Theme	Evidence	Emerging Recommendation?
Scope of Review	Main issues	
	• To ensure that asylum seekers are welcomed and assimilated as effectively as possible in order to ensure social cohesion is maintained.	
	• To assess the effectiveness of Council and partner support services, including housing, health, education (including early years), community safety and the role of voluntary and community groups, as well as any gaps in provision/co-ordination.	
	• To understand the demand for services in the future, and the impact of this on current providers and what new responses may be needed.	
	To assess the effectiveness of information-sharing and quality of strategic planning with the North East Migration Partnership, including its role in representing the views of Stockton-on-Tees Borough Council.	
	Key Lines of Enquiry	
	<ul> <li>What is the role of the various agencies involved in Asylum Seeker service provision (Home Office, accommodation providers, Local Authority, NHS, etc)?</li> <li>What is the role of the North East Migration Partnership?</li> </ul>	
	<ul> <li>What information on asylum seekers to be placed in the area is currently provided to local services and is this sufficient? What information is available to project future demand on services / how is this used?</li> </ul>	
	• What does the current asylum seeker accommodation process look like? What are the emerging features of the new national accommodation support contract?	
	• What initial support is provided to asylum seekers upon arrival in Stockton? What support/education is provided for children?	
	<ul> <li>What role is being undertaken by the voluntary sector in supporting services for asylum seekers?</li> <li>What additional support services are in place eg. health services, support for asylum seekers experiencing abuse? Have additional needs been identified?</li> </ul>	
	What is the Council's role in relation to Asylum Seekers whose applications are refused?	
Background	The Government has made a long-term commitment to support individuals seeking asylum in the UK who are fleeing violence, persecution and political instability. The Home Office is responsible for the management of this process, both in terms of asylum dispersal, as well as enforcement in relation to the removal of individuals not granted leave to remain.	
	Nationally the Home Office has had to deal with unprecedented numbers of asylum seekers arriving in the United	

Theme	Evidence	Emerging Recommendation?
	Kingdom. There had been a year-on-year increase of 19% for arrivals which has significantly exceeded initial projections, and it was anticipated that this figure would continue to rise year-on-year.	
	Stockton continues to act as a major dispersal area for asylum seekers. The Home Office has made a commitment to reducing the number of new arrivals in Stockton in the long-term to reduce the risk of the agreed Home Office threshold total being exceeded. The current agreement for Stockton is a 'one in, one out' approach so that the figure remains static.	
	A national contract (COMPASS) is in place to accommodate asylum seekers. In the North East, G4S were awarded the contract, and they sub-contracted with Jomast to act as their private sector housing provider. In terms of wider support, the contract allowed for asylum seekers to be assisted to sign up for health care services, as well as signposting to additional support services and facilities in the local area. No provision was made available for wider social support and integration. The main scrutiny of G4S is via the Home Office and, ultimately, Parliament. The national contract is due for renewal in 2019.	
	In terms of additional support for asylum seekers, there are a number of services locally that provide assistance in relation to signposting for support, community engagement and advocacy. The Home Office has contracted Migrant Help to provide first point of contact support for individuals and families. There is also a requirement for individuals and families to register with the Arrival Medical Practice on Yarm Road as their main gateway to health services. Further support and signposting to services is also provided here.	
	Other agencies such as Justice First and the North East Refugee Service (NERS) provide a range of advocacy and support services where possible. Further to this, the British Red Cross has recently been successful with a £500,000 funding bid which will provide additional support over the next four years through the Ariadne Project. The project began in 2017, and Public Health is looking to provide additional support to promote key Public Health messages relating to asylum seekers and refugees, with work ongoing to look at how best to achieve this.	
	In order to support the management of asylum and migration issues at a regional level, the Home Office provided funding for the development of Regional Migration Partnerships. The North East Migration Partnership (NEMP) is made up of all North East Local Authorities, representation from VCS organisations supporting asylum seekers, health representation, all three Police forces, DWP and Probation/CRC. Meetings are also attended by the Home Office and the contract provider G4S. The aim of the partnership is to provide a single voice for the region, both in terms of lobbying the Home Office for improvements, as well as co-ordinating regional responses to emerging issues and calls for additional support.	

