Internal Audit Report

Refugee and Migration Services

22 April 2025

CEJ2403

Overall Assessment	Reasonable Assurance

Contents

This Internal Audit review is conducted for the City of Edinburgh Council under the auspices of the 2024/25 internal audit plan approved by the Governance, Risk and Best Value Committee in March 2024. The review is designed to help the City of Edinburgh Council assess and refine its internal control environment. It is not designed or intended to be suitable for any other purpose and should not be relied upon for any other purpose. The City of Edinburgh Council accepts no responsibility for any such reliance and disclaims all liability in relation thereto.

The internal audit work and reporting has been performed in line with the requirements of the Global Internal Audit Standards (UK Public Sector) and as a result is not designed or intended to comply with any other auditing standards.

Although there are specific recommendations included in this report to strengthen internal control, it is management's responsibility to design, implement and maintain an effective control framework, and for the prevention and detection of irregularities and fraud. This is an essential part of the efficient management of the City of Edinburgh Council. Communication of the issues and weaknesses arising from this audit does not absolve management of this responsibility. High and Critical risk findings will be raised with senior management and elected members as appropriate.

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Executive Summary

Engagement conclusion and summary of findings

There is a generally sound system of governance, risk management and control in place over the design and operating effectiveness of the policy, procedures and controls established to support service delivery and outcomes to refugees and people seeking asylum.

The following improvements have been identified to support effective management of objectives and associated governance, and service delivery risks:

- a policy should be developed for the management of refugee and asylum seekers, and comprehensive procedures should be developed to guide officers and ensure consistency
- a corporate review of current payment rates for people with no recourse to public funds should be undertaken
- role-specific learning should be revised, and there should be ongoing monitoring of completion by managers
- requirement to improve data entry to Swift while the replacement system is developed
- confirmation of PVG requirements and management of any associated risks

- a performance monitoring framework should be developed to allow oversight of services delivered, reporting should be strengthened, and quality assurance processes improved
- the Refugee and Migration Services risk register should be updated and reviewed regularly.

Areas of effective practice

- the service welcomed audit findings to enhance their current practice and had begun addressing improvements prior to the report being issued
- No Recourse to Public Funds (NRPF) decisions are taken by NRPF panels, to provide greater expertise and better decision making
- Children's Services produce monthly monitoring reports which highlight data quality issues and social work practice standard key performance indicators (KPIs) so they can be rectified
- Refugee and Migration Service submit an annual Home Office return and 6-monthly reports to the Housing, Homelessness and Fair Work committee
- there is regular communication with the Home Office and COSLA.

Audit Assessment

Audit Area	Control Design	Control Operation	Findings	Priority Rating
Policies and Procedures	🔴	🟠	Finding 1 – Policies, Procedures and Alignment to Strategy	High Priority
			Finding 2 – Colleague Learning and Development	Medium Priority
Operational Processes and Oversight	🟠	🟠	Finding 3 – Operational Delivery	Medium Priority
			Finding 4 – Oversight and Quality Assurance	Medium Priority
Risk Management	🟠	🟠	Finding 5 – Risk Management	Medium Priority

See Appendix 1 for Control Assessment and Assurance Definitions

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Background and scope

The United Kingdom is a signatory to the [1951 UN convention](#) and is obliged to consider applications for asylum by a person who claims to be fleeing persecution. The [Immigration and Asylum Act 1999](#) includes provisions about immigration and asylum. Many services which are essential to supporting refugees are devolved and are the responsibility of the Scottish Government and Scottish local authorities. The City of Edinburgh Council (the Council) has been involved with UK Government resettlement schemes since November 2015 [in response to humanitarian crises](#) and, in February 2022, agreed a revised commitment of resettling 100-150 people per year. Support for refugees is provided by the Refugee and Migration Team.

Children's Services have been responsible for supporting Unaccompanied Asylum-Seeking Children (UASC) since around 2007. [Section 22 of the Children (Scotland) Act 1995](#) (the Act) places a duty with local authorities to safeguard and promote the wellbeing of children, regardless of the child's or parents' immigration status. [Under Section 25](#) of the Act, local authorities are legally obliged to provide [unaccompanied children](#) with accommodation and safeguarding. UASC and young people arriving spontaneously or via the [National Transfer Scheme](#) (NTS) can apply for asylum. Children's Services are also responsible for supporting families with no recourse to public funds (NRPF) due to the requirement to provide care to children. COSLA provides a [framework for local authorities](#) to follow which is linked to Scottish Government and COSLA's '[Ending Destitution Together](#)' strategy. Management has advised the current organisational review of Children's Services means there is likely to be significant change in the way the UASC and NRPF cases are managed.

