Report on unannounced inspections of the UK short-term holding facilities at

France-UK Borders

by HM Chief Inspector of Prisons
accompanied by the Contrôleür Général des Lieux de Privation de Liberté

25–27 November 2019
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/
# Contents

Introduction 4

About this inspection and report 6

Section 1. Coquelles tourist 7

Section 2. Coquelles freight 17

Section 3. Calais tourist 27

Section 4. Dunkerque 37

Section 5. Summary of recommendations 45

Section 6. Appendices 52
  
  Appendix I: Inspection team 52
  
  Appendix II: Progress on recommendations from the last report 53
  
  Appendix III: Photographs 58
Introduction

The United Kingdom-run short-term holding facilities in France form part of the UK’s ‘juxtaposed controls’, under which the UK Border Force identifies clandestine travellers and those to be refused entry before they leave French territory. These juxtaposed controls are set out in two bilateral agreements: the Sangatte agreement and the Le Touquet agreement. We were accompanied on this inspection by monitors from the French National Preventive Mechanism, Contrôleur général des lieux de privation de liberté (CGLPL).

There are two short-term holding facilities in Coquelles within the secure perimeter of the Eurotunnel site and one at Calais sea port. All three are managed by the private contractor Mitie Care and Custody. A fourth facility in Dunkerque is managed by Eamus Cork Solutions (ECS).

The Coquelles tourist facility holds people who have been travelling on coaches and cars. Around 270 people a month were detained there. A second holding room had been created for children and families to be kept separate from unrelated adults. The Coquelles freight facility holds people who have been found hidden in commercial vehicles in the freight lanes. Approximately 30 detainees a month were detained in the freight holding facility, but an unknown number were also held in vehicles awaiting the arrival of the French border police, Police aux Frontières (PAF).

The Calais tourist facility is used to detain people travelling in cars and coaches boarding ferries to the UK. As the Calais freight facility has been closed for some years, detainees found in commercial vehicles in the Calais freight lanes were now either transferred directly to PAF or held on vehicles, sometimes for considerable periods. Approximately 150 detainees a month were held in the Calais tourist facility. However, around 1,000 detainees had been held in escort vehicles in the three months before our inspection.

The Dunkerque facility holds tourist and commercial travellers stopped at the border. Approximately 160 detainees a month were held there. As no detainees were held during the inspection, we did not see ECS staff managing detainees.

None of the facilities were suitable for lengthy stays and detainees could not easily sleep in them. Length of stay was usually no more than a few hours, but could be prolonged for avoidable reasons. For example, at Calais tourist, people were held for significantly longer than at the similar facility at Coquelles. Detainees sometimes spent a long time waiting to be interviewed, and Border Force staff accepted that the speed of their response was not adequate.

All the detainees we interviewed were positive about their treatment by detention staff. We observed Mitie Care and Custody staff being friendly and reassuring, and they were supportive to distressed detainees. However, detention staff did not always fully explain all provisions, such as the availability of telephones and toiletries, to detainees. Interpreting services were used much less in some facilities than others.

We had serious concerns about some practices at both the Coquelles freight holding facility and in the Calais freight lanes, where people were detained on escort vehicles. In the Calais freight lanes, detainees were routinely held in ECS escort vehicles to await the arrival of PAF. Records showed that about a third of those detained in October 2019 were held for more than an hour in vehicles that were in very poor condition. We were concerned that Border Force could not tell us the legal authority under which these detainees were held. At Coquelles freight, where detainees were also held on vehicles, detention authorities were issued for every person.

Border Force staff in most facilities were alert to the signs of trafficking and aware of their safeguarding duties. However, safeguarding and modern slavery (SAMS)-trained staff were not always available on every shift. At Coquelles freight, we observed weak safeguarding practices for children,
including by SAMS-trained staff. We met a 17-year-old boy with an old gunshot injury who had been detained from a lorry and appeared unwell. Border Force took no action to ensure that the child’s best interests were considered. Neither Border Force nor Mitie Care and Custody staff called for medical attention. The boy was not treated in accordance with either Mitie Care and Custody or Border Force child safeguarding policy, and Border Force staff were insensitive in their interactions with him. At Coquelles tourist, another detained 17-year-old boy was generally treated sensitively by Border Force staff. However, they attempted to serve legal papers on him without the use of professional interpreting.

On release, detainees were handed over to PAF and then often dropped at the port terminal or on the roadside. Calais tourist holding room staff told us they were concerned about the safety of people released in the middle of the night, especially children and women travelling alone who had been passengers on long-departed coaches.

While all facilities had improved and we found detention staff to be generally sensitive and helpful, this inspection found serious concerns around safeguarding and legality of detention. Border Force should ensure that children, injured detainees and those held in vehicles are treated safely, decently and in accordance with the law. The Home Office, Mitie Care and Custody and, through the CGLPL, PAF were all alerted to our concerns following the inspection.

There was no routine oversight from an Independent Monitoring Board (IMB) at the time of the inspection. However, we are pleased to note that an IMB has been designated to monitor the facilities and is planning regular visits. This inspection indicated that such regular monitoring is much needed.
About this inspection and report

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

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

The Contrôleur Général des Lieux de Privation de Liberté (CGLPL) fulfils the responsibility of the French government to establish a national preventive mechanism to independently inspect all places of deprivation of freedom, which arise from its status as signatory to the OPCAT.

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

- **Safety** – that detainees are held in safety and with due regard to the insecurity of their position
- **Respect** – that detainees are treated with respect for their human dignity and the circumstances of their detention
- **Preparation for removal and release** – that detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their country of origin and be prepared for their release, transfer or removal. Detainees are able to retain or recover their property.

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

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

Task of the establishment
To hold those who have been refused entry to the UK or are being questioned by Border Force officers.

Location
Coquelles Eurotunnel approach, France

Name of contractor
Mitie Care and Custody

Last inspection
6-7 July 2016

Summary

1.1 At our inspection in 2016 we made nine recommendations. In this inspection, we found that one recommendation had been achieved, one partially achieved and seven were not achieved.

1.2 The facility was open seven days a week and usually staffed by male and female detainee custody officers (DCOs). Detainees had very short journeys to the holding facilities as they were in the same building as the UK border control point.

1.3 In most instances Border Force officers provided a briefing to DCOs before a detainee’s arrival. Reception and induction arrangements were reasonable.

1.4 DCOs had a general understanding of vulnerability and received annual safeguarding refresher training. They completed vulnerable adult warning forms for at-risk detainees. None had been opened because of possible trafficking, which was surprising given the number of detainees held at a busy border crossing. Mitie Care and Custody had raised no safeguarding concerns with the Home Office in the previous year.

1.5 The Border Force team included safeguarding and modern slavery (SAMS)-trained officers who advised colleagues handling vulnerable cases. Despite our repeated requests, Border Force was unable to produce data on the number of safeguarding referrals made to UK authorities or the French border police, Police aux Frontières (PAF), in the previous year. Detainees were generally released nearby.

1.6 There had been one incident of self-harm in the previous 12 months, which available documentation suggested had been managed professionally. DCOs carried anti-ligature knives and completed a warning form after a self-harm attempt. Male and female detainees were not always held separately, but DCOs had good oversight of detainees at all times. Force was rarely used, with only two instances in the previous 12 months; the available documentation suggested they had been justified and proportionate. DCOs had received training in the Home Office manual for escorting safely (HOMES), which included use of force.

1.7 In the previous three months, 57 children had been held, which was a reduction since our last inspection. Twenty-one had been accompanied and 36 unaccompanied. Children were detained for too long, with both groups held on average for over four hours.
1.8 There was now a dedicated child-friendly room for Border Force to interview children, although it was not always used when appropriate to do so. Mitie Care and Custody also now had a separate family holding room.

1.9 Mitie had raised no child safeguarding concerns with Border Force in the previous year. Despite repeated requests, Border Force was unable to produce data on the number of child safeguarding referrals made to PAF or the UK authorities in the previous year.

1.10 In the previous three months, 816 detainees had been held, for an average of just over three hours – the longest was for 10 hours. We were told that delays in attendance by PAF often prolonged the time that detainees spent at the facility. Detainees had limited access to legal advice.

1.11 The holding rooms were in a good decorative state, and clean and tidy, although there were still no showers, adequate sleeping facilities or natural light and fresh air. Catering arrangements were adequate. There were a limited number of activities to distract detainees held for short stays.

1.12 DCOs were polite and courteous towards detainees. We observed DCOs using professional interpreting services, although the total number of uses appeared low compared with the facility’s throughput. Detainees could practise their religion. The facility was suitable for detainees with mobility needs, and included adapted toilets.

1.13 Detainees could submit written complaints but the forms were not clearly displayed, and the complaints box in the larger room was unlocked.

1.14 DCOs removed all medication from detainees on arrival; they contacted French emergency services as needed but had no access to advice on non-urgent concerns.

1.15 Detainees could telephone family and friends but not contact them by fax, email, video calling or social networks, and they could not use the internet.

1.16 Detainees leaving the facility were either allowed to continue their journey to the UK or were transferred to PAF. Those handed to PAF were then often released into the port or other public area. There was little information to assist detainees, such as embassy contact details.

Safety

Arrival and early days in detention

Expected outcomes:
Detainees travelling to and arriving at the facility are treated with respect and care. Risks are identified and acted on. Induction is comprehensive.

1.17 The short-term holding facility (STHF) based at the Coquelles tourist border control site was run by Mitie Care and Custody on behalf of the Home Office. It was open seven days a week, 24 hours a day. Staffing comprised three detainee custody officers (DCOs) during the week, but this reduced to two at weekends. Despite efforts to ensure a gender mix, we were told this was not always possible, and that the third member of staff could often be redeployed to assist at the adjoining freight facility.
Detainees had very short journeys to the holding facilities as the UK border control point was in the same building. Border Force officers checked the documentation of all passengers travelling on road vehicles through the Channel Tunnel to the UK. Those travelling on coaches were required to disembark and present their travel documentation. People in cars who were stopped for questioning were asked to park their car near the facility. Anybody detained by Border Force officers was then required to walk across to the holding facility and was handed over to Mitie Care and Custody DCOs.

We saw several detainees during our inspection, some of whom had been detained before our arrival. Border Force officers generally provided a briefing to DCOs before the detainee was brought to the holding room. However, we saw Border Force hand over a detainee to DCOs with no briefing, which was poor practice, particularly as the detainee spoke virtually no English.

Reception and induction arrangements were adequate. Staff followed a standard induction checklist covering basic issues about property, food and drink, and available facilities. Detainees’ property was held in the central staff area, where detainees were also searched, but not in private. Tobacco products and lighters were routinely removed, as were some mobile phones (see paragraph 1.65). Toiletry packs were available on request, but this was not sufficiently promoted by staff.

**Recommendation**

**1.21** There should always be a comprehensive handover between Border Force staff and detainee custody officers, which includes all areas of identified risk and vulnerability.

**Safeguarding adults and personal safety**

**Expected outcomes:**
The facility promotes the welfare of all detainees and protects them from all kinds of harm and neglect. The facility provides a safe environment which reduces the risk of self-harm and suicide. Detainees are protected from bullying and victimisation, and force is only used as a last resort and for legitimate reasons.

**1.22** The Border Force team included safeguarding and modern slavery (SAMS)-trained officers. The officer we spoke to was knowledgeable about the risks to detainees of modern slavery. SAMS officers advised colleagues handling cases potentially involving safeguarding or modern slavery issues, but they were not always available on every shift. If none were available officers could call for guidance from SAMS-trained officers in the other holding facilities.