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Nationally Commissioned Service Providers (G4S & Migrant Help)	G4S has been the North East, Yorkshire and Humberside housing provider since they were awarded two of the six national Commercial & Operational Managers Procuring Asylum Support Services (COMPASS) contracts in 2012. Along with their other contracted region (Midlands and East of England), approximately 18,000 asylum seekers are currently supported under G4S in over 5,000 properties. In the initial period of the contract, G4S were housing around 9,000 asylum seekers, half the current number. The current contract ends in autumn 2019.	
	Accommodation requirements are split into two stages: a) During the first stage of their claim, asylum seekers stay in Initial Accommodation (IA) for around 19 days - Urban House in Wakefield is the centre where most asylum seekers who come to Stockton-on-Tees are initially accommodated. b) Upon destitution checks, asylum seekers are then moved to Dispersed Accommodation (DA) - this is provided on a 'no-choice' basis, though efforts are made to find the most appropriate housing for their needs in recognition of language/religion/case type. Asylum seekers remain in DA while their claim is assessed by the Home Office, and it was noted that some nationalities receive a quick decision, whereas applicants from other countries can wait for years.	
	Within DA, some asylum seekers may share a room (these could be relatives in family properties or unrelated males of females in Houses of Multiple Occupation (HMOs)). G4S gave assurance that if unrelated single applicants are allocated to a shared room, they always aim to ensure there is compatibility with nationality, language and religion.  A number of key documents are provided to asylum seekers upon access to DA, including an occupancy agreement (which must be signed in order to take up the accommodation, and outlines their own responsibilities), a G4S briefing pack (available in eight languages), an induction checklist, details on the complaints process, and local area welcome leaflets and maps. The sub-contractor, Jomast, also take asylum seekers on a tour of the area (which is above and beyond what they are expected to do), and enable individuals to register with a GP and, for children, schools. The G4S briefing pack is currently being reviewed regarding its readability.	
	Incorporated within the COMPASS contracts are Key Performance Indicators (KPIs), a number of which involve housing maintenance standards - G4S acknowledged the need for a KPI regime, and stated that they have robust measures in place to ensure delivery. However, in response to Member concerns around asylum seeker housing issues, G4S emphasised that they can only address problems that they are made aware of, and that any complaints/concerns should be directed to them instead of the sub-contractor, Jomast (this has been re-iterated with partners, including voluntary and community sector support groups).	

Theme	Evidence	Emerging Recommendation?
	Along with the key areas of housing and transporting asylum seekers, co-ordination with strategic partners (including the Local Authority) regarding the sharing of information and in supporting social cohesion was highlighted, as were measures in promoting the safety and wellbeing of asylum seekers while they are in DA.	
	A 24/7 G4S COMPASS Service/Call Centre (which includes a freephone number) is in place for asylum seekers in relation to general enquiries, requests for information/advice, and if they do not feel able to call the Police. Interpreter services are available at all times which remove language barriers and ensure clear communication.	
	The Home Office are currently considering alternative delivery models (six options have been proposed), as well as the geographical spread, for the post-2019 asylum contracts. Stakeholder engagement events are underway and Local Authorities are being asked for their input.	
	Asylum Help, part of the Migrant Help organisation, were awarded a contract in 2014 to provide asylum support applications for adult asylum seekers, failed adult asylum seekers and any dependents (UK-wide). A grant was also awarded in 2014 to provide advice and guidance services, including to adult refugees. Both the contract and grant have been extended to 2019.	
	The Asylum Help service delivery model involves a UK-wide free helpline available in 15 languages, regional services for clients in IA, and outreach services in some dispersal areas. Co-ordination with other key local partner agencies is crucial in achieving positive outcomes for asylum seekers.	
North East Migration Partnership (NEMP)	NEMP was formed in January 2015 as a result of emerging regional and local issues. It has a small team of staff with sub-groups co-ordinating asylum and refugee issues in the region, and the transition between asylum seeker and refugee. NEMP is annually reviewed and approved by North East Chief Executive's, alongside Leaders and Elected Mayors, with Migration Lead Officers and Lead Members nominated by each Local Authority in the region (for Stockton-on-Tees, this is Steven Hume and Cllr Steve Nelson respectively).	
	To relieve the demands on high-dispersal areas such as Middlesbrough and Stockton-on-Tees, NEMP have successfully sought a more equitable distribution of asylum seekers across the region - all North East Local Authorities have now agreed to take part in asylum dispersal by the end of 2017. Other developments include enhanced communication protocols with all partners, an Asylum Accommodation Use Protocol to improve consultation with Council's and the Police on new homes for asylum use, and encouraging complaints to go direct to G4S rather than the sub-contractor, Jomast.	