The Council's Refugee and Migration Service support households resettled under formal UK Government schemes by providing ongoing resettlement support outlined in funding instructions issued by the UK Home Office and consistent with the [Indicators of integration framework](#). Households with a refugee background arriving in Edinburgh outwith formal schemes are offered short-term resettlement support and sign-posted to mainstream services. Adults with [no recourse to public funds](#) (NRPF) are supported to follow a course of action which will regularise their status (such as submission of an asylum or some other immigration claim) or offer them some other route out of destitution, in line with duties under [Section 12 of the Social Work (Scotland) Act 1968](#) and [COSLA guidance](#). The system [NRPF Connect](#) facilitates immigration queries between local authorities and the UK Home Office.

The [New Scots Refugee Integration Strategy:2024](#) is led jointly by Scottish Government, COSLA and the Scottish Refugee Council and provides a framework to support the integration of refugees, people seeking asylum and other forced migrants within Scotland's communities to ensure all local authorities and other agencies meet their responsibilities and deliver quality support and services. The [New Scots refugee integration strategy: delivery plan 2024 to 2026](#) sets out actions to support integration.

Reporting to [Housing, Homeless and Fair Work Committee](#) for Refugee and Migration services for adults and families through schemes was updated to six-monthly from February 2024 and provides an update on support for refugees, asylum seekers, and displaced people. Children's Services report to [Education, Children and Families Committee](#).

Scope

The objective of this review was to assess the adequacy of design and operating effectiveness of the key controls established to ensure the Council support refugees and adults/families with no recourse to public funds and how it aligns with the Scottish Government New Scots Refugee Integration Strategy. The approach to unaccompanied asylum-seeking children was also included.

Testing was performed on a sample basis across the relevant areas for current cases, which were opened between 2015 and 2024.

Alignment to Risk and Business Plan Outcomes

The review also considers assurance in relation to the following Corporate Leadership Team risk categories:

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- Strategic Delivery
- Financial and Budget Management
- Health and Safety (including public safety)
- Resilience
- Supplier, Contractor, and Partnership Management
- Regulatory and Legislative Compliance
- Reputational
- Fraud and Serious and Organised Crime.

Business Plan Outcomes:

- Core services for people in need of care and support are improved.

Limitations of Scope

The following areas were excluded from scope:

- Ukraine support - different arrangements apply for people displaced from Ukraine and arriving in the UK under Homes for Ukraine/Scottish Super Sponsor schemes

- funding of resettlement schemes and no recourse to public funds (NRPF)

- families with no recourse to public funds (NRPF), who are not refugees

- the Home Office annual return, and reporting were not tested for accuracy.

Reporting Date

Testing was undertaken between 17 December 2024 and 10 February 2025.

Audit work concluded on 19 February 2025 and the findings and opinion are based on the conclusion of work as at that date.

Findings and Management Action Plan

Finding 1 – Policies, Procedures and Alignment to Strategy

Finding Rating	High Priority

Policy

Policies and procedures are essential to ensure clear direction, clarity, consistency, compliance, and standardisation. In addition, they can be used to train new members of staff. Regular review of key policies and procedural guidance is essential to ensure that processes remain accurate, relevant, and in line with current legislation and industry standards.

There is no policy in place for the management of refugee and asylum seekers, which sets out the legislative requirements, the Council's approach and responsibilities, and expected outcomes.

The payment rates for No Recourse to Public Funds (NRPF) Families and NRPF Adults have not been reviewed since 2014-15. In addition, there are some instances where the route an individual takes through the system can alter the payments they receive, e.g. a single woman being supported by Refugee and Migration Service would receive £65 per week, but a pregnant woman working with Children's Services would receive £59.62.

Procedures

COSLA have developed good practice guidance and example service models which aim to support local authorities providing services to asylum seekers and people with NRPF. However, there are limited formal Council procedures for officers working with refugees and asylum seekers.

The New Scots Refugee Integration Strategy has been designed to ensure everyone plays their part in meeting responsibilities and delivering quality support to those who need them and outlines 6 principles and 6 outcomes to achieve integration.