**1.23** Although France had ratified the Council of Europe Convention on Action against Trafficking in Human Beings in 2008, unlike the UK it had yet to create a national referral mechanism to identify and protect victims of human trafficking. We were told that PAF was informed in writing if someone was suspected to be a victim of modern slavery, or if there were other safeguarding concerns. Despite our repeated requests, Border Force was unable to produce data on the number of safeguarding referrals made to PAF in the last year.

**1.24** Border Force in Coquelles could not access the UK national referral mechanism, because of issues of jurisdiction. We were told that in the rare cases where someone was suspected of being a victim of modern slavery and there were no grounds to refuse leave to enter, concerns would be passed to the UK police and/or local authority social services. Border Force was unable to produce data on the number of safeguarding referrals made to UK
authorities in the last year. We were not therefore confident it was collating data that would inform the effectiveness of safeguarding practice.

1.25 Mitie Care and Custody had a national ‘safeguarding vulnerable adults at risk’ standard operating procedure. DCOs had a general awareness of the possibilities of detainees being trafficked or victims of modern slavery. Safeguarding was now part of their annual training programme. They said that they would complete a vulnerable adult warning form and alert Border Force if they had concerns about a detainee’s vulnerability. Mitie Care and Custody collated this data but had made no safeguarding referrals to Border Force in the previous year.

1.26 Fifteen vulnerable adult warning forms had been opened in the previous 12 months. None were opened because of Border Force safeguarding concerns about possible trafficking. We were told that concerns would be forwarded to the Home Office and PAF.

1.27 There had been one incident of self-harm in the facility in the previous 12 months. DCOs carried anti-ligature knives; they completed a warning form if a detainee tried to harm themselves. DCOs said they would show PAF a copy of a completed form.

1.28 DCOs had good oversight of the two holding rooms and could monitor detainees easily. In the previous six months, 29% of detainees were female and 7% were children. There was now a family room where women and children could be held separately. Holding rooms displayed UK telephone helpline numbers for victims of modern slavery and female genital mutilation (FGM).

1.29 DCOs on duty had not witnessed tensions or bullying between detainees but said they would intervene or, in extreme situations, call PAF. Border Force officers said that the driver of a vehicle detained would always be held separately from the people they were carrying to ensure they were safeguarded, while investigations were conducted about the role of the driver and whether they had committed any offence.

1.30 DCOs were trained in the Home Office manual for escorting safely (HOMES) and received refresher training at least every nine months. They carried handcuffs and also had access to waist and leg restraint belts, but had never used them.

1.31 Force had been used twice in the previous year and appeared proportionate from the available information. In the first incident, Mitie Care and Custody DCOs and one Border Force officer were involved. Staff used rigid bar handcuffs to apply pain to ensure compliance of a detainee who was aggressive and threatening self-harm. The Border Force officer did not complete any use of force paperwork. The reviewing officer examined video footage of the incident and concluded that use was reasonable, but that the Border Force officer should not have participated in restraining the detainee. PAF attended the scene reasonably quickly and the detainee was handed over to them.

1.32 In the second incident, various restraint techniques were used, including the application of rigid bar handcuffs to prevent a detainee self-harming. No pain was applied. The use of force appeared justified. The detainee was attempting to choke himself and staff were sufficiently concerned to call an ambulance and PAF, who attended promptly. At the end of the incident, staff noted that the detainee was conscious and did not appear to be injured. A manager reviewed the use of force paperwork and concluded that staff had acted appropriately, but did not view video footage of the incident.
Recommendations

1.33 The French authorities should create a national referral mechanism to identify victims of trafficking.\(^2\) (Repeated recommendation 1.9)

1.34 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review.

Safeguarding children

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

1.35 Fifty-seven children had been held in the previous three months, compared with 91 at our last inspection – 21 were accompanied and 36 were unaccompanied. Children were held for too long. Accompanied children were held for an average of four hours four minutes, unaccompanied children for four hours 34 minutes. The longest single period of detention for an unaccompanied child was eight hours 31 minutes.

1.36 Unaccompanied children were interviewed by SAMS-trained officers, who were alert to the risks they faced, but trained officers were not always available. Although other officers could call for guidance from SAMS-trained officers in the nearby holding facilities, this created a risk that important concerns could be missed. Border Force now had a separate room, outside the facility, where children could be held temporarily on a legal detention authority. The room was also used for interviewing children. It was well decorated and a significant improvement on the previous facilities, although it was not always used when necessary (see below).

1.37 The children’s holding facility run by Mitie Care and Custody had also improved. Children could now be held in a separate family room. The holding room displayed UK telephone helpline numbers for modern slavery and FGM concerns. Children were usually searched using a hand-held metal detector.

1.38 DCOs now received annual safeguarding children training. They opened a care plan for all children, which were basic and mostly in tick-box format.

1.39 We observed one case where neither Mitie Care and Custody nor Border Force staff used telephone interpreting with an unaccompanied 17-year old boy who spoke little English. A Border Force officer came to the family holding room to explain to the boy the reasons leave had been refused. We asked the boy if he understood what was being said to him and he said he did not. The officer then tried to use Google Translate, and it was only at our prompting that professional telephone interpreting was used (see recommendation 1.62). Nonetheless, in the same case, there was good liaison between the boy’s carer, who was waiting outside the facility, his parents and PAF, which helped ensure he was released to safe accommodation.

1.40 Mitie Care and Custody had raised no child safeguarding concerns with the Home Office in the previous year. If a child was granted leave to enter the UK, but officials had safeguarding

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\(^2\) This recommendation is made by the CGLPL to the French Ministry of Social Affairs and Health.
concerns, they would pass these on to relevant UK authorities. If leave to enter was refused, Border Force informed PAF in writing that the detainee was a child. Despite repeated requests, Border Force was unable to produce data on the number of safeguarding referrals made to UK authorities or PAF in the last year. (See recommendation 1.34.)

Recommendation

1.41 Safeguarding and modern slavery (SAMS)-trained officers should interview all unaccompanied children so that safeguarding concerns can be identified and acted on promptly, and appropriate referrals made to the Police aux Frontières.

Legal rights

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

1.42 A small amount of information about detainees’ legal options, including claiming asylum in France, was displayed in the holding rooms. An Office of the Immigration Services Commissioner poster displayed a UK national helpline number for detainees wishing to find a UK adviser. There was a small notice in English from the Catholic charity ‘Caritas’, for detainees wanting advice on claiming asylum (see paragraph 1.70).3

1.43 Legal documentation given to detainees was completed accurately but was not translated. In one case a child would not have understood why he was refused leave to enter if inspectors had not intervened (see paragraph 1.39). We also saw another detainee who spoke little English and had little understanding of why he was being detained.

1.44 During the previous three months, 816 detainees had been admitted to the holding facility. The average length of detention was three hours five minutes and the longest period was 10 hours. We were told that detention could be prolonged by delays in PAF attending the facility.

Recommendations

1.45 All detainees should be able to receive independent legal advice on both French and UK law, and information on how to access such advice should be displayed in holding rooms.

1.46 Legal documentation should be explained to detainees in a language they understand, using professional interpreting where necessary.

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3 Caritas is a Catholic charity which provides crisis support and services to migrants and asylum-seeker in many countries. More details can be found at: https://www.caritas.org/who-we-are/
Respect

Accommodation and facilities

Expected outcomes:
Detainees are held in a safe, clean and decent environment. They are offered varied meals according to their individual requirements. The facility encourages activities to promote mental well-being.

1.47 The facility was reasonably clean. Since our previous inspection, the holding room had been extended to create a smaller second room, which was now the designated family room. The other room was used for single adults. We were told that unrelated male and female detainees could be held together in the adult room, but only following an individual risk assessment.

1.48 Both holding rooms were in reasonably good condition having been recently decorated, although neither had any natural light. DCOs complained that a drain in the centre of the family room often became blocked leading to a backflow of sewage and human waste. We read an incident report where this had happened, leading to detainees having to be evacuated from the room.

1.49 The larger holding room had 11 fixed moulded plastic chairs and one recliner-type chair. There were no other sleeping facilities. Blankets and pillows were provided, but they were not fresh for each new detainee. There were no showers or towels. Some toiletries were available on request but were not routinely offered. The toilets were private and reasonably clean. Sanitary products were freely available.

1.50 Catering arrangements were adequate and included a hot drinks vending machine and cold-water fountain in the holding room, with snacks freely available. Staff provided a reasonable selection of microwave meals, including vegetarian and halal options.

1.51 There were a limited number of activities and distractions to occupy short-stay detainees, but these were insufficient for anyone detained for more than a few hours. There was a wall-mounted television, and some magazines and books, but they were predominantly in English and the magazines were several months old. There were no newspapers. Detainees had no access to outside space for exercise in the fresh air, although DCOs said Border Force staff sometimes facilitated the opportunity for them to smoke.

1.52 The family room was smaller with only eight chairs, and felt cramped. There was no vending machine, but bottled water was available. Staff provided detainees with hot drinks. There had been efforts to soften the environment in the family room, including some wall art and toys, colouring books, crayons and a DVD facility. Baby changing facilities were also provided, and there was a stock of baby food and nappies.

Recommendation

1.53 Detainees held for more than a few hours should have access to the fresh air.
Respectful treatment

**Expected outcomes:**
Detainees are treated with respect by all staff. Effective complaints procedures are in place for detainees. There is understanding of detainees’ diverse cultural backgrounds. Detainees’ health care needs are met.

1.54 We observed DCOs engage with several detainees. In all cases they were polite and courteous, and mindful of detainees’ anxiety and stress. Detainees spoke positively about their treatment by DCOs. In one case, a DCO made the effort to provide an update to a detainee’s pregnant partner who was waiting for him in the passport control area. He also gave her some food and drink, and ensured the detainee was made aware of her safety and well-being.

1.55 We also observed Border Force staff engage with detainees professionally and politely. However, in one case a Border Force officer told a detainee in the presence of another that he would not be permitted entry into the UK, rather than providing this sensitive information in a private space.

1.56 In the previous three months, the most common countries of origin for detainees held were Albania (16%), Afghanistan (7%) and Romania (6%). Staff were aware of the professional telephone interpreting service, and we observed them use it competently for one detainee. However, the service had been used 74 times in the previous 12 months, which seemed low for the high throughput of detainees.

1.57 DCOs confirmed they attended an annual one-day refresher course that covered diversity and equality. Detainees could practise their religion. Religious artefacts, including prayer mats, were available and stored respectfully. Signs indicating the direction of Mecca had been misprinted and were confusing.

1.58 DCOs were aware of the need to open a disability care plan for any disabled detainees, and vulnerable adult warning forms for those with other vulnerabilities. In the previous 12 months, no disability care plans had been opened, but 15 vulnerable adult warning forms had been completed. The detail in the completed forms we reviewed was superficial. The facility was adequate for detainees with mobility needs, although the family room was narrow and cramped. There were adapted toilets in both rooms.

1.59 Complaint forms were available but not prominently displayed. Forms in English and a wide range of languages were kept in unmarked folders in both holding rooms, with child-friendly versions in the designated family room. The complaints box in the larger room was unlocked, and a dummy complaint we submitted was not acknowledged until 11 days later. In the previous 12 months, no complaints had been submitted.

1.60 DCOs removed medication from detainees while they were in the holding facility. Previously DCOs could obtain advice from a telephone health service before issuing medicines, but now it was their responsibility to judge whether they should provide the medication; in practice, this made it very unlikely that detainees would be able to retain their medication. The procedure for calling emergency services remained protracted due to the requirements of getting on to a restricted site; this required authorisation from Border Force.