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	The Committee were informed of the current key priorities for NEMP, which include reviewing the local multi-agency groups, continuing support for Local Authorities who want to address room sharing for unrelated asylum seekers, and improving pre-arrival information on those coming to the region (a pilot is ongoing in Middlesbrough). Input to, and support of, the new asylum contract, as well as supporting the implications of the changes in the Immigration Act 2016, is also a central focus for NEMP.	
	Members were provided with details of the Syrian Vulnerable Persons Resettlement Scheme (SVPRS) and Vulnerable Children's Resettlement Scheme (VCRS). Stockton was not expected to support the SVPRS initially due to the high dispersal rate of asylum seekers across the Borough - however, this may be revisited due to the recent reduction in asylum seeker numbers locally. Similarly, Stockton were not expected to participate in the Unaccompanied Asylum Seeking Children (UASC) scheme initially due to existing pressures from other migration programmes and higher levels of Looked After Children - again, a formal request from the Home Office to review this position may be received in the near future.	
	As a vehicle that represents the region, NEMP has evolved to better represent the various Local Authorities, and its work has increased the accountability of the housing provider - it is therefore hoped that NEMP can play a significant role in influencing the post-2019 asylum contract. While NEMP is funded by the Home Office, it needs to ensure, as far as possible, it remains independent and represents the interests of regional Local Authorities (who will be guided by their own interests, which are subject to change). Increased NEMP focus on/involvement of Members would be a positive development.	
Local Authority	The Council's Private Sector Housing team are involved in the consultation process regarding the procurement of new properties to be used for asylum seeker accommodation.	
	Housing conditions in accommodation occupied by asylum seekers are addressed in the same way as with other properties in the private rented sector, though the team receive few queries in relation to asylum seekers. Properties are assessed using the Housing, Health and Safety Rating System (HHSRS) - this does not set a minimum standard; it is concerned with removing or reducing the risk of harm from housing-related hazards. Should any remedial work to a property be identified, an informal approach to the landlord is usually initiated. If this proves unsuccessful, the Council's Private Sector Housing team visit and undertake an inspection/assessment - where required, formal action via the serving of a notice to have work carried out is instigated.	
	The mandatory licensing of Houses in Multiple Occupation (HMOs) - there are four such properties in Stockton-on- Tees - is also aimed at improving housing conditions. This ensures that landlords of HMOs are fit and proper, each	

