

Report on an unannounced inspection of

Yarl's Wood Immigration Removal Centre

by HM Chief Inspector of Prisons

17–28 June 2013

30 Sept – 1 Oct 2013

Glossary of terms

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the Glossary of terms on our website at: http://www.justice.gov.uk/downloads/about/hmipris/Glossary-for-webrps_.pdf

Crown copyright 2013

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence. To view this licence, visit <http://www.nationalarchives.gov.uk/doc/open-government-licence/> or email: psi@nationalarchives.gsi.gov.uk

Where we have identified any third party copyright material you will need to obtain permission from the copyright holders concerned.

Any enquiries regarding this publication should be sent to us at the address below or: hmiprison.enquiries@hmiprison.gsi.gov.uk

This publication is available for download at: <http://www.justice.gov.uk/about/hmi-prison>

Printed and published by:
Her Majesty's Inspectorate of Prisons
1st Floor, Ashley House
2 Monck Street
London SW1P 2BQ
England

Contents

Introduction	5
Fact page	7
About this inspection and report	9
Summary	13
Section 1. Safety	19
Section 2. Respect	33
Section 3. Activities	47
Section 4. Preparation for removal and release	51
Section 5. Summary of recommendations and housekeeping points	57
Section 6. Appendices	65
Appendix I: Inspection team	65
Appendix II: Progress on recommendations from the last report	67
Appendix III: Detainee population profile	73
Appendix IV: Summary of detainee survey responses	77

Introduction

Yarl's Wood Immigration Removal Centre is an immigration detention centre in Bedfordshire that, at the time of this inspection, held almost 300 detainees. Most of those held are single adult women but it also holds a number of adult families and there is a short-term holding facility for adult men on the site.

The circumstances of those held at Yarl's Wood make it a sad place. At best it represents the failure of hopes and ambitions, at worst it is a place where some detainees look to the future with real fear and concern. None of those held at Yarl's Wood were there because they had been charged with an offence or had been detained through normal judicial circumstances. Many may have experienced victimisation before they were detained, for example by traffickers or in abusive relationships.

In view of the inevitable distress and anxiety of many of those held, it is therefore very welcome that this inspection found Yarl's Wood continuing to improve, with managers and staff working hard to run a safe and respectful establishment – although some significant concerns remained.

Reception services and facilities were good. The men who were held in the short-term holding unit were treated well in the short time they were there. Many were 'lorry drops' and who had arrived at the centre after long, difficult and dangerous journeys, and they were grateful to be in a safe place.

Most detainees told us that the establishment was safe and there were very few violent incidents and little victimisation. However, we were concerned to find that two staff had engaged in sexual activity with a female detainee, something that can never be less than abusive given the vulnerability of the detained population, and these staff had rightly been dismissed. Following the emergence of new allegations of abuse, we returned to the Centre and conducted more than 50 confidential interviews about safety and treatment by staff with detainees we randomly selected, using interpreters where needed. Most detainees again told us that Yarl's Wood was a largely respectful and safe place. We found no evidence that a wider culture of victimisation or systematic abuse had developed. However, this exercise reinforced our view that women's histories of victimisation were not sufficiently acknowledged by the authorities. There were insufficient female staff for a predominantly women's establishment, and women detainees complained that male staff entered their rooms without waiting for a reply after knocking. They were also embarrassed by male officers carrying out searches of their rooms and personal property. Given the women's previous experiences and vulnerabilities, any insensitivity or impropriety amongst staff was likely to amplify their feelings of insecurity. We have recommended that more female staff must be recruited as a matter of urgency, and that men should not enter women's rooms unless explicitly invited to do so except in cases of emergency. Staff should also be properly trained in recognising and managing the particular vulnerability of the population at Yarl's Wood.

Use of force and segregation had decreased since the last inspection (although the latter was still sometimes inappropriately used as punishment). The high number of women subject to suicide and self-harm prevention procedures were generally well cared for. The daily 'individual needs' meeting focused attention on the most vulnerable, and was good practice. Constant supervision was carried out sensitively.

It was the progress, or lack of it, of their immigration cases that caused women most distress. We were particularly concerned about how the cases of some very vulnerable women were handled. We identified a number of women who had been detained for very long periods – one for almost four years. Several obviously mentally ill women had been detained before being sectioned and released to a more appropriate medical facility; it was difficult to understand why they had been detained in the first place. Pregnant women had been detained without evidence of the exceptional circumstances required to justify this. One of these women had been hospitalised twice because of pregnancy related complications. Although the medical care of pregnant women was good, too little thought was given to their wider emotional and practical support needs.

Detainees who had clear trafficking indicators – such as one woman who had been picked up in a brothel – had not been referred to the national trafficking referral mechanism as required. Young people whose age was disputed were generally well cared for until an age assessment could be carried out. Three young people had been determined to be children in the six months before the inspection. Rule 35 reports, which notified the Home Office if a detainee's health might be adversely affected by detention, in particular because the detainee alleged they had been tortured, were poorly completed and did not provide any diagnostic judgements concerning the claim.

In these circumstances, the good environment and the usually good relationships between staff and detainees were critical to the safe and calm running of the centre. The number of formal complaints had reduced since the last inspection and we were satisfied that this was because minor issues were quickly and appropriately sorted out informally. There was little tension between different national groups. Detainees said their faiths were respected and the chaplains played a positive role in the life of the centre. More needed to be done to support detainees with other protected characteristics, such as those with disabilities. Health care was good. The food was reasonable and women appreciated the opportunities to cook for themselves and their friends in the cultural kitchens.

There was a good range of activities available run by enthusiastic activities staff and most detainees said there was enough to do to fill their time. However, education provision was at too low a level and there were not enough paid work opportunities available, particularly for long-stay detainees.

In the six months before the inspection 867 detainees had been removed, 1,188 released and 198 transferred to other detention establishments. Good support was provided by the welfare officer but he was overstretched. The voluntary organisation, Hibiscus, provided valuable support to detainees with complex resettlement needs. Visit arrangements were good and detainees had good access to phones and the internet to maintain contact with the outside world. Internet access was closely supervised but women were unnecessarily barred from using Skype or social networking sites, which would have been particularly valued by those separated from their children and families.

Yarl's Wood has had a troubled past, punctuated by serious disturbances and controversy surrounding the detention of children. This inspection found that the improvements we have noted since the detention of children ended have continued. Nevertheless, despite the good progress made, improvement continues to be necessary. Yarl's Wood still holds detainees in the middle of a distressing and difficult experience and more thought needs to be given to meeting their emotional and practical needs. For the most vulnerable of the women held, the decision to detain itself appears much too casual.

Nick Hardwick
HM Chief Inspector of Prisons

October 2013

Fact page

Task of the establishment

The detention of adult women, men and adult families subject to immigration removal.

Location

Yarl's Wood is next to the village of Milton Ernest, in Bedfordshire

Name of contractor

Serco Group PLC

Number held

291

Certified normal accommodation

406

Operational capacity

406

Last inspection

4–8 July 2011

Brief history

Yarl's Wood is a purpose-built immigration removal centre (IRC), originally opened in November 2001. It is the main IRC for women and families over the age of 18. Serco Ltd took over the management of the establishment in April 2007. No children have been detained at the centre since December 2010. In 2012, a residential short-term holding facility for men was opened.

Name of centre manager

John Tolland

Escort provider

Tascor

Short description of residential units

Accommodation consists of an adult family unit, an induction unit for women, two further women's units and a 38-bed male short-term holding facility. There are 314 female bed spaces and 54 family bed spaces, accommodating couples and adult dependants.

Health service commissioner and providers

Commissioner: Home Office Immigration Enforcement

Provider: Serco Health

Learning and skills providers

In-house, Serco

Independent Monitoring Board chair

Mary Coussey

About this inspection and report

Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.

All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.

All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy establishment. The four tests of a healthy establishment are:

Safety	that detainees are held in safety and with due regard to the insecurity of their position
Respect	that detainees are treated with respect for their human dignity and the circumstances of their detention
Activities	that the centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees
Preparation for removal and release	that detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their country of origin and be prepared for their release, transfer or removal. Detainees are able to retain or recover their property.

Under each test, we make an assessment of outcomes for detainees and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the United Kingdom Border Agency.

- **outcomes for detainees are good against this healthy establishment test.**
There is no evidence that outcomes for detainees are being adversely affected in any significant areas.
- **outcomes for detainees are reasonably good against this healthy establishment test.**
There is evidence of adverse outcomes for detainees in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
- **outcomes for detainees are not sufficiently good against this healthy establishment test.**
There is evidence that outcomes for detainees are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of detainees. Problems/concerns, if left unattended, are likely to become areas of serious concern.
- **outcomes for detainees are poor against this healthy establishment test.**
There is evidence that the outcomes for detainees are seriously affected by current

practice. There is a failure to ensure even adequate treatment of and/or conditions for detainees. Immediate remedial action is required.

Although this was a custodial establishment, we were mindful that detainees were not held because they had been charged with a criminal offence and had not been detained through normal judicial processes. In addition to our own independent *Expectations*, the inspection was conducted against the background of the Detention Centre Rules 2001, the statutory instrument that applies to the running of immigration removal centres. Rule 3 sets out the purpose of centres (now immigration removal centres) as being to provide for the secure but humane accommodation of detainees:

- in a relaxed regime
- with as much freedom of movement and association as possible consistent with maintaining a safe and secure environment
- to encourage and assist detainees to make the most productive use of their time
- respecting in particular their dignity and the right to individual expression.

The statutory instrument also states that due recognition will be given at immigration removal centres to the need for awareness of:

- the particular anxieties to which detainees may be subject and
- the sensitivity that this will require, especially when handling issues of cultural diversity.

Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for detainees.

Five key sources of evidence are used by inspectors: observation; detainee surveys; discussions with detainees; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

Prior to April 2013 inspections were either full (a new inspection of the establishment), full follow-ups (a new inspection of the establishment with an assessment of whether recommendations at the previous inspection had been achieved and investigation of any areas of serious concern previously identified) or short follow-ups (where there were comparatively fewer concerns and establishments were assessed as making either sufficient or insufficient progress against the previous recommendations). Now, all of our inspections are 'full' and, other than in exceptional circumstances, unannounced. All inspections follow up recommendations of the previous inspection unless the previous inspection was a short follow-up.

This report

This explanation of our approach is followed by a summary of our inspection findings against the four healthy establishment tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the conditions for and treatment of immigration detainees*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.

Details of the inspection team and the detainee population profile can be found in Appendices I and III respectively.

Findings from the survey of detainees and a detailed description of the survey methodology can be found in Appendix IV of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

¹ The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

Summary

Safety

- S1 *Detainee feedback on escorts was generally positive, but too many people were subject to overnight moves. The reception areas were welcoming but some detainees spent too long there before moving to their units. There was little evidence of violence or victimisation in the centre, but there were insufficient women staff and a lack of recognition of the particular vulnerabilities of detained women. Those at risk of self-harm were generally well cared for, but self-harm monitoring processes needed improvement. The 'individual needs' meeting effectively supported vulnerable detainees. Security was generally proportionate but there were some over-restrictive practices. Use of force and of separation had reduced. The number of legal advice surgeries had increased but waiting times could still be long. Detainees whose ages were disputed were appropriately cared for. Some people had been detained for long periods, and in some cases trafficking indicators appeared to have been missed by case workers. The overall quality of Rule 35 initial reports was poor. Outcomes for detainees were reasonably good against this healthy establishment test.*
- S2 *At the last inspection in 2011 we found that outcomes for detainees in Yarl's Wood were reasonably good against this healthy establishment test. We made 27 recommendations about safety. At this follow-up inspection we found 10 of the recommendations had been achieved, seven had been partially achieved, nine had not been achieved and one was no longer relevant.*
- S3 Most detainees reported being treated well by escorts but too many were transferred overnight, apparently for administrative convenience. Detainees were not routinely handcuffed during escort journeys.
- S4 The reception areas were welcoming and there was generally good availability of translated information, but the reception process could take a long time. Risk assessment processes were adequate, and information was passed to wing units by reception staff. Detainees were not routinely provided with photocopies of key documents and passports that were retained in reception. First night arrangements were effective. Induction was reasonably effective for most detainees.
- S5 There were very few violent incidents and there was little evidence of any victimisation, although non-English speakers were more likely than others to say that they had been victimised. There was some evidence of under-reporting of victimisation, and the annual bullying survey had fallen into disuse. Investigation and monitoring procedures were good. A daily 'individual needs' meeting was held to discuss detainees who were vulnerable or otherwise of concern before removal, which facilitated information sharing about risk. A full-time safer detention officer had been appointed.
- S6 Some women's histories of victimisation before detention, for example because of abusive relationships or trafficking, meant that any experiences of insensitive or inappropriate behaviour by detention staff were amplified for them. There were too few female staff and women told us they were embarrassed by male officers carrying out searches of their rooms and personal property. Staff had no specific training in recognising and managing the particular vulnerability of the female population.

- S7 High levels of distress in the centre were reflected in the number of assessment, care in detention and teamwork (ACDT) self-harm risk monitoring documents that were opened. The quality of ACDT documents was generally good and reviews made use of professional telephone interpreting when necessary. However, there were some weaknesses, particularly around the assessment of triggers and the quality of care maps. Review meetings were not sufficiently multidisciplinary. Detainees were often placed on constant supervision, and this was carried out with appropriate care and flexibility. There were good procedures for following up the large number who missed meals, but there was limited tracking of trends over time. Involvement of the local Samaritans had mostly lapsed and there were no trained peer supporters.
- S8 There were no formal links with the local safeguarding adults board. Adults at risk were generally well cared for and there were reasonably good individual care plans to address additional needs. Before the inspection, two members of staff had rightly been dismissed as a result of inappropriate behaviour with a detainee, and a third had been dismissed because of a failure to safeguard the detainee concerned. Steps had been taken to minimise the risks of this occurring again in the future, including a programme of training, but continuing vigilance was needed.
- S9 The safeguarding children policy was up to date and described staff's duty to safeguard and promote the welfare of children. Detainees whose ages were disputed were appropriately cared for while awaiting social services assessments. Three detainees, who were subsequently confirmed to be children, had been held in the centre in the previous six months. Some detainees stating that they were children had been inappropriately assessed by a chief immigration officer alone, without referral to social services.
- S10 Procedural security was generally well managed and engagement between staff and detainees underpinned effective dynamic security. Risk management was generally good. However, some security arrangements were over-restrictive, such as random room searching and the routine practice of escorting officers accompanying detainees during private medical consultations.
- S11 The use of force had decreased considerably, with a corresponding reduction in the number of times that restraint locks were used. Governance arrangements were generally effective and all planned removals were video-recorded. Paperwork was usually completed correctly and accounts from officers gave assurance that force was used appropriately, although we saw one example where de-escalation techniques had not been used to the full extent possible.
- S12 The number of detainees separated and the length of time they spent in the separation unit had also reduced considerably. Initial authorisation was too often given by junior managers and in a couple of cases separation had clearly been used as punishment which was unacceptable. Detainees were not routinely separated before removal.
- S13 The number of legal advice surgeries had increased but detainees could still wait up to 10 days for an appointment. Some country of origin reports, legal books and other information in the library were out of date. Detainees could easily communicate with lawyers and had reasonably good access to legal websites.
- S14 There were some cases of long detention, with the longest period of detention being nearly four years. Monthly reports were updated but some showed a lack of substantive progress. The immigration induction interviews carried out by the on-site Home office team were reasonably well conducted but the information provided was too generic. Some key information, such as voluntary return, bail information and re-entry bans, was not explained adequately. Several mentally ill women had recently been detained by the Home Office

before being sectioned and released from the centre. It was unclear why detention was considered justified at all, given their obvious health needs. Some case files for pregnant women showed no evidence of the exceptional circumstances that justified their detention. One woman had been detained for over three and a half months and hospitalised twice because of pregnancy-related complications. Detainees displaying clear trafficking indicators were not always referred to the national referral mechanism. Some Rule 35 reports (requiring notification to the Home Office if a detainee's health is likely to be injuriously affected by detention, including if they may have been the victim of torture) had led to detainees being released. However, these reports were poorly completed, and many merely repeated what detainees had said, without adding diagnostic judgements.

Respect

S15 Residential areas and rooms were clean and in a reasonable state of repair. The short-term holding facility provided a good environment. Staff–detainee relationships were very good. Professional interpreting was well used and there was generally good dialogue with different nationality groups. There was insufficient provision for groups with other protected characteristics. Faith provision was very good and facilities were attractive. Most complaints were appropriately dealt with informally, and formal complaints were well managed. Health services were generally good. The food provided was reasonable and shop provision was good. Outcomes for detainees were good against this healthy establishment test.

S16 At the last inspection in 2011 we found that outcomes for detainees in Yarl's Wood were good against this healthy establishment test. We made 19 recommendations about respect. At this follow-up inspection we found that 13 of the recommendations had been achieved, three had been partially achieved and three had not been achieved.

S17 Residential units were clean, and rooms were bright. Outside areas were attractive and well used. Some mattresses were ripped and uncomfortable and curtains were too thin to keep rooms dark. Some showerheads needed maintenance. The range and stock of clothing were good. Laundry facilities were accessible. Toiletries and sanitary items were easily available.

S18 The short-term holding facility (STHF) for men on Bunting unit had a decent and relaxed atmosphere. It was appropriately separated from the rest of the centre. The rooms were comfortable and a variety of useful notices was displayed, in several different languages. Toiletries and other essentials were easy to obtain. A wide range of activities was available. Detainees on the unit were positive about their treatment by staff.

S19 Most detainees said that they were treated with respect by staff and we saw mainly good staff–detainee engagement. The proportion of male staff was too high for the mostly female population. There were widely reported complaints about staff going into women's rooms after knocking, without waiting for a response from detainees.

S20 There was little evidence of tension between different national or cultural groups. Nationality focus groups were held weekly and were a useful way of enhancing dialogue between detainees and staff. However, there were no support groups for detainees with other protected characteristics, and there was no specific provision for these detainees. There was structured care planning for detainees with disabilities but there were no paid carers. Professional interpreting services were well used. Discrimination incidents were reasonably well investigated and quality assured at a senior level. A wide range of cultural and religious festivals was celebrated. The care of pregnant women was not sufficiently coordinated or holistic, focusing simply on the medical aspects of pregnancy.

