

Report on an unannounced inspection of the
short-term holding facilities at

Dover Seaport, Frontier House and Longport Freight Shed

by HM Chief Inspector of Prisons

15–16 August 2016

Glossary of terms

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Contents

Fact page	4
Introduction	5
About this inspection and report	7
Summary	8
Section 1. Dover Seaport: Safety	10
Respect	15
Preparation for removal and release	18
Section 2. Frontier House	19
Section 3. Longport Freight Shed	20
Section 4. Summary of recommendations and good practice	21
Section 5. Appendices	23
Appendix I: Inspection team	23
Appendix II: Progress on recommendations from the last report	24
Appendix III: Photographs	27

Fact page

Task of the establishment

To hold newly arrived clandestine migrants (male, female and families).

Location

The main facility is at Dover Seaport. Frontier House and Longport Freight Shed are in Folkestone.

Name of contractor

Tascor

Last inspection

7 September, 1–2 and 5–6 October 2015.

Escort provider

Tascor

Introduction

The immigration office at Dover Seaport, known as the Kent Intake Unit, was staffed by officers from the UK Visas and Immigration (UKVI) department. Management of the holding room was contracted out to Tascor.

During 2015, Dover Seaport had experienced some major challenges. We had first inspected the facility in February 2015, but before publication of that report it became apparent that the situation had changed significantly as a result of higher numbers of migrants arriving from France. We therefore carried out a further scoping inspection on 7 September 2015 to establish the nature and extent of these changes. During this visit we learned that a new 'non-detained' area had been created at Dover, and an overflow detention facility, Frontier House, had opened in Folkestone. Inspectors returned to inspect Dover Seaport and Frontier House in early October 2015 to examine these detention facilities in more detail. During this inspection, it became apparent that people were also being detained at a third site in Folkestone, Longport Freight Shed, where many of those going to Dover or Frontier House had first arrived. We also inspected this area in 2015.

The purpose of all these facilities was to detain clandestine migrants attempting to gain entry into the UK without being detected; they were hidden in vehicles on the ferry to Dover or in the Channel Tunnel, or on freight trains arriving in Folkestone. In June 2015, there had been a sudden and substantial increase in the number of such migrants coming through the Channel Tunnel in particular. This was in line with the general increase in migration to Europe from countries experiencing upheaval, including Eritrea, Sudan and Syria. Migrants arriving through the Channel Tunnel and detected there were all first detained in Longport Freight Shed before they were moved to the holding room in Dover or the Frontier House overflow facility. In addition, some detainees were picked up by the police on nearby motorways as they disembarked from freight vehicles, and a small number were detected on vehicles at the port of Dover itself. Many of the detainees who entered the UK in this way had previously been living in makeshift camps in Calais.

It was clear that the high number of people arriving from France had led to a strain on the infrastructure and placed considerable pressure on Tascor and Home Office staff.

As a result of these challenges, we returned to inspect the facilities at all three sites in August 2016 and this report details our findings. Our inspection was predominantly of the holding room at Dover Seaport as Frontier House – Dover's overflow facility – had not been used in almost a year. However, we decided to visit the holding room at Frontier House as it had not been formally decommissioned, and there were plans to use it for a short period as the Dover Seaport holding room was due to be closed temporarily for refurbishment in late 2016. As no detainees had been held there for an extended period, we did not undertake a full inspection of the facility, and so include only a brief summary of this holding room environment in this report. We were pleased to find that the Longport Freight Shed was no longer used.

These operational changes reflected a significant decrease in the number of clandestine migrants seeking entry into the UK, via the Channel Tunnel in particular. However, given the potential for migrant numbers to increase again, UKVI had made some appropriate contingency plans for any recurrence of the challenges faced in 2015. These included increased staffing, both in UKVI and Tascor holding room staff, and a daily on-site health care presence. In addition, the holding room at Dover Seaport was due to be refurbished to enlarge it and incorporate additional amenities, including a family room with separate access routes and toilets, and a prayer room.

We welcomed the development of a new Independent Monitoring Board which was in place and visiting Dover Seaport regularly.

The number of detainees passing through the Dover Seaport holding room had decreased significantly since 2015 to 967 in the three months to 31 July 2016, compared with 2,781 in the corresponding period before our previous inspection. The average length of detention had also reduced and was 12 hours and 38 minutes, although the longest single period of detention was too long at 39 hours and 40 minutes.

