-time basis in particular courses in further education unhelpful. This was a source of concern for children, parents and professionals.

***Good Practice : The Education Trusts Group***

*Representatives from different services provided by Glasgow City Council, Careers Scotland and the Bridges Project had been meeting as a group to assist the children of asylum seekers to gain places in higher education. The group completed an assessment of need for places and met with representatives from universities in Glasgow. One University had provided one place each year since 2003. In 2006, a further four universities provided five places between them. This had enabled a few children to progress to higher education who otherwise would not have been able to afford to do so.*

Staff in services were effective in **nurturing** children. On arrival, families were met by project officers from GASSP. The accommodation provided by GHA helped families stay together. Parents and children were warmly welcomed to Glasgow by staff delivering services to asylum seekers. Schools had effective induction programmes which helped children settle into education.

***Good Practice : All Saints Secondary School***

*The headteacher personally welcomed and enrolled children of asylum seekers. School uniforms were made available for children so that they could immediately feel they belonged to the school community. They were first placed in the international unit where their learning and emotional needs were assessed by staff. This assessment contributed to the development of a personal learning plan for each pupil. Children remained in the unit until they were ready to move into mainstream classes. Staff in the international unit welcomed pupils back at any time and provided advice to mainstream teachers throughout the school.*

Around half of children under five attended pre-school provision provided by Education Services. Children who accessed pre-school places benefited from the experience. They were nurtured well in these placements and developed good social relationships and language skills. Senior Officers required to clarify with the Scottish Executive the extent to which central funding was made available to the council to provide free, part-time, pre-school education for all three and four year old children regardless of their status.

Unaccompanied asylum-seeking children under 16 were usually placed in residential care. Fostering placements were not widely available to meet the needs of this group of children. Residential children's units provided a warm and nurturing environment for unaccompanied asylum-seeking children and key workers and social workers provided good support.

***Good Practice : Hamilton Park Residential Children's Home***

*This Glasgow City Council home for five children prepared those of 14 or older for independent living. The children's home was well integrated in the local community and the manager was a member of the local resident's association. Over the last four years staff in Hamilton Park Avenue had provided care for unaccompanied asylum-seeking children from seven different countries. They provided advice to other residential units on meeting the needs of these children, and how to address the specific issues involved in their care.*

Unaccompanied young people between the ages of 16 and 18 years received support services from the Homeless Young People's Team (HYPT) and other services. The quality of these services varied. Some unaccompanied children and young people found it difficult to access regular and consistent support from a named worker in social work. This included a few children who were carers for younger siblings. Children did not always have an appropriate level of assessment and a clear care plan which addressed their needs. Unaccompanied young men were often placed in the Campus Project which provided supported accommodation. Although staff were not currently available 24 hours a day, services planned to increase the support available. Unaccompanied young women were placed in a range of different types of accommodation which were not always safe or well suited to nurturing them. The HYPT was being restructured to improve services to unaccompanied asylum-seeking children.

As asylum-seeking parents were provided with 70% of income support levels by NASS and were on a low income, a few found it difficult to provide for their children, including buying sufficient warm and waterproof clothing. Some children in further education did not have enough money to buy food or pay for bus fares to college. A small number of

unaccompanied children did not have sufficient income to pay for heating in their accommodation.

Children were supported effectively to be physically **active**. Staff in nursery schools provided good opportunities for children to be involved in daily physical play. Schools provided a wide range of sporting activities as part of the curriculum. Children accessed a wide range of extra curricular activities including football, swimming, basketball, baseball, dancing and drama. Some children who had been moved to new accommodation were not always able to participate in after-school activities because of the increased distance between school and home.

In local communities there were a range of sporting and recreational facilities available including fitness centres and cinemas. Many children accessed these either free of charge or at concessionary rates. These opportunities to participate in sports and social activities promoted children's well-being and friendships. Sports and physical activities were also well used by services to promote integration in local communities, for example, basketball activities organised by Strathclyde Police.