- S21 Most detainees said that their religious beliefs were respected. The faith spaces were welcoming, attractive and easy to access. There were good faith-related initiatives, and chaplains were prominent in the life of the centre.
- S22 The number of complaints submitted had decreased, and this appeared to be related to the efforts made by managers and unit staff to resolve issues informally. Investigations were thorough, although in one case a junior member of staff inappropriately had investigated a serious complaint against a detainee custody officer. Replies were generally polite and prompt, but issued only in English.
- S23 Detainees were generally positive about the access to and the quality of health care provided. However, we received consistent reports of dismissive or rude behaviour by some health services staff. GP clinics were available seven days a week, and included female doctors. Nurses inappropriately attended all GP consultations, compromising detainee confidentiality. All detainees received a comprehensive and prompt health care screen. Access to clinics was good and most waiting lists were short. Pharmacy services were well managed, with most medicines being issued in possession. There was good primary mental health provision. Health services staff had not been trained in the recognition of torture or trauma and this was evident in the varied quality of Rule 35 reporting. All custody officers attended a rolling programme of mental health awareness training.
- S24 The range and standard of the food provided were reasonable and cultural needs were generally catered for. Fresh vegetables, fruit and salads were available every day. The kitchen was clean and the dining rooms on residential units provided a relaxed environment, where staff and detainees sometimes ate together. The cultural kitchens were popular with detainees, but the one on the family unit was only open one day a week. Detainees had access to a wide range of products from the shop and the cost of items was reasonable. The weekly market was an excellent initiative.

Activities

S25 *There was a wide range of recreational activities, meeting the needs of the mainly short-stay population. Most detainees said that they could fill their time while at the centre. Education provision was mainly low level. There were too few work roles and these were only part time. The libraries were reasonably well stocked and popular. PE facilities were generally adequate and staff were well trained. Outcomes for detainees were reasonably good against this healthy establishment test.*

S26 *At the last inspection in 2011 we found that outcomes for detainees in Yarl's Wood were reasonably good against this healthy establishment test. We made six recommendations about activities. At this follow-up inspection we found that one of the recommendations had been achieved, three had been partially achieved and two had not been achieved.*

S27 Just under two-thirds of detainees said that there was enough to do to fill their time. There was a wide range of activities for short-stay detainees, including a hair salon and a programme of well-planned events each month. Activities for long-term detainees were more limited. Recreational amenities in residential units were good, and a few activities could be accessed during some evenings. Detainees were not locked in their rooms but were inappropriately restricted from using unit association facilities after 9.45pm. Women were confined to their units for around 15 hours a day.

S28 The range of subjects offered in education classes was adequate. English for speakers of other languages, mathematics and information and communications technology classes were

welcoming and offered flexibly as drop-in sessions. The range of teaching and learning methods was limited. Computer hardware and software, and most other materials were outdated and most learning was below level 2. Attendance was poor and quality assurance arrangements were weak. However, arts and crafts provision was offered regularly.

- S29 There were insufficient opportunities for detainees to earn money and improve their work skills. The amount of paid work at the centre had decreased to around 50 places, most of which offered part-time work for around 10 hours a week. Job application procedures were simple and appropriate. However, some detainees were inappropriately barred from work because of non-compliance with the Home Office.
- S30 Library provision for the main centre was reasonable. Opening hours were long and the main library was well used. There were insufficient books in languages other than English. An extensive stock of DVDs was heavily borrowed, although the films were mostly in English.
- S31 Indoor fitness facilities were suitable for the population but provision for outdoor activity was limited. Detainees had good access to the gym, although sessions for detainees over 55 were poorly promoted. The WIN (weight, information and nutrition) project was an innovative and effective way to improve fitness and healthy living among detainees. Gym staff were enthusiastic and appropriately qualified.

Preparation for removal and release

- S32 *Good support was provided by the welfare officer, but this could not meet the high demand. Visits were well managed and easy to book, and the visits area was welcoming. There was generally good access to various means of communication. There was effective pre-removal assessment and assistance, and Hibiscus provided particularly valued resettlement support. Outcomes for detainees were good against this healthy establishment test.*
- S33 *At the last inspection in 2011 we found that outcomes for detainees in Yarl's Wood were reasonably good against this healthy establishment test. We made 11 recommendations about preparation for removal and release. At this follow-up inspection we found that six of the recommendations had been achieved, two had been partially achieved, two had not been achieved and one was no longer relevant.*

- S34 There was a dedicated welfare officer, who undertook a wide range of work with detainees. Access was good and the service was well publicised in a range of languages. However, the high demand outstripped the provision, and there was no service at weekends. The welfare officer offered appointments to all detainees served with removal directions but did not routinely see those being released into the community. A small number of organisations attended the centre to provide additional support, including Bedford Credit Union, The Red Cross and Refugee Action.
- S35 The visits room was well decorated and comfortable, with good access to outside space. Visits were available seven days a week and were easy to book. There was an active befriending scheme. Relationships between staff, detainees and their visitors appeared good. There was no substantial food available for visitors.
- S36 Detainees had generally good access to telephones, fax machines, mail and the internet. However, a number of legitimate websites were inappropriately blocked on the STHF. No detainees had access to social networking sites or Skype, which for most was a disproportionate security measure.

- S37 All detainees being removed were spoken to individually to ascertain how they felt about the removal. Hibiscus provided a much valued service to assist detainees with more complex resettlement needs. Detainees about to leave the centre were able to have visits from friends and family at short notice. Group forums for detainees leaving on charter flights, where they could ask questions and discuss concerns, were a promising initiative. We observed reasonable treatment from overseas escort staff picking up people for scheduled flights.

Main concerns and recommendations

- S38 Concern: Women's previous histories of victimisation before detention meant that any experiences of insensitive or inappropriate behaviour by detention staff were amplified for them. There were too few female staff and women told us they were embarrassed by male officers carrying out searches of their rooms and personal property.

Recommendation: More female staff should be recruited as a matter of urgency. Male staff should not enter women's rooms unless explicitly invited to do so except in cases of emergency and all staff should be trained in recognising and responding appropriately to the particular vulnerabilities of a female population that may have experienced victimisation before detention.

- S39 Concern: Several mentally ill women had recently been detained before being sectioned and released. The exceptional circumstances justifying detention of pregnant women were also unclear.

Recommendation: Detainees with enduring mental health illnesses should not be detained, and pregnant detainees should only be detained in the most exceptional circumstances. The continued detention of pregnant women should be considered in line with the Home Office's published policy on the detention of pregnant women. (Repeated recommendation HE45)

- S40 Concern: Rule 35 reports were poorly completed, and many merely repeated what detainees had said, without adding diagnostic judgements, thereby providing little safeguard for vulnerable detainees.

Recommendation: Rule 35 reports should provide objective professional assessments – for example, commenting on the consistency between injuries and alleged methods of torture. Case owner replies should carefully address all relevant factors in reviewing ongoing detention. (Repeated recommendation HE44)

Section 1. Safety

Escort vehicles and transfers

Expected outcomes:

Detainees travelling to and from the centre are treated safely, decently and efficiently.

I.1 *Detainees were generally positive about their treatment by escort staff, and there was no evidence of the use of handcuffs. Some detainees experienced unnecessarily long journeys. There were too many night-time moves, and some detainees experienced repeated moves over short periods.*

I.2 In our survey, 65% of respondents, better than the 57% comparator, said that they had been treated well by escort staff. New arrivals were moved promptly from vans into the reception area. Escort staff we observed were respectful, and searching was conducted sensitively.

I.3 In our survey, fewer detainees than at comparator establishments said that they had spent more than four hours in vans (19% versus 26%). Food and drink were offered at regular intervals. The records we sampled for June 2013 showed an unacceptably high number of night-time moves, apparently for administrative convenience alone: 42 of 100 arrivals had been between midnight and 6am. Some detainees had spent tiring days waiting for escorts, having been detained at immigration reporting centres; one pregnant woman had been detained in the morning, collected by escorts from Becket House at 5.30pm, and finally got to her room at Yarl's Wood after midnight.

I.4 Most files we reviewed did not show evidence of unduly frequent moves, but there were some notable exceptions where it was unclear why so many moves had to take place. For example, one 53-year-old woman had been detained at three different locations over an eight-day period before arriving at Yarl's Wood.

I.5 Handcuffs were not used by escorts. In cases where the detainee was thought to be potentially disruptive, additional escort staff were used. Movement documentation was completed appropriately and included risk information from prisons where relevant. However, in a sample of arrivals from police stations in June 2013, over a quarter of detainees had had no accompanying risk information from police custody.

Recommendations

I.6 **Detainees should not be subjected to exhausting overnight journeys.** (Repeated recommendation I.8)

I.7 **Detainees should not be subject to multiple transfers around the detention estate.**

I.8 **Detainees arriving from police stations should be accompanied by police records and relevant risk information.** (Repeated recommendation I.7)

Early days in detention

Expected outcomes:

On arrival, detainees are treated with respect and care and are able to receive information about the centre in a language and format that they understand.

- I.9** *Reception areas were clean and information was provided in a range of languages and formats. Some detainees experienced long waits in reception and were unnecessarily locked in holding rooms. First night arrangements were good, and most detainees said that they had felt safe on their first night. Induction processes were adequate, but interpreters were not consistently used during this period.*
- I.10** The reception areas were bright and clean. There were separate holding rooms for unaccompanied women and families. These had transparent partitions, so that staff could observe detainees at all times. However, detainees were unnecessarily locked into these rooms.
- I.11** An information leaflet about the establishment was given to new arrivals and was available in 12 languages. They were also shown a short information DVD about the centre, which was available in several languages, but there was no audio and it was assumed that all detainees were able to read. Some English magazines were available.
- I.12** Most detainees were moved through reception in a reasonable time. However, records showed that one pregnant detainee had arrived at around 9pm but not reached her unit until 1.15am. We also saw two female detainees arriving, and although there were sufficient staff and no obvious reasons for delay, it took over two hours for them to be taken to their unit.
- I.13** All detainees were seen in private by a member of the health services team on arrival. Documents and property that were taken from detainees were recorded but photocopies of passports and other important documents were not routinely provided. Telephone interpreters were used appropriately during the reception process.
- I.14** Hot and cold food was provided in reception. Detainees were issued with clothing before moving to their units, and stocks were adequate and in reasonable condition.
- I.15** First night checks were completed appropriately, and risk information was shared with staff on the residential units and at shift handovers. In our survey, 60% of detainees said that they had felt safe on their first night at the establishment, which was better than the comparator.
- I.16** Induction took place over two-three days, on Crane unit for single women, on Hummingbird unit for families and on Bunting unit for men. This process consisted of verbal briefings by staff, written information, and support from a detainee 'greeter' (see below). The formal induction sessions were delivered by staff to groups of detainees. One-to-one sessions during induction generally, but not always, involved the use of professional telephone interpreting services. The programme included information about the centre timetable, activities and facilities, and provided details on how to make complaints and access legal advice. Some printed translations of induction materials were available. There was no information in the induction presentation or pack about accessing support for those with protected characteristics, those experiencing domestic violence or those in crisis.
- I.17** The induction timetable was flexible, to enable detainees to attend appointments with immigration and health services staff. Staff generally interacted well with detainees during

induction, and we saw unit staff being proactive in supporting them to resolve queries and to share rooms with friends.

- I.18** We saw some detainees being asked to sign a detainee compact that we were told was available in English only, before the information had been explained.
- I.19** Detainees were employed as 'greeters'. They showed new arrivals around the centre and explained how to use the electronic food ordering system. New arrivals were encouraged to move between Crane and the main units, which was useful for orientating them. We saw some detainees struggling to move heavy bags to their units without assistance or use of the lifts.

Recommendation

- I.20** **The reception process should be completed as quickly as possible, and detainees moved swiftly to the residential units.**

Housekeeping points

- I.21** Detainees should not be unnecessarily locked into holding rooms in reception.
- I.22** Detainees should be provided with photocopies of important documents that are retained by reception staff.
- I.23** Detainees should receive written information during induction about the support available in the centre for detainees with protected characteristics and those experiencing domestic violence.
- I.24** Detainees should not be asked to sign documents until it is clear that they understand the contents.
- I.25** Detainees should be given assistance to move heavy bags from reception to their units.

Bullying and violence reduction

Expected outcomes:

Everyone feels and is safe from bullying and victimisation. Detainees at risk or subject to victimisation are protected through active and fair systems known to staff and detainees.

- I.26** *Detainees felt safe and there was little evidence of any victimisation, although there had been insufficient attempts to explore what appeared to be under-reporting of intimidation. A new, more individualised approach was being taken to investigate and monitor such behaviour, but this was not yet expressed in an up-to-date published policy.*

- I.27** Detainees told us that they felt safe at the establishment. Our survey suggested very low levels of victimisation. However, those who did not understand English were almost three times more likely to report that they had been victimised. Detainees who had experienced victimisation by staff or other detainees were also much less likely than those at other establishments to report it (24% versus 47%). There had been only one reported bullying

incident or assault in the previous six months, which had not involved violence. Staff ensured that there was not a disproportionate concentration of one nationality on any wing, as this had been found to lead to problems in some cases.

- I.28** There was a dedicated officer covering safer detention issues. The violence reduction policy was out of date and misleading because of the recent changes to practice. A new approach was being taken to investigate and monitor suspected intimidatory behaviour; this was less bureaucratic and more attuned to specific circumstances. The daily 'individual needs' multidisciplinary meetings enabled the prompt sharing of key information about changes in risk. No detainee survey on bullying and intimidation had been carried out in the previous two years.
- I.29** Following the emergence of new allegations of abuse (see also paragraph I.467), we returned to the Centre and conducted 51 confidential interviews with randomly picked detainees about safety and treatment by staff, with the help of interpretation in 26 cases. We also interviewed a dozen staff confidentially. Most detainees continued to describe Yarl's Wood as a safe place and we found no evidence of a wider culture of victimisation or systematic abuse. However, it was clear that some women's histories of victimisation before detention, for example because of abusive relationships or trafficking, meant that any experiences of insensitive or inappropriate behaviour by detention staff were amplified for them. There were too few female staff and women told us they were embarrassed by male officers carrying out searches of their rooms and personal property (see also relationships section and main recommendation S38).

Recommendation

- I.30** **Managers should regularly conduct a detainee survey on their experiences of intimidatory behaviour, including questions aimed at discovering why detainees were sometimes reluctant to report such events.**

Housekeeping point

- I.31** The recent move to a more flexible and individualised approach to reducing intimidatory behaviour should be articulated in a clear and accurate policy document.

Good practice

- I.32** *The daily multidisciplinary 'individual needs' meeting enabled the prompt sharing of key information about changes in risk, while the longer weekly meeting looked in detail at vulnerable detainees.*

Self-harm and suicide prevention

Expected outcomes:

The centre provides a safe and secure environment that reduces the risk of self-harm and suicide. Detainees are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

I.33 *The number of self-harm risk monitoring documents opened had increased, but this did not reflect a rise in the number of self-harm incidents. The quality of monitoring and support was good, but fell short of best practice in some respects. The care suite was no longer available, but constant supervision was carried out flexibly. There was effective use of meetings to oversee and inform practice, but long-term trends were not analysed.*

I.34 The number of incidents of self-harm was similar to that at the time of the previous inspection, but the number of assessment, care in detention and teamwork (ACDT) self-harm monitoring documents opened had increased considerably. This reflected an appropriate focus on detainees' distress, and a recent increase was due to the discontinuance of 'raised awareness support forms', which had become an unnecessary addition to the options of care plans or ACDT forms. In the male short-term holding facility (Bunting unit) there was almost no self-harm and very few ACDT documents were opened.

I.35 The quality of ACDT documents was generally good; entries were frequent and often described mood and recorded conversations. Professional telephone interpreting was used when necessary in case reviews. Flaws included poor identification of triggers, some inadequate care maps, and case reviews which in most cases comprised only a wing manager, wing officer and the detainee, although the counsellor and a chaplain were often present. Reviews were rarely attended by immigration staff, who were often, but not always, consulted in advance; health services staff also attended rarely, apparently because of the short notice given. Home Office staff had received training in ACDT procedures. Records of management checks were almost always cursory, and an organised system for quality audit had recently been devised but not yet implemented.

I.36 Detainees were often placed on constant supervision (62 in the first four months of 2013). This was done with appropriate flexibility, the detainee remaining in their own room and able to move round the centre as usual, with the member of staff accompanying them. The loss of the care suite on Bunting unit before its re-rolling had reduced the options for the care of those at particular risk.

I.37 Monthly safer detention meetings were usually attended by representatives from the relevant departments, including health care and the Home Office. A manager from the escort contractor had also attended occasionally. The safer detention and ACDT policy had been recently updated. All staff carried anti-ligature knives, and checks on this had been strengthened. All managers had received ACDT assessor training. A good, scenario-based training package was used. The useful individual needs meetings (see section on bullying and violence reduction) included a longer meeting each Friday, looking in detail at the needs of vulnerable detainees.

I.38 Patterns and trends in relation to self-harm incidents were appropriately monitored in most cases. There were good procedures for following up the large number who missed meals, especially through the proactive work of the catering manager, and this was analysed monthly. However, trends over time were not tracked.

I.39 The Samaritans had stopped coming into the centre to speak to individual detainees or work with groups, but there were plans for them to resume visits. All detainees had access to free telephone calls to the Samaritans. Peer supporters were untrained.

Recommendations

I.40 **A care suite should be brought into use.**

- I.41 Detainees at risk of self-harm should have support from trained peer supporters and specialist external groups such as the Samaritans.**

Housekeeping points

- I.42** Managers should complete, record and follow up assessment, care in detention and teamwork (ACDT) checks, giving attention to care maps and to multidisciplinary attendance at reviews, as well as other quality issues.
- I.43** Home Office staff should attend, or supply written information to, ACDT case reviews where immigration is a trigger. (Repeated recommendation 4.18)

Safeguarding (protection of adults at risk)

Expected outcomes:

The centre promotes the welfare of all detainees, particularly adults at risk, and protects them from all kinds of harm and neglect.²

I.44 *There was a safeguarding document but there were no links with the local safeguarding adults board. At-risk detainees were reasonably well cared for, and discussed at individual needs meetings. Three members of staff had been dismissed following inappropriate behaviour and safeguarding failures.*

- I.45** The centre had grouped various policies and instructions to staff into a single safeguarding document. There were no links with the local safeguarding adults board or adult social services.
- I.46** Reasonably good individual care plans were used to support at-risk detainees, and they were generally well cared for (see section on equality and diversity). Detainees with additional needs were discussed at the multidisciplinary individual needs meetings (see section on bullying and violence reduction).
- I.47** Before the inspection, two male members of staff had had sexual relations with a female detainee. Following an investigation, three officers had been dismissed. The third member of staff had been dismissed for a failure to safeguard after taking no action when the detainee told her about the situation. Steps had been taken to minimise the risk of this occurring again in the future, including a programme of training, but continuing vigilance was needed.