1.61 A defibrillator, located in the hall next to the holding rooms, was in good working order and its pads were in date. The checks on equipment were not daily, as specified by the on-site paperwork; less frequent checks were required at other sites. Border Force and Mitie Care and Custody staff were trained in life support, including in the use of defibrillators.
Recommendations

1.62 Professional interpreting services should be used to communicate with detainees who are not fluent in English.

1.63 Home Office complaint forms and Mitie Care and Custody feedback forms should be prominently located in the holding rooms.

1.64 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues.

Preparation for removal and release

Communications

Expected outcomes:
Detainees are able to maintain contact with the outside world using a full range of communications media.

1.65 Detainees could maintain contact with the outside world by telephone but not by any other means. DCOs removed mobile phones from detainees if they had an integral camera. They were permitted to leave the holding rooms to use their telephone in the staff area, which meant they had no privacy. Detainees without a mobile telephone were offered the use of the office telephone to call friends, family and legal advisers.

1.66 DCOs also said that they could lend mobile phones to detainees to use with their own SIM cards if requested. Since our last inspection the payphones had been removed from the holding rooms, which meant that detainees could no longer receive any incoming calls.

1.67 Detainees could not use email, social networks, the internet or video calling, there were no fax facilities and they could not receive visitors or legal representatives.

Recommendation

1.68 All detainees should have access to email, fax and internet facilities for communication and information purposes. (Repeated recommendation 1.31)

Leaving the facility

Expected outcomes:
Detainees are prepared for their release, transfer or removal. They are able to retain or recover their property. Families with children and others with specific needs are not detained without items essential for their welfare.

1.69 Detainees released from the facility were either allowed to continue their journey to the UK or were transferred to PAF. Those handed over to PAF were then often released into the port or other public areas.
1.70 A notice in the holding rooms said that Caritas could provide ‘all the things exiles needed to sleep rough’, and that Caritas ran a day centre, but did not give its address. There was no other information to assist detainees, such as embassy contact details or how to claim asylum. Caritas informed the CGLPL that it could not remember anyone contacting it from the holding facilities.

1.71 Staff said many detainees knew they would be released shortly after their transfer to PAF, and it was understood that they would try to enter the UK again.

Recommendation

1.72 Detainees should be given accurate information on support agencies and on how to claim asylum in France.
Section 2. Coquelles freight

**Task of the establishment**
To hold people with no right of entry into the UK before transfer to the French border police.

**Location**
Coquelles Eurotunnel approach, France

**Name of contractor**
Mitie Care and Custody

**Last inspection**
6-7 July 2016

**Summary**

2.1 At our inspection in 2016 we made eight recommendations. In this inspection, we found that two recommendations had been achieved, one was partially achieved and five were not achieved.

2.2 The facility was open seven days a week and usually staffed by male and female detainee custody officers (DCOs). The Coquelles freight facility held people found hidden in commercial vehicles in the freight lanes. Detainees had very short journeys to the holding facility, which was located near the freight lanes.

2.3 Most detainees were not held in the facility but in escort vans parked outside to await collection by the Police aux Frontières (PAF). During the inspection a group of Iraqi detainees, including a child, were held outside in a van for about an hour before being admitted to the facility. This was far too long and only happened after inspectors repeatedly queried why they were not being brought into the facility. There was inadequate use of professional telephone interpreting services.

2.4 DCOs had a general understanding of vulnerability and received annual safeguarding refresher training. However, only one vulnerable adult warning form had been opened for detainees considered to be at risk in the previous year. There were no recorded concerns about suspected trafficking.

2.5 In practice, most detainees had little meaningful contact with Border Force officers, which limited the scope for identifying safeguarding issues. Despite our repeated requests, Border Force was unable to produce data on the number of safeguarding referrals made to PAF in the previous year.

2.6 There had been one incident of self-harm in the previous 12 months, which also involved the only recorded use of force. The incident had been handled professionally and the force used was proportionate. DCOs had received training in the Home Office manual for escorting safely (HOMES), which included use of force. Male and female detainees were not always held separately, but DCOs had good oversight of detainees at all times.

2.7 We had serious concerns about child safeguarding practices at Coquelles freight. Neither Mitie Care and Custody nor the Border Force kept adequate records of children in their care. Mitie Care and Custody did not record the age of most detainees held. In the previous three months, it had no record of detaining any children. However, in the previous year, 63
child care plans had been opened. Mitie Care and Custody had raised no child safeguarding concerns with the Home Office in this period. Border Force was unable to produce data on the number of safeguarding referrals made to PAF in the past year.

2.8 We observed poor safeguarding practices for children, including by safeguarding and modern slavery (SAMS)-trained staff. A 17-year-old child with a gunshot injury had been detained from a lorry and appeared unwell. Border Force took no safeguarding action to ensure that the child’s best interests were considered, and neither they nor Mitie Care and Custody staff called for medical attention.

2.9 Little useful information about detainees’ legal options was displayed in the holding room. Detention paperwork was not completed correctly. In the previous three months, 91 detainees had been admitted to the holding facility. The average length of detention was two hours 55 minutes and the longest detention was for 10 hours 30 minutes. No data were collated for detainees held outside in vans. We were told that delays in attendance by PAF often prolonged the time that detainees spent at the facility.

2.10 The facility was new and had replaced the unsuitable former holding rooms. It provided much improved conditions. There were now two holding rooms – a larger one for general use and a smaller one intended for families and children. Both were in reasonably good condition and clean, although they had no natural light. There were still no showers or adequate sleeping facilities. Catering arrangements were adequate. There were a limited number of activities to distract detainees held for short stays. Detainees could access religious artefacts.

2.11 DCOs were polite in their interactions with the detainees but did not induct them into the holding room. Border Force staff showed little sensitivity when interviewing the child. Detainees in the group spoke little English but telephone interpreting was not used. DCOs removed all medication from detainees on arrival; they contacted French emergency services as needed but had no access to advice on non-urgent concerns.

2.12 Home Office complaint forms and Mitie Care and Custody feedback forms were available but not prominently displayed. We submitted a dummy complaint on the first day of the inspection. It was acknowledged nearly two weeks later, on 7 December.

2.13 We did not see detainees offered use of a telephone when they were admitted to the holding room. Detainees could not communicate by fax, email, video calling or social networks, and they could not use the internet.

2.14 Detainees were generally transferred to PAF and usually released into the port or other public areas shortly after. There was little information to assist detainees, such as embassy contact details or how to claim asylum in France.

Safety

Arrival and early days in detention

Expected outcomes:
Detainees travelling to and arriving at the facility are treated with respect and care. Risks are identified and acted on. Induction is comprehensive.

2.15 The short-term holding facility (STHF) based at the Coquelles freight border control site was run by Mitie Care and Custody on behalf of the Home Office. It was open seven days a
week, 24 hours a day. Staffing comprised a minimum of three detainee custody officers (DCOs) during the week and two at weekends. The facility held people who had been found hidden in commercial vehicles in the freight lanes attempting to enter the UK clandestinely.

2.16 Detainees were transferred to the holding facility from the freight lanes a short distance away. Mitie Care and Custody vans used for the transfer were adequate for the short journey times. DCOs told us that, in most cases, detainees were not moved into the holding rooms as they were promptly collected by the French border police, PAF, direct from the escort vehicles. DCOs thought that collection usually took little more than 15 minutes. However, unlike at Calais freight, we were not provided with records on the time detainees spent on vehicles (see paragraph 2.25 and recommendation 2.31).

2.17 During our inspection, a group of 11 people, including a child, were discovered in the back of a lorry. They were initially searched in the freight shed area by Border Force staff. After about an hour, they were driven in an escort vehicle to the holding facility but remained outside in the vehicle awaiting the arrival of PAF. DCOs told us that if detainees wanted to use the toilet while still on the escort vehicle, they would be permitted to disembark and use the toilets one at a time. It was a further hour before they were finally admitted to the holding room because PAF had not arrived. They were not given any form of induction into the holding area, but were provided with snacks and drinks.

Recommendation

2.18 Detainees awaiting the arrival of the Police aux Frontières (PAF) should be admitted into the holding facility after a short and specified period of time.

Safeguarding adults and personal safety

Expected outcomes:
The facility promotes the welfare of all detainees and protects them from all kinds of harm and neglect. The facility provides a safe environment which reduces the risk of self-harm and suicide. Detainees are protected from bullying and victimisation, and force is only used as a last resort and for legitimate reasons.

2.19 We had serious concerns about adult safeguarding practices. The Border Force team included safeguarding and modern slavery (SAMS)-trained officers, but these officers were not available on every shift. The SAMS-trained officer we spoke to had poor awareness of safeguarding issues; for example, the officer had not heard of the national referral mechanism, used in the UK to identify, protect and support victims of trafficking.

2.20 In practice, all detainees found in the freight lanes were handed over to PAF. Bio-data were rarely taken and few detainees were interviewed by the Border Force, which limited the scope for identifying safeguarding issues. Although France had ratified the Council of Europe Convention on Action against Trafficking in Human Beings in 2008, unlike the UK it had yet to create a national referral mechanism to identify and protect victims of human trafficking. We were told that PAF was informed in writing if someone was suspected to be a victim of modern slavery, or if there were other safeguarding concerns. Despite our repeated requests, the Border Force was unable to produce data on the number of safeguarding referrals made to PAF in the previous year.

2.21 Mitie Care and Custody had a national ‘safeguarding vulnerable adults at risk’ standard operating procedure. DCOs had a general awareness of the possibilities of detainees being
trafficked or victims of modern slavery. Safeguarding was now part of their annual training programme.

2.22 Mitie Care and Custody staff said that they would complete a vulnerable adult warning form and alert the Border Force and PAF if they had concerns about a detainee’s vulnerability. However, only one such form was opened in the previous year, for a pregnant woman. No warning forms had been opened for suspected trafficking and no trafficking concerns were noted in Mitie Care and Custody incident logs. In the same period, Mitie Care and Custody had not raised any safeguarding concerns with the Home Office. We did not consider it credible that this reflected the level of vulnerability of detainees in their care (see case study below).

2.23 Mitie Care and Custody and Border Force told us that they could see the same detainees several times, as they made repeated attempts to enter the UK. There were no attempts to engage with the group we observed (see case study) and explain the dangers faced by people seeking to enter the UK clandestinely.

2.24 Holding room facilities were much improved, with a main holding room and a family room where women and children could be held separately. The lighting of the staff area meant that DCOs could see little apart from their own reflection in the main holding room window, but there was good CCTV coverage of both rooms. Detainees could summon help by knocking on the window to the staff area. Holding rooms displayed UK telephone helpline numbers for victims of modern slavery and female genital mutilation (FGM).

2.25 It was a concern that many detainees were not held in the facility but in vans. Mitie Care and Custody did not show us monitoring information on the number of detainees held on vans or the times they were held, although we were later told that such information exists. DCOs told us that most detainees were held on vans, and far fewer were held in the holding facility than in the other facilities we inspected. As detainees held on vans were not inducted by Mitie Care and Custody staff or interviewed by Border Force, there was an increased risk that vulnerabilities would not be identified.

2.26 There had been one incident of self-harm in the facility in the previous 12 months. DCOs carried anti-ligature knives and completed warning forms if they were concerned a detainee might harm themselves. DCOs said they would show PAF a copy of a completed form, but it was unclear what was done with this information.

2.27 DCOs on duty had not witnessed tensions or bullying between detainees but said they would intervene or, in extreme circumstances, call PAF. Border Force officers said that the driver of a vehicle detained would always be held separately from the people they were carrying.

