

Report on an unannounced inspection of

Yarl's Wood

Immigration Removal Centre

by HM Chief Inspector of Prisons

5–7, 12–16 June 2017

This inspection was carried out with assistance from colleagues at the General Pharmaceutical Council and in partnership with the following bodies:



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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 in our 'Guide for writing inspection reports' on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Introduction

Yarl's Wood immigration removal centre, situated near Bedford and operated by Serco, held over 300 detainees at the time of this inspection. Most were women, although there were also some adult family groups and a small number of men held in a part of the establishment designated as a residential short-term holding facility. Yarl's Wood was last inspected in April 2015. That inspection was preceded by allegations of physically and sexually abusive behaviour by staff, an undercover television programme showing instances of inappropriate staff behaviour and the announcement that Serco had itself commissioned an external enquiry focusing on staff culture at the centre.

The 2015 inspection did not find evidence of a widespread abusive or hostile culture among staff, although there were some matters of concern, and of the four areas that we inspect – safety, respect, activities and preparation for removal and release – three were judged to have declined since the previous inspection in 2013. The 2015 inspection was highly critical and the report stated that 'Yarl's Wood is failing to meet the needs of the most vulnerable women.'

This inspection found that there had been significant improvements at the centre, and on this occasion assessments in three of our inspection areas were higher than in 2015. The most noticeable change, in broad terms, was that whereas in 2015 there had been large numbers of detainees showing evident signs of distress, on this occasion the atmosphere across the centre was far calmer, respectful and relaxed. This could in part be ascribed to a number of initiatives that had been introduced to improve communication and support, including a post room, where women could collect and send faxes, regular immigration surgeries and the good work of both Kaleidoscope in mental health and Hibiscus in resettlement.

There was little violence. The small number of allegations of inappropriate sexual behaviour by staff had been thoroughly investigated. One had been substantiated since the last inspection, leading to the officer in question being dismissed, with a police investigation ongoing. In terms of perception of safety, nearly half of the detainees said they felt unsafe, and on further enquiry it transpired that this was largely an expression of concern as a result of uncertainty about the future and the prospect of removal from the UK.

Delays and uncertainty in the outcome of immigration casework were still a cause of frustration and anxiety for detainees, some of whom had been held for too long. The quality of Rule 35 reports had improved, but not by enough, and we were concerned by the continued detention of women who had been tortured. The effectiveness of the adults at risk policy, which is intended to reduce the detention of vulnerable people, was questionable given that almost a fifth of those in detention were assessed by the Home Office to be at the higher levels of risk.

During the course of the inspection it was discovered that a doctor who had been employed at the centre since November 2016 was not in possession of the required registration. This was a serious matter and required a thorough investigation as to how this was allowed to happen. Although the health care provision overall had improved since the last inspection, it was concerning to find that patients were put at risk through a lack of professional oversight of the pharmacy and some prescribing practices.

The range of activities that was made available for detainees was good. The cultural kitchens were highly valued, as was the gym, hairdressing salon and various arts and crafts. The library was reasonably well stocked (although legal texts were out of date) and the opportunities for paid work in the centre had increased.

In terms of preparation for removal from the UK or release, access to phones was good, arrangements for visits generally good, and the Hibiscus resettlement project offered valuable support, particularly in some complex cases. However, the fact remains that around 70% of the

women detained at Yarl's Wood are released back into the community. The provision of welfare support for these women was far from systematic and needed to be improved.

Despite such ongoing concerns, we were pleased to see that progress had been made since the last inspection. Significant steps had been taken to create an environment that was appropriate for an immigration removal centre. Security measures were by and large proportionate, the centre was clean and there was not the sense of restriction and confinement that one often finds in such establishments. Women were able to move freely around the centre, and the relationships between staff and detainees seemed generally positive and respectful.

It was pleasing to find that there had been a good approach to addressing the recommendations made at the last inspection, and the linkage between this and the improvements we found was self-evident. Other establishments could learn from this.

The leadership and staff could and should take much of the credit for the improvements, but it was clearly a frustration for them that the centre was not able to gain higher assessments in some areas of this inspection because of failings that were outside their control. For instance, weaknesses in immigration casework and health care provision, which had a significant negative impact on the experiences of detainees, were the responsibility of the Home Office and the commissioned health care provider respectively. If I had invested the energy and commitment to making improvements at Yarl's Wood that the current management team clearly have, I too would be frustrated.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

August 2017

Fact page

Task of the establishment

To detain men and women subject to immigration control

Location

Bedfordshire

Name of contractor

Serco

Number held

314

Certified normal accommodation

410

Operational capacity

410

Last inspection

April-May 2015

Brief history

Yarl's Wood immigration removal centre holds adult women and adult family groups. In addition, it has a small short-term holding facility for adult males who have arrived in the UK as clandestine migrants on freight lorries.

Short description of residential units

There are five residential units: three for single females, Crane (induction), Avocet and Dove; one family unit, Hummingbird; and one single male short-term holding facility, Bunting

Health service commissioner and providers

NHS England (East)

G4S Medical Services

Kaleidoscope Plus Group

Learning and skills providers

Serco

Escort provider

Tascor

Name of centre manager

Steve Hewer

Independent Monitoring Board chair

Bali Chand

About this inspection and report

- A1 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.
- A2 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.
- A3 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. |
- A4 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 Home Office.
- **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.
- A5 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.
- A6 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.
- A7 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
 - **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.
- A8 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.
- A9 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A10 All inspections of immigration removal centres are conducted jointly with Ofsted or Education Scotland, the Care Quality Commission and the General Pharmaceutical Council (GPhC). This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

- A11 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 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.
- A12 Details of the inspection team and the detainee population profile can be found in Appendices I and V respectively.
- A13 Findings from the survey of detainees and a detailed description of the survey methodology can be found in Appendix VI 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 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

Summary

Safety

- S1 Many detainees continued to be transported to the centre overnight. Early days processes were reasonably good. There was little violence in the centre. A few women had alleged sexually inappropriate behaviour by staff. Allegations were investigated thoroughly. Whistle-blowing procedures were now adequate and safeguarding procedures were reasonably good. Self-harm had reduced significantly and support for those with low-level emotional needs had greatly improved. Security was more proportionate. There was little use of force or separation and the separation environment had been significantly improved. However, plans to use the unit more frequently for detainees being removed on charter flights increased the risk of inappropriate separation with fewer safeguards. Some people had been detained for long periods without sufficient progress. Rule 35 reports had improved but were still poor overall, and many responses were delayed. Some women were detained despite evidence of torture. On-site immigration staff were accessible to detainees. Outcomes for detainees against this healthy establishment test were reasonably good.*
- S2 At the last inspection in 2015, we found that outcomes for detainees in Yarl's Wood were not sufficiently good against this healthy establishment test. We made 33 recommendations in the area of safety. At this follow-up inspection we found that 13 of the recommendations had been achieved, nine had been partially achieved and 11 had not been achieved.*
- S3 Over a third of detainees arrived at the centre between 10pm and 6am, some after lengthy waits for transport. The reception environment and facilities were good, initial risk assessment was reasonably thorough and interpretation was used appropriately. Induction was thorough and informative but did not always take place quickly enough or with sufficient use of interpretation. Health care screening was good but on occasion still carried out for women by male nurses. The needs of men arriving on Bunting unit continued to be met reasonably well.
- S4 In our survey, nearly half the detainees said they felt unsafe but most cited their immigration status and concerns about removal as the cause. There was little evidence of physical violence in the centre, nor of concerns about staff. Most recorded incidents involved verbal altercations or pushing. A number of allegations of sexual misconduct by staff had been recorded. All the records that we examined showed thorough investigation. One allegation was upheld after investigation and led to the dismissal of the member of staff. In total since our previous inspection, three officers had been dismissed for professional misconduct.
- S5 The number of self-harm incidents had fallen significantly. ACDTs² were well managed and both assessments and reviews were timely. The safer detention committee collected and analysed appropriate data, but meetings were not always well attended. Support for the many detainees who had mental health and emotional support needs had improved considerably, particularly as a result of the impressive service provided by the Kaleidoscope Plus Group. We found no recent evidence of lone male staff being used for constant supervision of women at high risk of self-harm.
- S6 Adult safeguarding structures were generally good and supported by established links with the local authority. The weekly multidisciplinary individual needs meeting was valuable in

² Assessment, care in detention and teamwork case management of detainees at risk of suicide and self-harm.

identifying and monitoring support for detainees at risk. However, there was little care planning for such detainees and the record of detainees in this group was incomplete. The centre had an improved approach to whistle-blowing and staff were no longer discouraged by local policy. A new supported living facility provided a decent and comfortable environment, and had provided good support for some detainees. However, the criteria for holding detainees there were not clear. There was not enough governance of this area and a separate area adjacent to health care, both of which had been used to isolate people with infectious diseases.

- S7 Children’s safeguarding work was supported by joint meetings and shared training with the local authority. Detainees who said they were children were appropriately cared for in the centre and quickly released into the care of social services. Not all Serco staff had completed the required safeguarding children training.
- S8 The strategic approach to security was good. Security procedures were largely proportionate to the risks of the population and demonstrated a considered approach. The move to intelligence-led searching was particularly positive. The risk assessment process for escorts was robust and the few cases where handcuffs had been used were justified. There had been two documented instances of strip-searching in the previous six months. We also found instances of unreported strip-searching and in one case the strip-search appeared unnecessary.
- S9 Force had been used 26 times in the previous six months, less than before our last inspection and other centres. Documents justifying use of force were good. Video footage showed mixed practice: staff successfully de-escalated many situations by talking to detainees, but some staff lacked competence when applying control and restraint techniques. Use of force meetings were held regularly, with good attendance, but analysis of data was not robust enough.
- S10 Fewer detainees were separated than at our last inspection and at other centres. The environment of the recently refurbished separation unit was good. Records did not always justify the need for separation adequately. The exceptional circumstances to separate someone in crisis or on constant supervision were not given in separation paperwork. A draft policy proposing greater use of the separation unit for some detainees before removal confused the unit’s purpose and allowed detainees to be held there without rule 40 or 42 safeguards.
- S11 Access to legal representation was better than we usually see. Detainees had some good support from Bail for Immigration Detainees and detainees had unrestricted access to legal support websites. All the legal text books in the library were out of date.
- S12 Fewer detainees than at the last inspection were detained for very long periods, and detainees had better access to immigration staff. However, our casework sample revealed some long delays in progressing cases, including one recently released detainee who had been cumulatively detained for three years. Two-thirds of women were released after a period of detention. The quality of Rule 35 reports had improved but was still poor overall. Reports often took too long to complete, lacked detail and did not indicate sufficient attention to the symptoms of post-traumatic stress disorder. In some cases the Home Office refused without explanation to accept rape as torture.³ About a third of Rule 35

³ In September 2016, the Home Office changed the definition of torture to be used in Rule 35 considerations. This was challenged in the courts. Pending the outcome of proceedings the Court has ordered the Home Office to use a broader definition of torture – one including actions of non-state actors, which would include rape regardless of the perpetrator – while the case awaited conclusion. In its ruling in October 2017, the High Court confirmed that the broad definition of torture should be used in Rule 35 considerations.

reports in the previous six months had resulted in the release of the detainee. However, we were concerned that, in many of the cases we reviewed, detention of vulnerable detainees was maintained despite the acceptance of professional evidence of torture. There were also some unacceptable delays in Home Office responses to Rule 35 reports: in the case of the only detainee in Yarl's Wood considered to be at the highest level of risk, it took over eight weeks for a response to be issued. Fewer pregnant women were now detained, although 28 had still been held in the previous six months. They were now detained for short periods; in nearly all cases, these detentions lasted less than 48 hours.

Respect

S13 Most accommodation remained clean and in good condition, and outside spaces were welcoming. Staff-detainee relationships were good. Staffing levels were too low on occasions. There were more, but still not enough, women staff in operational roles. Equality and diversity work was underdeveloped but improving. Faith provision was very good. Complaints were managed effectively. Health care provision had improved significantly in many areas, but was undermined by ineffective medicines management and some aspects of poor governance, which had resulted in significant risks for some detainees. Detainees were more negative about food than at the previous inspection, but the cultural kitchens were well used. Outcomes for detainees against this healthy establishment test were reasonably good.

S14 At the last inspection in 2015, we found that outcomes for detainees in Yarl's Wood were not sufficiently good against this healthy establishment test. We made 38 recommendations in the area of respect. At this follow-up inspection we found that 19 of the recommendations had been achieved, 10 had been partially achieved, eight had not been achieved and one was no longer relevant.

S15 Communal areas and rooms were clean and well equipped, and outside areas were attractive and well maintained. Bunting unit was in worse condition than the rest of the centre, with rooms that needed redecoration, particularly to remove graffiti. Detainees were able to access necessary supplies easily, and the new post room, where detainees could meet, collect mail, send faxes and obtain various supplies, provided a good central source of information.

S16 Most officers had an ethos of helpfulness, and relationships between detainees and staff were positive throughout the centre. In our survey, more detainees than at our last inspection said that staff understood their problems, and 87% said that most staff were respectful. Women said that staff knocked and waited before entering their rooms and we witnessed no instances where this did not happen. Despite efforts to increase the number of women detainee custody officers, there were still not enough, particularly at manager level. Some women told us they had felt intimidated by the presence of male staff and we observed a lone male officer working in reception. Units were sometimes left with no staff presence at all, which was a potential risk. Detainee consultation was good.

S17 The strategic management of equality and diversity remained underdeveloped but was improving, and most identified outcomes were met reasonably well. Attendance at the monthly equality action team meeting was often poor and few actions to develop provision at the centre resulted from the meeting. Few discrimination incident report forms were submitted, but responses were reasonably good. There was now regular consultation with detainees with protected characteristics, as well as nationality forums. Support for detainees with identified needs was generally adequate. While staff provided appropriate support for disabled detainees with high level needs, there was little awareness of detainees with less

visible disabilities. There was developing support for gay detainees and appropriate levels of support for transgender detainees. Professional interpreting services were used reasonably well.

- S18 Support for faith observance was very good and there was now increased provision for male detainees. Faith facilities were attractive and welcoming, and all were readily accessible to detainees. As well as spiritual support, the faith team provided some good practical support for release or removal.
- S19 Fewer detainees made complaints than at our previous inspection and there was a well used and appropriately monitored process to resolve complaints informally. There was good quality assurance of the complaints process. Investigations were more thorough than we usually see and responses were comprehensive and respectful.
- S20 Only 14% of detainees in our survey said the food was good and many women we interviewed complained about the poor quality of food. The food we sampled was adequate but did not adequately reflect the cultural diversity of the population; for example, there were very few options that reflected the diets of African or Chinese women. Access to the cultural kitchens had improved and they were highly valued by the detainees. Detainees complained about the limited range of goods in the shop. There was no access to internet shopping and the popular weekly market had been discontinued.
- S21 Health care services had improved since our last inspection, with a reasonable service provided for most. Detainees' perceptions of health care were markedly better than previously. More robust clinical governance arrangements had been implemented, but some remained underdeveloped. We were very concerned to find a doctor carrying out a GP role without the required registration. The lack of professional oversight of the pharmacy and some prescribing practices also placed some patients at risk. Too many detainees experienced delays in receiving their medication, leading to unacceptable gaps in treatment. Detainees had access to an appropriate range of primary care services with acceptable waiting times. There continued to be a high level of mental health need. The range of mental health treatments had increased, and the Kaleidoscope service was particularly effective in supporting women with less severe needs. Dental provision was good. The demand for clinical substance use services was low and needs were met reasonably well.

Activities

S22 *Detainees had good freedom of movement around the centre and recreational facilities remained good. The promotion of activities was reasonably effective, although take-up of education provision remained low. Teaching and learning were good. There was a greater number and range of paid employment posts for detainees and no waiting lists. The library provided an accessible and good service. Fitness provision was good. Outcomes for detainees against this healthy establishment test were good.*

S23 *At the last inspection in 2015, we found that outcomes for detainees in Yarl's Wood were reasonably good against this healthy establishment test. We made eight recommendations in the area of activities. At this follow-up inspection we found that seven of the recommendations had been achieved and one had been partially achieved.*

S24 Women could move freely around the centre from morning to night. There was a good range of recreational and leisure activities. Men on Hummingbird and Bunting units also had reasonably good access to facilities. The busy hairdressing salon provided a much appreciated

range of treatments, and the cultural kitchens were very well used. Detainees had good access to computers and the internet. Use was carefully monitored by staff but there was no promotion of safe working practices to remind detainees about logging off computers correctly after use. A review meeting for longer-term detainees was a useful way of identifying appropriate activities for them.

- S25 Activities provision had been reviewed, with many improvements made, including shorter, focussed training sessions and the introduction of weekend activities. Most provision was recreational, and included arts and crafts, IT and music. Additional activities were frequently organised to mark cultural events and festivals, with accredited courses at weekends in first aid and food hygiene. Activities were promoted well, but take-up of education remained low. For those who attended, the quality of teaching and learning was good, and an interactive whiteboard was used well to involve all learners. Managers did not monitor or assess the quality of the activities to identify areas for improvement.
- S26 The number and range of paid employment opportunities had increased. Not all posts were filled, but waiting times for clearance were short and there were no waiting lists. The allocation to paid work was transparent, risk assessed and well managed. There was a very limited range of paid work for men in the Hummingbird unit.
- S27 The main library was stocked with a good range of books and DVDs covering most of the languages found among the population. A good range of newspapers and magazines in different languages enabled detainees to keep up to date with events. The librarian had not received training to do the job.
- S28 The large sports hall and cardiovascular suite were well used by detainees. Women had access to a regular programme of yoga, zumba and aerobics courses. Men in Bunting had a small cardiovascular suite, and men in Hummingbird had specific times each day to use the sports facilities. All users completed an appropriate induction, which included clearance by health care.