Children's Services, who are responsible for Unaccompanied Asylum Seeking Children (UASC) and NRPF Families, use social work legislation, the Council's corporate parenting plan and Edinburgh's Promise, to guide their work. Council guidance has been developed for managing unaccompanied asylum-seeking children (UASC), and there is draft guidance in place for NRPF. These documents do not set out clear and detailed procedures for the management of UASC and NRPF Families, but management have advised these are currently being developed.

Refugee and Migration Services provide support to refugees coming through government resettlement schemes, NRPF Adults, and refugees outwith government resettlement schemes. There is detailed guidance available to officers, but these have not been collated into a single procedure, which would make it more accessible to officers and would help ensure consistency.

There has been no mapping exercise performed by either Children's Services or Refugee and Migration Services to ensure that all elements of the COSLA guidance and the New Scots Refugee Integration Strategy have been implemented, however, management have advised that UASC processes are in line with social work legislation. In addition, although support is being provided, outcomes are not always recorded in a way that would clearly establish if COSLA guidance or the New Scots Strategy are being complied with. Refugee and Migration Services management have advised that for those refugees using government schemes, they meet Home Office requirements, and this surpasses the requirements of other guidance; however, the New Scots Strategy includes additional integration outcomes relating to education, health, and housing.

In line with the factors listed in section 19 of the Children and Young People (Scotland) Act 2014, a child wellbeing assessment should be undertaken in line with Getting it Right for Every Child (GIRFEC) national practice model. Officers advised that NRPF Families instead complete a shorter assessment focussed on the reason for social work involvement rather than welfare concerns. There is no procedural guidance stating which assessment to perform.

Risks

- **Service Delivery –** if policy and procedures are not in place, officers may not work consistently, and citizens may be put at risk
- **Reputational –** without written procedures and clear guidance, decisions taken may not be consistent and in line with Council responsibilities, and legal challenges may be more likely
- **Regulatory and Legislative compliance** – if policy and procedures are not in place, service delivery may not meet regulatory and legislative requirements, and good practice guidance.
- **Strategic delivery** – the Council's approach may not be in line with national strategies and COSLA guidance.

Recommendations and Management Action Plan: Policies, Procedures and Alignment to Strategy

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
1.1	A policy should be developed for the management of refugee and asylum seekers. It should include, at a minimum, the legislative requirements, the Council's approach and responsibilities, and expected outcomes. In line with requirements, an Integrated Impact Assessment should be considered. The policy should then be approved by committee and published on the Council's policy register.	An overarching policy will be developed which clarifies the Council's compliance with legislative requirements. The policy will incorporate the work of all areas and will be supported by service specific procedures. Support will be sought from Strategy and Insight for this work. An updated IIA will form part of this work.	Executive Director, Children, Education and Justice Services	Refugee and Migration Programme Manager Head of Service, Corporate Parenting	30/11/2026
1.2	a) Children's Services should develop documented procedures which are approved and version controlled, and should be aligned with legislation and good practice to support outcomes and integration for UASC. Procedures should include: • outcomes and activities • assessments and plans to be completed • templates to be used • storage location of assessment, plans and templates in line with the Council's information governance and records retention requirements • frequency of visits/contact	Children's Services SLWG will review current assessment documentation, recording and timescales as part of the development of procedures and guidance and inclusion within the practice standards and align these to performance outcomes and measurable KPIs. This group will be led by HOS with support from CS development officer.	Executive Director, Children, Education and Justice Services	Head of Service, Corporate Parenting	01/04/2026

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
	• frequency of reviews • how relevant outcomes including category and headlines should be recorded • timescales for completing assessments and inputting notes • a formal mapping of legislative requirements and guidance.				
1.2	b) Children's Services should develop documented procedures which are approved and version controlled and should be aligned with legislation and good practice to support outcomes and integration for No Recourse to Public Funds (NRPF) families. Procedures should include: • assessments and plans to be completed • templates to be used • storage location of assessment, plans and templates in line with the Council's information governance and records retention requirements • frequency of visits/contact • frequency of reviews • how relevant outcomes including category and headlines should be recorded • timescales for completing assessments and inputting notes • a formal mapping of legislative requirements and guidance.	Development of procedures will be progressed with consideration of the eligibility criteria for access to social work and whether families with No Recourse to Public Funds (NRPF) and no welfare concerns should be supported by social work services or an alternative. Families with NRPF where there are welfare or child protection concerns should be treated in the same way as other families with an assessment within the timescales outlined in the practice standards. The pathways will factor into the review of Children's Services and alignment for service delivery outcome. The current assessment template will be reviewed in line with introduction of Mosaic to adopt a universal approach to assessment and planning for children across Children's Services.	Executive Director, Children, Education and Justice Services	Head of Service, Corporate Parenting Head of Service, Children's Practice Teams	01/04/2026
1.3	Refugee and Migration Services should develop documented procedures which are approved and version controlled, and should be aligned with legislation and good practice to support outcomes and integration	Development of service manual. Structure exists in very early draft from. Manual to be developed to completion.	Executive Director, Children, Education and	Refugee and Migration Programme Manager	31/01/2026