A total of 126 unaccompanied children had been detained in the facility in the previous three months, which although high was less than the 370 detained at our previous inspection; 37 accompanied children had been detained in the same period. The average length of detention was around four and a half hours for unaccompanied children, and around nine and a half hours for accompanied children, although some were detained for much longer periods, including very young children.

During our inspection, 13 detainees were held in the facility, made up of two families and two single male detainees.

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 carry a summary of the conditions and treatment of detainees, based on the four tests of a healthy prison that were first introduced in this inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. The tests have been modified to fit the inspection of short-term holding facilities, both residential and non-residential. The tests for short-term holding facilities 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 detention¹

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.

Inspectors kept fully in mind that although these were custodial facilities, detainees were not held because they had been charged with a criminal offence and had not been detained through normal judicial processes.

¹ Non-residential STHFs are unsuitable for long stays and detainees should not be held in them for more than a few hours. This limits what activities can or need to be provided. We will therefore report any notable issues concerning activities in the accommodation and facilities section.

Summary

- S1 At our inspection of Dover Seaport in 2015 we made 17 recommendations, one of which were achieved, nine were partially achieved, and seven were not achieved. At our inspection of Frontier House in 2015 we made three recommendations, one of which was not achieved and two could not be inspected. At our inspection of Longport Freight Shed in 2015 we made one recommendation, which was achieved.
- S2 At Dover Seaport, escort vans were clean and well equipped. Handcuffs were rarely used. Induction interviews did not focus sufficiently on the welfare needs of detainees and took place in front of other detainees. There was good use of telephone interpreting services to conduct the interviews. Not all elements of induction were thorough enough.
- S3 Staff were aware of the potential for bullying and harassment. Far fewer detainees were held at the Dover Seaport than at our last inspection, and staffing levels were appropriate. Vulnerable detainees could not always be held separately and there was evidence that some of them were held for too long. There were few self-harm incidents, and force was rarely used.
- S4 Since the last inspection, UK Visas and Immigration (UKVI) had appointed a safeguarding lead. Tascor had introduced a safeguarding adults policy but it focused on the Care Act 2014, which did not apply in the immigration estate, rather than on broader safeguarding concerns. Care plans were not used for detainees with special safeguarding or care needs. Nonetheless, Tascor staff showed much better awareness than we usually see of trafficking indicators and referral mechanisms. There had been only around six national referral mechanism (NRM)² referrals in the previous six months, which was very low.
- S5 There had been a significant reduction in the high number of children who passed through the facility at our last inspection. The facilities for holding children were inadequate. UKVI did not always meet its target to refer children to children's services within 90 minutes of their detention. Children were released into the care of the Refugee Council who were available 24 hours a day, which was good practice. Staff had undertaken appropriate safeguarding children training. Some detainees were assessed by a chief immigration officer (CIO) as being significantly older than 18, rather than undergoing a 'Merton'-compliant age assessment – the standard social services assessment.
- S6 There had been a significant reduction in the number of detainees held at the facility. IS91Rs (reasons for detention) were issued in English only. We observed an immigration screening interview with a detainee that was conducted well.
- S7 The Civil Legal Advice helpline was advertised in the holding room, but detainees did not have ready access to a telephone or fax machine. Immediately after their release, detainees met a representative from Migrant Help who helped them apply for asylum support and offered other basic advice.
- S8 The holding facility was one large room with natural light and a smaller designated family room. The facility had undergone some basic maintenance and redecoration since the last inspection but detainees still could not go outside to exercise and the environment was not conducive to well-being, particularly for detainees spending longer periods there. Catering arrangements were reasonable.

² Put in place in the UK in April 2009 to identify, protect and support victims of trafficking.

- S9 Staffing levels had been increased since the last inspection. All staff we spoke to demonstrated a professional and caring attitude towards detainees. Complaints forms were freely available and the complaints box was regularly emptied. Staff had undertaken mandatory equality and diversity training, although it was not tailored to working with refugees and asylum-seeking detainees. Health care staff was now on site every day.
- S10 Detainees were not permitted access to the internet, email or Skype to contact friends, family or legal representatives, which was an unnecessary restriction. Immediately after release detainees were moved to the Atrium, a 'non-detained' area. This reduced the time spent in the holding room for some detainees, and specialist support was available.