Children had access to public parks and play areas. However, for younger children there was sometimes a lack of safe and suitable outdoor play areas and equipment near their home. Voluntary organisations provided children with opportunities for sports and leisure activities such as reading, artwork and football. The Prince's Trust Four Seasons Project organised challenging outdoor activities for children, including kayaking, climbing, gorge walking and mountain biking.

Staff across services worked well to **respect** children and provide opportunities for them to take on appropriate **responsibilities**. Glasgow City Council's Cultural and Leisure Services, with other partners, were successful in making sure children had opportunities to make friends and learn skills. This supported the integration of children of asylum seekers in communities. Culture and Leisure Services also effectively promoted the Kidz Card for primary age children and the Glasgow Young Scot card for teenagers. These enabled children to receive discounts in shops and leisure facilities. They also accessed holiday activities and a wide range of information and advice services. These card schemes provided important opportunities for children to feel accepted and responsible as local citizens.

***Good Practice : Young Survivors – Steps to the Future Group***

*The Big Step (Glasgow Community Planning Ltd) in partnership with Glasgow City Council's residential and children's rights services support a group where unaccompanied children meet, share experiences and are involved in activities including participation in consultation events. The work of staff in this group had helped improve the young people's self-confidence. Staff had supported the group well and encouraged children to develop greater self-respect and a sense of responsibility. Members of the group had developed, designed and produced an excellent welcome pack for other unaccompanied children. The welcome pack was funded by the Big Step and the Scottish Refugee Council. Children benefited from this experience and said they were very much more confident.*

In schools, teaching staff were interested in and actively supported the development of children's cultural identity. Children were treated with respect and were encouraged by them

to take on responsibilities. Many successfully took on the roles of school prefects and helpers. Some were recognised for their achievements and their leadership. One pupil was awarded the Young Scot of the Year award. The ‘Glasgow Girls’, who campaigned for changes to immigration law, won a national award for their activities.

Staff across services made very good use of the Glasgow Translation and Interpretation Service (GTIS). Interpreters, who covered almost all languages required, were provided easily and quickly. This ensured that children and parents could be effectively included in events and meetings. However, staff from services did not always make sure that children were provided with interpreters when necessary. This included helping children understand issues related to medical examinations or disciplinary issues in schools. A few children had been used to interpret for their parents in circumstances where this was not appropriate, such as translating very personal information. Generally, there was a need for more child-friendly versions of information in plain English and in different languages.

Services worked well to **include** children, many of whom felt they belonged to their local communities in Glasgow. Children’s friendships and sense of belonging were important for them. Children and parents were well integrated and participated in communities. Local people, who were friends and neighbours, as well as those involved in campaigns and faith groups, provided practical and emotional support and promoted their inclusion. However, lower levels of income and exclusion from employment affected families’ sense of inclusion and belonging in the wider community. Changes in housing for children and their families, brought about as a result of the introduction of a new housing provider by NASS, had disrupted the sense of belonging to schools and communities for these children. GASSP worked hard with partners to minimise disruption to families affected by these changes.

Staff in schools worked very well to include the children of asylum seekers. Celebrations of diversity, and mentoring and buddying schemes successfully supported inclusion. Staff valued pupils as individuals and support in schools for learning English helped children feel included and communicate with other adults and children. Staff and many other pupils welcomed the diversity and commitment to education that children of asylum seekers brought to schools. Pre-school services also successfully promoted inclusion and encouraged children to be fully involved in nurseries. Anniesland College was very good at including young people.

***Good Practice : Anniesland College***

*Staff at Anniesland College assessed the individual needs of unaccompanied children when they enrolled. This was done through two individual interviews, which included discussion of personal and social needs. The college provided practical support through bus passes and lunch money to help children attend. At the end of each class, staff allocated time for children to seek advice and support if they wanted to do so. Unaccompanied children benefited from this approach and felt they were integrated in college, had developed social contacts and formed positive relationships with staff. One young person said : ‘Staff are more than just teachers, they really care about you. You can talk to them. They try their best for you’.*