Recommendation

- I.48 Links should be made with the local safeguarding adults board and the director of adults social services.**

² We define an adult at risk as a person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

Safeguarding children

Expected outcomes:

The centre promotes the welfare of children and protects them from all kind of harm and neglect.

- I.49** *Three detainees, who were subsequently confirmed to be children, had been held in the previous six months. Some young detainees were age assessed by a chief immigration officer, rather than social services. Detainees whose age was disputed were appropriately cared for while awaiting social services assessments. The centre's policy was up to date and emphasised the duty to safeguard and promote the welfare of children. The Home Office did not always follow its age-assessing policy and had failed to implement safeguarding procedures when there was doubt about a young person's age.*
- I.50** There had been 16 age dispute cases in the previous six months, and three detainees involved had been found to be minors and taken into the care of social services. One child had been held for 92 days before declaring her age. Some young people's ages were assessed solely by a chief immigration officer (CIO) rather than social services. In one case, a CIO had decided that a detainee looked considerably over 18, but the onsite immigration manager was unsure and correctly arranged for social services to assess the detainee; they confirmed he was an adult. Social services were generally quick to attend the centre but centre staff told us about occasional delays, especially at weekends.
- I.51** Detainees waiting for an age dispute assessment were appropriately cared for; they were supported through care plans, discreetly monitored and moved to single occupancy rooms near unit offices, rather than to the separation or health care units.
- I.52** The 'safeguarding and child protection policy' described the duty of staff to safeguard and promote the welfare of children. The policy was reviewed annually by the local safeguarding children's board. All Serco staff in the centre, including cleaners, were Disclosure and Barring Service checked.
- I.53** The Home Office had not followed its age-assessing policy in one case. A young male was detained at the centre following an assessment by Nottingham social services, and then transferred to Harmondsworth Immigration Removal Centre. At Harmondsworth, he produced an identity card suggesting that he was under 18. Rather than forwarding a copy of this to Nottingham social services and asking them to review their decision in light of the new evidence, as is Home Office policy, an officer concluded that 'no weight can be attached to this document'. A different officer reviewing the document concluded that it 'looked genuine' and 12 days after producing the card, the young person was finally released into the care of Hillingdon social services.
- I.54** In another case, a higher executive officer at the asylum screening unit noted on file that a young person's appearance and demeanour 'suggested that she is over 18', despite the fact that the correct test to apply was appearance strongly suggesting that she was significantly over 18. She was subsequently detained at Yarl's Wood and served with removal directions to Italy. The detainee had been distressed during interview and had mentioned a 25-year-old boyfriend. Following representations by legal representatives, a social worker's assessment resulted in her being taken into social services care. A short while later, she disappeared and a man contacted social services to say that she had absconded because she did not want to go to Italy. Despite these concerning events Home Office electronic records described her as an absconder rather than as a missing person and made no mention of police contact. Although we were later told that social services had called the police and that they had been

in touch with the Home Office, there was no evidence of this anywhere in the electronic records of the detainee's case.

Recommendations

- I.55 All age assessments should be conducted by social services, and in other respects staff should rigorously follow the Home Office's own age assessing policy.**
(Repeated recommendation 4.27)
- I.56 When an age dispute case leaves social services care, the Home Office should treat them as a missing person.**

Security

Expected outcomes:

Detainees feel secure in an unoppressive environment.

I.57 *Procedural security was generally well managed, and engagement between staff and detainees underpinned good dynamic security. However, a few security procedures were unnecessarily restrictive and women told us that room searches were not always carried out with sensitivity.*

- I.58** The security department was managed effectively by a senior manager supported by a security manager, a trained security analyst and two detention custody officers.
- I.59** The physical security and general condition of the fabric of the centre were adequate. Checks and routine searches of the perimeter took place regularly and routine searches of communal areas and activities areas were reasonable.
- I.60** Security committee meetings were well attended by staff representatives from relevant areas in the centre. The standing agenda was comprehensive and included a thorough analysis of security information reports (SIRs). Monthly security objectives were agreed through the appropriate consideration of intelligence.
- I.61** Important elements of dynamic security were in place. Relationships between staff and detainees were generally positive and supervision arrangements on residential units and in activity areas were proportionate.
- I.62** Risk management systems were reasonable. For example, detainees were not handcuffed routinely during escorts, and women could generally access activity areas and visit other units (see section on residential units). However, random room searches and escorting officers accompanying detainees during private medical consultations were disproportionate measures. Nursing staff at the centre also routinely 'chaperoned' visiting doctors during their consultations with detainees, which meant that detainees were not able to have normal levels of doctor-patient confidentiality (also see section on health services). We saw women being accompanied by officers during their pregnancy scans.
- I.63** Although rub-down searches of women were always completed by female officers, they often took place in the presence of men. Many women also told us that they were often embarrassed by male officers carrying out room searches without sensitivity. Detainees were not allowed to keep their mobile telephones with them during legal and social visits.

Recommendations

- I.64** Security procedures should be proportionate to the population and based on reasonable assessments.
- I.65** Male officers should not be present at rub-down searches of women, and should not conduct searches of female detainees' rooms.

Rewards scheme

Expected outcomes:

Detainees understand the purpose of any rewards scheme and how to achieve incentives or rewards. Rewards schemes are not punitive.

I.66 *There was no rewards scheme.*

- I.67** Implementing a reward scheme for the detainee population had been judged unnecessary and this appeared a sensible conclusion.

The use of force and single separation

Expected outcomes:

Force is only used as a last resort and for legitimate reasons. Detainees are placed in the separation unit on proper authority, for security and safety reasons only, and are held on the unit for the shortest possible period.

I.68 *The use of force and the number of detainees separated had both decreased considerably. However, initial authorisation for separation had often been given by junior managers, and in a few cases, it had clearly been used as a punishment.*

- I.69** There had been 48 incidents involving the use of force in the previous six months. This represented a reduction when compared with the same period in 2012 and a proportionate overall reduction of about 42% when compared with our findings at the time of the previous inspection. About 40% of incidents had not involved the use of full control and restraint.
- I.70** The security committee monitored use of force well, and links to violence reduction and the senior management team were reasonably effective. Incidents were discussed at the monthly security committee meetings and at the individual needs meeting (see also section on bullying and violence reduction). Information on the nature of the incident, its location, and the ethnicity and age of the detainee was collated each month but analysis of emerging patterns and trends was underdeveloped.
- I.71** An examination of documentation showed that use of force was generally justified and proportionate. However, we saw an example where de-escalation techniques had not been used adequately during the relocation of a distressed woman to the separation (Kingfisher) unit. All planned interventions, and parts of many spontaneous incidents, were video recorded.

- I.72** The separation unit was located at the end of a secure corridor near the residential units. Accommodation consisted of eight cells on a single landing. Two cells were used to house detainees under Rule 42 (temporary confinement) and six held detainees under Rule 40 (removal from association). Communal corridors were clean and brightly painted. Cells were clean and adequately furnished. However, sharp edges from some shelving were a safety hazard.
- I.73** The daily regime was basic, and included showers, exercise and access to telephones. Following a risk assessment, detainees on Rule 40 could attend activities such as the library and gym. Detainees were not allowed to retain their mobile telephones while locked in their cells.
- I.74** Separation under Rule 42 had been used only three times in the previous six months, compared with 13 times in the six months before the previous inspection. Rule 40 had been used 31 times, which was about half that in the equivalent period at the time of the previous inspection. Detainees were no longer routinely separated before their removal, and the further separation unit on Bunting unit was no longer used. The average length of time that detainees spent in separation had also reduced since the previous inspection. The average time that detainees spent on Rule 42 was about three hours and on Rule 40 was about two hours.
- I.75** Separation was usually authorised properly but in some cases authority had been given by junior managers (detainee custody managers), even when senior staff, including the immigration manager and centre manager, had been available. We also saw two examples where separation had clearly been used as a punishment following initial authorisation from a junior manager, albeit for short periods of time.

Recommendations

- I.76 De-escalation techniques should always be the preferred response to ensure that force is only used as a last resort.**
- I.77 Authority to separate detainees should be given by the centre manager or other designated senior managers.**
- I.78 Separation should not be used as a punishment.**

Housekeeping point

- I.79** The sharp edges in the cells on Kingfisher should be made safe.

Legal rights

Expected outcomes:

Detainees are fully aware of and understand their detention, following their arrival at the centre and on release. Detainees are supported by the centre staff to exercise their legal rights freely.

- I.80** *The number of legal advice surgeries had increased but detainees could still wait up to 10 days for an appointment. Legal information, textbooks and country of origin reports in the library were out of date. Detainees could easily communicate with lawyers and had reasonably good access to legal websites. Lawyers complained of delays in getting into the centre and of over-bureaucratic procedures.*
- I.81** Detainees could receive half an hour's free legal advice via the detention advice surgeries funded by the Legal Aid Agency. Three firms of solicitors were contracted to provide advice. Asylum cases with merit could receive substantive legal representation. The number of surgeries had increased since the previous inspection from two to three a week. Despite the increase in capacity, detainees could wait up to 10 days for an appointment. All detainees passing through the detained fast-track process received legal representation through a duty solicitor scheme.
- I.82** There was insufficient legal information in the library. Country of origin reports were stored in a disordered manner and were considerably out of date; for example, some were dated 2003. Hard copies of legal application forms were not held; to access these, detainees had to go to the computer suite, where copies could be printed. Hard copies of the latest Bail for Immigration Detainees (BID) handbook were available but some were out-of-date versions, which could have led to confusion. Complaint forms for the Office of the Immigration Services Commissioner and the Legal Ombudsman were held. The library stocked only four legal textbooks, one of which was on employment law and another, on immigration, had been published in 1995. Notices around the centre promoting legal advice were out of date. For example, we found some listing Refugee and Migrant Justice, which had closed three years earlier.
- I.83** In our survey, more detainees (74%) than at other centres (66%) said that they had a lawyer. Detainees and lawyers told us that they could communicate easily but in our survey fewer detainees (41%) than at other centres (52%) said that they had received a visit from their lawyer. Detainees could print up to 30 pages of legal documents each day, and had good access to legal websites and those of support organisations. The centre's home page gave links to relevant websites. Representatives from BID attended the centre regularly to help detainees with bail applications.
- I.84** Not all bail summaries were served by 2pm on the day before a bail hearing. We witnessed a bail summary arriving by fax at 4pm on the day before a hearing in the offices of the contact management team. An officer told us that summaries regularly arrived late.
- I.85** Lawyers confirmed that they could take mobile telephones and laptop computers into the centre but reported excessive delays in getting to legal interview rooms after arrival at the gate. Legal representatives had to write to the centre to request permission to attend fast-track asylum interviews.

Recommendations

- I.86** In liaison with the Legal Aid Agency, the centre should ensure that detainees do not have to wait more than a week to access the detention advice surgery. (Repeated recommendation 3.10)
- I.87** The library should hold up-to-date country of origin information reports and legal textbooks. (Repeated recommendation 3.12)
- I.88** All detainees should received copies of bail summaries by 2pm on the working day before their bail hearing.

Housekeeping points

- I.89** Notices in the centre relating to legal advice should be updated regularly.
- I.90** Visiting lawyers should be taken quickly from the gate to the legal visits corridor.
- I.91** Lawyers should be able to attend fast-track interviews without undue bureaucratic procedures.

Casework

Expected outcomes:

Decisions to detain are based on individual reasons that are clearly communicated and effectively reviewed. Detention is for the minimum period necessary and detainees are kept informed throughout the progress of their cases.

I.92 *There were several cases of long detention, with the longest period of detention being almost four years. Monthly reports were usually served on time. Reports were updated from month to month but some demonstrated a lack of substantive progress. The tone of induction interviews was reasonably good but the information provided was too generic. The number of Rule 35 reports generated was high, and many merely repeated what detainees had said, without diagnostic judgements. Eight pregnant women were being held but there was insufficient evidence on file documenting the exceptional circumstances that had led to their detention. Detainees displaying clear trafficking indicators were not referred to the national referral mechanism.*

- I.93** At the time of the inspection, seven detainees, all female ex-prisoners, had been held for more than a year, with the longest period of detention being nearly four years. Difficulties in obtaining travel documents and judicial reviews were delaying the resolution of these cases. It was clear that some detainees could not be removed within a reasonable period of time.
- I.94** Three types of detainee were held: those awaiting removal from the UK, female detainees whose asylum claims were being processed through the detained fast-track process, and 'lorry drops' – that is, men who had entered the UK clandestinely and disembarked in the Midlands area. The latter were held for up to five days in the short-term holding facility and screened by the Midlands intake unit of the asylum casework directorate. In the previous six months, 601 lorry drops had been held. After screening, they were routed into the detained fast-track process, the third country unit or the new asylum model.

- I.95** Monthly progress reports were usually served on time but at the time of the inspection 10 were overdue. The onsite team monitored and chased overdue reports. Many reports were updated from month to month but some showed a lack of substantive progress, and two failed to mention Rule 35 reports (requiring notification to the Home Office if a detainee's health is likely to be injuriously affected by detention, including if they may have been the victim of torture) which had been previously submitted.
- I.96** The three immigration induction interviews we observed were reasonably well conducted. The officer was polite, friendly and referred to detainees by their preferred name. Telephone interpreting was used when required and seats were not fixed to the floor. However, the information provided in the interviews was too generic, failing to address the individual facts of each case. For example, largely the same advice and information were given to a detained fast-track case, a detainee who had arrived by lorry and one who had been refused entry. Bail information, re-entry bans and voluntary return were not explained adequately. It was inappropriate that all detainees were routinely asked to give consent for access to their medical records.
- I.97** The number of Rule 35 reports generated by the health care department was high, at 171 in the previous six months. Too many just repeated what detainees had said, without adding diagnostic judgements. In one report, a doctor had made unprofessional and pejorative comments (see main recommendation S40). This report had been forwarded to immigration staff without the detainee's consent or knowledge. Case workers generally replied promptly but the focus was on maintaining detention. In one case, a case worker had accepted that a detainee had been tortured but had maintained detention as their condition could be managed satisfactorily; this was inconsistent with Home Office policy. However, in two other cases, detainees had been released following submission of Rule 35 reports.
- I.98** We were concerned to find that several mentally ill women had recently been detained direct from airports, before eventually being sectioned and released from the centre (also see section on health services). It was hard to see why they had been brought to the centre at all, given their obvious health needs, and the only explanation that centre staff gave us was that detention may have been considered an effective way to manage risks (see main recommendation S39).
- I.99** Eight pregnant women were being held at the time of the inspection. In some cases, there was no evidence on file of the exceptional circumstances that justified their detention. In one case, when authorising detention, an immigration officer had noted, 'Subject is fit and well with no known medical conditions and does not take any medication. Subject is single and does not have any children or dependants in the UK'. The 'special conditions' page on the Home Office's case working database was not always updated to indicate pregnancy. One woman held during the inspection had been detained for three and half months and hospitalised twice because of pregnancy-related complications. Monthly reviews recorded pregnancy (see also section on equality and diversity).
- I.100** Detainees displaying clear trafficking indicators were not always referred to the national referral mechanism. In one case, a detainee without leave to remain had been picked up working in a brothel but no referral had been made.
- I.101** In our survey, only 22% of detainees said that it was easy to see the centre's immigration staff when required.

Recommendations

- I.102 Induction interviews should be tailored to the individual facts of each case. Re-entry bans, voluntary return and bail should be clearly explained. Detainees should not be routinely asked to give consent for access to their medical records.**
- I.103 Detainees displaying trafficking indicators should be referred to the national referral mechanism.**
- I.104 Immigration staff should be visible and accessible to detainees.**

Housekeeping point

- I.105 Monthly reviews should be served on time.**

Section 2. Respect

Residential units

Expected outcomes:

Detainees live in a safe, clean and decent environment. Detainees are aware of the rules, routines and facilities of the unit.

- 2.1** *Residential units were in a good state of repair and rooms were clean. Association areas and facilities on the units were good. Some mattresses and curtains were not of adequate quality and some showerheads needed maintenance. Laundry facilities were good and accessible. The short-term holding facility provided a good environment.*
- 2.2** Single females were accommodated on an induction unit (Crane unit) before moving to shared rooms on Avocet and Dove units. Each of these units had a separate dining room and association rooms, with shared access to communal areas. Shared central facilities included a shop, arts and crafts room, cultural kitchen, large faith zone, computer suite, gym, library, hairdressing and nail salon, and association rooms. Hummingbird unit had shared rooms for adult families, with a separate library, pleasant association rooms and outside area. Bunting unit accommodated male detainees, mainly in single rooms. All rooms had showers and toilets. Two adapted rooms were available on Avocet unit and one on Dove unit.
- 2.3** Female detainees on Avocet, Dove and Crane units could move around the communal areas for most of the day. Female detainees on the Hummingbird family unit could access the main centre independently, and male detainees were escorted by staff. Association rooms had good facilities but were unnecessarily locked after 9pm. Male detainees on Bunting unit had access to a separate gym and courtyard.
- 2.4** All accommodation was in a good state of repair. The outdoor areas were attractive and well used. Rooms were clean, well ventilated and contained lockable cupboards. All detainees had keys to their rooms. Some curtains were too thin to keep rooms dark and not properly attached to the window frames. Some mattresses were ripped and uncomfortable. Mattresses were checked regularly, and replacement mattress stock was held, but not all detainees knew that they could ask for a replacement.
- 2.5** Detainees had access to cleaning materials. Although there was a maintenance programme for showers, some detainees had to use paper cups as funnels to prevent the shower spraying all over the bathroom.
- 2.6** House rules were displayed and available in a range of languages, although most notices were in English. Monthly consultation meetings were held with detainees to discuss issues about the environment and facilities. Personal invites were issued to detainees, and the meeting times and minutes were displayed on noticeboards. Attendance was variable, but issues were followed up.
- 2.7** Detainees could wear their own clothing and each unit had access to laundry facilities throughout the day, until 10pm. Toiletries and sanitary items were easily available.