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
	for refugees through government resettlement schemes, No Recourse to Public Funds (NRPF) adults and refugees outwith formal schemes. Procedures should include: • outcomes and activities • links to guidance • assessments and plans to be completed • templates to be used • storage location of assessment, plans and templates in line with the Council's information governance and records retention requirements • frequency and variation of visits/contact • frequency of reviews • how outcomes including category and headlines should be recorded • timescales for completing assessments and inputting notes • support plan completion as outlined at Recommendation 3.4 • a quality assurance process as outlined at Recommendation 4.4 • a formal mapping of legislative requirements and guidance.		Justice Services	Refugee Team Leader	
1.4	The Council should perform a corporate review and consultation for No Recourse to Public Funds (NRPF) payment rates, which should include input by Finance to determine any budgetary impacts. Following this, any revisions to the rates should be reviewed and approved by a relevant committee.	There needs to be a corporate approach to reviewing payment rates for people with No Recourse to Public Funds (NRPF). A corporate working group will be established to consider policy and procedure requirements including a review of payment rates with alignment to poverty prevention. The working group will incorporate Council officers from relevant service areas including finance, adult services	Executive Director, Children, Education and Justice Services Executive Director, Corporate Services	Service Directors Refugee and Migration Programme Manager Head of Service, Corporate Parenting Head of Finance	31/03/2026

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
		and housing. Findings and proposals will be submitted to Corporate Leadership Team and Committee for approval.	Chief Officer, HSCP Interim Executive Director, Place	Head of Service, Children's Practice Teams Poverty Lead	

Finding 2 – Colleague Learning and Development

Finding Rating	Medium Priority

Role-specific learning helps to ensures that officers are proficient in their tasks and that organisational objectives are achieved.

Essential learning, which should be completed by all Council officers, is available on MyLearningHub. In addition, the role-specific learning required by both Children's Services and Refugee and Migration Service teams is currently being reviewed, and there has been engagement with the Learning and Development team to add it to MyLearningHub.

Neither of the teams were able to demonstrate management monitoring and review of the completion of either essential or role-specific learning. Management advised training, once the learning has been updated on MyLearningHub, would be beneficial.

Some officers stated that there is insufficient formal training, and that learning most often comes from shadowing peers, team training sessions, and adhoc external training. Management advised they are sourcing further training.

Throughout the asylum seeker process, assessments such as brief enquiry or age assessments (Unaccompanied Asylum Seeking Children) and human rights assessments are required. Age assessments are a thorough and complicated task and are open to legal challenge.

Social workers are required to complete continuous professional learning for SSSC registration, but there was no record of officers confirming completion to their managers. Management advised the responsibility is on social workers to ensure their training is kept up-to-date and newly qualified social workers receive support with this.

Risks

- **Service Delivery –** if officers are not provided with effective training, quality service delivery may not be provided consistently
- **People** – if training is not available to officers, or completed, their work may not meet the needs of citizens
- **Regulatory and Legislative compliance** – lack of oversight on regulatory training may result in officers breaching legislative and regulatory requirements
- **Reputational –** if officers do not meet regulatory and legislative requirements, the Council may be at risk of reputational damage.