Integration networks and supports in the community, such as faith groups and voluntary sector services, had been developed in the areas where asylum seekers lived. Families had

accessed these supports, developed their own informal networks of friends and community contacts, and had themselves welcomed new arrivals. However, the sense of inclusion in communities was affected by families' experience of anti-social behaviour and racial harassment. Children and parents were concerned about levels of drug and alcohol misuse, anti-social behaviour and vandalism in their local communities. Almost all children and parents reported that they had experienced forms of racial harassment in their communities which ranged from verbal taunts to physical assaults. Children found the racial harassment they experienced from other children and adults distressing. Worry about fear of racial harassment affected children and their parents, including how safe they felt in their communities. While there was very good support, and, in many cases, a shared sense of social justice between people seeking asylum and people living in local communities, racial harassment had an impact on the daily lives of asylum seekers and their families.

***Good Practice : NCH Young Refugee Befriending Project***

*This project recruited and trained volunteers to befriend unaccompanied children and young people aged between 16 and 25 years. Children and young people were referred to the project by professionals from different services and matched to a befriender. The young person and the befriender met regularly and participated in social activities. Children and young people who attended the project were enthusiastic and benefited from the service. They had opportunities for new experiences and learned more about Glasgow. Participants in the project felt that staff had helped them in crisis situations when other services had let them down.*

Services were very good at working with parents. GASSP worked well to engage with parents and build up relationships. Schools involved parents in their children's education and school life. They were included in the enrolment of their children in school, attended curricular workshops, homework clubs, parents' evenings and social events. Parents were proud of their children's achievements in schools. They would have welcomed more opportunities to contribute to the development of services in schools.

Parents, as adults seeking asylum, were not allowed to take on any paid employment although they were permitted to do volunteer work. Services provided opportunities for parents to attend English classes, college courses and classes in literacy, numeracy, creative writing, computing and dressmaking. Culture and Leisure Services also worked well to promote local integration networks, which included asylum seekers and representatives from local services. Local libraries provided valued and relevant adult learning opportunities for asylum seeker parents. Some parents were actively involved in voluntary work, for example at the Maryhill Citizens' Advice Bureau. Some had been involved in work shadowing to learn about their professions in Scotland.

Community development social workers supported the Framework for Dialogue Project and Integration Networks across the city. The Framework for Dialogue Project was managed by the Scottish Refugee Council and Glasgow City Council and influenced planning at a local level. Issues raised and discussed in local groups were passed on to a central policy forum. The Scottish Refugee Council also supported the Refugee Policy Forum which actively involved parents. All of these groups provided meaningful and effective opportunities for parents to become involved in their communities, play an active part in promoting integration and express their views.

***Good Practice : Greater Pollok Integration Network – Understanding Each Other***

*This project was supported by staff from Glasgow City Council, Scottish Refugee Council and Strathclyde Police. The aim was to challenge negative images of refugees and asylum-seekers and promote understanding within communities. Volunteers who were asylum seekers, visited primary schools and talked with children about their experience of leaving their countries and living in Scotland. Feedback from children had been positive and teachers welcomed the initiatives. Volunteers who were parents themselves, found they built up relationships with children in the community and increased their own self-confidence through the scheme. A helpful leaflet had been produced by staff and volunteers about their work on behalf of the Greater Pollok Integration Network.*

Parents regularly used a range of health services and found staff generally helpful. Social work services provided a good welfare rights service to parents. While parents reported high levels of satisfaction with services, they perceived that some front-line service providers did not always have a full understanding of their circumstances.

**4. How good is the delivery of services for children and young people?**

*The delivery of services for children of asylum seekers was good. Glasgow City Council, NHS Greater Glasgow and Clyde Health Board, Strathclyde Police, Scottish Children's Reporter Administration (SCRA) and the voluntary services had developed a broad range of services. Staff knew children and communicated their needs well. Unaccompanied asylum-seeking children did not always have an assessment or care plan or enough contact with a named professional. Services had improved considerably since the beginning of the contract with National Asylum Seekers Service (NASS) but had not yet developed a sufficiently rigorous partnership approach to improvement.*

Knowing and communicating the needs of children was good. Staff across services knew children well, understood their needs and worked successfully to communicate their needs effectively to others. However, teachers did not consistently receive information on individual children's health issues, and school nurses were generally not included in information-sharing.