2.28 DCOs were trained in the Home Office manual for escorting safely (HOMES) and received refresher training at least every nine months. DCOs had access to waist and leg restraint belts but had never used them. Force had been used once in the past year on a detainee attempting to self-harm. He was held in rigid bar handcuffs for five minutes before he was delivered into the custody of PAF. Use of force paperwork been completed properly and indicated that the force used was proportionate.
Recommendations

2.29 The French authorities should create a national referral mechanism to identify victims of trafficking.4

2.30 All detainees should be interviewed to establish any safeguarding concerns and facilitate appropriate referrals.

2.31 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review.

Safeguarding children

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

2.32 We had serious concerns at Coquelles freight about the treatment of an unwell 17-year-old boy (see case study).

2.33 Neither Mitie Care and Custody nor Border Force kept adequate records of children in their care. There was no record of detainees held on vehicles, some of whom were very likely to have been children. Mitie Care and Custody did not record the age of most detainees held in the facility in its day log.5 In the previous three months, it had no record of detaining any children there, and no children’s care plans had been opened in the same period. It was not credible that no children had been held during the previous three months. However, over the previous year, 63 child care plans had been opened. Mitie Care and Custody had raised no child safeguarding concerns with the Home Office in this period.

2.34 Most detainees, whatever their age, were not interviewed by Border Force officers (see paragraph 2.25). In the case we observed, the Border Force did not even take the name of a child (see case study). We were told that Border Force would pass on safeguarding concerns to PAF. Despite repeated requests, the Border Force was unable to produce data on the number of safeguarding referrals made to PAF in the previous year. (See recommendation 2.31.)

2.35 Holding room facilities for children had improved significantly. The holding room displayed numbers for modern slavery and FGM helplines. Children handed to PAF direct from the vehicles received no induction interview from Mitie Care and Custody staff.

Case study

A 17-year-old boy was detected in the back of a lorry with 10 Iraqi men. His 21-year-old brother and a cousin were among the group of detainees. From the outset he was identified as a minor. While still in the freight shed, it emerged that he had a gunshot injury, sustained one or two months previously, and that another cousin had been shot dead. His leg was swollen and heavily bandaged, and he appeared to be in considerable discomfort. No medical assistance was called. Mitie Care and Custody staff later offered to call for such assistance, which was refused by the boy and his family members.

4 This recommendation is made by the CGLPL to the French Ministry of Social Affairs and Health.

5 DCOs are required to maintain a log of all detainees in their care, and should record each detainee’s gender, age and how long they are held.
Border Force eventually conducted an age assessment at Mitie’s prompting. Neither of the Border Force officials making the assessment was a higher officer, but one was SAMS-trained. The assessment was not conducted sensitively. On entering the holding room, they told the boy, who was with his brother and cousin, to drop his trousers and show them his wound. His trousers were left at his ankles while they clarified his date of birth, which they accepted made him 17. The age assessment did not appear to affect any aspect of the boy’s subsequent treatment.

When PAF arrived, they offered to take the boy to the hospital, but the boy and his brother declined again. Neither Mitie Care and Custody nor Border Force staff informed PAF that his cousin had been killed, which could have been relevant to any subsequent asylum claim. PAF told us the next day that the group, including the boy, had been released. Border Force had no note of the boy’s name.

Recommendation

2.36 All children should be interviewed by safeguarding and modern slavery (SAMS)-trained officers, so that safeguarding concerns can be identified and acted on promptly, with referrals made to PAF where necessary.

Legal rights

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

2.37 A small amount of information about detainees’ legal options, including claiming asylum in France, was displayed in the holding rooms. An Office of the Immigration Services Commissioner poster displayed a UK national helpline number for detainees wishing to find a UK adviser. There was a small notice in English from the Catholic charity ‘Caritas’, for detainees wanting advice on claiming asylum (see paragraph 2.63).

2.38 Detainees may have had protection concerns, but were given no useful information about claiming asylum in France, or the possibility of their removal back to France or another third country if they reached the UK.

2.39 There was no payphone in the holding rooms. Although mobile phones were available, detainees were not always informed about them (see paragraph 2.60). There were few legal safeguards for detainees held on vans and not taken into the facility. Documents authorising detention (IS91) were poorly completed. The IS91s prepared for the 11 detainees held during the inspection stated their nationality but otherwise were left blank, with no names, dates of birth or other personal details. The only identifying feature was a photograph of each detainee, although in the case of the child who was held staff had mistakenly attached a photograph of another detainee to his document. His IS91 also stated that he was 17.

2.40 During the previous three months, 91 detainees had been admitted to the holding facility. The average detention was two hours 55 minutes, and the longest detention was for 10 hours 30 minutes.

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6 Caritas is a Catholic charity which provides crisis support and services to migrants and asylum-seeker in many countries. More details can be found at: https://www.caritas.org/who-we-are/
Recommendations

2.41 Documentation authorising detention (IS91s) should be completed in full. (Repeated recommendation 2.14)

2.42 Detainees should be kept informed about what is happening to them.

2.43 All detainees should be able to receive independent legal advice on both French and UK law.

Respect

Accommodation and facilities

Expected outcomes:
Detainees are held in a safe, clean and decent environment. They are offered varied meals according to their individual requirements. The facility encourages activities to promote mental well-being.

2.44 The former Coquelles freight facility, which was unfit for purpose, was no longer in use. The new facility provided much improved conditions. There were now two holding rooms – a larger one for general use and a smaller one intended for families and children. Both holding rooms were in reasonably good condition and clean, although they had no natural light.

2.45 There were 19 fixed moulded plastic chairs in the larger holding room and one bean bag. Some pillows and blankets were laid out on seats but there were no other sleeping facilities. There were no showers or towels. Some toiletries were available on request but were not routinely offered. The toilets were private. Sanitary products were freely available in the toilets in the family holding room only.

2.46 Detainees were provided with bottled water, hot drinks and a range of snacks, and microwave meals were available, but there were no tables to eat or drink at.

2.47 There were a few activities and distractions for detainees. There was a television, although it was turned off while the detainees were in the holding room, and a few magazines, including some in foreign languages. No books or newspapers were provided. Detainees had no access to outside space for exercise in the fresh air or to smoke.

2.48 The family room was similar but with fewer chairs. Toys and other activities for children had been provided, but there were no baby changing facilities.

Recommendation

2.49 Detainees held for more than a few hours should have access to the fresh air.
Respectful treatment

Expected outcomes:
Detainees are treated with respect by all staff. Effective complaints procedures are in place for detainees. There is understanding of detainees’ diverse cultural backgrounds. Detainees’ health care needs are met.

2.50 DCOs were polite in their interactions with the detainees. Professional telephone interpreting services were not used during the inspection but had been used 21 times in the previous 12 months, which appeared low for the number of detainees held. Border Force staff did not engage with a young detainee sufficiently sensitively (see case study above).

2.51 Detainees could practise their religion. Religious artefacts, including prayer mats, were available and stored respectfully. Signs indicating the direction of Mecca had been misprinted and were confusing. Halal meals were available for detainees. DCOs confirmed they attended an annual one-day refresher course that covered areas such as diversity and equality.

2.52 DCOs were aware of the need to open a disability care plan for any disabled detainees, and vulnerable adult warning forms for those with other vulnerabilities. Only one vulnerable adult care plan had been opened in the previous year, which had little information about the detainee’s needs. The facility was not adequate for detainees with mobility needs and there were no obvious adaptations, such as accessible toilets.

2.53 Home Office complaint forms and Mitie Care and Custody feedback forms were available but not prominently displayed. Forms in English and a wide range of other languages were kept in unmarked folders in both holding rooms, with child-friendly versions in the designated family room. DCOs said that the boxes were emptied daily by Home Office staff. We submitted a dummy complaint on the day of the inspection, which had not been acknowledged at the time this report was completed several weeks later. In the previous 12 months, no complaints had been submitted.

2.54 DCOs removed medication from detainees while they were in the holding facility. Previously DCOs could obtain advice from a telephone health service before issuing medicines, but now it was their responsibility to judge whether they should provide the medication; in practice, this made it very unlikely that detainees would be able to retain their medication. The procedure for calling emergency services remained protracted due to the requirements of getting on to a restricted site; this required authorisation for Border Force senior staff to escalate the request.

2.55 A defibrillator was now located in a building next to the holding facility; it was in good working order and pads were in date. There was a record of weekly checks. Border Force and detention staff confirmed that they were trained in life support. We were not confident that detainees’ health issues would be addressed due to the lack of identification of individuals or use of interpreting services used when communicating with those with little or no English.

Recommendations

2.56 Professional interpreting services should be used to communicate with detainees who are not fluent in English.

2.57 Border Force staff should engage with detainees with professionalism and sensitivity.
2.58 Home Office complaint forms and Mitie Care and Custody feedback forms should be prominently located in the holding rooms.

2.59 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues.

Preparation for removal and release

Communications

Expected outcomes:
Detainees are able to maintain contact with the outside world using a full range of communications media.

2.60 Detainees could maintain contact with the outside world by telephone but not by other means. DCOs removed mobile phones from detainees if they had an integral camera and said they lent them a mobile phone for use with their own SIM cards. Detainees without a mobile telephone could be offered the use of the office telephone to call friends, family and legal advisers. However, telephones were not offered to detainees held during the inspection.

2.61 Detainees could not use email, social networks, the internet or video calling, but a fax machine was available for their use.

Recommendation

2.62 Detainees should be given access to telephone, email, fax and internet facilities.

Leaving the facility

Expected outcomes:
Detainees are prepared for their release, transfer or removal. They are able to retain or recover their property. Families with children and others with specific needs are not detained without items essential for their welfare.

2.63 The detainees we saw had little luggage and their clothes were filthy. There was no stock of basic clothing they could change into. DCOs had little information about support agencies that could help detainees. A notice in the holding rooms said that Caritas could provide ‘all the things exiles needed to sleep rough’, and that Caritas ran a day centre, but did not give its address. There was no other information to assist detainees, such as embassy contact details or how to claim asylum. Caritas informed the CGLPL that it could not remember anyone contacting it from the holding facilities.

2.64 When PAF assumed custody of the detainees, Mitie Care and Custody staff advised them that one of the detainees was a minor and that he had an injury. All the detainees were subsequently released, which was common practice. There was a tacit expectation that they would make further attempts to cross the border.
Recommendation

2.65 Detainees should be given accurate information on French support agencies and on how to claim asylum in France.
**Section 3. Calais tourist**

**Task of the establishment**
To hold people who have been refused entry to the UK or who are being questioned by the UK Border Force.

**Location**
Calais, France

**Name of contractors**
Mitie Care and Custody
Eamus Cork Solutions

**Last inspection**
6-7 July 2016

**Summary**

3.1 At our inspection in 2016 we made seven recommendations; at this inspection we found that none of these had been achieved.

3.2 The facility was open seven days a week and usually staffed by male and female detainee custody officers (DCOs). Detainees had very short journeys to the holding facilities as the UK/French border control point and point of apprehension were in the same building. Reception and induction arrangements were adequate. DCOs were aware that a professional telephone interpreting service was available and it had been used 174 times in the previous year.

3.3 The Border Force team included safeguarding and modern slavery (SAMS)-trained officers who advised colleagues when handling vulnerable cases. Despite repeated requests, the Border Force was unable to produce data on the number of safeguarding referrals made to UK authorities or the French border police, Police aux Frontières (PAF), in the previous year.