Frontier House

- S11 Frontier House, an overflow facility for Dover, had not been used in almost a year. However, we decided to visit the holding room as it had not been formally decommissioned, and there were plans to use it for a short period while the Dover holding room was temporarily closed for refurbishment in late 2016. As no detainees had been held there for an extended period, we did not undertake a full inspection of the facility.
- S12 The accommodation at Frontier House was only suitable for very short stays and comprised a single large holding room for 46 detainees. There was no family room and nowhere for detainees to sleep. There was no shower in the holding room; this was a major problem as detainees held there could have been living rough in insanitary conditions in French camps before arriving in the UK. Unlike at our previous inspection, the water fountain and the telephone in the holding room were working. Detainees had no access to the internet, email or Skype.

Longport Freight Shed

- S13 Longport Freight Shed, a temporary facility and not fit for purpose, inspected during our last visit, was no longer in use.

Section 1. Dover Seaport

Safety

Arrival

Expected outcomes:

Detainees under escort are treated safely, decently and efficiently. Detainees taken into detention are treated with respect, have the correct documentation, and are held in safe and decent conditions. Family accommodation is suitable.

- I.1 Some detainees were brought to Dover Seaport by the police after being found on the back of lorries at motorway service stations or other locations, but the majority detected at the port were transported to the facility by two designated Tascor detainee custody officers (DCOs). The escort vans we saw were clean and well equipped. Female DCOs said that they would always accompany female detainees. DCOs told us that they rarely used handcuffs. Detainees arrested by the police often arrived handcuffed and DCOs said these were removed promptly on arrival. Detention staff had completed training in HOMES, the Home Office manual for escorting safely (a restraint package developed specifically for transferring non-compliant immigration detainees).
- I.2 We saw less evidence of late transfers to other places of detention than at the previous inspection, possibly due (in part) to the recent closure of the nearby Dover Immigration Removal Centre (IRC), where a significant number of detainees were previously accommodated overnight.
- I.3 On arrival, detainees were seated, several at a time, in an induction room. Searching took place in a designated cubicle out of sight of others; we did not observe any children being searched, but were told that this was done with a hand-held wand, avoiding the need for physical contact. Induction interviews were based on a helpful checklist but did not focus sufficiently on the welfare needs of detainees. They also took place in front of other detainees, which was inappropriate. However, there was very good use of professional telephone interpreting services to conduct the interviews (see paragraph I.41).
- I.4 Not all elements of the induction checklist were covered thoroughly enough. For example, during the interviews we observed, while detainees were advised of the payphone in the holding room they were not offered a free telephone call or told they could borrow a mobile phone to use with their SIM card.
- I.5 There were stocks of spare clothing and underwear in various sizes for men, women and children, as well as towels and hygiene packs.

Recommendations

- I.6 **Induction interviews should be conducted in private, focus on the welfare of detainees and incorporate all elements of the induction checklist.**
- I.7 **Detainees should be offered a free telephone call on arrival.**

Keeping detainees safe

Expected outcomes:

Detainees feel and are safe from bullying and victimisation. The facility provides a safe and secure environment which reduces the risk of self-harm and suicide. The centre promotes the welfare of all detainees, particularly adults at risk, and protects them from all kinds of harm and neglect.³ Force is only used as a last resort and for legitimate reasons.