Preparation for removal and release

S29 *Welfare support was good and Hibiscus Initiatives provision had been expanded. Visits provision was good. Detainees had easy access to telephone, mail, fax and the internet, but not to social media or video-calling services. Most detainees were released but they were not given systematic support. There were improved links with third sector organisations, but there was scope to develop them further. Outcomes for detainees against this healthy establishment test were reasonably good.*

S30 *At the last inspection in 2015, we found that outcomes for detainees in Yarl's Wood were reasonably good against this healthy establishment test. We made seven recommendations in the area of preparation for removal and release. At this follow-up inspection we found that two of the recommendations had been achieved, three had been partially achieved and two had not been achieved.*

- S31 The welfare office was well used by detainees and provided helpful support with a range of common welfare needs. Capacity had helpfully been increased through the provision of a Hibiscus welfare worker. All new arrivals were offered a 'meet and greet' session, although take-up was low at the time of the inspection.
- S32 Visits provision and facilities were generally good, but there was limited play equipment for children. Visitors could bring property into the visitors' centre. Visitors could now buy a

small range of more substantial microwaveable meals, in addition to snacks from the vending machines. Yarl's Wood Befrienders provided a valued and well supported service.

- S33 Access to phones was good, mail was not routinely opened by staff and most detainees had ready access to a fax machine in the popular post room. Internet access was good, but social media and video-calling were still inappropriately prohibited.
- S34 The welfare department was proactive in offering appointments to those who had removal directions served. However, 67% of women had been released in the last six months and they had not been routinely seen. The Hibiscus Initiatives resettlement project provided some valuable support, often for complex welfare needs. Detainees were not routinely provided with the means to reach final destinations, although Hibiscus Initiatives was able to provide small sums of money to some detainees. Efforts had been made to engage with community organisations, but there was scope for better links with groups that could meet gender-specific needs. The use of involuntary reserves for charter removals was inappropriate.

Main concerns and recommendations

- S35 **Concern:** Some periods of detention were prolonged. At the time of the inspection, 15 detainees had been held for between six months and a year and one had recently been held in detention for more than three years.

Recommendation: There should be a strict time limit on the length of detention.

- S36 **Concern:** There were unacceptable delays in the Rule 35 process. The quality of reports was generally poor. They were vague, lacked detail and did not adequately address symptoms of post-traumatic stress disorder. In some cases the Home Office refused without explanation to accept rape as torture. Detention had been maintained in most cases that we looked at without addressing the exceptional circumstances for doing so. In several cases, detention was maintained despite the acceptance of professional evidence of torture.

Recommendation: Rule 35 assessments should be completed within 24 hours. Reports should provide clear, objective and detailed professional assessments, including on evidence of PTSD. Responses should be prompt. Where professional evidence of torture is accepted, the exceptional reasons leading to the decision to maintain detention should be provided, in detail. Rape should be considered a form of torture for the purpose of Rule 35.

- S37 **Concern:** Not enough women were employed in operational roles. Only 54% of detainee custody officers were women and only two of the nine detainee custody managers were women.

Recommendation: More female staff should be recruited to ensure that at least 60% of staff in direct contact with women detainees are women.

- S38 **Concern:** Medicines management was unsafe. An unregistered assistant was in charge of medicines. Some detainees experienced unacceptable gaps in treatment. A doctor who was not registered as a GP with the General Medical Council was employed at weekends.

Recommendation: Robust governance of health services should ensure safe and effective medicines management, including establishing an effective medicines management committee and checking professional credentials. Unqualified pharmacy staff should be supported and should not be given responsibility

beyond their competence. Detainees should receive their medicines in a timely manner.

S39 **Concern:** The welfare department did not routinely see all detainees who were released from the centre into the community to address needs. This was a significant omission as two-thirds of detainees were released.

Recommendation: The welfare department should see all detainees being released from the centre to address outstanding needs and signpost detainees to community support where required.

Section 1. Safety

Escort vehicles and transfers

Expected outcomes:

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

- 1.1 Too many detainees continued to arrive at the centre late at night or in the early hours of the morning. Between March and May 2017, 37% of detainees (excluding those going to Bunting short-term holding facility) arrived between 10pm and 6am. Some detainees waited for more than eight hours at police stations and short-term holding facilities (STHFs) for transport to Yarl's Wood.
- 1.2 In our survey, most (72%) detainees said that they had been treated well by escort staff. Escort teams that we observed included female staff for female detainees. Interactions between escort staff and detainees were polite. Escort vans carried water and snacks which were offered to detainees and regular welfare checks were made during journeys.

Recommendation

- 1.3 **Detainees should not be subject to long delays before transfer to Yarl's Wood. They should never be transported during the night except for urgent operational reasons.** (Repeated recommendation 1.4)

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.

- 1.4 Women and adult families arrived at a clean, well furnished reception area with four holding rooms. Each holding room had translated information about the centre. Drinks and cold food were available. Records indicated that telephone interpreting was used regularly in reception and we also saw staff acting as interpreters. An older detainee who did not speak English was helped by staff to telephone her daughter while in reception.
- 1.5 Reception staff dealt with arrivals and departures simultaneously, with departures managed in an area adjacent to reception. Both areas were organised well and in most cases the centre met its aim of arrivals spending less than three hours in reception.
- 1.6 Most reception staff were female, but during the inspection a male officer was working alone there with two female detainees. The nurse who carried out initial health screenings was also male; this was not unusual, and male nurses often carried out reception health screenings for women (see paragraph 2.55).
- 1.7 Reception interviews took place at a desk with partitions between detainees. Detainees were asked about risk and vulnerability, and whether they had children in the community, had experienced abuse or been the victim of torture. Positive responses were passed to the Home Office or health care for action. There were no private interview rooms except for health care and one of the holding rooms was used if staff wanted to talk to a detainee privately.

- I.8** Rooms were kept ready for new arrivals on Crane (women) and Hummingbird (families). Clothes and toiletries were available. Clothing was in good condition and in a range of sizes. In our survey, 79% of men, but only 41% of women, said they felt safe on their first night at the centre. We were not confident that all new arrivals understood that welfare checks would be made during their first night; there were not enough female staff (see main recommendation S37) which meant that some of these checks might be made by a male staff member. It was mentioned in written information available in reception and some staff spoke of using online translation tools, but there was no consistent procedure to inform detainees that an officer would open their door during the night.
- I.9** Induction included a tour of the centre with a paid detainee ‘greeter’ and a session with induction officers. Induction was not always timely, particularly on Hummingbird unit which did not have a ‘greeter’. Women lived on Crane until they had completed induction. The sessions that we observed were informative and engaging, including one conducted in the language spoken by four detainees. However, the group was given written induction information in English. Records showed that use of telephone interpreting was low in the induction units. Detainees were given surveys at the end of induction to inform its development, but these were only in English.
- I.10** The Bunting unit STHF had separate reception and induction arrangements. Most men spent a short time there before leaving the centre and induction focussed on how their immediate needs would be met and what would happen to them next. Rooms were kept ready for new arrivals, although there was more graffiti than elsewhere in the centre (see paragraph 2.2). An appropriate range of facilities was available.

Recommendations

- I.11 Reception should not be staffed by a lone male officer and women should be screened by female nurses in reception.**
- I.12 Night-time welfare checks should be fully explained to detainees in a language they understand, and they should be conducted by staff of the same gender.** (Repeated recommendation I.16)
- I.13 Induction should take place on the day following reception. Key information should be given to detainees in accessible, written formats.**

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.14** In our survey, just over half the detainees said they felt unsafe, but there was a wide variation between male and female detainees. Thirty-one per cent of men and 49% of women said they felt unsafe. No men said that they had ever felt threatened or intimidated by other detainees or staff; this compared to 19% of women who said they had felt threatened or intimidated by other detainees and 10% by staff.
- I.15** In our 25 individual interviews (all women were offered an interview), very few concerns were raised about staff (see paragraph 2.8). However, some women said they were nervous about detainees with mental health problems, and those who had not been in prison were

concerned about former prisoners. Others explained that language barriers and the tendency of detainees to group by nationality meant that it was easy to misinterpret behaviour. However, further investigation suggested that detainees' negative perceptions of safety were generally not a result of the centre itself, but of their uncertain immigration status and the prospect of an unwanted removal. Most did not know when their detention would end. A number of women told us that the fact that detainees were sometimes removed during the night made them feel unsafe.

- I.16** There was little physical violence in the centre. During the previous six months, there had been 15 recorded incidents of alleged antisocial behaviour, involving 20 women. Most incidents were low level, involving verbal altercations or pushing, although two detainees had been injured, one of whom was taken to hospital. During the previous six months, there had been eight assaults on staff perpetrated by six detainees, none of which had resulted in injury.
- I.17** The violence reduction policy was informed by a detainee survey. Violence reduction booklets were usually opened following antisocial behaviour between detainees. The booklets alerted staff to detainees who were at risk and needing support and which detainees might pose a risk. Managers usually offered mediation, although this had only been taken up in two cases. Records were not sufficiently detailed and analysis of antisocial behaviour lacked rigour. The safer detention committee had identified these issues. Some incidents had not been reported to the safer detention meeting.
- I.18** In our confidential survey, 12 detainees said they had experienced sexually inappropriate behaviour of some sort from either detainees or staff. Most referred to inappropriate comments, but four mentioned contact or abuse, and two said this was by staff. None provided sufficient further details that could be followed up. In our 25 individual interviews, no detainees said they had personally experienced or seen sexually inappropriate behaviour.
- I.19** Managers kept a log of alleged inappropriate behaviour by staff and residents. Since our previous inspection, 69 incidents of inappropriate behaviour had been logged, 31 of which included a sexual allegation. Thirteen of these had been made by staff to record sexually inappropriate behaviour by detainees. None of these had been formally investigated. It was not always clear from the documentation why this was the case. Detainees had complained about sexually inappropriate behaviour by staff on 13 occasions, there had been four third party complaints and one detainee complaint about another detainee. In these cases, managers conducted initial investigations to determine how allegations should be handled. Eight had been referred to the police or to the Serco professional standards team. When managers decided not to investigate a case, the justification for this decision was not always adequately recorded.
- I.20** We examined seven of the more serious investigations, including some with alleged sexual content, and found them to be thorough and fair. One had been substantiated. The officer had been dismissed and there was an ongoing police investigation. In total since our previous inspection, three officers had been dismissed for professional misconduct.

Recommendation

- I.21** **When managers conclude that there is no need for an external investigation of a detainee's allegation, a clear rationale for their decision should be recorded.**

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.22** During the previous six months, there had been 39 self-harm incidents involving 24 detainees. This was a reduction from 72 self-harm incidents involving 27 detainees at our last inspection. Five detainees had required treatment in hospital, most for overdoses. Staff had opened 143 ACDT⁴ documents, fewer than at our previous inspection. Appropriately, detainees who did not use the dining hall were no longer routinely placed on an ACDT. Most ACDTs were opened on reception because of a history of self-harm or a statement of intent, rather than actual incidents.
- I.23** ACDTs were managed well. Action plans and assessments were carried out promptly. Care plans contained appropriate actions with evidence of updates over time. Reviews were not always multidisciplinary, but records showed that health care staff provided telephone advice in advance of the review. Observations were conducted on time and written records demonstrated good interactions. The approach was generally cautious and reflected a desire by staff to provide support. Detainees in crisis told us they felt well supported.
- I.24** The range of interventions to support detainees in distress had improved considerably with the introduction of the comprehensive and valued Kaleidoscope Plus Group service⁵ (see paragraph 2.70). There was still no peer support scheme, but during the previous three months, the local Samaritans had started to visit the centre to raise awareness of their services and to offer support. There were advanced plans for them to deliver training for staff on identifying signs of trauma, distress and suicidal intent and providing immediate appropriate support.
- I.25** A multidisciplinary group of managers, including immigration enforcement staff, continued to meet weekly to discuss vulnerable detainees, including those at risk of self-harm. This assisted the effective communication of risks and needs and promoted coordinated support. The safer detention meeting discussed a comprehensive range of self-harm data, but was not always well attended.
- I.26** During the previous six months, there had been 46 cases of constant supervision involving 33 detainees, lasting an average of 13.5 hours. Most took place on the residential units, but 15 had been in other locations. Six had taken place in the supported living facility, a good, supportive environment (see paragraph 1.32). Seven incidents of constant supervision had taken place in the separation unit (see paragraph 1.58) and two in the isolation rooms adjacent to health care. The latter in particular was not suitable for detainees in crisis.
- I.27** Female officers were now always responsible for constant supervision of women detainees. There was a clear policy directing the use of women officers in these cases. Examined records from October 2016 to the end of May 2017 showed that no lone male officers had been used on constant supervision.

⁴ Assessment, care in detention and teamwork case management of detainees at risk of suicide and self-harm.

⁵ Kaleidoscope provided a psychological wellbeing service which included a wide range of psycho-educational activities designed to improve mental wellbeing, resilience and health.

Recommendation

- I.28 Managers should document the reasons why detainees are held in the supported living facility and the rooms adjacent to health care.**

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.⁶

- I.29** Links with social services were better than we usually see. The centre had met Bedfordshire Social Services twice in the last year. However, only 35% of centre staff had received the training on safeguarding adults, trafficking and female genital mutilation provided by the council.
- I.30** The safeguarding policy and procedures required revision to bring them in line with the Home Office policy on adults at risk in immigration detention. Staff we spoke to were aware of key safeguarding issues and we saw examples of appropriate internal referrals for potential victims of trafficking and torture.
- I.31** Staff we spoke to knew how to raise concerns about the conduct of their colleagues and thought they would be well supported if they did so. The whistle-blowing policy that we had criticised at the last inspection was no longer in use and staff were working to the more appropriate Serco corporate policy, although the latter had not been adapted for use in the centre. We saw an example of a member of staff appropriately raising concerns about a colleague, but also one example of an allegation that had not been referred to the Home Office with sufficient urgency.
- I.32** A new supported living facility provided a decent and comfortable environment, and had given good support to some detainees. It had two well furnished bedrooms, a bathroom, and a lounge with comfortable furniture and access to internet and fax (see photographs in Appendix IV). Records had been kept until April 2017 of the reasons for using the facility in each case, but these were no longer kept. The criteria for holding detainees there were not clear. There was inadequate governance of this facility, as well as the separate area adjacent to health care, both of which had been used to isolate detainees with infectious diseases.
- I.33** Home Office records indicated that 107 detainees had been assessed to be at risk under its adults at risk policy. Fifty were self-assessed at level 1 of the policy (self report), 56 were assessed at level 2 because there was evidence of risk and one detainee was assessed at the highest level 3 because there was evidence that detention was likely to cause her harm.
- I.34** Detainees assessed at levels 2 or 3 of the adults at risk policy were discussed at the weekly multidisciplinary meeting, which included Home Office and health care staff and representatives of the Kaleidoscope Plus Group (see paragraph 2.76). The meeting identified and monitored need and provided a sound basis for developing support.
- I.35** There was no accurate list of detainees assessed to be at risk. At the beginning of the inspection, the centre only had records of 34 adults assessed at level 2 of the policy, together with the detainee at level 3. We were therefore not confident that effective

⁶ 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).

support and monitoring was provided for all detainees assessed to be at risk (see also paragraph I.81).

- I.36** There was a care planning procedure for detainees, but it was mainly used for detainees with mobility difficulties. The detainee assessed at the highest level of risk had no plan. Other internal procedures, such as scheduled reviews for longer-term detainees, did not always take place. Health care checks were made on any detainee who had not had contact with the service in the previous three months, which was commendable.

Recommendation

- I.37 Safeguarding adults training should be delivered to all staff and should include raising awareness of trafficking, torture and the national referral mechanism. There should also be a single comprehensive list identifying detainees considered vulnerable, with effective multidisciplinary oversight and, where appropriate, care planning.**

Safeguarding children

Expected outcomes:

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

- I.38** The safeguarding of children was supported by meetings and training with the local authority. A safeguarding keep-in-touch initiative had been set up by the centre and the safeguarding adults and safeguarding children departments of Bedfordshire County Council. They had met three times since April 2016 with health care and Home Office representatives, but attendance had been much reduced at the most recent meeting in March 2017. The initiative had facilitated access to advice and training packages from the local authority, although not all Serco staff had completed mandatory safeguarding children training.
- I.39** Information was now collected in reception about detainees' child care responsibilities and the Home Office were notified when a detainee had child care responsibilities in the UK in case such information had for any reason not been available or considered before detention. Only nine women had declared this since the beginning of 2017, which indicated significant under-reporting. In our survey, 18% of women said they had child care responsibilities in the UK.
- I.40** The safeguarding children policy had been signed off by the local authority. A separate policy described appropriate arrangements for the care of detainees who said they were children. They were accommodated in a room on their own and regularly monitored by officers who recorded observations in unit files. An individual support plan was opened, although plans that we looked at were basic and lacked details. Since January 2017, 13 detainees had said they were children, all of whom were male freight lorry cases held on the Bunting unit. Eight of these had been assessed as children and almost all were released into the care of social services on the day of referral.
- I.41** As a matter of policy, the Home Office did not conduct age assessments for people arriving from adult prisons, which was not appropriate, although we saw no examples of such cases.

Recommendation

- I.42 Detainee custody officers and all other relevant staff should complete necessary safeguarding children training.**

Security

Expected outcomes:

Detainees feel secure in an unoppressive environment.

