

Report on an unannounced inspection of

Morton Hall Immigration Removal Centre

by HM Chief Inspector of Prisons

28 October–15 November 2019

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Glossary of terms

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at:
<http://www.justiceinspectors.gov.uk/hmiprisons/about-our-inspections/>

Introduction

Morton Hall is an immigration removal centre (IRC) near Lincoln that holds adult male detainees. It is the only remaining IRC operated by HM Prison and Probation Service on behalf of the Home Office. Since the previous inspection in November 2016, the number of detainees had declined by about a third while staffing levels had remained approximately the same. The centre held about 240 people and at the time of this inspection one of the units was not in use.

The centre had improved since the previous inspection. We assessed overall safety as now being reasonably good. Along with the smaller population, the marked reduction in the number of very long detentions had contributed to a calmer atmosphere. The number of detainees held for over a year had been reduced to five compared with nearly 30 at the previous inspection, and two-thirds of the population left the centre within a month.

However, most of our safety concerns remained. Uncertainty about detainees' immigration status and the potential for long-term detention continued to cause frustration. One detainee, for example, had been held for over two years, which was unacceptable. Those held for lengthy periods were often detained because of documentation problems, a lack of suitable accommodation or casework inefficiencies. For example, one detainee had been awaiting an asylum decision for 11 months. Nearly a quarter of the population arrived after serving prison sentences during which their cases should have been resolved without the need for immigration detention.

There were several clear indications of the vulnerability of the population. For example, levels of self-harm were high and over 40 detainees had been subject to constant supervision in the previous six months because they were assessed to be at risk of imminent self-harm or self-inflicted death. Care for detainees at risk of self-harm was generally good and supported by effective key working arrangements. However, as elsewhere, Rule 35 procedures¹ were not being used to safeguard detainees at risk of suicide or those with other health concerns.

Levels of violence and use of force were still too high, but there were few serious incidents. Much more attention was paid to those falling under the Home Office's at risk in detention policy. In our staff survey and interviews, staff said they would report safeguarding concerns and were generally confident they would be taken seriously.

A real strength of the centre was its staff-detainee relationships. In our confidential interviews, most detainees were very positive about the way staff treated them. Consultation arrangements were good. Equality work was reasonably good and interpreters were used very regularly. Health services, including mental health provision, were good.

Accommodation was in an adequate condition, but the centre still looked and felt far too much like the prison it was before it was designated an IRC. This was reinforced by large quantities of razor wire, which managers themselves acknowledged was out of keeping with the generally calm environment in the centre. Detainees were also locked in cells or on landings from 8.30pm. At other times, detainees could move freely around the centre and, unlike in most other IRCs, they could go outside easily during the day and walk around a fairly large and open site.

As at the last inspection, the range of activities was very good and all detainees could participate if they wished to do so. However, take-up was low and the centre needed to do more to promote what was on offer.

¹ Detention centre Rule 35 requires that the Home Office be notified if a centre doctor considers a detainee's health to be injuriously affected by continued detention or the conditions of detention, or if a detainee may have been a victim of torture or has suicidal intentions.

Another considerable strength was the welfare service provided by the third-sector organisation Lincolnshire Action Trust, which detainees valued highly. Well-qualified workers gave detainees good support on arrival and before discharge.

We make a number of recommendations which I hope will allow the centre to further improve its care for detainees, especially in the area of safety. However, this is a largely positive report documenting significant improvements in a centre where staff from a range of agencies are doing a creditable job in mitigating the potential harms of detention.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

November 2019

Fact page

Task of the establishment

To detain adult male detainees subject to immigration control.

Certified normal accommodation and operational capacity

Detainees held at the time of inspection: 244

Baseline certified normal capacity: 391

In-use certified normal capacity: 391

Operational capacity: 391

Notable features from this inspection

About a third fewer detainees were held than at our previous inspection.

About two-thirds of the population left the centre within a month and there had been a marked reduction in the number of lengthy detentions since the previous inspection.

Five detainees were assessed as being level 3 adults at risk, which meant that the Home Office had accepted evidence that detention was likely to cause them harm.

In the six months before the inspection, doctors had submitted 173 reports to the Home Office concerning detainees who might have been survivors of torture but none because they were having thoughts about suicide or had other health concerns.

Each month, approximately 120 detainees were referred to the centre's mental health services.

The centre provided enough activity places for all detainees.

Good welfare services were provided by independent third sector organisation Lincolnshire Action Trust.

Name of contractor

HM Prison and Probation Service

Key providers

Escort provider: Mitie Care and Custody

Health service commissioner and provider: Nottinghamshire Healthcare NHS Foundation Trust

Learning and skills providers: People Plus sub-contracted to Lincoln College

Location

Swinderby, Lincolnshire

Brief history

Originally a Royal Air Force base, Morton Hall opened as a prison in 1985. New accommodation was added in 1996 and it was refitted in 2001 to provide facilities for women prisoners. Two more residential units were added in July 2002. In March 2009, Morton Hall, then a semi-open establishment, was turned into a closed prison, with a specialist role in managing foreign nationals, who comprised most of the population. In 2011, it became an immigration removal centre.

Short description of residential units

Morton Hall has five units in use, all with single cells.

Units

Fry and Windsor – 160 detainees over two floors; each cell has a toilet and shower.

Johnson and Sharman – 145 detainees in ground-floor accommodation with communal toilets and showers. Sharman has a purpose-built room for detainees with reduced mobility.

Torr – 48 detainees in ground-floor accommodation with communal toilets and showers. Torr houses the induction unit and a supported living area.

Name of centre manager

Karen Head

Independent Monitoring Board chair

Malcolm Brock

Last inspection

21–25 November 2016

About this inspection and report

- A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.
- A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- A3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy establishment. The four tests of a healthy establishment are:
- | | |
|--|--|
| Safety | that detainees are held in safety and with due regard to the insecurity of their position |
| Respect | that detainees are treated with respect for their human dignity and the circumstances of their detention |
| Activities | that the centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees |
| Preparation for removal and release | that detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their destination country and be prepared for their release, transfer or removal. Detainees are able to retain or recover their property. |
- A4 Under each test, we make an assessment of outcomes for detainees and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the Home Office.
- **outcomes for detainees are good against this healthy establishment test.**
There is no evidence that outcomes for detainees are being adversely affected in any significant areas.
 - **outcomes for detainees are reasonably good against this healthy establishment test.**
There is evidence of adverse outcomes for detainees in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
 - **outcomes for detainees are not sufficiently good against this healthy establishment test.**
There is evidence that outcomes for detainees are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of detainees. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- **outcomes for detainees are poor against this healthy establishment test.** There is evidence that the outcomes for detainees are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for detainees. Immediate remedial action is required.

A5 Although this was a custodial establishment, we were mindful that detainees were not held because they had been charged with a criminal offence and had not been detained through normal judicial processes. In addition to our own independent *Expectations*, the inspection was conducted against the background of the Detention Centre Rules 2001, the statutory instrument that applies to the running of immigration removal centres. Rule 3 sets out the purpose of centres (now immigration removal centres) as being to provide for the secure but humane accommodation of detainees:

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

A6 The statutory instrument also states that due recognition will be given at immigration removal centres to the need for awareness of:

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

A7 Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for detainees.

A8 Five key sources of evidence are used by inspectors: observation; detainee surveys; discussions with detainees; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

A9 We also offer every detainee a confidential interview with an inspector (see Appendix VI). In Morton Hall, 46 detainees took up this offer. Professional interpreting was used whenever necessary and seven of those detainees were interviewed with an interpreter. We issued an invitation to recent ex-detainees to speak to us through various groups, but no detainees took up this offer.

A10 We interviewed 27 centre staff working in operational roles. They included detainee custody officers and managers, health services staff and staff in the Home Office teams. In addition, we issued an electronic staff survey over the same period, which elicited 74 responses. All responses were anonymous and some of the survey respondents and interviewees might

have been the same people. The staff survey responses and interview responses are reported together in Appendix VII.

- A11 The interviews with both detainees and staff were semi-structured, and took place from 30 October to 6 November 2019. The main objective of this methodology is to give detainees and staff an opportunity to tell inspectors confidentially about concerns over safety and the treatment of detainees. We follow up serious allegations whenever there is sufficient information to do so, and report on relevant outcomes in the main body of the report. The results of these further interviews and survey are used as sources of evidence to inform the rounded judgements made by inspectors in the body of this report.
- A12 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A13 All inspections of immigration removal centres are conducted jointly with Ofsted or Education Scotland, the Care Quality Commission and the General Pharmaceutical Council (GPhC). This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

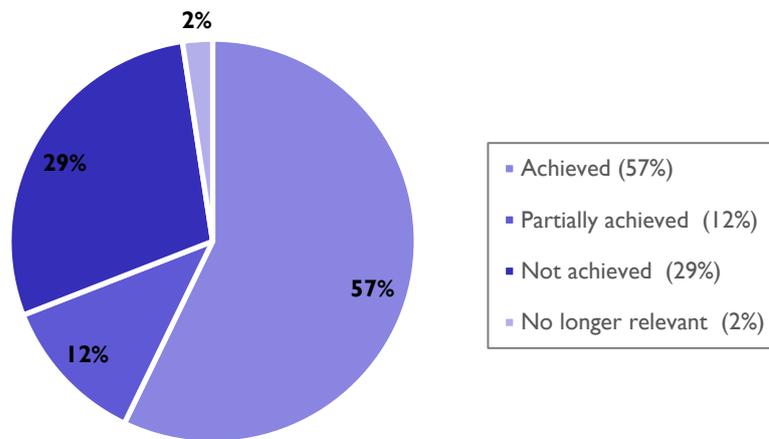
- A14 This explanation of our approach is followed by a summary of our inspection findings against the four healthy establishment tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the conditions for and treatment of immigration detainees*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A15 Details of the inspection team and the detainee population profile can be found in Appendices I and IV respectively.
- A16 Findings from the survey of detainees and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.² Appendices VI and VII contain results of confidential one-to-one interviews with detainees and staff, and the staff survey.

² The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

Summary

- S1 We last inspected Morton Hall IRC in 2016 and made 42 recommendations overall. The centre fully accepted 29 of the recommendations and subject to resources accepted seven. It rejected six of the recommendations.
- S2 At this follow up inspection we found that the centre had achieved 24 of those recommendations, partially achieved five recommendations and not achieved 12 recommendations. One recommendation was no longer relevant.

Figure 1: Morton Hall IRC progress on recommendations from last inspection (n=42)



- S3 Since our last inspection outcomes for detainees improved in two healthy prison areas with Safety improving from not sufficiently good to reasonably good and Respect improving from reasonably good to good. Outcomes stayed the same in two healthy establishment tests with Activities and Preparation for release and removal staying good.

Figure 2: Morton Hall IRC healthy establishment outcomes 2016 and 2019³



³ Please note that the criteria assessed under each healthy establishment test were amended in January 2018. Healthy establishment outcomes reflect the expectations in place at the time of each inspection.

Safety

S4 *Arrival and first night procedures were good, but induction was weak. There was better support for adults at risk than at the previous inspection. Rule 35 reports were not used to raise concerns about detainees with thoughts about suicide or other health problems, they were not completed promptly and did not receive a swift response. Levels of self-harm remained high, but detainees at risk were generally well supported. Child protection procedures were good, but there were weaknesses in the management of age dispute cases. Levels of violence had increased, but there was little serious violence. The strategy for improving safety was good. Procedural security was good and there was little evidence of significant drug or alcohol use. Physical security remained excessive for a detainee population. Use of force was generally low level and often related to preventing self-harm. The separation environment had improved significantly and separation reviews were good. The number of people held for over a year had declined markedly, but some detainees were still held for long periods as a result of casework inefficiencies. Detainees had better access to Home Office staff. **Outcomes for detainees were reasonably good against this healthy establishment test.***

S5 *At the last inspection in 2016 we found that outcomes for detainees in Morton Hall were not sufficiently good against this healthy establishment test. We made 18 recommendations about safety. At this follow-up inspection we found that six of the recommendations had been achieved, three had been partially achieved, eight had not been achieved and one was no longer relevant.*

S6 Many detainees were still subject to disorientating night-time transfers to and from the centre. Risk information accompanied detainees and person escort records were generally good. Escort vehicles were in good condition and well-equipped. Reception staff were busy, but the environment was welcoming and, in our survey, 78% of detainees said they were treated well in reception. First night risk assessments were thorough and telephone interpretation was often used. Induction processes were poor – we saw officers give detainees out-of-date information booklets and the advertised tour of the centre did not take place.

S7 There was no written whistleblowing policy, but staff received regular briefings on their responsibility to raise safeguarding concerns, which appeared to be effective. In our staff survey, nearly all staff named specific people, often line managers or the corruption prevention manager, to whom they would report concerns about the behaviour of other staff or about detainee welfare. Staff were generally confident that these concerns would be taken seriously.

S8 The centre held a high number of adults at risk and more than 50 had been identified as being in the higher risk categories. Staff were better at identifying adults at risk and support for this group had also improved, but detainee custody officers were not sufficiently aware of the fact that detention was likely to cause harm to detainees assessed at level 3.⁴ Vulnerable adult care plans lacked focus and some staff did not understand what their purpose was. A supported living area in the Torr unit provided some vulnerable detainees with a calm environment. Rule 35 case histories⁵ were better than we usually see, but assessments lacked detail, and some did not include clear findings on the likely impact of detention. The current waiting time for a Rule 35 assessment was too long, at about 10 days, and over a third of Home Office replies to Rule 35 reports were late. Detention was often maintained

⁴ A detainee is assessed at level 1 where a vulnerability is self-declared. Level 2 applies where there is professional or other evidence of the vulnerability. Level 3 is the highest level of risk. The Home Office will assess a detainee to be at this level where they accept that a period of detention is likely to cause harm.

⁵ Detention centre Rule 35 requires that the Home Office be notified if a centre doctor considers a detainee's health to be injuriously affected by continued detention or the conditions of detention, or if a detainee may have been a victim of torture or has suicidal intentions.

despite the Home Office accepting that a detainee had been tortured. Forty-two detainees had been placed on constant supervision in the previous six months because of concerns about their risk of self-harm. However, no Rule 35 reports had been written outlining detainees' suicidal thoughts or other health concerns.

- S9 There had been two self-inflicted deaths since the previous inspection, the most recent of which was in 2017. Recommendations from the Prisons and Probation Ombudsman's investigation reports had largely been implemented. There had been 113 self-harm incidents in the previous six months, more than at the previous inspection. The reasons for this increase were unclear and required further investigation. Assessment, care in detention and teamwork case management procedures for detainees at risk of suicide or self-harm in immigration removal centres were implemented well. The quality of care was good, as was the level of detail in case reviews and the consistency of mental health input. The weekly operational safer detention meetings were reasonably well attended and were a good forum for sharing information. However, Home Office case owners provided insufficient direct input.
- S10 Detainees who were a risk to children were identified and risks were managed appropriately. However, there were shortcomings in the way that age dispute cases were managed. In the previous year, two people claiming to be children were detained without a sufficiently thorough age assessment having been undertaken. Another detainee was found to be a child, but there had been no inter-agency review of this case so lessons could be learned. Care plans for detainees whose age was disputed were poorly completed.
- S11 None of the detainees in our survey or interviews said they had been physically assaulted by staff. No staff in our survey or interviews said they had seen inappropriate use of force against detainees. The centre felt calmer than at our previous inspection and there were few serious incidents. Thirty per cent of detainees in our survey said they felt unsafe at the time of the inspection, similar to other centres. In our interviews, detainees said factors causing them to feel unsafe included uncertainty over their immigration cases and the length of detention, as well as tension between nationality groups, which could lead to fights. The overall number of assaults against staff and detainees was high; many of the assaults on staff were attributable to three detainees. The safety strategy set out a clear and thorough approach to managing violence. Staff relied mainly on their good interpersonal skills and mediation to manage perpetrators. The ineffective rewards scheme was no longer in place.
- S12 The physical environment remained too prison-like and was reinforced by cellular accommodation and a large amount of razor wire. Locking detainees in cells at night remained an excessive restriction for a detainee population. The lock-up time was also very early at about 8.30pm. Detainees could move around the centre freely during the day. Intelligence was well managed, but some detainees had been strip-searched without adequate justification. The management of drug and alcohol use had improved and there was evidence that the availability of drugs and alcohol had declined.
- S13 Use of force was high. However, it consisted mainly of lower level guiding holds (where a member of staff guides a detainee by holding their arm) and was most often used during escorted removals of detainees identified as presenting specific risks, or to prevent self-harm. Documentation and video footage showed good efforts were made to de-escalate situations. Quality assurance processes for paperwork and video-footage were good. Monitoring data suggested that force had been used more frequently against some ethnic groups, but this had not been investigated. The average length of separation under Rule 40 (removal from association in the interests of security or safety) had increased to about 37 hours, but we did not find it used inappropriately. Separation reviews were good and well documented. The physical environment of the separation unit had improved significantly.

- S14 Detainees had reasonable access to legal advice surgeries. Lincolnshire Action Trust (LAT) (a third-sector organisation working on criminal justice issues) was monitoring some concerns about the quality of legal advice. About two-thirds of the population left the centre within a month and there had been a marked reduction in lengthy detentions since our previous inspection. However, five detainees had been held for more than a year, with the longest detained for over two years. Documentation problems and casework inefficiencies had prolonged detention in some cases. One detainee had so far been held for 11 months while awaiting a decision on their asylum claim. Detainees had good access to diligent staff in the Home Office's detention engagement team. Home Office induction interviews were generally good and regular immigration drop-in surgeries were well-attended. Many detainees remained frustrated about the slow progress of their cases.

Respect

S15 *Staff-detainee relationships were good. Most living areas were in reasonable condition. A majority of detainees were positive about the food and kitchen arrangements were efficient. Complaints were generally managed efficiently, although a large number had been withdrawn, and this had not been investigated. Equality and diversity work had improved and support to meet detainees' individual needs was good, but there was a lack of strategic direction. Faith provision was good. Health services were also good. **Outcomes for detainees were good against this healthy establishment test.***

S16 *At the last inspection in 2016 we found that outcomes for detainees in Morton Hall were reasonably good against this healthy establishment test. We made 15 recommendations about respect. At this follow-up inspection we found that 12 of the recommendations had been achieved, one had been partially achieved and two had not been achieved.*

- S17** Those participating in our detainee interviews and group meetings were very positive about staff. In our survey, 72% of detainees said that staff treated them with respect always or most of the time. A keyworker scheme had been implemented in May 2019. Case notes we looked at were good and demonstrated positive interactions between staff and detainees. Keyworkers undertook welfare checks regularly, using interpretation in many cases. Some low-level antisocial behaviour was not challenged consistently.
- S18** Outside areas were reasonably attractive, although the feel of the centre was heavily influenced by the large amount of razor wire, which created a more prison-like atmosphere. The units were fairly clean but in need of some redecoration. Detainees had good access to clothing, bedding and toiletries. Over half of the communal showers in some units were not working and others were not clean. Detainees were in single cells and living conditions were generally reasonable. All units had good laundry facilities and small communal kitchens.
- S19** Consultation was very good. The detainee representative group met every month and discussions led to tangible changes. The consultation process was supported by a good action plan, which was reviewed and updated every month. Application forms were readily available in the units, but responses were not tracked. Complaints were analysed well and responses were timely. Welfare checks were undertaken to help determine how detainees might react to complaint replies before they were given the responses. There was a high rate of withdrawn complaints, which managers had not investigated.
- S20** In our survey, 52% of detainees said the food was quite or very good. Catering arrangements were well organised and efficient, and kitchen staff were responsive to feedback from detainees. Food was served in a pleasant communal dining hall. We observed good portion

sizes and a wide variety of meals. Detainees had good access to the shop, which sold a reasonable range of goods.

- S21 The equality and diversity policy provided a good framework for progress, but this work lacked strategic oversight and direction. The diversity and equality action plan consisted mainly of minor action points identified at meetings and forums. The well-attended and useful diversity and equality action team (DEAT) meetings had not taken place for four months. This had led to delays in staff responding to concerns and trends identified through data analysis. We saw complaints from detainees alleging racism, which had not been registered as discrimination complaints. Staff identified detainees' protected characteristics more effectively, but our survey indicated far more detainees from some groups than the centre had identified, notably those identifying as gay or bisexual. Useful consultation forums on most protected characteristics took place regularly and had in many cases led to concrete action. Diversity was promoted well through a series of events. Faith provision was good and met the needs of detainees with a wide variety of faiths.
- S22 The overall quality of health provision was good and clinical leadership was effective. Most detainees we spoke to were positive about the service they had received, and we saw professional, caring and compassionate interactions between health staff and detainees. Health care staff routinely used professional telephone interpreting. All new arrivals were offered a GP appointment within 24 hours. Detainees could access most services promptly, but waiting times for Rule 35 appointments were too long.
- S23 There was a centre-wide approach to health promotion. Regular well-being events were organised and a good range of health promotion material was displayed around the centre. Blood-borne virus testing and treatment were managed well. The health care team was the first to achieve hepatitis C micro elimination (eliminating a virus in defined segments of the population to incrementally achieve national elimination), which was good.
- S24 The mental health service offered good support to individuals with mild to moderate and more complex needs. Additional posts had been agreed to enhance the service. The demand for clinical prescribing for drug and alcohol dependence was low, but clinical treatment was suitable. Individual psychosocial support, including harm minimisation advice, was offered, and regular relaxation sessions were popular. Medication management was good and officers now supervised medicine administration. There was good access to onsite dental services.

Activities

- S25 *There was a good range of activities. There was enough work and education for the population, and teaching was good. Take-up of activities was low and more could have been done to encourage detainees to attend. The library was a good, well-used resource. Fitness provision was good and easy to access. **Outcomes for detainees were good against this healthy establishment test.***
- S26 *At the last inspection in 2016 we found that outcomes for detainees in Morton Hall were good against this healthy establishment test. We made four recommendations about activities. At this follow-up inspection we found that three of the recommendations had been achieved and one had not been achieved.*

- S27 There were enough places to allow all detainees to attend a range of work and education activities. However, take-up of places was low and only 93 of the 243 detainees had a paid activity during the inspection. In our survey, 34% of detainees said they did not have enough

to do to fill their time in their centre, 38% said that they could fill their time and the remainder was unsure.

- S28 Allocations to activities were efficient. Most detainees could start paid activity or education within a couple of days of applying. The centre's induction included information about opportunities for paid work. However, the course information leaflet was not translated into any other languages. Only about a third of those who accepted the invitation attended. Thirty detainees were enrolled on education courses, but only about 13 attended each session. About 18% of detainees had attended education in recent months, according to the centre's data.
- S29 The community kitchen was well-equipped and large enough to accommodate 12 detainees, supervised by a centre chef. It was now open five days a week but not after mid-afternoon. Detainees valued the opportunity to prepare their national dishes and to eat together. However, the waiting time to use the kitchen was too long at about a month. Given its popularity, the kitchen could have been open more often. Recreational facilities were adequate, but association rooms on the smaller blocks were cramped and shabby, with a limited amount of furniture.
- S30 Education facilities and resources were generally good and teachers were highly skilled in their subjects. Classrooms were well-equipped and provided an attractive learning environment. Education classes were well planned and engaged detainees well. Courses consisted of short modules, enabling detainees to achieve units within one week or less. Over 1,500 units were awarded in 2018–2019 to 507 detainees. Accredited qualifications were rare because of short stays.
- S31 A reasonable range of paid employment opportunities was available. Some helped to develop detainees' work skills, for example in the centre's kitchen, gardens and recycling facility. No formal training was offered apart from a food hygiene qualification. The centre employed up to 12 peer support workers, who assisted other detainees with their questions and concerns, and helped them complete forms. In many cases they provided a good service, but they did not receive enough training or support.
- S32 Managers consulted detainees regularly to ensure the curriculum met their needs. Since the previous inspection, the curriculum had been expanded. For example, a new information and communications technology course had been introduced. Quality assurance arrangements were sound and the quality of teaching was generally good. Most education staff had received formal staff development in the current year.
- S33 The library was pleasant and was open six days a week, including on one evening. The stock of books and DVDs in multiple languages was large and the library was popular. Over 500 new members were signed up in September and October 2019, indicating that a large proportion of detainees made use of the library.
- S34 The gym was well maintained and well equipped. Physical education officers offered a good range of sports activities to suit the needs of the population, including provision for over 50s and remedial activities for those with injuries or medical conditions. Gym induction was held every day and the key points of the induction were available in multiple languages. Detainees made good use of the gym.

Preparation for removal and release

S35 *Welfare provision had developed further and was very good. Visits were managed well and families received support. Constructive working relationships had been developed with the visitors' group. Internet access was good and there had been good take-up of the video-calling facility. Phone reception remained problematic. Removal and release work had been enhanced and now included the offer of support to all those being discharged. **Outcomes for detainees were good against this healthy establishment test.***

S36 *At the last inspection in 2016 we found that outcomes for detainees in Morton Hall were good against this healthy establishment test. We made five recommendations about preparation for removal and release. At this follow-up inspection we found that three of the recommendations had been achieved, one had been partially achieved and one had not been achieved.*

S37 The well-trained and skilled welfare team provided a valued service. Staff gave detainees important assistance on a range of issues throughout their stay at the centre. Detainees were seen within 24 hours of arrival.

S38 Visits took place in the bright and suitably furnished visits hall and, weather and staffing permitting, in a pleasant outdoor space. The visits we observed were well organised and respectfully overseen, and the visitors we spoke to were positive about their experience. LAT staff undertook good work with families and could link their work to the welfare service they also provided to detainees. Recent difficulties in booking visits by telephone had been resolved. The visitors' group provided detainees with a useful service and had constructive working relationships with centre management and LAT staff.