Staff who worked with higher numbers of children of asylum seekers had, through experience, developed an understanding of their particular needs during their stay in Scotland and ways of responding appropriately. Teachers of English as an additional language knew individual children and were well placed to communicate this knowledge to other professionals. Overall, children's needs were met most effectively when professionals came together to identify those needs and make plans to support their next steps. However, where the progress and outcome of a claim for asylum was slow or unclear, or there had been a refusal, longer-term planning for children was more difficult. Immigration law limited children's opportunities for employment and further and higher education.

Communicating and building relationships with children who had additional support needs was complex for teachers, educational psychologists and social workers. Social work services staff did not always appropriately assess the needs of unaccompanied children seeking asylum aged between 16 and 18 years. These children did not always have enough

meaningful and frequent contact with social work services staff to meet their needs. Educational psychologists and teachers found it more difficult to recognise and assess the learning needs of children with additional support needs, particularly those with limited English.

Staff were generally sensitive to the cultural differences and needs of children. Health visitors were alert to different styles of parenting. Education staff, were aware of the needs of pupils and students and the impact of stress on their learning. The needs of children who suffered from anxiety and trauma were quickly recognised and appropriate referrals to specialist services were made.

The delivery of services to meet the needs of children was good. There was good development of local solutions to problems. Strathclyde Police had deployed Community Policing Officers to support local communities. The voluntary sector provided a number of small community-based initiatives, including groups based in churches. GTIS provided a very effective service to professionals, children and families to promote effective communication.

A number of leaflets and information were produced in a range of languages, for example the 'Welcome to Glasgow' pack. The very useful leaflet 'How to take medicine' had been translated into a number of languages. However, some services lacked appropriate translations of their information. Information on a new hospital appointment system was only available in English, and this may have been the reason why some appointments were missed. There was a lack of information on the roles and responsibilities of professionals such as a social worker or clinical psychologist. This was particularly important when families had no previous experience of these professionals.

Staff across services worked effectively in partnership to provide services locally. Health visitors and midwives, teachers in schools, the homeless teams and dedicated voluntary sector services had a good understanding of working with children of asylum seekers and their parents. Social work services staff were developing helpful ways of working with unaccompanied asylum-seeking children. Some managers and staff in the social work service were unsure whether children of asylum seekers and unaccompanied asylum-seeking children could be referred to the Children's Reporter in the same way as other children. When children were referred to the Children's Reporter, a range of appropriate actions were taken. Children's Reporters were not always clear about the complex relationship between Scottish and United Kingdom legislation for children of asylum seekers.

Improving services for the children of asylum seekers was adequate overall. Since the beginning of Glasgow's contract with NASS to accommodate asylum seekers, there had been improvement in the ability of universal services to meet the needs of the children of asylum seekers. Specialist services had been developed to meet the needs of children and parents, in particular GTIS and GASSP. Services in Glasgow had won a number of awards for their work with children of asylum seekers.

However, there was no rigorous partnership approach to evaluating and improving services. Not all services had developed robust arrangements for evaluation and quality assurance although some individual services, including education, had good arrangements. GTIS reviewed its performance and used management information to predict and plan for future needs. Inter-agency groups involved a range of partners which included the voluntary sector,

Strathclyde Police, education services and social work services. Some inter-agency groups such as the unaccompanied asylum-seeking children's group, worked effectively to co-ordinate and improve services. Action for Training and Learning for Asylum Seekers (ATLAS) accessed European Union funds to support and evaluate innovative work with parents.

## **5. How good is the management of services for children of asylum seekers?**

*Staff across services worked well together to meet the needs of children of asylum seekers. There was not always sufficient planning between partners to ensure that successful initiatives continued when initial funding ended. Staff were deployed effectively and teams worked well together. While staff had built up a good knowledge of working with children of asylum seekers through experience, there was a need for improved training and development. The use of management information to support the staff to deliver services was limited. There were some good opportunities for children to participate in policy development and planning but this was not yet consistent across services.*

The arrangements for participation of children, young people, and parents in policy development and planning was adequate. Some services had well-established arrangements for supporting participation and involvement. Community development social workers supported local and community based developments that promoted integration, for example the Cranhill Women's Group. The Integration Networks and Framework for Dialogue groups worked well across the city and to involve parents as equal partners.