- I.43** The strategic approach to security was good. Threats were assessed and used to inform security meetings, which were held regularly and well attended. Security intelligence reports were of a good standard and processed efficiently with no backlog.
- I.44** Physical security features were proportionate to the risks of the population. Unlike other centres, there was no razor wire and few bars on the windows. Detainees experienced good freedom of movement throughout the centre.
- I.45** A move to intelligence-led searching since our last inspection was particularly positive. There had been 41 room searches in the previous six months, which was appropriate to the intelligence received. Male staff sometimes searched women's rooms, although managers tried to minimise this (see main recommendation S37).
- I.46** Three detainees were on closed visits, similar to our last inspection. The review process was not sufficiently clear and the restriction was not always related to an abuse of visits. The intrusive supervised visits we saw at our last inspection had ceased.
- I.47** During the previous six months, there had been two recorded strip-searches. Governance arrangements to ensure accurate recording and appropriate justification were not robust. We found unreported strip-searches and one strip-search appeared unnecessary. In this case, a male detainee had been involved in an incident. His wife was nearby, but had not been involved, made no threats and gave no indication of posing a risk. Yet she was strip-searched with no legitimate justification given.
- I.48** The risk assessment process for escorts was good. Ten detainees had been handcuffed during escorts conducted by centre staff in the past six months. The reasons for handcuffing were justifiable in most of the assessments that we reviewed. However, we still found two cases where medical concerns about applying handcuffs were not fully documented or considered during the decision-making process. There was evidence of the removal of restraints when appropriate during escorts. Male staff continued to escort female detainees on occasions.
- I.49** Two detainees were subject to mail monitoring at the time of our inspection. In both cases, this was an appropriate security response to identified risks. Detainees were still not allowed to take mobile phones into legal and social visits, which was a disproportionate restriction.

Recommendations

- I.50** Male staff should not search women's rooms.
- I.51** Closed visits should only be imposed when there is evidence that a detainee has abused visits. There should be regular documented reviews of the related intelligence.
- I.52** All strip-searches should be accurately recorded and sufficient justification should be demonstrated.

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.53** There was no rewards scheme and there was no evidence that its absence adversely affected outcomes for detainees.

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.54** Centre staff had used force 26 times in the previous six months, less than at our last inspection and other centres. Records justifying the use of force were thorough.
- I.55** Video footage of incidents of use of force demonstrated mixed practice. Staff went to great lengths to de-escalate situations by talking to detainees, often successfully. In most cases force was used proportionately and as a last resort. However, some staff lacked competence and confidence when applying control and restraint techniques.
- I.56** Use of force meetings were held regularly, with good attendance, but analysis of data was not robust enough. Managers reviewed some, but not all, planned use of force.
- I.57** The use of separation had reduced since our last inspection. During the previous six months, rule 40 (removal from association) had been applied on 31 occasions and rule 42 (temporary confinement) on 12 occasions.
- I.58** The separation unit was bright and had recently been refurbished. The Rule 40 rooms had been softened and included carpets and toilets with seats and lids. The Rule 42 accommodation was similar to stark prison cells. No detainees were separated at the time of our inspection.
- I.59** Rule 40 documents did not always provide justification for separation. There was little reference to the exceptional circumstances necessary to separate a detainee subject to ACDT procedures or constant supervision.
- I.60** The centre had drafted, but not yet published or implemented, a new separation policy. We were concerned that the policy did not make clear the purpose of the unit by allowing

detainees to be held there before removal without Rule 40 or 42 safeguards in place. We saw paperwork that suggested a detainee could be held in the unit under Rule 15 (certification of accommodation), which did not authorise separation. The policy also included disproportionate security restrictions, for example the routine removal of shoes and jewellery from detainees held under rule 42 without an individual risk assessment.

Recommendations

- I.61 All use of force incidents should be reviewed by managers and learning points should be shared with staff.**
- I.62 All operational staff should be able to apply control and restraint techniques confidently and competently.**
- I.63 The separation unit should only be used to accommodate detainees under Rule 40 or Rule 42. All Rule 40 and 42 records should fully justify the need for separation. Detainees subject to assessment, care in detention and teamwork procedures should only be separated in exceptional circumstances which are clearly documented in separation records.**

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.64** In our survey, 86% of detainees said they had a solicitor against the comparator of 67%, although fewer non-English speaking detainees said they had a solicitor.
- I.65** Detainees could receive 30 minutes' legal advice through the Legal Aid Agency funded duty advice surgeries which were held four days a week. At the time of our inspection detainees only had to wait one to two working days for an appointment, a shorter period than we find at other centres.
- I.66** Solicitors confirmed that arrangements for the surgeries worked well but said that only a minority of detainees received ongoing publicly funded legal representation following the initial half-hour consultation. In our survey, only 45% of detainees said they received free legal advice.
- I.67** Bail information was available in the library and the welfare office. Bail for Immigration Detainees attended the centre monthly compared with fortnightly at the previous inspection⁷. Only 37% of detainees in our survey said that it was easy to get bail information.
- I.68** Bail summaries were often not served by 2pm on the working day before bail hearings, which made it difficult for detainees to prepare adequately. Some bail summaries did not inform the tribunal that the detainee had been assessed to be an adult at risk in detention (see paragraph I.33).

⁷ Bail for Immigration Detainees is a third sector organisation which supports detainees in applying for bail.

- I.69** Country of origin information reports were available online and this was well advertised. However, there were no up-to-date immigration law text books in the library and we were surprised to find one published in 1994.

Recommendations

- I.70** The centre should explore the reasons for fewer non-English speaking detainees having a solicitor.
- I.71** The library should be stocked with up-to-date legal text books.
- I.72** Bail summaries should contain all relevant information, including details of why a detainee has been assessed to be at risk in detention. Summaries should be given to the detainee by 2pm on the working day before their bail hearing.

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.73** Fewer detainees than at our previous inspection were being held for very long periods. At the time of the inspection, none had been held for over a year, although 14 had been held for between six months and a year. However, a detainee had recently been released on bail after three years in detention, a very lengthy period to hold a person under administrative powers (see main recommendation S35). During the previous six months, 67% of women had been released into the community, which raised questions about the justification for detention in the first place.
- I.74** There were unacceptable delays in progressing cases, including deciding asylum claims, responding to Rule 35 reports and processing travel documents. In two cases officials noted that removal did not appear to be imminent, but detention was maintained.
- I.75** We were pleased to find that fewer pregnant women were detained and for much shorter periods than at our last inspection. Twenty-eight pregnant women had been held since the Home Office changed its policy on this group in July 2016. In most cases, pregnancy was identified when new detainees had their initial health screening and they were quickly released. Twenty-five of the 28 pregnant women had been released and three had been removed voluntarily. Most pregnant women were held for less than 48 hours. One had been held, with appropriate authority, for over 72 hours. She was removed after six days in detention.
- I.76** There had been 142 Rule 35 reports during the previous six months, compared with 67 at the last inspection. Thirty-four per cent of reports had resulted in the release of the detainee.
- I.77** There were some unacceptable delays in the Rule 35 process. Doctors' reports, which should have been prepared within 24 hours, were taking up to five days at the time of the inspection. Over the previous six months, the Home Office had not met its response deadlines in almost a quarter of cases and several had been late by a week or more. Delays

were longest in the cases of the most vulnerable detainees, which were considered by internal Home Office review panels.

- I.78** One case that we examined in our casework sample concerned the detainee assessed at level 3 of the adults at risk policy because there was professional medical evidence that a period of detention was likely to cause harm. Two recent Rule 35 reports had been submitted for this detainee. In both cases, doctors noted numerous scars consistent with torture and psychological symptoms characteristic of post-traumatic stress disorder (PTSD). The response to the first report took eight weeks to finalise and the second five weeks. Both reports were considered by the internal review panel, independent of the decision-making team. On both occasions the panel recommended release but were overruled by a senior Home Office official. We were also concerned to find two Rule 35 responses where the Home Office had refused, without explanation, to accept that rape came within the legal definition of torture.⁸ (see main recommendation S36).
- I.79** We reviewed 10 rule 35 reports, all relating to torture. Doctors had not received enough training in preparing Rule 35 reports and the quality was generally poor despite some improvements since the last inspection. The reports were now typed and commented briefly on the consistency of scarring with the detainee's account of mistreatment. In four of the ten cases that we reviewed, mistreatment included rape and sexual violence. In a fifth case, it was not clear if the doctor's description of mistreatment involved sexual violence. The description of mistreatment in the sample lacked detail. No formal psychological assessment had been carried out in any of the seven cases that mentioned symptoms characteristic of PTSD. Doctors provided little information on the impact of detention on the welfare of the detainee. In some reports where torture was documented, there was a brief comment that detention would not be harmful with little explanation as to how this conclusion had been reached (see main recommendation S36).
- I.80** In eight of the ten cases, the Home Office had accepted that the detainee's treatment came within the definition of torture and assessed the detainee at level 2 of the adults at risk policy. One of the eight detainees had been released before the case had been considered and the Home Office had maintained detention in the other seven cases. In some cases, the reasons for maintaining detention had included that the doctor had not declared the detainee unfit for detention or that detention was affecting the detainee's health. In all seven cases it was considered that negative immigration factors outweighed indicators of vulnerability. No responses cited the imminence or otherwise of removal.
- I.81** The adults at risk policy was intended to reduce the detention of vulnerable people and the duration of their detention. It was therefore a concern that almost one in five detainees were assessed to be at the higher levels of risk (see paragraph I.34). The percentage of detainees released after a Rule 35 report was higher than at the previous inspection, but in recent months the percentage released had fallen sharply. The Rule 35 sample indicated that women were being detained despite professional evidence of torture, rape and trafficking, and in greater numbers than we have seen at previous inspections.
- I.82** Staff in the local immigration enforcement contact team were diligent in chasing overdue Rule 35 and monthly progress reports. Induction interviews with new detainees were reasonably good. Detainees could request an appointment with a member of the team and the team now ran well-attended drop-in sessions in the centre twice a week. Staff

⁸ In September 2016, the Home Office changed the definition of torture to be used in Rule 35 considerations. This was challenged in the courts. Pending the outcome of proceedings the Court has ordered the Home Office to use a broader definition of torture – one including actions of non-state actors, which would include rape regardless of the perpetrator – while the case awaited conclusion. In its ruling in October 2017, the High Court confirmed that the broad definition of torture should be used in Rule 35 considerations.

conducting surgeries had laptop access to their case management system. This was good practice.

- I.83** Most monthly progress reports were served on time. On one day of the inspection, three reports were overdue compared with 21 overdue on one day at the last inspection. Some reports did not explain progress adequately.

Good practice

- I.84** *The immigration enforcement team ran drop-in surgeries three times a week to answer detainees' queries. The team used laptops during the surgeries to access their casework information database. This enabled detainees to receive prompt updates on developments in their cases.*

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 The residential units were clean and well presented. Women detainees could move freely around the centre from 9am to 9pm to use the various services and were able to move around their own units at other times. The unit association rooms, which were welcoming and well equipped, were available for use 24 hours a day. Outside areas were pleasant. Male detainees were restricted to their units unless escorted, but had good separate association facilities.
- 2.2 Bedrooms were spacious and adequately furnished, lit and ventilated. Each had a kettle and a bathroom with shower. Detainees could access simple cleaning tools and products, and professional cleaners were available to clean rooms each week. Defects in the rooms were generally resolved promptly. However, on Bunting unit there was significant graffiti in bedrooms and in the laundry. Elsewhere, there was minor graffiti on bedroom notice boards.
- 2.3 On arrival, detainees were given clean bedding and an initial supply of toiletries and laundry tablets. Further supplies were freely available in a permanently staffed central location known as the post room, where detainees could also meet, collect mail from individual secure letter boxes, send faxes and seek advice and information.
- 2.4 Following risk assessment, most residents shared a bedroom with one other detainee. Staff worked hard to try to match detainees with suitable room mates and detainees could easily request a room change. All detainees had keys to their rooms and access to a locker.
- 2.5 Detainees could wear their own clothes and could have clothing handed in on visits. The centre had a good stock of reasonable quality clothing for detainees who needed it, although it could take up to five days for items handed in to be processed and given to them. The unit laundries were well equipped and valued.
- 2.6 As at our previous inspection, about half the detainees in our survey said the centre was not quiet enough at night for sleeping. Some detainees complained to us of other detainees singing or talking, of banging doors and of officers' feet and keys.

Recommendation

- 2.7 **Graffiti in Bunting unit and across the centre should be removed, and dealt with swiftly if it reappears.**

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.

- 2.8** Relationships between staff and detainees were mostly good. Staff were friendly and there was an ethos of helpfulness. In our survey, 87% of detainees against the comparator of 75% said that most staff treated them with respect. Only 42% of detainees said that staff understood their problems as a detainee, but this was higher than the 26% at our previous inspection and demonstrated progress.
- 2.9** In contrast to our previous inspection, there were no longer queues outside wing offices and, when staff were on units, they appeared to have more time to listen and talk to detainees. In addition, some, but not all, staff had received useful training to help them understand the vulnerabilities of detainees (see paragraph 1.24). Staff knew the circumstances of many detainees well and in our survey 69% said they had a member of staff they could turn to if they had a problem. Detainees were not offered an allocated care officer unless they had been at the centre for more than 12 weeks when they qualified for the long-term resident scheme, which was now more routinely used to provide enhanced support.
- 2.10** Since our previous inspection, the centre had issued an instruction that staff should never fully enter a detainee’s room on their own (except in an emergency). In our survey, more women detainees than at our previous inspection (53% v 35%) said that staff always knocked and waited before entering their bedroom. We observed staff routinely knocking and waiting before opening doors.
- 2.11** The proportion of female staff involved in operational duties was still too low at 54% and only two of the nine uniformed managers were women. Staffing levels were tight across the centre, particularly at weekends, and some women staff told us that they often had to change roles at short notice to carry out particular duties. Some detainees told us they felt intimidated by the presence of male staff and it was inappropriate that reception was sometimes staffed by a lone male officer (see paragraph 1.6). We noted that units were sometimes left without any staff presence, which created potential risks.
- 2.12** There was a good range of effective consultation meetings. The centre had conducted a survey via the electronic kiosks in which 75 detainees had participated from February to May 2017. The responses had been analysed and managers intended to use the data to develop provision.

Recommendations

- 2.13 All staff should receive the training that helps them to recognise and respond appropriately to the particular vulnerabilities of a female detainee population, including in cultural awareness and the specific backgrounds and experiences of detainees.**
- 2.14 At least 60% of staff in direct contact with women detainees should be women.**
- 2.15 There should be sufficient staff on units at all times. Units should never be left without any staff presence.**

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 characteristic⁹ 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.

Strategic management

- 2.16** The strategic management of equality and diversity was underdeveloped. The equality policy was up to date and there were protected characteristic leads but there was no action plan. An equality action team met monthly but attendance was often poor and few actions resulted from the discussions. All detainees were invited to attend the meetings, but only six had done so since August 2016. There were no detainee equality representatives. Some useful monitoring data were considered at the meeting, but its value was limited as it did not cover all protected characteristic groups. The centre had developed links with equality leads at other Serco run custodial institutions, which had informed a new development strategy. The strategy included recommendations to change some of the current structures.
- 2.17** Information about the discrimination incident report form (DIRF) process was included in written material given to new arrivals. Detainees had access to DIRFs in a number of languages. Six had been submitted in the previous six months, including one in a Chinese language, which was translated and investigated appropriately. There was reasonable investigation of all incidents and support was provided where necessary. Written responses were not provided.
- 2.18** An equality and diversity roadshow for detainees had been held in March 2017 to increase awareness of diversity issues and the support available. Planning for a second roadshow involving more community groups was in progress.

Recommendations

- 2.19 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.** (Repeated recommendation 2.24)
- 2.20 Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes across all the protected characteristics.** (Repeated recommendation 2.25)

⁹ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Protected characteristics

- 2.21** Forums for all protected characteristics had been introduced since the last inspection in addition to the nationality groups which already ran regularly. Although attendance varied, the forums gave detainees an opportunity to discuss a range of issues. They mainly raised concerns common to all detainees rather than specific to a particular group.
- 2.22** Professional telephone interpretation was used well in some areas, including health care, reception and immigration interviews. Staff who could speak other languages also did some interpreting and detainees helped each other and staff with day-to-day communication issues. Electronic media were also used to aid communication; tablet computers with translation software were easily available for use by detainees. Appropriate support to learn English was available through education. Cultural festivals, often linked to religious events, were celebrated. During the inspection, detainees observing Ramadan were able to break their fast together each day in a unit dining area.
- 2.23** The centre asked about disability on arrival, but follow up was mostly limited to health care concerns. Seven detainees had supported living plans. Staff were well aware of who these detainees were and the support outlined in their plans. However, they did not know of other detainees who had said that they had a disability on arrival. Carers were occasionally used to help another detainee with daily living tasks and the role was included in the paid employment opportunities available to detainees. None was employed as a carer at the time of the inspection. We met a detainee who said she had been helped by a carer in the past and would have valued such assistance.
- 2.24** A lesbian, gay, bisexual and transgender support officer was raising the profile of the group with posters and leaflets around the centre and detainees were starting to self identify. The UK Lesbian and Gay Immigration Group¹⁰ also provided support to detainees. There were no transgender detainees at the time of the inspection but those held previously had been supported with individual care plans.
- 2.25** At the time of the inspection, 16% of the population were over 50 and 3% were aged 18 to 21. Some activity sessions were advertised for older detainees. A useful survey had been carried out with younger detainees which was informing development of facilities and activities of interest to them.

Recommendation

- 2.26 All detainees who identify as having a disability should be assessed and receive necessary support while at the centre, including the assistance of a paid detainee carer if required.**

¹⁰ A charity offering support to lesbian, gay, bisexual, transgender and intersex people seeking asylum or wishing to immigrate to be with a same sex partner.

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.

- 2.27** The faith team included all the major faiths in the population, and chaplains from other faiths were called on when needed. The religious affairs manager was well regarded around the centre. He provided spiritual and pastoral support and had good links in the community, which helped him to organise practical release support for detainees.
- 2.28** Detainees we spoke to were positive about the support available for faith observance and religious activities, both in our survey and in our group and individual discussions with them. The perceptions of male and female detainees in our survey were similar. A second male Muslim chaplain had been recruited to ensure that the men on Bunting unit could have Friday prayers at the same time as other detainees in the centre. The centre was attempting to recruit a female Muslim chaplain to replace one who had left the team.
- 2.29** Faith facilities remained welcoming places for worship and reflection and continued to be among the best we have seen. They were maintained well, with detainees involved in cleaning and decoration. In the main area of the centre, women detainees had free access to prayer rooms during the 12 hours each day that they were able to move around the centre. Male detainees had more restricted movements, but had ready access to multi-faith rooms on Hummingbird and Bunting units and could attend whole centre group worship on Sunday.