S39 Detainees had good access to internet facilities. We did not find any legitimate sites blocked. Social networking sites remained prohibited, but it was positive that a popular video-calling service had recently been introduced. Detainees continued to experience problems with the mobile phone signal, which limited their ability to communicate. Incoming mail and faxes were distributed efficiently.

S40 There was better support for detainees leaving the centre than at the previous inspection. The welfare team offered support to all detainees before discharge and saw the vast majority of them before removal, transfer or release. Welfare staff offered good support and had good working relationships with partner organisations in the community. Systemic problems concerning the provision of accommodation meant that some detainees' detention was prolonged significantly. Other detainees were released to no fixed accommodation. Public protection arrangements for detainees leaving the centre were sound and better than we usually see.

Key concerns and recommendations

S41 Key concern: Many detainees were transferred to and from the centre during the night for reasons of operational convenience. In our sample, 42% of detainees arriving in the centre arrived between 10pm and 6am, with many arriving between midnight and 3am.

Recommendation: Detainees should not be subjected to unnecessary overnight transfers around the detention estate.

S42 Key concern: Induction processes were poor. Detainees received an out-of-date induction booklet. One-to-one induction interviews were not tailored to the experiences of the individual. The tour of the centre for new arrivals did not take place during our inspection.

Recommendation: Detainees should be provided with key information during their induction. They should be given a tour of the centre and an induction booklet containing up-to-date information.

S43 Key concern: Many detainees reported mental health problems and 42 detainees had been placed on constant supervision in the previous six months because of concerns about their risk of self-harm. However, no Rule 35 reports had been written outlining detainees' suicidal thoughts or other health concerns.

Recommendation: Doctors should submit a Rule 35 report to the Home Office on any detainee they suspect of having suicidal thoughts or if there are other serious health concerns that may require a review of detention.

S44 Key concern: The number of self-harm incidents was high. In the previous six months, 68 detainees had been involved in 113 self-harm incidents, more than over a similar period before the previous inspection. Managers did not know why these figures had increased.

Recommendation: Managers should investigate the increase in the number of self-harm incidents and the number of individuals who self-harm. The investigation should inform an effective action plan that reduces the prevalence of self-harm.

S45 Key concern: There were weaknesses in the management of age dispute cases. Three detainees were detained with insufficient evidence to show that they were adults.

Recommendation: Where someone claims to be a child, they should only be detained if there is sufficient evidence, assessed to the correct legal test, that they are an adult.

S46 Key concern: In the previous six months, more than a fifth of incidents referred to the safer detention team had not been followed up. Challenge, support and intervention plans used to manage perpetrators had little impact on detainees' behaviour and officers had little faith in the plans. Objectives and interventions in the plans were vague and did not reflect the positive mediation that officers often used with detainees.

Recommendation: Managers should ensure that all safer detention referrals are investigated and, where appropriate, result in perpetrators being effectively challenged and supported.

S47 Key concern: The physical security features continued to make the centre look like a prison. The amount of razor wire was excessive and some detainees were held in cells. Detainees were locked up in the evenings from 8.30pm, which was too early. Staff carried batons and not all strip-searches were adequately justified.

Recommendation: The centre should provide a relaxed environment and living conditions that are as near as possible to normal life in the community.

S48 Key concern: Too many detainees were still held for prolonged periods. Inefficiencies in casework prolonged some detention unnecessarily. Systemic delays in the provision of approved accommodation for detainees being released on licence contributed to the problem.

Recommendation: There should be a time limit on detention. Casework for detainees should be progressed with due diligence. The Home Office and HM Prison and Probation Service should ensure prompt provision of approved accommodation.

- S49 Key concern: Equality and diversity work lacked strategic oversight and direction. The diversity and equality action plan consisted mainly of low-level action points and DEAT meetings had not taken place for four months, leading to delays in responding to the concerns identified through data analysis.

Recommendation: Managers should ensure that equality and diversity work is strategic and proactive, and that potential concerns emerging from data analysis are investigated promptly.

- S50 Key concern: Few detainees were attending education. Not enough was done to encourage detainees to use the education department's facilities. As a result, few detainees participated in the courses and activities offered, and many classes were underused.

Recommendation: Managers should set targets to improve the use of the education provision and take steps to achieve them.

Section 1. Safety

Arrival and early days in detention

Expected outcomes:

Detainees travelling to and arriving at the centre are treated with respect and care.

Risks are identified and acted on. Detainees are supported on their first night. Induction is comprehensive.

- I.1 Many detainees were still being transferred to and from the centre at night time for reasons of operational convenience rather than necessity. This was likely to have been disorientating and exhausting. We reviewed the cases of 50 detainees who arrived in October 2019 – 42% had arrived between 10pm and 6am, and many between midnight and 3am (see key concern and recommendation S41). In the cases we examined, detainees who had been transferred from police custody suites had not spent more than one night there. In our survey, 78% said escort staff treated them very or quite well. Information about risks and vulnerabilities accompanied detainees. The information was contained in prison files, movement orders, person escort records (PERs) and documents authorising detention (IS91). The quality of PERs was generally good. Prison files did not accompany detainees from Scottish or private prisons.
- I.2 Escort vehicles were well-equipped and in good condition. They had first aid kits and CCTV. Drinking water and snacks were available. New hybrid escort vehicles contained normal minibus seating alongside a small cell with a clear Perspex door. Detainees were not kept waiting long in escort vehicles before disembarking.
- I.3 Reception staff were busy: every day about 12 detainees left the centre and a similar number arrived. The reception area remained cramped and unsuitable for receiving detainees, although we were told that funding had been secured for its expansion. In the meantime, efforts had been made to make it more welcoming. Detainees could help themselves to snacks and hot drinks, and newspapers were available. Officers now searched detainees in private behind a screen. In our survey, 78% of detainees said they were treated well or quite well in reception.
- I.4 A nurse screened all detainees in private shortly after their arrival. Officers completed a room-sharing risk assessment informed by health concerns and other risk information. Fresh assessments were conducted for all detainees, including those arriving from prison. Detainees without a suitable phone received a mobile phone and were lent £5 in phone credit. They were also offered a free call to anywhere in the world.
- I.5 A senior officer conducted a first night risk assessment in private in reception, using telephone interpretation where necessary. The assessments we observed were thorough and considered a wide range of information to identify detainees' risks and needs. We found a disabled detainee with health needs who was refusing to eat. The senior officer identified these needs and began assessment, care in detention and teamwork (ACDT) case management procedures for detainees at risk of suicide or self-harm. Newly arrived detainees were then taken to the induction unit in the Torr unit or to other units if Torr was fully occupied. First night arrangements were generally sound. Night staff observed detainees on four occasions during their first night and, in our survey, more detainees (62%) than at other centres (46%) said they felt safe on their first night.
- I.6 Induction was poor. An officer undertook a one-to-one induction interview with detainees in a small untidy and grubby room, using telephone interpretation if necessary. The interview

covered too much information and was not tailored to the needs of individual detainees. For example, those who had never been detained received the same information as those who had previously been held in immigration detention. In the interviews we observed, officers gave detainees an out-of-date induction booklet, whose contents were officious and unhelpful. A better booklet had been drafted but was not yet being used. (See key concern and recommendation S42).

- I.7** The induction programme was meant to last a full day, starting the day after arrival and involving a tour of the centre. During our inspection, the advertised tour of the centre did not take place. Instead detainees relied on fellow detainees to find out about life in the centre. (See key concern and recommendation S42).

Safeguarding

Expected outcomes:

The centre promotes the welfare of all detainees and protects them from all kinds of harm and neglect. The centre provides a safe environment which reduces the risk of self-harm and suicide. Detainees at risk of self-harm or suicide are identified at an early stage and given the necessary care and support.

Safeguarding of vulnerable adults

- I.8** Links with the local adult safeguarding board had improved and were reasonable. There was no written whistleblowing policy, but staff received regular briefings on their responsibility to raise safeguarding concerns, which appeared to be effective. In our staff survey, nearly all staff named specific people, often line managers or the corruption prevention manager, to whom they would report concerns about the behaviour of other staff or about detainee welfare. Staff were generally confident that these concerns would be taken seriously.
- I.9** In our interviews, HM Prison and Probation Service and health care staff generally could not say how they would identify or respond to trafficking. Apart from Home Office staff, few others knew about the national referral mechanism (put in place in the UK in April 2009 to identify, protect and support victims of trafficking). However, they usually said they would inform the Home Office or a manager in a case of suspected trafficking.
- I.10** There was better support for those identified as adults at risk and almost all were now known to centre staff. According to records kept by the Home Office detention engagement team, 27 people had been identified as level 1 adults at risk because they had declared themselves to be at risk; 51 were at level 2 because of professional or other evidence demonstrating they were at risk; and five had been assessed at level 3 because the Home Office accepted evidence that detention was likely to cause the detainee harm.
- I.11** Weekly safer detention meetings were reasonably well attended and provided a good forum for sharing information on adults at risk. However, there was insufficient direct input from Home Office case owners.
- I.12** A supported living area in the Torr unit provided some vulnerable detainees with a calm environment. Staffing levels were higher in the unit than elsewhere in the centre and access to it was appropriately restricted to Torr residents.
- I.13** The centre had a good training package on the adults at risk policy for detention centre staff, which 86 out of 139 who had contact with detainees had completed. However, staff we spoke to were not sufficiently aware of the fact that detention was likely to harm detainees

assessed at level 3. Vulnerable adult care plans lacked focus and some staff did not understand the purpose of them. Care maps were often perfunctory, and some were left blank. Case reviews were rarely multidisciplinary when they should have been.

- I.14** According to local records, there had been 173 Rule 35 reports⁶ submitted in the previous six months. All reports concerned torture. Despite 42 detainees having been placed on constant supervision in the previous six months⁷ and 43% of detainees in our survey reporting mental health problems, no Rule 35 reports had been submitted for detainees having suicidal thoughts or other health concerns. (See key concern and recommendation S43.)
- I.15** The current waiting time for a Rule 35 assessment was too long, at about 10 days, and over a third of Home Office replies were late. According to local Home Office records, the percentage of detainees released because of a Rule 35 report had declined from 33% in the six months before the previous inspection, to just 14% in the same period before this inspection. This fall appeared to be out of step with the levels of vulnerability in the centre and the rise in self-harm since the previous inspection.
- I.16** We reviewed 10 reports and their Home Office responses. Case histories were better than we usually see. However, some references to injuries or use of weapons suggesting torture were not explored sufficiently. Although all reports contained a body map outlining scarring, assessments lacked detail. They included a brief statement of the consistency of scarring with mistreatment, but no information on the reasoning behind the statement. In some reports, it appeared that continuing detention might have had an adverse impact on the detainee, but no clear judgement was provided. Although most reports described symptoms that might have suggested post-traumatic stress disorder (PTSD), none gave an opinion on whether the detainee might have had this condition.
- I.17** The infliction of torture was accepted by the Home Office in nine cases. In six of them, detention was maintained because negative immigration factors were considered to outweigh the risks to the detainee. One detainee was released as a direct result of the Rule 35 report. In another case, it had been agreed to release the detainee before the Rule 35 report was considered. In a third case, the detainee had previously been granted bail in principle and was awaiting the provision of suitable accommodation. The report accepted he should have been released, but it took a further month for approved accommodation to be made available.

Recommendations

- I.18 All staff working in the centre should understand the risks faced by detainees assessed at level 3 of the Home Office's adults at risk policy.**
- I.19 Vulnerable adult care plans should be completed to a good standard and, where appropriate, case reviews should be multidisciplinary.**
- I.20 The centre and the Home Office should monitor Rule 35 reports to ensure that they are submitted, provide clear and detailed assessments, including on potential PTSD, and receive a prompt response.**
- I.21 Where evidence of torture is accepted, detention should only be maintained in exceptional circumstances, which should be documented on file.**

⁶ Detention centre Rule 35 requires that the Home Office be notified if a centre doctor considers a detainee's health to be injuriously affected by continued detention or the conditions of detention, or if a detainee may have been a victim of torture or has suicidal intentions.

⁷ Constant supervision should only be used in response to immediate and life-threatening risk of suicide or self-harm.

Self-harm and suicide prevention

- I.22** Since our previous inspection, two detainees had taken their own lives, most recently in 2017. Managers had formulated action plans in response to recommendations from the Prison and Probation Ombudsman's investigation reports into these deaths. The recommendations had largely been implemented, with a small number yet to be fully achieved.
- I.23** In the previous six months, there had been 113 self-harm incidents, involving 68 detainees, more than before the previous inspection (83 incidents involving 58 detainees). Managers were unclear why these figures had increased, and more work was required to determine why more detainees were harming themselves. (See key concern and recommendation S44.)
- I.24** ACDT procedures were implemented well. In the previous six months, 181 ACDT documents had been opened. Assessment interviews were conducted promptly. Risk reduction action was meaningful and completed before the ACDT process ended. Attendance at case reviews was variable, but mental health input was very good. The threat of removal was the most common trigger (an event that might cause a detainee to self-harm). Home Office attendance at case reviews was sporadic, but staff often provided verbal updates. The quality of interactions and the level of detail recorded in case reviews were very good. Post-closure reviews were conducted on time. We spoke to some detainees supported through ACDT procedures and they were complimentary about the care they received. Officers in residential units knew detainees at risk of self-harm well.
- I.25** As well as the monthly safer detention meeting (see paragraph I.36), an operational safer detention meeting was held every week. It focused on detainees who required additional support and attention, including those on ACDTs. Attendance was reasonably good and it was a good forum for information sharing across departments. However, there was no direct input from Home Office caseworkers. Instead, officers from the local detention engagement team attended, but their input was limited, despite immigration issues being central to detainees' distress.
- I.26** There had been 42 constant watches in the previous six months. The centre had three constant watch cells – one in the care and separation unit (CSU) and two in normal residential units. None of the constant watch cells provided a therapeutic environment. Doctors had not submitted Rule 35 reports for any of these detainees to alert the Home Office that the detainee might have been suffering from suicidal thoughts (see paragraph I.14). Managers reviewed the separation of detainees who were on ACDTs every day. In the cases we examined, separation was justified.
- I.27** The centre had updated its food and fluid refusal policy and it was in line with the relevant detention service order. In the previous six months, 12 detainees had refused food or fluid, fewer than before the previous inspection, when there had been 25. ACDTs were opened as necessary and officers provided good care and support to these detainees.

Safeguarding children

Expected outcomes:

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

- I.28** There had been 10 age dispute cases in the previous year. One detainee was released within 24 hours to the local social services department, where they were subsequently assessed as a child. There was no inter-agency review of this case so that lessons could be learned.

- I.29** Detainees in the other nine cases were found to have been adults. In one of them, the high court had granted permission to appeal the assessment that the detainee was adult and the case was ongoing. Our review of these cases raised concerns about decision-making where a detainee's age was in dispute. Lincolnshire social services department sometimes took far too long to attend the centre to assess a person's age. In one case, it took 10 days, and in another, seven. (See key concern and recommendation S45.)
- I.30** Two people claiming to be children were detained without having had a sufficiently thorough age assessment. In one case, detention was maintained on the basis of an old age assessment test, which had some months previously been declared unlawful by the Court of Appeal.⁸ In another case, in breach of its own policy, the Home Office detained someone on the basis of a social services assessment, without having examined it to ensure it complied with the law. (See key concern and recommendation S45.)
- I.31** Custodial staff opened care plans for young detainees awaiting an age assessment. We looked at two care plans, which were poorly completed and did not demonstrate that a sufficient assessment of the risks the detainee faced in Morton Hall had been conducted. In one of these cases, the detainee claimed to be 16 shortly after arriving in Morton Hall. The case was referred to Lincolnshire social services department for an age assessment, but no care plan was opened until nine days later. We were told that the reason for the delay was that the Detention Engagement Team had assessed the detainee to be an adult. However, as the Home Office had not updated all parts of its age assessment policy, they had used an old age assessment test, which was found to have been unlawful some months previously.⁹ (See key concern and recommendation S45.)
- I.32** Detainees who were a risk to children were identified and the risks managed well. Their details were now distributed among staff through the daily briefing note and to those covering relevant activities, such as visits.

Recommendation

- I.33** **Where a detainee is awaiting an age assessment, the centre should conduct an immediate, thorough risk assessment and put in place all reasonable measures to safeguard the detainee.**

Personal safety

Expected outcomes:

Everyone is and feels safe. The centre promotes positive behaviour and protects detainees from bullying and victimisation. Security measures and the use of force are proportionate to the need to keep detainees safe.

- I.34** In our survey, 30% of detainees said they felt unsafe at the time of the inspection, which was similar to other immigration removal centres (IRCs). In our detainee interviews, those who felt unsafe mentioned factors such as their uncertain immigration status, the length of detention and tension between some nationality groups, which on occasion led to fighting. In our survey and interviews, no detainees said staff had physically assaulted them. None of the

⁸ Until May 2019, Home Office Officials could assess a detainee to be adult where their appearance and demeanour very strongly suggested they were significantly over 18. The Court of Appeal found this test to be unlawful because it did not properly identify the margin of error inherent in such age assessments. In consequence, the Home Office amended its age assessment policy in May 2019. Now, two Home Office officials, one of whom must be a CIO, should only assess a someone to be adult if their appearance and demeanour very strongly suggests they are 25 years of age or over. If this test is not met, the person should be referred for a social services assessment by experienced, trained social workers.

⁹ *BF (Eritrea) v Secretary of State for the Home Department* [2019] EWCA Civ 872.

staff in our survey or interviews said they had seen force being used against detainees inappropriately.

- I.35** The centre felt calmer than at our previous inspection. We witnessed less antisocial behaviour, and relationships with staff were good (see paragraph 2.1). Serious assaults were rare – there had been one against a detainee and two against staff in the previous six months. However, over the same period, there had been 31 assaults on detainees and 26 on staff. These figures were higher than at our previous inspection (see key concern and recommendation S46). Many of the assaults on staff were attributable to three detainees, one of whom had serious mental health problems and had been held in the care and separation unit.
- I.36** The centre’s strategy for managing violence had improved since the previous inspection. Managers had published a thorough and clear safety strategy explaining how the centre would reduce violence and prevent self-harm. The safer detention team now comprised a manager, two custodial managers, an analyst and administrators. The monthly safer detention meetings were reasonably well attended and detailed data were analysed to identify hotspots and trends at the meetings. In late 2018, managers held a violence summit, which involved consulting 90 members of staff and 62 detainees. The summit led to identified action, which informed the safer detention continuous improvement plan.
- I.37** However, outcomes were still not sufficiently good and some violence reduction procedures were not implemented well enough. In the previous six months, of the 382 referrals to the safer detention team, 82 (about a fifth) had not been followed up. Officers used the challenge, support and intervention plan (CSIP) model¹⁰ to manage poor behaviour, but the plans had little impact. Two detainees had a CSIP during our inspection. Objectives and interventions outlined in the plans were vague and officers found the plans unhelpful (see key concern and recommendation S46). Instead, officers relied on their positive interpersonal skills and relationships with detainees to manage poor behaviour. Staff were also quick to mediate between different individuals and groups where necessary. Victims received support through vulnerable adult care plans (see paragraph 1.13).
- I.38** The centre’s ineffective rewards scheme had been discontinued.

Security and freedom of movement

Expected outcomes:

Detainees feel secure. They have a relaxed regime with as much freedom of movement as is consistent with the need to maintain a safe and well-ordered community.

- I.39** Physical security features continued to make the centre look and feel too much like a prison. Some razor wire had been removed since our previous inspection, but there was still a strikingly large amount of it around the centre. During the day, detainees could move freely around the well-maintained grounds and could access all areas. However, they had their movements restricted from 8.30pm in the evening and were locked on landings or, in Windsor and Fry units, in their cells. This remained excessive. (See key concern and recommendation S47.)
- I.40** Security meetings were effective and well attended. In addition, a weekly order and control meeting focused on intelligence from the previous seven days. There were good links

¹⁰ CSIPs are used by all adult prisons to manage those prisoners who are violent or pose a heightened risk of being violent. These prisoners are managed and supported on a plan with individualised targets and regular reviews. Some prisons also use the CSIP framework to support victims of violence.

between security and safer custody staff. The number of security incidents had declined significantly since the previous inspection.

- I.41** Procedural security was generally good and intelligence reports were well managed and up to date. However, there had been 19 strip-searches in the previous six months and we identified some that were not sufficiently justified (see key concern and recommendation S47). There was no routine cell searching. All searches were based on specific intelligence. During escorts, restraints were only used when justified by an individual risk assessment authorised by a manager. No detainees had been placed on closed visits in the previous six months.
- I.42** There was evidence that the availability of alcohol and drugs had declined since the previous inspection, particularly psychoactive substances.¹¹ In our survey, 9% of detainees said it was very or quite easy to get illicit drugs. Few detainees in our interviews were aware of drugs being used. The centre now had a dog trained to identify drugs and a drug itemiser, a machine that identifies substances on post, had also been purchased. The centre had revised its substance use strategy. An effective weekly drug tasking meeting was in place, along with a joint agency substance use meeting, which was held every two months.

Use of force and single separation

Expected outcomes:

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

- I.43** There had been 103 use of force incidents in the previous six months, which was high. However, force consisted mainly of lower level guiding holds (where a member of staff guides a detainee by holding their arm). Force was most often used to prevent self-harm (in 19 cases) or when detainees who had been identified as presenting particular risks were being escorted from the centre (in 26 cases). Unlike all other centres, officers carried batons, equipment that was inappropriate for a detainee population. One baton had been drawn but not used in the previous six months, compared with five drawn in the six months before the previous inspection. An appropriate investigation was completed. (See key concern and recommendation S47.)
- I.44** Documentation and video footage showed staff made good efforts to de-escalate situations and approved techniques were used. Quality assurance processes for paperwork and video-footage were good and lessons were learned. Paperwork was generally up to date and the Home Office provided oversight. However, monitoring data suggested that force had been used more frequently against some ethnic groups, but this had not been investigated. (See paragraph 2.23 and key concern and recommendation S49.)
- I.45** The physical environment of the separation unit had improved significantly. The unit was bright and clean and had a welcoming and well used 'reflection room', where detainees could relax, use games consoles and read books.
- I.46** There had been 85 uses of Rule 40 separation (removal from association in the interests of security or safety) in the previous six months, which was relatively high. The average length of Rule 40 separation had increased to about 37 hours in the previous six months, compared to about 24 hours in the six months before the previous inspection. However, we found it was used appropriately and was justified on the grounds of safety. There had been five cases

¹¹ Psychoactive substances are chemical substances that act on the central nervous system to alter brain function – perception, mood, consciousness, cognition and behaviour.

of Rule 42 separation (temporary confinement) lasting less than an hour for most of these detainees. Separation reviews were good. They were multidisciplinary and well-documented, and one that we observed was conducted well. However, there was no formal mechanism for monitoring the use of separation to identify emerging themes or concerns.

Recommendation

- I.47 The use of separation should be monitored and discussed in a formal meeting, where a response to emerging trends or concerns can be considered.**

Legal rights

Expected outcomes:

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

- I.48** Detainees had reasonable access to legal advice surgeries. However, some detainees and a number of agencies working with them said that the quality of representation was inconsistent. The Lincolnshire Action Trust (a third-sector organisation working on criminal justice issues) was monitoring the standard of representation. Only 62% of detainees said they had an immigration lawyer and only 34% said it was easy to receive a visit from their lawyer.
- I.49** There were two legal interview rooms. The large visits hall could be used if more than two interviews were due to take place at the same time, but staff told us this was rare. Legal representatives could bring laptops and phones into the centre. There were two video link rooms for court appearances. One video link suite was not working and we were told the link in the other had been unreliable in the past, which had undermined the fair conduct of some bail hearings.
- I.50** Bail for Immigration Detainees (a charity providing detainees with legal advice and representation) attended the centre once a month to advise detainees about bail applications, and its handbook was available in the library. Bail summaries were served promptly by 2pm on the working day before the hearing.
- I.51** Detainees had good access to the internet and could communicate with their lawyers by email. Websites for support organisations, country of origin information and legal advice were not blocked. Detainees could print legal documents with no restrictions on quantity. The library stocked a reasonable range of legal textbooks.
- I.52** About two-thirds of the population left the centre within a month and there had been a marked reduction in lengthy detentions since our previous inspection. However, five detainees had been held for more than a year, with the longest detained for over two years. In the previous six months, 36% of detainees were released into the community, which raised questions about whether detention had been necessary in many cases. A further unknown number of detainees were released following transfer to another IRC (see paragraph 4.19).
- I.53** Casework inefficiencies had prolonged detention in some of the cases we examined. One detainee had so far been held for 11 months while waiting for a decision on their asylum claim. It had taken the Home Office six months to decide on another detainee's human rights claim and a further six months for the tribunal to hear the case. Documentation

problems had prolonged detention in other cases. One detainee, who wanted to be deported, had so far been held for a year while attempts were made to redocument them. There were systemic problems with the provision of approved accommodation, which prolonged detention for many detainees being released on licence. (See paragraph 4.23 and key concern and recommendation S48.)

- I.54** Detainees had good access to diligent staff in the Home Office's local detention engagement team. Each detainee had a dedicated detention engagement officer. Engagement officers carried out induction interviews with detainees, which were generally good; however, we observed family members being used as interpreters, which was poor practice.
- I.55** The detention engagement team held two well-attended drop-in surgeries each week. Staff attending surgeries had computer access to the Home Office's casework records. Sessions we observed were useful. We saw some evidence in our casework sample and in meeting minutes of the engagement officers flagging up concerns with the Home Office casework teams. However, there was a limit to what local staff could do as they were not decision makers, which was frustrating for detainees.