- 1.8** Staff were aware of the potential for bullying and harassment, although none could recall recent training in this or in suicide and self-harm prevention. There were far fewer detainees held at the facility than at our last inspection, and staffing was now at a level to provide adequate support and supervision for the number held. We were told vulnerable detainees, such as lone women, were offered accommodation in the family room if it was not in use (see also paragraph 1.13).
- 1.9** There were few self-harm incidents. Staff could recall only one self-harm incident since the last inspection, which required hospital treatment for what transpired to be a relatively superficial wound. Staff were familiar with Tascor procedures for caring for people for whom there were concerns, which included opening a suicide and self-harm warning form that specified the level of supervision for the detainee. We were told that few such forms had needed to be used in the previous six months. All DCOs carried an anti-ligature knife.
- 1.10** Since the last inspection, UK Visa and Immigration (UKVI) had appointed a safeguarding lead who was making appropriate contacts with local social services, developing local safeguarding processes and monitoring safeguarding issues. Tascor had introduced a safeguarding adults policy but it focused on the Care Act 2014, which was not applicable in the immigration estate, rather than on broader safeguarding concerns that might arise in a detention setting, and contained provisions not relevant to a short-term holding facility. Staff were yet to be trained in the policy and were unfamiliar with its content. Care plans were not used for detainees with special safeguarding or care needs.
- 1.11** Tascor staff had received training in people trafficking and showed much better awareness than we usually see in trafficking indicators and referral mechanisms. The training had given them a general understanding of how they might identify vulnerability, which would help them identify other safeguarding needs. UKVI staff told us that DCOs were more likely to report concerns to them since the training. This, and the reduced number of detainees normally in their care, gave us greater confidence that safeguarding needs were identified. Despite this, there had only been around six national referral mechanism (NRM)⁴ referrals in the previous six months, which was low given the nature of the facility.
- 1.12** We were told that vulnerable adults could be accommodated in the family room if this was not in use, but the facility, inevitably, would not always be available and was, in any event, inadequate for this purpose (see Safeguarding Children). There was some evidence that adults at risk were detained for too long. In one case, a woman who was 8½ months pregnant and a suspected victim of trafficking was held for nearly seven hours before she was granted temporary admission.
- 1.13** Force was rarely used; most detainees had little incentive to be non-compliant as they had just arrived in the country and had claimed asylum. In the previous three months, force had

³ 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).

⁴ Put in place in the UK in April 2009 to identify, protect and support victims of trafficking.

not been used at all; the last time it had been used was in December 2015, over six months before the inspection. Documentation was completed thoroughly and the force used was proportionate. All staff had up-to-date training on the use of force, including de-escalation techniques.

Recommendation

- I.14 Staff should be trained in safeguarding adults at risk, including the Home Office’s adults at risk policy, and should use care plans for all adult detainees at risk.**

Safeguarding children

Expected outcomes:

The facility promotes the welfare of children and protects them from all kinds of harm and neglect.

- I.15** There had been a significant reduction in the high number of children passing through the facility. In the previous three months, 126 unaccompanied children had been detained in the facility which, although high, was less than the 370 detained in a similar period at our previous inspection; 37 accompanied children had been detained in the same period.
- I.16** The average age of unaccompanied children was 15. The average length of detention for unaccompanied children was four hours and 34 minutes, although 11 were detained for longer than 12 hours and the longest single period of detention of an unaccompanied child was 20 hours and 10 minutes, which was too long. (See recommendation I.33.)
- I.17** The average length of detention of accompanied children was nine hours 34 minutes and the longest detention was for 18 hours and 20 minutes. The average age of accompanied children was seven; it was inappropriate that children of this age should be detained for so long. (See recommendation I.33.)
- I.18** The facilities for holding children were inadequate. The family room was too small, with seating for six people and no space for detainees to sleep. The room could not always accommodate all the children detained, which meant that some were held with unrelated adults in the main holding room. Even if they were held in the family room, children had to share toilets with detainees held in the main holding room, which could not be locked. The carpet in the family room was grubby and the walls required decoration.
- I.19** After arrival, unaccompanied children had a welfare interview, which included questions to identify if they might have been trafficked. UKVI did not always meet its target to refer children to Kent Children’s Services within 90 minutes of their arrival; in May 2016, referral took an average of two hours 29 minutes, although in the two subsequent months this had reduced to about an hour.
- I.20** Children were released into the care of the Refugee Council while they were waiting for Kent Children’s Services to pick them up, which reduced the time they would otherwise be detained. Refugee Council staff were available 24 hours a day, which was good practice, and their facilities included a well-equipped play area and a sleeping area. Kent Children’s Services collected minors in and out of office hours; logs showed that the average time children spent waiting to be collected had increased from about an hour in June 2016 to two hours and 47 minutes in the following month.

- I.21** All the DCOs we spoke to had undertaken Barnardo’s safeguarding children training, and they prepared care plans for all children. All relevant immigration staff had completed levels 1, 2 and 3 of the Home Office’s ‘Keeping Children Safe’ training.
- I.22** Logs showed that about one-third of detainees claiming to be children were assessed as being an adult by a chief immigration officer (CIO) rather than being referred to Kent Children’s Services for a Merton compliant assessment – the standard social services-conducted assessment. Despite the number of CIO assessments, they were not subject to any quality control, although their incidence was now monitored.