Complaints

Expected outcomes:

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

- 2.30** There had been 24 complaints in the previous six months, about half the number we reported at our previous inspection. Some women still said they were afraid of complaining in case it affected their immigration status. However, there was a well-used process to resolve complaints informally which was overseen appropriately.
- 2.31** There was good quality control of the procedure. Most investigations appeared thorough and in almost all cases the detainee was spoken to as part of the investigation. Most responses were timely, comprehensive and respectful. Responses were not translated. Although telephone interpreters were used if detainees requested an explanation of the response, the lack of routine translation or interpretation risked detainees not understanding.
- 2.32** Ten complaints about staff had been investigated by the Home Office professional standards unit in the last year and had been dealt with appropriately. One had been substantiated and the staff member concerned was dismissed.
- 2.33** Serco staff were not routinely informed of the outcome of complaints against Home Office staff, which limited the understanding that the centre detention staff had of detainees' concerns.

Recommendation

- 2.34** With the exception of medical in-confidence issues, the centre should be aware of all complaints made to ensure managers have a good understanding of detainee concerns. (Repeated recommendation 2.50)

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.

- 2.35** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹¹ and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. A number of areas have been identified that require improvement with a subsequent notice issued by the CQC which has been detailed within Appendix III of this report.

Governance arrangements

- 2.36** G4S Medical Services had delivered health services since September 2014. Commissioners monitored the contract through monthly meetings, assurance visits and independent reviews. Quarterly partnership board meetings were well attended. Regular local governance meetings provided more effective monitoring of the service, although we found gaps in the governance of medicine management (see paragraph 2.62).
- 2.37** A health and social care needs assessment informed service delivery and a new assessment was to be published shortly.
- 2.38** In our survey, 40% of detainees who had been to health care thought that the overall quality of health care was good against 21% at the previous inspection. Detainees' expressed much more positive perceptions of health care than at the previous inspection and negative comments focussed principally on lengthy waits for medication.
- 2.39** Patient feedback mechanisms had improved with regular health forums and patient satisfaction surveys which had started to inform service delivery.
- 2.40** The previous chronic staffing situation had improved but a few vacancies had affected services (see paragraph 2.62). The clinical lead post was vacant but a senior clinical manager provided some cover. Non-clinical time for team leaders had recently been facilitated to deliver clinical and managerial supervision. At least two nurses were on site 24 hours a day.
- 2.41** Most staff had completed mandatory training and professional development was encouraged. Nurses had received torture awareness training. Three doctors had received Rule 35 training but the quality of reports was still not good enough (see paragraph 1.79).

¹¹ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

Appointments for Rule 35 assessments had reduced from two weeks to five days but this was still too long (see paragraph 1.78).

- 2.42** Systems were in place to prevent communicable diseases with good links with local specialist TB services and Public Health England. Food refusal health checks were well managed.
- 2.43** The health care centre was accessible, bright and clean but some fixtures, such as taps, did not meet infection control standards. Eye-catching health promotion information was displayed in a range of languages. Leaflets in English could be translated on request.
- 2.44** The separate pharmacy room where detainees received their medication had eased the pressure on the main waiting room and promoted confidentiality. However, there were not enough seats and we saw several detainees sitting on the floor waiting for their medication, which was inappropriate. The pharmacy room was locked with a separate health care key but other clinical rooms were secured by a key held by all centre staff, which was inappropriate.
- 2.45** Most custody staff were first aid and defibrillator trained. Strategically placed defibrillators were checked each day by health care staff. Emergency codes to ensure prompt medical responses were well understood and ambulances were called promptly when a code was called.
- 2.46** Three emergency bags were available to health care staff. The most frequently used bag was checked daily but we found out-of-date items in the other bags. Inconsistent monitoring meant that equipment could be ineffective in an emergency.
- 2.47** DRC Locums provided the four doctors and a GP was available every day. Detainees could see a doctor of their own gender. During our inspection we identified that the doctor who covered weekend GP services was not registered with the General Medical Council to practise as a GP. This was a serious failing as he could not therefore demonstrate competence. This was unsafe and put detainees at risk (see main recommendation S38). The health care manager initiated an immediate investigation to establish how this had come about. His prescribing practices were also being reviewed. The doctor was told that he would no longer be employed at the centre.
- 2.48** Detainees could use a secure separate health care complaints system. Information about complaints was clearly displayed in different languages. Complaint responses were respectful, timely and focused.
- 2.49** Access to immunisations and screening for blood-borne viruses was good. Detainees were referred to external services for national screening programmes based on their individual needs.
- 2.50** Condoms were available but detainees had to request them from health care staff which could have discouraged some detainees from asking.

Recommendations

- 2.51** There should be more seats outside the medication area for detainees to wait for their medication.
- 2.52** All clinical environments should be accessible only to health care staff and should comply with infection control standards.
- 2.53** An effective monitoring system should be in place to ensure that all emergency resuscitation equipment is in good order.

Delivery of care (physical health)

- 2.54** Detainees received a comprehensive private health screen on arrival and appropriate referrals were made. A health services leaflet was available in a range of languages. Good use of telephone interpretation services was evident throughout health care.
- 2.55** We observed a female nurse conducting a screening in a professional and compassionate way and a male staff member assisting her to reduce the waiting time. However, screenings of women were still regularly conducted by male nurses alone (see recommendation 1.11). Notices were displayed in different languages about the availability of a chaperone on request.
- 2.56** An appropriate range of primary care services was available with acceptable waiting times. Urgent GP appointments were facilitated for detainees needing them. Out-of-hours GP cover was provided at the same level as in the community.
- 2.57** Nurse-led long-term conditions clinics were being developed. Nurses had received training for some long-term conditions and lead roles had been identified. These were currently well managed, mainly through the GP. Templates were based on national clinical guidance. Work was needed to ensure that care plans were completed for detainees with other long-term and complex conditions.
- 2.58** Daily triage clinics and travel vaccinations and advice were offered by nurses who had received additional training and by a nurse prescriber.
- 2.59** The high number of appointments which detainees failed to attend was being monitored and ways of improving this were being explored.
- 2.60** No pregnant detainees were held at the time of our inspection. Links with the local midwifery services were good. Detainees were now usually released within 48 hours of identification of pregnancy, which was positive (see paragraph 1.75). Bedford hospital provided sexual health services. Referrals for hospital appointments were well managed and appointments were rarely cancelled because of a lack of escort staff.

Pharmacy

- 2.61** The local supplier did not always supply medicines on time. These delays were compounded by doctors not signing prescriptions promptly. For example, we found that prescriptions generated on a Friday had not been signed by the following Tuesday. Since November 2016 the supplier had provided a pharmacist for four hours a week to check prescription charts and support the pharmacy team.

- 2.62** A pharmacy technician had left two months before our inspection and had not been replaced. In the meantime, an assistant was in charge of medicines. It was inappropriate to place this responsibility on an unregistered staff member. This lack of professional oversight put detainees at risk. For example, one detainee had not received four doses of their mental health drug, quetiapine. Another detainee was supplied with codeine too frequently and not in compliance with the prescription (see main recommendation S38).
- 2.63** Nurses completed in-possession risk assessments on reception, but these were generally ignored by the prescribers. There were many examples of medicines given not for in possession with no reason recorded for this decision. Some detainees said that when they saw the GP for anxiety and sleep problems they were prescribed diazepam and zopiclone rather than referred initially to the sleep hygiene clinic.
- 2.64** Patients requiring medicines during their Ramadan fast were supplied between 9 and 10pm. Some were given three days of in-possession medication for which there was little documentation.
- 2.65** When medicines were handed to patients, IDs were checked. Nurses were responsible for completing computer records and the assistant prepared the medicines, showed them to the nurse and handed them to the patient. In the case of an error, the nurse would be responsible for the administration as the registered professional. There was no policy on the reordering or renewing of prescriptions. Two nurses said they would mark a prescription for renewal when two or three days' supply remained, but it often took up to six days for new supplies to be sent.
- 2.66** Medicines not for in possession were stored in small trays for each patient, but medicines were seen to have fallen into another patient's tray.
- 2.67** A range of discretionary medicines was available for supply to patients. Paracetamol was supplied on the wings by officers, who noted the supply and nurses recorded this on SystemOne (electronic clinical records).

Recommendation

- 2.68** **The in-possession policy should be adhered to, prescribing should follow local guidelines and there should be effective monitoring of prescribing trends to provide assurance of safe outcomes for detainees. Medicines should be stored safely.**

Dentistry

- 2.69** Time for Teeth Limited provided a full range of NHS equivalent services. The average wait for routine appointments was less than three weeks, which was good. Detainees with urgent dental care needs were seen at the next dental clinic and the primary care team dealt with concerns between sessions and arranged community dental care if required. Feedback from detainees about the dental service was excellent. The importance of oral health was promoted during sessions. The dental suite was small but met infection control standards and was suitably equipped. Dental equipment was well maintained and serviced regularly.

Delivery of care (mental health)

- 2.70** Kaleidoscope Plus Group (a registered mental health charity) had been commissioned by NHS England to provide psychological wellbeing services. The service had been very well received. It provided evidence-based interventions to help detainees manage current and future life stresses by improving psychological wellbeing and reducing low-level symptoms of mental health associated with anxiety and depression.
- 2.71** The environment was therapeutic. Detainees participated in planned individual and group activities and were also able to drop in. Three members of staff delivered a range of wellbeing activities from Monday to Saturday with some evening groups, including relaxation, sleep hygiene sessions, psycho-educational activities, and compassion focussed activities.
- 2.72** There was an average of 45 monthly referrals, including self referral. Activity was evaluated and written and verbal feedback from detainees was very positive.
- 2.73** The G4S mental health team included two full-time experienced mental health nurses. Another nurse had been appointed and was awaiting clearance. One session a week was delivered by two psychiatrists visiting on alternate weeks and they gave telephone advice to the team when necessary. Detainees were seen in the health care centre and on the units.
- 2.74** The caseload for the mental health team was 47 and they received about 15 to 20 referrals a month. There was an open referral system and a daily triage meeting each weekday to prioritise cases.
- 2.75** All detainees referred received a prompt and comprehensive initial assessment and, depending on need, were retained on the caseload with care plans for ongoing support and complex case management or referral to the wellbeing service. There was some joint working with the wellbeing team.
- 2.76** The team contributed to the ACDT¹² process if they were given enough notice to attend and regularly attended the weekly individual needs meeting.
- 2.77** The six detainees who had been transferred to hospital under the Mental Health Act between December 2016 and June 2017 had been transferred within the two-week transfer guideline. Most detention staff had received on-line mental health awareness training.

Good practice

- 2.78** *The psychological wellbeing service provided an impressive range of support to help improve the wellbeing and resilience of detainees, providing a calm and therapeutic environment.*

¹² Assessment, care in detention and teamwork case management of detainees at risk of suicide and self-harm.

Substance misuse

Expected outcomes:

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

- 2.79** All new arrivals were asked in reception about their drug and alcohol use and referred for GP assessment if necessary. The mental health team leader and a GP had completed specialist substance misuse training and saw individual detainees at least weekly. Four detainees were on opiate substitution treatment at the time of the inspection and those we spoke to were positive about the support they had received. The clinical records that we examined showed that detainees received regular reviews and the prescribing regimes were flexible. Care planning had been introduced, although psychosocial support was underdeveloped. Links with community services were made before release to ensure continuity of care where possible.
- 2.80** A joint agency substance management strategy had been agreed recently. Intelligence reports and finds indicated that there was little illicit drug or alcohol use in the centre, although this was being actively monitored. Any issues were discussed at the weekly individual needs meeting which the mental health team leader attended.

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.

- 2.81** Menus were now available in several languages and meals were served at appropriate times. However, only 14% of women in our survey said the food was good or very good compared with 30% in other centres and 25% at our last inspection. The food that we sampled was adequate, but most dishes comprised western-style food and the menu lacked cultural diversity. The lunchtime meal consisted largely of baguettes or salad. There was very little in any of the menus to reflect the normal diets of, for example, Chinese or African women. Menus catered for vegetarian, vegan and halal diets, with fruit, vegetables and salads available each day. Detainees were consulted about the menu, but there was little evidence of any changes as a result.
- 2.82** Detainees were employed in the kitchens to prepare sandwiches and salads, but not to cook food. A recent food hygiene inspection had found that detainees working in the serveries and kitchens did not have requisite food hygiene qualifications. This had now been rectified.
- 2.83** The cultural kitchens were very popular with detainees and helped to normalise life in detention to a degree. Access had improved with three sessions each day in the main centre and three sessions a week on Hummingbird unit.
- 2.84** The centre shop sold a range of goods including toiletries, food, confectionery, stamps and greetings cards. However, only 31% of women said the shop sold a wide enough range of goods to meet their needs compared with 45% in similar centres. Detainees complained in particular about the limited range of products for the ethnically diverse population, and that the shop did not stock cosmetics. At our last inspection, detainees had been able to buy cosmetics and discount clothing at a popular weekly market, but this was no longer running.

2.85 Detainees now had access to an Argos catalogue although there was a £3.95 handling fee for orders, which was prohibitive. There was still no access to any approved internet shopping sites to purchase items not available in the shop.

Recommendation

2.86 The food menu and the range of goods available for detainees to purchase should reflect the diverse needs of the population.

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** Women continued to move freely around the centre for more than 12 hours a day. In addition, detainees were free to move within their residential units after 9pm. Movement restrictions were appropriately based on risk. Male detainees in the family unit or the separate short-term holding facility did not have the same levels of freedom as the women, but still had good access to appropriate facilities. Men on the Hummingbird family unit could visit the gymnasium or other activities under escort at specific times of the day.
- 3.2** Sufficient activities were available to provide appropriate mental and physical stimulation for detainees. Most activities were indoors, but all detainees had access to the well laid-out garden and social areas. Activities were promoted to detainees more effectively than at the previous inspection. Detainee induction was particularly well run and informative. Large notice boards around the centre promoted activities and events clearly to detainees.
- 3.3** Recreational activities and facilities were good. Detainees attended arts and crafts activities where they made cloth bags from recycled clothing and materials. Small groups of detainees cooked traditional foods in the cultural kitchens (see paragraph 2.83). Detainees made good use of the hairdressing salon which provided a range of hair and beauty treatments.
- 3.4** Centre managers contacted a number of community agencies which organised fairs and events that detainees could attend throughout the year. Detainees and staff organised a comprehensive range of activities linked to religious festivals and topical events, such as coffee and cake events for charity and Pancake Day. These were very well supported and appreciated by detainees.
- 3.5** Access to computers and the internet was good. All detainees received personal login information at induction and were free to access online training and conduct research on the internet. Detainees knew how to print information and were aware of the types of website that were restricted. Staff monitored activities and acted when detainees attempted to access restricted material or websites. Detainees received some information at induction, but there was no further reinforcement of the need to protect personal data and to stay safe when using the internet.
- 3.6** Managers had reviewed all activities and used the data effectively to inform development of the provision. Detainees were frequently asked, through surveys and face to face, for ideas on improving the provision.

Recommendation

- 3.7** **Information should be displayed to remind detainees of safe working protocols when using computers that are used by other people**

Learning and skills

- 3.8** The learning and skills provision had been analysed and revised to meet the changing needs of the population. The main English language programme was now on an eight-week cycle with sessions during the day and in the evenings. Each session was repeated through the week and detainees could choose which sessions to attend. Once a detainee had shown an interest in learning, the tutor texted a reminder half an hour before the start of sessions. These sessions were open to men as well as women, but few men attended.
- 3.9** Computer based learning had been introduced effectively and provided information communications technology and mathematics training. The range of English language skills provision had been usefully broadened to include beginner, intermediate and advanced classes. Detainees could attend sessions to improve their conversational English, or, for example, to learn about parts of the body for appointments with dentists, opticians or doctors.
- 3.10** Detainees attended accredited training courses in first aid and food preparation and hygiene during the weekends. This enabled detainees to complete qualifications without the interruptions in the centre during the week.
- 3.11** Not all tutors were qualified teachers, but they were experienced in training and working with detainees. Tutors were capable of motivating detainees to produce very high quality work, especially in recycling clothing and origami.
- 3.12** Detainees made particularly good use of the kitchens to prepare ethnic foods, to learn about other cultures and understand how food is cooked and prepared in different locations around the world.
- 3.13** The quality of the learning and skills provision was not monitored to identify areas for improvement. Managers had not conducted observations to determine the quality of delivery of training and learning by full-time staff or by visiting tutors in the gym or on other training courses.

Recommendation

- 3.14 Managers should observe training activities to assure the quality of the training delivered by tutors, visiting staff and volunteers.**

Paid work

- 3.15** The number of paid employment places had increased since the previous inspection to 75, but only 50 of the places were taken up. The application process for paid work was made clear to all detainees. Clearances required by the centre and the Home Office were quickly completed and did not obstruct employment. The paid employment opportunities for men were more restricted, limiting them to work on their residential units. While this did not unduly affect men on Bunting who stayed for very short periods, men on the Hummingbird family unit often spent far longer in the centre.
- 3.16** Detainees who stayed in the centre for more than 60 days attended a useful review meeting with staff to confirm that their employment or training needs had not changed. Managers reviewed the status of all detainees in employment at the monthly review boards. These

were purposeful meetings which checked that employed detainees were working effectively in that employment.

Recommendation

- 3.17 More paid work opportunities should be made available for male detainees on the family unit.**

Library

- 3.18** The library was well managed and well organised. Women had good access throughout the day and made good use of the facilities. Men could use the library at least twice a day at specific times or on request to staff. They had separate access to a small collection of books and newspapers in the family unit. In our survey, 84% of detainees said it was easy to access the library against the comparator of 77%.
- 3.19** The library stocked a good range of fiction and non-fiction, religious, biographical and easy read books, in all the primary languages spoken in the centre. Detainees had access to a range of health, fitness and general interest magazines and to a good selection of English and foreign language newspapers. A large stock of music CDs and DVD films was frequently updated and greatly appreciated by detainees.
- 3.20** A knowledgeable and helpful member of staff managed the library but had not received any training as a librarian.