Section 2. Respect

Staff–detainee relationships

Expected outcomes:

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

- 2.1 We saw mainly positive and respectful interactions between staff and detainees. In our detainee interviews and group meetings most detainees were very positive about staff and 72% of detainees in our survey said that staff treated them with respect always or most of the time. We observed instances where staff remained patient and showed understanding when dealing with frustrated detainees.
- 2.2 A keyworker scheme and a comprehensive policy were implemented in May 2019 and most staff were aware of the scheme and their role. Case notes we examined demonstrated positive interactions between staff and detainees. Keyworkers undertook regular welfare checks and there was evidence of interpretation services being used when needed to complete the checks.
- 2.3 Most staff understood the complex nature of working in an immigration removal centre (IRC) and empathised with detainees. In our interviews and survey, staff were generally very positive about the culture of the centre. As well as their initial training package, staff also received an informative annual refresher course about being in detention, which was delivered by local immigration staff.
- 2.4 Low-level antisocial behaviour was not always challenged consistently. We saw detainees ignoring the smoking rules, using inappropriate language and playing loud music, which frustrated other detainees.

Recommendation

- 2.5 **Staff should consistently challenge low-level antisocial behaviour, such as smoking and playing loud music.**

Good practice

- 2.6 *A keyworker scheme had been implemented to provide individual support to detainees. Staff regularly checked the welfare of detainees on their caseload, used interpretation and received relevant training.*

Daily life

Expected outcomes:

Detainees live in a clean and decent environment suitable for immigration detainees. Detainees are aware of the rules and routines of the centre. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair. Food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

Living conditions

- 2.7** Outside areas were reasonably clean and attractive, although we did see excess litter in the grounds at times and waste food that had been thrown on the ground after meals were served. Most detainees we spoke to said Morton Hall felt and looked like a prison. The large amount of razor wire, which was particularly noticeable around the centre shop and internet hub, contributed to the prison-like environment.
- 2.8** The units were reasonably clean overall, but there was ingrained dirt on some stairwells and handrails. Some flooring had been replaced, but most areas still needed to be redecorated.
- 2.9** Detainees were accommodated in single cells. All of those in the Windsor and Fry units had integrated in-cell showers, while those in other units used communal showers. Cells were well-equipped and in reasonable condition. Toilets were well-screened. The association rooms in the larger units were bright and well used, but less welcoming in the smaller units (see paragraph 3.8). All cells had privacy keys, which allowed detainees to secure their belongings when they left.
- 2.10** Ninety per cent of detainees in our survey said they could have a shower every day, but we found that over half the communal showers were not working and some were dirty. Managers told us that funding had been secured to address the problem. Detainees' access to clothing, bedding and toiletries was good and all units had good laundry facilities and small communal kitchens.

Recommendation

- 2.11 All showers should be in working order and kept clean.**

Detainee consultation, applications and redress

- 2.12** The detainee representative group (DRG) met every month and consultation arrangements with detainees were very good. Consultation led to tangible changes and detainees said they were confident about raising issues with the peer representatives on the DRG (see also paragraph 3.15). The consultation process was supported by a good action plan, which was updated every month. Some action points remained on the action plan for long periods mostly due to outside factors, and managers did all they could to address concerns.
- 2.13** Application forms were readily available in the units. They were logged by unit staff, but responses were not tracked effectively. Some detainees told us they did not always receive a reply.
- 2.14** Complaint forms were available in 19 languages in all units and included information on how to make a complaint and the appeals process. The centre's analysis of complaints was good

and responses were timely. None were outstanding. Once a complaint had been answered, the business hub completed a welfare check before it was handed to the detainee, to see if there were any concerns that might need to be taken into account before the detainee was given the response.

- 2.15** Forty per cent of complaints had been withdrawn in the previous six months. Managers had not investigated the reasons for this high figure. We spoke to some detainees who had withdrawn their complaints; some were content with the process but one said they had only withdrawn the complaint because they had been assured, wrongly, that their concern had been dealt with (see paragraph 2.26).

Recommendation

- 2.16** **The reasons for the large number of withdrawn complaints should be investigated in consultation with detainees, and action taken to address any concerns that are identified.**

Good practice

- 2.17** *The welfare check that was completed before complaint responses were issued ensured that detainees' well-being was taken into account before they received a reply.*

Residential services

- 2.18** Catering arrangements were well-organised and efficient. Most equipment in the kitchen was working. However, when it was not, the kitchen obtained temporary replacements. All staff had relevant qualifications to work in the kitchen. Detainees working in the kitchen also had some basic training, which included food safety, and completed an employability skills booklet.
- 2.19** The menu was based on a four-week cycle, which was reviewed regularly depending on the nationalities in the centre at the time. In our survey, 52% of detainees said the food was quite or very good. The portion sizes we saw were ample and there was a wide variety of meals. Food was served in a pleasant communal dining hall or detainees could take meals back to their units. The food comments book held in the dining hall was used well and entries detainees made received a response.
- 2.20** The centre shop sold a reasonable range of goods and opening times were good. Detainees did not have restrictions placed on the amount they could spend and new receptions received an allowance when they arrived. Detainees could order from two catalogues. Waiting times were not unduly long and, once they arrived, the items could be collected promptly from reception.

Equality, diversity and faith

Expected outcomes:

There is a clear approach to promoting equality and diversity, underpinned by processes to identify and address any inequality or discrimination. The distinct needs of detainees with protected and any other minority characteristics are recognised and addressed. Detainees are able to practise their religion. The multi-faith team plays a full part in centre life and contributes to detainees' overall care and support.

Strategic management

- 2.21** The centre had an updated policy, which provided a good framework for its approach to equality and diversity. A community engagement and equality manager was now leading the work.
- 2.22** The centre manager chaired the diversity and equality action team (DEAT) meetings, which were attended by senior managers from relevant departments, including health care and the Home Office. Detainee peer workers also attended the meetings. The meetings considered specific issues that had arisen, as well as comprehensive monitoring reports. However, equality and diversity were not being considered strategically, either in this meeting or elsewhere. This meant the diversity and equality action plan consisted mainly of low-level, specific action that had been identified in the DEAT meeting or in consultation forums. (See key concern and recommendation S49.)
- 2.23** A decision had been taken to hold the DEAT meetings once every two months rather than quarterly, but they had in fact taken place sporadically during the year and, at the time of the inspection, there had not been a DEAT meeting for four months. This had an adverse impact on the ability of the centre to respond promptly to concerns or trends that had been identified in monitoring data. (See paragraph 1.44 and key concern and recommendation S49.)
- 2.24** There were no dedicated detainee equality representatives and, although peer supporters attended the DEAT meeting, they had no training and received only a limited briefing on what was expected of them at the forum or in respect of equality and diversity work (see paragraph 3.15 and recommendation 3.18).
- 2.25** The process for reporting and investigating incidents of discrimination was not clear or well understood by either staff or detainees. The equality and diversity policy indicated that staff complaints about discrimination, should be made on discrimination incident reporting forms while detainees should use the general complaint system. Most of the staff and detainees we spoke to were not aware that detainees could make such complaints.
- 2.26** In our review of detainees' complaints, we came across four that included allegations of racism against a staff member. When we investigated further, in two cases, detainees denied having submitted the complaints in their names, and in the other two, neither was logged as a complaint involving discrimination, nor were they investigated as such. Both of the latter detainees had withdrawn their complaints after receiving assurances that the matter would be dealt with. However, one of these detainees said that the matter had not in fact been resolved (see paragraph 2.15 and recommendation 2.16).
- 2.27** In the previous six months, all 15 cases that were considered to have been allegations of discrimination had come from staff. These cases had been addressed appropriately and robust quality assurance was in place, which involved the centre and Just Lincolnshire, an external agency with the necessary competencies.

Recommendation

- 2.28 Staff and detainees should be briefed in full and given clear written guidance on how detainees can report incidents of alleged discrimination.**

Protected characteristics

- 2.29** The identification of detainees with protected characteristics had improved. Ongoing efforts to ensure relevant information was systematically collected from detainees had had some success, particularly in reducing the number of blank entries. However, there were significant disparities between the centre's data and the figures we collected in our anonymous survey of detainees, particularly in relation to sexual orientation, gender and health status. Our data suggested that the centre was not identifying all gay, bisexual and transgender detainees or those with disabilities. While staff perceived the disparity as being attributable to individuals' reluctance to disclose this information, this view was not based on proper investigation or evidence.
- 2.30** The centre had undertaken a large number of consultations with detainees with protected characteristics and proposals from these meetings were considered and often acted on. While there had been useful consultations with nationality groups, they mainly took place following violent incidents as part of efforts to reduce the risk of further violence.
- 2.31** Staff made efforts to meet the specific needs of detainees with protected characteristics. This was most apparent for those with disabilities, for many of whom appropriate plans were in place. Efforts were also made to provide detainees who had indicated that they were gay, with relevant information and support.
- 2.32** The equality manager had good connections with external organisations. A project undertaken in partnership with Just Lincolnshire and Stop Hate UK (a national organisation challenging hate crime and discrimination) involved promoting a dedicated phone line to report hate crimes in prisons and detention centres in the region among detainees and staff.
- 2.33** The centre ran a busy programme of diversity and equality events throughout the year to promote understanding and tolerance. Telephone interpretation was used well across the centre; there had been over 3,200 uses in the previous six months. Suitable phones were widely available.

Recommendation

- 2.34 The centre should investigate and address the reasons for the under-disclosure and/or under-recording of protected characteristics.**

Faith and religion

- 2.35** The chaplaincy catered well for the faith needs of detainees through services, events, activities and pastoral care. The centre had appointed a managing chaplain to oversee the faith provision, and they were supported by a full-time Muslim chaplain, part-time chaplains of other faiths, and a network of volunteers.
- 2.36** The multi-faith room was in the residential area of the centre. It was unlocked throughout the day, which allowed detainees easy access. It was large and could be divided, making it a

flexible space for services, prayers, events and meetings. Two other small multi-faith rooms were also available.

- 2.37** Bible and Qur'an reading classes took place on a weekly basis. Detainees could obtain religious books on request and, while there was a stock in some of the most commonly spoken languages, others could be ordered and received within a reasonable timeframe.
- 2.38** Members of the chaplaincy were generally able to meet new detainees within 24 hours of their arrival to clarify their faith needs and to promote the centre's faith-related services. They also attended assessment, care in detention and teamwork (ACDT) case management reviews for detainees at risk of suicide or self-harm and visited detainees on ACDTs at least once a day.
- 2.39** Events celebrating significant religious dates were organised, and, to promote understanding, detainees of other religions and none were often invited to attend.
- 2.40** In our detainee survey, 70% of English speakers said that they could speak to a chaplain of their faith in private, but the figure was only 32% among those who said that they could not speak English well. The managing chaplain was already aware of this issue and was taking steps to address it. For instance, a well-written leaflet, presenting the faith provision, had been translated into 17 of the languages most commonly spoken at the centre. Also, a phone with a conference call facility allowing easy access to interpretation services was being installed in the room used to provide detainees with spiritual support.

Health services

Expected outcomes:

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

Governance arrangements

The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)¹² and HM Inspectorate of Prisons under a memorandum of understanding agreement between the agencies. The CQC found there were no breaches of the relevant regulations.

- 2.41** A health needs assessment from 2016 had informed service delivery and a new document was being drawn up. Commissioners held quarterly contract review meetings and collaborative partnership working between the centre, the health provider and the commissioner was evident.
- 2.42** Staff we spoke to knew how to report clinical incidents. However, we came across a few incidents that had been dealt with, but had not been recorded on the clinical incident system, which was being addressed. Lessons learned from adverse incidents, audits, complaints and compliments informed service improvements and were shared with staff at team meetings. Good progress had been made on implementing Prisons and Probation Ombudsman health recommendations from investigation reports into fatalities.

¹² CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC's standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

- 2.43** Patient feedback was sought through surveys, and health was an agenda item on the monthly residential representative consultation group. Changes had been made as a result of detainees' suggestions.
- 2.44** Strong clinical leadership was evident and we saw professional, caring and compassionate interactions between health staff and detainees. Staff shortages caused by sickness and vacancies were suitably managed and the service had not been adversely affected, although staff were stretched at times.
- 2.45** Health staff received regular performance reviews and clinical and managerial supervision. There were plans to develop a greater focus on reflective practice for all staff. Mandatory training was well managed, although Nottinghamshire Healthcare NHS Foundation Trust was trying to source further personal protection training for staff. A good range of professional development was available and most staff were positive about their access to continued development. Primary care staff received support to develop essential skills, including in long-term conditions management and emergency physical assessment, so that they could provide responsive daily drop-in triage sessions.
- 2.46** Daily integrated staff handover meetings, written handovers and the weekly complex case meeting ensured that there was effective communication between all the health teams.
- 2.47** Professional telephone interpreting was embedded in practice and was used regularly (see paragraph 2.58). Consultations took place in private.
- 2.48** Health staff recorded information on SystemOne (the electronic clinical information system). The records we reviewed and regular qualitative record keeping audits demonstrated that standards were good.
- 2.49** Most services were delivered from the health centre, which resembled a community GP practice, although staff visited the units when needed. The facilities were generally good, but some fixtures and fittings did not fully comply with infection control standards, which the team was addressing.
- 2.50** Health care staff received life support training and responded to medical emergencies throughout the 24-hour period. Emergency equipment was in good order, regularly checked and all staff had access to strategically placed automated external defibrillators (AEDs). Eighty-four per cent of operational staff had received emergency first aid training. The centre now used the standard emergency colour code system to ensure health staff and ambulances were called promptly in medical emergencies. Health staff had run well-received staff briefing sessions about the use of these codes to ensure operational staff understood them.
- 2.51** Detainees could raise concerns, make complaints and offer compliments. Five local concerns (classified as less serious than a formal complaint) had been dealt with in the previous six months and no formal complaints had been made through the trust's complaints procedure. Detainees were offered appointments to discuss their concerns and response letters were respectful and addressed the issues raised but did not always include details about how a detainee could escalate their concern. While complaint forms were available in the waiting room, they were only in English and the process was not well advertised.
- 2.52** There was a centre-wide approach to health promotion and regular monthly well-being events. Regularly updated health promotion information in several languages was widely displayed. Arrangements for managing communicable diseases were robust.
- 2.53** The blood borne virus testing and treatment process had progressed commendably. Morton Hall was the first IRC to achieve hepatitis C micro-elimination (eliminating a virus in defined segments of the population to incrementally achieve national elimination), which was in line

with the national public health agenda. The time between screening and treating hepatitis C had been reduced. Detainees received treatment promptly and took their course of medication with them when they left the centre. Links with external services were effective and a specialist hepatitis C nurse visited the centre every week.

- 2.54** Detainees under 25 were offered chlamydia screening. Support to help detainees stop smoking was provided but uptake was low. Condoms were freely available.

Recommendations

- 2.55** **The confidential health care complaints process should be well advertised and forms should be available in various languages.**
- 2.56** **Responses to concerns should include information on how a detainee can escalate their concern if they are dissatisfied with the response.**

Good practice

- 2.57** *The proactive approach to blood borne virus testing and prompt treatment for hepatitis C helped promote the public health agenda to improve health and address detainees' medical needs.*

Primary care and inpatient services

- 2.58** A registered nurse carried out a prompt comprehensive screening for all new arrivals to identify their health and substance use needs. Necessary referrals were made and any immediate needs addressed. All relevant risk information was viewed and a mandatory field had been added to SystemOne, which meant that staff had to record the information. This process was audited. Telephone interpretation was used regularly, written information about health services was provided in several languages and the provision was explained to the detainee during reception. The screenings we observed were conducted professionally and sensitively.
- 2.59** All detainees were offered a GP appointment within 24 hours in line with IRC regulations, and staff routinely followed up those who did not attend.
- 2.60** Access to primary care services was generally good, but waiting times for detainees to be assessed under Rule 35¹³ were too long at 10 days; there were 19 detainees on the waiting list. None of the GPs working regularly in the centre were trained to complete Rule 35 assessments. Managers had escalated this concern to the commissioner and the Home Office to ensure that appropriate training is sourced. (See also paragraph 1.15 and recommendation 1.20.)
- 2.61** Primary care nurses ran daily walk-in triage clinics in the health care centre, and if necessary the detainee could see a GP if necessary. A routine GP appointment could be booked through the receptionist and it took about 11 days for detainees to be seen. Access to the podiatrist and optician was prompt. Those requiring physiotherapy and retinopathy screening were escorted to hospital.

¹³ Detention centre Rule 35 requires that the Home Office be notified if a centre doctor considers a detainee's health to be injuriously affected by continued detention or the conditions of detention, or if a detainee may have been a victim of torture or has suicidal intentions.

- 2.62** Patients with long-term health conditions, such as diabetes and asthma, had their conditions managed through a structured nurse-led approach. Care plans were created on or shortly after arrival and reviewed regularly by nurses, with GP input where necessary. Health staff, liaising with centre staff, managed detainees refusing food and fluid well.
- 2.63** Most detainees we spoke to were positive about health care services, but a few expressed some dissatisfaction particularly with external hospital appointment waiting times, although they were similar to those in the community. Detainees were referred promptly for secondary health services, and appointments, including medical holds, were managed well.
- 2.64** Detainees being released received a summary of their medical records and at least a week's supply of medication. Staff made arrangements to ensure there would be continuity of care before their release, removal or transfer where possible.

Recommendation

- 2.65** **Detainees requiring assessments under Rule 35 should be seen promptly by GPs who have received relevant training.**

Mental health

- 2.66** The mental health team provided a good responsive service based on a stepped care model approach (mental health services that address low-level anxiety and depression through to severe and enduring needs), covering primary and secondary care. Interventions ranged from self-help through to complex case management. The team's caseload was 15, and four detainees were receiving support through the care programme approach, a framework that assesses and supports those with a mental illness. The team consisted of a clinical matron and three nurses, and psychiatrist clinics were held twice a month. A well-being practitioner had been recruited and there were plans to introduce input from a psychologist for one day a week to enhance the service.
- 2.67** The team assessed detainees promptly and received an average of 120 referrals a month. Suitable self-help material was available in a range of languages. Nurses provided one-to-one sessions for detainees with, for example, situational anxiety and sleep issues, and made referrals to relaxation sessions. Nurses frequently visited detainees if they missed appointments to offer support and conduct welfare checks. The team routinely attended ACDT reviews as well as constant watch and segregation reviews.
- 2.68** In the previous six months, three patients had been referred for a transfer to hospital under the Mental Health Act. One had waited five weeks and another eight weeks despite health care staff liaising proactively with specialist mental health services and commissioners. Health care staff were also proactive in communicating with the Home Office about such cases if they considered that detention was inappropriate.
- 2.69** Patients who were prescribed medicines that might have affected their health were monitored. We saw evidence of staff researching information on the country a detainee might be removed to and involving patients in decisions about medicines that they needed before their removal from the UK.
- 2.70** The centre had provided external mental health awareness training for new officers, which 46% had received. Officers referred detainees to the mental health team promptly and swiftly informed nurses of behavioural changes or any concerns.

- 2.71** The mental health team was part of the Quality Network for Prison Mental Health Services, a national initiative with agreed standards providing a framework for quality improvement. The team had received a positive peer review in June 2019.

Recommendation

- 2.72** **Detainees should be transferred to external mental health facilities within Department of Health target timescales.** (Repeated recommendation 2.62)

Good practice

- 2.73** *The proactive stepped care model and membership of the Quality Network for Prison Mental Health Services had led to continued improvement and good outcomes in patient care.*

Substance use treatment

- 2.74** The centre's drug strategy was reviewed annually. Drug and alcohol intelligence was passed onto the substance use team and issues were discussed at drug strategy meetings, which health staff attended. There was some evidence of a small amount of illicit drug use within the centre, mainly cannabis and some use of psychoactive substances, although this had declined since the previous inspection (see paragraph 1.42). The substance use team had given detention officers a presentation on substance use awareness, which the centre had incorporated into its staff induction.
- 2.75** All new arrivals received an assessment of their substance use needs, and those requiring clinical treatment were seen promptly. The demand for clinical prescribing for drug and alcohol dependence remained low. Prescribing for opiate dependence usually focused on reduction; however, prescribing remained flexible and patients were involved in treatment decisions. During the inspection, three detainees were receiving methadone.
- 2.76** Nurses could administer medication for alcohol withdrawal without a GP prescription if required, which ensured prompt treatment. Clinical observations during the night and day were instigated as required.
- 2.77** The substance use team comprised one clinical nurse and two psychosocial practitioners. New arrivals were invited to an induction discussion and offered harm minimisation information in their own language. An average of 30 assessments were conducted each month. Relapse prevention and overdose awareness information, as well as advice about substances were offered to detainees on an individual basis.
- 2.78** The team recognised that many detainees were reluctant to get involved with substance use services, so it organised a range of engagement activities. Drop-in sessions were held twice a week, and there were activities to encourage detainees to consider the wider impact of substances throughout the centre.
- 2.79** Three relaxation sessions were offered every week, to which health and centre staff could refer detainees. An average of 25 detainees attended them every month and many attended regularly.
- 2.80** Suitable arrangements were made with relevant community teams to ensure detainees could continue with opiate substitution therapy if required, and the team was considering providing naloxone (a drug to manage a substance use overdose) to take home, to help minimise harm.

Medicines optimisation and pharmacy services

- 2.81** The management of medicines remained good. All medicines were delivered promptly and named-patient medication was supplied daily from Monday to Saturday.
- 2.82** A pharmacy technician was on site and good systems were in place to ensure medicines were managed safely and effectively. Another pharmacy technician post, recently vacated, had been filled. An area pharmacist visited every week, which supported effective governance, although some of the standard operating procedures (SOPs) were out of date. The trust had agreed that staff could continue using them until new SOPs had been introduced.
- 2.83** The pharmacy room was clean and tidy, and rooms and drug refrigerators were robustly monitored every day to ensure that heat-sensitive items were stored within the correct temperature range. All medicines, including controlled drugs, were stored securely and medicine cabinets were in good order.
- 2.84** Medication expiry dates were checked regularly and there was a satisfactory range of stock medicines, including antibiotics, and stock use was monitored.
- 2.85** Detainees were encouraged to request a repeat prescription for their medication as in the community, and the pharmacy technician and nursing staff explained the process and helped any detainee who was unsure about it.
- 2.86** The pharmacy technician and nurses competently administered medicines from the pharmacy room at 8.30am, 1pm and 6.45pm, and any controlled drugs, including methadone, at 9am. They were friendly and professional. Arrangements were made for medicines that needed to be administered at any other time to be dispensed. There was now officer supervision during administration times and the area was calm, efficient and well managed.
- 2.87** SystemOne was used for prescribing and administering medicines. Records we reviewed were complete and non-attendance was followed up. In-possession risk assessments were undertaken on reception and recorded on SystemOne. During the inspection, 83% of detainees on medication received it in possession. Health staff could administer an adequate supply of medicines for minor ailments without a GP prescription.
- 2.88** There was a regular drugs and therapeutics committee where prescribing data were analysed and medicine management incidents were discussed. Prescribers used an agreed formulary.

Oral health

- 2.89** A dentist and a dental nurse ran two dental sessions on site every week. Access was good and detainees could attend a drop-in clinic for triage and urgent care. Appropriate treatments were available. If a patient required urgent dental care in between the weekly sessions they would be taken to community dental services. The dental clinic was clean, and work was underway to replace cupboards that no longer met requirements. No equipment was sterilised on site. Dental and emergency equipment was monitored and maintained appropriately. Oral hygiene and dental health were promoted during dental clinics and information was available.

Section 3. Activities

Expected outcomes:

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

Access to activities

- 3.1 The centre provided a sufficient number of places to enable all detainees to attend a good range of activities. More than 15 different paid activities were available, providing 163 full-time places, and there were education places for between 80 and 144 detainees, depending on the daily timetable. The range of education courses offered was good and included information technology, music, art, business, food hygiene, barbering and cleaning science. Three English classes were offered to suit a range of ability levels.
- 3.2 In our survey, 34% of detainees said they did not have enough to do to fill their time, 38% said they did have enough to do and the remainder was unsure.
- 3.3 Detainees received information about the range of work available and how to apply as part of the centre's induction. Teaching staff attended to inform detainees about the courses on offer, but this did not lead to successful recruitment for education courses. The course information leaflet was only available in English, and detainees were not shown the education facilities. As a result, only about a third of those who expressed an interest attended the education department.
- 3.4 Take-up of education places was too low. During the inspection, 93 of the 243 detainees had a paid activity, but only 30 were enrolled on education courses. Attendance at education was poor – only about 13 detainees attended each education session during the inspection and there were no detainees in a significant number of classes. The centre's data showed that only about 18% of detainees had attended education between April and October 2019. (See key concern and recommendation S50).
- 3.5 Allocations to activities were managed efficiently. Notice boards around the centre provided up-to-date information about job vacancies. Most detainees could start work or education within a couple of days of applying. There were no waiting lists for courses or activities, apart from the community kitchen. One detainee had access to paid work restricted because they were considered to be non-complaint with the Home Office. This was fewer than we usually see.
- 3.6 Access to the internet was good. A suite of computers was available for 6.5 hours each day, including weekends, and there was an additional evening session on three days a week. All residents could spend 50 minutes a day on the computers.
- 3.7 The community kitchen was well-equipped and large enough to accommodate groups of up to 12 detainees, who were supervised by a centre chef. It was now open from 10am to 2pm, five days a week. Detainees valued the opportunity to prepare their national dishes and to eat together. However, demand was high, and groups had to wait about a month to access the kitchen, which was too long. Given its popularity, the kitchen could have been open more often.
- 3.8 Recreational facilities in the residential units were adequate – most had a pool table and computer games machines. Chess and other board games were available, and staff organised

weekly activities, such as bingo and pool competitions. Detainees had access to well-maintained garden areas around the units. However, the association rooms in the smaller units were cramped and shabby and only had a limited amount of furniture. In the newer units the rooms were larger, better equipped and well-used.