Recommendations

- I.23** **Suitable separate facilities should be provided for receiving children, including those with families, and vulnerable adults. Unaccompanied children should never be held with unrelated adults.** (Repeated recommendation 2.19)
- I.24** **All detainees claiming to be children should undergo a Merton-compliant age assessment by social services.** (Repeated recommendation 2.20)

Good practice

- I.25** *Refugee Council staff were available 24 hours a day and cared for unaccompanied children while they were waiting to be collected by Kent Children’s Services, which reduced the time they would otherwise be detained.*

Legal rights and casework

Expected outcomes:

Detainees are fully aware of and understand their detention. Detainees are supported by the facility staff to exercise their legal rights freely. Detention is carried out on the basis of individual reasons that are clearly communicated. Detention is for the minimum period necessary.

- I.26** The total number of detainees held at the facility during the three months to 31 July 2016 was 967,⁵ a significant reduction from the 2,781 in the corresponding period before our previous inspection. Almost 90% were male and the average age was 25.⁶ Detainees originated from 23 countries, the most common being Iraq (18%), Afghanistan (18%), Iran (15%), Sudan (13%) and Syria (10%).⁷
- I.27** The average length of detention had reduced from 18 hours 18 minutes at the previous inspection to 12 hours and 38 minutes,⁸ but remained too long.
- I.28** The longest single period of detention was 39 hours and 40 minutes, although we were told that in this case the detainee had complex needs and substantial work was required to find

⁵ Individual detainees in the dataset were identified using a port reference number (PRN). For the 975 detention events recorded between 2 May and 30 July 2016, details of the PRN were available in 975 cases.

⁶ Ages ranged from under a year to 75 years, with a median age 24 (N=963). Details of age were not available for four cases.

⁷ N=967.

⁸ The median time for the detention events logged was 11 hours 35 minutes (N=974). One case was deleted from the analysis as a result of the recorded departure time preceding the arrival time.

appropriate accommodation. We were able to analyse all but one of the 967 detainee cases (requisite data was missing in one case); the proportion held for over 12 hours during a single period of detention was 48% and the proportion held for over 24 hours during a single period of detention was 11%. Around one per cent of the 967 detainees were held at the facility more than once, resulting in 975 detention events, and the average cumulative length of detention for this 1% was 12 hours and 16 minutes.⁹ Conditions in the holding room were inappropriate for these prolonged periods of detention.

- I.29** Despite these statistics, as at the last inspection, we were told that it took about three hours to process each new detainee. This included welfare checks, fingerprinting and screening interviews. The process was carried out 24 hours a day. As a safeguard, Tascor staff were required to inform the chief immigration officer of any adult detainee held for over 12 hours and any child for over three hours. While good in principle, these periods were too long to ensure that detention was kept to a minimum time.
- I.30** IS91R (authority to detain) notifications were issued in English only, although immigration staff explained the contents through an interpreter if required. We observed an immigration screening interview with a detainee that was conducted well; the immigration officer took time to repeat questions and ensure the detainee fully understood what was being asked and discussed.
- I.31** The Civil Legal Advice helpline was advertised in the holding room in a range of languages, but detainees were not routinely offered a free telephone call when they arrived (see paragraph I.4 and recommendation I.7). We were told that staff could fax documents for detainees, although they could not recall ever doing this and it was unclear how detainees would be aware this facility was available. Detainees could not access email. Immediately after release, detainees met a representative from Migrant Help who helped them apply for asylum support and offered other basic advice. Migrant Help was due to launch a scheme to book legal interviews for immigrants requiring advice – rather than wait until they arrived in the area to which they were dispersed to, or at an immigration removal centre (IRC), before instructing solicitors. Migrant Help advised detainees how to contact them to do this.

Recommendations

- I.32 Detainees should be given written reasons for detention (IS91R) promptly in a language they can understand, and should have ready access to a telephone and a fax machine to contact or send documentation to legal representatives.**
- I.33 All detainees, including children, should be held in the facility for the minimum period possible.**

⁹ Ranging from three hours five minutes to 38 hours 50 minutes, with a median length of five hours 25 minutes detention (N=8).