Strathclyde Police had implemented a range of approaches to consultation in line with their Equality and Diversity Strategy and Race Equality Strategy. There were community consultation panels in the north of the city. Consultation with children and parents was part of the Strathclyde Police youth strategy. NHS Greater Glasgow Health Board had carried out a consultation with families in 2003, 'Listening to Communities: Involving People in Health'. The GASSP Health Co-ordinator consulted regularly with parents. Children of asylum seekers were well represented on pupil councils in schools and in the Glasgow wide pupil council. The Young Survivors – Steps to the Future Group had participated in discussion of policy issues at a national level, when they met with the Children's Commissioner and the Deputy Justice Minister.

However, services did not have a common strategy in place for consultation and participation of children and parents in policy-making. It was not yet clear how the recently introduced children's planning structure would include children and parents in strategic or operational planning. There had been no consultation with unaccompanied children on the reorganisation of the homelessness service and provision of appropriate accommodation. Health staff did not routinely consult with children of asylum seekers and their parents about the services they offered.

Staff deployment and teamwork was good. Staff had a clear understanding of their roles, and the need to work together to deliver services. They were well supported to work responsively with children and parents and were able to raise views or concerns within their own organisations. A few staff groups were negatively affected by organisational change, for example, the homeless team who worked with unaccompanied asylum-seeking children was recently relocated at short notice.

Staff were effectively deployed across the services. GASSP had a multi-disciplinary team of experienced staff from education, health, housing and social work backgrounds who worked well together to respond to the needs of children and parents. The project had expanded and included project officers who spoke a range of languages. While English as Additional Language teachers were valued in schools, the rationale for their deployment was not well understood. A review of deployment had been commissioned and was being considered by senior managers in the education service. Strathclyde Police had a good range of dedicated staff. This included diversity officers, an asylum liaison officer, campus officers in some schools, and community police officers.

Overall the training and development of staff across services was adequate. Helpful training was provided by the Scottish Refugee Council. Education Services provided good training on bi-lingual teaching and opportunities for Continuing Professional Development (CPD). Some services were planning training in work with asylum seekers for the future, for example, the role of the new specialist senior educational psychologist will include delivery of training. Services shared their expertise in working with the children of asylum seekers with each other when requested. Services provided diversity and anti-racist training, but not all staff had attended the required training. Staff in services had not always been provided with sufficient training in working with diverse communities or with interpreters.

Training and learning materials had been developed for staff. These included a new online learning resource for midwives, which provided an overview of health and other issues for asylum seekers. However, staff across services were not always aware of the resources and information available to them. Staff developed their knowledge of working with asylum seekers through direct practice experience. Those who did not have significant practice experience, and had not accessed training, had less confidence in their work.

Most staff across services were well supported through formal management processes and peer support. However, many staff experienced feelings of loss and anxiety when children were removed from Scotland by the IND. Staff described worrying about the safety and well-being of children and parents when this had happened. Education services and the Scottish Refugee Council had recognised the need to support staff more effectively through these experiences, but no action on this had yet been taken.

Partnership working between services was good. Managers and staff in Glasgow City Council, NHS Greater Glasgow and Clyde, Strathclyde Police and the voluntary sector had developed good partnership working. Effective partnership working by staff and managers had led to needs of the children of asylum seekers being identified, and then met through the provision of practical support and resources. Good partnership working between different services had resulted in a more effective service from midwives for asylum seekers. GTIS worked in partnership with all services and supported their work well. Integration networks worked well, and provided a constructive forum for discussion of local issues and identification of initiatives needed to support integration.

Within the planning structure for children's services, there were two planning groups for children of asylum seekers. These groups had broad representation from partners, but there was scope for greater involvement of the voluntary sector.