Education and work

- 3.9** Education facilities and resources were good and teachers were highly skilled in their subjects. For example, the music teacher made expert use of a synthesiser and music editing software to help a detainee create a finished piece of music. The art classroom was well equipped, and the displays demonstrated the high standards achieved by some students, three of whom had received Koestler awards (awarded by the prison arts charity Koestler Arts). Information technology facilities included a new suite of computers suitable for web design and application development courses. Classrooms provided an attractive learning environment and had good wall displays.
- 3.10** Teachers of English for speakers of other languages (ESOL) had designed a programme to develop vocabulary and language skills using modules based on typical activities, such as shopping. They made good use of individual learning plans to set weekly targets and record the progress of each detainee. Classes were often very small, and teachers adapted to this well, ensuring that individuals received the support they needed to progress from their starting points.
- 3.11** All education courses were well planned and offered in a modular format, enabling detainees to achieve units accredited by education provider Lincoln College within one week or less. Apart from a food hygiene course, none of the provision offered externally recognised qualifications. However, the college provided certificates of achievement. Over 1,500 certificates were awarded in 2018–2019 to 507 detainees.
- 3.12** Teachers provided some outreach courses, such as English and industrial cleaning, to engage detainees in the residential units or in employment. In other areas, such as the centre kitchen, detainees could work towards an employability certificate, which recognised their skills and work performance. Some of these detainees progressed to a course in the education department.
- 3.13** The centre's kitchen provided work of a commercial standard for up to 40 detainees. Detainees working in the recycling workshop had access to good waste sorting and recycling facilities. Detainees working in the gardens learned machinery operation and horticultural skills. Other paid activities included work in the kitchen, cleaning, laundry work, and painting in the units. The duties of each role were set out in brief job descriptions. Detainees were paid £1 per hour, in line with the Home Office contract.
- 3.14** Paid activity supervisors developed a good rapport with the detainees working with them, and some provided good skills training. Many paid activities helped to develop work skills, and in some areas, such as grounds maintenance, the college provided a certificate showing the skills achieved.
- 3.15** The centre employed up to 12 peer support workers, who assisted other detainees with their questions and concerns and helped them to complete forms. In many cases they provided a good service, but they did not receive sufficient training or support.
- 3.16** Managers reviewed the curriculum regularly, using feedback from surveys and consultation meetings with detainees. This had led to more curriculum opportunities, such as business courses, some higher-level information and communications technology modules, and a

weekly health and safety course for detainees in paid activity. The centre had also introduced shorter modules, which were better suited to the population, most of whom remained at the centre for no more than a few weeks.

- 3.17** Education managers monitored the quality of teaching appropriately. Teachers were regularly observed and received support to improve their practice. Five members of education staff had attended formal staff development in the current year. Others had developed their knowledge through attendance at meetings, briefings, and prison training.

Recommendation

- 3.18 Peer supporters should receive training, supervision and support.**

Library provision

- 3.19** The library was pleasant – it had a small number of armchairs where detainees could read newspapers or browse books. The library was open six days a week, including on one evening, and was well used. In October 2019, 3500 detainee visits were recorded, and almost 4500 items were borrowed, most of which were DVDs.
- 3.20** The stock was large – there were over 9000 items, including over 2000 DVDs, which were very popular. The book stock included those in a variety of languages and a small display of ‘easy reader’ books to help detainees learning to read English. The library subscribed to newspapers in more than 10 languages. Up-to-date legal texts on immigration were available for reference. Detainees had access to library computers for word processing and to a fax machine.
- 3.21** The new librarian was improving data collection to better monitor library use. The rapid turnover of detainees meant it was difficult to determine the total number of active library users. However, over 500 new members were signed up in September and October 2019, indicating that a large proportion of detainees made use of the library.

Fitness provision

- 3.22** Facilities for sport and physical activity were good. The gym was open every morning and afternoon, and on four evenings per week. Physical education (PE) facilities included a sports hall, an outdoor all-weather sports area, a weight training room and a cardiovascular fitness training room. All were well equipped and maintained. Detainees were provided with sports kit and footwear, and the changing room and shower facilities were in good condition, with shower screens in place.
- 3.23** The PE instructors were appropriately qualified, and ran a range of sports activities, including football, cricket, badminton, volleyball and basketball. A new schedule was drawn up every day to reflect the needs and preferences of the population. They also provided an activities programme including daily induction and circuit training sessions. The key points of the induction were available in a number of languages.
- 3.24** PE staff maintained a good record of participation rates, which they used to plan their programme of activities to maximise detainee involvement. Instructors provided specific exercise sessions to suit the needs of those over 50 and those aged between 18 and 25, and remedial activities were available for those with injuries or medical conditions. Staff organised regular games competitions, often linked to sporting events in the news to

stimulate interest. Over the previous six months, the centre's figures showed that about 55% of the population had used the gym.

Section 4. Preparation for removal and release

Welfare

Expected outcomes:

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

- 4.1 The welfare service, provided by the Lincolnshire Action Trust (LAT) (a third-sector organisation working on criminal justice issues), was an important resource for detainees in the centre. The well-trained and capable advisers visited all new arrivals within 24 hours to assess their welfare needs.
- 4.2 Daily drop-in and appointment sessions were held in the main welfare office next to the library and, in the previous six months, an average of 466 detainees a month had been seen at these sessions. The welfare team assisted detainees with a wide range of issues, including retrieving lost property, contacting and booking appointments with solicitors and securing appointments with the Morton Hall Detainee Visitors Group (MHDVG) (a network of volunteer visitors who offer detainees at the centre emotional and practical support) (see paragraph 4.11). The welfare team was no longer inundated with requests that should have been directed to the Home Office.
- 4.3 Two advisers usually worked with detainees in the welfare office at the same time, which might have compromised confidentiality. We were assured that detainees were offered confidential appointments if they required them, but they were outside session times and could have led to delays. The welfare team had another small office, but it did not have an alarm and was not currently used for appointments.

Visits and family contact

Expected outcomes:

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

- 4.4 The visits provision was generally good. The centre was open for social visits every afternoon and two evenings every week. On Thursdays, social visits could take place, without interruption, from lunchtime until the evening.
- 4.5 The LAT now managed all visiting arrangements from bookings to receiving visitors and offering support. Visits could be booked by telephone during the working day. During our inspection there were software problems with both the booking line and the line that was used to temporarily replace it, which meant that callers could not get through. These problems were resolved before we left. Visitors who arrived without an appointment were usually accommodated.
- 4.6 Those booking a visit were offered a free taxi from Newark or Lincoln train stations to and from the centre. Families appreciated this service.
- 4.7 Visitors were initially received by friendly and helpful LAT staff in the visitors' centre outside the centre, which was known as the reception house. The reception house was welcoming

and had toys and games suitable for young children. LAT staff tried to identify any needs or issues of concern, provide assistance and inform visitors about sources of support. LAT staff also provided direct welfare support to detainees in the centre, which meant that they could promptly address any concerns families raised.

- 4.8** Visits took place in the bright and suitably furnished visits hall and, weather and staffing permitting, in a pleasant outdoor space. Hot drinks and snacks were available from the vending machine, but hot food was no longer provided. There was a well-equipped play space for younger children.
- 4.9** There was room for 14 visits, although far fewer took place at any one time. There was a dedicated room for monitored closed visits, which had not been used in the previous six months.
- 4.10** The visits we observed were well organised and staff oversaw them respectfully. The visitors we spoke to were positive about their experiences. Visits were sometimes delayed because detainees had to wait to be escorted from the residential area to the visits hall. Themed family days were held about once every two months.
- 4.11** The MHDVG provided a valuable service, visiting mostly isolated detainees. Constructive relationships had been established between the visitors' group, centre managers and the LAT. Although MHDVG's provision was currently limited to detainees speaking English, there were plans to enable their visitors to use a room with phone interpretation facilities.

Good practice

- 4.12** *Staff from LAT met families in the visitors' centre and made efforts to identify any welfare needs they may have had. As LAT also provided direct welfare support to detainees in the centre, they could quickly address any concerns families raised about their detained relatives.*

Communications

Expected outcomes:

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

- 4.13** Detainees had good access to internet facilities. The computer room was open seven days a week and we did not find any legitimate internet sites blocked. Detainees' access to their email accounts was good, but social networking remained prohibited. A video-calling service had been introduced and was proving popular.
- 4.14** Detainees could use mobile phones without cameras or internet connections. Phones were provided on arrival if detainees did not have a suitable one. Detainees could purchase telephone credit or, if they lacked funds, received a loan of £5 on arrival. The SIM card offered detainees good rates for international calls and they could also buy credit from the shop. They could also use their own SIM cards if they were compatible. Detainees continued to experience problems with the mobile phone signal, which was poor in most of the centre. This limited their ability to communicate.
- 4.15** Arrangements for incoming and outgoing faxes remained good. Detainees could send faxes from all residential units. Staff delivered incoming faxes to detainees within four hours or 30 minutes if marked urgent.

- 4.16** The centre did not have large amounts of incoming or outgoing mail, but processes were sound. Incoming mail was sent to detainees on the same day. Outgoing mail was picked up from the units every day. Detainees could send an unlimited amount of free legal mail and one additional letter per week, including to international addresses.

Recommendations

- 4.17** Detainees should have access to social networking sites to support contact with family and friends.
- 4.18** The centre should ensure that detainees can receive a good mobile phone signal in all parts of the centre.

Leaving the centre

Expected outcomes:

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

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

- 4.19** In the previous six months, 2261 detainees had left the centre – 819 were released into the community, 1141 were transferred to other places of detention and 301 were removed from the UK.
- 4.20** Services for detainees leaving the centre had improved since the previous inspection, as LAT's welfare team now saw the vast majority of detainees before removal, transfer or release. Reception staff contacted LAT when detainees were being released from the centre. LAT staff had seen 92% of these detainees in the previous six months to provide advice. All detainees issued with removal directions were also offered an appointment and 88% had received support from the team in the previous six months.
- 4.21** LAT provided information packs on destination countries. Staff helped detainees who needed clothing and bags, organised final visits for family and friends, and had sometimes arranged a courier to collect property from detainees' homes. Staff had good working relationships with partner organisations in the community.
- 4.22** The centre also held community engagement events, attended by duty solicitors, local immigration firms and support organisations, which was a positive initiative. Detainees could attend on a drop-in basis.
- 4.23** There were systemic problems concerning the provision of accommodation. For example, in September 2019, an immigration judge had, in principle, granted bail to two detainees, subject to the provision of appropriate accommodation. Both were still detained two months later. In one of these cases, for several months Home Office detention reviews merely noted that Northern Ireland probation services were not being cooperative with the assessment of a release address. Other detainees were released to no fixed address. The Home Office did not monitor the extent or impact of these problems. (See paragraph 1.53 and key concern and recommendation S48.)
- 4.24** Public protection arrangements for detainees leaving the centre were sound and better than we usually see. There was a public protection coordinator and good processes to ensure detainees with public protection issues were identified. The centre had access to the violent and sex offender register and staff liaised with relevant authorities when detainees were

released. Reception staff were responsible for explaining licence conditions to relevant detainees on release.

Recommendations

- 4.25** The centre should monitor the number of detainees being released to no fixed address.
- 4.26** The Home Office should take action to ensure that all detainees released without means have access to settled accommodation.

Good practice

- 4.27** *The well-organised welfare service ensured that trained advisers saw the vast majority of detainees leaving the centre to offer advice and support.*

Section 5. Summary of recommendations and good practice

The following is a listing of repeated and new key concerns and recommendations, general recommendations and examples of good practice included in this report. The reference numbers in the left-hand column refer to the paragraph location in the main report.

Key concerns and recommendations		Directed to:
S41	<p>Key concern: Many detainees were transferred to and from the centre during the night for reasons of operational convenience. In our sample, 42% of detainees arriving in the centre arrived between 10pm and 6am, with many arriving between midnight and 3am.</p> <p>Recommendation: Detainees should not be subjected to unnecessary overnight transfers around the detention estate.</p>	The Home Office and Escort Contractor
S42	<p>Key concern: Induction processes were poor. Detainees received an out-of-date induction booklet. One-to-one induction interviews were not tailored to the experiences of the individual. The tour of the centre for new arrivals did not take place during our inspection.</p> <p>Recommendation: Detainees should be provided with key information during their induction. They should be given a tour of the centre and an induction booklet containing up-to-date information.</p>	The centre manager
S43	<p>Key concern: Many detainees reported mental health problems and 42 detainees had been placed on constant supervision in the previous six months because of concerns about their risk of self-harm. However, no Rule 35 reports had been written outlining detainees' suicidal thoughts or other health concerns.</p> <p>Recommendation: Doctors should submit a Rule 35 report to the Home Office on any detainee they suspect of having suicidal thoughts or if there are other serious health concerns that may require a review of detention.</p>	The centre manager, Head of Healthcare and the Home Office
S44	<p>Key concern: The number of self-harm incidents was high. In the previous six months, 68 detainees had been involved in 113 self-harm incidents, more than over a similar period before the previous inspection. Managers did not know why these figures had increased.</p> <p>Recommendation: Managers should investigate the increase in the number of self-harm incidents and the number of individuals who self-harm. The investigation should inform an effective action plan that reduces the prevalence of self-harm.</p>	The centre manager

S45	<p>Key concern: There were weaknesses in the management of age dispute cases. Three detainees were detained with insufficient evidence to show that they were adults.</p> <p>Recommendation: Where someone claims to be a child, they should only be detained if there is sufficient evidence, assessed to the correct legal test, that they are an adult.</p>	The Home Office
S46	<p>Key concern: In the previous six months, more than a fifth of incidents referred to the safer detention team had not been followed up. Challenge, support and intervention plans used to manage perpetrators had little impact on detainees' behaviour and officers had little faith in the plans. Objectives and interventions in the plans were vague and did not reflect the positive mediation that officers often used with detainees.</p> <p>Recommendation: Managers should ensure that all safer detention referrals are investigated and, where appropriate, result in perpetrators being effectively challenged and supported.</p>	The centre manager
S47	<p>Key concern: The physical security features continued to make the centre look like a prison. The amount of razor wire was excessive and some detainees were held in cells. Detainees were locked up in the evenings from 8.30pm, which was too early. Staff carried batons and not all strip-searches were adequately justified.</p> <p>Recommendation: The centre should provide a relaxed environment and living conditions that are as near as possible to normal life in the community.</p>	The centre manager
S48	<p>Key concern: Too many detainees were still held for prolonged periods. Inefficiencies in casework prolonged some detention unnecessarily. Systemic delays in the provision of approved accommodation for detainees being released on licence contributed to the problem.</p> <p>Recommendation: There should be a time limit on detention. Casework for detainees should be progressed with due diligence. The Home Office and HM Prison and Probation Service should ensure prompt provision of approved accommodation.</p>	The Home Office and HM Prison and Probation Service
S49	<p>Key concern: Equality and diversity work lacked strategic oversight and direction. The diversity and equality action plan consisted mainly of low-level action points and DEAT meetings had not taken place for four months, leading to delays in responding to the concerns identified through data analysis.</p> <p>Recommendation: Managers should ensure that equality and diversity work is strategic and proactive, and that potential</p>	The centre manager

	concerns emerging from data analysis are investigated promptly.	
S50	<p>Key concern: Few detainees were attending education. Not enough was done to encourage detainees to use the education department's facilities. As a result, few detainees participated in the courses and activities offered, and many classes were underused.</p> <p>Recommendation: Managers should set targets to improve the use of the education provision and take steps to achieve them.</p>	The centre manager
General recommendations		Directed to:
1.18	All staff working in the centre should understand the risks faced by detainees assessed at level 3 of the Home Office's adults at risk policy.	The centre manager
1.19	Vulnerable adult care plans should be completed to a good standard and, where appropriate, case reviews should be multidisciplinary.	The centre manager
1.20	The centre and the Home Office should monitor Rule 35 reports to ensure that they are submitted, provide clear and detailed assessments, including on potential PTSD, and receive a prompt response.	The centre manager and the Home Office
1.21	Where evidence of torture is accepted, detention should only be maintained in exceptional circumstances, which should be documented on file.	The Home Office
1.33	Where a detainee is awaiting an age assessment, the centre should conduct an immediate, thorough risk assessment and put in place all reasonable measures to safeguard the detainee.	The centre manager
1.47	The use of separation should be monitored and discussed in a formal meeting, where a response to emerging trends or concerns can be considered.	The centre manager
2.5	Staff should consistently challenge low-level antisocial behaviour, such as smoking and playing loud music.	The centre manager
2.11	All showers should be in working order and kept clean.	The centre manager
2.16	The reasons for the large number of withdrawn complaints should be investigated in consultation with detainees, and action taken to address any concerns that are identified.	The centre manager
2.28	Staff and detainees should be briefed in full and given clear written guidance on how detainees can report incidents of alleged discrimination.	The centre manager
2.34	The centre should investigate and address the reasons for the under-disclosure and/or under-recording of protected characteristics.	The centre manager
2.55	The confidential health care complaints process should be well advertised and forms should be available in various languages.	The centre manager and Head of Healthcare
2.56	Responses to concerns should include information on how a detainee can escalate their concern if they are dissatisfied with the response.	The centre manager and Head of Healthcare
2.65	Detainees requiring assessments under Rule 35 should be seen promptly by GPs who have received relevant training.	The centre manager and Head of Healthcare

2.72	Detainees should be transferred to external mental health facilities within Department of Health target timescales. (Repeated recommendation 2.62)	Healthcare provider
3.18	Peer supporters should receive training, supervision and support.	The centre manager
4.17	Detainees should have access to social networking sites to support contact with family and friends.	The Home Office
4.18	The centre should ensure that detainees can receive a good mobile phone signal in all parts of the centre.	The centre manager
4.25	The centre should monitor the number of detainees being released to no fixed address.	The centre manager and the Home Office
4.26	The Home Office should take action to ensure that all detainees released without means have access to settled accommodation.	The Home Office
Examples of good practice		
2.6	A keyworker scheme had been implemented to provide individual support to detainees. Staff regularly checked the welfare of detainees on their caseload, used interpretation and received relevant training.	
2.17	The welfare check that was completed before complaint responses were issued ensured that detainees' well-being was taken into account before they received a reply.	
2.57	The proactive approach to blood borne virus testing and prompt treatment for hepatitis C helped promote the public health agenda to improve health and address detainees' medical needs.	
2.73	The proactive stepped care model and membership of the Quality Network for Prison Mental Health Services had led to continued improvement and good outcomes in patient care.	
4.12	Staff from LAT met families in the visitors' centre and made efforts to identify any welfare needs they may have had. As LAT also provided direct welfare support to detainees in the centre, they could quickly address any concerns families raised about their detained relatives.	
4.27	The well-organised welfare service ensured that trained advisers saw the vast majority of detainees leaving the centre to offer advice and support.	

Section 6. Appendices

Appendix I: Inspection team

Martin Lomas	Deputy chief inspector
Hindpal Singh Bhui	Team leader
Colin Carroll	Inspector
Sandra Fieldhouse	Inspector
David Foot	Inspector
Natalie Heeks	Inspector
Deri Hughes Roberts	Inspector
Angela Johnson	Inspector
Steve Oliver Watts	Inspector
Chris Rush	Inspector
Kam Sarai	Inspector
Nadia Syed	Inspector
Darren Wilkinson	Inspector
Caroline Wright	Inspector
Louise Hopper	Head of Secretariat
Maureen Jamieson	Health and social care inspector
Jo McDonald	Care Quality Commission inspector
Sharlene Andrew	Researcher
Becky Duffield	Researcher
Rahul Jalil	Researcher
Amilcar Johnson	Researcher

Appendix II: Progress on recommendations from the last report

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

Safety

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

At the last inspection, in 2016, escort arrangements continued to be weak. Reception, first night and induction processes were generally good, with some significant exceptions. Violence and antisocial behaviour had significantly increased. The violence reduction strategy was underdeveloped. Self-harm had risen substantially, although at-risk detainees were reasonably well supported. Safeguarding procedures did not reflect the Home Office's new guidance. Dynamic security was good but some security procedures were disproportionate and physical security was excessive. The punitive rewards scheme was inappropriate for an immigration detainee population. Use of force had risen but governance was good. Detainees who were separated were kept for a shorter time than previously. Detainees had reasonable access to legal advice surgeries, but many did not have ongoing legal representation. A significant number of detainees had been detained for excessively long periods; two men had been detained on three separate occasions for a total of more than three years. Rule 352 procedures were generally good, but recent guidance on the definition of torture had not been implemented. Outcomes for detainees were not sufficiently good against this healthy establishment test.

Main recommendations

There should be robust strategic action to reduce violence and make the centre safer. The violence reduction strategy should be informed by comprehensive analysis of long-term trends to determine the reasons for the violence and set clear priorities. (S35)

Partially achieved

The reasons for the increased levels of self-harm should be thoroughly investigated and inform a comprehensive strategic action plan to reduce self-harm. Local investigations into serious acts of self-harm should be robust, and all resulting learning points should inform the suicide and self-harm strategy. (S36)

Partially achieved

The living environment should be more open and less prison-like, and security measures should be proportionate for a detainee population. Physical restrictions, such as razor wire and zone fencing, should be reviewed very regularly and lifted as soon as risks have abated. (S37)

Not achieved

All casework should be progressed promptly. The reasons for lengthy detentions should be analysed and appropriate remedial action taken. (S38)

Not achieved

Recommendations

Detainees should receive written information about the centre before they arrive in a language they understand, and be told what is going to happen next. (1.4)

Not achieved

Detainees should not be subjected to excessive or overnight transfers around the detention estate. (1.5)

Not achieved

All new arrivals should be searched in private. (1.11)

Achieved

All new arrivals, wherever they are located, should receive a timely induction. (1.12)

Not achieved

Assessment, care in detention and teamwork (ACDT) processes should be improved, care plans should address all the detainee's issues and risk assessments should be evidence-based. (1.22)

Achieved

All staff should have effective training in the adults at risk in immigration detention guidance. Such detainees should be subject to effective multidisciplinary oversight, and the impact of detention on them should be monitored and communicated promptly to Home Office caseworkers. (1.26)

Not achieved

Procedures to identify detainees who pose a risk to children should be implemented robustly, and visits staff should be able to identify such detainees immediately. (1.31)

Achieved

There should be multiagency reviews of the cases where children have been held in the centre in order to learn safeguarding lessons. (1.32)

Not achieved

All detainees should have full access to the centre's amenities. (1.42)

Achieved

The rewards scheme should focus on incentive and reward rather than punishment. (1.46)

No longer relevant

Detainee custody officers should not carry batons. (1.53)

Not achieved

Use of force documentation should be completed and kept together. (1.54)

Achieved

The rule 42 cell should be refurbished and redecorated. (1.55)

Achieved

The contact management team should conduct comprehensive induction interviews of all detainees within 24 hours of their arrival, and detainees should know what is happening with their cases. (1.68)

Partially achieved

Respect

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

At the last inspection, in 2016, the cleanliness and condition of the accommodation, especially showers, had deteriorated. Staff engaged effectively with some very frustrated detainees and maintained good relationships overall. The needs of detainees with protected characteristics were not always met. Faith provision was generally good. Complaints were well managed. The quality of food was adequate but the 'cultural kitchen' was very underused. Health services were good. Outcomes for detainees were reasonably good against this healthy establishment test.

Recommendations

Regular training about immigration detention and the particular circumstances and backgrounds of detainees should be delivered regularly to all staff. (2.11)

Achieved

All parts of the centre should be kept clean and free of graffiti. (2.7)

Achieved

The equality action plan should be comprehensive and fully implemented. It should include an objective to develop monitoring by nationality. (2.16)

Partially achieved

There should be specific forums for detainees from all protected characteristics groups to encourage information-sharing, support and confidence. (2.23)

Achieved

Detainees with disabilities should be systematically identified and, wherever necessary, supported with care plans and regularly reviewed personal emergency evacuation plans. (2.24)

Achieved

Support services for gay detainees and young adults should be developed and promoted. (2.25)

Achieved

Detainees should be able to use prayer mats at all times. (2.28)

Achieved

Health care facilities should comply with all relevant infection control standards. (2.40)

Achieved

There should be sufficient operational staff on duty who are first aid and defibrillator trained to ensure a prompt response to medical emergencies. (2.41)

Achieved

Detainees requiring assessments under rule 35 should be seen promptly. (2.50)

Not achieved

Detainee custody officers should supervise the drug administration queue to maintain order and ensure detainees have adequate privacy. (2.55)

Achieved

Detainees should be transferred to external mental health facilities within Department of Health target timescales. (2.62)

Not achieved (recommendation repeated, 2.72)

A comprehensive drug strategy should include awareness sessions in new psychoactive substances for staff and detainees. (2.67)

Achieved

Damaged catering equipment should be repaired or replaced promptly. (2.73)

Achieved

The opening hours of the ‘cultural kitchen’ and the numbers able to use it should be substantially increased; the facility should also be widely promoted among detainees. (2.74)

Achieved

Activities

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

At the last inspection, in 2016, detainees had reasonable access to activities and facilities were good. There was a range of education provision and teaching and learning were good. There was enough work for the population and no waiting lists, although security clearance could be slow. The library provided a well-used service. Fitness provision was good. Outcomes for detainees were good against this healthy establishment test.