Recommendation

- 2.8 Detainees should have access to communal areas within their units at any time.**

Housekeeping points

- 2.9** Curtains should be of adequate material to keep rooms dark, and be properly attached to window frames.
- 2.10** Detainees should be made aware that they can request a replacement mattress if necessary.
- 2.11** Showers should be maintained regularly.

Short-term holding facility

- 2.12** A self-contained short-term holding facility for single adult men had opened on Bunting unit in January 2012. It was appropriately separated from the rest of the centre and accommodated up to 38 men who had recently arrived in the UK. The length of stay there was limited to five days.
- 2.13** There was a large number of movements in and out of the unit (see section on casework), and reception and induction processes took place 24 hours a day. The induction process included information about the centre, and written information was clear and simple, using pictures where possible. Professional telephone interpreters were used during induction to the unit, but not in every case where they were needed.
- 2.14** The unit had a decent and relaxed atmosphere and detainees there were positive about their treatment by staff. Rooms were mainly single occupancy, and were clean and well maintained, with lockable cupboards and en-suite showers and toilets. A range of useful notices, in different languages, was displayed. Toiletries and other essentials were easy to obtain, and the clothing stock was good and readily available.
- 2.15** There was a reasonable and easily accessible association space, and a wide range of activities were available, including a gym, internet room, outdoor space and a welcoming multi-faith room. Arrangements for visits and communications were good, and in line with those available in the main centre.

Recommendation

- 2.16 Professional telephone interpreters should be used in the short-term holding facility when needed.**

Staff–detainee relationships

Expected outcomes:

Detainees are treated with respect by all staff, with proper regard for the uncertainty of their situation and their cultural backgrounds.

2.17 *Most detainees said that they were treated with respect by staff and we saw mainly good staff–detainee engagement. There were too many male staff for a predominantly female centre. There was no recognisable care officer scheme.*

2.18 In our survey, 84% of detainees said that they were treated with respect by most staff, which was better than the 73% comparator, and 67% said that there was a member of staff they could turn to for help if they had a problem. We saw mostly friendly interactions between staff and detainees. History sheet entries were perfunctory and infrequent but staff had a good knowledge of many detainees, and there was effective care planning for those with particular needs (see section on equality and diversity). We saw staff managing a number of situations with patience and good interpersonal skills.

2.19 The ratio of male to female staff was about 1:1, which was too high for a mainly female establishment. Despite managers' action to address this issue, there were widely reported complaints about staff going into women's rooms too quickly after knocking, without waiting for a response from detainees.

2.20 There was no recognisable care or personal officer scheme, despite earlier plans for named staff to maintain contact with long-term detainees.

Recommendations

2.21 **There should be a considerably higher proportion of female staff.** (Repeated recommendation 2.22)

2.22 **People detained for more than a few weeks should have a named officer to provide consistent support.** (Repeated recommendation 2.23)

Equality and diversity

Expected outcomes:

The centre demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no detainee is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. At a minimum, the distinct needs of each protected characteristic³ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

³ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

2.23 *The centre's equality and diversity policy was not specific to the population, and data monitoring was underdeveloped across all equality strands. A wide range of cultural and religious festivals was celebrated. Incidents of discrimination were managed reasonably well. Professional interpreting services were well used. With the exception of nationality groups, there were no support groups for detainees with protected characteristics. Disability was under-identified by the centre. Care plans were in place for those with additional needs, but not all considered the broader welfare needs of detainees. There were no paid carer roles. There was no specific identification of, or provision for, young adults. A lead lesbian, bisexual, gay and transgender officer signposted detainees to support organisations.*

Strategic management

2.24 The centre's diversity policy was based on a national detention services order and was not specific to the population. There was no accompanying action plan identifying objectives and how they would be met. The monthly equality action team meeting was well attended and chaired at a senior level. A good level of detailed information was presented and analysed but it did not encompass all protected characteristics – disability information was limited to the number of detainees with disabilities being held; sexual orientation was not considered and age was only considered in relation to longer-stay detainees. There was little month-on-month comparison of trends across the year, although this was addressed in the annual report compiled by an external psychologist. Detainees could attend for the second part of the meeting to raise issues, and the minutes of the meetings were displayed on notice boards.

2.25 All staff were required to undertake an annual basic in-house training package focusing on the Equality Act, and most were up to date with this. There were two designated disability liaison officers but no detainee diversity representatives. A wide range of cultural and religious festivals was observed, including Chinese New Year, Ramadan and Black History Month. A range of activities was planned for lesbian, bisexual, gay and transgender (LBGT) World Pride Week, and quarterly diversity and cultural awareness days were held. The cultural kitchens were well used (see section on catering).

2.26 A total of 15 discrimination incident report forms (DIRFs) had been submitted since the beginning of 2013, although nine of these related to one detainee who was sectioned under the Mental Health Act during the inspection. One complaint was still in progress, and all but two of the rest had been upheld. All of the complaints had been investigated reasonably well, showed evidence of one-to-one discussion with those involved, and had been quality assured by both the equality manager and the deputy centre manager.

Recommendations

2.27 **Strategic planning for diversity should consider the specific needs of the population at Yarl's Wood, set objectives and clearly set out how these will be achieved.**

2.28 **Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes across all the protected characteristics.**

Protected characteristics

- 2.29** There was little evidence of tension between different national and cultural groups. In our survey, 74% of detainees said that they understood spoken English, and 68% written English. There was considerable use of professional interpreting services. Nationality focus groups were held weekly and were a useful way of enhancing dialogue between detainees and staff, although attendance was variable. However, there were no support groups for detainees with other protected characteristics, and there was no specific provision for these detainees.
- 2.30** Although health services staff ascertained detainees' disabilities on arrival, there appeared to be under-identification by the centre. In our survey, 10% of respondents (around 30 detainees) said that they had a disability but the centre had identified only 10 detainees. There were two adapted rooms with integral, easy-access shower and toilet facilities and easily accessible call bells, and one wheelchair on each unit, which seemed sufficient to meet the need. There was also a lift to enable those with mobility problems to get to the dining hall. There was structured care planning for those with additional needs. Six detainees had care plans, three of whom also had a personal emergency evacuation plan (although two had not been updated when the detainees had moved units), with which residential staff were familiar. Care plan reviews were timely but some repeatedly stated that no change was required on the basis of advice from health services staff, and did not consider changes needed with respect to the wider welfare needs of the detainee. We were concerned about the outcomes for one detainee with a disability who, despite good coordinated input from the centre, was feeling isolated and distressed. There were no paid carer roles to provide assistance to detainees who required it; such individuals instead relied on staff and ad hoc help from other detainees.
- 2.31** There were 37 detainees over the age of 50 at the centre. Additional needs, if any, for such detainees were identified by health services staff on arrival. There was no clearly agreed definition of what constituted an older detainee and no specific provision for this group, although suitable activities, such as remedial gym and a knitting club, were available. There were 11 detainees aged between 18 and 21 at the centre, but there was no specific framework to identify the needs of young adults.
- 2.32** There was a lead lesbian, gay, bisexual and transgender (LGBT) officer. We saw information leaflets from LGBT support organisations which the officer gave detainees who approached her. The centre had recently held two transgender detainees; we were unable to see their files, but the care described by officers and the compact that the centre had in place were appropriate.

Recommendations

- 2.33** **Specific forums should be established for detainees across all protected characteristics, numbers permitting.**
- 2.34** **The under-reporting of disabilities should be investigated and addressed by the centre, and paid carer roles should be introduced.**
- 2.35** **Care plan reviews should consider broader welfare issues, managed by officers, in addition to medical issues managed by health services staff.**
- 2.36** **The specific needs of young adults should be investigated and acted on as necessary.**

Housekeeping point

- 2.37** Personal emergency evacuation plans should be updated in a timely fashion to reflect a change of circumstances.

Pregnant women

- 2.38** Eight pregnant women were detained at the time of the inspection (see section on casework). Support was not systematically offered regarding their daily routine or emotional well-being, and their needs were considered primarily in a health care context. The pregnant women we spoke to said that they often felt stressed and that their broader needs were not being met. Pregnant women were, appropriately, discussed at the individual needs meeting (see also section on bullying and violence reduction) but it was not clear that their wider support needs were proactively considered by centre staff.
- 2.39** Pregnant women were offered additional milk and fruit, but staff were not flexible about varying the quantities and variety of food in line with these women's tastes. Several pregnant women said that they found it difficult to stand for long periods, but were required to queue for meals. They were not routinely provided with appropriate maternity clothing.
- 2.40** Midwife appointments were conducted in the health care department, and women were taken to Bedford Hospital for routine scans and any additional medical appointments. They were escorted to hospital appointments. In two cases, female escort staff had inappropriately accompanied women into the consultation room (also see section on security). One woman said that she had felt humiliated and was reluctant to attend any further hospital appointments as a result.

Recommendation

- 2.41** **Pregnant detainees should be proactively supported by staff to cope with the emotional as well as physical aspects of their pregnancy.**

Housekeeping point

- 2.42** Pregnant detainees should have access to appropriate maternity clothing, be given maximum flexibility regarding mealtimes and food preferences, and have the opportunity to access appropriate relaxation and exercise provision.

Faith and religious activity

Expected outcomes:

All detainees are able to practise their religion fully and in safety. The faith team plays a full part in the life of the centre and contributes to detainees' overall care, support and release plans.

- 2.43** *Detainees' religious beliefs were respected. Faith spaces were welcoming, attractive and easy to access. There were good faith-related initiatives, such as detainees leading some religious services. Detainee custody officers received good faith training.*

- 2.44** In our survey, more detainees (80%) than at comparator centres (71%) said that their religious beliefs were respected, and detainees in our groups were positive about faith provision. The manager of religious affairs led a team of eight part-time staff and was supported by about 25 volunteers. The team covered a wide range of faiths. Some Christian and Buddhist services were held in Chinese.
- 2.45** The faith spaces were brightly decorated, had natural light and were very welcoming. Detainees could drop into the facilities for most of the day. There were four faith spaces on the main units for single women: a chapel, mosque, multi-faith room and Buddhist prayer room. Bunting and Crane units each had a single multi-faith room. On Sundays, Christian services were held in the visits hall, as they were sometimes attended by over 100 detainees. A published timetable showed detainees the times at which the various services were held. There were opportunities for Bible and Qur'anic studies.
- 2.46** There were good faith initiatives, such as detainees leading some religious services. During Ramadan, detainees could use the dining room at night for their hot meal rather than eating from heated containers in their rooms.
- 2.47** The manager of religious affairs was well integrated into the life of the centre and attended a range of meetings and assessment, care in detention and teamwork (ACDT) self-harm monitoring reviews. The centre celebrated a range of religious festivals throughout the year and these were published on a religious calendar. As part of their initial training course, detainee custody officers (DCOs) visited a Buddhist temple, mosque, gurdwara and two churches.

Complaints

Expected outcomes:

Effective complaints procedures are in place for detainees, which are easy to access and use and provide timely responses.

2.48 *The number of complaints submitted had decreased. Managers and staff made efforts to resolve issues informally. Complaint boxes were insecure. Investigations were reasonably thorough, but not always investigated by staff of the appropriate grade. Replies were polite and prompt, but issued only in English. Trend analysis was too infrequent.*

- 2.49** In the previous six months, 22 complaints had been submitted, compared with 52 in a similar period before the previous inspection. This decrease appeared to be related to the efforts made by unit managers and DCOs to resolve issues informally. Issues could also be raised in focus groups (see section on equality and diversity).
- 2.50** Complaint forms were freely available, in a range of language, on the units. Detainees could submit complaints out of sight of officers, but complaints boxes were not secure. Complaints were collected seven days a week and forwarded to the detention services customer services unit, which allocated the complaint to the most appropriate function. The main subjects for complaint in the last six months of 2012 were the conduct of staff, health care, property and availability of services.
- 2.51** Investigations into complaints were reasonably thorough but they were not always conducted by staff of the appropriate grade. One detainee had complained through her legal representatives of 'physical and verbal abuse' by staff but the matter had been investigated by an administrative assistant.

- 2.52** Replies were polite, prompt and constructive. Complaints could be submitted in languages other than English but replies were always in English. All replies were scrutinised by the governance manager and, unless the detainee specified otherwise, copies were sent to the Independent Monitoring Board (IMB). Detainees who were dissatisfied with the outcome could complain to the Prisons and Probation Ombudsman (PPO). Leaflets promoting the work of the PPO accompanied replies but in English only. Other than this, there was little promotion of the work of the PPO around the centre.
- 2.53** The details of complaints were reported in the audit and assurance update, IMB report and centre manager's report but these did not monitor trends. A separate report was produced every six months for this purpose, covering the number, category and outcome of complaints, and also the location and nationality of the complainant.

Recommendation

- 2.54** **Complaints should be investigated by staff of appropriate seniority and responses should be in the language in which they were submitted.**

Housekeeping points

- 2.55** Complaint boxes should be secure.
- 2.56** Information about the Prisons and Probation Ombudsman (PPO) should be displayed in a range of languages around the centre. Leaflets promoting the PPO in the detainee's language should be included with complaint replies.

Health services

Expected outcomes:

Health services assess and meet detainees' health needs while in detention and promote continuity of health and social care on release. Health services recognise the specific needs of detainees as displaced persons who may have experienced trauma. The standard of health service provided is equivalent to that which people expect to receive elsewhere in the community.

- 2.57** *The health services provided were satisfactory. There was good access to primary care services, apart from some delay to see the optician. Pharmacy services were well managed, with most detainees keeping their medicines in possession. An appropriate range of dental treatments was provided and waiting times were short. The demand for mental health care was low but the provision was good.*

Governance arrangements

- 2.58** Health services were commissioned by the Home Office and provided by Serco Health. Relationships between the commissioner and provider were good. The centre manager played an active role with the partnership board, and the health care manager was closely involved with the management of the centre through the senior management team. Links were also developing with NHS England in preparation for new contractual arrangements.

- 2.59** In our survey, detainees expressed satisfaction with their access to health services and the level of care provided. This was reflected in our observations and by the sample of detainees we spoke to, although we also received consistent reports of dismissive and rude behaviour by some health services staff. The health care centre was located on the ground floor and could be easily accessed by all the detainees. A separate health care room was located in the reception area and health care facilities were also available on Bunting unit for the short-term holding facility. All health care rooms were very clean and well maintained but the reception room was not secured with a health care suite key.
- 2.60** The last health needs assessment had been completed in 2010 and a new assessment was required. The health care manager was enthusiastic and ensured that her team provided a good level of care. The department was well staffed and there were three vacancies at the time of the inspection. Nursing staff were available 24 hours a day and one of the mental health nurses was always available during core working hours. Chronic disease management and screening programmes were available through a range of clinics, some of which were provided by visiting specialists. Detainees were referred to the local hospital when required. A good level of professional development was maintained for all staff and all were in date for mandatory training and registration. Clinical supervision was managed mainly by groups and peer supervision was developing.
- 2.61** Seven GPs, two of whom were female, provided two clinics daily and one on weekend days. Out-of-hours cover was provided by a separate division of Serco. The pharmacy service was supplied by Lloyds and a pharmacist was contracted to visit the centre twice a month. The weekly dental clinic provided a satisfactory range of treatments.
- 2.62** Clinical records were still maintained on paper but a contract to establish SystmOne (the electronic clinical record) had been agreed. The health services team met weekly to ensure that staff were kept informed of local and national issues. There was a policy for managing detainees who refused food, who were usually monitored on their normal location. Emergency resuscitation equipment was well maintained and located in the health care centre and in reception, and there were three automated external defibrillators available around the centre. All custody staff attended first-aid training, including the use of defibrillators.
- 2.63** Detainees had access to a dedicated focus group to discuss health care issues. Health care information was widely available in the main corridors and the health care centre in a wide range of languages. Patients with communicable diseases were well managed and those who required isolation were located on the inpatient unit. There were fewer than three health care complaints each month and all received a timely, typed response that considered the issue sensitively.

Recommendation

- 2.64** **The needs of the centre population should be analysed by an up-to-date health needs assessment.**

Housekeeping points

- 2.65** The health care manager should monitor and investigate any reports of dismissive or rude behaviour by the health services team.
- 2.66** The health care room in reception should be secured by a health care suite key.

- 2.67** The SystemOne electronic record should be installed, to improve the consistency and continuity of care for detainees.

Delivery of care (physical health)

- 2.68** A comprehensive health care screen was given to all detainees on arrival, either in the main reception or on Bunting unit. The health care room in reception was well resourced. Good use was made of professional telephone interpreting services at this time, and a health care leaflet was provided in a wide range of languages. An open clinic was held each day and all detainees were free to attend. Patients were either treated at the time or referred to appropriate clinics as required. We were told that nurses routinely chaperoned patients in GP clinics, which was not usually necessary and was not consensual. Waiting times for all clinics, including the GP clinic, were short, apart from those for the optician, which could extend to eight weeks. Attendance rates at clinics were satisfactory and patients who failed to attend were regularly followed up.
- 2.69** None of the health services staff had been trained in the recognition of alleged acts of trauma or torture, and this was evident in the varied quality of Rule 35 reporting (see section on casework). A five-bed inpatient unit was attached to the health care centre and we were told that it was used only for isolation purposes and not for caring for sick detainees. Detainees located in the care and separation unit were seen daily by health services staff, including mental health nurses when required. Health promotion and screening programmes were available and detainees were able to complete vaccination courses that had been started. Condoms were available in the shop and on Bunting unit. Patients attending hospital appointments were well managed by one of the health care administrators but appointments at hospitals located some distance from the centre were often missed because of the poor transport arrangements through Tascor services.
- 2.70** Health services staff were generally given sufficient notice of the release or removal of detainees to make any preparations required. Detainees were provided with information about the care they had received and the health care facilities in their destination country, and were given one month's supply of medication when required. Anti-malarial drugs were provided for immunosuppressed detainees, and mosquito nets if appropriate.

Recommendations

- 2.71** **Health services staff should receive training in the recognition of signs of alleged acts of trauma or torture.**
- 2.72** **Hospital appointments for detainees should not be cancelled because of poor transport arrangements.**

Housekeeping point

- 2.73** Regular chaperoning of patients should be reviewed and consent obtained when required.