Recommendations and Management Action Plan: Colleague Learning and Development

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
2.1	Per management's stated intention, role-specific learning should be discussed with the Learning and Development team and then added to MyLearningHub. Role specific learning and training should be regularly monitored by management to ensure that it is completed in a timely manner. This should include compliance with SSSC requirements where relevant.	Following findings from audit undertaken by QGR L&D team to establish training needs, this will be added to role specific learning for all associated posts. Consideration for external providers to enable delivery within timescales with future consideration to incorporate this within Council training provided.	Executive Director, Children, Education and Justice Services	Refugee Team Leader Head of Service, Corporate Parenting Head of Service, Children's Practice Teams	30/09/2026 (dependent on evidence required)

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
	In addition, per management's stated intention, targeted training on age assessments should be provided to relevant officers.	On completion of current work by Council's HR L&D team to enable role specific learning to be assigned by managers and monitored for compliance. Compliance and review of training completed will be included as part of 1:1/Supervision.		Quality Assurance and Compliance Manager	
2.2	Management should engage with Learning and Development to obtain training for people managers on effective use of the MyLearningHub system	A link to available managers guides for effective use of MyLearningHub and where to access support will be included within managers communications and inductions.	Executive Director, Children, Education and Justice Services	Head of Service, Children's Practice Teams Refugee and Migration Programme Manager	31/10/2026

Finding 3 – Operational Delivery

Finding Rating	Medium Priority

Recording Case Notes

Adding timely notes to Swift (the Council's current social work case management system) ensures there is adequate information held and oversight on cases, work carried out, and discussions held. The Council's Social work practice standards contain a key performance indicator (KPI) of 5 days for inputting Swift notes for children. From a random sample of 60 individuals (25 children, and 35 adults):

- 22 (88%) of notes for children were added within 5 days, and 24 (69%) for adults
- 11 (18%) for both adults and children were input over 20 days later
- only 23 (38%) of adults' and children's records had language details and/or stated whether an interpreter was required. This information helps to streamline communications.

For internal reporting purposes, case information recorded on Swift includes a drop-down box to record whether the case relates to Unaccompanied Asylum Seeking Children (UASC) or No Recourse to Public Funds (NRPF). However, these options do not allow for NRPF to be split between NRPF Families and NRPF Adults.

For each interaction with individuals, an update should be made on Swift. This update involves stating a headline to state the nature of the interaction. However, these headlines were often not stated clearly, meaning that it was difficult to identify outcomes without going into case notes.

It is understood that a project to replace the Swift system by March 2026 is currently underway.

Protection of Vulnerable Groups (PVG)

The Protection of Vulnerable Groups (Scotland) Act 2007 states that those working with 'protected adults' that receive a welfare service should be PVG checked. According to the Orb, Refugee and Migration officers should be PVG checked.

Management advised that officers in Refugee and Migration Services require a basic disclosure but are not PVG checked and there has been discussion with other local authorities and COSLA about whether services provided by officers align with the legislation. Children's Services officers are Scottish Social Services Council (SSSC) registered and PVG checked.

Assessments

A brief enquiry should take place within 72 hours and should establish if the individual is under 18 years old. An age assessment is required when there is reasonable doubt over an individuals claimed age and should be completed within 4 weeks. It was difficult to ascertain whether a brief enquiry or age assessment had been completed due to varying ways of recording information in Swift. 80% of cases had an assessment completed, and 20% were unknown as the information could not be found in case notes.

Pathway Planning

UASC fall within the looked after child (LAC) guidelines. A pathway plan is completed when a young person ceases to be become a LAC, and outlines their needs and arrangements for support. Plans should be reviewed every 6 months. However, of the 12 individuals sampled who should have had a plan in place, only 9 (75%) did. Officers advised that if a young person moves away or does not have an allocated worker, a plan may not be completed.

Personal Integration and Support Plans

Home Office requirements specify that individuals or families who are part of government resettlement schemes should have a support plan in place. For a sample of 25, whilst 22 (88%) had plans in their files, most plans were incomplete, had missing details or were not reviewed within timescales. Some plans were stored in another family members file making it difficult to locate. In addition, there are two different templates being used to record support plans.

Risks

- **Service Delivery –** people may not receive services within consistent timescales
- **People** – increases in demand and lack of resources could impact the quality of service provided
- **Regulatory and Legislative Compliance** – service provided may not meet regulatory and legislative requirements, and good practice
- **Reputational –** if services provided do not align with requirements, and decisions are not provided accurately and in a timely manner, the Council's reputation could be affected
- **Technology and Information –** sensitive or personal data may not be managed in line with the Council's information governance and records retention requirements.