Recommendations

Detainees should not be prevented from accessing education or paid work because of non-compliance with Home Office Immigration Enforcement. (3.6)

Not achieved

Quality assurance arrangements should ensure that areas for improvement are clearly identified, and that the effectiveness of actions can be measured. (3.13)

Achieved

Vetting procedures should be undertaken and completed promptly so that detainees can start paid work without unnecessary delay. (3.17)

Achieved

The agreement for gym users should be available in a range of languages and be legible, so that detainees know what is expected of them and what they can expect from staff. (3.25)

Achieved

Preparation for removal and release

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

At the last inspection, in 2016, welfare staff provided a valuable service. Visits provision and family support work were good. Mobile phone reception remained a problem. Detainees had reasonable access to the internet. Removal and release work was better than we usually see. Outcomes for detainees were good against this healthy establishment test.

Recommendations

The local Home Office contact team should deal with relevant immigration and legal issues, enabling detainees to have prompter access to the welfare support provided by Children's Links. (4.3)

Achieved

Detainees should have appropriate access to the services of a volunteer visitors' group. (4.9)

Achieved

Detainees should only be prevented from accessing social networking and video-calling sites on the basis of an individual risk assessment. (4.14)

Partially achieved

Welfare staff should systematically assess all detainees before release or removal to ensure that their needs have been met. (4.21)

Achieved

If allegations of assault are made during removal, supported by medical evidence, the removal should be delayed pending the police investigation. (4.22)

Not achieved

Appendix III: Detainee population profile

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

Population breakdown by:

(i) Age	No. of men	No. of women	No. of children	%
Under 1 year	0	0	0	0%
1 to 6 years	0	0	0	0%
7 to 11 years	0	0	0	0%
12 to 16 years	0	0	0	0%
16 to 17 years	0	0	0	0%
18 years to 21 years	18	0	0	7.4%
22 years to 29 years	68	0	0	27.9%
30 years to 39 years	96	0	0	39.3%
40 years to 49 years	46	0	0	18.9%
50 years to 59 years	13	0	0	5.3%
60 years to 69 years	3	0	0	1.2%
70 or over	0	0	0	0%
Total	244	0	0	100.0%

(ii) Nationality Please add further categories if necessary	No. of men	No. of women	No. of children	%
Afghanistan	7	0	0	2.9%
Albania	48	0	0	19.7%
Algeria	4	0	0	1.6%
Angola	0	0	0	0%
Bangladesh	15	0	0	6.1%
Belarus	0	0	0	0%
Cameroon	0	0	0	0%
China	12	0	0	4.9%
Colombia	0	0	0	0%
Congo (Brazzaville)	0	0	0	0%
Congo Democratic Republic (Zaire)	0	0	0	0%
Ecuador	0	0	0	0%
Estonia	1	0	0	0.4%
Georgia	0	0	0	0%
Ghana	4	0	0	1.6%
India	21	0	0	8.6%
Iran	10	0	0	4.1%
Iraq	9	0	0	3.7%
Ivory Coast	0	0	0	0%
Jamaica	4	0	0	1.6%
Kenya	2	0	0	0.8%
Kosovo	0	0	0	0%
Latvia	1	0	0	0.4%
Liberia	0	0	0	0%
Lithuania	6	0	0	2.5%

Malaysia	1	0	0	0.4%
Moldova	1	0	0	0.4%
Nigeria	8	0	0	3.3%
Pakistan	18	0	0	7.4%
Russia	1	0	0	0.4%
Sierra Leone	1	0	0	0.4%
Sri Lanka	0	0	0	0%
Trinidad and Tobago	0	0	0	0%
Turkey	1	0	0	0.4%
Ukraine	1	0	0	0.4%
Vietnam	7	0	0	2.9%
Yugoslavia (FRY)	0	0	0	0%
Zambia	0	0	0	0%
Zimbabwe	4	0	0	1.6%
Other (please state)	0	0	0	0%
BRAZILLIAN	1	0	0	0.4%
BRITISH	1	0	0	0.4%
CENTRAL AFRICAN	1	0	0	0.4%
CZECH	1	0	0	0.4%
EGYPTIAN	1	0	0	0.4%
ERITREAN	1	0	0	0.4%
GAMBIAN	3	0	0	1.2%
GREEK	1	0	0	0.4%
HUNGARIAN	2	0	0	0.8%
ITALIAN	1	0	0	0.4%
LEBANESE	1	0	0	0.4%
MALAWIAN	1	0	0	0.4%
MOROCCAN	1	0	0	0.4%
NORWEGIAN	1	0	0	0.4%
PALESTINIAN	1	0	0	0.4%
POLISH	11	0	0	4.5%
PORTUGUESE	1	0	0	0.4%
ROMANIAN	13	0	0	5.3%
RWANDAN	1	0	0	0.4%
SLOVAK	1	0	0	0.4%
SOMALIAN	6	0	0	2.5%
SUDANESE	1	0	0	0.4%
SYRIAN	3	0	0	1.2%
TUNISIAN	1	0	0	0.4%
UZBEKISTANI	1	0	0	0.4%
Total	244	0	0	100.0%

(iii) Religion/belief Please add further categories if necessary	No. of men	No. of women	No. of children	%
Buddhist	10	0	0	4.1
Roman Catholic	22	0	0	9.0%
Orthodox	1	0	0	0.4%
Other Christian religion	39	0	0	16.0%
Hindu	5	0	0	2.0%
Muslim	125	0	0	51.2%
Sikh	11	0	0	4.5%
Agnostic/atheist	24	0	0	9.8%
Unknown	0	0	0	0%
Other (please state what)	0	0	0	0%
EASTERN ORTHODOX	3	0	0	1.2%
ORIENTAL ORTHODOX	0	0	0	0%
RASTAFARIAN	4	0	0	1.6%
Total	244	0	0	100.0%

(iv) Length of time in detention in this centre	No. of men	No. of women	No. of children	%
Less than 1 week	78	0	0	32.0%
1 to 2 weeks	42	0	0	17.2%
2 to 4 weeks	45	0	0	18.4%
1 to 2 months	42	0	0	17.2%
2 to 4 months	20	0	0	8.2%
4 to 6 months	8	0	0	3.3%
6 to 8 months	1	0	0	0.4%
8 to 10 months	2	0	0	0.8%
More than 10 months (please note the longest length of time)	1 5	0	0	0.4% 2.0%
Total	244	0	0	100.0%

(v) Detainees' last location before detention in this centre	No. of men	No. of women	No. of children	%
Community	0	0	0	0%
Another IRC	47	0	0	19%
A short-term holding facility (e.g. at a port or reporting centre)	49	0	0	20%
Police station	82	0	0	33%
Prison	55	0	0	23%
COURT	11	0	0	5%
PROBATION OFFICE	0	0	0	0%
Total	244	0	0	100.0%

Appendix IV: Photographs



Detainee room



Outside visits courtyard



Razor wire around the ground



Razor wire



Visits room



Separation unit 'relaxation room'

Appendix V: Summary of detainee interviews

Every detainee in Morton Hall was offered a confidential individual interview with an inspector. A significant number had either left the centre or declined to be interviewed when inspectors went to see them. We conducted 46 interviews, seven using interpretation. We also invited, through various support voluntary and community groups, recently released detainees to speak to us. None took up this offer. All interviews were semi-structured and held from 30 October to 6 November 2019. What follows is a brief summary of the key messages that emerged. The opinions of interviewers are not included, and this represents only the views of interviewees. These interviews were used as one source of evidence to inform the rounded judgements made by inspectors in the body of this report. The detainees we spoke to were self-selecting, and the percentages here do not supplant those of our randomised survey (Appendix IV). We follow up any allegations of concern and report on outcomes in the main body of the report if there is corroboration.

Key themes from 46 detainee interviews

Safety

78% of interviewed detainees said overall safety for detainees at the centre was either very good (34%) or quite good (44%). Seventeen per cent (seven) of interviewed detainees said that safety was quite bad and two people said that it was very bad.¹⁴ Just over a third of interviewed detainees said they personally felt unsafe.¹⁵

Very few detainees said they felt physically unsafe in the centre. None said they had been assaulted by staff or other detainees, although some had been restrained. The detainees who said they did not feel safe usually talked of stress and uncertainty over their immigration cases and not knowing how long they would be held. Some also felt unsafe because they did not feel their health problems were being addressed. A few mentioned tensions between different nationality groups and fights breaking out. One detainee who said he felt unsafe elaborated as follows:

‘It’s safe here but I’m stressed. Everyone is stressed so sometimes it spills over to fights ... Staff intervene if there are fights. I can at least open the window in my room and walk around in the fresh air and open grounds.’

A few detainees said the centre felt too much like a prison. Most detainees had little awareness of illicit drugs in the centre.

18% (eight detainees) said staff had treated them inappropriately.¹⁶ None reported physical assault.

Of the detainees who commented further, two said that staff had used force against them. One said this had happened on his first night in the centre and that he had been strip-searched. The other said he had been restrained before being taken to the segregation unit. One detainee said an officer had sworn at them and another said their health problems had not been taken seriously in reception. None described experiencing physical assaults.

Most interviewed detainees (93%) said that other detainees were respectful and acted appropriately towards them or usually did so.¹⁷ Detainees were generally confident that staff would step in quickly to stop incidents if they had seen any. A small number made comments about other detainees’ antisocial behaviour. Two detainees said:

¹⁴ Percentages are based on the 41 detainees who answered this question during the face-to-face interviews.

¹⁵ 44 detainees answered this question.

¹⁶ 44 detainees answered this question.

¹⁷ 44 detainees answered this question.

'There is no bullying, but the guys in my neighbouring room play their music at full volume. Officers fail to stop it.'

'Smoking is a problem in the centre. Too many detainees smoke in their rooms.'

86% of interviewed detainees said they were treated well or reasonably well by staff, 7% that they were not treated well enough, and 7% (three detainees) said they were treated poorly.

Most interviewed detainees were very positive about staff, for example describing them as friendly, helpful and polite. A few detainees talked of staff who were distant or disinterested in them. Others were frustrated at their inability to communicate and said they had not had enough interpretation. The three detainees who said they were treated poorly were the same detainees who commented on being treated inappropriately (see above).

60% of interviewed detainees did not feel confident about complaining.¹⁸

60% of detainees did not feel confident about making complaints and many of those who commented said they simply did not know how to submit a complaint. One detainee said they could not write and therefore could not submit a formal complaint, while others said their lack of fluency in English was the main impediment.

45% of interviewed detainees said their physical and mental health needs were not met.¹⁹

A large minority of interviewed detainees reported concerns about their health needs. A few commented further and the most common concern was the delay in obtaining appointments. Some detainees mentioned specific concerns about their health treatment, which were referred to health inspectors for follow up.

¹⁸ 40 detainees answered this question.

¹⁹ 44 detainees answered this question.

Appendix VI: Summary of staff interviews and survey

Twenty-seven interviews were completed with 16 randomly selected detainee custody officers, five detainee custody managers, three health care staff and three Home Office staff. All staff were in detainee contact roles and were interviewed from 30 October to 6 November 2019. These numbers equated to approximately 14% of uniformed staff, 18% of health care staff and 23% of Home Office staff. In addition, 74 staff (approximately 42% of all staff) from all departments completed an online survey. The survey was sent to all staff in contact roles. All responses were anonymous and some of the survey respondents and interviewees might have been the same people. There were few significant differences between the survey and interview responses and most of the findings are reported together. The opinions of interviewees are not included, and only the views of staff are represented. The interviews and survey were used as sources of evidence to inform the rounded judgements made by inspectors in the body of this report. The main objective of both was to provide staff with an opportunity to tell inspectors confidentially about concerns over safety and the treatment of detainees, and any specific areas of concern that inspectors could follow up. The main themes are listed below.

Key themes from 74 staff survey responses and 27 staff interviews²⁰

Safety

No staff in our survey or interviews said they had seen inappropriate use of force towards detainees. 96% of staff in our survey said they had not seen any inappropriate staff behaviour towards detainees.

Staff responses tended to describe professional and respectful behaviour towards detainees. The few surveyed staff (three) who had seen inappropriate behaviour, cited the use of language, manners and attitudes, but did not provide further details. In our staff interviews, the only member of staff who had seen inappropriate behaviour said that a detainee had been pushed by a member of staff four years ago and was dismissed as a result.

Staff in our survey said they would report inappropriate behaviour, usually to line managers or the corruption prevention manager.

77% of surveyed staff said they felt any issues they raised would be taken seriously, 12% said they probably would be taken seriously; 3% (two staff) said they would not be taken seriously and 7% (five staff) that they probably would not be taken seriously. Some of the more negative respondents were critical of the approach of managers but no specific examples were provided.

Staff were generally very positive about staff culture

Staff mentioned helping detainees and making a difference to their lives and working with a good team as the best part of their work at Morton Hall. The vast majority of staff comments about staff culture were positive. For example:

‘The staff at Morton Hall are very proactive and do an extremely difficult job without any sanctions ... [they] rely on their interpersonal skills.’

‘Culture is very positive and encourages continuous improvement.’

Nearly all staff said they were supported by colleagues (73%), or usually supported by colleagues (23%); about 85% of staff said they were supported by line managers (62%), or usually supported by them (23%); and 77% said they were supported by senior managers (55%), or usually supported by them (23%). 98% of surveyed staff said they behaved well (73%) or reasonably well (26%) towards each other.

²⁰ Note that the percentages relate to the staff survey which was designed to have more quantifiable answers.

Staff tended to identify the most difficult part of their work as the fact that they could not apply any sanctions to detainees with challenging behaviour; the language barrier; lack of time and volume of work; and being powerless to help detainees who were distressed or frustrated about their immigration cases.

Home Office staff were aware of trafficking risks but most other staff were not

All interviewed staff had a basic awareness of safeguarding responsibilities, but HM Prison and Probation Service (HMPPS) and health care staff could not be specific about how to identify or respond to trafficking. Apart from Home Office staff, few others knew about the national referral mechanism. However, if they became aware of a case of suspected trafficking, they usually said they would inform the Home Office or a manager. Some mentioned they would open a vulnerable adult care plan.

Respect

98% of staff in our survey said HMPPS staff treated detainees well (95%), or reasonably well (3%).²¹

Staff from all departments referred to HMPPS staff as caring, friendly and approachable.

96% of all surveyed staff thought that health care staff treated detainees well (78%), or reasonably well (18%).

Staff were positive about the health care team's professionalism and their caring and supportive approach to detainees.

'Recent situation where a patient was frustrated at being detained ... A mental health nurse took the patient away from the desk in the middle of her busy clinic to sit and take time with him and on leaving he thanked me for the support he had been given. This is one of the many examples I have witnessed.'

84% of all surveyed staff thought that Home Office staff treated detainees well (55%) or reasonably well (29%); 8% said they did not treat them well enough and none said they treated detainees poorly.

Most staff described Home Office treatment of detainees in fairly positive terms, but many empathised with the frustration felt by detainees. Many comments described a lack of information from and visibility of Home Office staff, and further frustrations being caused by the way that Home Office staff sometimes delivered unwelcome news. For example:

'The Home Office doesn't help us sometimes by not giving all the information to residents about RDs [removal directions], etc or onwards travel, which then usually comes back to us the officers who are the face of Morton Hall.'

'It can at times feel very unfair to the residents ... some are kept here for a long period in a stalemate situation. The caseworker is the person that makes the decisions about the residents' future, however most of the time they never meet them or speak to them.'

About a third of interviewed staff, all of them detention custody officer or detainee custody managers, said they did not have enough training for their roles.

Most of the staff who commented on lack of training said that their training was too focused on prison work rather than immigration removal centres.

²¹ The other two staff made comments but did not tick any of the options.

Appendix VII: Summary of detainee survey responses

Detainee survey methodology

A representative survey of detainees is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HMIP researchers have developed a self-completion questionnaire to support HMIP Expectations. The questionnaire consists of structured questions covering the detainee 'journey' from reception to removal / release together with demographic and background questions which enable us to compare responses from different sub-groups of the detainee population. There are also three open questions at the end of the questionnaire which allow detainees to express in their own words what they find most positive and negative about the IRC.²²

The questionnaire is available in 23 languages and can also be administered via a telephone translation service if necessary.

The questionnaire was revised during 2018-19, in consultation with both inspectors and detainees. The current version has been in use since May 2019.

Sampling

For smaller IRCs or where the current detainee population is small, questionnaires are offered to every detainee. If the detainee population is large at the time of the survey, questionnaires are offered to a sample of detainees, selected using the following procedure. A stratified random sample is drawn by HMIP researchers on the day of the survey from a detainee population printout ordered by room location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the centre.²³

Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person so that detainees can give their informed consent²⁴ to participate. The purpose of the survey is explained and assurances are given about confidentiality and anonymity. Detainees are made aware that participation in the survey is voluntary; detainees who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

Survey response

At the time of the survey on 28 October 2019 the prisoner population at Morton Hall IRC was 243. Using the sampling method described above, questionnaires were distributed to 238 detainees.²⁵ We received a total of 117 completed questionnaires, a response rate of 49%. 35 detainees declined to participate in the survey and 86 questionnaires were either not returned at all, or returned blank.

²² Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

²³ 95% confidence interval with a 7% margin of error. The formula assumes a 65% response rate.

²⁴ For further information about the ethical principles which underpin our survey methodology, please see 'Ethical principles for research activities' which can be downloaded from HMIP's website <http://www.justiceinspectorates.gov.uk/hmiprison/about-our-inspections/>

²⁵ Questionnaires were not distributed to five detainees; they were not available in the language required for two, one was experiencing severe mental health difficulties, one requested to speak to an inspector, and one could not be located in the centre.

Returned language	Number of completed survey returns
English	68 (58%)
Albanian	9 (8%)
Romanian	6 (5%)
Chinese	5 (4%)
Bengali	4 (3%)
Lithuanian	4 (3%)
Punjabi	4 (3%)
Russian	4 (3%)
Vietnamese	3 (3%)
Kurdish	2 (2%)
Polish	2 (2%)
Arabic	1 (1%)
Hindi	1 (1%)
Portuguese	1 (1%)
Turkish	1 (1%)
Urdu	1 (1%)
Total	117 (100%)

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for Morton Hall IRC. For the comparator analyses, each question was reformulated into a binary 'yes/no' format and affirmative responses compared.²⁶ Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

Full survey results

A full breakdown of responses is provided for every question. Percentages have been rounded and therefore may not add up to 100%.

Responses from Morton Hall IRC 2019 compared with those from other HMIP surveys²⁷

- Survey responses from Morton Hall IRC in 2019 compared with survey responses from other IRCs inspected since June 2017.
- Survey responses from Morton Hall IRC in 2019 compared with survey responses from Morton Hall IRC in 2016.

Comparisons between self-reported sub-populations of detainees within Morton Hall IRC 2019²⁸

- Responses of detainees from black or minority ethnic groups compared with those of white detainees.
- Responses of Muslim detainees compared with those of non-Muslim detainees.
- Responses of detainees who reported that they had a disability compared to those who did not.
- Responses of detainees who reported that they had mental health problems compared with those who did not.
- Responses of detainees who reported not being able to understand written or spoken English very / quite well compared with those who can.

²⁶ Using the Chi-square test (or Fisher's exact test if there are fewer than five responses in a group).

²⁷ These analyses are carried out on summary data from all survey questions. As we have been using a new version of the questionnaire since May 2019, we do not yet have full comparator data for all questions.

²⁸ These analyses are carried out on data from all survey questions.

- Responses of detainees who reported that they had been held in prison in the UK compared with those of detainees who reported that they had not been held in prison in the UK.
- Responses of detainees aged 50 and over compared with those under 50.
- Responses of detainees aged 25 and under compared with those over 25.
- Responses of non-heterosexual detainees compared with those of heterosexual detainees.

Please note that we only carry out within-IRC comparator analysis where there are sufficient responses in each sub-group.²⁹

In the comparator analyses, statistically significant³⁰ differences are indicated by shading. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there is no valid comparative data for that question.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

²⁹ A minimum of 10 responses which must also represent at least 10% of the total response.

³⁰ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

Survey summary

Section 1: About you

I.1	What wing or unit are you currently living on?	
	Fry Unit.....	27 (23%)
	Johnson Unit.....	20 (17%)
	Sharman Unit.....	24 (21%)
	Torr Unit.....	8 (7%)
	Windsor Unit.....	37 (32%)
	Segregation	1 (1%)
I.2	How old are you?	
	Under 18	0 (0%)
	18-20	6 (5%)
	21-25	13 (11%)
	26-29	19 (17%)
	30-39	43 (38%)
	40-49	21 (18%)
	50-59	11 (10%)
	60-69	1 (1%)
	70 or over	0 (0%)
I.3	How would you describe your ethnicity?	
	Asian.....	52 (47%)
	Black.....	18 (16%)
	Mixed	4 (4%)
	White.....	30 (27%)
	Other	6 (5%)
I.4	Do you understand spoken English?	
	Very well	40 (35%)
	Quite well	30 (26%)
	A little	29 (25%)
	No.....	15 (13%)
I.5	Do you understand written English?	
	Very well	39 (34%)
	Quite well	24 (21%)
	A little	31 (27%)
	No.....	20 (18%)

Section 2: Immigration detention

2.1	How long have you been detained in this centre?	
	Less than 1 week.....	18 (16%)
	1 week or more but less than 1 month.....	49 (44%)
	1 month or more but less than 3 months.....	26 (23%)
	3 months or more but less than 6 months.....	8 (7%)
	6 months or more	10 (9%)

2.2	How much time have you spent in immigration detention in the UK in total?	
	Less than 1 month.....	50 (48%)
	1 month or more but less than 3 months.....	24 (23%)
	3 months or more but less than 6 months.....	7 (7%)
	6 months or more	19 (18%)
	Don't remember	5 (5%)

2.3	Have you ever been held in prison in the UK?	
	Yes.....	48 (44%)
	No.....	62 (56%)

Section 3: Your journey to this centre

3.1	Before being brought to this centre, were you told where you were going?	
	Yes.....	70 (66%)
	No.....	36 (34%)

3.2	How were you treated by escort staff during your journey to this centre?	
	Very well	47 (41%)
	Quite well	43 (37%)
	Quite badly	4 (3%)
	Very badly	15 (13%)
	Don't remember	6 (5%)

Section 4: Reception and first nights

4.1	When you were searched in reception, was this done in a respectful way?	
	Yes.....	89 (78%)
	No.....	16 (14%)
	Don't remember	9 (8%)
	Was not searched.....	0 (0%)

4.2	While in reception, were you able to speak to someone from the health care team?	
	Yes.....	98 (85%)
	No.....	9 (8%)
	Don't remember	8 (7%)

4.3	Overall, how were you treated in reception?	
	Very well	44 (39%)
	Quite well	45 (39%)
	Quite badly	16 (14%)
	Very badly	3 (3%)
	Don't remember	6 (5%)

4.4 When you first arrived, did you have any problems with the following? (Please tick all that apply.)

Getting phone numbers.....	36 (33%)
Contacting family.....	25 (23%)
Arranging care for children or other dependants.....	9 (8%)
Contacting employers.....	15 (14%)
Money.....	25 (23%)
Housing.....	15 (14%)
Feeling depressed.....	54 (50%)
Feeling suicidal.....	25 (23%)
Your mental health.....	36 (33%)
Your physical health.....	27 (25%)
Drugs or alcohol (e.g. withdrawal).....	13 (12%)
Getting medication.....	22 (20%)
Lost or delayed property.....	18 (17%)
Other problems.....	22 (20%)
Did not have any problems.....	19 (17%)

4.5 Did staff help you to deal with any of these problems?

Yes.....	45 (43%)
No.....	41 (39%)
Did not have any problems.....	19 (18%)

4.6 Did you feel safe on your first night in this centre?

Yes.....	70 (62%)
No.....	36 (32%)
Don't remember.....	7 (6%)

4.7 In your first two days here, did you receive information in a language you could understand about:

	Yes	No	Don't remember
Daily life at this centre	66 (72%)	22 (24%)	4 (4%)
Visits	50 (62%)	27 (33%)	4 (5%)
How to see immigration staff	59 (66%)	26 (29%)	4 (4%)
How to get legal advice	50 (59%)	31 (36%)	4 (5%)
How to see health care staff	62 (68%)	26 (29%)	3 (3%)
Other support available	39 (54%)	26 (36%)	7 (10%)

Section 5: Legal rights and immigration**5.1 Have you received free legal advice in this centre?**

Yes.....	56 (50%)
No.....	55 (50%)

5.2 Do you have an immigration lawyer?

Yes.....	66 (62%)
No.....	41 (38%)

5.3 If you have an immigration lawyer, how easy or difficult is it to:

	Easy	Difficult	Don't know
Contact your lawyer	28 (52%)	22 (41%)	4 (7%)
Have a visit from your lawyer	14 (34%)	18 (44%)	9 (22%)

5.4 How easy or difficult is it to:

	Easy	Difficult	Don't know
Obtain bail information	33 (38%)	36 (41%)	19 (22%)
Access up-to-date information about your country	16 (21%)	28 (36%)	33 (43%)
See Home Office immigration staff	30 (36%)	33 (40%)	20 (24%)

5.5 Are Home Office immigration staff keeping you informed about the progress of your case?

Yes	41 (38%)
No.....	44 (41%)
Don't know.....	22 (21%)

Section 6: Respectful detention**6.1 Please answer the following questions about the wing or residential unit you are currently living on:**