Pharmacy

- 2.74** Detainees received medicines in a timely manner, some in-possession and some via supervised administration. There was a suitable medicines risk-assessment policy, which had recently been reviewed, the main basis of which was to aim to supply medication in-

possession unless there was reason not to; in practice, risk assessments were only filled in when in-possession medicine was to be given.

- 2.75** Medicines were labelled in English but there was a 10-language translation of common dosage instructions, and professional telephone interpreting services were used when necessary to ensure that patients understood how to use their medicines. As there was 24-hour care, medication could be given up to four times a day, with night sedation given at appropriate times. Salbutamol was given as supervised doses from a stock inhaler, until a dispensed and labelled inhaler was received from the pharmacy; the stock inhaler was then disposed of. Use of paracetamol was well monitored and available to detainees when required.
- 2.76** Medicines were stored appropriately, in a clean, tidy pharmacy room. There was some audit of medicine use, limited by the lack of computerised prescribing.

Housekeeping point

- 2.77** The in-possession policy should be followed, with the assumption that medication is provided in-possession, and risk assessments should be carried out as frequently as necessary.

Dentistry

- 2.78** The dental suite was clean and all equipment was well maintained. Detainees were generally positive about the care they received. The dental contract provided a satisfactory range of treatments, and waiting times were very short. Patients were provided with oral health information while being treated, and written information if appropriate. All dental treatment was recorded in the health care clinical record and the service was included in the plans to implement the new electronic record.

Delivery of care (mental health)

- 2.79** Six mental health nurses shared the primary care mental health cases, with an average of five referrals each week. Patients were seen mainly in the health care centre and the team worked closely with the two counsellors employed at the centre. Patients requiring secondary referral were seen by the GP and subsequently by a visiting psychiatrist, who attended the centre when required. Patients with enduring mental health problems that required tertiary care were transferred quickly. However, since March 2013 there had been four individuals with severe mental health problems who had been detained immediately from the airport on their arrival (see section on casework and main recommendation S39). Mental health awareness training was included in the annual training for all custody staff.

Substance misuse

Expected outcomes:

Detainees with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their detention.

- 2.80** *There was no evidence of substance misuse among detainees in the previous year. There was no opiate substitution or detoxification facility and detainees were generally treated elsewhere.*

- 2.81** There was no evidence of substance misuse among detainees in the previous year. There was no opiate substitution or detoxification facility and detainees were generally treated elsewhere. Staff were not trained in the management of substance misuse but there was access to a GP with a special interest in the area. A smoking cessation service was available to detainees.

Services

Expected outcomes:

Detainees are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations. Detainees can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely.

2.82 *The range and standard of the food provided were good and the cultural needs of detainees were generally catered for. Fresh fruit, vegetables and salads were available every day. The kitchen was clean and the dining rooms on residential units provided pleasant environments. The cultural kitchens were very popular. Electronic menus were in English only. Detainees had access to a wide range of products in the shop and the cost of items was reasonable. The weekly market was very popular.*

- 2.83** The purpose-built kitchen was clean, properly maintained and well equipped. All staff and detainees employed in the preparation and serving of food had received basic hygiene and food handling training. Lunch and dinner were selected from a four-week rolling menu that offered a good variety of healthy options that included fresh fruit, vegetables and salads every day. Detainees selected their menu choices from the electronic information booths on all residential units. The electronic menus provided an effective way of getting accurate information to the kitchen quickly but they were only in English.
- 2.84** The quality of the food we tasted was very good and at the correct temperature. The menus we saw met the needs of a variety of diets, including vegetarian, vegan and halal. Halal food was stored and served separately from other foods. There were food comments books on all residential units and these were readily accessible to detainees.
- 2.85** All detainees ate their meals in communal dining rooms on their residential units. The areas were large, clean and well decorated. Staff often ate with detainees there, helping to create a pleasant and relaxing environment.
- 2.86** Two cultural kitchens, on Avocet and Hummingbird units, were well used. There were long waits to use the kitchen on Hummingbird unit, which was open only once a week, but additional sessions were planned.
- 2.87** The centre shop was open from 10am until noon and 1pm until 5pm every day. It sold a wide range of goods, including confectionery, groceries, toiletries, mobile telephone top-up cards, stamps, tobacco products and greetings cards. Orders for newspapers and magazines could be placed, including some foreign national publications.
- 2.88** There was regular consultation with detainees, and products were added as needed. Detainees could also order goods from approved internet sites.

- 2.89** A popular weekly market took place in the sports hall, at which detainees could buy clothes, accessories and cosmetics. There were advanced plans to open a further permanent shop to sell a wider range of clothes and other popular goods.
- 2.90** Detainees were permitted to have up to £20 of their own money in cash in their possession and could withdraw cash from their account in the shop. Prices in the shop were reasonably low and cheaper non-name brands were also available.

Recommendation

- 2.91** **The electronic menu ordering system should be in a variety of languages.**

Section 3. Activities

Expected outcomes:

The centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees.

3.1 *The centre offered a wide range of recreational activity to meet the needs of detainees remaining at the centre for short periods. Most activities and events were conveniently located and some were very popular. Internet access was good. Arts and crafts provision was good, but education classes were mainly low level and poorly attended. The number of work roles offered had decreased and working hours were short. Detainees' freedom of movement was too restricted, both to central areas and within residential units. The library was well used and the stock adequate. Fitness provision was appropriate, supervised by enthusiastic, well-trained staff.*

- 3.2** The centre offered a range of activities to meet the needs of detainees remaining at the centre for short periods. In our survey, 60% of detainees, considerably more than at other centres (45%), said that there was enough to do to fill their time.
- 3.3** Most activities and events were conveniently located in a central area close to residential units, along with other communal facilities such as faith rooms and the shop. A professionally staffed hair and nail salon attracted large numbers of detainees. Weekly bingo games, run by the centre's enthusiastic activities staff, were well attended. Two rooms arranged as cinemas showed films throughout the day. Detainees could book a room with a lighting and sound system for organised events.
- 3.4** A wide-ranging programme of well-planned events took place each month. Many were timed to coincide with and celebrate cultural or religious festivals, such as the Chinese New Year and Pentecost. More eclectic, themed events (for example, a 'British summer tea party'), were also popular. Well-attended music workshops, run by Music in Detention, took place at least monthly.
- 3.5** Recreational facilities in residential units were good. Detainees' rooms were equipped with DVDs and televisions. Each unit had an attractive outdoor courtyard garden for detainees' use, and an association room with a television and pool tables or table football. A suite of 19 up-to-date computers was available during the day and evening in the central activity area, and there were an additional six computers in the family unit. Centre staff routinely monitored detainees' internet usage. However, social networking sites were consistently blocked (see section on communications).
- 3.6** Resources in the short-term holding facility (STHF) catered effectively for the needs of its rapidly changing population. In addition to the facilities available in other residential units, it had a small fitness suite and a spacious room housing eight modern computers (with internet access) and a small library.
- 3.7** All detainees received information about activities at their initial induction to the centre. This was supplemented effectively by 'greeters' (see section on early days in detention), who frequently took newly arrived detainees to meet the staff responsible for education and work. Posters advertising activities were displayed around the centre, augmented by information on a centrally located video screen. The centre used a suitable range of methods to gather detainees' views through questionnaires and focus groups.

- 3.8** Female detainees could move freely within the central area where most activities were located, and between the two main residential units catering for women, for a total of nine hours a day. However, overall, detainees' freedom of movement was too restricted. They were all were confined to their residential units between 9pm and 9am, and for two 90-minute periods during the day. Although not locked in their rooms, they were expected to remain in them from 10pm until 8am. Women in the family unit had access the central area at the same time as other female detainees. Male detainees were more restricted, but this was soundly based on risk assessment. For the most part, they remained within their residential units, although they were escorted at set times to dedicated sessions in the gym and library.

Recommendation

- 3.9** **The centre should extend the time during which female detainees can use central facilities and associate freely within their residential units.**

Learning and skills

- 3.10** A wide and imaginative range of craft activity, including T-shirt printing, ornament making and card design, engaged detainees effectively. Sessions were planned well, enabling detainees to work on a range of projects individually or collaboratively, and took place in a room which offered basic but adequate facilities. A weekly knitting group was also popular.
- 3.11** Education classes were offered in English for speakers of other languages, mathematics and information and communications technology (ICT). The range of subjects was adequate but was generally restricted to study at a low level. This did not cater effectively for the most able learners or those ready to progress further, and provided little of interest to those detained for prolonged periods. Classes were organised flexibly as drop-in sessions and provided a welcoming environment. However, the range of teaching and learning methods used by tutors was limited and depended too much on the completion of photocopied worksheets or following instruction manuals. Although ICT was appropriately structured into short units leading to external accreditation, those following the courses spent too much time copying data or text without regard for its meaning. Computer hardware and software, and many paper-based learning materials were outdated. Attendance was poor. There were rarely more than five detainees at any education session.
- 3.12** Although arts and crafts and education classes were offered most mornings, afternoons and some evenings during the week, no classes took place at weekends. Provision on the family unit was more limited and very poorly attended. The centre did not provide computer-based learning resources which detainees could use independently outside sessions.
- 3.13** Arrangements to assure and improve the quality of learning and skills were weak. Managers did not routinely observe activities or education classes to monitor their quality and identify any improvement needed. Self-assessment of activities was over-reliant on the evaluation of individual events rather than reviewing the provision overall. The monitoring of attendance was incomplete. It did not distinguish between detainees who remained at sessions for prolonged periods and those who attended briefly.

Recommendations

- 3.14** **There should be more paid work and more higher-level education to meet the needs of longer-stay and more able detainees.** (Repeated recommendation HE46)

- 3.15** The centre should provide up-to-date computer-based learning resources which detainees can use independently.
- 3.16** There should be effective monitoring of the quality of education. Monitoring and analysis of attendance at education classes and fitness activity should be thorough (see also paragraph 3.32).

Paid work

- 3.17** The amount of paid work at the centre had reduced since the previous inspection, to approximately 50 places, most of which offered part-time work for around 10 hours a week. At the time of inspection, virtually all roles were filled. Waiting lists for jobs were short, as was the wait between application and taking up a role.
- 3.18** All roles had clear job descriptions. However, much of the work was mundane, presenting little challenge and not offering suitable opportunities to those detained for long periods to develop their skills. A generic induction was brief and training for most roles was confined to a demonstration by those already in the same work. Those in kitchen or server work received basic hygiene training, and a few who sustained their roles received a more extensive three-day training at level 2.
- 3.19** The centre's job application procedures were simple and appropriate. However, the Home Office reviewed all applications and in a few cases imposed vetoes for non-compliance with the agency.

Recommendations

- 3.20** The number of paid work roles, and the hours detainees can work should increase. More interesting and challenging work roles should be added.
- 3.21** Detainees should not be prevented from taking up work because of non-compliance with the Home Office. (Repeated recommendation 6.12)

Library

- 3.22** Library provision was adequate. The main library in the central area was popular for borrowing materials and as an information centre. The range of fiction, non-fiction and easy-reader titles in English was wide. However, the centre had recognised that, at 25%, the proportion of books in languages other than English was too low, and had started to make regular purchases to redress this. Loan titles were in 20 languages and bilingual dictionaries in over 40. A wide range of British newspapers was available but there were few foreign newspapers. There were around 2,000 DVDs available for loan, and they were heavily borrowed, although these were mostly in English. There was also a small selection of CDs.
- 3.23** The library was open during the day and evening, seven days a week. In our survey, 86% of detainees said that it was easy or very easy to go to the library, which was much higher than at other centres. One hour a day was set aside for male detainees to visit. There was a comfortable seating area for readers, and a large adjoining room was suitably furnished for reading and study. However, the library did not have internet facilities to enable detainees to search for information with support from library staff. The lighting in areas of the main library was poor.

- 3.24** The member of staff responsible for the library was enthusiastic and efficient but had yet to receive any specialist training for the role. The computer-based system used to manage loans and returns was cumbersome. It was not able to produce reports showing trends and patterns in borrowing to inform the planning of library stock.

Recommendations

- 3.25** Internet facilities should be available in the library.
- 3.26** Trends and patterns in book borrowing should be monitored to inform the planning of library stock.

Housekeeping point

- 3.27** The lighting in the main library should be improved.

Sport and physical activity

- 3.28** Fitness provision was adequate. In the central area, a large sports hall was used regularly for activities such as circuit training, badminton and volleyball, and a reasonably equipped gym provided cardiovascular and weights equipment. These were supplemented by smaller fitness rooms in the family unit and STHF. Outdoor activity was largely confined to basic facilities in the courtyard gardens of the residential units. The centre was planning to develop unused outdoor areas to address this.
- 3.29** Staff who supervised fitness training were enthusiastic and well trained. Health services staff provided assessments of detainees' fitness to participate in PE. Inductions to the fitness activities in both the main centre and the STHF were regular and timely.
- 3.30** Access to fitness provision was good. Sessions for female detainees ran daily, including evenings. Dedicated sessions for male detainees were offered for an hour twice a day. In our survey, around two-thirds of detainees said that it was easy or very easy to go to the gym. However, timetabled daily sessions for detainees over 55 were poorly promoted and attended.
- 3.31** The centre had launched an innovative programme – WIN (weight, information and nutrition) – to improve the health and fitness of detainees. It combined a focus on weight control, healthy eating, exercise and embedding positive attitudes to healthy living and was delivered by a multidisciplinary team of staff from across the centre. However, the programme was still at an early stage and few detainees had yet completed it fully.
- 3.32** Arrangements for showers and the supply of suitable footwear and kit were appropriate. Accidents and injuries were appropriately recorded and led to appropriate remedial action. Although staff recorded the nationalities of those who attended fitness activity, monitoring and analysis to establish patterns of attendance by individuals and groups were ineffective.

Recommendations

- 3.33** Suitable facilities for outdoor sports and games should be provided.
- 3.34** The centre should develop and promote fitness activity for older detainees.

Section 4. Preparation for removal and release

Welfare

Expected outcomes:

Detainees are supported by welfare services during their time in detention and prepared for release, transfer or removal before leaving detention.

4.1 *The welfare officer provided good support but was overstretched, and there was no provision at weekends. A small number of community organisations attended the centre. The welfare officer offered appointments to all detainees served with removal directions but did not routinely see those being released.*

4.2 A welfare officer worked from Monday to Friday, assisting detainees with practical issues, on an open-door basis. A small number of additional staff acted as welfare assistants, and provided cover for the welfare officer's annual leave, but there was no cover at weekends. The service was valued and well advertised throughout the centre, in a wide range of languages.

4.3 Demand for the welfare service had increased considerably since the previous inspection and now outstripped provision. In the previous three months, the welfare officer had dealt with an average of 244 contacts per month, most commonly concerning the recovery of property from a previous establishment, money issues and contact with immigration staff. We also saw evidence of assistance provided with online banking and money transfers to solicitors. The officer was the link person for community organisations delivering surgeries in the centre – the Red Cross, Refugee Action and the Bedford Credit Union. Links with other external community organisations, such as accommodation providers, were underdeveloped. Basic data were collected and presented in the monthly equality action team report, including the nationality of detainees who had not accessed welfare services, although there was no analysis of why this was so.

4.4 The welfare officer offered appointments to all detainees served with removal directions but did not routinely see those being released (see section on release and removal and recommendation 4.33).

Recommendation

4.5 **Links with a broader range of relevant external organisations should be developed.**

Housekeeping point

4.6 More detailed analysis of the under-representation of specific nationalities and groups seeking help with welfare issues should be undertaken by the welfare officer.

Visits

Expected outcomes:

Detainees can easily maintain contact with the outside world. Visits take place in a clean, respectful and safe environment.

- 4.7** *The visits room was well decorated and comfortable, with good access to outside space. Relationships between staff, detainees and their visitors were very good, and there was an active befriending scheme.*
- 4.8** Social visits took place every day from 2–5pm and 6–9pm, were easy to book and usually started on time. Visitors were allowed to attend both sessions, if space permitted, but had to leave between sessions.
- 4.9** The visitors centre, located just outside the main entrance, was reasonably comfortable and appropriately staffed by both men and women. Lockers were provided, and visitors could book in property for detainees.
- 4.10** Catering facilities in the visitors centre were poor. Apart from a few vending machines, there was little offered to visitors. This was a particular disadvantage for families that had travelled long distances, as there were no shops near the centre. The vending machine in the visitors centre was empty during the inspection.
- 4.11** All visitors were required to book in before going to the main centre and went through a biometric identification system. A policy about the use of biometrics had been published and an information booklet explaining its use was given to all visitors. It set out in detail what information was to be provided and how it was to be used, and explained that information about visitors would be immediately encrypted and destroyed in six months if not used again within that period. The data were not cross-checked with other databases and were used only as a means to identify visitors at the centre.
- 4.12** The main visits hall was reasonably large and brightly decorated. It could accommodate up to 20 detainees. Seating was informally arranged and helped to create a relaxed environment. There was a well-equipped children's play area. One corner of the room had been decorated in a café style, with vending machines for hot and cold drinks and snacks, but there was no substantial food available. There was also a well laid-out outside area, with wooden tables and chairs to which detainees and their visitors had free access.
- 4.13** Noticeboards displayed relevant, up-to-date information and there was also some written information that visitors could take away with them, but all information was in English only.
- 4.14** Relationships between staff and detainees in visits were good. Supervising officers were friendly and respectful in their dealings with detainees and their visitors. Procedures such as searching and dealing with children were carried out with sensitivity.
- 4.15** There was an active befrienders scheme, providing support to a large number of detainees. Detainees we spoke to said that they valued the scheme. A free bus service operated for visitors between the train and bus stations and the centre.
- 4.16** Themed family days were no longer provided but we were told of plans to reintroduce them. Children were clearly welcomed and could attend all visiting sessions.

Recommendation

- 4.17 Substantial food should be available for purchase by visitors.** (Repeated recommendation 9.14)

Communications

Expected outcomes:

Detainees can regularly maintain contact with the outside world using a full range of communications media.