Recommendations and Management Action Plan: Operational Delivery

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
3.1	Officers should be reminded of the requirement to enter complete and accurate information into Swift in a timely manner, in line with the Council's Social work practice standards.	Linked to 1.2.1 (a/b) and 4.1, dip sampling through supervision processes and inclusion in revised guidance. This will be monitored through Data Cleanse Reports, QA Audits and work of the SLWG. Swift will be replaced circa October 2025 and will include workflow.	Executive Director, Children, Education and Justice Services	Head of Service, Corporate Parenting Head of Service, Children's Practice Teams Refugee and Migration Programme Manager Quality Assurance and Compliance Manager	30/11/2025
3.2	Procedures outlined in Recommendation 1.2 should include guidance on: • consistent recording of headlines, notes, and outcomes in Swift to enable oversight of alignment to Home Office / COSLA / New Scots good practice • inputting timely Swift notes and completing relevant fields such as language details and whether an interpreter is required	As above, development of quality assurance processes and consideration of service specific practice standards.	Executive Director, Children, Education and Justice Services	Refugee and Migration Programme Manager Refugee Team Leaders	30/11/2025

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
	• what assessments and plans should be carried out, their timescales, and how they should be recorded. Where no plan is carried out, a note should be recorded outlining the reasons it has not been completed. Officers should also ensure there is appropriate input by the service into the Swift replacement project (Mosaic) to ensure key workstreams are captured.				
3.3	Refugee and Migration Service should engage with HR and Disclosure Scotland as a matter of urgency to confirm requirements and, if required, checks should be completed for all relevant officers as a priority. Risks while checks are completed, and officers continue to perform their roles, should be assessed and action taken.	Regulation Manager and CSWO to be consulted regarding registration and requirements prior to approach to Disclosure Scotland	Executive Director, Children, Education and Justice Services	Refugee and Migration Programme Manager Regulation Officer Service Director, Performance, Quality and Improvement	30/09/2025
3.4	For Refugee and Migration Services, a standard template should be agreed for recording support plans. The template should include, at a minimum: • all outcomes listed in Home Office requirements • the individual's Swift ID (for easy identification) • date of arrival • frequency of reviews • date and notes under each outcome at each review • where action sheets are used, these should be attached. They should be stored in a consistent manner in the shared drive in line with the Council's information governance and records retention requirements.	Support plan template revised in March 2025. Currently being piloted until end May 2025 where feedback will be gathered and further development undertaken if needed.	Executive Director, Children, Education and Justice Services	Refugee and Migration Programme Manager Refugee Team Leader	30/09/2025

Finding 4 – Oversight and Quality Assurance

Finding Rating	Medium Priority

Performance Monitoring Framework

Performance monitoring frameworks are documents which set out what measures and outcomes should be monitored and reported, how often, by whom, and to which officers and committees. They help to provide assurance that there is effective management and oversight of key activities. However, there is no documented monitoring framework in place for either Children's Services or Refugee and Migration Services which set out reporting arrangements relating to their refugee and asylum seeker work.

Monitoring and Oversight

Children's Services management receive monthly reporting on information such as compliance with social work standards, individual caseload reports, and financial information. This information helps to identify any performance issues, e.g. issues with key performance indicators related to social work practice standards and data quality. However, the information is summarised and does not provide specific information on Unaccompanied Asylum Seeking Children (UASC) or No Recourse to Public Funds (NRPF) Families.

In addition, Swift does not provide easy oversight of cases, and information must be collated manually. It is acknowledged that a project to replace Swift by March 2026 is underway. There is quarterly reporting on UASC to senior management and there have been frequent briefing notes to committee regarding demand and resources, but there is no equivalent reporting in place for NRPF Families.

Refugee and Migration Services complete an annual return for the Home Office to confirm they have completed the actions required for those refugees who go through government schemes. In October 2024, Refugee and Migration Services started 6-monthly reporting to the Housing, Homelessness and Fair Work Committee which includes information on the number of people being supported (including NRPF Families) and a summary of recent work performed. There are also annual returns to COSLA for all NRPF individuals.

However, there is no reporting, either to Council committee or external organisations, which includes outcome data which would provide information on how successful the service has been in meeting integration outcomes.

Key Performance Indicators (KPIs)

The Council's social work practice standards include KPIs for recording case notes, when meetings are carried out, and how often children are visited. However, these standards do not fully align with the UASC and NRPF Families work performed by the Council. For example, NRPF Families do not necessarily have support needs other than financial support, and it may not be necessary to visit them as frequently. Therefore, these KPIs are not fit-for-purpose. In addition, KPIs for performing age assessments are not currently reported on within monthly monitoring reports.

There are no KPIs in place for Refugee and Migration Service.