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	67 (64%)	33 (32%)	4 (4%)
Can you shower every day?	95 (90%)	9 (8%)	2 (2%)
Do you have clean sheets every week?	61 (64%)	29 (30%)	6 (6%)
Do you get cleaning materials for your room every week?	60 (58%)	35 (34%)	8 (8%)
Is it normally quiet enough for you to sleep or relax at night?	52 (54%)	42 (43%)	3 (3%)
Can you get your property from the centre's property store when you need it?	52 (53%)	23 (23%)	23 (23%)

6.2 Normally, how clean or dirty are the communal/shared areas of your wing or unit (landings, stairs, showers etc.)?

Very clean	18 (17%)
Quite clean	46 (44%)
Quite dirty	28 (27%)
Very dirty	12 (12%)

6.3 What is the quality of food here?

Very good	15 (14%)
Quite good	41 (38%)
Quite bad	23 (21%)
Very bad	28 (26%)

6.4 Do you get enough to eat at meal times?

Always.....	39 (37%)
Most of the time.....	24 (23%)
Some of the time.....	32 (30%)
Never	10 (10%)

6.5 Does the centre's shop sell the things that you need?

Yes	46 (43%)
No.....	46 (43%)
Don't know.....	15 (14%)

6.6 Do you know how to make a complaint about your treatment in this centre?

Yes	38 (36%)
No.....	67 (64%)

6.7	In your experience, are complaints dealt with fairly?	
	Yes	11 (10%)
	No	8 (7%)
	Not made a complaint	88 (82%)
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	
	Yes	41 (38%)
	No.....	67 (62%)

Section 7: Staff

7.1	Do staff here treat you with respect?	
	Always.....	47 (44%)
	Most of the time.....	31 (29%)
	Some of the time.....	25 (23%)
	Never	5 (5%)
7.2	Do staff here knock and wait for an answer before entering your room?	
	Always.....	46 (42%)
	Most of the time.....	18 (17%)
	Some of the time.....	17 (16%)
	Never	28 (26%)
7.3	Are there any members of staff here you can turn to for help if you have a problem?	
	Yes	70 (68%)
	No.....	33 (32%)
7.4	Have staff physically restrained you since you've been in this centre?	
	Yes	15 (15%)
	No.....	82 (85%)
7.5	Have you spent any time in the separation/isolation unit, in this centre?	
	Yes	12 (11%)
	No.....	93 (89%)

Section 8: Faith

8.1	What is your religion?	
	No religion.....	9 (9%)
	Buddhist.....	4 (4%)
	Christian.....	32 (30%)
	Hindu.....	5 (5%)
	Jewish	2 (2%)
	Muslim.....	44 (42%)
	Sikh	5 (5%)
	Other	4 (4%)
8.2	Are your religious beliefs respected here?	
	Yes	66 (63%)
	No.....	7 (7%)
	Don't know.....	23 (22%)
	Not applicable (no religion).....	9 (9%)

8.3	Can you speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	56 (54%)
	No.....	8 (8%)
	Don't know.....	31 (30%)
	Not applicable (no religion).....	9 (9%)

Section 9: Safety

9.1	Have you ever felt unsafe here?	
	Yes.....	61 (54%)
	No.....	52 (46%)
9.2	Where have you felt unsafe? (Please tick all that apply.)	
	In your room.....	16 (17%)
	On corridors.....	16 (17%)
	In the dining hall.....	13 (14%)
	At health care.....	15 (16%)
	In association or shared areas (e.g. TV room).....	16 (17%)
	In activity areas (e.g. library, IT room, education, gym).....	11 (12%)
	In outside areas.....	24 (25%)
	Anywhere else in this centre.....	16 (17%)
	Never felt unsafe here.....	52 (55%)
9.3	Do you feel unsafe now?	
	Yes.....	31 (30%)
	No.....	72 (70%)
9.4	Have you experienced any of the following forms of victimisation or bullying from other detainees here? (Please tick all that apply.)	
	Verbal abuse.....	10 (11%)
	Threats or intimidation.....	12 (13%)
	Sexual comments.....	5 (5%)
	Sexual assault.....	3 (3%)
	Physical assault.....	9 (10%)
	Theft.....	7 (8%)
	Other.....	9 (10%)
	Not experienced any of these from detainees here.....	68 (74%)
9.5	If you were being bullied or victimised by other detainees here, would you report it?	
	Yes.....	57 (57%)
	No.....	43 (43%)
9.6	Have you experienced any of the following forms of victimisation or bullying from staff here? (Please tick all that apply.)	
	Verbal abuse.....	5 (6%)
	Threats or intimidation.....	6 (7%)
	Sexual comments.....	0 (0%)
	Sexual assault.....	1 (1%)
	Physical assault.....	0 (0%)
	Theft.....	4 (4%)
	Other.....	5 (6%)
	Not experienced any of these from staff here.....	74 (82%)
9.7	If you were being bullied or victimised by staff here, would you report it?	
	Yes.....	60 (61%)
	No.....	39 (39%)

Section 10: Alcohol and drugs**10.1 While in this centre, have you developed any problems with:**

	Yes	No
Illicit drugs	5 (6%)	76 (94%)
Medication not prescribed to you	14 (16%)	72 (84%)
Alcohol	6 (7%)	75 (93%)

10.2 Do you currently have a problem with:

	Yes	No
Illicit drugs	4 (5%)	76 (95%)
Medication not prescribed to you	15 (18%)	70 (82%)
Alcohol	5 (6%)	74 (94%)

10.3 While in this centre, have you been helped with your problems with:

	Yes	No	Not applicable
Illicit drugs	2 (2%)	9 (11%)	72 (87%)
Medication not prescribed to you	6 (7%)	10 (12%)	67 (81%)
Alcohol	2 (3%)	7 (9%)	69 (88%)

10.4 Is it easy or difficult to get illicit drugs in this centre?

Very easy	6 (6%)
Quite easy	3 (3%)
Quite difficult	1 (1%)
Very difficult	9 (9%)
Don't know	83 (81%)

10.5 Is it easy or difficult to get alcohol in this centre?

Very easy	4 (4%)
Quite easy	1 (1%)
Quite difficult	2 (2%)
Very difficult	10 (10%)
Don't know	88 (84%)

Section 11: Health and support**11.1 Is a professional interpreter available if you need one during health care assessments?**

Yes	34 (31%)
No	14 (13%)
Don't know	26 (24%)
Don't need an interpreter	34 (31%)

11.2 What is the quality of health care services here?

Very good	21 (20%)
Quite good	31 (29%)
Quite bad	17 (16%)
Very bad	20 (19%)
Have not been to health care	17 (16%)

11.3 Do you have any mental health problems?

Yes	45 (43%)
No	59 (57%)

11.4	Have you been helped with your mental health problems while in this centre?	
	Yes	18 (17%)
	No.....	28 (27%)
	Don't have mental health problems.....	59 (56%)
11.5	Have you ever felt depressed while in this centre?	
	Yes	74 (71%)
	No.....	30 (29%)
11.6	Have you ever felt suicidal while in this centre?	
	Yes	30 (29%)
	No.....	72 (71%)
11.7	If you have felt depressed or suicidal here, did you receive any help from staff?	
	Yes	16 (20%)
	No.....	39 (48%)
	Have not felt depressed or suicidal	27 (33%)

Section 12: Other needs and support

12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?	
	Yes	30 (32%)
	No.....	64 (68%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	5 (5%)
	No.....	18 (20%)
	Don't have a disability/don't need support	69 (75%)

Section 13: Activities

13.1	Are you taking part in any education here?	
	Yes	39 (38%)
	No, but I want to	36 (35%)
	No and I don't want to	27 (26%)
13.2	If you are taking part in education, is it helpful?	
	Yes	29 (29%)
	No.....	9 (9%)
	Not taking part in education	63 (62%)
13.3	Do you have a job here?	
	Yes	33 (33%)
	No, but I want one	36 (36%)
	No and I don't want one	31 (31%)
13.4	Does the library have appropriate materials to meet your needs?	
	Yes	50 (50%)
	No.....	28 (28%)
	Don't know.....	23 (23%)

13.5	How easy or difficult is it to access what you need on the internet?	
	Very easy	18 (17%)
	Quite easy	22 (21%)
	Quite difficult	16 (15%)
	Very difficult	26 (25%)
	Don't know	22 (21%)
13.6	Can you go to the gym as often as you want to?	
	Yes	64 (62%)
	No	9 (9%)
	Don't know	23 (22%)
	Don't want to go	7 (7%)
13.7	Is there enough to do in this centre to fill your time?	
	Yes	38 (38%)
	No	34 (34%)
	Don't know	28 (28%)

Section 14: Keeping in touch with family and friends

14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	38 (39%)
	No	60 (61%)
14.2	Have you had a visit from family or friends since you've been in this centre?	
	Yes	31 (30%)
	No	72 (70%)
14.3	Are your visitors usually treated with respect by staff?	
	Yes	18 (17%)
	No	4 (4%)
	Don't know	9 (9%)
	Have not had a visit	72 (70%)

Section 15: Leaving this centre

15.1	Has anyone here helped you prepare for leaving this centre?	
	Yes	23 (23%)
	No	75 (77%)

Section 16: More about you

16.1	Are you responsible for any child under the age of 18 in the UK?	
	Yes	33 (35%)
	No	61 (65%)
16.2	What is your gender?	
	Female	1 (1%)
	Male	97 (96%)
	Non-binary	0 (0%)
	Other	3 (3%)
16.3	How would you describe your sexual orientation?	
	Straight/heterosexual	70 (82%)
	Gay/lesbian/homosexual	5 (6%)
	Bisexual	4 (5%)
	Other	6 (7%)

16.4 Do you identify as transgender or transsexual?

Yes.....	5 (6%)
No.....	73 (94%)

Morton Hall IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:
 - responses of detainees who reported that they cannot understand spoken or written English very well/quite well are compared with those who can
 These analyses are based on data from all survey questions.

Shading is used to indicate statistical significance*, as follows:

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Do not understand English	Understand English
41	73

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	10%	3%
	Are you 25 years of age or younger?	20%	15%
	Are you 50 years of age or older?	18%	6%
1.3	Are you from a black or minority ethnic group?	56%	82%
1.4	Do you understand spoken English very / quite well?	0%	97%
1.5	Do you understand written English very / quite well?	0%	86%
8.1	Are you Muslim?	40%	42%
11.3	Do you have any mental health problems?	29%	52%
12.1	Do you consider yourself to have a disability?	20%	38%
16.1	Are you responsible for any child under the age of 18 in the UK?	32%	37%
16.2	Is your gender female or non-binary?	3%	5%
16.3	Are you homosexual, bisexual or other sexual orientation?	17%	18%
16.4	Do you identify as transgender or transsexual?	4%	8%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	29%	44%
2.2	Have you spent three months or more in immigration detention in the UK?	16%	29%
2.3	Have you ever been held in prison in the UK?	35%	48%
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	65%	67%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	78%	78%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	71%	82%
4.2	While in reception, were you able to speak to someone from the health care team?	66%	96%
4.3	Overall, were you treated very / quite well in reception?	75%	79%

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Do not understand English	Understand English
41	73

Number of completed questionnaires returned

4.4	When you first arrived, did you have any problems?	75%	86%
4.4	When you first arrived, did you have any problems with:		
	- Getting phone numbers?	53%	23%
	- Contacting family?	22%	23%
	- Arranging care for children or other dependents?	6%	9%
	- Contacting employers?	8%	16%
	- Money?	17%	25%
	- Housing?	6%	17%
	- Feeling depressed?	36%	56%
	- Feeling suicidal?	6%	31%
	- Your mental health?	14%	42%
	- Your physical health?	17%	28%
	- Drugs or alcohol (e.g. withdrawal)?	3%	16%
	- Getting medication?	17%	21%
	- Lost or delayed property?	19%	14%
	- Other problems?	11%	23%
	<i>For those who had any problems when they first arrived:</i>		
4.5	Did staff help you to deal with any of these problems?	58%	50%
4.6	Did you feel safe on your first night in this centre?	78%	52%
4.7	In your first two days here, did you receive information in a language you could understand about:		
	- Daily life at this centre?	63%	75%
	- Visits?	52%	66%
	- How to see immigration staff?	63%	67%
	- How to get legal advice?	46%	63%
	- How to see health care staff?	52%	75%
	- Other support available?	46%	57%
LEGAL RIGHTS AND IMMIGRATION			
5.1	Have you received free legal advice in this centre?	51%	49%
5.2	Do you have an immigration lawyer?	57%	64%
	<i>For those who have an immigration lawyer:</i>		
5.3	Is it easy to contact your lawyer?	47%	56%
	Is it easy to have a visit from your lawyer?	47%	27%

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Number of completed questionnaires returned

Do not understand English	Understand English
41	73

5.4	Is it easy to obtain bail information?	23%	47%
	Is it easy to access up-to-date information about your country?	20%	22%
	Is it easy to see Home Office immigration staff?	26%	42%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	28%	42%
RESPECTFUL DETENTION			
6.1	On the wing or residential unit you are currently living on:		
	- Do you normally have enough clean, suitable clothes for the week?	69%	61%
	- Can you shower every day?	92%	88%
	- Do you have clean sheets every week?	67%	61%
	- Do you get cleaning materials for your room every week?	60%	56%
	- Is it normally quiet enough for you to sleep or relax at night?	63%	49%
	- Can you get your property from the centre's property store when you need it?	45%	57%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	69%	56%
6.3	Is the quality of the food here very / quite good?	56%	49%
6.4	Do you get enough to eat at meal-times always / most of the time?	57%	63%
6.5	Does the centre's shop sell the things that you need?	40%	44%
6.6	Do you know how to make a complaint about your treatment in this centre?	18%	45%
6.6	Have you made a complaint while in this centre?	11%	21%
	<i>For those who have made a complaint:</i>		
6.7	Are complaints dealt with fairly?	75%	53%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	33%	40%
STAFF			
7.1	Do staff here treat you with respect always / most of the time?	78%	69%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	62%	56%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	77%	63%
7.4	Have staff here physically restrained you since you've been in this centre?	15%	15%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	11%	10%
FAITH			
8.1	Do you have a religion?	80%	97%
	<i>For those who have a religion:</i>		
8.2	Are your religious beliefs respected here?	52%	76%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	32%	70%

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Number of completed questionnaires returned

Do not understand English	Understand English
41	73

SAFETY			
9.1	Have you ever felt unsafe here?	44%	61%
9.2	If yes, have you felt unsafe:		
	- In your room?	17%	18%
	- On corridors?	14%	19%
	- In the dining hall?	6%	19%
	- At health care?	14%	18%
	- In association or shared areas (e.g. TV room)?	11%	21%
	- In activity areas (e.g. library, IT room, education, gym)?	6%	16%
	- In outside areas?	19%	30%
	- Anywhere else in this centre?	8%	23%
9.3	Do you feel unsafe now?	24%	34%
9.4	Have you experienced any of the following from other detainees here:		
	- Verbal abuse?	9%	11%
	- Threats or intimidation?	15%	11%
	- Sexual comments?	0%	7%
	- Sexual assault?	0%	4%
	- Physical assault?	6%	11%
	- Theft?	6%	7%
	- Other forms of victimisation or bullying?	3%	12%
	- Not experienced any of these from detainees here	85%	68%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	77%	48%
9.6	Have you experienced any of the following from staff here:		
	- Verbal abuse?	3%	7%
	- Threats or intimidation?	6%	7%
	- Sexual comments?	0%	0%
	- Sexual assault?	0%	2%
	- Physical assault?	0%	0%
	- Theft?	3%	5%
	- Other forms of victimisation or bullying?	6%	5%
	- Not experienced any of these from staff here	88%	79%
9.7	If you were being bullied or victimised by staff here, would you report it?	75%	55%

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Number of completed questionnaires returned

Do not understand English	Understand English
41	73

ALCOHOL AND DRUGS			
10.1	While in this centre, have you developed any problems with:		
	- Illicit drugs?	7%	6%
	- Medication not prescribed to you?	14%	17%
	- Alcohol?	4%	9%
10.2	Do you currently have a problem with:		
	- Illicit drugs?	4%	6%
	- Medication not prescribed to you?	18%	18%
	- Alcohol?	4%	8%
10.3	While in this centre, have you been helped with your problems with:		
	- Illicit drugs?	0%	33%
	- Medication not prescribed to you?	17%	56%
	- Alcohol?	0%	50%
10.4	Is it very / quite easy to get illicit drugs in this centre?	3%	12%
10.5	Is it very / quite easy to get alcohol in this centre?	0%	7%
HEALTH AND SUPPORT			
11.1	Is a professional interpreter available if you need one during health care assessments?	61%	33%
11.2	Is the quality of the health care services here very / quite good?	58%	58%
11.3	Do you have any mental health problems?	29%	52%
	<i>For those who have mental health problems:</i>		
11.4	Have you been helped with your mental health problems while in this centre?	50%	36%
11.5	Have you ever felt depressed while in this centre?	60%	78%
11.6	Have you ever felt suicidal while in this centre?	15%	37%
	<i>For those who have felt depressed or suicidal here:</i>		
11.5	Did you receive any help from staff?	23%	31%
OTHER NEEDS AND SUPPORT			
12.1	Do you consider yourself to have a disability?	20%	38%
	<i>For those who consider themselves to have a disability:</i>		
12.2	Are you getting the support you need?	33%	18%

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Number of completed questionnaires returned

Do not understand English	Understand English
41	73

ACTIVITIES			
13.1	Are you taking part in any education here?	41%	36%
<i>For those who are taking part in education:</i>			
13.2	Is it helpful?	92%	72%
19	Do you have a job here?	19%	40%
13.4	Does the library have appropriate materials to meet your needs?	47%	52%
13.5	Is it very / quite easy to access what you need on the internet?	28%	43%
13.6	Can you go to the gym as often as you want to?	52%	76%
13.7	Is there enough to do in this centre to fill your time?	35%	40%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	34%	42%
14.2	Have you had a visit from family or friends since you've been in this centre?	17%	36%
<i>For those who have had a visit from family or friends:</i>			
15.4	Are your visitors usually treated with respect by staff?	33%	63%
LEAVING THIS CENTRE			
15.1	Has anyone here helped you prepare for leaving this centre?	25%	22%

Morton Hall IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees from black and minority ethnic groups are compared with those of white detainees.

- responses of Muslim detainees are compared with those of non-Muslim detainees.

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	30	44	61

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	5%	7%	10%	2%
	Are you 25 years of age or younger?	14%	24%	19%	15%
	Are you 50 years of age or older?	10%	10%	10%	8%
1.3	Are you from a black or minority ethnic group?			86%	63%
1.4	Do you understand spoken English very / quite well?	70%	43%	67%	66%
1.5	Do you understand written English very / quite well?	64%	40%	61%	56%
8.1	Are you Muslim?	51%	22%		
11.3	Do you have any mental health problems?	53%	15%	64%	30%
12.1	Do you consider yourself to have a disability?	39%	12%	40%	26%
16.1	Are you responsible for any child under the age of 18 in the UK?	34%	36%	31%	37%
16.2	Is your gender female or non-binary?	4%	0%	5%	2%
16.3	Are you homosexual, bisexual or other sexual orientation?	20%	5%	13%	18%
16.4	Do you identify as transgender or transsexual?	6%	4%	5%	6%
IMMIGRATION DETENTION					
2.1	Have you been detained in this centre for a month or more?	48%	14%	44%	37%
2.2	Have you spent three months or more in immigration detention in the UK?	32%	7%	30%	22%
2.3	Have you ever been held in prison in the UK?	40%	52%	42%	48%
JOURNEY TO THIS CENTRE					
3.1	Before being brought to this centre, were you told where you were going?	64%	70%	62%	65%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	73%	90%	65%	90%
RECEPTION AND FIRST NIGHTS					
4.1	When you were searched in reception, was this done in a respectful way?	76%	79%	68%	83%
4.2	While in reception, were you able to speak to someone from the health care team?	86%	83%	84%	87%
4.3	Overall, were you treated very / quite well in reception?	77%	80%	66%	88%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	30	44	61

4.4	When you first arrived, did you have any problems?	90%	64%	88%	78%
4.4	When you first arrived, did you have any problems with:				
	- Getting phone numbers?	37%	21%	41%	26%
	- Contacting family?	26%	11%	36%	14%
	- Arranging care for children or other dependents?	9%	4%	17%	2%
	- Contacting employers?	18%	0%	24%	7%
	- Money?	29%	7%	33%	16%
	- Housing?	18%	0%	21%	5%
	- Feeling depressed?	62%	18%	60%	43%
	- Feeling suicidal?	32%	0%	31%	17%
	- Your mental health?	42%	11%	50%	21%
	- Your physical health?	33%	4%	43%	12%
	- Drugs or alcohol (e.g. withdrawal)?	13%	7%	17%	7%
	- Getting medication?	21%	14%	36%	10%
	- Lost or delayed property?	17%	14%	24%	10%
	- Other problems?	24%	7%	31%	14%
	<i>For those who had any problems when they first arrived:</i>				
4.5	Did staff help you to deal with any of these problems?	50%	61%	39%	64%
4.6	Did you feel safe on your first night in this centre?	58%	70%	59%	65%
4.7	In your first two days here, did you receive information in a language you could understand about:				
	- Daily life at this centre?	74%	70%	77%	69%
	- Visits?	61%	67%	69%	58%
	- How to see immigration staff?	67%	67%	71%	64%
	- How to get legal advice?	60%	58%	64%	53%
	- How to see health care staff?	69%	74%	68%	67%
	- Other support available?	57%	53%	56%	51%
LEGAL RIGHTS AND IMMIGRATION					
5.1	Have you received free legal advice in this centre?	49%	52%	61%	42%
5.2	Do you have an immigration lawyer?	68%	42%	73%	54%
	<i>For those who have an immigration lawyer:</i>				
5.3	Is it easy to contact your lawyer?	46%	80%	44%	59%
	Is it easy to have a visit from your lawyer?	27%	67%	14%	42%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	30	44	61

5.4	Is it easy to obtain bail information?	41%	32%	34%	39%
	Is it easy to access up-to-date information about your country?	19%	25%	13%	23%
	Is it easy to see Home Office immigration staff?	36%	40%	35%	35%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	37%	36%	24%	48%
RESPECTFUL DETENTION					
6.1	On the wing or residential unit you are currently living on:				
	- Do you normally have enough clean, suitable clothes for the week?	66%	56%	61%	64%
	- Can you shower every day?	92%	86%	86%	92%
	- Do you have clean sheets every week?	64%	63%	57%	66%
	- Do you get cleaning materials for your room every week?	55%	64%	54%	59%
	- Is it normally quiet enough for you to sleep or relax at night?	49%	64%	43%	60%
	- Can you get your property from the centre's property store when you need it?	57%	48%	56%	51%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	60%	64%	52%	67%
6.3	Is the quality of the food here very / quite good?	44%	68%	30%	66%
6.4	Do you get enough to eat at meal-times always / most of the time?	56%	71%	48%	67%
6.5	Does the centre's shop sell the things that you need?	42%	45%	34%	48%
6.6	Do you know how to make a complaint about your treatment in this centre?	42%	26%	33%	36%
6.6	Have you made a complaint while in this centre?	19%	18%	14%	18%
<i>For those who have made a complaint:</i>					
6.7	Are complaints dealt with fairly?	43%	100%	50%	55%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	49%	14%	55%	30%
STAFF					
7.1	Do staff here treat you with respect always / most of the time?	67%	83%	57%	80%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	54%	72%	51%	62%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	65%	79%	68%	67%
7.4	Have staff here physically restrained you since you've been in this centre?	16%	10%	21%	12%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	13%	4%	15%	10%
FAITH					
8.1	Do you have a religion?	95%	82%	100%	85%
<i>For those who have a religion:</i>					
8.2	Are your religious beliefs respected here?	74%	52%	75%	63%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	64%	33%	66%	56%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	30	44	61

SAFETY		Black and minority ethnic	White	Muslim	Non-Muslim
9.1	Have you ever felt unsafe here?	60%	45%	59%	49%
9.2	If yes, have you felt unsafe:				
	- In your room?	19%	12%	22%	15%
	- On corridors?	21%	8%	11%	22%
	- In the dining hall?	19%	4%	14%	15%
	- At health care?	22%	4%	25%	11%
	- In association or shared areas (e.g. TV room)?	24%	4%	17%	19%
	- In activity areas (e.g. library, IT room, education, gym)?	16%	4%	14%	11%
	- In outside areas?	29%	23%	17%	30%
	- Anywhere else in this centre?	22%	8%	19%	17%
9.3	Do you feel unsafe now?	33%	25%	36%	27%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	12%	7%	3%	13%
	- Threats or intimidation?	15%	7%	9%	15%
	- Sexual comments?	5%	4%	0%	6%
	- Sexual assault?	3%	0%	0%	4%
	- Physical assault?	7%	14%	3%	13%
	- Theft?	8%	4%	6%	7%
	- Other forms of victimisation or bullying?	12%	4%	9%	7%
- Not experienced any of these from detainees here	70%	82%	78%	73%	
9.5	If you were being bullied or victimised by other detainees here, would you report it?	60%	56%	55%	59%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	8%	0%	3%	6%
	- Threats or intimidation?	8%	4%	13%	4%
	- Sexual comments?	0%	0%	0%	0%
	- Sexual assault?	2%	0%	0%	2%
	- Physical assault?	0%	0%	0%	0%
	- Theft?	5%	4%	3%	6%
	- Other forms of victimisation or bullying?	7%	0%	9%	4%
- Not experienced any of these from staff here	77%	96%	78%	85%	
9.7	If you were being bullied or victimised by staff here, would you report it?	52%	89%	51%	66%

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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	30	44	61

ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	8%	4%	8%	6%
	- Medication not prescribed to you?	16%	19%	30%	10%
	- Alcohol?	9%	0%	8%	8%
10.2	Do you currently have a problem with:				
	- Illicit drugs?	6%	4%	0%	8%
	- Medication not prescribed to you?	20%	12%	31%	12%
	- Alcohol?	10%	0%	0%	8%
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?	25%	0%	0%	25%
	- Medication not prescribed to you?	46%	25%	50%	17%
	- Alcohol?	29%	0%	0%	20%
10.4	Is it very / quite easy to get illicit drugs in this centre?	11%	3%	5%	10%
10.5	Is it very / quite easy to get alcohol in this centre?	7%	0%	2%	7%
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?	55%	32%	52%	42%
11.2	Is the quality of the health care services here very / quite good?	56%	65%	43%	69%
11.3	Do you have any mental health problems?	53%	15%	64%	30%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems while in this centre?	37%	40%	32%	47%
11.5	Have you ever felt depressed while in this centre?	74%	65%	73%	74%
11.6	Have you ever felt suicidal while in this centre?	36%	15%	35%	26%
<i>For those who have felt depressed or suicidal here:</i>					
11.5	Did you receive any help from staff?	36%	0%	33%	24%
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?	39%	12%	40%	26%
<i>For those who consider themselves to have a disability:</i>					
12.2	Are you getting the support you need?	22%	33%	38%	15%
ACTIVITIES					
13.1	Are you taking part in any education here?	48%	15%	48%	30%
<i>For those who are taking part in education:</i>					
13.2	Is it helpful?	78%	80%	59%	94%
13.3	Do you have a job here?	39%	16%	43%	28%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
80	30	44	61

13.4	Does the library have appropriate materials to meet your needs?	48%	59%	50%	49%
13.5	Is it very / quite easy to access what you need on the internet?	38%	44%	44%	35%
13.6	Can you go to the gym as often as you want to?	73%	48%	49%	80%
13.7	Is there enough to do in this centre to fill your time?	36%	42%	32%	40%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	46%	21%	55%	30%
14.2	Have you had a visit from family or friends since you've been in this centre?	33%	19%	38%	26%
<i>For those who have had a visit from family or friends:</i>					
15.4	Are your visitors usually treated with respect by staff?	54%	80%	47%	67%
LEAVING THIS CENTRE					
15.1	Has anyone here helped you prepare for leaving this centre?	26%	12%	25%	21%

Morton Hall IRC 2019

Survey responses compared with those from other HMIP surveys of IRCs and with those from the previous survey

In this table, summary statistics from Morton Hall IRC 2019 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other IRCs (7 centres). Please note that we do not have comparable data for the new questions introduced in May 2019.
- Summary statistics from Morton Hall IRC in 2016. Please note that we do not have comparable data for the new questions introduced in May 2019.