3.4 DCOs had a general understanding of vulnerability and received annual safeguarding refresher training. They completed vulnerable adult warning forms for at-risk detainees. In the year to October 2019, Border Force had opened two such forms as a result of safeguarding concerns about possible trafficking, which appeared low for a busy border crossing. Mitie had raised no safeguarding issues with the Home Office in the previous year.

3.5 There had been no self-harm incidents in the previous 12 months. DCOs carried anti-ligature knives; they completed a warning form if there were concerns that someone might self-harm. Male and female detainees were not always held separately, but DCOs had good oversight of detainees at all times. Force had not been used in the previous 12 months. DCOs had received Home Office manual for escorting safely (HOMES) training, including the use of force.

3.6 Fifty-one children had been held in the facility in the previous three months — 19 were accompanied and 32 were unaccompanied. Children were held too long, and much longer than in the similar facility in Coquelles. Accompanied children were held for an average of six hours 46 minutes; unaccompanied children were held for an average of five hours 39 minutes.
3.7 There were significant delays in Border Force completing interviews, and its staff accepted that their responses were not sufficiently speedy. During the previous three months, 461 detainees had been held in the facility. The longest detention in Calais was 16 hours and the average detention was five hours 28 minutes. This was much longer than in the similar facility in Coquelles (where the longest detention was 10 hours and average detention about three hours). We were also told that delays in attendance by PAF often prolonged the time that detainees spent at the facility.

3.8 The facility had a main holding room and a smaller room for families with children. The holding rooms were relatively new and in good decorative state, but had no natural light or fresh air. Both rooms had some blankets and pillows. The larger room had a shower, although it was locked during our inspection and it was unclear how detainees would know of its availability. Catering arrangements were adequate. There were a few activities to distract detainees held for short stays.

3.9 We observed DCOs engage with one female detainee during the inspection. They were polite and courteous, and mindful of her likely anxiety and stress. She was positive about the treatment she received.

3.10 Detainees could access religious texts and artefacts. Although vulnerable adult warning forms had little detail, they had been opened for more diverse reasons than we usually see.

3.11 Detainees could submit written complaints, although the forms were not clearly displayed. We submitted a dummy complaint on the day of the inspection and the Home Office acknowledged it within 24 hours.

3.12 DCOs removed all medication from detainees on arrival; they contacted French emergency services as needed but had no access to advice on non-urgent concerns.

3.13 Detainees could telephone family and friends. However, the detainee we met said she was unaware of how to make any calls and that this had not been explained to her on arrival. Detainees could not communicate by fax, email, video calling or social networks, and they could not use the internet.

3.14 Detainees leaving the facility were either allowed to continue their journey to the UK or were transferred to PAF. Calais tourist holding room staff told us they were concerned about the safety of people released in the middle of the night, especially children and women travelling alone who had been passengers on long-departed coaches. Those transferred to PAF were often dropped at the port terminal or on the roadside.

### Calais freight lanes

3.15 We had serious concerns about some detention practices at the Calais freight lanes. Detainees were routinely held in ECS escort vehicles to await the arrival of PAF. Unlike at Coquelles freight, where an authority to detain notification (IS91) was issued for people held in vehicles, none of the detainees in the Calais freight lanes were held with an authority to detain. Border Force staff could not tell us the legal authority under which these detainees were held.

3.16 Few detainees held in vehicles were interviewed. Over 1,000 people had been held in the freight lanes in the previous three months – 38% were held for an hour or more in vehicles that were in very poor condition, for example with ripped-out seats.
Calais tourist

Safety

Arrival and early days in detention

Expected outcomes:
Detainees travelling to and arriving at the facility are treated with respect and care.
Risks are identified and acted on. Induction is comprehensive.

3.17 The short-term holding facility (STHF) at the Calais port site was run by Mitie Care and Custody on behalf of the Home Office. It was open seven days a week, 24 hours a day and was staffed by two detainee custody officers (DCOs), one male and one female.

3.18 Detainees had very short journeys to the holding facilities as the UK border control point was in the same building. Border Force officers checked the documentation of all passengers travelling by ferry to the UK. Foot and coach passengers who were detained were then required to walk to the holding facility, while those in their own cars could drive the short distance to the facility.

3.19 Only one detainee was held during our inspection, and she had arrived before us so we were unable to observe her induction. DCOs described a reasonable induction process, which followed a standard checklist covering basic issues about property, food and drink, and available facilities. Staff examined the IS91 authority to detain and gave detainees a rub-down search, which took place by the side of the entrance area; this offered limited privacy as other detainees may have been able to observe the search. Detainee property was checked by Border Force staff and then held securely by DCOs. Tobacco products and lighters were routinely removed, as were some mobile phones (see paragraph 3.61).

3.20 DCOs were aware of the professional telephone interpreting service available and said they would use it when required.

Safeguarding adults and personal safety

Expected outcomes:
The facility promotes the welfare of all detainees and protects them from all kinds of harm and neglect. The facility provides a safe environment which reduces the risk of self-harm and suicide. Detainees are protected from bullying and victimisation, and force is only used as a last resort and for legitimate reasons.

3.21 The Border Force team included safeguarding and modern slavery (SAMS)-trained officers. The officer we spoke to was knowledgeable about the risks of modern slavery to detainees. SAMS officers advised colleagues when handling cases potentially involving safeguarding or modern slavery issues. SAMS-trained officers were available on every shift.

3.22 Although France had ratified the Council of Europe Convention on Action against Trafficking in Human Beings in 2008, unlike the UK it had yet to create a national referral mechanism to identify and protect victims of human trafficking. We were told that PAF was informed in writing if there was a concern that someone might be a victim of modern slavery, or if there were other safeguarding concerns.
3.23 Border Force in Calais could not access the UK national referral mechanism, because of issues of jurisdiction. If someone was suspected of being a victim of modern slavery, but there were no grounds to refuse leave to enter, concerns would be passed to the UK police and/or local authority social services. Despite repeated requests, the Border Force was unable to produce data on the number of safeguarding referrals made either to PAF or the UK authorities in the previous year. We were not therefore confident it was collating data which could inform the effectiveness of safeguarding practice.

3.24 Mitie Care and Custody had a national ‘safeguarding vulnerable adults at risk’ standard operating procedure. DCOs were not familiar with the details of this policy, which was not held in the facility. They talked in general terms about the possibilities of detainees being trafficked or victims of modern slavery. Safeguarding was now part of their annual training programme.

3.25 DCOs said that they would alert Border Force if they had safeguarding concerns about a detainee, but had not made any safeguarding referrals to Border Force in the previous year. Mitie Care and Custody staff told us they would complete a vulnerable adult warning form and alert the Border Force if they had concerns about a detainee’s vulnerability. Thirteen vulnerable adult warning forms had been opened in the previous 12 months. In two cases, warning forms had been completed after Border Force passed on modern slavery concerns (see paragraph 3.55). We were told that any concerns would be forwarded to PAF.

3.26 There had been no incidents of self-harm in the facility in the previous 12 months. DCOs carried anti-ligature knives and completed a warning form if there were concerns a detainee might harm themselves. DCOs said they would show PAF a copy of a completed form, but it was not clear what was done with the information thereafter.

3.27 DCOs had good oversight of the two holding rooms and could monitor detainees easily. A third of detainees in the previous three months were female and 11% were children. Woman could be held separately if there were no unrelated children in the family room. Holding rooms displayed a UK telephone helpline number for victims of modern slavery and female genital mutilation (FGM).

3.28 The DCOs we spoke to had not witnessed tensions or bullying between detainees but said they would intervene or, in extreme situations, call PAF. Border Force officers said that the driver of a vehicle detained would always be held separately from the people they were carrying, to ensure they were safeguarded while investigations were conducted about the role of the driver and whether they had committed and offence.

3.29 DCOs were trained in the Home Office manual for escorting safely (HOMES) and received refresher training at least every nine months. DCOs had access to waist and leg restraint belts but had never used them. Force against detainees had not been used in the previous year.

Recommendations

3.30 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review.
3.31 The French authorities should create a national referral mechanism to identify victims of trafficking.\(^7\)

Safeguarding children

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

3.32 Fifty-one children had been held in the facility in the previous three months – 19 were accompanied and 32 were unaccompanied. Children were held too long and much longer than in the similar facility in Coquelles. Accompanied children were held for an average of six hours 46 minutes, and unaccompanied children for an average of five hours 39 minutes (compared with an average of four hours four minutes for accompanied children and four hours 34 minutes for unaccompanied children in Coquelles). The longest single period of detention for an unaccompanied child was 12 hours 40 minutes.

3.33 Children were interviewed by SAMS-trained officers, who were available on every shift. However, they were interviewed in rooms used to interview adults, with chairs chained to the floor, which were not an appropriate environment for children.

3.34 Children were held in a family room separate from unrelated adults. The holding room displayed UK telephone helpline numbers for reporting modern slavery and FGM concerns. We were told that children were searched using a hand-held metal detector.

3.35 DCOs now received annual safeguarding children training. They opened a basic care plan for all children, which was mostly in tick-box format. Mitie Care and Custody had raised no child safeguarding concerns with Border Force in the previous year.

3.36 If a child was allowed to enter the UK, but officials had safeguarding concerns, they would pass these on to the UK authorities. If leave to enter was refused, Border Force informed PAF in writing that the detainee was a child. The Border Force was unable to produce data on the number of child safeguarding referrals made to UK authorities or PAF in the last year. (See recommendation 3.30.)

Recommendation

3.37 Children should be interviewed in a child-friendly environment. (Repeated recommendation 3.12)

Legal rights

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

3.38 A small amount of information about detainees’ legal options, including claiming asylum in France, was displayed in the holding rooms. An Office of the Immigration Services

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\(^7\) This recommendation is made by the CGLPL to the French Ministry of Social Affairs and Health.
Commissioner poster displayed a UK national helpline number for detainees wishing to find a UK adviser. There was a small notice in English from the Catholic charity ‘Caritas’, for detainees wanting advice on claiming asylum (see paragraph 3.66).

3.39 Detainees could not email or fax their lawyers. There was no payphone in the holding rooms. Mobile phones were available for detainees who needed them, but detention staff did not fully explain this to the detainee held during our inspection (see paragraph 3.61), and she had been held in the facility for over four hours unaware that she could use a phone.

3.40 Legal documentation given to detainees was completed accurately but not translated. We were told that Border Force officers used telephone interpreting services to explain the material to detainees who could not speak English.

3.41 The woman held during our inspection had been detained at 4.30am but only interviewed at 9am. Border Force staff accepted that its response was not sufficiently speedy and the woman had waited too long before being interviewed. On conclusion of the interview, Border Force quickly granted her leave to enter the UK.

3.42 There had been 461 detainees held in the facility in the previous three months. The average length of detention was five hours 28 minutes, which was much longer than the average of three hours five minutes that we found in the similar facility in Coquelles. The longest period of detention had been for 16 hours, compared with 10 hours in Coquelles. Delays in interviewing detainees had contributed to this. DCOs told us that delays in PAF attending the facility could also prolong detention.

Recommendations

3.43 All detainees should be able to receive independent legal advice on both French and UK law.

3.44 Border Force staff should interview detainees promptly to minimise time in detention.

Respect

Accommodation and facilities

Expected outcomes:
Detainees are held in a safe, clean and decent environment. They are offered varied meals according to their individual requirements. The facility encourages activities to promote mental well-being.

3.45 The facility was largely unchanged from our last inspection, comprising two holding rooms, two interview rooms and a fingerprint area. It was still relatively new and in good decorative state, but there was no natural light or fresh air in the holding rooms. The smaller room, designated for families with children, was suitably furnished with four plastic chairs, some soft mats for sleeping on and two bean bags. The larger room for general use was similar but with eight chairs.