Recommendation

- 3.21 The librarian should be qualified in library management.**

Sport and physical activity

- 3.22** The sports and games provision was good. Suitably trained and qualified staff managed the indoor and outdoor facilities, and all detainees had the opportunity to participate in fitness activities and sport.
- 3.23** The large sports hall provided opportunities for detainees to participate in regular zumba, yoga and aerobics classes or to play badminton, tennis and other games. A cardiovascular suite with treadmills, bikes and a small range of free and weight training machines was appropriate but not heavily used. Men could use these facilities at specific times. Detainees on the Bunting unit had their own small cardiovascular suite and an all-weather outside sports area.
- 3.24** All detainees completed a purposeful, timely induction to the sports facilities and equipment. This included an appropriate assessment by health care staff, who provided clear information to activities staff about which detainees could participate in sport.

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 office was open from 9am to 5pm, Monday to Friday, and 9am to noon at weekends. It was staffed by two part-time workers who provided a valued service. A Hibiscus Initiatives project worker was also in the welfare room during the week which increased capacity (see paragraph 4.14). Detainees made good use of the service by appointment or drop-in sessions. During the previous three months, about 600 detainees had accessed welfare support. Detainees sought support for a range of issues including property retrieval, completion of legal forms, telephone contact with the Home Office and solicitors and liaison with social services concerning contact with children. New arrivals were invited to a 'meet and greet' session to explain the welfare service but take up at the time of the inspection was low.

Visits

Expected outcomes:

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

- 4.2 The visitors' centre was open every day, but offered limited facilities. Lockers were available and property for detainees could be booked in before a visit. The centre provided a free bus service to and from Bedford train and bus stations. The visitors' booking line operated from the visitors' centre and visitors reported no problems in booking.
- 4.3 Visits sessions took place every day from 2pm to 5pm and 6pm to 9pm. The visits hall was large and clean, with a brightly painted outside area. Vending machines dispensed chocolate, crisps and drinks. Visitors could buy microwaveable burgers and meals. The small children's play area had a television but little play equipment. Board games and colouring packs were available on request. Searching of both visitors and detainees was proportionate. A small room adjacent to the visits hall was now given over for use by Medical Justice to carry out medical examinations and interviews with detainees, which was a positive initiative.
- 4.4 The Yarl's Wood Befrienders group provided a valued and well supported service in the centre. Forty-eight volunteers visited over 40 detainees a week. The group ran a weekly drop-in service where they played board games with detainees and provided hot drinks and biscuits. They ran social events twice a year. Plans to start a gardening project were well developed.

Recommendation

- 4.5 **The visits hall play area should contain a good range of toys and games for children of all ages.**

Communications

Expected outcomes:

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

- 4.6** In our survey, more detainees (68%) than at our last inspection (45%) said it was easy to use the phone. Detainees were provided with a mobile phone on arrival, a SIM if required, and £5 shop credit which could be spent on a phone card. Further top-up cards and mobile phones could be bought in the shop. Payphones in the centre were not used because the appropriate phone cards were no longer available. Telephones with privacy hoods on each unit were connected to the switchboard and detainees could take incoming calls.
- 4.7** Post for the Hummingbird unit went directly to the unit. All other post was delivered to the post room where detainees were required to sign for it and open it in front of an officer. Mail was not routinely opened by staff. Detainees could freely use three fax machines in the post room. A fourth machine was available for families on Hummingbird.
- 4.8** Detainees had good access to the internet and were able to use personal online email accounts. Legitimate sites, including legal sites, were easily accessible. The exception was access to social media and video calling, which were still prohibited, a disproportionate restriction for a detainee population which hindered contact with family and friends.

Recommendation

- 4.9 Subject to risk assessment, detainees should have access to video calling and social media.** (Repeated recommendation 4.19)

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.

- 4.10** During the previous six months, 542 (21%) detainees had been removed from the centre, 295 (12%) had been transferred to other places of detention and 1,721 (67%) had been released, excluding men released from the Bunting short-term holding unit.
- 4.11** Welfare staff were routinely made aware each day of detainees who had been served removal directions, and went on to units to offer appointments to these detainees. Take up varied but was generally low: for example, in April, 26 of 132 offered appointments were taken up; in May, 53 of the 116 offered appointments were taken up. Welfare staff aimed to prepare detainees for removal at these appointments. They explained re-entry bans, often contacted solicitors and looked at specialist organisations online, such as those to support victims of trafficking. Suitcases could be provided if needed. However, detainees who were released from the centre were not routinely seen by the welfare department, which was a significant omission given that most were released (see main recommendation S39).
- 4.12** About 120 detainees a month were signposted to the Hibiscus Initiatives returns and resettlement project which provided basic advice and guidance and information about

destination countries, liaised with case workers and developed a resettlement plan with detainees which included looking at access to funds, location of property and availability of support networks in the destination country. Some examples of more complex support included using couriers to collect property, and securing emergency accommodation in Jamaica for a detainee for three months. Financial assistance was provided for some detainees to ensure they were able to reach their final destination safely. There was still no routine provision by the Home Office or the centre to meet this need.

- 4.13** Some good efforts had been made to engage with community organisations, but there was scope to improve links with groups which met gender-specific needs.
- 4.14** A few helpful support groups had taken place with detainees being removed on charter flights, attended by the welfare department, Hibiscus Initiatives and immigration enforcement. These detainees were also discussed at a weekly multidisciplinary meeting, the minutes of which showed that the system of involuntary reserves¹³ was still being used.

Recommendations

- 4.15 All detainees requiring it should be provided with the financial means to reach their final destination safely.** (Repeated recommendation 4.29)
- 4.16 Links with a broad range of community organisations should be developed, including gender-specific services. Centre staff should work closely with these organisations to address the support needs of detainees who have experienced abuse, rape, violence or other forms of exploitation.** (Repeated recommendation 4.31)
- 4.17 Only detainees who volunteer to do so should be placed on a reserve list.**

¹³ Detainees who are identified as reserves for removal in the event that a detainee on the main removal list does not leave, for example after securing a judicial review.

Section 5. Summary of recommendations and good practice

The following is a listing of repeated and new recommendations 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 There should be a strict time limit on the length of detention. (S35)
- 5.2 Rule 35 assessments should be completed within 24 hours. Reports should provide clear, objective and detailed professional assessments, including on evidence of PTSD. Responses should be prompt. Where professional evidence of torture is accepted, the exceptional reasons leading to the decision to maintain detention should be provided, in detail. Rape should be considered a form of torture for the purpose of Rule 35. (S36)

Main recommendation

To the Home Office and health care provider

- 5.3 Robust governance of health services should ensure safe and effective medicines management, including establishing an effective medicines management committee and checking professional credentials. Unqualified pharmacy staff should be supported and should not be given responsibility beyond their competence. Detainees should receive their medicines in a timely manner. (S38)

Main recommendations

To the centre manager

- 5.4 More female staff should be recruited to ensure that at least 60% of staff in direct contact with women detainees are women. (S37)
- 5.5 The welfare department should see all detainees being released from the centre to address outstanding needs and signpost detainees to community support where required. (S39)

Recommendation

To the Immigration Minister

- 5.6 Subject to risk assessment, detainees should have access to video calling and social media. (4.9, repeated recommendation 4.19)

Recommendations

To the Home Office

Casework

- 5.7 Bail summaries should contain all relevant information, including details of why a detainee has been assessed to be at risk in detention. Summaries should be given to the detainee by 2pm on the working day before their bail hearing. (1.72)

Complaints

- 5.8** With the exception of medical in confidence issues, the centre should be aware of all complaints made to ensure managers have a good understanding of detainee concerns. (2.34, repeated recommendation 2.50)

Recommendation

To the Home Office and escort contractors

Escort vehicles and transfers

- 5.9** Detainees should not be subject to long delays before transfer to Yarl's Wood. They should never be transported during the night except for urgent operational reasons. (1.3, repeated recommendation 1.4)

Recommendation

To the Home Office and centre manager

- 5.10** All detainees requiring it should be provided with the financial means to reach their final destination safely. (4.15, repeated recommendation 4.29)

Recommendations

To the centre manager and health care provider

- 5.11** There should be more seats outside the medication area for detainees to wait for their medication. (2.51)
- 5.12** All clinical environments should be accessible only to health care staff and should comply with infection control standards. (2.52)

Recommendations

To the health care provider

- 5.13** An effective monitoring system should be in place to ensure that all emergency resuscitation equipment is in good order. (2.53)
- 5.14** The in-possession policy should be adhered to, prescribing should follow local guidelines and there should be effective monitoring of prescribing trends to provide assurance of safe outcomes for detainees. Medicines should be stored safely. (2.68)

Recommendations

To the centre manager

Early days in detention

- 5.15** Reception should not be staffed by a lone male officer and women should be screened by female nurses in reception. (1.11)
- 5.16** Night-time welfare checks should be fully explained to detainees in a language they understand, and they should be conducted by staff of the same gender. (1.12, repeated recommendation 1.16)

- 5.17** Induction should take place on the day following reception. Key information should be given to detainees in accessible, written formats. (1.13)

Bullying and violence reduction

- 5.18** When managers conclude that there is no need for an external investigation of a detainee's allegation, a clear rationale for their decision should be recorded. (1.21)

Self-harm and suicide prevention

- 5.19** Managers should document the reasons why detainees are held in the supported living facility and the rooms adjacent to health care. (1.28)

Safeguarding (protection of adults at risk)

- 5.20** Safeguarding adults training should be delivered to all staff and should include raising awareness of trafficking, torture and the national referral mechanism. There should also be a single comprehensive list identifying detainees considered vulnerable, with effective multidisciplinary oversight and, where appropriate, care planning. (1.37)

Safeguarding children

- 5.21** Detainee custody officers and all other relevant staff should complete necessary safeguarding children training. (1.42)

Security

- 5.22** Male staff should not search women's rooms. (1.50)
- 5.23** Closed visits should only be imposed when there is evidence that a detainee has abused visits. There should be regular documented reviews of the related intelligence. (1.51)
- 5.24** All strip-searches should be accurately recorded and sufficient justification should be demonstrated. (1.52)

The use of force and single separation

- 5.25** All use of force incidents should be reviewed by managers and learning points should be shared with staff. (1.61)
- 5.26** All operational staff should be able to apply control and restraint techniques confidently and competently. (1.62)
- 5.27** The separation unit should only be used to accommodate detainees under Rule 40 or Rule 42. All Rule 40 and 42 records should fully justify the need for separation. Detainees subject to assessment, care in detention and teamwork procedures should only be separated in exceptional circumstances which are clearly documented in separation records. (1.63)

Legal rights

- 5.28** The centre should explore the reasons for fewer non-English speaking detainees having a solicitor. (1.70)

5.29 The library should be stocked with up-to-date legal text books. (1.71)

Residential units

5.30 Graffiti in Bunting unit and across the centre should be removed, and dealt with swiftly if it reappears. (2.7)

Staff–detainee relationships

5.31 All staff should receive the training that helps them to recognise and respond appropriately to the particular vulnerabilities of a female detainee population, including in cultural awareness and the specific backgrounds and experiences of detainees. (2.13)

5.32 At least 60% of staff in direct contact with women detainees should be women. (2.14)

5.33 There should be sufficient staff on units at all times. Units should never be left without any staff presence. (2.15)

Equality and diversity

5.34 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. (2.19, repeated recommendation 2.24)

5.35 Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes across all the protected characteristics. (2.20, repeated recommendation 2.25)

5.36 All detainees who identify as having a disability should be assessed and receive necessary support while at the centre, including the assistance of a paid detainee carer if required. (2.26)

Services

5.37 The food menu and the range of goods available for detainees to purchase should reflect the diverse needs of the population. (2.86)

Activities

5.38 Information should be displayed to remind detainees of safe working protocols when using computers that are used by other people. (3.7)

5.39 Managers should observe training activities to assure the quality of the training delivered by tutors, visiting staff and volunteers. (3.14)

5.40 More paid work opportunities should be made available for male detainees on the family unit. (3.17)

5.41 The librarian should be qualified in library management. (3.21)

Visits

5.42 The visits hall play area should contain a good range of toys and games for children of all ages. (4.5)

Removal and release

- 5.43** Links with a broad range of community organisations should be developed, including gender-specific services. Centre staff should work closely with these organisations to address the support needs of detainees who have experienced abuse, rape, violence or other forms of exploitation. (4.16, repeated recommendation 4.31)
- 5.44** Only detainees who volunteer to do so should be placed on a reserve list. (4.17)

Examples of good practice

- 5.45** The immigration enforcement team ran drop-in surgeries three times a week to answer detainees' queries. The team used laptops during the surgeries to access their casework information database. This enabled detainees to receive prompt updates on developments in their cases. (1.84)
- 5.46** The psychological wellbeing service provided an impressive range of support to help improve the wellbeing and resilience of detainees, providing a calm and therapeutic environment. (2.78)

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief inspector
Hindpal Singh Bhui	Team leader
Bev Alden	Inspector
Colin Carroll	Inspector
Angela Johnson	Inspector
Deri Hughes-Roberts	Inspector
Jeanette Hall	Inspector
Kam Sarai	Inspector
Tamara Pattinson	Inspector
Maureen Jamieson	Health services inspector
Sue Melvin	Pharmacist
Gary Turney	Care Quality Commission inspector
Stephen Long	Ofsted inspector
Martin Hughes	Ofsted inspector
Natalie-Anne Hall	Researcher
Helen Ranns	Researcher
Patricia Taflan	Researcher
Alissa Redmond	Researcher
Emma Seymour	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 2015, about a third of detainees were transported to the centre overnight. Reception processes often took too long and many detainees did not receive an adequate induction. The Bunting short-term holding facility provided good support for recently arrived men. Most violence was low level but it had increased and more detainees felt unsafe than at the last inspection. In our confidential survey and interviews with women detainees, there was little indication of sexually inappropriate behaviour by staff and in our interviews no detainees gave details of current concerns. Self-harm was high. The quality of care for those at risk of self-harm was reasonable, but some ACDTs were opened without evidence of self-harm risk. Safeguarding procedures were underdeveloped. Security was generally proportionate. Separation was not used excessively but some detainees had spent too long in temporary confinement. Force was usually proportionate, but in one incident a member of staff had used excessive force and was subsequently suspended. Some detainees were held for long periods with insufficient case progress. Many Rule 35 reports were very poor. A large number of pregnant women had been held with little or no recorded evidence of the exceptional circumstances justifying their detention. Outcomes for detainees were not sufficiently 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, and on evidence of PTSD. Case owner replies should carefully address all relevant factors in reviewing ongoing detention. Rape should be considered a form of torture. (S40)

Not achieved

Robust local governance processes should be in place in health care to monitor the effectiveness of the service and ensure the safety of detainees, including effective incident reporting and management, clinical audits, regular governance meetings attended by all service providers and effective service user engagement. (S43)

Partially achieved

Recommendations

The whistle-blowing policy should be reviewed and staff should be given unambiguous reassurance they would be supported if they raised concerns. Work should be done to understand and address any concerns staff have about the policy. (S37)

Achieved

There should be a strict time limit on the length of detention and caseworkers should act with diligence and expedition. (S38)

Not achieved

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)

Partially achieved

Detainees should not be subject to long delays before transfer to Yarl's Wood, and should never be transported during the night unless this is for urgent operational reasons. (I.4)

Not achieved (Recommendation repeated, I.3)

The reception process should be completed as quickly as possible, and detainees moved swiftly to the residential units. (I.13)

Partially achieved

Detainees should have access in reception to written information about the centre in a range of languages. (I.14)

Achieved

Newly arrived women should be screened by female nurses in reception. (I.15)

Not achieved

Night-time welfare checks should be fully explained to detainees in a language they understand, and they should be conducted by staff of the same gender. (I.16)

Not achieved (Recommendation repeated, I.12)

Induction should be thorough and take place on the day following reception. Key information should be given to detainees in accessible, written formats. (I.17)

Not achieved

Detainees' negative perceptions of safety should be investigated as a priority and action taken to address the findings. (I.29)

Achieved

Violence reduction measures should be robust. They should set clear targets to change behaviour and support victims, include formal interventions to address behaviour, and be underpinned by good quality behaviour logs. (I.30)

Partially achieved

There should be a safer detention strategy and action plan specific to the needs of Yarl's Wood detainees, which is informed by robust data and analysis, including detainee surveys. (I.31)

Partially achieved

ACDTs should not be opened without an assessed self-harm risk. They should identify coping strategies and set meaningful targets. (I.44)

Achieved

Male staff should not undertake constant supervision of female detainees. (I.45)

Achieved

Detainees at risk of self-harm should have support from trained peer supporters and specialist community groups such as the Samaritans. (I.46)

Partially achieved

Individual counselling should be available to promote safety and address personal crisis. (1.47)

Achieved

Links should be made with the local safeguarding adults board and the director of adult social services. (1.51)

Achieved

Safeguarding adults training should be delivered to all staff, and should include raising awareness of trafficking, torture and the national referral mechanism. (1.52)

Not achieved

Detainee custody officers and all other relevant staff should have regular safeguarding children training. (1.58)

Not achieved

All detainees who say they are children should undergo a Merton compliant age assessment by social services. (1.59)

Achieved

Both the Home Office and Serco should keep a central record of women who have dependent children living in the UK. (1.60)

Achieved

The best interests of children should be fully considered in decisions about the detention of a primary carer and should be set out in the detainee's case file. (1.61)

Achieved

When an age dispute case leaves social services care, the Home Office should treat them as a missing person. (1.62)

Not achieved

Room searches should be intelligence led rather than routine, and male staff should not search women's rooms. (1.72)

Partially achieved

Closed visits should be held in sight, but out of hearing of an officer. They should only be imposed when there is evidence that a detainee has abused visits and there should be monthly reviews of the related intelligence. (1.73)

Partially achieved

Governance of the use of force should be substantially strengthened to provide assurance that force is always used proportionately and as a last resort. (1.88)

Partially achieved

Detainees should be separated for the shortest possible period, particularly in temporary confinement. (1.89)

Achieved

Male staff should not supervise female detainees who have removed their clothes. (1.90)

Achieved

All detainees should receive copies of bail summaries by 2pm on the working day before their bail hearing. (1.98)

Not achieved

The Home Office should keep a central record of the number of pregnant women detained. (1.111)

Achieved

Detainees should wait no longer than 24 hours to see a GP for a rule 35 assessment. (1.112)

Not achieved

Respect

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

At the last inspection in 2015, the standard of accommodation and levels of cleanliness were good. Most detainees said that staff treated them with respect, but both staff and detainees reported that staff had little time for positive engagement with detainees. There were still not enough women DCOs and staff lacked specific training in the backgrounds of detainees. Equality and diversity work was inconsistent. Faith provision was very good. Most complaints were well managed. The food was variable in quality and lacked cultural diversity. Health care had deteriorated substantially since the previous inspection, with potentially serious consequences for the physical wellbeing of detainees. Pharmacy services were very poor and mental health support did not meet the high need. Outcomes for detainees were not sufficiently good against this healthy establishment test.