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Number of completed questionnaires returned

Morton Hall IRC 2019	All other IRCs	Morton Hall IRC 2019	Morton Hall IRC 2016
117	899	117	89

n=number of valid responses to question (Morton Hall IRC 2019)

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION						
1.2	Are you under 21 years of age?	<i>n</i> =114	5%		5%	
	Are you 25 years of age or younger?	<i>n</i> =114	17%		17%	
	Are you 50 years of age or older?	<i>n</i> =114	11%	11%	11%	5%
1.3	Are you from a black or minority ethnic group?	<i>n</i> =110	73%		73%	
1.4	Do you understand spoken English very / quite well?	<i>n</i> =114	61%		61%	
1.5	Do you understand written English very / quite well?	<i>n</i> =114	55%		55%	
	Do you understand either spoken or written English very / quite well?	<i>n</i> =114	64%		64%	
8.1	Are you Muslim?	<i>n</i> =105	42%	34%	42%	41%
11.3	Do you have any mental health problems?	<i>n</i> =104	43%		43%	
12.1	Do you consider yourself to have a disability?	<i>n</i> =94	32%	16%	32%	22%
16.1	Are you responsible for any child under the age of 18 in the UK?	<i>n</i> =94	35%		35%	
16.2	Is your gender female or non-binary?	<i>n</i> =101	4%		4%	
16.3	Are you homosexual, bisexual or other sexual orientation?	<i>n</i> =85	18%		18%	
16.4	Do you identify as transgender or transsexual?	<i>n</i> =78	6%		6%	
IMMIGRATION DETENTION						
2.1	Have you been detained in this centre for a month or more?	<i>n</i> =110	39%	53%	39%	68%
2.2	Have you spent three months or more in immigration detention in the UK?	<i>n</i> =106	26%		26%	
2.3	Have you ever been held in prison in the UK?	<i>n</i> =110	44%		44%	
JOURNEY TO THIS CENTRE						
3.1	Before being brought to this centre, were you told where you were going?	<i>n</i> =106	66%		66%	
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	<i>n</i> =115	78%		78%	
RECEPTION AND FIRST NIGHTS						
4.1	When you were searched in reception, was this done in a respectful way?	<i>n</i> =114	78%		78%	
4.2	While in reception, were you able to speak to someone from the health care team?	<i>n</i> =115	85%		85%	

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Number of completed questionnaires returned

n=number of valid responses to question (Morton Hall IRC 2019)

	Morton Hall IRC 2019	All other IRCs	Morton Hall IRC 2019	Morton Hall IRC 2016
Number of completed questionnaires returned	117	899	117	89

4.3	Overall, were you treated very / quite well in reception?	<i>n=114</i>	78%		78%	
4.4	When you first arrived, did you have any problems?	<i>n=109</i>	83%		83%	
4.4	When you first arrived, did you have any problems with:					
	- Getting phone numbers?	<i>n=109</i>	33%		33%	
	- Contacting family?	<i>n=109</i>	23%	19%	23%	16%
	- Arranging care for children or other dependents?	<i>n=109</i>	8%		8%	
	- Contacting employers?	<i>n=109</i>	14%		14%	
	- Money?	<i>n=109</i>	23%		23%	
	- Housing?	<i>n=109</i>	14%		14%	
	- Feeling depressed?	<i>n=109</i>	50%		50%	
	- Feeling suicidal?	<i>n=109</i>	23%		23%	
	- Your mental health?	<i>n=109</i>	33%		33%	
	- Your physical health?	<i>n=109</i>	25%		25%	
	- Drugs or alcohol (e.g. withdrawal)?	<i>n=109</i>	12%		12%	
	- Getting medication?	<i>n=109</i>	20%		20%	
	- Lost or delayed property?	<i>n=109</i>	17%		17%	
	- Other problems?	<i>n=109</i>	20%		20%	
	<i>For those who had any problems when they first arrived:</i>					
4.5	Did staff help you to deal with any of these problems?	<i>n=86</i>	52%		52%	
4.6	Did you feel safe on your first night in this centre?	<i>n=113</i>	62%	46%	62%	55%
4.7	In your first two days here, did you receive information in a language you could understand about:					
	- Daily life at this centre?	<i>n=92</i>	72%		72%	
	- Visits?	<i>n=81</i>	62%		62%	
	- How to see immigration staff?	<i>n=89</i>	66%		66%	
	- How to get legal advice?	<i>n=85</i>	59%		59%	
	- How to see health care staff?	<i>n=91</i>	68%		68%	
	- Other support available?	<i>n=72</i>	54%		54%	
LEGAL RIGHTS AND IMMIGRATION						
5.1	Have you received free legal advice in this centre?	<i>n=111</i>	51%		51%	
5.2	Do you have an immigration lawyer?	<i>n=107</i>	62%		62%	
	<i>For those who have an immigration lawyer:</i>					
5.3	Is it easy to contact your lawyer?	<i>n=54</i>	52%		52%	
	Is it easy to have a visit from your lawyer?	<i>n=41</i>	34%		34%	

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Number of completed questionnaires returned

Morton Hall IRC 2019	All other IRCs	Morton Hall IRC 2019	Morton Hall IRC 2016
117	899	117	89

n=number of valid responses to question (Morton Hall IRC 2019)

5.4	Is it easy to obtain bail information?	n=88	38%		38%	
	Is it easy to access up-to-date information about your country?	n=77	21%		21%	
	Is it easy to see Home Office immigration staff?	n=83	36%		36%	
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	n=107	38%		38%	
RESPECTFUL DETENTION						
6.1	On the wing or residential unit you are currently living on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=104	64%		64%	
	- Can you shower every day?	n=106	90%	93%	90%	97%
	- Do you have clean sheets every week?	n=96	64%		64%	
	- Do you get cleaning materials for your room every week?	n=103	58%		58%	
	- Is it normally quiet enough for you to sleep or relax at night?	n=97	54%	52%	54%	57%
	- Can you get your property from the centre's property store when you need it?	n=98	53%	48%	53%	48%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	n=104	62%		62%	
6.3	Is the quality of the food here very / quite good?	n=107	52%		52%	
6.4	Do you get enough to eat at meal-times always / most of the time?	n=105	60%		60%	
6.5	Does the centre's shop sell the things that you need?	n=107	43%		43%	
6.6	Do you know how to make a complaint about your treatment in this centre?	n=105	36%		36%	
6.7	Have you made a complaint while in this centre?	n=107	18%		18%	
<i>For those who have made a complaint:</i>						
6.7	Are complaints dealt with fairly?	n=19	58%	29%	58%	11%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	n=108	38%		38%	
STAFF						
7.1	Do staff here treat you with respect always / most of the time?	n=108	72%		72%	
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	n=109	59%		59%	
7.3	Are there any members of staff here you can turn to for help if you have a problem?	n=103	68%	65%	68%	57%
7.4	Have staff here physically restrained you since you've been in this centre?	n=97	16%		16%	
7.5	Have you spent any time in the separation / isolation unit, in this centre?	n=105	11%		11%	
FAITH						
8.1	Do you have a religion?	n=105	91%	94%	91%	91%
<i>For those who have a religion:</i>						
8.2	Are your religious beliefs respected here?	n=96	69%		69%	
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	n=95	59%		59%	

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Number of completed questionnaires returned

Morton Hall IRC 2019	All other IRCs	Morton Hall IRC 2019	Morton Hall IRC 2016
117	899	117	89

n=number of valid responses to question (Morton Hall IRC 2019)

SAFETY						
9.1	Have you ever felt unsafe here?	n=113	54%		54%	
9.2	If yes, have you felt unsafe:					
	- In your room?	n=95	17%		17%	
	- On corridors?	n=95	17%		17%	
	- In the dining hall?	n=95	14%		14%	
	- At health care?	n=95	16%		16%	
	- In association or shared areas (e.g. TV room)?	n=95	17%		17%	
	- In activity areas (e.g. library, IT room, education, gym)?	n=95	12%		12%	
	- In outside areas?	n=95	25%		25%	
	- Anywhere else in this centre?	n=95	17%		17%	
9.3	Do you feel unsafe now?	n=103	30%	43%	30%	37%
9.4	Have you experienced any of the following from other detainees here:					
	- Verbal abuse?	n=92	11%		11%	
	- Threats or intimidation?	n=92	13%		13%	
	- Sexual comments?	n=92	5%		5%	
	- Sexual assault?	n=92	3%		3%	
	- Physical assault?	n=92	10%	6%	10%	8%
	- Theft?	n=92	8%		8%	
	- Other forms of victimisation or bullying?	n=92	10%		10%	
	- Not experienced any of these from detainees here	n=92	74%		74%	
9.5	If you were being bullied or victimised by other detainees here, would you report it?	n=100	57%		57%	
9.6	Have you experienced any of the following from staff here:					
	- Verbal abuse?	n=90	6%		6%	
	- Threats or intimidation?	n=90	7%		7%	
	- Sexual comments?	n=90	0%		0%	
	- Sexual assault?	n=90	1%		1%	
	- Physical assault?	n=90	0%	3%	0%	4%
	- Theft?	n=90	4%		4%	
	- Other forms of victimisation or bullying?	n=90	6%		6%	
	- Not experienced any of these from staff here	n=90	82%		82%	
9.7	If you were being bullied or victimised by staff here, would you report it?	n=99	61%		61%	

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Morton Hall IRC 2019	All other IRCs	Morton Hall IRC 2019	Morton Hall IRC 2016
117	899	117	89

ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	<i>n</i> =81	6%		6%
	- Medication not prescribed to you?	<i>n</i> =86	16%		16%
	- Alcohol?	<i>n</i> =81	7%		7%
10.2	Do you currently have a problem with:				
	- Illicit drugs?	<i>n</i> =80	5%		5%
	- Medication not prescribed to you?	<i>n</i> =85	18%		18%
	- Alcohol?	<i>n</i> =79	6%		6%
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?	<i>n</i> =11	18%		18%
	- Medication not prescribed to you?	<i>n</i> =16	38%		38%
	- Alcohol?	<i>n</i> =9	22%		22%
10.4	Is it very / quite easy to get illicit drugs in this centre?	<i>n</i> =102	9%		9%
10.5	Is it very / quite easy to get alcohol in this centre?	<i>n</i> =105	5%		5%
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?	<i>n</i> =74	46%		46%
11.2	Is the quality of the health care services here very / quite good?	<i>n</i> =89	58%		58%
11.3	Do you have any mental health problems?	<i>n</i> =104	43%		43%
	<i>For those who have mental health problems:</i>				
11.4	Have you been helped with your mental health problems while in this centre?	<i>n</i> =46	39%		39%
11.5	Have you ever felt depressed while in this centre?	<i>n</i> =104	71%		71%
11.6	Have you ever felt suicidal while in this centre?	<i>n</i> =102	29%		29%
	<i>For those who have felt depressed or suicidal here:</i>				
11.7	Did you receive any help from staff?	<i>n</i> =55	29%		29%
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?	<i>n</i> =94	32%	16%	32%
	<i>For those who consider themselves to have a disability:</i>				
12.2	Are you getting the support you need?	<i>n</i> =23	22%		22%
ACTIVITIES					
13.1	Are you taking part in any education here?	<i>n</i> =102	38%	17%	38%
	<i>For those who are taking part in education:</i>				
13.2	Is it helpful?	<i>n</i> =38	76%	92%	76%
13.3	Do you have a job here?	<i>n</i> =100	33%		33%

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Number of completed questionnaires returned

n=number of valid responses to question (Morton Hall IRC 2019)

Morton Hall IRC 2019	All other IRCs	Morton Hall IRC 2019	Morton Hall IRC 2016
117	899	117	89

13.4	Does the library have appropriate materials to meet your needs?	<i>n=101</i>	50%		50%	
13.5	Is it very / quite easy to access what you need on the internet?	<i>n=104</i>	39%		39%	
13.6	Can you go to the gym as often as you want to?	<i>n=96</i>	67%		67%	
13.7	Is there enough to do in this centre to fill your time?	<i>n=100</i>	38%		38%	
KEEPING IN TOUCH WITH FAMILY AND FRIENDS						
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n=98</i>	39%	24%	39%	30%
14.2	Have you had a visit from family or friends since you've been in this centre?	<i>n=103</i>	30%	48%	30%	39%
<i>For those who have had a visit from family or friends:</i>						
14.3	Are your visitors usually treated with respect by staff?	<i>n=31</i>	58%		58%	
LEAVING THIS CENTRE						
15.1	Has anyone here helped you prepare for leaving this centre?	<i>n=98</i>	24%		24%	

Morton Hall IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who reported having a disability are compared with those of detainees who did not report having a disability
- responses of detainees who reported having mental health problems are compared with those of detainees who did not report having mental health problems

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

Have a disability	Do not have a disability	Mental health problems	No mental health problems
30	64	45	59

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION		Have a disability	Do not have a disability	Mental health problems	No mental health problems
1.2	Are you under 21 years of age?	0%	5%	0%	7%
	Are you 25 years of age or younger?	13%	16%	18%	14%
	Are you 50 years of age or older?	7%	13%	7%	12%
1.3	Are you from a black or minority ethnic group?	89%	65%	91%	60%
1.4	Do you understand spoken English very / quite well?	76%	62%	75%	57%
1.5	Do you understand written English very / quite well?	63%	56%	67%	50%
8.1	Are you Muslim?	50%	34%	58%	25%
11.3	Do you have any mental health problems?	77%	30%		
12.1	Do you consider yourself to have a disability?			55%	14%
16.1	Are you responsible for any child under the age of 18 in the UK?	39%	37%	39%	31%
16.2	Is your gender female or non-binary?	14%	0%	9%	0%
16.3	Are you homosexual, bisexual or other sexual orientation?	36%	11%	26%	13%
16.4	Do you identify as transgender or transsexual?	13%	4%	13%	2%
IMMIGRATION DETENTION		Have a disability	Do not have a disability	Mental health problems	No mental health problems
2.1	Have you been detained in this centre for a month or more?	52%	36%	56%	28%
2.2	Have you spent three months or more in immigration detention in the UK?	48%	18%	43%	15%
2.3	Have you ever been held in prison in the UK?	53%	46%	55%	35%
JOURNEY TO THIS CENTRE		Have a disability	Do not have a disability	Mental health problems	No mental health problems
3.1	Before being brought to this centre, were you told where you were going?	68%	68%	68%	66%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	73%	84%	67%	92%
RECEPTION AND FIRST NIGHTS		Have a disability	Do not have a disability	Mental health problems	No mental health problems
4.1	When you were searched in reception, was this done in a respectful way?	73%	81%	73%	83%
4.2	While in reception, were you able to speak to someone from the health care team?	80%	89%	84%	88%
4.3	Overall, were you treated very / quite well in reception?	73%	83%	71%	86%

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	Have a disability	Do not have a disability	Mental health problems	No mental health problems
Number of completed questionnaires returned	30	64	45	59

4.4	When you first arrived, did you have any problems?	90%	81%	93%	73%
4.4	When you first arrived, did you have any problems with:				
	- Getting phone numbers?	28%	34%	39%	27%
	- Contacting family?	28%	16%	36%	13%
	- Arranging care for children or other dependents?	14%	7%	16%	2%
	- Contacting employers?	7%	18%	25%	5%
	- Money?	31%	19%	41%	9%
	- Housing?	17%	13%	27%	4%
	- Feeling depressed?	76%	40%	75%	29%
	- Feeling suicidal?	45%	16%	46%	7%
	- Your mental health?	52%	26%	66%	5%
	- Your physical health?	35%	18%	46%	5%
	- Drugs or alcohol (e.g. withdrawal)?	17%	11%	23%	4%
	- Getting medication?	28%	16%	32%	7%
	- Lost or delayed property?	17%	18%	25%	9%
	- Other problems?	14%	18%	21%	16%
	<i>For those who had any problems when they first arrived:</i>				
4.5	Did staff help you to deal with any of these problems?	42%	58%	45%	60%
4.6	Did you feel safe on your first night in this centre?	48%	72%	55%	70%
4.7	In your first two days here, did you receive information in a language you could understand about:				
	- Daily life at this centre?	67%	75%	74%	70%
	- Visits?	57%	66%	68%	57%
	- How to see immigration staff?	48%	76%	64%	69%
	- How to get legal advice?	50%	61%	58%	57%
	- How to see health care staff?	58%	73%	63%	71%
	- Other support available?	37%	63%	57%	53%
LEGAL RIGHTS AND IMMIGRATION					
5.1	Have you received free legal advice in this centre?	48%	44%	53%	45%
5.2	Do you have an immigration lawyer?	60%	61%	67%	60%
	<i>For those who have an immigration lawyer:</i>				
5.3	Is it easy to contact your lawyer?	39%	66%	52%	52%
	Is it easy to have a visit from your lawyer?	17%	46%	29%	36%

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Number of completed questionnaires returned

		Have a disability	Do not have a disability
		30	64
		Mental health problems	No mental health problems
		45	59

5.4	Is it easy to obtain bail information?	24%	43%	46%	30%
	Is it easy to access up-to-date information about your country?	11%	25%	18%	23%
	Is it easy to see Home Office immigration staff?	30%	40%	40%	33%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	24%	41%	36%	39%
RESPECTFUL DETENTION					
6.1	On the wing or residential unit you are currently living on:				
	- Do you normally have enough clean, suitable clothes for the week?	48%	71%	57%	70%
	- Can you shower every day?	86%	92%	91%	88%
	- Do you have clean sheets every week?	42%	69%	63%	62%
	- Do you get cleaning materials for your room every week?	60%	54%	58%	58%
	- Is it normally quiet enough for you to sleep or relax at night?	36%	63%	37%	65%
	- Can you get your property from the centre's property store when you need it?	44%	60%	54%	55%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	59%	59%	55%	64%
6.3	Is the quality of the food here very / quite good?	39%	60%	30%	70%
6.4	Do you get enough to eat at meal-times always / most of the time?	57%	62%	49%	70%
6.5	Does the centre's shop sell the things that you need?	50%	41%	48%	42%
6.6	Do you know how to make a complaint about your treatment in this centre?	29%	39%	40%	32%
6.6	Have you made a complaint while in this centre?	14%	19%	26%	14%
<i>For those who have made a complaint:</i>					
6.7	Are complaints dealt with fairly?	50%	58%	36%	88%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	43%	31%	56%	27%
STAFF					
7.1	Do staff here treat you with respect always / most of the time?	50%	84%	54%	86%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	45%	63%	39%	73%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	52%	73%	57%	74%
7.4	Have staff here physically restrained you since you've been in this centre?	16%	13%	16%	15%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	18%	7%	15%	10%
FAITH					
8.1	Do you have a religion?	100%	90%	98%	86%
<i>For those who have a religion:</i>					
8.2	Are your religious beliefs respected here?	68%	68%	69%	67%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	61%	58%	70%	48%

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Number of completed questionnaires returned

		Have a disability	Do not have a disability
		30	64
		Mental health problems	No mental health problems
		45	59

SAFETY					
9.1	Have you ever felt unsafe here?	80%	38%	67%	42%
9.2	If yes, have you felt unsafe:				
	- In your room?	25%	7%	24%	10%
	- On corridors?	33%	13%	24%	14%
	- In the dining hall?	29%	7%	21%	10%
	- At health care?	21%	11%	26%	8%
	- In association or shared areas (e.g. TV room)?	29%	13%	24%	14%
	- In activity areas (e.g. library, IT room, education, gym)?	17%	9%	18%	8%
	- In outside areas?	42%	20%	32%	24%
	- Anywhere else in this centre?	29%	13%	24%	10%
9.3	Do you feel unsafe now?	58%	14%	41%	21%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	21%	5%	12%	9%
	- Threats or intimidation?	29%	4%	15%	9%
	- Sexual comments?	17%	0%	9%	2%
	- Sexual assault?	8%	0%	3%	2%
	- Physical assault?	17%	4%	3%	13%
	- Theft?	21%	0%	9%	6%
	- Other forms of victimisation or bullying?	8%	5%	9%	7%
- Not experienced any of these from detainees here	42%	91%	68%	80%	
9.5	If you were being bullied or victimised by other detainees here, would you report it?	50%	59%	50%	66%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	12%	3%	14%	0%
	- Threats or intimidation?	16%	2%	14%	0%
	- Sexual comments?	0%	0%	0%	0%
	- Sexual assault?	4%	0%	0%	2%
	- Physical assault?	0%	0%	0%	0%
	- Theft?	12%	2%	5%	4%
	- Other forms of victimisation or bullying?	12%	3%	11%	2%
- Not experienced any of these from staff here	56%	93%	68%	94%	
9.7	If you were being bullied or victimised by staff here, would you report it?	38%	70%	40%	81%

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Number of completed questionnaires returned

	Have a disability	Do not have a disability	Mental health problems	No mental health problems
	30	64	45	59

ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	9%	6%	7%	6%
	- Medication not prescribed to you?	26%	13%	29%	8%
	- Alcohol?	14%	4%	7%	8%
10.2	Do you currently have a problem with:				
	- Illicit drugs?	5%	6%	7%	4%
	- Medication not prescribed to you?	23%	18%	37%	4%
	- Alcohol?	10%	4%	10%	4%
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?	20%	20%	33%	0%
	- Medication not prescribed to you?	50%	33%	50%	20%
	- Alcohol?	40%	0%	40%	0%
10.4	Is it very / quite easy to get illicit drugs in this centre?	14%	9%	14%	6%
10.5	Is it very / quite easy to get alcohol in this centre?	7%	5%	9%	2%
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?	32%	52%	55%	43%
11.2	Is the quality of the health care services here very / quite good?	48%	67%	49%	71%
11.3	Do you have any mental health problems?	77%	30%		
	<i>For those who have mental health problems:</i>				
11.4	Have you been helped with your mental health problems while in this centre?	39%	40%	38%	
11.5	Have you ever felt depressed while in this centre?	83%	63%	82%	61%
11.6	Have you ever felt suicidal while in this centre?	55%	19%	49%	13%
	<i>For those who have felt depressed or suicidal here:</i>				
11.5	Did you receive any help from staff?	30%	29%	36%	22%
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?			55%	14%
	<i>For those who consider themselves to have a disability:</i>				
12.2	Are you getting the support you need?	22%		24%	17%
ACTIVITIES					
13.1	Are you taking part in any education here?	38%	38%	49%	30%
	<i>For those who are taking part in education:</i>				
13.2	Is it helpful?	80%	72%	60%	94%
13.3	Do you have a job here?	39%	30%	51%	20%

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Number of completed questionnaires returned

Have a disability	Do not have a disability	Mental health problems	No mental health problems
30	64	45	59

13.4	Does the library have appropriate materials to meet your needs?	43%	56%	47%	51%
13.5	Is it very / quite easy to access what you need on the internet?	35%	40%	43%	34%
13.6	Can you go to the gym as often as you want to?	72%	67%	69%	69%
13.7	Is there enough to do in this centre to fill your time?	41%	33%	40%	36%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	50%	30%	50%	29%
14.2	Have you had a visit from family or friends since you've been in this centre?	31%	30%	39%	25%
<i>For those who have had a visit from family or friends:</i>					
15.4	Are your visitors usually treated with respect by staff?	78%	47%	47%	71%
LEAVING THIS CENTRE					
15.1	Has anyone here helped you prepare for leaving this centre?	26%	23%	24%	24%