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8 Caritas is a Catholic charity which provides crisis support and services to migrants and asylum-seeker in many countries. More details can be found at: https://www.caritas.org/who-we-are/
3.46 Both rooms had some blankets and pillows. The larger room had a shower, although it was locked during our inspection and it was unclear how detainees would know that it was available. Toiletry packs were available on request, but staff did not promote them sufficiently. Toilets in both rooms were private and sanitary products were freely available.

3.47 Catering arrangements were adequate, with a water fountain in the larger room and bottled water in the family room. DCOs provided hot drinks to all detainees and there was an adequate variety of microwave meals, including halal and vegetarian options. Snacks were freely available.

3.48 There were some activities and distractions to occupy short-stay detainees, but these were insufficient for anyone detained for more than a few hours. There was a wall-mounted television, and some magazines and books, but they were predominantly in English and the magazines were several months old. There were no newspapers. Detainees had no access to outside space for exercise in the fresh air or the opportunity to smoke.

3.49 There had been efforts to soften the environment in the family room, including some wall art and toys, colouring books, crayons and a DVD facility. Baby changing facilities were also provided, and there was a stock of baby food and nappies.

**Recommendation**

3.50 Detainees held for more than a few hours should have access to the fresh air.

**Respectful treatment**

**Expected outcomes:**
Detainees are treated with respect by all staff. Effective complaints procedures are in place for detainees. There is understanding of detainees’ diverse cultural backgrounds. Detainees’ health care needs are met.

3.51 We observed DCOs speaking with the one detainee who had arrived before our visit. They were polite and courteous, and mindful of her anxiety and stress. After Border Force staff interviewed her in a separate interview room, she returned to the holding room visibly upset, and the DCOs provided sensitive support. The detainee later told us that she appreciated the care she had received from DCOs.

3.52 In the previous three months, the most common countries of origin for detainees held were Romania (24%), Albania (17%), Afghanistan (7%) and Brazil (6%). Staff were aware of the professional telephone interpreting service available, and it had been used reasonably regularly at 174 times in the previous 12 months.

3.53 There was a diversity statement in a folder in the two holding rooms in English and other languages, but it was not on display. DCOs confirmed they attended an annual DCO one-day refresher course that covered areas such as diversity and equality.

3.54 Detainees could practise their religion. Religious artefacts, including prayer mats, were available and stored respectfully. Signs indicating the direction of Mecca had been misprinted and were confusing. Halal meals were available for detainees.

3.55 DCOs were aware of the need to open a disability care plan for any disabled detainees, and vulnerable adult warning forms for those with other vulnerabilities. Thirteen vulnerable adult warning plans had been opened in the last year, including for a trans detainee and two for
women with possible trafficking concerns (see paragraph 3.25). They were sparsely completed with little detail.

3.56 The facility was adequate for detainees with mobility needs, although the family room was narrow and cramped. There were adapted toilets in both rooms.

3.57 Home Office complaint forms and Mitie feedback forms were available but not prominently displayed. Forms in English and a wide range of other languages were kept in unmarked folders in both holding rooms, with child-friendly versions in the family room. DCOs said that Home Office staff emptied the boxes daily. We submitted a dummy complaint on the day of the inspection, which was acknowledged within 24 hours. In the previous 12 months, no complaints had been submitted.

3.58 DCOs removed medication from detainees while they were in the holding facility. Previously DCOs could obtain advice from a telephone health service before issuing medicines, but now it was their responsibility to judge whether they should provide the medication; in practice, this made it very unlikely that detainees would be able to retain their medication. The procedure for calling emergency services remained protracted due to the requirements of getting on to a restricted site; this required authorisation from Border Force.

3.59 A defibrillator, located reasonably close to the holding facility, was in good working order and its pads were in date. The checks on equipment were irregular and not in line with the daily checks required. Border Force and Mitie Care and Custody detention staff were trained in life support.

Recommendation

3.60 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues.

Preparation for removal and release

Communications

Expected outcomes:
Detainees are able to maintain contact with the outside world using a full range of communications media.

3.61 Detainees could maintain contact with the outside world by telephone but not by any other means. DCOs removed mobile phones from detainees if they had an integral camera and instead lent them a mobile phone without a camera to insert their own SIM card. Detainees without a mobile telephone should have been offered the office telephone to call friends, family and legal advisers, but the one detainee held during our visit said this had not been explained to her when she first arrived and she was unaware that she could make any calls.

3.62 Detainees could not use email, social networks, the internet or video calling, there were no fax facilities and they could not receive visitors or legal representatives.
Recommendation

3.63 Detainees should be given access to telephone, email, fax and internet facilities.

Leaving the facility

Expected outcomes:
Detainees are prepared for their release, transfer or removal. They are able to retain or recover their property. Families with children and others with specific needs are not detained without items essential for their welfare.

3.64 Detainees released from the facility were either allowed to continue their journey to the UK or were transferred to PAF. Those handed over to PAF were then often released into the port or other public areas.

3.65 The DCOs told us they were concerned about the safety of people released in the middle of the night, especially children and women travelling alone who had been on long-departed coaches.

3.66 A notice in the holding rooms said that Caritas could provide ‘all the things exiles needed to sleep rough’, and that Caritas ran a day centre, but did not give its address. There was no other information to assist detainees, such as embassy contact details or how to claim asylum. Caritas informed the CGLPL that it could not remember anyone contacting it from the holding facilities.

3.67 Mitie Care and Custody staff said many detainees who were refused leave to enter knew they would be released shortly after their transfer to PAF, and there was a tacit expectation that they would try to enter the UK again.

Recommendation

3.68 Detainees should be given accurate information on support agencies and on how to claim asylum in France.

Calais freight lanes

Summary

3.69 There was no longer a holding facility for detainees found hidden in commercial vehicles in the freight lanes. The previous Calais freight facility had been closed some years earlier.

3.70 We had serious concerns about some practices in the Calais freight lanes. Detainees were routinely held in caged ECS escort vehicles to await the arrival of PAF, sometimes for prolonged periods. Monitoring data for the three months to the end of October 2019 recorded PAF referral and pick-up times for 264 groups, comprising 1,009 detainees. The average waiting time for each group was 56 minutes; 385 detainees (38%) were held for an hour or more, of whom 109 waited two or more hours. The longest wait was three hours 30 minutes.
3.71 Border Force staff told us that they could see the same detainees several times, as they made repeated attempts to enter the UK. Staff made no attempts to engage with the two groups we observed to explain the dangers faced by people seeking to enter the UK clandestinely.

3.72 Monitoring data did not specify the gender of detainees or if they were children. Few detainees were interviewed and we did not observe any use of professional telephone interpreting. Staff did not take basic details, such as detainees’ names, and we had little confidence that they could always identify and manage the safeguarding risks to detainees adequately. In one group, a young woman was held in the van together with men, without establishing if she might have any safeguarding needs.

3.73 Vans were in appalling condition, with ripped-out seats (see photographs in Appendix III). Staff told us that detainees could ask to use toilet facilities in a nearby building.

3.74 Unlike at Coquelles freight, where an authority to detain notification (IS91) was issued for people held in vehicles, none of the detainees held in the Calais freight lanes were held on an authority to detain. Border Force staff could not tell us under what legal authority these detainees were held.

3.75 Detainees held in the freight lanes had no access to information on their legal rights in UK and in France. Those handed over to PAF were then often released into the port or other public areas.

Recommendations

3.76 **Women and children should be held separately, and, unless PAF arrives promptly, people detained in vehicles in the freight lanes should be held in suitably equipped and decent conditions.**

3.77 **People detained in the freight lanes should be interviewed to establish any safeguarding concerns, and the appropriate referrals made.**
Section 4. Dunkerque

Task of the establishment
To hold those who have been refused entry to the UK or are being questioned by Border Force officers.

Location
Terminal Routier du Port Ouest, F-59279 Loon-Plage, Dunkerque, France

Name of contractor
Eamus Cork Solutions

Last inspection
5 July 2016

Summary

4.1 At our inspection in 2016 we made 14 recommendations. In this inspection, we found that three recommendations had been achieved, one partially achieved and 10 were not achieved.

4.2 As at our last inspection, Border Force continued to employ the private contractor Eamus Cork Solutions (ECS) to search vehicles and operate the holding facility. No detainees were held during our inspection. Holding centre staff were redeployed to other duties when there were no detainees to supervise.

4.3 The facility was open seven days a week and usually staffed by male and female detainee custody officers (DCOs). The facility detained both tourist passengers and those attempting a clandestine entry into the UK.

4.4 Detainees had very short journeys to the holding facility, which was located near the border control points. Arrival procedures were adequate, although we had concerns about the lack of use of professional interpreting services and the impact of this on a detainee’s induction.

4.5 The Border Force team included knowledgeable safeguarding and modern slavery (SAMS)-trained officers. Border Force had made two adult safeguarding referrals to the Police aux Frontières (PAF) and none to the UK authorities in the last year.

4.6 A detention log was opened for every detainee, including children. These forms included a ‘comments’ box where officers had to mention any specific information, such as isolating or other concerning detainee behaviour.

4.7 There had been two incidents of self-harm in the previous 12 months. Unrelated male and female detainees were not held separately, unless requested by either party. Women and children were required to walk through the main holding room to access the toilets. Force had not been used against detainees in the past 12 months. DCOs had received training in the Home Office manual for escorting safely (HOMES), which included use of force.

4.8 During the previous three months, 144 children had been held – 139 were accompanied and five were unaccompanied. The longest single period of detention for an unaccompanied child was five hours 20 minutes. Border Force had made three child safeguarding referrals to PAF and four to the UK authorities in the previous year. For children, DCOs also completed child care plans and ‘detention holding room minor monitoring’ forms.
4.9 Little useful information about detainees’ legal options was displayed in the holding rooms. During the previous three months, 479 detainees had been held in the facility, compared with 712 in a similar period before the last inspection. The average detention had increased from three hours 11 minutes in 2016 to five hours eight minutes. The longest detention was for 16 hours 30 minutes.

4.10 The two holding rooms were in a good state of repair but had no natural light or fresh air. There were still no showers or adequate sleeping facilities. Catering arrangements were sufficient but there were not enough tables for detainees to eat at. There were few facilities to occupy detainees and most of these, such as magazines and books, had to be requested from staff.

4.11 Complaint forms were available but detainees still had to ask staff for them. There were two complaint boxes but one was directly in front of the staff desk, which could have inhibited detainees from making a complaint. No complaints had been submitted in the previous 12 months.

4.12 DCOs removed all medication from detainees on arrival; they contacted French emergency services as needed but had no access to advice on non-urgent concerns.

4.13 Detainees could not easily make telephone calls. They could not communicate by fax, email, video calling or social networks, and they could not use the internet.

4.14 Detainees leaving the facility were either allowed to continue their journey to the UK or were transferred to PAF. Those handed to PAF were then often released into the port or other public areas. There was little information to assist detainees, such as embassy contact details.

Safety

Arrival and early days in detention

Expected outcomes:
Detainees travelling to and arriving at the facility are treated with respect and care. Risks are identified and acted on. Induction is comprehensive.

4.15 The short-term holding facility (STHF) was open seven days a week, 24 hours a day. Staffing comprised two French detainee custody officers (DCOs), one male and one female. When no detainees were held, they were redeployed to other duties, such as vehicle searching. As no detainees were held during the inspection, no DCOs were in the facility.