ATLAS had secured funding for new developments and some innovative practice. This included a capacity-building project in Anniesland College and a parents information booklet.

The ATLAS partnership had an inter-agency steering group and evaluated the work it funded. Processes for agreeing and establishing funding arrangements for voluntary sector services and projects were not always clear. Some successful initiatives that depended on funding and support from more than one agency were affected by this.

Information systems to support the work of services were adequate. GASSP had developed a useful database to support their work. Education services collected data on the attainment of children and racist incidents in schools. Information on racist incidents was routinely collected by the Strathclyde Police and recorded in the Vulnerable Persons' Database. Each Strathclyde Police division had a Multi-Agency Racist Incident Monitoring Group (MARIM) which involved partners in local services. However, other services had limited management information available on the children of asylum seekers. SCRA and the Standby Out of Hours Service did not routinely collect sufficiently detailed management information on the work they did with the children of asylum seekers and unaccompanied asylum-seeking children.

Some services worked with others to collect management information which was then shared with partners. For example, the social work service collected and shared information on unaccompanied asylum-seeking children. They also used the national database for unaccompanied asylum-seeking children. However, management information systems were not linked across services. Services did not consistently use management information to improve and develop services.

## **6. How good is the leadership of services for children of asylum seekers?**

*Leaders of services had a shared vision of improved partnership working which had enhanced outcomes for children in Glasgow. They had a strong commitment to promoting diversity and meeting the needs of children of asylum seekers.*

Leadership of people and partnerships was very good. Chief Officers and senior managers had sound strategic aims for the children of asylum seekers and were committed to providing high quality services. Local authority senior managers were clear about the expectations of their political leaders. Glasgow City Council, Strathclyde Police, SCRA, NHS Greater Glasgow and Clyde had a shared strategic vision of partnership working. There was a strong and consistent drive to improve partnership and achieve a more integrated approach to strategic planning, which had proved effective.

Politicians, chief officers and senior managers effectively led an innovative and positive approach to integration and working with the children of asylum seekers and their parents. The Chief Officers Group provided strong leadership across the partner services and shared a sense of responsibility for collectively delivering and improving services. Strathclyde Police were not represented on this group. Senior managers worked closely and effectively with each other and actively promoted integrated working. Available resources were effectively allocated and managed by partners to improve the quality of services. There was effective leadership in the voluntary sector. Headteachers provided strong leadership and positive approaches to inclusion in schools and centres.

Chief Officers and senior managers had recently developed a new structure for children's services planning, and were moving towards shared boundaries for service delivery. These relatively new arrangements were not yet fully understood by staff in all services.

## 7. Main points for action

Overall, staff worked very well to provide services to meet the needs of children of asylum seekers and their parents. Since the beginning of the contract with NASS there had been significant development of services across Glasgow. Education services, Strathclyde Police and NHS Greater Glasgow and Clyde had improved existing services and provided additional resources to supplement them. Specialist services had been developed with the voluntary sector and many of these provided good quality support to children of asylum seekers and their parents. Social work services provided a range of effective support to vulnerable children and unaccompanied asylum-seeking children. Senior managers and staff worked well together across services and had a high level of commitment to meeting the needs of children of asylum seekers.

Glasgow City Council, Strathclyde Police, Scottish Children's Reporter Administration, NHS Greater Glasgow and Clyde Health Board and voluntary sector organisations were well placed to take forward improvements in services. In doing so they should:

- take steps to ensure that all eligible children are provided with a part-time pre-school placement;
- ensure that all unaccompanied children are matched to a safe, nurturing placement and have an appropriate level of contact with professionals;
- improve the involvement of children and parents in the development of services, policy and strategy;
- ensure that all staff, across services, are appropriately trained and supported for their roles and responsibilities; and
- build on the work already in place to address racial harassment in communities to achieve improved relationships for asylum seekers in communities in Glasgow.

The Scottish Executive should:

- consider the feasibility of responding to aspirations among asylum seeker children to undertake degree level study.