Theme	Evidence	Emerging Recommendation?
	HMO is reasonably suitable for the number of people allowed under licence (this is determined on the amenities available, and numbers are regularly monitored), the condition of the property and its contents are satisfactory and in good working order, and the standard of management is adequate. However, the Committee were informed that, due to resource limitations, inspections of HMOs are not as thorough now as in the past, with less pro-active visits carried out. The inspection itself remains as rigorous, but there is a greater reliance on tenants to raise issues themselves.	
	The Council's Homelessness and Housing Solutions team provide support to asylum seekers in their transition to permanent housing following confirmation of them being granted leave to remain.	
	Although the UK Visas & Immigration letter notifying asylum seekers of the decision to grant them leave to remain is dated 28 days prior to their support being discontinued, and signposts individuals to contact the local housing office to help find accommodation, there will be delays in asylum seekers receiving this correspondence (e.g. it is sent in the post, they may be away from the property at the time), as well as issues around whether they understand the letter (they may have to take it to any support groups representing them for interpretation), before they then contact the Local Authority for help - this eats into the time the Homelessness and Housing Solutions team has to source accommodation.	
	Information on asylum seeker children is received by the Council's School Admissions Team from a number of sources, but is often inconsistent - this leads to schools being given limited information which impacts on their ability to provide robust inductions. In some cases, neither Jomast nor UK Visas & Immigration had provided any notification to the Admissions Team.	
	The Committee heard of instances where asylum seeker children were moved to another area in Stockton, with parents (or the schools themselves) having to fund transport to maintain the child's place at the school they were originally attending.	
	Schools (predominantly in central Stockton and Thornaby) have to adopt a very flexible approach when inducting asylum seeker children, with a high level of input (assessment, resources, staffing) required despite the knowledge that a child may not stay at the school beyond a few months. External pupil-facing support for schools with high asylum seeker pupil turnover is no longer in place, and funding for these children is not always ring-fenced. In addition, some children are not eligible for free school meals, and there has been evidence of schools funding meals for families.	

Theme	Evidence	Emerging Recommendation?
	Regarding Early Years, there is evidence that some asylum seeker children have been exempt from the two-year old provision - referrals have therefore been made to Social Care for funding.	
	Members noted the 'Schools of Sanctuary' initiative - Stockton lead on this within the Tees Valley and produced the national Schools of Sanctuary audit which is available on the national website. Layfield Primary School, Yarm, was the first school in Stockton-on-Tees to be recognised as a School of Sanctuary, with Egglescliffe School following soon after.	
	As asylum seekers are often ineligible to access English for Speakers of Other Languages (ESOL) funded classes - national funding criteria must be adhered to - Stockton Learning and Skills (formerly Tees Achieve) have visited all informal ESOL providers in Stockton (usually voluntary organisations) to raise awareness of support that they can fund for both individuals and volunteers running classes (e.g. train-the-trainer workshops to ensure informal provision matches the formal ESOL curriculum).	
	In response to the wider impact of migration in the UK, the Government has allocated a total of £140million to respond to the problems caused by high migration into Local Authorities. The aim of the fund is to address this impact and deliver benefits to the established resident population. In light of this opportunity, a funding bid for Stockton was submitted - this has been successful in securing £471,386 from the Controlling Migration Fund (see appendix 1 for details). A separate enterprise bid is also being developed in partnership with Stockton Riverside College.	
Health	Those seeking asylum can face a huge array of practical, emotional, physical and mental health issues. Although many of these are often initially 'parked', an overriding sense of insecurity pertains as they do not know if they will be able to stay.	
	All people seeking asylum have the right to apply to be fully registered with an NHS general practice, and GPs cannot refuse to register an individual due to the patient's residency status. As such, primary healthcare is a crucial gateway for the health and wellbeing of people seeking asylum. It was noted that the Home Office can now access migrants NHS data to track down undocumented migrants, overstayers and failed asylum seekers (this is being challenged via a Doctors of the World '#StopSharing' campaign).	
	Arrival Medical Practice began in 2003 as a specialist practice serving 500 asylum seeking patients. Included within the staffing structure was an Asylum Support Team from the Local Authority (comprising mainly Housing elements, but with some Social Care input). Patients were to be assessed, care started, and then moved into mainstream	