- 4.18** *In general, detainees could communicate easily with the outside world. They could not buy mobile telephones and did not have access to social networking sites or Skype.*

- 4.19** Detainees could generally communicate easily with the outside world. In our survey, more detainees (71%) than at comparator centres (64%) said that it was easy to use the telephone. They could retain mobile telephones provided that they did not have an integral camera or recording equipment. All detainees were lent a Serco mobile telephone and all were given a free five-minute international telephone card. Officers and managers used a texting platform to communicate with detainees around the centre. For example, if a detainee was required in legal visits or by immigration staff, they were notified by text message. This system worked reasonably well.
- 4.20** Some detainees complained that their Serco mobile telephones only accepted £10 top-ups from O2, whereas £5 top-ups were accepted from other providers. In addition, they could not transfer the SIM card from their old telephone to the Serco one, although they were able to write down numbers during reception. They also complained that they could not call all their contacts to let them know that their mobile telephone number had changed. Mobile telephones were not available for purchase from the shop but could be sent in by detainees' friends or family.
- 4.21** The shop sold a variety of mobile telephone top-up cards and call cards for use on landlines. Payphones with privacy hoods were located mainly in separate telephone rooms on the units. Direct dial options to Childline, the Samaritans and Civil Legal Advice were available free of charge. Incoming calls could be put through to telephones on the units.
- 4.22** Systems for sending and receiving mail were good. In our survey, fewer detainees (13%) than at comparator centres (26%) said that they had had problems sending or receiving mail. Detainees were allowed to send one free letter each week. Fax machines were available on the units and detainees were allowed to fax reasonable quantities of documents to lawyers.
- 4.23** Detainees had good, closely supervised access to the internet in the main units, but we found a number of legitimate websites blocked in the STHF. Detainees could use popular online email accounts such as Yahoo and Hotmail, but were denied access to Skype or social networking sites such as Facebook. For most detainees, using these sites posed no security risks and could have helped them to prepare for removal.

Recommendations

- 4.24 The shop should sell mobile telephones.**

- 4.25 Detainees should have access to Skype and social networking sites unless an individualised risk assessment suggests otherwise, and legitimate websites should be available in the short-term holding facility as well as the main centre.**

Removal and release

Expected outcomes:

Detainees leaving detention are prepared for their release, transfer, or removal.

Detainees are treated sensitively and humanely and are able to retain or recover their property.

4.26 *All detainees being removed were spoken to individually by a member of staff. The daily individual needs meeting discussed detainees who were vulnerable or otherwise of concern before removal. Hibiscus provided a much valued service to assist detainees with more complex resettlement needs. Group forums for detainees leaving on charter flights were a promising initiative. We observed reasonable treatment from overseas escorts picking up detainees for scheduled flights.*

- 4.27** In the previous six months, 867 detainees had been removed, 1,188 had been released into the community and 198 had been transferred to other places of detention. Around 12 applications a month were received for the assisted voluntary return scheme.
- 4.28** Planning for removal or release did not begin on the detainee's first day at the centre and there was no structured needs assessment. The welfare officer was given details of detainees who had received removal directions and invited them to attend a welfare appointment. There was no follow-up of detainees who did not attend and detainees who were granted temporary admission or released were not contacted.
- 4.29** All detainees being removed were spoken to individually by a member of staff, to ascertain how they felt about the removal. Individual needs meetings were also helpful in planning for removal. Attendees had good knowledge of the detainees, and actions appropriately considered their welfare. Notes were taken at these meetings but these did not translate into care plans in detainee files.
- 4.30** Hibiscus provided a much valued service to assist detainees with more complex resettlement needs, including the retrieval of property from home addresses, links to support organisations in receiving countries and help with maintaining family contact. They also provided small resettlement grants, where appropriate, to assist detainees in reaching their final destination. The service was due to expand significantly in the near future. The service was not promoted during detainees' induction, and there did not appear to be a close working relationship between Hibiscus staff and the welfare officer.
- 4.31** We saw evidence of detainees about to leave the centre receiving visits from friends and family at short notice. There were group forums for detainees leaving on charter flights, where they could ask questions and discuss concerns, but they were new and had not yet developed a standard format. We observed reasonable treatment by overseas escorts picking up detainees for scheduled flights.

Recommendations

- 4.32 Planning for removal or release should start as soon as detainees arrive in the centre and include an early structured needs assessment.**

- 4.33** A sufficiently resourced welfare service should be available seven days a week and offer appointments to all detainees, including those due for release, before discharge. The welfare officer should work closely with Hibiscus to ensure that all needs have been met.

Housekeeping points

- 4.34** Multidisciplinary care plans should be agreed at the daily individual needs meeting to manage the removal of high-risk detainees, and be evidenced in detainee files to ensure that all relevant staff are aware of them.
- 4.35** The service provided by Hibiscus should be promoted during induction.
- 4.36** Group forums for detainees leaving on charter flights should continue to be developed.

Section 5. Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report, and in the previous report where recommendations have been repeated.

Main recommendations

To the Home Office

- 5.1** More female staff should be recruited as a matter of urgency. Male staff should not enter women's rooms unless explicitly invited to do so except in cases of emergency and all staff should be trained in recognising and responding appropriately to the particular vulnerabilities of a female population that may have experienced victimisation before detention. (S38)
- 5.2** Detainees with enduring mental health illnesses should not be detained, and pregnant detainees should only be detained in the most exceptional circumstances. The continued detention of pregnant women should be considered in line with the Home Office's published policy on the detention of pregnant women. (S39, repeated recommendation HE45)
- 5.3** Rule 35 reports should provide objective professional assessments – for example, commenting on the consistency between injuries and alleged methods of torture. Case owner replies should carefully address all relevant factors in reviewing ongoing detention. (S40, repeated recommendation HE44)

Recommendations

To the Home Office

Escort vehicles and transfers

- 5.4** Detainees should not be subject to multiple transfers around the detention estate. (1.7)
- 5.5** Detainees arriving from police stations should be accompanied by police records and relevant risk information. (1.8, repeated recommendation 1.7)

Safeguarding children

- 5.6** When an age dispute case leaves social services care, the Home Office should treat them as a missing person. (1.56)

Legal rights

- 5.7** All detainees should received copies of bail summaries by 2pm on the working day before their bail hearing. (1.88)

Casework

- 5.8** Induction interviews should be tailored to the individual facts of each case. Re-entry bans, voluntary return and bail should be clearly explained. Detainees should not be routinely asked to give consent for access to their medical records. (1.102)
- 5.9** Detainees displaying trafficking indicators should be referred to the national referral mechanism. (1.103)
- 5.10** Immigration staff should be visible and accessible to detainees. (1.104)

Activities

- 5.11** Detainees should not be prevented from taking up work because of non-compliance with the Home Office. (3.21, repeated recommendation 6.12)

Recommendations To the Home Office and escort contractors

Escort vehicles and transfers

- 5.12** Detainees should not be subjected to exhausting overnight journeys. (1.6, repeated recommendation 1.8)

Communications

- 5.13** Detainees should have access to Skype and social networking sites unless an individualised risk assessment suggests otherwise, and legitimate websites should be available in the short-term holding facility as well as the main centre. (4.25)

Recommendation To the Home Office and centre manager

Safeguarding children

- 5.14** All age assessments should be conducted by social services, and in other respects staff should rigorously follow the Home Office's own age assessing policy. (1.55, repeated recommendation 4.27)

Recommendations To the centre manager

Early days in detention

- 5.15** The reception process should be completed as quickly as possible, and detainees moved swiftly to the residential units. (1.20)

Bullying and violence reduction

- 5.16** Managers should regularly conduct a detainee survey on their experiences of intimidatory behaviour, including questions aimed at discovering why detainees were sometimes reluctant to report such events. (1.30)

Self-harm and suicide prevention

- 5.17** A care suite should be brought into use. (1.40)
- 5.18** Detainees at risk of self-harm should have support from trained peer supporters and specialist external groups such as the Samaritans. (1.41)

Safeguarding (protection of adults at risk)

- 5.19** Links should be made with the local safeguarding adults board and the director of adults social services. (1.48)

Security

- 5.20** Security procedures should be proportionate to the population and based on reasonable assessments. (1.64)
- 5.21** Male officers should not be present at rub-down searches of women, and should not conduct searches of female detainees' rooms. (1.65)

The use of force and single separation

- 5.22** De-escalation techniques should always be the preferred response to ensure that force is only used as a last resort. (1.76)
- 5.23** Authority to separate detainees should be given by the centre manager or other designated senior managers. (1.77)
- 5.24** Separation should not be used as a punishment. (1.78)

Legal rights

- 5.25** In liaison with the Legal Aid Agency, the centre should ensure that detainees do not have to wait more than a week to access the detention advice surgery. (1.86, repeated recommendation 3.10)
- 5.26** The library should hold up-to-date country of origin information reports and legal textbooks. (1.87, repeated recommendation 3.12)

Residential units

- 5.27** Detainees should have access to communal areas within their units at any time. (2.8)
- 5.28** Professional telephone interpreters should be used in the short-term holding facility when needed. (2.16)

Staff-detainee relationships

- 5.29** There should be a considerably higher proportion of female staff. (2.21, repeated recommendation 2.22)
- 5.30** People detained for more than a few weeks should have a named officer to provide consistent support. (2.22, repeated recommendation 2.23)

Equality and diversity

- 5.31** Strategic planning for diversity should consider the specific needs of the population at Yarl's Wood, set objectives and clearly set out how these will be achieved. (2.27)
- 5.32** Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes across all the protected characteristics. (2.28)
- 5.33** Specific forums should be established for detainees across all protected characteristics, numbers permitting. (2.33)
- 5.34** The under-reporting of disabilities should be investigated and addressed by the centre, and paid carer roles should be introduced. (2.34)
- 5.35** Care plan reviews should consider broader welfare issues, managed by officers, in addition to medical issues managed by health services staff. (2.35)
- 5.36** The specific needs of young adults should be investigated and acted on as necessary. (2.36)
- 5.37** Pregnant detainees should be proactively supported by staff to cope with the emotional as well as physical aspects of their pregnancy. (2.41)

Complaints

- 5.38** Complaints should be investigated by staff of appropriate seniority and responses should be in the language in which they were submitted. (2.54)

Health services

- 5.39** The needs of the centre population should be analysed by an up-to-date health needs assessment. (2.64)
- 5.40** Health services staff should receive training in the recognition of signs of alleged acts of trauma or torture. (2.71)
- 5.41** Hospital appointments for detainees should not be cancelled because of poor transport arrangements. (2.72)

Services

- 5.42** The electronic menu ordering system should be in a variety of languages. (2.91)

Activities

- 5.43** The centre should extend the time during which female detainees can use central facilities and associate freely within their residential units. (3.9)
- 5.44** There should be more paid work and more higher-level education to meet the needs of longer-stay and more able detainees. (3.14, repeated recommendation HE46)
- 5.45** The centre should provide up-to-date computer-based learning resources which detainees can use independently. (3.15)

- 5.46** There should be effective monitoring of the quality of education. Monitoring and analysis of attendance at education classes and fitness activity should be thorough. (3.16)
- 5.47** The number of paid work roles, and the hours detainees can work should increase. More interesting and challenging work roles should be added. (3.20)
- 5.48** Internet facilities should be available in the library. (3.25)
- 5.49** Trends and patterns in book borrowing should be monitored to inform the planning of library stock. (3.26)
- 5.50** Suitable facilities for outdoor sports and games should be provided. (3.33)
- 5.51** The centre should develop and promote fitness activity for older detainees. (3.34)

Welfare

- 5.52** Links with a broader range of relevant external organisations should be developed. (4.5)

Visits

- 5.53** Substantial food should be available for purchase by visitors. (4.17, repeated recommendation 9.14)

Communications

- 5.54** The shop should sell mobile telephones. (4.24)

Removal and release

- 5.55** Planning for removal or release should start as soon as detainees arrive in the centre and include an early structured needs assessment. (4.32)
- 5.56** A sufficiently resourced welfare service should be available seven days a week and offer appointments to all detainees, including those due for release, before discharge. The welfare officer should work closely with Hibiscus to ensure that all needs have been met. (4.33)

Housekeeping points

Early days in detention

- 5.57** Detainees should not be unnecessarily locked into holding rooms in reception. (1.21)
- 5.58** Detainees should be provided with photocopies of important documents that are retained by reception staff. (1.22)
- 5.59** Detainees should receive written information during induction about the support available in the centre for detainees with protected characteristics and those experiencing domestic violence. (1.23)
- 5.60** Detainees should not be asked to sign documents until it is clear that they understand the contents. (1.24)

- 5.61** Detainees should be given assistance to move heavy bags from reception to their units. (1.25)

Bullying and violence reduction

- 5.62** The recent move to a more flexible and individualised approach to reducing intimidatory behaviour should be articulated in a clear and accurate policy document. (1.31)

Self-harm and suicide prevention

- 5.63** Managers should complete, record and follow up assessment, care in detention and teamwork (ACDT) checks, giving attention to care maps and to multidisciplinary attendance at reviews, as well as other quality issues. (1.42)
- 5.64** Home Office staff should attend, or supply written information to, ACDT case reviews where immigration is a trigger. (1.43, repeated recommendation 4.18)

The use of force and single separation

- 5.65** The sharp edges in the cells on Kingfisher should be made safe. (1.79)

Legal rights

- 5.66** Notices in the centre relating to legal advice should be updated regularly. (1.89)
- 5.67** Visiting lawyers should be taken quickly from the gate to the legal visits corridor. (1.90)
- 5.68** Lawyers should be able to attend fast-track interviews without undue bureaucratic procedures. (1.91)

Casework

- 5.69** Monthly reviews should be served on time. (1.105)

Residential units

- 5.70** Curtains should be of adequate material to keep rooms dark, and be properly attached to window frames. (2.9)
- 5.71** Detainees should be made aware that they can request a replacement mattress if necessary. (2.10)
- 5.72** Showers should be maintained regularly. (2.11)

Equality and diversity

- 5.73** Personal emergency evacuation plans should be updated in a timely fashion to reflect a change of circumstances. (2.37)
- 5.74** Pregnant detainees should have access to appropriate maternity clothing, be given maximum flexibility regarding mealtimes and food preferences, and have the opportunity to access appropriate relaxation and exercise provision. (2.42)

Complaints

- 5.75** Complaint boxes should be secure. (2.55)
- 5.76** Information about the Prisons and Probation Ombudsman (PPO) should be displayed in a range of languages around the centre. Leaflets promoting the PPO in the detainee's language should be included with complaint replies. (2.56)

Health services

- 5.77** The health care manager should monitor and investigate any reports of dismissive or rude behaviour by the health services team. (2.65)
- 5.78** The health care room in reception should be secured by a health care suite key. (2.66)
- 5.79** The SystmOne electronic record should be installed, to improve the consistency and continuity of care for detainees. (2.67)
- 5.80** Regular chaperoning of patients should be reviewed and consent obtained when required. (2.73)
- 5.81** The in-possession policy should be followed, with the assumption that medication is provided in-possession, and risk assessments should be carried out as frequently as necessary. (2.77)

Activities

- 5.82** The lighting in the main library should be improved. (3.27)

Welfare

- 5.83** More detailed analysis of the under-representation of specific nationalities and groups seeking help with welfare issues should be undertaken by the welfare officer. (4.6)

Removal and release

- 5.84** Multidisciplinary care plans should be agreed at the daily individual needs meeting to manage the removal of high-risk detainees, and be evidenced in detainee files to ensure that all relevant staff are aware of them. (4.34)
- 5.85** The service provided by Hibiscus should be promoted during induction. (4.35)
- 5.86** Group forums for detainees leaving on charter flights should continue to be developed. (4.36)

Examples of good practice

Bullying and violence reduction

- 5.87** The daily multidisciplinary 'individual needs' meeting enabled the prompt sharing of key information about changes in risk, while the longer weekly meeting looked in detail at vulnerable detainees. (1.32)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector
Hindpal Singh Bhui	Team leader
Bev Alden	Inspector
Martin Kettle	Inspector
Gordon Riach	Inspector
Colin Carroll	Inspector
Sarah Cutler	Inspector
Deri Hughes-Roberts	Inspector
Mick Bowen	Health services inspector
Ian Craig	CQC inspector
Sue Melvin	Pharmacy inspector
Alistair Pearson	Ofsted inspector
Helen Ranns	Researcher
Amy Radford	Researcher
Hayley Cripps	Researcher

Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy establishment. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided.

Safety

Detainees are held in safety and with due regard to the insecurity of their position.

At the last inspection, in 2011, detainee feedback on escorts was generally positive but there was routine use of handcuffs for outside appointments undertaken by the main escort contractor. The reception area was comfortable and welcoming. Security was generally proportionate. Use of force had increased but management of incidents was generally good. Few people were separated but some detainees had spent too long in temporary confinement. Detainees at risk of suicide and self-harm were well cared for. There was little evidence of bullying and most detainees reported feeling safe. Most detainees had legal representatives but legal advice surgeries were oversubscribed and unable to meet the demand. Detainees had insufficient face-to-face contact with the onsite UK Border Agency team. A large number of Rule 35 reports were completed but they did not contain enough information to provide the intended safeguards. We had some concerns about casework in relation to pregnant women. Outcomes for detainees were reasonably good against this healthy establishment test.

Main recommendations

Rule 35 reports should provide objective professional assessments – for example, commenting on the consistency between injuries and alleged methods of torture. Case owner replies should carefully address all relevant factors in reviewing ongoing detention. (HE44)

Not achieved (recommendation repeated, S38)

Pregnant detainees should not normally be detained. In exceptional circumstances, continued detention should be considered in line with the UK Border Agency's (UKBA) published policy on the detention of pregnant women. (HE45)

Not achieved (recommendation repeated as a main recommendation, S37)

Recommendations

Detainees arriving from police stations should be accompanied by police records and relevant risk information. (1.7)

Partially achieved (recommendation repeated, 1.8)

Detainees should not be subjected to exhausting overnight journeys. (1.8)

Not achieved (recommendation repeated, 1.6)

Handcuffs should be used only on the basis of individual risk assessment. (1.9)

Achieved

Telephone interpreting should be used for reception and induction interviews whenever there is doubt about a detainee's understanding of English. (1.18)

Partially achieved

In liaison with the Legal Services Commission, the centre should ensure that detainees do not have to wait more than a week to access the detention advice surgery. (3.10)

Not achieved (recommendation repeated, 1.85).