Main recommendations

Staffing levels should be adequate to enable staff to meet the needs of detainees consistently in a decent and respectful manner. More female staff should be recruited urgently to ensure that at least 60% of staff in direct contact with women detainees are also women. (S41)

Not achieved

Male staff should never enter women's rooms unless invited to do so, except in cases of emergency. (S42)

Partially achieved

Recommendations

Detainees should have access to communal areas in their units at any time. (2.6)

Achieved

Detainees on Crane unit should be provided with kettles in their rooms. (2.7)

Achieved

Staff should receive training which equips them to fulfil their role and to recognise and respond appropriately to the particular vulnerabilities of a female detainee population. This should include training on cultural awareness and the specific backgrounds and experiences of detainees. (2.19)

Partially achieved

The long-term resident scheme should be consistently implemented with all eligible detainees. (2.20)

Achieved

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. (2.24)

Not achieved (Recommendation repeated, 2.19)

Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes across all the protected characteristics. (2.25)

Not achieved (Recommendation repeated, 2.20)

The low number of reported discrimination incidents should be investigated and the findings acted on. (2.26)

Partially achieved

Specific forums should be established for detainees across all protected characteristics, numbers permitting. (2.32)

Achieved

The under-reporting of disabilities should be investigated and addressed by the centre, and paid carer roles should be introduced. (2.33)

Not achieved

The specific needs of young adults should be investigated and acted on as necessary. (2.34)

Partially achieved

Pregnant women should receive care and support equivalent to that in the community. (2.35)

Achieved

The reasons for the poor perception of men's ability to see a religious leader of their own faith should be investigated and the findings acted on. (2.41)

Achieved

The reasons for the increase in complaints, particularly against staff, should be investigated through consultation with detainees, and prompt action should be taken to address the findings. (2.48)

Not achieved

Complaints responses should be in the same language in which they were submitted and staff answering complaints should speak to the detainee in person as part of their investigation. (2.49)

Partially achieved

With the exception of medical in confidence issues, the centre should be aware of all complaints made to ensure managers have a good understanding of detainee concerns. (2.50)

Not achieved (Recommendation repeated, 2.34)

All health staff should have regular documented clinical supervision, mandatory training and relevant professional development, including chronic condition management, nurse assessment and torture awareness. Doctors should receive training to complete Rule 35 reports effectively. (2.63)

Partially achieved

Health staff should have access to and use a full range of pertinent policies and procedures which accurately reflect the environment, including communicable disease management and information governance. (2.64)

Achieved

All clinical environments should only be accessible to health staff, comply with infection control standards and provide adequate privacy for detainees. (2.65)

Partially achieved

Ambulances should be automatically requested when the emergency code is called. (2.66)

Achieved

Detainees should be able to complain about all health services through a single confidential well understood system and receive a reply within the agreed time frame. (2.67)

Achieved

Adverse incidents should be reported and investigated promptly and learning should be shared with the health team to inform service improvement. (2.68)

Achieved

Detainees should have prompt access to nurse assessment clinics with trained staff who can provide appropriate treatment using evidence-based assessment algorithms to ensure consistency. (2.79)

Achieved

Detainees with life-long conditions should be cared for within an agreed care pathway and receive regular reviews which generate an evidence-based care plan managed by staff who are appropriately trained and supervised. (2.80)

Partially achieved

A clear care pathway for women who are pregnant should be agreed between the community midwifery service, health provider and the centre, which includes training for staff and prompt referral for specialist advice when potential complications in pregnancy are reported. (2.81)

Achieved

The enhanced care unit should be underpinned by clear protocols and risk assessments agreed by the partnership board, and detainees who are admitted should receive adequate individual care planned support to ensure their safety and well being. (2.82)

No longer relevant

Medication should be prescribed, administered, recorded and stored in compliance with local procedures and all requisite professional standards, and detainees should receive medication promptly. (2.95)

Not achieved

Medicine management should be overseen by regular on-site pharmacist visits, compliance audits and an effective medicines management committee. (2.96)

Partially achieved

Nurses should be able to supply an appropriate range of over-the-counter and prescribed medications to avoid unnecessary detainee consultations with the GP. (2.97)

Achieved

All dental equipment should be appropriately serviced and maintained and this should be recorded. (2.101)

Achieved

Detention staff should all receive regular mental health awareness training which reflects the cultural diversity and specific needs of detainees, so that they can identify and support detainees with mental ill health. (2.106)

Achieved

Detainees should have timely access to a full range of multidisciplinary care-planned support which meets their needs, including community liaison and the care programme approach. (2.107)

Achieved

Detainees requiring treatment for substance misuse should receive consistent care within an agreed local evidence-based care pathway including discharge planning. (2.110)

Achieved

Detainees should be able to work in the main kitchen cooking food. (2.118)

Partially achieved

The menu should include more culturally diverse options to reflect the detainee population. (2.119)

Not achieved

The electronic menu ordering system should be in a variety of languages. (2.120)

Achieved

The cultural kitchens should offer additional sessions. (2.121)

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 2015, detainees had good freedom of movement around the centre and recreational facilities were good. There had been little strategic oversight or planning of activities, although there were enough activity places for the population. There was a reasonable range of education, but take-up was low and data collection was weak. There was slightly more work than at the last inspection, but opportunities had been missed to create more interesting roles. The library provided a good service. Fitness provision was adequate. Outcomes for detainees were reasonably good against this healthy establishment test.

Recommendations

Activities should be promoted effectively throughout the centre to ensure that clear information and advice are provided and that all detainees understand how to participate. (3.8)

Achieved

Managers should analyse attendance data and survey results regularly to evaluate the effectiveness of activities in meeting the learning and therapeutic needs of all detainees. (3.9)

Achieved

The quality of English lessons for speakers of other languages should be improved through use of a wider range of learning resources. (3.17)

Achieved

The centre should provide up-to-date computer-based learning resources which detainees can use independently. (3.18)

Achieved

There should be effective monitoring of the quality of education. Monitoring and analysis of attendance at education classes and fitness activity should be thorough. (3.19)

Partially achieved

The quantity of meaningful, interesting paid work and education should be increased for the more able detainees and those who stay longer. (3.23)

Achieved

Detainees should not be prevented from taking up work because of non-compliance with the Home Office. (3.24)

Achieved

The book stock should reflect up-to-date literary publications. (3.29)

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 2015, welfare staff gave detainees some good welfare support and detainees reported positively on the help provided to them, although access was limited. Visits provision was generally good. Detainees had reasonable access to means of communication but reported worse than average phone contact. They had good access to the internet but not to social media or Skype. Detainees being released or transferred were not given systematic support. The centre had insufficient links with third sector and support organisations. Detainees received medication and a medical discharge summary on release but continuity of care and their wider health needs were not consistently addressed. Outcomes for detainees were reasonably good against this healthy establishment test.

Recommendations

The welfare service should be adequately resourced and available seven days a week. All new arrivals should be seen promptly to assess immediate needs and all detainees being discharged should be seen to assist with outstanding needs. (4.5)

Partially achieved

Substantial food should be available for purchase by visitors. (4.11)

Achieved

Subject to risk assessment, detainees should have access to Skype and social media. (4.19)

Not achieved (Recommendation repeated, 4.9)

Appropriate information about destination countries for detainees being removed and local community support organisations for detainees being released should be provided to those requiring it. (4.28)

Partially achieved

All detainees requiring it should be provided with the financial means to reach their final destination safely. (4.29)

Not achieved (Recommendation repeated, 4.15)

Detainees should be seen by health care staff before their discharge date to facilitate effective preparation for release or removal, including malarial prophylaxis, travel vaccinations and community liaison. (4.30)

Achieved

Links with a broader range of community organisations should be developed, including gender specific services. Centre staff should work closely with these organisations to address the support needs of detainees who have experienced abuse, rape, violence or other forms of exploitation. (4.31)

Partially achieved (Recommendation repeated, 4.16)

Appendix III: Care Quality Commission Requirement Notice



Requirement Notices

Provider: G4S Forensic and Medical Services (UK) limited

Location: Yarl's Wood Immigration Detention Centre

Location ID: 1-1693533914

Regulated activities: Treatment of disease, disorder, or injury, Diagnostic and screening procedures and Surgical procedures.

Action we have told the provider to take

The table below shows the regulations that were not being met. The provider must send CQC a report that says what action it is going to take to meet these regulations.

Regulation 12: Safe Care and treatment	<p>12- (1) Care and treatment must be provided in a safe way for service users.</p> <p>12- (2) (c) Ensuring that persons providing care or treatment to service users have the qualifications, competence, skills and experience to do so safely.</p>
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How the regulation was not being met:

The provider should ensure all staff work within the scope of their qualifications, competence, skills and experience.

We found that a Doctor was carrying out the role of a general practitioner without the correct registration or competence to deliver care and treatment.

We also found an unregistered staff member had been given the responsibility of being in charge of medicines within the pharmacy. The lack of professional oversight meant that patients were put at risk.

Appendix IV: Photographs

Reception



Induction room



Supported living facility – association room



Supported living facility – family room



Muslim prayer room



Gym



Sports hall



Visits hall



Bunting outside area



Bunting association area



Appendix V: Detainee population profile

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

(i) Age	No. of men	No. of women	No. of children	%
Under 1 year	0	0	0	0
1 to 6 years	0	0	0	0
7 to 11 years	0	0	0	0
12 to 16 years	0	0	0	0
16 to 17 years	0	0	0	0
18 years to 21 years	1	9	0	3.2
22 years to 29 years	10	56	0	21.0
30 years to 39 years	15	96	0	35.4
40 years to 49 years	7	71	0	24.8
50 years to 59 years	5	36	0	13.1
60 years to 69 years	0	8	0	2.5
70 or over	0	0	0	0
Total	38	276	0	100

(ii) Nationality Please add further categories if necessary	No. of men	No. of women	No. of children	%
Afghanistan	1	0	0	0.3
Albania	3	9	0	3.8
Armenia	0	1	0	0.3
Bangladesh	1	1	0	0.6
Barbados	0	1	0	0.3
Bolivia	0	3	0	1.0
Brazil	1	2	0	1.0
Cameroon	0	4	0	1.3
China	0	22	0	7.0
Congo (Brazzaville)	0	1	0	0.3
Congo Democratic Republic (Zaire)	0	1	0	0.3
Czech Republic	0	1	0	0.3
Eritrea	0	2	0	0.6
France	0	1	0	0.3
Georgia	0	1	0	0.3
Ghana	0	17	0	5.4
Guyana	0	1	0	0.3
Hungary	0	1	0	0.3
India	12	30	0	13.4
Indonesia	0	2	0	0.6
Iran	3	3	0	1.9
Iraq	3	2	0	1.6
Jamaica	0	11	0	3.5
Kenya	0	7	0	2.2
Kiribati	0	1	0	0.3
Kyrgyzstan	0	1	0	0.3
Latvia	0	1	0	0.3
Lithuania	0	2	0	0.6

Malawi	0	1	0	0.3
Malaysia	0	3	0	1.0
Mauritius	0	1	0	0.3
Mongolia	0	2	0	0.6
Morocco	0	1	0	0.3
Namibia	0	1	0	0.3
Nepal	3	9	0	3.8
Netherlands	0	1	0	0.3
Niger	1	0	0	0.3
Nigeria	3	49	0	16.6
Pakistan	1	4	0	1.6
Philippines	0	16	0	5.1
Poland	1	7	0	2.5
Portugal	1	4	0	1.6
Romania	0	6	0	1.9
Sierra Leone	0	1	0	0.3
Slovakia	0	2	0	0.6
Somalia	0	2	0	0.6
South Africa	0	3	0	1.0
Sri Lanka	2	4	0	1.9
Sudan	1	0	0	0.3
Syrian Arab Rep	1	0	0	0.3
Tajikistan	0	1	0	0.3
Tanzania (Rep)	0	1	0	0.3
Thailand	0	2	0	0.6
Trinidad and Tobago	0	2	0	0.6
Turkey	0	1	0	0.3
Turkmenistan	0	1	0	0.3
Uganda	0	1	0	0.3
Ukraine	0	12	0	3.8
Vietnam	0	6	0	1.9
Zambia	0	2	0	0.6
Zimbabwe	0	1	0	0.3
Total	38	276	0	100

(iii) Religion/belief Please add further categories if necessary	No. of men	No. of women	No. of children	%
Christian	10	131	0	44.9
Catholic	2	26	0	8.9
Buddhist	1	21	0	7.0
Hindu	9	21	0	9.6
Sikh	3	18	0	6.7
Atheism	2	13	0	4.8
Muslim	10	27	0	11.8
Traditional Beliefs	0	9	0	2.9
Orthodox	0	9	0	2.9
Agnostic	0	6	0	1.9
Jehovah's Witness	0	3	0	1.0
Seventh Day Adventist	0	3	0	1.0
Methodist	0	2	0	0.6
Orthodox Russian	0	1	0	0.3
Pentecostal	0	1	0	0.3
Protestant	0	1	0	0.3
Other	1	0		0.3
Total	38	276	0	100

(iv) Length of time in detention in this centre	No. of men	No. of women	No. of children	%
Less than 1 week	13	45	0	18.5
1 to 2 weeks	6	35	0	13.1
2 to 4 weeks	5	53	0	18.5
1 to 2 months	4	64	0	21.7
2 to 4 months	8	52	0	19.1
4 to 6 months	2	18	0	6.4
6 to 8 months	0	8	0	2.5
8 to 10 months	0	1	0	0.3
More than 10 months (please note the longest length of time)	0	0	0	0
Total	38	276	0	100

(v) Detainees' last location before detention in this centre	No. of men	No. of women	No. of children	%
Community	0	0	0	0.0
Another IRC	12	98	0	35.0
A short-term holding facility (e.g. at a port or reporting centre)	14	91	0	33.4
Police station	12	58	0	22.3
Prison	0	29	0	9.2
Total	38	276	0	100

Appendix VI: Summary of detainee survey responses

A voluntary, confidential and anonymous survey of the detainee population was carried out for this inspection.

In addition to the main questionnaire which is used as part of all immigration removal centre inspections, a sheet of additional questions was included which were specific to this inspection. The distribution and collection methods described below apply to both parts of the survey.

The results of both the main and the additional questionnaires formed part of the evidence base for the inspection.

Sampling

The main questionnaire was offered to all detainees on Avocet, Crane, Dove and Hummingbird units. The additional questionnaire was offered in English to all women.

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 main questionnaire is available in a number of different languages and via a telephone interpretation 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 questionnaires. In order to ensure confidentiality, respondents were asked to seal their completed questionnaires in the envelope provided and either hand them back to a member of the research team at a specified time or leave them in their room for collection. Refusals were noted.

At the time of being offered the questionnaires, female detainees were also offered an additional confidential interview with a female member of the inspection team, and given a separate information sheet about these interviews.

At the time of the survey on 5 June 2017 the detainee population at Yarl's Wood IRC was 299. Using the method described above, questionnaires were distributed to all detainees.

Survey response

We received a total of 206 completed questionnaires, a response rate of 69%. Sixteen respondents refused to complete a questionnaire and 77 questionnaires were not returned.

Returned language	Number of completed survey returns
English	171 (83%)
Russian	9 (4%)
Albanian	6 (3%)
Vietnamese	5 (2%)
Chinese	3 (2%)
Punjabi	3 (2%)
Kurdish Sorani	2 (1%)
Polish	2 (1%)
Farsi	1 (1%)
French	1 (1%)
Portuguese	1 (1%)
Spanish	1 (1%)
Tigrinya	1 (1%)
Total	206 (100%)

We also received a total of 142 completed additional questionnaires. This represented 52% of the female detainee population at the time of the survey.

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 for the main questionnaire. In all the comparative analyses that follow, statistically significant¹⁴ 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 detainees' 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 have been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from Yarl's Wood IRC in 2017 compared with responses from detainees surveyed in all other detention centres. This comparator is based on all responses from detainee surveys carried out in eight detention centres since April 2014.

¹⁴ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ was considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

- The current survey responses from Yarl's Wood IRC in 2017 compared with the responses of detainees surveyed at Yarl's Wood IRC in 2015.
- A comparison within the 2017 survey between the responses of non-English speaking detainees with English speaking detainees.
- A comparison within the 2017 survey between the responses from Hummingbird Unit and all other units.
- A comparison within the 2017 survey between male and female detainees.