4.16 We were unable to observe any detainees arriving but many of the processes described to us were similar to our last inspection in 2016. Individuals were detained in the port and therefore had very short journeys to the facility. Authorised search officers (ASOs) employed by ECS searched vehicles before passengers presented themselves at the border. Travellers stopped by Border Force drove the short distance to the facility in their own cars with a DCO. ASOs also searched lorries arriving at the border. ASOs transferred clandestine entrants found in lorries to the facility in a caged people carrier, which was suitable for the short journey.

4.17 All detainees, including children, received a rub-down search on arrival. A female member of staff searched children under 14. Detainees were required to hand over their property,
including mobile phones. Small items of property could be held securely in small lockers; larger items were kept outside the holding room, but not locked away.

4.18 We were told that all ECS staff spoke French and some a little English. Professional interpreting services were not used. An information leaflet available to detainees in a variety of languages covered areas such as searching, food and making complaints.

Safeguarding adults and personal safety

Expected outcomes:
The facility promotes the welfare of all detainees and protects them from all kinds of harm and neglect. The facility provides a safe environment which reduces the risk of self-harm and suicide. Detainees are protected from bullying and victimisation, and force is only used as a last resort and for legitimate reasons.

4.19 The Border Force team included safeguarding and modern slavery (SAMS)-trained officers. The officer we spoke to was knowledgeable about the risks to detainees of modern slavery. SAMS officers advised colleagues handling cases that potentially involved safeguarding or modern slavery issues. SAMS-trained officers were not always available on every shift, although they could call for guidance from SAMS-trained officers based in the other holding facilities.

4.20 Although France had ratified the Council of Europe Convention on Action against Trafficking in Human Beings in 2008, unlike the UK it had yet to create a national referral mechanism to identify and protect victims of human trafficking. We were told that PAF was informed in writing if someone was suspected of being a victim of modern slavery, or if there were other safeguarding concerns. Border Force had made two adult safeguarding referrals to PAF in the previous year, which seemed low for a busy border crossing.

4.21 Border Force in Dunkerque could not access the UK national referral mechanism because of issues of jurisdiction. In the rare cases where someone was suspected to be a victim of modern slavery, but there were no grounds to refuse leave to enter, concerns were passed to the UK police and/or local authority social services. The Border Force had made no adult safeguarding referrals to the UK authorities in the previous year.

4.22 We were told by the ECS manager that staff undertook routine checks in occupied holding rooms every 60 minutes, and 15 minutes if children were detained. As there were two holding rooms, children could be held separately from unrelated adults, although they could still be seen through the glass partition with the main holding room. The ECS manager told us that women would only be held separately if they requested it. He could not remember use of professional telephone interpreting, which reduced staff ability to identify safeguarding concerns.

4.23 Detention forms (journal de retention annexe) were completed for every detainee, including adults and children. These forms included a ‘comments’ box where officers had to mention any specific information, such as isolating or other concerning detainee behaviour.

4.24 There had been two incidents of self-harm in 2018. One man used a plastic implement to cut himself on his torso, and another tied a ligature on a door handle. Records showed that staff intervened quickly to safeguard the detainees. ECS staff carried anti-ligature knives while on duty.

4.25 Staff did not use any restraint equipment. Force had not been used in the previous year. All staff had received Home Office manual for escorting safely (HOMES) training.
Recommendations

4.26  The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review.

4.27  The French authorities should create a national referral mechanism to identify victims of trafficking. (Repeated recommendation 1.12)

Safeguarding children

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

4.28  During the previous three months, 144 children had been held – 139 were accompanied and five were unaccompanied. The longest detention for an unaccompanied child was five hours 20 minutes.

4.29  Most children were interviewed by SAMS-trained officers, but they were not available on every shift. If there were safeguarding concerns but no grounds to refuse leave to enter, staff said they would pass on concerns to the UK police and/or local authority social services. Where leave to enter was refused, Border Force informed PAF in writing that the detainee was a child. Border Force had made three child safeguarding referrals to PAF and four to the UK authorities in the previous year.

4.30  Although all staff had DCO training, the ECS manager could not remember staff receiving specific training in child safeguarding. Child care plans and ‘detention holding room minor monitoring’ forms were completed when necessary. Children were given a rub-down search, which was done by a woman officer if they were under 14. They were held in the family room separate from unrelated adults.

Recommendations

4.31  SAMS-trained officers should interview all unaccompanied children so that safeguarding concerns can be identified and acted on promptly, and appropriate referrals can be made to Police aux Frontières (PAF).

4.32  All ECS detainee custody officers (DCOs) should receive regular training in recognising and responding to potential safeguarding issues, for both adults and children.

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9  This recommendation is made by the CGLPL to the French Ministry of Social Affairs and Health.
Legal rights

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

4.33 A small amount of information about detainees’ legal options was displayed in the holding rooms. There was a small notice in English from the Catholic charity ‘Caritas’, for detainees wanting advice on claiming asylum (see paragraph 4.56).\(^{10}\)

4.34 Legal documentation given to detainees was not translated, but we were told that Border Officers used telephone interpreting services to explain them to detainees who could not speak English.

4.35 During the previous three months, 479 detainees had been held in the facility, compared with 712 detainees at the last inspection. Despite this reduction, the average detention had increased from three hours 11 minutes in 2016 to five hours eight minutes. The longest detention was for 16 hours 30 minutes. We were told that detention could be prolonged by delays in PAF attending the facility.

4.36 Border Force collected bio-data, and all detainees had their fingerprints scanned and photos taken. The information was run against the Home Office fingerprint records and the UK’s Police National Computer.

**Recommendation**

4.37 All detainees should be able to receive independent legal advice on French and UK law.

Respect

Accommodation and facilities

**Expected outcomes:**
Detainees are held in a safe, clean and decent environment. They are offered varied meals according to their individual requirements. The facility encourages activities to promote mental well-being.

4.38 The facility comprised an entrance lobby, where detainees were searched, a staff area where detainees were inducted and two holding rooms – the smaller of the two was used predominantly for women and children.

4.39 The rooms had recently been redecorated but had no natural light or fresh air. The larger general-purpose room had 14 chairs and a small table. The small family room, which was accessed through the main holding room or a side door, had six chairs and a small table. The room was in good condition. Notices in a few languages advised detainees of the availability of certain items, such as snacks, religious texts, magazines and DVDs, all of which had to be

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\(^{10}\) Caritas is a Catholic charity which provides crisis support and services to migrants and asylum-seeker in many countries. More details can be found at: https://www.caritas.org/who-we-are/
Section 4. Dunkerque

4.40 There were two toilets off the main holding room, which were clean, with baby changing facilities in one. Sanitary products were freely available. Women and children still had to walk through the main holding room to use the toilets.

4.41 There was a water fountain in the main holding room and snacks were provided but were not freely available, as in other STHFs. We were told that DCOs provided hot drinks to detainees. An adequate variety of microwave meals were available, including halal and vegetarian options.

4.42 There was little to occupy detainees, even those held for short periods. The manager showed us some magazines and books in English, but these were stored in the staff area and not left out for detainees. There were few distractions for children; some toys were available but in a box that was dusty, as if it had not been opened for some time. There was a small TV in the holding room.

4.43 Detainees had no access to outside space for exercise in the fresh air, although we were told that smoking breaks outside were facilitated if authorised by Border Force.

Recommendations

4.44 Detainees should have free access to a reasonable range of diversionary activities.

4.45 Detainees held for more than a few hours should have access to the fresh air.

Respectful treatment

Expected outcomes:

Detainees are treated with respect by all staff. Effective complaints procedures are in place for detainees. There is understanding of detainees’ diverse cultural backgrounds. Detainees’ health care needs are met.

4.46 All staff had received DCO training. Although we were not able to observe DCOs interacting with detainees, the manager we spoke to was experienced and showed some understanding of the anxiety that detainees were likely to be experiencing.

4.47 In the previous three months, the most common countries of origin for detainees held were Eritrea (32%), Iraq (14%) and Sudan (8%). A further 21% were classed under the generic label of ‘other’. With this diverse range of nationalities, it was a concern that professional interpreting was seldom used. The ECS manager said he could not remember the last time staff had used it, and they felt they could get by with French and English. Border Force staff confirmed that the majority of the 82 uses of telephone interpreting in the past 12 months had been by Border Force staff.

4.48 Detainees could practise their religion. Religious artefacts, including prayer mats, were available from staff. The facility was adequate for detainees with mobility needs. Although care plans were not routinely completed for detainees with disabilities, a dynamic risk and care assessment was undertaken in conjunction with the duty Home Office manager to ensure care needs were raised before detention.
4.49 Detainees could not submit complaints confidentially. Complaints forms had to be requested. There were two complaint boxes in the facility, although one was directly in front of the staff desk, and the other, located in the holding area, was labelled as a ‘suggestions’ box. We were told that Border Force staff emptied the boxes daily, but no complaints had been submitted in the previous 12 months.

4.50 DCOs removed medication from detainees while they were in the holding facility. Previously DCOs could obtain advice from a telephone health service before issuing medicines, but now it was their responsibility to judge whether they should provide the medication; in practice, this made it very unlikely that detainees would be able to retain their medication. The procedure for calling emergency services remained protracted due to the requirements of getting on to a restricted site; this required authorisation for Border Force senior staff to escalate the request. Border Force and ECS staff were trained in life support.

Recommendations

4.51 Professional interpreting services should be used to communicate with detainees who are not fluent in English.

4.52 Detainees should be able to submit complaints confidentially.

4.53 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues.

Preparation for removal and release

Communications

Expected outcomes:
Detainees are able to maintain contact with the outside world using a full range of communications media.

4.54 DCOs removed mobile phones from detainees on arrival and did not allow them access to their phones until they left. It was possible for them to make phone calls only with Border Force permission. No ECS phones were loaned to detainees, as in the Mitie Care and Custody-run facilities. Detainees could not use fax, email, social networks, the internet or video calling, and they were not able to receive visitors.

Recommendation

4.55 Detainees should be given access to telephone, email, fax and internet facilities.
Leaving the facility

Expected outcomes:
Detainees are prepared for their release, transfer or removal. They are able to retain or recover their property. Families with children and others with specific needs are not detained without items essential for their welfare.

4.56 Detainees released from the facility were either allowed to continue their journey to the UK or were transferred to PAF. Those handed over to PAF were then often released into the port or other public areas. There was little information on support organisations in France. Although there was a notice about Caritas, an asylum support organisation, it informed the CGLPL that they could not remember anyone contacting it from the holding facilities.

4.57 Staff gave a verbal briefing to PAF when they collected detainees. As staff did not use telephone interpreting with detainees, we could not be assured that relevant risk information was identified and passed on.