Respect

Accommodation and facilities

Expected outcomes:

Detainees are held in a safe, clean and decent environment. Detainees are offered varied meals to meet their individual requirements. Food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations. The facility encourages activities to preserve and promote the mental and physical well-being of detainees.

- I.34** The holding room was designated to hold 58 detainees, although it was not big enough for that number and would have been very cramped if full. It consisted of one large room with natural light and a smaller designated family room. The main room had rows of fixed metal seating, and three tables with attached seating, which would not be sufficient for detainees to eat at when the facility was busy. The recliners we saw at our previous inspection had been replaced with beanbags, which were clean but not an adequate alternative to proper sleeping facilities (see photograph, Appendix III). Blankets and pillows were provided, and a water fountain was available.
- I.35** The holding room was due to be closed temporarily at the end of 2016 for significant redesign and refurbishment. It had undergone some basic maintenance and redecoration since the last inspection but there was still some evidence of water damage to the ceiling due to an ongoing leak (see photograph, Appendix III). There were separate men's and women's toilets and one shared shower, which was smelly due to poor ventilation. The shower was well used but was kept locked; staff gave conflicting accounts of the reason – some said detainees had to wait until they had been interviewed by immigration staff before they were permitted to shower and others said it was so that they could keep track of who was going into the shower room. The toilets were clean but had no seats or lids and could not be locked. There was a working payphone that received incoming calls, although it had no privacy hood.
- I.36** There were sufficient activities to occupy detainees held for short periods only. These included books, magazines and newspapers, although these were mainly in English. There was a television and DVDs in both holding rooms, and the family room also had books and toys for children. Detainees could not go outside to exercise. The environment in the holding rooms was not conducive to well-being, particularly for the significant proportion of detainees who spent longer than 12 hours there.
- I.37** Catering arrangements were reasonable. Detainees were offered drinks, hot microwave meals and sandwiches, although the ready meals were unappealing and not suitable for those held for prolonged periods. Fruit and snacks were now readily available in the holding room, but hot drinks still had to be requested from staff as the vending machine remained in their office. Baby food was available and staff said they would buy more as needed.

Recommendations

- I.38 The holding rooms should be suitable for the designated number of detainees, who should have ready access to showers, lockable toilets and hot drinks.**

- I.39 The holding rooms should have appropriate foreign language reading material, and those held for longer periods should have access to fresh air.** (Repeated recommendation 2.40)

Respectful treatment

Expected outcomes:

Detainees are treated with respect by all staff, with proper regard for the uncertainty of their situation and their cultural backgrounds. Effective complaints procedures are in place for detainees which are easy to access and use, in a language they can understand. Responses are timely and can be understood by detainees. There is understanding of the diverse backgrounds of detainees and different cultural backgrounds. The distinct needs of each protected characteristic, including race equality, nationality, religion, disability, gender, transgender, sexual orientation, age and pregnancy, are recognised and addressed.

- I.40** Staffing levels had been increased since the last inspection to four DCOs in the holding room and two DCOs designated to collect detainees from the port after detection. All staff we spoke to demonstrated a professional and caring attitude towards detainees.
- I.41** Complaints forms and pens were freely available in the holding rooms in a range of languages. A chief immigration officer visited the holding room daily and emptied the complaints box; we submitted a complaint form that received a quick response the following day. No complaints had been received by Tascor in the previous 12 months.
- I.42** Staff had undertaken mandatory equality and diversity e-learning although it was not tailored to working with asylum-seeking detainees; staff felt that such training would be helpful. The holding rooms held holy books and prayer mats, and detainees could practise their religion. DCOs were advised of fasting times and dates during Ramadan, and said they felt confident in managing detainees who chose to fast. Staff used care plans to support detainees identified as having a disability. We looked at three plans, which had each been completed to a reasonable standard; one related to a detainee with a broken foot, one a detainee with impaired hearing and the third to a detainee with severe mobility issues. DCOs had used professional telephone interpreting services 431 times in the previous three months, primarily during induction. However, the actual number of detainees using this service was higher than this figure, as we saw DCOs using one call to deliver the induction to several family members at a time.
- I.43** Health care staff were now on site from 10am until 4pm seven days a week, which was a positive development. However, they did not screen detainees routinely, which, with the current numbers passing through the facility, would have been achievable. The designated health care room did not have a telephone to facilitate interviews with a professional interpreter, although a mobile phone was used as an alternative. Custody staff were not trained to use the automated external defibrillator, and most were not sure where it was kept.