Survey summary

Section I: About you

Q1	Are you male or female?	
	Male	24 (12%)
	Female.....	178 (88%)
Q2	What is your age?	
	Under 18	0 (0%)
	18-21	9 (4%)
	22-29	42 (21%)
	30-39	70 (35%)
	40-49	47 (23%)
	50-59	29 (14%)
	60-69	4 (2%)
	70 or over	1 (0%)
Q3	What region are you from? (Please tick only one.)	
	Africa	61 (32%)
	North America.....	0 (0%)
	South America.....	3 (2%)
	Indian subcontinent (India, Pakistan, Bangladesh, Sri Lanka)	41 (22%)
	China	5 (3%)
	Other Asia.....	35 (18%)
	Caribbean	8 (4%)
	Europe.....	31 (16%)
	Middle East	6 (3%)
Q4	Do you understand spoken English?	
	Yes	169 (84%)
	No.....	32 (16%)
Q5	Do you understand written English?	
	Yes	164 (83%)
	No.....	33 (17%)
Q6	What would you classify, if any, as your religious group?	
	None.....	8 (4%)
	Church of England	9 (5%)
	Catholic	36 (18%)
	Protestant.....	13 (7%)
	Other Christian denomination	60 (30%)
	Buddhist	11 (6%)
	Hindu	26 (13%)
	Jewish	0 (0%)
	Muslim	24 (12%)
	Sikh.....	12 (6%)
Q7	Do you have a disability?	
	Yes	16 (8%)
	No.....	183 (92%)

Section 2: Immigration detention

Q8	When being detained, were you told the reasons why in a language you could understand?	
	Yes	160 (80%)
	No.....	39 (20%)
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.....	139 (75%)
	Three to five	42 (23%)
	Six or more	5 (3%)
Q10	How long have you been detained in this centre?	
	Less than 1 week.....	15 (7%)
	More than 1 week less than 1 month	69 (34%)
	More than 1 month less than 3 months.....	79 (39%)
	More than 3 months less than 6 months	27 (13%)
	More than 6 months less than 9 months	8 (4%)
	More than 9 months less than 12 months.....	3 (1%)
	More than 12 months.....	2 (1%)

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	92 (46%)
	No.....	87 (44%)
	Do not remember	21 (11%)
Q12	How long did you spend in the escort vehicle to get to this centre on your most recent journey?	
	Less than one hour	4 (2%)
	One to two hours	64 (32%)
	Two to four hours	95 (47%)
	More than four hours.....	31 (15%)
	Do not remember	7 (3%)
Q13	How did you feel you were treated by the escort staff?	
	Very well.....	39 (20%)
	Well	105 (53%)
	Neither	35 (18%)
	Badly.....	9 (5%)
	Very badly	6 (3%)
	Do not remember	5 (3%)

Section 4: Reception and first night

Q14	Were you seen by a member of healthcare staff in reception?	
	Yes	194 (95%)
	No.....	5 (2%)
	Do not remember	5 (2%)
Q15	When you were searched in reception, was this carried out in a sensitive way?	
	Yes	138 (71%)
	No.....	37 (19%)
	Do not remember/ Not applicable.....	20 (10%)

Q16	Overall, how well did you feel you were treated by staff in reception?	
	Very well.....	44 (22%)
	Well.....	94 (47%)
	Neither.....	39 (20%)
	Badly.....	9 (5%)
	Very badly.....	5 (3%)
	Do not remember.....	8 (4%)
Q17	On your day of arrival did you receive information about what was going to happen to you?	
	Yes.....	77 (39%)
	No.....	104 (53%)
	Do not remember.....	17 (9%)
Q18	On your day of arrival did you receive information about what support was available to you in this centre?	
	Yes.....	81 (41%)
	No.....	96 (48%)
	Do not remember.....	23 (12%)
Q19	Was any of this information given to you in a translated form?	
	Do not need translated material.....	66 (35%)
	Yes.....	29 (16%)
	No.....	92 (49%)
Q20	On your day of arrival did you get the opportunity to change into clean clothing?	
	Yes.....	160 (81%)
	No.....	34 (17%)
	Do not remember.....	3 (2%)
Q21	Did you feel safe on your first night here?	
	Yes.....	89 (45%)
	No.....	96 (49%)
	Do not remember.....	11 (6%)
Q22	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)	
	Not had any problems.....	40 (21%)
	Loss of property.....	16 (8%)
	Contacting family.....	27 (14%)
	Access to legal advice.....	31 (16%)
	Feeling depressed or suicidal.....	78 (41%)
	Health problems.....	76 (40%)
Q23	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.....	40 (22%)
	Yes.....	62 (34%)
	No.....	81 (44%)

Section 5: Legal rights and immigration

Q24	Do you have a lawyer?	
	Do not need one.....	2 (1%)
	Yes.....	171 (86%)
	No.....	27 (14%)

Q25	Do you get free legal advice?	
	Do not need legal advice	20 (10%)
	Yes	87 (45%)
	No.....	85 (44%)
Q26	Can you contact your lawyer easily?	
	Yes	128 (67%)
	No.....	35 (18%)
	Do not know/ Not applicable.....	29 (15%)
Q27	Have you had a visit from your lawyer?	
	Do not have one	29 (15%)
	Yes	73 (38%)
	No.....	91 (47%)
Q28	Can you get legal books in the library?	
	Yes	116 (61%)
	No.....	14 (7%)
	Do not know/ Not applicable.....	59 (31%)
Q29	How easy or difficult is it for you to obtain bail information?	
	Very easy.....	8 (4%)
	Easy	62 (33%)
	Neither	42 (22%)
	Difficult.....	34 (18%)
	Very difficult.....	28 (15%)
	Not applicable.....	14 (7%)
Q30	Can you get access to official information reports on your country?	
	Yes	31 (16%)
	No.....	75 (39%)
	Do not know/ Not applicable.....	85 (45%)
Q31	How easy or difficult is it to see the centre's immigration staff when you want?	
	Do not know/ have not tried	36 (19%)
	Very easy.....	15 (8%)
	Easy	47 (24%)
	Neither	28 (15%)
	Difficult.....	39 (20%)
	Very difficult.....	28 (15%)

Section 6: Respectful detention

Q32	Can you clean your clothes easily?	
	Yes	181 (91%)
	No.....	19 (10%)
Q33	Are you normally able to have a shower every day?	
	Yes	195 (97%)
	No.....	7 (3%)
Q34	Is it normally quiet enough for you to be able to relax or sleep in your room at night time?	
	Yes	105 (55%)
	No.....	87 (45%)

Q35	Can you normally get access to your property held by staff at the centre if you need to?	
	Yes	78 (41%)
	No.....	77 (41%)
	Do not know.....	33 (18%)
Q36	What is the food like here?	
	Very good.....	6 (3%)
	Good.....	20 (10%)
	Neither	61 (32%)
	Bad	56 (29%)
	Very bad.....	50 (26%)
Q37	Does the shop sell a wide enough range of goods to meet your needs?	
	Have not bought anything yet.....	4 (2%)
	Yes	59 (31%)
	No.....	126 (67%)
Q38	Do you feel that your religious beliefs are respected?	
	Yes	144 (75%)
	No.....	31 (16%)
	Not applicable.....	18 (9%)
Q39	Are you able to speak to a religious leader of your faith in private if you want to?	
	Yes	132 (67%)
	No.....	25 (13%)
	Do not know/ Not applicable.....	40 (20%)
Q40	How easy or difficult is it to get a complaint form?	
	Very easy.....	36 (19%)
	Easy	74 (38%)
	Neither	31 (16%)
	Difficult.....	7 (4%)
	Very difficult.....	8 (4%)
	Do not know.....	37 (19%)
Q41	Have you made a complaint since you have been at this centre?	
	Yes	35 (18%)
	No.....	145 (74%)
	Do not know how to.....	16 (8%)
Q42	If yes, do you feel complaints are sorted out fairly?	
	Yes	14 (7%)
	No.....	21 (11%)
	Not made a complaint.....	161 (82%)

Section 7: Staff

Q43	Do you have a member of staff at the centre that you can turn to for help if you have a problem?	
	Yes	131 (69%)
	No.....	58 (31%)
Q44	Do most staff at the centre treat you with respect?	
	Yes	164 (87%)
	No.....	25 (13%)

Q45	Have any members of staff physically restrained you (C and R) in the last six months?		
	Yes	8 (4%)	
	No.....	172 (96%)	
Q46	Have you spent a night in the separation/isolation unit in the last six months?		
	Yes	18 (9%)	
	No.....	172 (91%)	
Section 8: Safety			
Q47	Do you feel unsafe in this centre?		
	Yes	89 (47%)	
	No.....	100 (53%)	
Q48	Has another detainee or group of detainees victimised (insulted or assaulted) you here?		
	Yes	23 (12%)	
	No.....	162 (88%)	If No, go to question 50
Q49	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>	3 (2%)	
	<i>Because of your nationality</i>	8 (4%)	
	<i>Having your property taken.....</i>	5 (3%)	
	<i>Drugs.....</i>	1 (1%)	
	<i>Because you have a disability</i>	1 (1%)	
	<i>Because of your religion/religious beliefs</i>	4 (2%)	
Q50	Has a member of staff or group of staff victimised (insulted or assaulted) you here?		
	Yes	13 (7%)	
	No.....	174 (93%)	If No, go to question 52
Q51	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>	1 (1%)	
	<i>Because of your nationality</i>	0 (0%)	
	<i>Drugs.....</i>	0 (0%)	
	<i>Because you have a disability</i>	0 (0%)	
	<i>Because of your religion/religious beliefs</i>	1 (1%)	
Q52	If you have been victimised by detainees or staff, did you report it?		
	Yes	8 (4%)	
	No.....	19 (11%)	
	<i>Not been victimised</i>	152 (85%)	
Q53	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?		
	Yes	30 (16%)	
	No.....	157 (84%)	
Q54	Have you ever felt threatened or intimidated by a member of staff in here?		
	Yes	16 (9%)	
	No.....	169 (91%)	

Section 9: Healthcare

Q56	Is health information available in your own language?	
	Yes	73 (38%)
	No.....	69 (36%)
	Do not know.....	48 (25%)
Q57	Is a qualified interpreter available if you need one during healthcare assessments?	
	Do not need an interpreter/ Do not know.....	100 (54%)
	Yes	44 (24%)
	No.....	41 (22%)
Q58	Are you currently taking medication?	
	Yes	84 (45%)
	No.....	101 (55%)
Q59	What do you think of the overall quality of the healthcare here?	
	Have not been to healthcare.....	26 (14%)
	Very good.....	13 (7%)
	Good.....	51 (27%)
	Neither.....	39 (21%)
	Bad.....	27 (14%)
	Very bad.....	32 (17%)

Section 10: Activities

Q60	Are you doing any education here?	
	Yes	16 (8%)
	No.....	176 (92%)
Q61	Is the education helpful?	
	Not doing any education.....	176 (92%)
	Yes	15 (8%)
	No.....	1 (1%)
Q62	Can you work here if you want to?	
	Do not want to work	53 (29%)
	Yes	99 (54%)
	No.....	31 (17%)
Q63	Is there enough to do here to fill your time?	
	Yes	95 (53%)
	No.....	85 (47%)
Q64	How easy or difficult is it to go to the library?	
	Do not know/ Do not want to go.....	13 (7%)
	Very easy.....	85 (43%)
	Easy.....	80 (41%)
	Neither.....	11 (6%)
	Difficult.....	7 (4%)
	Very difficult.....	0 (0%)

Q65	How easy or difficult is it to go to the gym?	
	<i>Do not know/ Do not want to go</i>	31 (16%)
	<i>Very easy</i>	65 (34%)
	<i>Easy</i>	74 (38%)
	<i>Neither</i>	12 (6%)
	<i>Difficult</i>	9 (5%)
	<i>Very difficult</i>	2 (1%)

Section 11: Keeping in touch with family and friends

Q66	How easy or difficult is it to use the phone?	
	<i>Do not know/ Have not tried</i>	19 (10%)
	<i>Very easy</i>	51 (27%)
	<i>Easy</i>	78 (41%)
	<i>Neither</i>	18 (9%)
	<i>Difficult</i>	20 (11%)
	<i>Very difficult</i>	4 (2%)
Q67	Have you had any problems with sending or receiving mail?	
	<i>Yes</i>	31 (16%)
	<i>No</i>	110 (58%)
	<i>Do not know</i>	50 (26%)
Q68	Have you had a visit since you have been here from your family or friends?	
	<i>Yes</i>	122 (65%)
	<i>No</i>	66 (35%)
Q69	How did staff in the visits area treat you?	
	<i>Not had any visits</i>	50 (27%)
	<i>Very well</i>	33 (18%)
	<i>Well</i>	65 (36%)
	<i>Neither</i>	27 (15%)
	<i>Badly</i>	4 (2%)
	<i>Very Badly</i>	4 (2%)

Section 12: Resettlement

Q70	Do you feel that any member of staff has helped you to prepare for your release?	
	<i>Yes</i>	13 (7%)
	<i>No</i>	162 (93%)

Additional Questions

Q1	Are you responsible for children under the age of 18 in the UK?		
	Yes.....		24 (18%)
	No		107 (82%)
Q2	Do staff understand your problems as a detainee?		
	Yes.....		52 (42%)
	No		71 (58%)
Q3	Do staff knock and wait for an answer before coming into your bedroom?		
	Always.....		73 (53%)
	Often.....		23 (17%)
	Sometimes.....		28 (20%)
	Rarely.....		5 (4%)
	Never		9 (7%)
Q4	Do you feel unsafe in any of the following places in this centre? (Please tick all that apply to you.)		
	Never felt unsafe.....	44 (44%)	In association or shared places (e.g. TV room)..... 15 (15%)
	Your bedroom.....	19 (19%)	Outside areas
	Centre corridors	29 (29%)	In activity areas (e.g. library)..... 9 (9%)
	The dining hall.....	25 (25%)	Other..... 7 (7%)
	At health services	28 (28%)	
Q6	Have you experienced any of the following sexual attention from <u>staff</u> at this centre? (Please tick all that apply to you.)*		
	Sexual comments.....	6	Sexual abuse..... 1
	Sexual contact.....	2	
Q8	Have you experienced any of the following sexual attention from <u>other detainees</u> at this centre? (Please tick all that apply to you.)*		
	Sexual comments.....	9	Sexual abuse..... 2
	Sexual contact.....	2	
Q10	Did you have any problems with illegal drugs when you came into this centre?		
	Yes.....		3 (3%)
	No		115 (97%)
Q11	Have you used illegal drugs since you have been in this centre?		
	Yes.....		2 (2%)
	No		116 (98%)
Q12	Did you have problems with alcohol when you came into this centre?		
	Yes.....		4 (3%)
	No		115 (97%)
Q13	Have you used alcohol since you have been in this centre?		
	Yes.....		2 (2%)
	No		117 (98%)

* Because there is no option of 'Not experienced any of this attention' there is no way of knowing how many people answered this question in order to provide a base from which to calculate percentages. For this reason percentages have not been quoted.

Main comparator and comparator to last time



Detainee survey responses: Yarl's Wood IRC 2017

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

		Yarl's Wood IRC 2017	IRC comparator	Yarl's Wood IRC 2017	Yarl's Wood IRC 2015
	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		206	1,021	206	235
SECTION 1: General information					
1	Are you male?	12%	97%	12%	16%
2	Are you aged 21 years or under?	4%	8%	4%	6%
4	Do you understand spoken English?	84%	79%	84%	72%
5	Do you understand written English?	83%	73%	83%	70%
6	Are you Muslim?	12%	44%	12%	23%
7	Do you have a disability?	8%	15%	8%	12%
SECTION 2: Immigration detention					
8	When being detained, were you told the reasons why in a language you could understand?	80%	77%	80%	77%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	3%	7%	3%	2%
10	Have you been detained in this centre for more than one month?	59%	57%	59%	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%	40%	46%	36%
12	Did you spend more than four hours in the escort van to get to this centre?	16%	30%	16%	30%
13	Were you treated well/very well by the escort staff?	72%	66%	72%	63%
SECTION 4: Reception and first night					
14	Were you seen by a member of health care staff in reception?	95%	88%	95%	92%
15	When you were searched in reception was this carried out in a sensitive way?	71%	63%	71%	67%
16	Were you treated well/very well by staff in reception?	69%	66%	69%	62%
17	Did you receive information about what was going to happen to you on your day of arrival?	39%	38%	39%	26%
18	Did you receive information about what support was available to you in this centre on your day of arrival?	40%	46%	40%	30%
For those who required information in a translated form:					
19	Was any of this information provided in a translated form?	24%	26%	24%	26%
20	Did you get the opportunity to change into clean clothing on your day of arrival?	81%	63%	81%	73%
21	Did you feel safe on your first night here?	45%	53%	45%	39%
22a	Did you have any problems when you first arrived?	79%	69%	79%	82%
22b	Did you have any problems with loss of transferred property when you first arrived?	8%	11%	8%	6%
22c	Did you have any problems contacting family when you first arrived?	14%	15%	14%	23%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	Yarl's Wood IRC 2017	IRC comparator	Yarl's Wood IRC 2017	Yarl's Wood IRC 2015
	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 4: Reception and first night continued					
22d	Did you have any problems accessing legal advice when you first arrived?	16%	16%	16%	16%
22e	Did you have any problems with feeling depressed or suicidal when you first arrived?	41%	38%	41%	49%
22f	Did you have any health problems when you first arrived?	40%	33%	40%	49%
For those who had problems on arrival:					
23	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	44%	30%	44%	31%
SECTION 5: Legal rights and immigration					
24	Do you have a lawyer?	86%	67%	86%	80%
For those who have a lawyer:					
26	Can you contact your lawyer easily?	79%	74%	79%	80%
27	Have you had a visit from your lawyer?	45%	39%	45%	26%
25	Do you get free legal advice?	45%	41%	45%	28%
28	Can you get legal books in the library?	61%	43%	61%	45%
29	Is it easy/very easy for you to obtain bail information?	37%	31%	37%	22%
30	Can you get access to official information reports on your country?	16%	19%	16%	15%
31	Is it easy/very easy to see this centre's immigration staff when you want?	32%	26%	32%	17%
SECTION 6: Respectful detention					
32	Can you clean your clothes easily?	90%	75%	90%	81%
33	Are you normally able to have a shower every day?	97%	93%	97%	97%
34	Is it normally quiet enough for you to be able to sleep in your room at night?	55%	63%	55%	57%
35	Can you normally get access to your property held by staff at the centre, if you need to?	41%	47%	41%	35%
36	Is the food good/very good?	14%	30%	14%	25%
37	Does the shop sell a wide enough range of goods to meet your needs?	31%	45%	31%	40%
38	Do you feel that your religious beliefs are respected?	75%	78%	75%	83%
39	Are you able to speak to a religious leader of your own faith if you want to?	67%	52%	67%	59%
40	Is it easy/very easy to get a complaint form?	57%	52%	57%	61%
41	Have you made a complaint since you have been at this centre?	18%	23%	18%	30%
For those who have made a complaint:					
42	Do you feel complaints are sorted out fairly?	40%	20%	40%	20%