Monitoring and Quality Assurance

Refugee and Migration Services have spreadsheet trackers in place which are designed to provide a basic overview of all open support cases. In addition, there is regular discussion between each officer and their manager to review cases. However, there is limited review by managers of individual case notes and support plans to ensure that the work is being completed effectively and in a timely manner, and that Swift contains all relevant information.

Children's Services also have spreadsheet trackers in place for the services they manage, and there is regular discussion between each officer and their manager to discuss cases. When monthly data cleansing reports identify gaps in case notes or when a Freedom of Information (FOI) request is received, case notes will be reviewed by managers. However, there is no formal process in place for regular case reviews.

Risks

- **Service Delivery –** without effective management oversight, issues with service delivery may not be identified and rectified
- **Regulatory and Legislative compliance** – the Council may not meet regulatory and legislative requirements, and good practice guidance
- **Governance and Decision Making –** senior management and members may not have oversight of service delivery
- **Financial and Budget Management –** senior management and members may be unaware of the increasing financial pressures due to increased demand.

Recommendations and Management Action Plan: Oversight and Quality Assurance

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
4.1	A performance monitoring framework should be developed for all refugee and migration services which sets out what is to be monitored and reported, how often, by whom, and to which officers and committees. The framework should outline the requirement for the use of: - SMART objectives (specific, measurable, achievable, relevant and timebound) - KPIs and outcomes to demonstrate progress achieving requirements, service standards, integration outcomes and required timescales and to enable comparison against actual and target performance. The framework should be approved by the relevant governance forum.	Management will develop a KPI framework Initial proposals by end October for piloting in next Home Office evaluation. This will be reviewed for consideration of final framework by end March 2026.	Executive Director, Children, Education and Justice Services	Refugee and Migration Programme Manager Refugee Team Leaders	30/04/2026
4.2	The performance framework should address the issues raised in the finding, including but not limited to - reporting information should be differentiated between UASC and NRPF Families - reporting arrangements for NRPF Families - reporting of outcome information.	As above and linked to 1.2 (a/b) and SLWG development of performance indicators and KPIs. Support from colleagues in Strategy and Insight to determine measurables and achievable outcomes.	Executive Director, Children, Education and Justice Services	Head of Service, Corporate Parenting Head of Service, Children's Practice Teams Refugee and Migration Programme Manager	30/04/2026

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
				Refugee Team Leader P&I Project Lead	
4.3	Recognising that Swift will be replaced by Mosaic in March 2026, services should ensure they review current gaps and future requirements and feed back to the working group on improvements including: • categories for reporting (NRPF family, UASC, etc.) • status categories (Leave to Remain etc.) • assessment inputs • information that would support FOI requests • information to support effective reporting.	As above, clarity on reporting methods aligned to applicable legislation will be included in guidance developed by SLWG. Working with Mosaic project leads to review requirements UASC tracker being developed to enable collation of information commonly requested through FOI data collection.	Executive Director, Children, Education and Justice Services	Head of Service, Corporate Parenting Head of Service, Children's Practice Teams Refugee and Migration Programme Manager Refugee Team Leader	31/05/2026
4.4	Refugee and Migration Service and Children's Services should develop Quality Assurance (QA) procedures which focus on quality issues to ensure work is streamlined and effective. The procedures should include frequency of QA checks, an overview of what checks will include, and how this will be reported to management and committee for oversight and assurance. Obtaining feedback from refugees and asylum seekers should be considered.	As above, QA methodology included as part of Children's Services redesign project and early engagement for review. Quality Assurance (UASC) should be included within QA Team audit schedule and extended to include Families with NRPF RMT - QA proposals (dip sampling) to be identified and included in Team Leader work objectives for 2025/26. Programme of feedback sessions with client groups to be scheduled and implemented.	Executive Director, Children, Education and Justice Services	Head of Service, Corporate Parenting Head of Service, Children's Practice Teams Refugee and Migration Programme Manager Refugee Team Leader Quality Assurance and Compliance Manager	31/03/2026

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Finding 5 – Risk Management

Finding Rating	Medium Priority

Risk management enables risks to service objectives to be identified, recorded and managed. This provides greater assurance that objectives are achieved on an ongoing basis.

The Children's Service's risk register includes risks relating to Unaccompanied Asylum Seeking Children (UASC) and No Recourse to Public Funds (NRPF) Families, which are regularly reviewed and up-to-date. However, the Refugee and Migration risk register was last updated over 4 years ago. Refugee and Migration Services management advised that further guidance on managing the risk register would be beneficial, and that they have engaged with the Council's Corporate Risk team to arrange training for officers and to update the risk register.