Morton Hall IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who had been held in prison in the UK are compared with those of detainees who had not been held in prison in the UK

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

Held in prison in the UK	Not held in prison in the UK
48	62

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	4%	7%
	Are you 25 years of age or younger?	17%	15%
	Are you 50 years of age or older?	9%	13%
1.3	Are you from a black or minority ethnic group?	69%	78%
1.4	Do you understand spoken English very / quite well?	72%	56%
1.5	Do you understand written English very / quite well?	64%	53%
8.1	Are you Muslim?	39%	45%
11.3	Do you have any mental health problems?	55%	35%
12.1	Do you consider yourself to have a disability?	36%	30%
16.1	Are you responsible for any child under the age of 18 in the UK?	45%	25%
16.2	Is your gender female or non-binary?	4%	4%
16.3	Are you homosexual, bisexual or other sexual orientation?	15%	21%
16.4	Do you identify as transgender or transsexual?	0%	14%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	61%	23%
2.2	Have you spent three months or more in immigration detention in the UK?	46%	10%
2.3	Have you ever been held in prison in the UK?		
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	68%	63%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	73%	86%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	79%	79%
4.2	While in reception, were you able to speak to someone from the health care team?	81%	87%
4.3	Overall, were you treated very / quite well in reception?	66%	90%

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	Held in prison in the UK	Not held in prison in the UK
Number of completed questionnaires returned	48	62

4.4	When you first arrived, did you have any problems?	91%	76%
4.4	When you first arrived, did you have any problems with:		
	- Getting phone numbers?	29%	33%
	- Contacting family?	22%	24%
	- Arranging care for children or other dependents?	18%	2%
	- Contacting employers?	16%	12%
	- Money?	22%	22%
	- Housing?	13%	14%
	- Feeling depressed?	67%	40%
	- Feeling suicidal?	27%	21%
	- Your mental health?	33%	31%
	- Your physical health?	27%	21%
	- Drugs or alcohol (e.g. withdrawal)?	18%	7%
	- Getting medication?	31%	12%
	- Lost or delayed property?	27%	9%
	- Other problems?	27%	16%
	<i>For those who had any problems when they first arrived:</i>		
4.5	Did staff help you to deal with any of these problems?	45%	63%
4.6	Did you feel safe on your first night in this centre?	54%	66%
4.7	In your first two days here, did you receive information in a language you could understand about:		
	- Daily life at this centre?	69%	72%
	- Visits?	62%	61%
	- How to see immigration staff?	66%	69%
	- How to get legal advice?	53%	64%
	- How to see health care staff?	67%	67%
	- Other support available?	49%	63%
LEGAL RIGHTS AND IMMIGRATION			
5.1	Have you received free legal advice in this centre?	53%	50%
5.2	Do you have an immigration lawyer?	61%	67%
	<i>For those who have an immigration lawyer:</i>		
5.3	Is it easy to contact your lawyer?	46%	57%
	Is it easy to have a visit from your lawyer?	25%	40%

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	Held in prison in the UK	Not held in prison in the UK
Number of completed questionnaires returned	48	62

5.4	Is it easy to obtain bail information?	46%	33%
	Is it easy to access up-to-date information about your country?	18%	24%
	Is it easy to see Home Office immigration staff?	32%	42%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	35%	41%
RESPECTFUL DETENTION			
6.1	On the wing or residential unit you are currently living on:		
	- Do you normally have enough clean, suitable clothes for the week?	62%	67%
	- Can you shower every day?	98%	83%
	- Do you have clean sheets every week?	69%	61%
	- Do you get cleaning materials for your room every week?	59%	59%
	- Is it normally quiet enough for you to sleep or relax at night?	44%	59%
	- Can you get your property from the centre's property store when you need it?	57%	51%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	57%	67%
6.3	Is the quality of the food here very / quite good?	52%	53%
6.4	Do you get enough to eat at meal-times always / most of the time?	56%	63%
6.5	Does the centre's shop sell the things that you need?	44%	42%
6.6	Do you know how to make a complaint about your treatment in this centre?	46%	29%
6.6	Have you made a complaint while in this centre?	24%	14%
<i>For those who have made a complaint:</i>			
6.7	Are complaints dealt with fairly?	36%	88%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	46%	33%
STAFF			
7.1	Do staff here treat you with respect always / most of the time?	59%	83%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	49%	67%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	59%	77%
7.4	Have staff here physically restrained you since you've been in this centre?	16%	14%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	13%	11%
FAITH			
8.1	Do you have a religion?	91%	91%
<i>For those who have a religion:</i>			
8.2	Are your religious beliefs respected here?	71%	70%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	71%	53%

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Number of completed questionnaires returned

	Held in prison in the UK	Not held in prison in the UK
Number of completed questionnaires returned	48	62

SAFETY			
9.1	Have you ever felt unsafe here?	67%	42%
9.2	If yes, have you felt unsafe:		
	- In your room?	10%	21%
	- On corridors?	30%	8%
	- In the dining hall?	23%	8%
	- At health care?	23%	12%
	- In association or shared areas (e.g. TV room)?	30%	8%
	- In activity areas (e.g. library, IT room, education, gym)?	20%	6%
	- In outside areas?	38%	15%
	- Anywhere else in this centre?	30%	8%
9.3	Do you feel unsafe now?	44%	19%
9.4	Have you experienced any of the following from other detainees here:		
	- Verbal abuse?	16%	6%
	- Threats or intimidation?	24%	6%
	- Sexual comments?	5%	6%
	- Sexual assault?	0%	6%
	- Physical assault?	11%	10%
	- Theft?	11%	6%
	- Other forms of victimisation or bullying?	14%	8%
- Not experienced any of these from detainees here	62%	82%	
9.5	If you were being bullied or victimised by other detainees here, would you report it?	49%	65%
9.6	Have you experienced any of the following from staff here:		
	- Verbal abuse?	8%	2%
	- Threats or intimidation?	10%	2%
	- Sexual comments?	0%	0%
	- Sexual assault?	0%	2%
	- Physical assault?	0%	0%
	- Theft?	8%	2%
	- Other forms of victimisation or bullying?	10%	2%
	- Not experienced any of these from staff here	72%	92%
9.7	If you were being bullied or victimised by staff here, would you report it?	50%	69%

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	Held in prison in the UK	Not held in prison in the UK
Number of completed questionnaires returned	48	62

ALCOHOL AND DRUGS			
10.1	While in this centre, have you developed any problems with:		
	- Illicit drugs?	8%	2%
	- Medication not prescribed to you?	21%	13%
	- Alcohol?	0%	11%
10.2	Do you currently have a problem with:		
	- Illicit drugs?	8%	0%
	- Medication not prescribed to you?	20%	16%
	- Alcohol?	0%	7%
10.3	While in this centre, have you been helped with your problems with:		
	- Illicit drugs?	14%	50%
	- Medication not prescribed to you?	50%	25%
	- Alcohol?	0%	67%
10.4	Is it very / quite easy to get illicit drugs in this centre?	14%	4%
10.5	Is it very / quite easy to get alcohol in this centre?	9%	2%
HEALTH AND SUPPORT			
11.1	Is a professional interpreter available if you need one during health care assessments?	48%	41%
11.2	Is the quality of the health care services here very / quite good?	57%	59%
11.3	Do you have any mental health problems?	55%	35%
	<i>For those who have mental health problems:</i>		
11.4	Have you been helped with your mental health problems while in this centre?	48%	30%
11.5	Have you ever felt depressed while in this centre?	71%	73%
11.6	Have you ever felt suicidal while in this centre?	42%	20%
	<i>For those who have felt depressed or suicidal here:</i>		
11.5	Did you receive any help from staff?	32%	27%
OTHER NEEDS AND SUPPORT			
12.1	Do you consider yourself to have a disability?	36%	30%
	<i>For those who consider themselves to have a disability:</i>		
12.2	Are you getting the support you need?	14%	33%
ACTIVITIES			
13.1	Are you taking part in any education here?	40%	38%
	<i>For those who are taking part in education:</i>		
13.2	Is it helpful?	59%	95%
13.3	Do you have a job here?	54%	19%

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	Held in prison in the UK	Not held in prison in the UK
Number of completed questionnaires returned	48	62

13.4	Does the library have appropriate materials to meet your needs?	52%	47%
13.5	Is it very / quite easy to access what you need on the internet?	40%	36%
13.6	Can you go to the gym as often as you want to?	73%	62%
13.7	Is there enough to do in this centre to fill your time?	34%	39%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	40%	40%
14.2	Have you had a visit from family or friends since you've been in this centre?	38%	24%
<i>For those who have had a visit from family or friends:</i>			
15.4	Are your visitors usually treated with respect by staff?	53%	69%
LEAVING THIS CENTRE			
15.1	Has anyone here helped you prepare for leaving this centre?	16%	31%

Morton Hall IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of non-heterosexual detainees are compared with those of heterosexual detainees

These analyses are based on data from all survey questions.

Shading is used to indicate statistical significance*, as follows:

	Green shading shows results that are significantly more positive than the comparator
	Blue shading shows results that are significantly more negative than the comparator
	Orange shading shows significant differences in demographics and background information
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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
15	70

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	0%	3%
	Are you 25 years of age or younger?	7%	16%
	Are you 50 years of age or older?	7%	12%
1.3	Are you from a black or minority ethnic group?	92%	72%
1.4	Do you understand spoken English very / quite well?	67%	73%
1.5	Do you understand written English very / quite well?	60%	64%
8.1	Are you Muslim?	31%	38%
11.3	Do you have any mental health problems?	60%	39%
12.1	Do you consider yourself to have a disability?	60%	25%
16.1	Are you responsible for any child under the age of 18 in the UK?	40%	34%
16.2	Is your gender female or non-binary?	13%	2%
16.3	Are you homosexual, bisexual or other sexual orientation?		
16.4	Do you identify as transgender or transsexual?	21%	3%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	47%	44%
2.2	Have you spent three months or more in immigration detention in the UK?	40%	29%
2.3	Have you ever been held in prison in the UK?	40%	50%
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	64%	70%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	73%	84%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	87%	80%
4.2	While in reception, were you able to speak to someone from the health care team?	73%	90%
4.3	Overall, were you treated very / quite well in reception?	80%	81%

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Number of completed questionnaires returned

	Gay/bisexual/other	Heterosexual
	15	70

4.4	When you first arrived, did you have any problems?	93%	78%
4.4	When you first arrived, did you have any problems with:		
	- Getting phone numbers?	21%	27%
	- Contacting family?	21%	18%
	- Arranging care for children or other dependents?	0%	9%
	- Contacting employers?	7%	16%
	- Money?	29%	22%
	- Housing?	21%	10%
	- Feeling depressed?	64%	48%
	- Feeling suicidal?	21%	27%
	- Your mental health?	36%	31%
	- Your physical health?	14%	22%
	- Drugs or alcohol (e.g. withdrawal)?	7%	16%
	- Getting medication?	7%	19%
	- Lost or delayed property?	0%	19%
	- Other problems?	7%	21%
	<i>For those who had any problems when they first arrived:</i>		
4.5	Did staff help you to deal with any of these problems?	64%	50%
4.6	Did you feel safe on your first night in this centre?	71%	60%
4.7	In your first two days here, did you receive information in a language you could understand about:		
	- Daily life at this centre?	92%	70%
	- Visits?	67%	59%
	- How to see immigration staff?	83%	66%
	- How to get legal advice?	82%	56%
	- How to see health care staff?	69%	66%
	- Other support available?	44%	56%
LEGAL RIGHTS AND IMMIGRATION			
5.1	Have you received free legal advice in this centre?	40%	48%
5.2	Do you have an immigration lawyer?	47%	62%
	<i>For those who have an immigration lawyer:</i>		
5.3	Is it easy to contact your lawyer?	40%	64%
	Is it easy to have a visit from your lawyer?	50%	32%

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	Gay/bisexual/other	Heterosexual
Number of completed questionnaires returned	15	70

5.4	Is it easy to obtain bail information?	36%	40%
	Is it easy to access up-to-date information about your country?	40%	15%
	Is it easy to see Home Office immigration staff?	42%	33%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	60%	35%
RESPECTFUL DETENTION			
6.1	On the wing or residential unit you are currently living on:		
	- Do you normally have enough clean, suitable clothes for the week?	79%	62%
	- Can you shower every day?	93%	88%
	- Do you have clean sheets every week?	46%	66%
	- Do you get cleaning materials for your room every week?	57%	58%
	- Is it normally quiet enough for you to sleep or relax at night?	46%	61%
	- Can you get your property from the centre's property store when you need it?	79%	53%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	64%	62%
6.3	Is the quality of the food here very / quite good?	50%	56%
6.4	Do you get enough to eat at meal-times always / most of the time?	71%	61%
6.5	Does the centre's shop sell the things that you need?	57%	41%
6.6	Do you know how to make a complaint about your treatment in this centre?	36%	39%
6.6	Have you made a complaint while in this centre?	14%	18%
<i>For those who have made a complaint:</i>			
6.7	Are complaints dealt with fairly?	50%	50%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	43%	36%
STAFF			
7.1	Do staff here treat you with respect always / most of the time?	64%	75%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	43%	60%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	57%	68%
7.4	Have staff here physically restrained you since you've been in this centre?	29%	9%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	14%	9%
FAITH			
8.1	Do you have a religion?	92%	91%
<i>For those who have a religion:</i>			
8.2	Are your religious beliefs respected here?	75%	69%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	69%	62%

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Number of completed questionnaires returned

	Gay/bisexual/other	Heterosexual
Number of completed questionnaires returned	15	70

SAFETY			
9.1	Have you ever felt unsafe here?	67%	50%
9.2	If yes, have you felt unsafe:		
	- In your room?	39%	7%
	- On corridors?	31%	18%
	- In the dining hall?	15%	14%
	- At health care?	39%	11%
	- In association or shared areas (e.g. TV room)?	23%	16%
	- In activity areas (e.g. library, IT room, education, gym)?	23%	11%
	- In outside areas?	46%	21%
	- Anywhere else in this centre?	23%	19%
9.3	Do you feel unsafe now?	50%	27%
9.4	Have you experienced any of the following from other detainees here:		
	- Verbal abuse?	23%	7%
	- Threats or intimidation?	23%	10%
	- Sexual comments?	8%	5%
	- Sexual assault?	8%	2%
	- Physical assault?	15%	7%
	- Theft?	23%	3%
	- Other forms of victimisation or bullying?	8%	9%
	- Not experienced any of these from detainees here	54%	78%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	53%	57%
9.6	Have you experienced any of the following from staff here:		
	- Verbal abuse?	8%	5%
	- Threats or intimidation?	23%	3%
	- Sexual comments?	0%	0%
	- Sexual assault?	8%	0%
	- Physical assault?	0%	0%
	- Theft?	15%	3%
	- Other forms of victimisation or bullying?	8%	5%
	- Not experienced any of these from staff here	54%	87%
9.7	If you were being bullied or victimised by staff here, would you report it?	57%	60%

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Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
15	70

ALCOHOL AND DRUGS			
10.1	While in this centre, have you developed any problems with:		
	- Illicit drugs?	0%	9%
	- Medication not prescribed to you?	17%	12%
	- Alcohol?	18%	5%
10.2	Do you currently have a problem with:		
	- Illicit drugs?	0%	7%
	- Medication not prescribed to you?	17%	14%
	- Alcohol?	15%	4%
10.3	While in this centre, have you been helped with your problems with:		
	- Illicit drugs?	0%	25%
	- Medication not prescribed to you?	0%	38%
	- Alcohol?	50%	20%
10.4	Is it very / quite easy to get illicit drugs in this centre?	8%	12%
10.5	Is it very / quite easy to get alcohol in this centre?	0%	7%
HEALTH AND SUPPORT			
11.1	Is a professional interpreter available if you need one during health care assessments?	11%	49%
11.2	Is the quality of the health care services here very / quite good?	50%	58%
11.3	Do you have any mental health problems?	60%	39%
<i>For those who have mental health problems:</i>			
11.4	Have you been helped with your mental health problems while in this centre?	44%	37%
11.5	Have you ever felt depressed while in this centre?	73%	70%
11.6	Have you ever felt suicidal while in this centre?	53%	25%
<i>For those who have felt depressed or suicidal here:</i>			
11.5	Did you receive any help from staff?	42%	26%
OTHER NEEDS AND SUPPORT			
12.1	Do you consider yourself to have a disability?	60%	25%
<i>For those who consider themselves to have a disability:</i>			
12.2	Are you getting the support you need?	25%	17%
ACTIVITIES			
13.1	Are you taking part in any education here?	33%	39%
<i>For those who are taking part in education:</i>			
13.2	Is it helpful?	80%	74%
13.3	Do you have a job here?	43%	36%

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	Gay/bisexual/other	Heterosexual
Number of completed questionnaires returned	15	70

13.4	Does the library have appropriate materials to meet your needs?	64%	55%
13.5	Is it very / quite easy to access what you need on the internet?	33%	41%
13.6	Can you go to the gym as often as you want to?	79%	72%
13.7	Is there enough to do in this centre to fill your time?	33%	39%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	33%	38%
14.2	Have you had a visit from family or friends since you've been in this centre?	13%	29%
<i>For those who have had a visit from family or friends:</i>			
15.4	Are your visitors usually treated with respect by staff?	100%	55%
LEAVING THIS CENTRE			
15.1	Has anyone here helped you prepare for leaving this centre?	29%	23%

Morton Hall IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who are 25 years of age and under are compared with those of detainees aged over 25
- responses of detainees who are 50 years of age or older are compared with those of detainees aged under 50

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

25 and under	Over 25	50 and over	Under 50
19	95	12	102

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you 25 years of age or younger?				19%
	Are you 50 years of age or older?		13%		
1.3	Are you from a black or minority ethnic group?	61%	76%	73%	74%
1.4	Do you understand spoken English very / quite well?	58%	63%	33%	65%
1.5	Do you understand written English very / quite well?	47%	57%	27%	59%
8.1	Are you Muslim?	47%	40%	44%	40%
11.3	Do you have any mental health problems?	50%	43%	30%	45%
12.1	Do you consider yourself to have a disability?	29%	33%	20%	34%
16.1	Are you responsible for any child under the age of 18 in the UK?	25%	37%	56%	33%
16.2	Is your gender female or non-binary?	0%	5%	0%	4%
16.3	Are you homosexual, bisexual or other sexual orientation?	8%	19%	11%	19%
16.4	Do you identify as transgender or transsexual?	8%	6%	0%	7%
IMMIGRATION DETENTION					
2.1	Have you been detained in this centre for a month or more?	37%	39%	18%	41%
2.2	Have you spent three months or more in immigration detention in the UK?	17%	26%	30%	24%
2.3	Have you ever been held in prison in the UK?	47%	42%	33%	44%
JOURNEY TO THIS CENTRE					
3.1	Before being brought to this centre, were you told where you were going?	68%	66%	82%	65%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	58%	82%	92%	77%
RECEPTION AND FIRST NIGHTS					
4.1	When you were searched in reception, was this done in a respectful way?	90%	76%	92%	77%
4.2	While in reception, were you able to speak to someone from the health care team?	74%	87%	67%	87%
4.3	Overall, were you treated very / quite well in reception?	79%	79%	92%	77%

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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	19	95	12	102

4.4	When you first arrived, did you have any problems?	83%	82%	64%	84%
4.4	When you first arrived, did you have any problems with:				
	- Getting phone numbers?	33%	33%	46%	31%
	- Contacting family?	22%	24%	18%	24%
	- Arranging care for children or other dependents?	6%	9%	9%	8%
	- Contacting employers?	17%	14%	36%	12%
	- Money?	17%	24%	27%	22%
	- Housing?	11%	15%	27%	13%
	- Feeling depressed?	56%	49%	27%	53%
	- Feeling suicidal?	22%	24%	18%	24%
	- Your mental health?	39%	32%	18%	34%
	- Your physical health?	17%	26%	27%	24%
	- Drugs or alcohol (e.g. withdrawal)?	17%	11%	18%	12%
	- Getting medication?	17%	20%	27%	19%
	- Lost or delayed property?	17%	17%	27%	16%
	- Other problems?	17%	19%	9%	20%
	<i>For those who had any problems when they first arrived:</i>				
4.5	Did staff help you to deal with any of these problems?	21%	59%	86%	50%
4.6	Did you feel safe on your first night in this centre?	68%	60%	91%	58%
4.7	In your first two days here, did you receive information in a language you could understand about:				
	- Daily life at this centre?	64%	73%	80%	70%
	- Visits?	77%	60%	44%	65%
	- How to see immigration staff?	62%	67%	91%	62%
	- How to get legal advice?	42%	62%	78%	57%
	- How to see health care staff?	64%	68%	73%	67%
	- Other support available?	36%	58%	86%	52%
LEGAL RIGHTS AND IMMIGRATION					
5.1	Have you received free legal advice in this centre?	53%	49%	60%	49%
5.2	Do you have an immigration lawyer?	65%	61%	50%	63%
	<i>For those who have an immigration lawyer:</i>				
5.3	Is it easy to contact your lawyer?	88%	47%	60%	52%
	Is it easy to have a visit from your lawyer?	80%	28%	60%	31%

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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

		25 and under	Over 25
		19	95
		50 and over	Under 50
		12	102

SAFETY					
9.1	Have you ever felt unsafe here?	39%	57%	18%	58%
9.2	If yes, have you felt unsafe:				
	- In your room?	6%	18%	0%	18%
	- On corridors?	19%	17%	0%	19%
	- In the dining hall?	13%	14%	0%	16%
	- At health care?	19%	16%	0%	18%
	- In association or shared areas (e.g. TV room)?	13%	18%	0%	19%
	- In activity areas (e.g. library, IT room, education, gym)?	13%	12%	0%	13%
	- In outside areas?	19%	27%	0%	29%
	- Anywhere else in this centre?	19%	17%	10%	18%
9.3	Do you feel unsafe now?	19%	33%	9%	33%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	8%	11%	9%	11%
	- Threats or intimidation?	8%	14%	18%	13%
	- Sexual comments?	0%	6%	9%	5%
	- Sexual assault?	0%	4%	9%	3%
	- Physical assault?	0%	11%	9%	10%
	- Theft?	8%	8%	9%	8%
	- Other forms of victimisation or bullying?	0%	11%	9%	10%
	- Not experienced any of these from detainees here	83%	72%	82%	73%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	60%	57%	64%	56%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	8%	5%	0%	6%
	- Threats or intimidation?	15%	5%	0%	8%
	- Sexual comments?	0%	0%	0%	0%
	- Sexual assault?	0%	1%	0%	1%
	- Physical assault?	0%	0%	0%	0%
	- Theft?	8%	4%	0%	5%
	- Other forms of victimisation or bullying?	8%	5%	10%	5%
	- Not experienced any of these from staff here	77%	83%	90%	81%
9.7	If you were being bullied or victimised by staff here, would you report it?	73%	58%	64%	60%

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Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	19	95	12	102

ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	9%	6%	11%	6%
	- Medication not prescribed to you?	18%	16%	0%	18%
	- Alcohol?	10%	7%	0%	8%
10.2	Do you currently have a problem with:				
	- Illicit drugs?	0%	6%	0%	6%
	- Medication not prescribed to you?	0%	20%	13%	18%
	- Alcohol?	10%	6%	0%	7%
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?		22%	0%	25%
	- Medication not prescribed to you?		43%	50%	42%
	- Alcohol?	0%	33%	0%	33%
10.4	Is it very / quite easy to get illicit drugs in this centre?	0%	10%	11%	9%
10.5	Is it very / quite easy to get alcohol in this centre?	0%	6%	0%	5%
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?	55%	46%	50%	47%
11.2	Is the quality of the health care services here very / quite good?	77%	55%	86%	56%
11.3	Do you have any mental health problems?	50%	43%	30%	45%
	<i>For those who have mental health problems:</i>				
11.4	Have you been helped with your mental health problems while in this centre?	25%	42%	67%	37%
11.5	Have you ever felt depressed while in this centre?	73%	72%	50%	74%
11.6	Have you ever felt suicidal while in this centre?	25%	31%	10%	32%
	<i>For those who have felt depressed or suicidal here:</i>				
11.5	Did you receive any help from staff?	11%	33%	33%	29%
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?	29%	33%	20%	34%
	<i>For those who consider themselves to have a disability:</i>				
12.2	Are you getting the support you need?	50%	19%	0%	23%
ACTIVITIES					
13.1	Are you taking part in any education here?	21%	41%	40%	38%
	<i>For those who are taking part in education:</i>				
13.2	Is it helpful?	33%	82%	100%	76%
13.3	Do you have a job here?	31%	34%	20%	35%

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Number of completed questionnaires returned

	25 and under	Over 25		50 and over	Under 50
	19	95		12	102

13.4	Does the library have appropriate materials to meet your needs?	50%	49%	60%	48%
13.5	Is it very / quite easy to access what you need on the internet?	21%	40%	50%	36%
13.6	Can you go to the gym as often as you want to?	71%	68%	67%	68%
13.7	Is there enough to do in this centre to fill your time?	36%	38%	20%	40%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	36%	40%	22%	41%
14.2	Have you had a visit from family or friends since you've been in this centre?	43%	27%	20%	30%
<i>For those who have had a visit from family or friends:</i>					
15.4	Are your visitors usually treated with respect by staff?	50%	58%	0%	61%
LEAVING THIS CENTRE					
15.1	Has anyone here helped you prepare for leaving this centre?	23%	23%	56%	19%