## **8. Next steps**

Glasgow City Council, Strathclyde Police, SCRA, the NHS Greater Glasgow and Clyde Health Board and voluntary sector organisations have been asked to prepare an action plan indicating how they will address the main recommendations of this report, and to share that plan with key stakeholders.

Neil McKechnie  
Director  
Services for Children  
June 2007

## 9. Quality indicators used to evaluate services

The HM inspection team used quality indicators when making evaluations in the joint inspection of services for the children of asylum seekers. The quality indicators used in this inspection were selected from those published in October 2006 in ‘*A Guide for evaluating services for children and young people using quality indicators*’. In the report and this appendix we make clear the evaluations made by using these word scale categories:

- Excellent, provision which is a model of its type
- Very good, provision characterised by major strengths
- Good, provision characterised by important strengths that clearly outweigh weakness
- Adequate, provision where strengths just outweigh weaknesses
- Weak , provision that has some strengths but important weaknesses
- Unsatisfactory, provision with major weaknesses that require immediate remedial action

<b>How well do services in Glasgow meet the needs of children of asylum seekers?</b>	
2.1 Impact on children and young people	Good
2.2 Impact on parents and carers	Very good
<b>How good is the delivery of services for children of asylum seekers?</b>	
5.1 Knowing and communicating the needs of children and young people	Good
5.2 Delivering services that ensure children and young people are safe, nurtured, healthy, achieving, active, respected and responsible, and included	Good
5.3 Improving services for children and young people	Adequate
<b>How good is the management of services for children of asylum seekers?</b>	
6.2 Participation of children, young people their families and others	Adequate
7.2 Staff deployment	Good
7.3 Training and development of staff	Adequate
8.4 Information systems	Adequate
<b>How good is the leadership of services for children of asylum seekers?</b>	
9.3 Leading people and developing partnerships	Very good

## **10. List of Inspection Activities**

### ***Meetings with elected members***

Elected Members

Spokesperson for Equalities (including asylum seeker issues)

### ***Interviews with local authority staff***

Chief Executive

Executive Director (Education, Training and Young People)

Depute Director of Education Services

Director of Social Work Services

Head of Corporate Policy

Education Services Lead Officer – Education Provision for Asylum Seeker Children

Social Work Services Welfare Benefits Officer

Social Work Services Head of Immigration and Emergency Services

Social Work Services Manager of Standby (Out of Hours) Service

Social Work Services Practice Team Leader

Culture and Leisure Strategic Manager Culture and Sport (Social Renewal)

### ***Focus groups with local authority staff***

Youth Workers

Culture and Leisure Services managers

Educational Psychologists

Social Workers

Community Development Social Workers

Social Workers in the Emergency Social Work Service

Unaccompanied Asylum Seeking Children and Youth Homelessness Team

Social Work Practice Team Leaders

Education Services Head of pre five/childcare Services

Childcare Strategy Manager

### ***Interviews with Glasgow Asylum Seekers Support Project***

Operations Manager

Education Co-ordinator

Health Co-ordinator

Project Officer

### ***Interviews with Glasgow Translation and Interpreting Service***

Manager

Co-ordinator

### ***Visits to local authority children's homes***

Crawford St Children's Unit

Hamilton Park Avenue Residential Unit

### ***Visits to nurseries and family centres***

Anderson Street Nursery School

Lamlash Nursery School

Rosemount Lifelong Learning Centre

Sighthill Nursery School

***Visits to primary schools***

Carnwadric Primary School  
St Aloysius Primary School  
Sir John Maxwell Primary School  
St Martha's Primary School  
Sighthill Primary School

***Visits to secondary schools***

All Saints Secondary School  
Castlemilk High School  
Cleveden Secondary School  
St Roch's Secondary School  
Shawlands Academy

***Visit to special needs school***

Ashcraig School

***Visits to further education colleges***

Anniesland College  
Langside College

***Interviews with NHS staff***

Chief Executive  
Homelessness Liaison Nurse  
Liaison Midwife for Asylum Seekers  
Asylum Seeker Nurse Co-ordinator

***Focus groups with NHS staff***

North Community Health Partnership and Department of Child and Family Psychiatry staff  
Dental professionals  
Paediatricians  
School Nurses  
Community Midwives  
Health Visitors  
Looked After Children's Nurses