Risks

- **Governance and Decision Making –** risks are not effectively identified, recorded, and managed, which could affect achievement of objectives and oversight.
- **Service Delivery –** if risks are not identified and reviewed regularly, it may impact the delivery of services
- **Strategic Delivery** – if management are not aware of risks, decision making may not be effective.

Recommendations and Management Action Plan: Risk Management

Ref.	Recommendation	Agreed Management Action	Action Owner	Lead Officers	Timeframe
5.1	A review of the Refugee and Migration Services risk register should be undertaken, and risks identified should be recorded to ensure risks are managed within risk appetite. This should include statements on the risks, the impact and likelihood, mitigating actions, timescales, and responsible officers. There should be escalation of risks to the Children, Education, and Justice Service's risk committee and Corporate Leadership Team's risk committee when required. Refugee and Migration Services should continue to engage with the Council's Corporate Risk management team.	Where there are gaps in risk identification these will be progressed with support from the Council's Risk Team. Emerging risks will be highlighted to HOS and Operations Manager and reported to SMT where required. Regular review of the Risk Register and where needed, Risk Workshops undertaken.	Executive Director, Children, Education and Justice Services	Refugee and Migration Programme Manager Refugee Team Leaders	31/01/2026

Appendix 1 – Control Assessment and Assurance Definitions

Control Assessment Rating		Control Design Adequacy	Control Operation Effectiveness
Well managed	🟢	Well-structured design efficiently achieves fit-for purpose control objectives	Controls consistently applied and operating at optimum level of effectiveness.
Generally Satisfactory	🟢	Sound design achieves control objectives	Controls consistently applied
Some Improvement Opportunity	🟠	Design is generally sound, with some opportunity to introduce control improvements	Conformance generally sound, with some opportunity to enhance level of conformance
Major Improvement Opportunity	🔴	Design is not optimum and may put control objectives at risk	Non-conformance may put control objectives at risk
Control Not Tested	N/A	Not applicable for control design assessments	Control not tested, either due to ineffective design or due to design only audit

Overall Assurance Ratings

Substantial Assurance	A sound system of governance, risk management and control exists, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.
Reasonable Assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.
Limited Assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.
No Assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.

Finding Priority Ratings

Advisory	A finding that does not have a risk impact but has been raised to highlight areas of inefficiencies or good practice.
Low Priority	An issue that results in a small impact to the achievement of objectives in the area audited.
Medium Priority	An issue that results in a moderate impact to the achievement of objectives in the area audited.
High Priority	An issue that results in a severe impact to the achievement of objectives in the area audited.
Critical Priority	An issue that results in a critical impact to the achievement of objectives in the area audited. The issue needs to be resolved as a matter of urgency.

Appendix 2 – Areas of Audit Focus and Control Objectives

Audit Areas	Control Objectives
Policies and Procedures	• policies and procedures aligned to relevant legislation, frameworks and guidance are in place to ensure the Council supports the needs of refugees • role specific learning is in place for officers and covers all policies and procedures, and relevant legislation and guidance requirements.
Children's Services – Operational Processes and Oversight	• unaccompanied asylum-seeking children (UASC) are supported in line with legislation and COSLA guidance • families with NRPF are supported in line with legislation and COSLA guidance • relevant assessments are completed on arrival • support work performed is recorded fully, accurately, and in a timely manner within relevant systems (for example Swift) • governance and oversight arrangements are in place to monitor delivery and performance of refugee and migration services.
Refugee and Migration Services – Operational Processes and Oversight	• households settled under formal UK government schemes are supported in line with the Home Office guidance and the New Scots strategy • adults with NRPF are supported in line with legislation and COSLA guidance • households with a refugee background arriving in Edinburgh outwith formal schemes are supported in line with legislation and COSLA guidance • personal integration and support plans (where relevant) are in place • support work performed is recorded fully, accurately, and in a timely manner within relevant systems (for example Swift) • governance and oversight arrangements are in place to monitor delivery and performance of refugee and migration services in line with strategic aims, implementation plans and relevant outcome / performance indicators.
Risk Management	• risks related to refugee and migration services are identified, recorded and managed within a service risk register, and regularly reviewed to ensure appropriate mitigating actions are in place and remain effective, with escalation to divisional and directorate level risk committees where required.