Main comparator and comparator to last time

Key to tables

		Yarl's Wood IRC 2017	IRC comparator	Yarl's Wood IRC 2017	Yarl's Wood IRC 2015
	Any percentage highlighted in green is significantly better	Yarl's Wood IRC 2017	IRC comparator	Yarl's Wood IRC 2017	Yarl's Wood IRC 2015
	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 7: Staff					
43	Do you have a member of staff you can turn to for help if you have a problem?	69%	65%	69%	61%
44	Do most staff treat you with respect?	87%	75%	87%	80%
45	Have any members of staff physically restrained you in the last six months?	5%	11%	5%	4%
46	Have you spent a night in the segregation unit in the last six months?	10%	13%	10%	8%
SECTION 8: Safety					
47	Do you feel unsafe in this centre?	47%	35%	47%	42%
48	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	12%	22%	12%	16%
49a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	2%	6%	2%	2%
49b	Have you been victimised because of your nationality since you have been here? (By detainees)	5%	6%	5%	4%
49c	Have you ever had your property taken since you have been here? (By detainees)	3%	4%	3%	2%
49d	Have you been victimised because of drugs since you have been here? (By detainees)	0%	3%	0%	0%
49e	Have you ever been victimised here because you have a disability? (By detainees)	0%	1%	0%	1%
49f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	2%	2%	2%	3%
50	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	7%	17%	7%	13%
51a	Have you been hit, kicked or assaulted since you have been here? (By staff)	0%	4%	0%	2%
51b	Have you been victimised because of your nationality since you have been here? (By staff)	0%	6%	0%	4%
51c	Have you been victimised because of drugs since you have been here? (By staff)	0%	2%	0%	1%
51d	Have you ever been victimised here because you have a disability? (By staff)	0%	2%	0%	1%
51e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	0%	2%	0%	1%
For those who have been victimised by detainees or staff:					
52	Did you report it?	30%	36%	30%	40%
53	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	16%	15%	16%	15%
54	Have you ever felt threatened or intimidated by a member of staff in here?	9%	11%	9%	15%

Main comparator and comparator to last time

Key to tables

		Yarl's Wood IRC 2017	IRC comparator	Yarl's Wood IRC 2017	Yarl's Wood IRC 2015
	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 9: Health services					
56	Is health information available in your own language?	38%	32%	38%	39%
57	Is a qualified interpreter available if you need one during health care assessments?	24%	20%	24%	19%
58	Are you currently taking medication?	46%	43%	46%	54%
For those who have been to health care:					
59	Do you think the overall quality of health care in this centre is good/very good?	40%	37%	40%	21%
SECTION 10: Activities					
60	Are you doing any education here?	8%	20%	8%	16%
For those doing education here:					
61	Is the education helpful?	96%	95%	96%	100%
62	Can you work here if you want to?	54%	57%	54%	55%
63	Is there enough to do here to fill your time?	53%	51%	53%	48%
64	Is it easy/very easy to go to the library?	84%	77%	84%	79%
65	Is it easy/very easy to go to the gym?	72%	68%	72%	63%
SECTION 11: Keeping in touch with family and friends					
66	Is it easy/very easy to use the phone?	68%	65%	68%	45%
67	Have you had any problems with sending or receiving mail?	16%	24%	16%	22%
68	Have you had a visit since you have been in here from your family or friends?	65%	39%	65%	63%
For those who have had visits:					
69	Do you feel you are treated well/very well by staff in the visits area?	74%	74%	74%	77%
SECTION 12: Resettlement					
70	Has any member of staff helped you to prepare for your release?	8%	15%	8%	7%



Detainee survey responses: Yarl's Wood IRC 2017

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

		Men	Women
	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		24	178
SECTION 1: General information			
2	Are you aged 21 years or under?	0%	5%
4	Do you understand spoken English?	80%	85%
5	Do you understand written English?	74%	85%
6	Are you Muslim?	20%	10%
7	Do you have a disability?	3%	9%
SECTION 2: Immigration detention			
8	When being detained, were you told the reasons why in a language you could understand?	82%	80%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	3%	3%
10	Have you been detained in this centre for more than one month?	46%	61%
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?	47%	46%
12	Did you spend more than four hours in the escort van to get to this centre?	9%	16%
13	Were you treated well/very well by the escort staff?	74%	73%
SECTION 4: Reception and first night			
14	Were you seen by a member of health care staff in reception?	88%	96%
15	When you were searched in reception was this carried out in a sensitive way?	80%	69%
16	Were you treated well/very well by staff in reception?	71%	70%
17	Did you receive information about what was going to happen to you on your day of arrival?	56%	38%
18	Did you receive information about what support was available to you in this centre on your day of arrival?	43%	41%
For those who required information in a translated form:			
19	Was any of this information provided in a translated form?	24%	24%
20	Did you get the opportunity to change into clean clothing on your day of arrival?	88%	81%
21	Did you feel safe on your first night here?	79%	41%
22a	Did you have any problems when you first arrived?	66%	80%
22b	Did you have any problems with loss of transferred property when you first arrived?	0%	9%
22c	Did you have any problems contacting family when you first arrived?	9%	15%

Key to tables

	Any percentage highlighted in green is significantly better	Men	Women
	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 4: Reception and first night continued			
22d	Did you have any problems accessing legal advice when you first arrived?	12%	17%
22e	Did you have any problems with feeling depressed or suicidal when you first arrived?	37%	41%
22f	Did you have any health problems when you first arrived?	37%	40%
For those who had problems on arrival:			
23	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	63%	42%
SECTION 5: Legal rights and immigration			
24	Do you have a lawyer?	88%	85%
For those who have a lawyer:			
26	Can you contact your lawyer easily?	77%	78%
27	Have you had a visit from your lawyer?	43%	45%
25	Do you get free legal advice?	50%	45%
28	Can you get legal books in the library?	63%	61%
29	Is it easy/very easy for you to obtain bail information?	57%	35%
30	Can you get access to official information reports on your country?	17%	17%
31	Is it easy/very easy to see this centre's immigration staff when you want?	50%	30%
SECTION 6: Respectful detention			
32	Can you clean your clothes easily?	97%	90%
33	Are you normally able to have a shower every day?	97%	96%
34	Is it normally quiet enough for you to be able to sleep in your room at night?	71%	53%
35	Can you normally get access to your property held by staff at the centre, if you need to?	61%	38%
36	Is the food good/very good?	18%	13%
37	Does the shop sell a wide enough range of goods to meet your needs?	30%	31%
38	Do you feel that your religious beliefs are respected?	74%	74%
39	Are you able to speak to a religious leader of your own faith if you want to?	71%	66%
40	Is it easy/very easy to get a complaint form?	66%	57%
41	Have you made a complaint since you have been at this centre?	12%	19%
For those who have made a complaint:			
42	Do you feel complaints are sorted out fairly?	75%	37%

Key to tables

	Any percentage highlighted in green is significantly better	Men	Women
	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 7: Staff			
43	Do you have a member of staff you can turn to for help if you have a problem?	83%	68%
44	Do most staff treat you with respect?	88%	87%
45	Have any members of staff physically restrained you in the last six months?	3%	4%
46	Have you spent a night in the segregation unit in the last six months?	20%	7%
SECTION 8: Safety			
47	Do you feel unsafe in this centre?	31%	49%
48	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	3%	14%
49a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	0%	2%
49b	Have you been victimised because of your nationality since you have been here? (By detainees)	0%	5%
49c	Have you ever had your property taken since you have been here? (By detainees)	0%	3%
49d	Have you been victimised because of drugs since you have been here? (By detainees)	0%	0%
49e	Have you ever been victimised here because you have a disability? (By detainees)	0%	0%
49f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	0%	3%
50	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	9%	7%
51a	Have you been hit, kicked or assaulted since you have been here? (By staff)	0%	0%
51b	Have you been victimised because of your nationality since you have been here? (By staff)	0%	0%
51c	Have you been victimised because of drugs since you have been here? (By staff)	0%	0%
51d	Have you ever been victimised here because you have a disability? (By staff)	0%	0%
51e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	0%	0%
For those who have been victimised by detainees or staff:			
52	Did you report it?	0%	32%
53	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	0%	19%
54	Have you ever felt threatened or intimidated by a member of staff in here?	0%	10%

Key to tables

	Any percentage highlighted in green is significantly better	Men	Women
	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 9: Health services			
56	Is health information available in your own language?	50%	36%
57	Is a qualified interpreter available if you need one during health care assessments?	28%	23%
58	Are you currently taking medication?	41%	47%
For those who have been to health care:			
59	Do you think the overall quality of health care in this centre is good/very good?	66%	36%
SECTION 10: Activities			
60	Are you doing any education here?	0%	9%
For those doing education here:			
61	Is the education helpful?		95%
62	Can you work here if you want to?	39%	57%
63	Is there enough to do here to fill your time?	39%	55%
64	Is it easy/very easy to go to the library?	70%	86%
65	Is it easy/very easy to go to the gym?	74%	71%
SECTION 11: Keeping in touch with family and friends			
66	Is it easy/very easy to use the phone?	72%	68%
67	Have you had any problems with sending or receiving mail?	9%	18%
68	Have you had a visit since you have been in here from your family or friends?	56%	67%
For those who have had visits:			
69	Do you feel you are treated well/very well by staff in the visits area?	71%	74%
SECTION 12: Resettlement			
70	Has any member of staff helped you to prepare for your release?	3%	8%



Key questions (non-English speakers) Yarl's Wood IRC 2017

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

Key questions (non-English speakers) Yarl's Wood IRC 2017		Non-English speakers	English speakers
	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		32	169
8	When being detained, were you told the reasons why in a language you could understand?	64%	83%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	3%	3%
10	Have you been in this centre for more than one month?	58%	59%
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	32%	49%
13	Were you treated well/very well by the escort staff?	66%	74%
16	Were you treated well/very well by staff in reception?	67%	71%
17	Did you receive information about what was going to happen to you on your day of arrival?	38%	40%
18	Did you receive information about what support was available to you on your day of arrival?	37%	42%
21	Did you feel safe on your first night here?	51%	44%
22	Did you have any problems when you first arrived?	71%	80%
24	Do you have a lawyer?	70%	88%
31	Is it easy/very easy to see the centre's immigration staff when you want?	30%	33%
32	Can you clean your clothes easily?	91%	91%
33	Are you normally able to have a shower every day?	91%	98%
40	Is it easy/very easy to get a complaint form?	40%	61%
41	Have you made a complaint since you have been at this centre?	24%	17%
43	Do you have a member of staff you can turn to for help if you have a problem?	66%	71%
44	Do most staff treat you with respect?	91%	87%
47	Do you feel unsafe in this centre?	43%	48%
48	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	22%	11%

Key to tables

		Non-English speakers	English speakers
	Key questions (non-English speakers) Yarl's Wood IRC 2017		
	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		
50	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	7%	7%
53	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	7%	18%
54	Have you ever felt threatened or intimidated by a member of staff in here?	3%	10%
56	Is health information available in your own language?	36%	39%
57	Is a qualified interpreter available if you need one during health care assessments?	60%	17%
60	Are you doing any education here?	2%	9%
62	Can you work here if you want to?	55%	55%
63	Is there enough to do here to fill your time?	39%	56%
64	Is it easy/very easy to go to the library?	71%	86%
65	Is it easy/very easy to go to the gym?	56%	75%
66	Is it easy/very easy to use the phone?	69%	68%
67	Have you had any problems with sending or receiving mail?	9%	17%
68	Have you had a visit since you have been in here from your family or friends?	36%	71%
70	Has any member of staff helped you to prepare for your release?	10%	7%

Residential Unit Comparator



Residential unit analysis: Yarl's Wood IRC 2017

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

		Hummingbird Unit	Avocet, Crane and Dove Units
	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		49	157
SECTION 1: General information			
1	Are you male?	50%	0%
2	Are you aged under 21 years?	4%	5%
4	Do you understand spoken English?	86%	84%
5	Do you understand written English?	83%	83%
6	Are you Muslim?	18%	10%
7	Do you have a disability?	4%	9%
SECTION 2: Immigration detention			
8	When being detained, were you told the reasons why in a language you could understand?	87%	78%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	5%	2%
10	Have you been detained in this centre for more than one month?	49%	62%
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?	53%	44%
12	Did you spend more than four hours in the escort van to get to this centre?	13%	16%
13	Were you treated well/very well by the escort staff?	76%	71%
SECTION 4: Reception and first night			
14	Were you seen by a member of health care staff in reception?	92%	96%
15	When you were searched in reception was this carried out in a sensitive way?	83%	67%
16	Were you treated well/very well by staff in reception?	78%	67%
17	Did you receive information about what was going to happen to you on your day of arrival?	53%	35%
18	Did you receive information about what support was available to you in this centre on your day of arrival?	42%	40%
20	Did you get the opportunity to change into clean clothing on your day of arrival?	90%	79%
21	Did you feel safe on your first night here?	71%	37%
22a	Did you have any problems when you first arrived?	66%	83%
22b	Did you have any problems with loss of transferred property when you first arrived?	0%	11%
22c	Did you have any problems contacting family when you first arrived?	10%	16%

Residential Unit Comparator

Key to tables

	Any percentage highlighted in green is significantly better	Hummingbird Unit	Avocet, Crane and Dove Units
	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 4: Reception and first night continued			
22d	Did you have any problems accessing legal advice when you first arrived?	13%	17%
22e	Did you have any problems with feeling depressed or suicidal when you first arrived?	32%	44%
22f	Did you have any health problems when you first arrived?	36%	41%
SECTION 5: Legal rights and immigration			
24	Do you have a lawyer?	90%	84%
For those who have a lawyer:			
25	Do you get free legal advice?	54%	43%
28	Can you get legal books in the library?	65%	60%
29	Is it easy/very easy for you to obtain bail information?	60%	29%
30	Can you get access to official information reports on your country?	17%	16%
31	Is it easy/very easy to see this centre's immigration staff when you want?	57%	24%
SECTION 6: Respectful detention			
32	Can you clean your clothes easily?	90%	91%
33	Are you normally able to have a shower every day?	99%	96%
34	Is it normally quiet enough for you to be able to sleep in your room at night?	69%	50%
35	Can you normally get access to your property held by staff at the centre, if you need to?	58%	36%
36	Is the food good/very good?	15%	13%
37	Does the shop sell a wide enough range of goods to meet your needs?	37%	30%
38	Do you feel that your religious beliefs are respected?	81%	72%
39	Are you able to speak to a religious leader of your own faith if you want to?	71%	66%
40	Is it easy/very easy to get a complaint form?	71%	52%
41	Have you made a complaint since you have been at this centre?	17%	18%

Residential Unit Comparator

Key to tables

	Any percentage highlighted in green is significantly better	Hummingbird Unit	Avocet, Crane and Dove Units
	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 7: Staff			
43	Do you have a member of staff you can turn to for help if you have a problem?	86%	64%
44	Do most staff treat you with respect?	94%	85%
45	Have any members of staff physically restrained you in the last six months?	5%	5%
46	Have you spent a night in the segregation unit in the last six months?	17%	7%
SECTION 8: Safety			
47	Do you feel unsafe in this centre?	29%	53%
48	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	6%	15%
49a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	0%	2%
49b	Have you been victimised because of your nationality since you have been here? (By detainees)	1%	5%
49c	Have you ever had your property taken since you have been here? (By detainees)	0%	4%
49d	Have you been victimised because of drugs since you have been here? (By detainees)	1%	0%
49e	Have you ever been victimised here because you have a disability? (By detainees)	0%	1%
49f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	0%	3%
50	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	10%	6%
51a	Have you been hit, kicked or assaulted since you have been here? (By staff)	0%	1%
51b	Have you been victimised because of your nationality since you have been here? (By staff)	0%	0%
51c	Have you been victimised because of drugs since you have been here? (By staff)	0%	0%
51d	Have you ever been victimised here because you have a disability? (By staff)	0%	0%
51e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	0%	1%
53	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	2%	21%
54	Have you ever felt threatened or intimidated by a member of staff in here?	5%	10%

Residential Unit Comparator

Key to tables

	Any percentage highlighted in green is significantly better	Hummingbird Unit	Avocet, Crane and Dove Units
	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 9: Health services			
56	Is health information available in your own language?	47%	36%
57	Is a qualified interpreter available if you need one during health care assessments?	24%	24%
58	Are you currently taking medication?	40%	47%
SECTION 10: Activities			
60	Are you doing any education here?	1%	11%
62	Can you work here if you want to?	34%	61%
63	Is there enough to do here to fill your time?	46%	55%
64	Is it easy/very easy to go to the library?	81%	85%
65	Is it easy/very easy to go to the gym?	75%	71%
SECTION 11: Keeping in touch with family and friends			
66	Is it easy/very easy to use the phone?	71%	67%
67	Have you had any problems with sending or receiving mail?	9%	19%
68	Have you had a visit since you have been in here from your family or friends?	60%	67%
SECTION 12: Resettlement			
70	Has any member of staff helped you to prepare for your release?	5%	9%