A list of lawyers who are willing and able to represent detainees in the centre should be freely available. This list should be regularly checked and updated. Notices in the centre relating to legal advice should be updated regularly. (3.11)

Partially achieved

The library should hold up-to-date country of origin information reports and legal textbooks. (3.12)

Not achieved (recommendation repeated, 1.86)

Detainees should be able to print documents of reasonable length, and the rules about printing should allow flexibility. (3.13)

Achieved

The UK Border Agency (UKBA) should keep easily accessible records of detainees' accumulated length of detention across the estate. (3.25)

Achieved

UKBA staff should be visible and accessible to detainees. (3.26)

Not achieved

Detained family members should be held together, unless clear documented risk factors suggest otherwise. (3.27)

Achieved

Monthly reviews should be served on time. UKBA managers should be able easily to monitor outstanding monthly reviews. (3.28)

Partially achieved

Safer detention meetings should be attended by representatives from all relevant departments in the centre, including UKBA, reception and security. (4.7)

Partially achieved

Safer custody data should be monitored over 12-month periods, to determine long-term trends, and compared with the same period in previous years, to establish seasonal trends. (4.16)

Achieved

Assessment, care in detention and teamwork (ACDT) documents should be opened when detainees express current thoughts of suicide or self-harm. (4.17)

Achieved

UKBA should attend, or supply written information to, ACDT case reviews where immigration is a trigger. (4.18)

Partially achieved (recommendation repeated as a housekeeping point, 1.42)

Post-closure care should be consistent and managed efficiently by staff. (4.19)

Achieved

Detainees should be able to make calls to the Samaritans in private and the service should be well advertised. (4.20)

Achieved

A local age dispute policy should be introduced. (4.26)

Not achieved

All age dispute cases should be assessed by social services. (4.27)

Not achieved (recommendation repeated, 1.54)

Both members of staff present at a rub-down search of a woman should be female. (7.7)

Not achieved

Managers should analyse in detail the reasons for an increase in use of force and take remedial action. (7.16)

Achieved

Communication during use of force should be calm and respectful, as well as appropriately assertive, and training should emphasise this. (7.17)

Partially achieved

The care suite should be the first choice for separation when the risk of harm to persons or property is low. (7.18)

No longer relevant

Temporary confinement under Rule 42 should be used only when a detainee is violent or refractory on arrival on Kingfisher unit, and only for as long as this behaviour continues. (7.19)

Achieved

Respect

Detainees are treated with respect for their human dignity and the circumstances of their detention.

At the last inspection, in 2011, residential areas were clean and rooms were comfortable. Staff–detainee relationships were good. Diverse groups of detainees lived together in harmony and there were good attempts to increase communication with non-English speakers. Some aspects of diversity work, particularly with those with disabilities and older detainees, were underdeveloped. Faith provision was good. Complaint responses and management were excellent. Food was reasonable and the cultural kitchens were valued by detainees. The health care unit provided a reasonably good service but there was little proactive engagement with detainees. Outcomes for detainees were good against this healthy establishment test.

Recommendations

All detainees should have mattresses that provide adequate support. (2.9)

Not achieved

Temperature in bedrooms should be kept at a comfortable level at all times. (2.10)

Achieved

Information around the centre should be available in a range of appropriate languages. (2.11)

Achieved

A review should be undertaken to ascertain how better to engage detainees and ensure good attendance at consultation meetings. (2.12)

Achieved

There should be a considerably higher proportion of female staff. (2.22)

Not achieved (recommendation repeated, 2.21)

Detainees should have a named officer to provide consistent support. (2.23)

Not achieved (recommendation repeated, 2.22)

Older detainees and those with disabilities should be identified and offered coordinated services as necessary by staff with relevant training and knowledge. (4.37)

Partially achieved

Complaints should be replied to promptly, in the language in which they have been submitted. (7.25)

Partially achieved

There should be ongoing proactive engagement with detainees over their health needs and concerns about access to services. (5.6)

Achieved

The use of space in the health care suite should be reviewed to determine its best use so that it can provide a full range of services. (5.7)

Achieved

Managers should ensure that patient records are easily accessible when they are required. (5.15)

Achieved

There should be a full range of well-advertised nurse-led clinics, and health services information should be available across the IRC in a variety of languages. (5.21)

Achieved

A pharmacist should be available for counselling sessions, pharmacist-led clinics, clinical audit and a medication review. (5.26)

Achieved

Suitably labelled pre-packs should be provided, and no more medication should be supplied than is prescribed. (5.27)

Partially achieved

Patient group directions (PGDs) should be produced, to enable the supply of more potent medicines by the nursing/pharmacy staff where appropriate. A copy of the original signed PGDs should be present in the pharmacy and read and signed by all relevant staff. (5.28)

Achieved

The use of paracetamol, codeine and amitriptyline should be reviewed. A step-wise approach to pain management, such as the World Health Organization analgesic ladder, should be modified for the IRC environment and used to reduce opiate usage. (5.29)

Achieved

There should be robust primary mental health care services for detainees and regularly held mental health clinics. (5.41)

Achieved

All staff should receive mental health awareness training. (5.42)

Achieved

The 71 pence per day allowance given to detainees should be reviewed. (8.10)

Achieved

Activities

The centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees.

At the last inspection, in 2011, more detainees than at the time of the previous inspection said that there was enough to fill their time. There were regular, well-planned and well-attended activities. There were more paid work places but hours and pay were limited. The range of education classes was narrow. The libraries provided a useful service overall. PE provision had improved. Outcomes for detainees were reasonably good against this healthy establishment test.

Main recommendations

There should be more paid work and more higher-level education to meet the needs of longer-stay and more able detainees. (HE46)

Not achieved (recommendation repeated, 3.14)

Recommendations

Detainees' cooperation or failure to cooperate with UKBA should not affect the process of allocating paid work roles. (6.12)

Not achieved (recommendation repeated, 3.21)

The range of activities available for male detainees should be reviewed and more done to encourage them into suitable activities. (6.13)

Partially achieved

The range and quality of the book stock in the family unit library should be improved. (6.14)

Achieved

Links with the health care unit should be developed, to refer detainees for remedial gym. (6.20)

Partially achieved

Gym sessions specifically for older detainees should be introduced. (6.21)

Partially achieved

Resettlement

Detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their country of origin and be prepared for their release transfer or removal. Detainees are able to retain or recover their property.

At the last inspection, in 2011, the welfare officer provided good practical help for detainees and unit staff also provided some useful support. However, there was little systematic pre-release assessment or help. Visits provision was good and there was an active visitors group. There was good access to telephones, faxes and the internet. Outcomes for detainees were reasonably good against this healthy establishment test.

Main recommendations

There should be a proactive, coordinated and strategically managed approach to removal and release, beginning with a needs assessment on the day that the detainee arrives. (HE47)

Partially achieved

Recommendations

The welfare service should be advertised clearly in a range of relevant languages and cover should be provided at weekends. (9.5)

Achieved

Substantial food should be available for purchase by visitors. (9.14)

Not achieved (recommendation repeated, 4.17)

All visits should start on time. (9.15)

Achieved

Information in the visits hall, including questionnaires, should be available in a range of languages. (9.16)

Achieved

Managers should consult detainees and visitors to find out why family days are so poorly attended and take remedial action as appropriate. (9.17)

No longer relevant

The centre should have a written policy on the use of biometric data and this should be accurately reflected in information displayed in reception and on the contractor and UKBA websites. Visitors' biometric data should be destroyed once the visited detainee has left the centre, or at the request of the visitor. (9.18)

Achieved

Detainees without suitable telephones should be lent a mobile telephone without a hire charge. (9.25)

Achieved

Detainees should have access to outgoing telephones that accept budget national and international telephone cards, which should be available to buy. (9.26)

Achieved

The welfare officer should see all detainees who have been issued with removal directions to offer assistance. (9.33)

Not achieved

Multidisciplinary care plans should be agreed at the daily high-risk strategy meeting to manage the removal of high-risk detainees, and be evidenced in detainee files. (9.34)

Partially achieved

Appendix III: Detainee population profile

Please note: the following figures were supplied by the establishment and any errors are the establishment's own.

Age	No. of men	No. of women	No. of children	%
Under 1 year				
1 to 6 years				
7 to 11 years				
12 to 16 years				
16 to 17 years				
18 years to 21 years	1	10		3
22 years to 29 years	11	97		34
30 years to 39 years	19	87		34
40 years to 49 years	10	43		17
50 years to 59 years	2	26		9
60 years to 69 years	0	8		3
70 or over	0	1		0.3
Total				100

Nationality Please add further categories if necessary	No. of men	No. of women	No. of children	%
Afghanistan	2	0		0.6
Albania	1	11		3
Algeria	0	0		0
Angola	0	1		0.3
Bangladesh	1	7		3
Belarus	0	0		0
Canadian	0	0		0
Cameroon	0	4		1
China	2	25		9
Colombia	0	0		0
Congo (Brazzaville)	0	0		0
Congo Democratic Republic (Zaire)	0	2		0.6
Dutch	0	0		0
Egyptian	0	0		0
Ecuador	0	0		0
Estonia	0	0		0
French	0	0		0
Gambian	2	15		5
Georgia	1	1		0.6
Ghana	1	12		4
Guinean	0	0		0
India	10	40		16
Iran	7	6		4
Iraq	0	0		0
Ivory Coast	0	0		0
Jamaica	0	14		4
Jordan	0	0		0

Kenya	0	3	1
Kosovo	0	0	0
Latvia	0	0	0
Liberia	0	0	0
Libyan	0	0	0
Lithuania	0	0	0
Malawian	0	4	1
Malian	0	0	0
Mauritanian	0	0	0
Malaysia	0	2	0.6
Moroccan	0	0	0
Nepalese	0	4	1
Nigeria	0	34	11
Pakistan	3	24	9
Palestinian	0	0	0
Polish	0	0	0
Portuguese	0	0	0
Romanian	0	0	0
Russia	0	0	0
Saudi Arabian	0	0	0
Sierra Leone	0	3	1
Somali	0	0	0
Sri Lanka	1	5	2
Trinidad and Tobago	0	0	0
Turkey	0	2	0.6
Ukraine	0	2	0.6
Vietnam	1	5	2
Yugoslavia (FRY)	0	0	0
Zambia	0	0	0
Zimbabwe	0	2	0.6
Brazil	1	3	1
Botswana	0	1	0.3
Chad	0	1	0.3
Eritrea	2	7	3
Ethiopia	1	1	0.6
Germany	0	1	0.3
Kuwait	1	0	0.3
Mauritius	0	2	0.6
Mongolia	0	1	0.3
Namibia	0	1	0.3
New Zealand	0	1	0.3
Philippines	0	4	1
Rwanda	0	1	0.3
Saint Lucia	0	1	0.3
South Africa	0	2	0.6
Sudan	3	2	2
Swaziland	0	1	0.3
Syria	2	0	0.6
Tanzania	1	2	1
Thailand	0	2	0.6
United States America	0	1	0.3
Uzbekistan	0	1	0.3

Yemen	0	1		0.3
Unknown	0	1		0.3
Total				100

Religion/belief Please add further categories if necessary	No. of men	No. of women	No. of children	%
Buddhist	1	18		6
Roman Catholic	0	13		4
Christian	7	114		38
Orthodox	0	0		0
Other Christian religion	0	5		2
Hindu	5	23		9
Muslim	21	65		27
Sikh	4	15		6
Agnostic/atheist	4	17		7
Unknown	0	1		0.3
Other (please specify)	1	1		0.6
Total				100

Length of time in detention in this centre	No. of men	No. of women	No. of children	%
Less than 1 week	23	62		27
1 to 2 weeks	4	53		18
2 to 4 weeks	4	46		16
1 to 2 months	8	58		21
2 to 4 months	4	26		10
4 to 6 months	0	12		4
6 to 8 months	0	4		1
8 to 10 months	0	5		2
More than 10 months (please note the longest length of time)	0	6		2
Total				100

Detainees' last location before detention in this centre	No. of men	No. of women	No. of children	%
Community				
Another IRC	8	50		18
A short-term holding facility (e.g. at a port or reporting centre)	16	136		48
Police station	19	76		30
Prison	0	10		3
Total				100

Appendix IV: Summary of detainee survey responses

Detainee survey methodology

A voluntary, confidential and anonymous survey of the detainee population was carried out for this inspection. The results of this survey formed part of the evidence-base for the inspection.

Sampling

The questionnaire was offered to all detainees.

Distributing and collecting questionnaires

Every attempt was made to distribute the questionnaires to respondents individually. This gave researchers an opportunity to explain the purpose of the survey and to answer respondents' questions. We also stressed the voluntary nature of the survey and provided assurances about confidentiality and the independence of the Inspectorate. This information is also provided in writing on the front cover of the questionnaire.

Our questionnaire is available in a number of different languages and via a telephone translation service for respondents who do not read English. Respondents with literacy difficulties were offered the option of an interview.

Respondents were not asked to put their names on their questionnaire. In order to ensure confidentiality, respondents were asked to seal their completed questionnaire in the envelope provided and either hand it back to a member of the research team at a specified time or leave it in their room for collection.

Refusals were noted and no attempts were made to replace them.

Survey response

At the time of the survey on 17 June 2013, the detainee population at Yarl's Wood IRC was 309. Using the method described above, questionnaires were offered to all detainees.

We received a total of 203 completed questionnaires, a response rate of 66%. This included five questionnaires completed via interview. Thirty-nine respondents refused to complete a questionnaire, 42 questionnaires were not returned and 25 were returned blank.

Of the 203 completed questionnaires 127 (63%) were returned in English, 14 (7%) in Chinese and Punjabi, 13 (6%) in Urdu, nine (4%) in Hindi, six (3%) in Albanian and Farsi, four (2%) in Vietnamese, three (1%) in Portuguese, two (1%) in Turkish and one each in Arabic, Bengali, French, Pashtu and Russian.

Presentation of survey results and analyses

Over the following pages we present the survey results for Yarl's Wood IRC.

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

Filtered questions are clearly indented and preceded by an explanation of how the filter has been applied. Percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the entire sample. All missing responses have been excluded from analyses.

Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from Yarl's Wood in 2013 compared with responses from detainees surveyed in all other detention centres. This comparator is based on all responses from detainee surveys carried out in nine detention centres since April 2009.
- The current survey responses from Yarl's Wood in 2013 compared with the responses of detainees surveyed at Yarl's Wood IRC in 2011.
- A comparison within the 2013 survey between the responses of non-English-speaking detainees with English-speaking detainees.

Survey summary

Section I: About you

Q1	Are you male or female?	
	Male	26 (13%)
	Female	173 (87%)
Q2	What is your age?	
	Under 18	2 (1%)
	18-21	12 (6%)
	22-29	67 (34%)
	30-39	70 (35%)
	40-49	32 (16%)
	50-59	14 (7%)
	60-69	3 (2%)
	70 or over	0 (0%)
Q3	What region are you from? (Please tick only one)	
	Africa	59 (30%)
	North America	1 (1%)
	South America	6 (3%)
	Indian subcontinent (India, Pakistan, Bangladesh, Sri Lanka)	62 (31%)
	China	18 (9%)
	Other Asia	21 (11%)
	Caribbean	8 (4%)
	Europe	17 (9%)
	Middle East	5 (3%)
Q4	Do you understand spoken English?	
	Yes	148 (74%)
	No	53 (26%)
Q5	Do you understand written English?	
	Yes	132 (68%)
	No	61 (32%)
Q6	What would you classify, if any, as your religious group?	
	None	16 (8%)
	Church of England	13 (7%)
	Catholic	24 (12%)
	Protestant	6 (3%)
	Other Christian denomination	38 (20%)
	Buddhist	8 (4%)
	Hindu	12 (6%)
	Jewish	3 (2%)
	Muslim	61 (31%)
	Sikh	13 (7%)
Q7	Do you have a disability?	
	Yes	17 (9%)
	No	162 (91%)

Section 2: Immigration detention

Q8	When being detained, were you told the reasons why in a language you could understand?	
	Yes	156 (82%)
	No	34 (18%)
Q9	Including this centre, how many places have you been held in as an immigration detainee since being detained (including police stations, airport detention rooms, removal centres, and prison following end of sentence)?	
	One to two	152 (82%)
	Three to five	31 (17%)
	Six or more	2 (1%)
Q10	How long have you been detained in this centre?	
	Less than 1 week	51 (26%)
	More than 1 week less than 1 month	65 (33%)
	More than 1 month less than 3 months	56 (28%)
	More than 3 months less than 6 months	14 (7%)
	More than 6 months less than 9 months	7 (4%)
	More than 9 months less than 12 months	3 (2%)
	More than 12 months	3 (2%)

Section 3: Transfers and escorts

Q11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	
	Yes	91 (46%)
	No	76 (39%)
	Do not remember	29 (15%)
Q12	How long did you spend in the escort vehicle to get to this centre on your most recent journey?	
	Less than one hour	5 (3%)
	One to two hours	53 (27%)
	Two to four hours	90 (45%)
	More than four hours	37 (19%)
	Do not remember	13 (7%)
Q13	How did you feel you were treated by the escort staff?	
	Very well	47 (24%)
	Well	79 (41%)
	Neither	38 (20%)
	Badly	17 (9%)
	Very badly	5 (3%)
	Do not remember	8 (4%)

Section 4: Reception and first night

Q15	Were you seen by a member of healthcare staff in reception?	
	Yes	185 (92%)
	No	6 (3%)
	Do not remember	10 (5%)

Q16	When you were searched in reception, was this carried out in a sensitive way?	
	Yes	147 (77%)
	No	27 (14%)
	Do not remember/ Not applicable	18 (9%)
Q17	Overall, how well did you feel you were treated by staff in reception?	
	Very well	48 (25%)
	Well	85 (44%)
	Neither	45 (23%)
	Badly	9 (5%)
	Very badly	3 (2%)
	Do not remember	4 (2%)
Q18	On your day of arrival did you receive information about what was going to happen to you?	
	Yes	85 (43%)
	No	84 (43%)
	Do not remember	27 (14%)
Q19	On your day of arrival did you receive information about what support was available to you in this centre?	
	Yes	105 (54%)
	No	63 (33%)
	Do not remember	25 (13%)
Q20	Was any of this information given to you in a translated form?	
	Do not need translated material	72 (42%)
	Yes	47 (27%)
	No	54 (31%)
Q21	On your day of arrival did you get the opportunity to change into clean clothing?	
	Yes	148 (77%)
	No	39 (20%)
	Do not remember	5 (3%)
Q22	Did you feel safe on your first night here?	
	Yes	116 (59%)
	No	66 (34%)
	Do not remember	13 (7%)
Q23	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)	
	Not had any problems	69 (39%)
	Loss of property	8 (4%)
	Contacting family	20 (11%)
	Access to legal advice	26 (15%)
	Feeling depressed or suicidal	70 (39%)
	Health problems	39 (22%)
Q24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	
	Not had any problems	69 (41%)
	Yes	44 (26%)
	No	55 (33%)