Recommendation

4.58 Detainees should be given accurate information on French support agencies and on how to claim asylum in France.
Section 5. Summary of recommendations

Coquelles tourist

Recommendation From CGLPL to the French Ministry of Social Affairs and Health

Safeguarding adults and personal safety

5.1 The French authorities should create a national referral mechanism to identify victims of trafficking. (1.33, repeated recommendation 1.9)

Recommendations To the Border Force and facility contractor

Arrival and early days in detention

5.2 There should always be a comprehensive handover between Border Force staff and detainee custody officers, which includes all areas of identified risk and vulnerability. (1.21)

Safeguarding adults and personal safety

5.3 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review. (1.34)

Legal rights

5.4 Legal documentation should be explained to detainees in a language they understand, using professional interpreting where necessary. (1.46)

Leaving the facility

5.5 Detainees should be given accurate information on support agencies and on how to claim asylum in France. (1.72)

Recommendation To the Border Force

Safeguarding children

5.6 Safeguarding and modern slavery (SAMS)-trained officers should interview all unaccompanied children so that safeguarding concerns can be identified and acted on promptly, and appropriate referrals made to the Police aux Frontières. (1.41)
Recommendations

To the facility contractor

Legal rights

5.7 All detainees should be able to receive independent legal advice on both French and UK law, and information on how to access such advice should be displayed in holding rooms. (1.45)

Accommodation and facilities

5.8 Detainees held for more than a few hours should have access to the fresh air. (1.53)

Respectful treatment

5.9 Professional interpreting services should be used to communicate with detainees who are not fluent in English. (1.62)

5.10 Home Office complaint forms and Mitie Care and Custody feedback forms should be prominently located in the holding rooms. (1.63)

5.11 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues. (1.64)

Communications

5.12 All detainees should have access to email, fax and internet facilities for communication and information purposes. (1.68, repeated recommendation 1.31)

Coquelles freight

Recommendation

From CGLPL to the French Ministry of Social Affairs and Health

Safeguarding adults and personal safety

5.13 The French authorities should create a national referral mechanism to identify victims of trafficking. (2.29)

Recommendations

To the Border Force and facility contractor

Safeguarding adults and personal safety

5.14 All detainees should be interviewed to establish any safeguarding concerns and facilitate appropriate referrals. (2.30)
5.15 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review. (2.31)

5.16 Detainees should be kept informed about what is happening to them. (2.42)

Legal rights

5.17 Documentation authorising detention (IS91s) should be completed in full. (2.41, repeated recommendation 2.14)

Leaving the facility

5.18 Detainees should be given accurate information on French support agencies and on how to claim asylum in France. (2.65)

Recommendations

To the Border Force

Safeguarding adults and personal safety

5.19 Border Force staff should engage with detainees with professionalism and sensitivity. (2.57)

Safeguarding children

5.20 All children should be interviewed by safeguarding and modern slavery (SAMS)-trained officers, so that safeguarding concerns can be identified and acted on promptly, with referrals made to PAF where necessary. (2.36)

Recommendations

To the facility contractor

Arrival and reception

5.21 Detainees awaiting the arrival of the Police aux Frontières (PAF) should be admitted into the holding facility after a short and specified period of time. (2.18)

5.22 All detainees should be able to receive independent legal advice on both French and UK law. (2.43)

Accommodation and facilities

5.23 Detainees held for more than a few hours should have access to the fresh air. (2.49)
Respectful treatment

5.24 Professional interpreting services should be used to communicate with detainees who are not fluent in English. (2.56)

5.25 Home Office complaint forms and Mitie Care and Custody feedback forms should be prominently located in the holding rooms. (2.58)

5.26 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues. (2.59)

Communications

5.27 Detainees should be given access to telephone, email, fax and internet facilities. (2.62)

Calais tourist

Recommendation From CGLPL to the French Ministry of Social Affairs and Health

5.28 The French authorities should create a national referral mechanism to identify victims of trafficking. (3.31)

Recommendation To the Border Force and facility contractor

Safeguarding adults and personal safety

5.29 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review. (3.30)

Legal rights

5.30 Border Force staff should interview detainees promptly to minimise time in detention. (3.44)

Leaving the facility

5.31 Detainees should be given accurate information on support agencies and on how to claim asylum in France. (3.68)
Recommendations

Safeguarding children

5.32 Children should be interviewed in a child-friendly environment. (3.37, repeated recommendation 3.12)

Legal rights

5.33 All detainees should be able to receive independent legal advice on both French and UK law. (3.43)

Accommodation and facilities

5.34 Detainees held for more than a few hours should have access to the fresh air. (3.50)

Respectful treatment

5.35 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues. (3.60)

Communications

5.36 Detainees should be given access to telephone, email, fax and internet facilities. (3.63)

Calais freight

To the Border Force and facility contractor

5.37 Women and children should be held separately, and, unless PAF arrives promptly, people detained in vehicles in the freight lanes should be held in suitably equipped and decent conditions. (3.76)

5.38 People detained in the freight lanes should be interviewed to establish any safeguarding concerns, and the appropriate referrals made. (3.77)

Dunkerque

Recommendation From CGLPL to the French Ministry of Social Affairs and Health

5.39 The French authorities should create a national referral mechanism to identify victims of trafficking. (4.27, repeated recommendation 1.12)
Recommendation To the Border Force and facility contractor

Safeguarding adults and personal safety

5.40 The Border Force should collate safeguarding data and review overall safeguarding practice in light of the low number of safeguarding referrals. It should develop and implement a safeguarding strategy in response to the outcome of this review. (4.26)

Recommendation To the Border Force

Safeguarding children

5.41 SAMS-trained officers should interview all unaccompanied children so that safeguarding concerns can be identified and acted on promptly, and appropriate referrals can be made to Police aux Frontières (PAF). (4.31)

Recommendations To the facility contractor

Safeguarding children

5.42 All ECS detainee custody officers (DCOs) should receive regular training in recognising and responding to potential safeguarding issues, for both adults and children. (4.32)

Legal rights

5.43 All detainees should be able to receive independent legal advice on French and UK law. (4.37)

Accommodation and facilities

5.44 Detainees should have free access to a reasonable range of diversionary activities. (4.44)

5.45 Detainees held for more than a few hours should have access to the fresh air. (4.45)

Respectful treatment

5.46 Professional interpreting services should be used to communicate with detainees who are not fluent in English. (4.51)

5.47 Detainees should be able to submit complaints confidentially. (4.52)

5.48 Detainees should be able to retain their own medication to manage pre-existing health conditions and access a medical professional for non-urgent medical issues. (4.53)
Communications

**5.49** Detainees should be given access to telephone, email, fax and internet facilities. (4.55)

Leaving the facility

**5.50** Detainees should be given accurate information on French support agencies and on how to claim asylum in France. (4.58)
Section 6. Appendices

Appendix I: Inspection team

Hindpal Singh Bhui  Team leader, HM Inspectorate of Prisons
Deri Hughes Roberts  Inspector, HM Inspectorate of Prisons
Tania Osborne  Health inspector, HM Inspectorate of Prisons
Kam Sarai  Inspector, HM Inspectorate of Prisons
Mathieu Boidé  Contrôleur Général des Lieux de Privation de Liberté
Anne-Sophie Bonnet  Contrôleur Général des Lieux de Privation de Liberté
Appendix II: Progress on recommendations from the last report

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

Coquelles tourist

Safety

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

Recommendations
The French authorities should create a national referral mechanism to identify victims of trafficking. (1.9)
Not achieved (recommendation repeated, 1.33)

Children should be held and interviewed in an environment appropriate to their age. (1.13)
Achieved

Detainees should be able to receive independent legal advice from French organisations. (1.16)
Not achieved

Respect

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

Recommendations
Detainees should routinely be offered basic toiletries and should be able to lie down comfortably. (1.20)
Not achieved

Detainees should have access to a reasonable range of diversionary activities and detainees who are held for more than a few hours should have access to the fresh air. (1.21)
Partially achieved

The complaint box should be emptied each day. (1.27)
Not achieved

Health professionals should be able to assess detainees face to face for non-urgent medical issues. DCOs should be able to access a defibrillator and emergency services promptly. (1.28)
Not achieved
Preparation for removal and release

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

**Recommendations**

Detainees should have a free telephone call before release and should have access to basic information about potential sources of help before they are released. (1.30)

**Not achieved**

All detainees should have access to email, fax and internet facilities for communication and information purposes. (1.31)

**Not achieved** (recommendation repeated, 1.68)

Coquelles freight

Safety

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

**Recommendations**

Detainees should be able to request help easily from a holding room. (2.7)

**Achieved**

Documentation authorising detention (IS91s) should be completed in full. (2.14)

**Not achieved** (recommendation repeated, 2.41)

Respect

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

**Recommendations**

The holding rooms should be closed or completely refurbished and made fit for purpose, including the provision of hot water, clean and accessible toilets, new flooring and shower facilities. (2.18)

**Partially achieved**

Detainees should have access to a reasonable range of diversionary activities and detainees who are held for more than a few hours should have access to the fresh air. (2.19)

**Not achieved**

Detainees should be able to submit complaint forms freely and unobserved. (2.24)

**Achieved**

Health professionals should be able to assess detainees face to face for non-urgent medical
issues. DCOs should be able to access a defibrillator and emergency services promptly. (2.25)
Not achieved

Preparation for removal and release

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

Recommendations

Detainees should be able to make a free telephone call and should have access to basic information about potential sources of help before they are released. (2.27)
Not achieved

All detainees should have access to email, fax and internet facilities for communication and information purposes. (2.28)
Not achieved

Calais tourist

Safety

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

Recommendations

DCOs should identify newly arrived detainees’ needs and risks, and advise detainees of the services provided in the facility. (3.3)
Not achieved

Children should be interviewed in a child friendly environment. (3.12)
Not achieved (recommendation repeated, 3.37)

Detainees should be able to receive independent legal advice from French organisations. (3.15)
Not achieved

Respect

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

Recommendations

Health professionals should be able to assess detainees face to face for non-urgent medical issues. DCOs should be able to access a defibrillator and emergency services promptly. (3.27)
Not achieved
Detainees held for more than a few hours should have access to fresh air and exercise. (3.20)
Not achieved

Preparation for removal and release

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

Recommendations
Detainees should have a free telephone call on arrival and before release and should have access to basic information about potential sources of help before they are released. (3.30)
Not achieved

All detainees should have access to email, fax and internet facilities for communication and information purposes. (3.31)
Not achieved

Dunkerque

Safety

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

Recommendations
Detainees should not be transferred in caged vans. (1.5)
Not achieved

Key information should be given to detainees on arrival, verbally and in writing, in a language they understand. (1.6)
Achieved

All detainees should be able to make a free telephone call in private soon after their arrival. (1.7)
Not achieved

Detainee custody officers should routinely carry anti-ligature knives. (1.11)
Achieved

The French authorities should create a national referral mechanism to identify victims of trafficking. (1.12)
Not achieved (recommendation repeated, 4.27)

Children should be held in a child-friendly environment with age-appropriate facilities. (1.16)
Partially achieved

Independent legal advice from French organisations should be available to detainees. Written information about these organisations should be clearly displayed in a variety of languages. (1.19)
Not achieved

Respect

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

Recommendations
All holding rooms should have adequate seating, washing and sleeping facilities. (1.24)
Not achieved

There should be sufficient activities and facilities to enable detainees to occupy themselves, including access to books, newspapers and dictionaries in a range of languages. (1.25)
Not achieved

DCOs should use interpretation and/or pictorial prompts to facilitate communication with detainees. (1.30)
Not achieved

An effective complaints procedure, which is easy to access and use, should be implemented, with complaint forms in a language that detainees can understand, pens and a secure box available. (1.31)
Not achieved

Health professionals should be able to address detainees’ non-urgent health concerns and advise DCOs about all health issues, including medication. (1.32)
Not achieved

Preparation for removal and release

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

Recommendation
All detainees should have access to email, fax and internet facilities for communication and information purposes. (1.34)
Not achieved

Staff should formally communicate relevant risk and needs based information to the French police when they hand detainees over. (1.35)
Achieved
Appendix III: Photographs

Calais – freight caged van
Calais – tourist family holding room
Coquelles – tourist general holding room

Coquelles – freight general holding room
Dunkerque – family holding room
Section 6 – Appendix III: Photographs

Dunkerque – general holding room