Recommendations

- I.44 DCOs should receive regular training that helps them to understand the needs of refugees and asylum-seekers.** (Repeated recommendation 2.39)
- I.45 Detainees should receive health care screening on arrival.**

I.46 Custody staff should be trained how to use the automated external defibrillator and know where it is kept.

Preparation for removal and release

Expected outcomes:

Detainees are able to maintain contact with the outside world and be prepared for their release, transfer or removal. Detainees are able to retain or recover their property. Families with children and others with specific needs are not detained without items essential to their welfare.

- I.47** Detainees were not permitted access to the internet, email or Skype to contact friends, family or legal representatives, which was an inappropriate restriction for this population.
- I.48** Detainees being transferred to an immigration removal centre (IRC) were given information cards with the IRC address and telephone number.
- I.49** Immediately after release, detainees were moved to the Atrium, a ‘non-detained area’ (a temporary waiting area outside the coverage of detention centre rules), to wait for transport to their accommodation once they had been granted temporary admission into the UK. This reduced the time spent in the holding room for some detainees. The area was large and well equipped but there was water damage to the ceiling from an ongoing leak. A Migrant Help worker was no longer based in the Atrium, but attended as and when required to help detainees complete asylum-support paperwork (see paragraph I.30). A separate area in the Atrium specifically for minors provided welcoming facilities and recreational activities for children and young people (see paragraph I.18).

Recommendation

- I.50** **Detainees should have supervised access to the internet, email and Skype facilities.** (Repeated recommendation 2.54)

Section 2. Frontier House

- 2.1** Frontier House, located in Folkestone, was available as an overflow facility when the Dover Seaport holding room was full, but had not been used for almost a year. However, we decided to visit the facility as it had not been formally decommissioned, and there were plans to use it for a short period while the Dover holding room was temporarily closed for refurbishment in late 2016.
- 2.2** The accommodation at Frontier House remained exactly the same as at our previous inspection, and was only suitable for very short stays. The facility comprised a single large holding room with hard seats for 46 detainees. There was no family room and nowhere for detainees to sleep. There were separate toilets for men and women. The toilets were fully screened but lacked seats and lids, and the doors could not be locked. The holding room had no shower.
- 2.3** There were no windows in the holding room and the atmosphere was gloomy. There were some water-damage stains on the floor, although we were told that several leaks in the roof had been repaired. Unlike at our previous inspection, the water fountain and the telephone were working. There was no access for detainees to the internet, email or Skype.

Section 3. Longport Freight Shed

- 3.1** Longport Freight Shed, which at our previous inspection we assessed as being a wholly unacceptable place of detention, was no longer in use.

Section 4. Summary of recommendations and good practice

Recommendations

To the facility contractor

Arrival

- 4.1 Induction interviews should be conducted in private, focus on the welfare of detainees and incorporate all elements of the induction checklist. (1.6)
- 4.2 Detainees should be offered a free telephone call on arrival. (1.7)

Keeping detainees safe

- 4.3 Staff should be trained in safeguarding adults at risk, including the Home Office's adults at risk policy, and should use care plans for all adult detainees at risk. (1.14)

Safeguarding children

- 4.4 Suitable separate facilities should be provided for receiving children, including those with families, and vulnerable adults. Unaccompanied children should never be held with unrelated adults. (1.23, repeated recommendation 2.19)
- 4.5 All detainees claiming to be children should undergo a Merton-compliant age assessment by social services. (1.24, repeated recommendation 2.20)

Legal rights and casework

- 4.6 Detainees should be given written reasons for detention (IS91R) promptly in a language they can understand, and should have ready access to a telephone and a fax machine to contact or send documentation to legal representatives. (1.32)
- 4.7 All detainees, including children, should be held in the facility for the minimum period possible. (1.33)

Accommodation and facilities

- 4.8 The holding rooms should be suitable for the designated number of detainees, who should have ready access to showers, lockable toilets and hot drinks. (1.38)
- 4.9 The holding rooms should have appropriate foreign language reading material, and those held for longer periods should have access to fresh air. (1.39, repeated recommendation 2.40)