***Visits to NHS services***

The Brownlee Centre  
COMPASS – Asylum Seekers and Refugees Mental Health Division Team  
Fernbank Medical Centre  
Glenfarg, Possilpark Health Centre  
Sandyford Initiative

***Interviews with Strathclyde Police***

Chief Constable  
Divisional Commander  
Chief Inspector Asylum Liaison Officer  
Superintendent Force Diversity Officer

***Focus groups with Strathclyde police***

Operational Inspectors  
Community Police Officers  
Front Line Officers  
Diversity Officers

***Interviews and focus groups with SCRA***

Regional Manager  
Children's Reporters

***Visits to voluntary sector services***

Church of Scotland Group and Crèche  
YMCA Red Road Flats Floor 28  
NCH Young Refugee Befriending Project  
Prince's Trust  
The Big Step Young Survivors – Steps to the Future Group  
YMCA Branston Court  
British Red Cross  
St Rollox Church  
The Campus Project

***Interviews and focus groups with the Scottish Refugee Council***

Interview of Head of Client Services  
Focus Group of Voluntary Sector Representatives  
Focus Group of Scottish Refugee Council staff

***Focus groups with other agencies***

Careers Scotland

***Observation of meetings***

Karibou Woman's Group  
Education Trusts Meeting  
Launch of Welcome Handbook  
Cosla Refugee and Asylum Seekers Consortium  
Looked After and Accommodated Review  
Framework for Dialogue Maryhill  
Greater Pollok Integration Network  
Interagency Unaccompanied Asylum Seeking Children Group  
Unaccompanied Asylum Seeking Children North  
Glasgow Asylum Seeker Support Project Senior Management Team Meeting  
Immigration and Asylum Group  
Pastoral Care Group  
Parents Evening

***Case file reading***

Review of health, police, social work and education records for six children

***Meetings with representatives from campaigning groups***

The Glasgow Girls

Glasgow Campaign to Welcome Refugees

Positive Action on Housing

## **How can you contact us?**

### **If you would like an additional copy of this report**

Copies of this report have been sent to the Chief Executives of the local authority and Health Board, Chief Constable, SCRA Regional Manager, Members of the Scottish Parliament, and other relevant individuals and services. Subject to availability, further copies may be obtained free of charge from HM Inspectorate of Education, First Floor, Denholm House, Almondvale Business Park, Almondvale Way, Livingston EH54 6GA or by telephoning 01506 600262. Copies are also available on our website [www.hmie.gov.uk](http://www.hmie.gov.uk).

### **If you wish to comment about this inspection**

Should you wish to comment on any aspect of this inspection you should write in the first instance to Neil McKechnie, Director Services for Children at HM Inspectorate of Education, Denholm House, Almondvale Business Park, Almondvale Way, Livingston EH54 6GA.

### **Our complaints procedure**

If you have a concern about this report, you should write in the first instance to Hazel Dewart, Business Management Unit, HM Inspectorate of Education, Second Floor, Denholm House, Almondvale Business Park, Almondvale Way, Livingston EH54 6GA. A copy of our complaints procedure is available from this office or by telephoning 01506 600258 or from our website at [www.hmie.gov.uk](http://www.hmie.gov.uk).

If you are not satisfied with the action we have taken at the end of our complaints procedure, you can raise your complaint with the Scottish Public Service Ombudsman. The SPSO is fully independent and has powers to investigate complaints about Government departments and agencies. You should write to the SPSO, Freepost EH641, Edinburgh EH3 0BR. You can also telephone 0800 377 7330 (fax 0800 377 7331) or e-mail enquiries to [ask@spsso.org.uk](mailto:ask@spsso.org.uk). More information about the Ombudsman's office can be obtained from the website: [www.spsso.org.uk](http://www.spsso.org.uk).

Crown Copyright 2007

HM Inspectorate of Education

This report may be reproduced in whole or in part, except for commercial purposes or in connection with a prospectus or advertisement, provided that the source and date thereof are stated.