Theme	Evidence	Emerging Recommendation?
	General Practice.	
	The Practice ethos is to be a supportive and safe place for asylum seekers to talk about their thoughts and feelings, which fosters a 'can do' philosophy that is not limited to clinical needs (staff solve all kinds of problems), and is ultimately helpful towards these individuals who usually do not feel good about themselves. The Practice focuses on wellbeing rather than illness, something which is more than simply health.	
	Asylum seekers can face a range of specialised health issues including infectious diseases (e.g. HIV, TB), lack of immunisations, and experience of torture/violence, rape, bereavement and female genital mutilation (FGM). These issues are compounded by the uncertainty around their asylum cases, frequent re-housing, poverty, separation from family members, low esteem and loss of status, and a lack of a support network. Being inactive and unable to work is linked to ill health, and asylum seekers may also be vulnerable to exploitation and radicalisation.	
	A good induction to the locality, with clear and understandable signposting, along with language provision are crucial inclusion mechanisms - social, volunteering, education and exercise opportunities would also aid integration into the community. Asylum seekers do not know what to do to fit in, so who is telling them what is expected of them? They are potentially valuable to the area, not a burden.	
	During the Committee's visit to the Arrival Medical Practice, asylum seekers praised the Practice for its welcoming/open approach, and the staff for their desire to help. However, on a wider note, concerns were expressed over the lack of respect they receive from the housing sub-contractor, Jomast, and the difficulty in accessing services/voluntary work to avoid inactivity and aid social inclusion.	
Voluntary & Community Sector (VCS)	The Committee received an overview of several regional and local VCS groups who provide services for asylum seekers. Regional Refugee Forum North East, which represents the collective voice of the region's refugee and asylum seeker (RAS) community, gave details of recent activity involving their Health, Community Safety and Stronger Families Working Groups, the latter of which now has dedicated funding meaning that work will be scaled up to systematically engage with Local Authorities.	
	Regional Refugee Forum North East emphasised the need for public sector and VCS agencies to develop more understanding of refugee-led community organisations (RCOs) and support their role. In addition, increasing opportunities for purposeful and positive activity for asylum seekers (who cannot work whilst waiting for a decision on their case), preventing the sharing of rooms by unrelated adults (a cause of much tension and escalating risks amongst G4S residents), and improving access to ESOL classes before the six-month entitlement were identified as	

Theme	Evidence	Emerging Recommendation?
	being key areas of development.	
	Justice First provided details of their work in helping people refused asylum to re-engage with the legal process (free-of-charge). Awareness-raising, lobbying and involvement in partnerships was also noted, as was the Mary Thompson Fund, a hardship fund that responds to the critical and emergency needs of those who are seeking asylum or are settled refugees in the Tees Valley.	
	The British Red Cross offer practical and emotional support to individuals and families at all stages of the asylum process, and following a successful bid via the Big Lottery Fund, have established the Ariadne Project. This is a partnership across Stockton-on-Tees, Middlesbrough and Hartlepool, which will deliver end-to-end holistic support for RAS with a range of partners through a needs-led design involving assessment, signposting, information-giving and referrals for casework to the appropriate partner.	
	Concerns were raised from a number of organisations/groups regarding the implementation of the Immigration Act 2016. It is believed that this will bring a rise in destitution if families are left without support and accommodation (including access to NHS services), a result which may bring additional demands upon the Local Authority in particular. However, it should be noted that details have yet to be released in relation to the implementation of the Act.	
	A VCS questionnaire which was circulated to refugee-led community groups (RCOs), local churches and other relevant asylum seeker service providers - appendix 2 shows the key issues/concerns/gaps in provision identified by these organisations.	
Community Safety / Cohesion & Diversity / Integration	Members received an overview from the Victim Care and Advice Service (VCAS), a free, independent and confidential service to help victims cope with the immediate impact of crime and subsequently make a full recovery. VCAS expressed concerns around people from different countries, continents and cultures being placed together in shared accommodation when they have nothing in common, and stressed the need to spend time with asylum seekers to explain British cultures.	
	Cleveland Police drew attention to the barriers that exist which can inhibit refugee and asylum seeker (RAS) community engagement with Police services (e.g. reluctance to report a crime as this could have an adverse effect on their Home Office decision), and their response to these identified barriers. This included the creation of a RAS Co-ordinator, now filled by a refugee with experience of engaging asylum seekers to promote social inclusion and integration. Future training and engagement with the RAS community was noted, a key area being the creation of	

Theme	Evidence	Emerging Recommendation?
	joined-up approaches to making RAS feel welcome as part of the community, with access to all-round services for their inclusion/wellbeing.	