Respectful treatment

- 4.10** DCOs should receive regular training that helps them to understand the needs of refugees and asylum-seekers. (1.44, repeated recommendation 2.39)
- 4.11** Detainees should receive health care screening on arrival. (1.45)
- 4.12** Custody staff should be trained how to use the automated external defibrillator and know where it is kept. (1.46)

Preparation for removal and release

- 4.13** Detainees should have supervised access to the internet, email and Skype facilities. (1.50, repeated recommendation 2.54)

Example of good practice

- 4.14** Refugee Council staff were available 24 hours a day and cared for unaccompanied children while they were waiting to be collected by Kent Children's Services, which reduced the time they would otherwise be detained. (1.25)

Section 5. Appendices

Appendix I: Inspection team

Beverley Alden
Deri Hughes-Roberts

Inspector
Inspector

Appendix II: Progress on recommendations from the last report

The following is a list of all the recommendations made in the last report, 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.

Dover Seaport

Safety

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

Recommendations

Detainees should not be transferred late at night unless there are urgent operational reasons (2.5)
Partially achieved

Detainees should be searched and interviewed in private (2.6)
Partially achieved

All new arrivals should have free access to showers and be given clean clothing if required. They should be offered an immediate free phone call and have access to a working telephone thereafter (2.7)
Partially achieved

Managers should ensure that detainee custody officers understand and implement best practices in relation to safeguarding adults, trafficking and suicide and self-harm prevention. (2.13)
Partially achieved

Children should only be detained exceptionally and for the shortest possible time. (2.18)
Partially achieved

Suitable separate facilities should be provided for receiving women and children, including those with families. Unaccompanied children should never be held with unrelated adults. (2.19)
Not achieved (recommendation repeated, 1.22)

All detainees claiming to be children should undergo a Merton compliant age assessment by social services. (2.20)
Not achieved (recommendation repeated, 1.23)

Detainees should promptly be given written reasons for detention (IS91R) in a language they can understand, and have free access to a telephone and fax machine to contact legal representatives. (2.26)
Not achieved

The Home Office and Tascor teams should be sufficiently staffed to ensure that detainee welfare can be assured and detention is kept to a minimum (2.27)
Partially achieved

Respect

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

Recommendations

All detainees should be held in decent, well ventilated and properly maintained accommodation which is suitable for their specific needs. They should have access to blankets and pillows and to hot drinks (2.37)

Partially achieved

DCOs should be able to regularly and proactively check on individual detainees' welfare, using telephone interpretation where required (2.38)

Achieved

DCOs should receive regular training that helps them to understand the needs of refugees and asylum-seekers (2.39)

Not achieved (recommendation repeated, 1.43)

The holding rooms should have appropriate foreign language reading material, and those held for longer periods should have access to fresh air (2.40)

Not achieved (recommendation repeated, 1.38)

A full review should be carried out to establish what type of service provision is required to meet the health needs of detainees. In the meantime, all detainees should receive a health screening to identify any appropriate treatment pathway and potential public health issues (2.48)

Partially achieved

Custody staff should be trained to use the external automated defibrillator, which should have regular documented checks (2.49)

Not achieved

The medical room should be fit for purpose with a desk and telephone access for interpretation services, and medication should be stored appropriately (2.50)

Partially achieved

Preparation for removal and release

Detainees are able to maintain contact with the outside world and be prepared for their release, transfer or removal.

Recommendation

Detainees should have supervised access to the internet, email and Skype facilities (2.54)

Not achieved (recommendation repeated, 1.49)

Frontier House

Recommendations

Detainees should only be handcuffed if justified by an individualised risk assessment. (3.12)

Not possible to inspect

All detainees should be held in accommodation that is fit for purpose, with access to phones, email and internet, adequate sleeping facilities and hot and cold drinks, snacks and hot meals. (3.13)

Not achieved

DCOs should be able to regularly and proactively check on individual detainees' welfare, using telephone interpretation where required. (3.14)

Not possible to inspect

Longport Freight Shed

The use of Longport Freight Shed to hold detainees should immediately cease. (1.14)

Achieved

Appendix III: Photographs

Main holding room



Water damaged ceiling



Atrium (non-detained area)



Designated children's section in atrium