Section 5: Legal rights and immigration

Q26	Do you have a lawyer?	
	<i>Do not need one</i>	6 (3%)
	Yes	143 (74%)
	No	44 (23%)
Q27	Do you get free legal advice?	
	<i>Do not need legal advice</i>	12 (6%)
	Yes	92 (50%)
	No	81 (44%)
Q28	Can you contact your lawyer easily?	
	Yes	96 (53%)
	No	35 (19%)
	<i>Do not know/ Not applicable</i>	51 (28%)
Q29	Have you had a visit from your lawyer?	
	Do not have one	50 (27%)
	Yes	56 (30%)
	No	81 (43%)
Q30	Can you get legal books in the library?	
	Yes	118 (62%)
	No	22 (12%)
	<i>Do not know/ Not applicable</i>	49 (26%)
Q31	How easy or difficult is it for you to obtain bail information?	
	<i>Very easy</i>	16 (9%)
	<i>Easy</i>	43 (23%)
	<i>Neither</i>	30 (16%)
	<i>Difficult</i>	35 (19%)
	<i>Very difficult</i>	38 (20%)
	<i>Not applicable</i>	24 (13%)
Q32	Can you get access to official information reports on your country?	
	Yes	33 (19%)
	No	81 (46%)
	<i>Do not know/ Not applicable</i>	64 (36%)
Q33	How easy or difficult is it to see the centre's immigration staff when you want?	
	<i>Do not know/ have not tried</i>	63 (34%)
	<i>Very easy</i>	15 (8%)
	<i>Easy</i>	26 (14%)
	<i>Neither</i>	20 (11%)
	<i>Difficult</i>	35 (19%)
	<i>Very difficult</i>	25 (14%)

Section 6: Respectful detention

Q35	Can you clean your clothes easily?	
	Yes	167 (87%)
	No	24 (13%)

Q36	Are you normally able to have a shower every day?	
	Yes	184 (95%)
	No	10 (5%)
Q37	Is it normally quiet enough for you to be able to relax or sleep in your room at night time?	
	Yes	139 (74%)
	No	49 (26%)
Q38	Can you normally get access to your property held by staff at the centre if you need to?	
	Yes	91 (49%)
	No	46 (25%)
	Do not know	50 (27%)
Q39	What is the food like here?	
	Very good	9 (5%)
	Good	56 (29%)
	Neither	56 (29%)
	Bad	42 (22%)
	Very bad	29 (15%)
Q40	Does the shop sell a wide enough range of goods to meet your needs?	
	Have not bought anything yet	19 (10%)
	Yes	101 (53%)
	No	70 (37%)
Q41	Do you feel that your religious beliefs are respected?	
	Yes	151 (80%)
	No	14 (7%)
	Not applicable	24 (13%)
Q42	Are you able to speak to a religious leader of your faith in private if you want to?	
	Yes	97 (50%)
	No	29 (15%)
	Do not know/ Not applicable	67 (35%)
Q43	How easy or difficult is it to get a complaint form?	
	Very easy	38 (20%)
	Easy	59 (31%)
	Neither	11 (6%)
	Difficult	6 (3%)
	Very difficult	10 (5%)
	Do not know	66 (35%)
Q44	Have you made a complaint since you have been at this centre?	
	Yes	25 (13%)
	No	153 (80%)
	Do not know how to	14 (7%)
Q45	If yes, do you feel complaints are sorted out fairly?	
	Yes	3 (2%)
	No	19 (10%)
	Not made a complaint	167 (88%)

Section 7: Staff

Q47	Do you have a member of staff at the centre that you can turn to for help if you have a problem?	
	Yes	122 (67%)
	No	59 (33%)
Q48	Do most staff at the centre treat you with respect?	
	Yes	157 (84%)
	No	30 (16%)
Q49	Have any members of staff physically restrained you (C and R) in the last six months?	
	Yes	10 (6%)
	No	162 (94%)
Q50	Have you spent a night in the separation/isolation unit in the last six months?	
	Yes	10 (6%)
	No	164 (94%)

Section 8: Safety

Q52	Do you feel unsafe in this centre?	
	Yes	54 (29%)
	No	132 (71%)
Q53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	
	Yes	24 (13%)
	No	164 (87%) <i>If No, go to question 55</i>
Q54	If you have felt victimised by a detainee/group of detainees, what did the incident(s) involve? (Please tick all that apply to you.)	
	<i>Physical abuse (being hit, kicked or assaulted)</i>	4 (2%)
	<i>Because of your nationality</i>	6 (3%)
	<i>Having your property taken</i>	2 (1%)
	<i>Drugs</i>	1 (1%)
	<i>Because you have a disability</i>	0 (0%)
	<i>Because of your religion/religious beliefs</i>	1 (1%)
Q55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	
	Yes	15 (8%)
	No	165 (92%) <i>If No, go to question 57</i>
Q56	If you have felt victimised by a member of staff/group of staff, what did the incident(s) involve? (Please tick all that apply to you.)	
	<i>Physical abuse (being hit, kicked or assaulted)</i>	3 (2%)
	<i>Because of your nationality</i>	8 (4%)
	<i>Drugs</i>	2 (1%)
	<i>Because you have a disability</i>	2 (1%)
	<i>Because of your religion/religious beliefs</i>	1 (1%)
Q57	If you have been victimised by detainees or staff, did you report it?	
	Yes	6 (3%)
	No	19 (11%)
	<i>Not been victimised</i>	155 (86%)

Q58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	
	Yes	16 (9%)
	No	161 (91%)

Q59	Have you ever felt threatened or intimidated by a member of staff in here?	
	Yes	18 (10%)
	No	159 (90%)

Section 9: Healthcare

Q61	Is health information available in your own language?	
	Yes	72 (39%)
	No	54 (30%)
	Do not know	57 (31%)

Q62	Is a qualified interpreter available if you need one during healthcare assessments?	
	Do not need an interpreter/ Do not know	94 (54%)
	Yes	49 (28%)
	No	31 (18%)

Q63	Are you currently taking medication?	
	Yes	97 (52%)
	No	91 (48%)

Q64	What do you think of the overall quality of the healthcare here?	
	Have not been to healthcare	12 (7%)
	Very good	22 (12%)
	Good	63 (34%)
	Neither	51 (28%)
	Bad	17 (9%)
	Very bad	18 (10%)

Section 10: Activities

Q66	Are you doing any education here?	
	Yes	28 (15%)
	No	155 (85%)

Q67	Is the education helpful?	
	Not doing any education	155 (87%)
	Yes	23 (13%)
	No	1 (1%)

Q68	Can you work here if you want to?	
	Do not want to work	49 (28%)
	Yes	92 (53%)
	No	34 (19%)

Q69	Is there enough to do here to fill your time?	
	Yes	105 (59%)
	No	72 (41%)

Q70	How easy or difficult is it to go to the library?	
	Do not know/ Do not want to go	7 (4%)
	Very easy	95 (51%)

<i>Easy</i>	64 (35%)
<i>Neither</i>	12 (6%)
<i>Difficult</i>	3 (2%)
<i>Very difficult</i>	4 (2%)

Q71 How easy or difficult is it to go to the gym?

<i>Do not know/ Do not want to go</i>	39 (22%)
<i>Very easy</i>	65 (36%)
<i>Easy</i>	50 (28%)
<i>Neither</i>	17 (9%)
<i>Difficult</i>	6 (3%)
<i>Very difficult</i>	4 (2%)

Section 11: Keeping in touch with family and friends**Q73 How easy or difficult is it to use the phone?**

<i>Do not know/ Have not tried</i>	14 (8%)
<i>Very easy</i>	51 (28%)
<i>Easy</i>	77 (43%)
<i>Neither</i>	18 (10%)
<i>Difficult</i>	11 (6%)
<i>Very difficult</i>	8 (4%)

Q74 Have you had any problems with sending or receiving mail?

<i>Yes</i>	24 (13%)
<i>No</i>	87 (48%)
<i>Do not know</i>	72 (39%)

Q75 Have you had a visit since you have been here from your family or friends?

<i>Yes</i>	95 (51%)
<i>No</i>	92 (49%)

Q76 How did staff in the visits area treat you?

<i>Not had any visits</i>	66 (36%)
<i>Very well</i>	41 (23%)
<i>Well</i>	47 (26%)
<i>Neither</i>	21 (12%)
<i>Badly</i>	3 (2%)
<i>Very Badly</i>	4 (2%)

Section 12: Resettlement**Q78 Do you feel that any member of staff has helped you to prepare for your release?**

<i>Yes</i>	19 (12%)
<i>No</i>	136 (88%)



Detainee survey responses: Yarl's Wood IRC 2013

Detainee survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

Any percentage highlighted in green is significantly better		Yarl's Wood 2013	IRC comparator	Yarl's Wood 2013	Yarl's Wood 2011
Any percentage highlighted in blue is significantly worse					
Any percentage highlighted in orange shows a significant difference in detainees' background details					
Percentages which are not highlighted show there is no significant difference					
Number of completed questionnaires returned		203	1198	203	155
SECTION 1: General information					
1	Are you male?	13%	99%	13%	12%
2	Are you aged under 21 years?	7%	11%	7%	10%
4	Do you understand spoken English?	74%	74%	74%	73%
5	Do you understand written English?	68%	67%	68%	66%
6	Are you Muslim?	32%	50%	32%	22%
7	Do you have a disability?	10%	15%	10%	13%
SECTION 2: Immigration detention					
8	When being detained, were you told the reasons why in a language you could understand?	82%	71%	82%	73%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	1%	8%	1%	2%
10	Have you been detained in this centre for more than one month?	42%	58%	42%	55%
SECTION 3: Transfers and escorts					
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	46%	37%	46%	34%
12	Did you spend more than four hours in the escort van to get to this centre?	19%	26%	19%	19%
13	Were you treated well/very well by the escort staff?	65%	57%	65%	53%
SECTION 4: Reception and first night					
15	Were you seen by a member of health care staff in reception?	92%	84%	92%	92%
16	When you were searched in reception was this carried out in a sensitive way?	77%	65%	77%	70%
17	Were you treated well/very well by staff in reception?	69%	59%	69%	67%
18	Did you receive information about what was going to happen to you on your day of arrival?	43%	32%	43%	32%
19	Did you receive information about what support was available to you in this centre on your day of arrival?	54%	39%	54%	46%
For those who required information in a translated form:					
20	Was any of this information provided in a translated form?	46%	28%	46%	25%
21	Did you get the opportunity to change into clean clothing on your day of arrival?	77%	59%	77%	71%
22	Did you feel safe on your first night here?	60%	51%	60%	54%
23a	Did you have any problems when you first arrived?	61%	70%	61%	72%
23b	Did you have any problems with loss of transferred property when you first arrived?	4%	14%	4%	9%
23c	Did you have any problems contacting family when you first arrived?	11%	17%	11%	20%
SECTION 4: Reception and first night continued					
23d	Did you have any problems accessing legal advice when you first arrived?	15%	19%	15%	20%
23e	Did you have any problems with feeling depressed or suicidal when you first arrived?	39%	33%	39%	38%
23f	Did you have any health problems when you first arrived?	22%	28%	22%	29%
For those who had problems on arrival:					
24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	44%	34%	44%	43%

Key to tables

		Yarl's Wood 2013	IRC comparator	Yarl's Wood 2013	Yarl's Wood 2011
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 5: Legal rights and immigration					
26	Do you have a lawyer?	74%	66%	74%	77%
For those who have a lawyer:					
28	Can you contact your lawyer easily?	73%	70%	73%	83%
29	Have you had a visit from your lawyer?	41%	52%	41%	43%
27	Do you get free legal advice?	50%	43%	50%	32%
30	Can you get legal books in the library?	62%	41%	62%	52%
31	Is it easy/very easy for you to obtain bail information?	32%	32%	32%	26%
32	Can you get access to official information reports on your country?	19%	21%	19%	17%
33	Is it easy/very easy to see this centre's immigration staff when you want?	22%	24%	22%	27%
SECTION 6: Respectful detention					
35	Can you clean your clothes easily?	88%	79%	88%	87%
36	Are you normally able to have a shower every day?	95%	92%	95%	94%
37	Is it normally quiet enough for you to be able to sleep in your room at night?	74%	60%	74%	65%
38	Can you normally get access to your property held by staff at the centre, if you need to?	49%	51%	49%	56%
39	Is the food good/very good?	34%	25%	34%	34%
40	Does the shop sell a wide enough range of goods to meet your needs?	53%	42%	53%	38%
41	Do you feel that your religious beliefs are respected?	80%	71%	80%	83%
42	Are you able to speak to a religious leader of your own faith if you want to?	50%	52%	50%	62%
43	Is it easy/very easy to get a complaint form?	51%	51%	51%	54%
44	Have you made a complaint since you have been at this centre?	13%	27%	13%	29%
For those who have made a complaint:					
45	Do you feel complaints are sorted out fairly?	15%	24%	15%	18%
SECTION 7: Staff					
47	Do you have a member of staff you can turn to for help if you have a problem?	67%	62%	67%	68%
48	Do most staff treat you with respect?	84%	73%	84%	84%
49	Have any members of staff physically restrained you in the last six months?	6%	14%	6%	12%
50	Have you spent a night in the segregation unit in the last six months?	6%	16%	6%	10%
SECTION 8: Safety					
52	Do you feel unsafe in this centre?	29%	39%	29%	36%
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	13%	28%	13%	12%
54a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	2%	6%	2%	1%
54b	Have you been victimised because of your nationality since you have been here? (By detainees)	3%	9%	3%	4%

Key to tables

		Yarl's Wood 2013	IRC comparator	Yarl's Wood 2013	Yarl's Wood 2011
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
54c	Have you ever had your property taken since you have been here? (By detainees)	1%	6%	1%	1%
54d	Have you been victimised because of drugs since you have been here? (By detainees)	1%	3%	1%	0%
54e	Have you ever been victimised here because you have a disability? (By detainees)	0%	2%	0%	3%
54f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	1%	6%	1%	0%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	8%	21%	8%	13%
56a	Have you been hit, kicked or assaulted since you have been here? (By staff)	2%	4%	2%	3%
56b	Have you been victimised because of your nationality since you have been here? (By staff)	4%	8%	4%	6%
56c	Have you been victimised because of drugs since you have been here? (By staff)	1%	2%	1%	0%
56d	Have you ever been victimised here because you have a disability? (By staff)	1%	2%	1%	3%
56e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	1%	4%	1%	1%
For those who have been victimised by detainees or staff:					
57	Did you report it?	24%	47%	24%	46%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	9%	19%	9%	9%
59	Have you ever felt threatened or intimidated by a member of staff in here?	10%	15%	10%	15%
SECTION 9: Health services					
61	Is health information available in your own language?	39%	36%	39%	36%
62	Is a qualified interpreter available if you need one during health care assessments?	28%	18%	28%	17%
63	Are you currently taking medication?	52%	42%	52%	52%
For those who have been to health care:					
64	Do you think the overall quality of health care in this centre is good/very good?	50%	41%	50%	40%
SECTION 10: Activities					
66	Are you doing any education here?	15%	24%	15%	15%
For those doing education here:					
67	Is the education helpful?	95%	86%	95%	91%
68	Can you work here if you want to?	53%	54%	53%	54%
69	Is there enough to do here to fill your time?	60%	45%	60%	57%
70	Is it easy/very easy to go to the library?	86%	68%	86%	84%
71	Is it easy/very easy to go to the gym?	64%	68%	64%	74%
SECTION 11: Keeping in touch with family and friends					
73	Is it easy/very easy to use the phone?	71%	64%	71%	70%
74	Have you had any problems with sending or receiving mail?	13%	26%	13%	13%
75	Have you had a visit since you have been in here from your family or friends?	51%	47%	51%	54%
For those who have had visits:					
76	Do you feel you are treated well/very well by staff in the visits area?	76%	70%	76%	79%
SECTION 12: Resettlement					
78	Has any member of staff helped you to prepare for your release?	12%	18%	12%	



Key questions (non-English speakers) Yarl's Wood IRC 2013

Detainee survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

		Non-English speakers	English speakers
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		53	148
8	When being detained, were you told the reasons why in a language you could understand?	74%	86%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	3%	1%
10	Have you been in this centre for more than one month?	50%	39%
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	37%	50%
13	Were you treated well/very well by the escort staff?	65%	65%
17	Were you treated well/very well by staff in reception?	70%	68%
18	Did you receive information about what was going to happen to you on your day of arrival?	43%	43%
19	Did you receive information about what support was available to you on your day of arrival?	63%	52%
22	Did you feel safe on your first night here?	81%	52%
23	Did you have any problems when you first arrived?	49%	65%
26	Do you have a lawyer?	70%	75%
33	Is it easy/very easy to see the centre's immigration staff when you want?	20%	23%
35	Can you clean your clothes easily?	89%	86%
36	Are you normally able to have a shower every day?	92%	96%
43	Is it easy/very easy to get a complaint form?	55%	51%

Key to tables

		Non-English speakers	English speakers
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
44	Have you made a complaint since you have been at this centre?	7%	15%
47	Do you have a member of staff you can turn to for help if you have a problem?	65%	69%
48	Do most staff treat you with respect?	89%	82%
52	Do you feel unsafe in this centre?	27%	30%
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	12%	13%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	15%	6%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	7%	10%
59	Have you ever felt threatened or intimidated by a member of staff in here?	8%	12%
61	Is health information available in your own language?	39%	39%
62	Is a qualified interpreter available if you need one during health care assessments?	64%	16%
66	Are you doing any education here?	19%	14%
68	Can you work here if you want to?	45%	55%
69	Is there enough to do here to fill your time?	61%	59%
70	Is it easy/very easy to go to the library?	87%	87%
71	Is it easy/very easy to go to the gym?	59%	65%
73	Is it easy/very easy to use the phone?	79%	70%
74	Have you had any problems with sending or receiving mail?	9%	15%
75	Have you had a visit since you have been in here from your family or friends?	41%	54%
78	Has any member of staff helped you to prepare for your release?	11%	12%