



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

Larne House, Manchester Airport and Yarl's Wood

by HM Chief Inspector of Prisons

23–26 August 2021

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Introduction

This inspection covers the three sites which have an established use as residential short-term holding facilities (RSTHFs) for those who are detained under immigration powers: Larne House, Manchester Airport RSTHF and Yarl's Wood RSTHF. The Home Office can hold detainees for up to five days in a residential RSTHF, or seven if removal directions have been set. Larne House and Manchester Airport RSTHF have not been affected by the numbers arriving on the Kent coast. Yarl's Wood, by contrast, has for two years received many detainees from Kent.

The risks associated with COVID-19 are being managed satisfactorily, with appropriate precautions and contingency arrangements for those needing isolation. There have been just 17 positive cases at Yarl's Wood, with often over 100 detainees at a time in the unit.

The living conditions are reasonable at all three sites and have improved at Larne House. The care shown by staff is appreciated by detainees, not least at Yarl's Wood. Activity resources and communal areas are generally adequate for the short stays involved. Health care provision is of a good standard, and multifaith chaplaincy teams are active in all sites.

There is good attention to the safety of detainees, with a fair standard of support and care planning for those at risk of self-harm, and the units are orderly and calm. However, many detainees understand little of what is happening or will happen to them. The form explaining the reasons for detention is only available in English, and at all sites the initial interview on reception lacks privacy.

Within the last few months, care at the coast has improved, so that people are no longer arriving at Yarl's Wood with serious untreated injuries. However, there is almost no information on the individual when they arrive there, and usually no risk assessment. The reasons for detention are often issued to the detainee several days after arrival, in English only. A number of children have arrived at the RSTHF, only identified as such when staff there have requested an age assessment. Proper records are not kept; for example, reliable figures were not available for average length of stay.

Detention at Yarl's Wood RSTHF has exceeded five days on 31 occasions in the last six months, almost always because of a lack of next-step accommodation. Home Office screening interviews have regularly taken place on the fourth day of residence. This interview is usually the first opportunity for the person to receive an explanation of their detention, or for specific risks to be identified. We were told that many people could have reasonably been released much sooner.

Not all important information affecting the safety of the detainee is recorded and passed on. For example, there is often not time for a full health care assessment to be carried out when concerns are raised about issues such as past torture that are relevant to their detention, and in such cases no record is

kept of the initial referral. Similarly, referrals as a result of evidence of modern slavery are not recorded by the Home Office.

Almost three years have passed since the Channel crossings situation was declared as a major incident. Those detained in these RSTHFs receive humane treatment, on the whole. However, experience in the detention context shows that some unnecessary risks and uncertainties arise from the lack of a continuous, properly coordinated and recorded process from arrival onwards.

Charlie Taylor

HM Chief Inspector of Prisons

September 2021

About the facilities

Larne House

Role of the facility

To hold immigration detainees for up to seven days before their removal from the UK or transfer to an immigration removal centre.

Location

Antrim, Northern Ireland

Name of contractor

Mitie

Escort provider

Mitie

Date of last inspection

6 June 2018

Manchester Airport

Role of the facility

To hold immigration detainees for up to seven days before their removal from the UK or transfer to an immigration removal centre.

Location

World Freight Terminal, Manchester Airport

Name of contractor

Mitie

Escort provider

Mitie

Date of last inspection

3 January 2019

Yarl's Wood short-term holding facility

Role of the facility

To hold newly arrived male migrants for up to seven days before their release and transfer to alternative asylum accommodation.

Location

Bedfordshire

Name of contractor

Serco

Escort provider
Private Hire Firms

Date of last inspection
2–4 and 7–10 September 2020

Section 1 Summary

Progress on recommendations

- 1.1 Section 6 contains a full list of recommendations made at the last full inspection and the progress against them.

Larne House

- 1.2 We last inspected Larne House in 2018 and made 10 recommendations. The Home Office and Mitie fully accepted four of the recommendations and partially (or subject to resources) accepted three. It rejected three of the recommendations.
- 1.3 At our last inspection, we made eight recommendations in the area of safety. At this inspection we found that four of those recommendations had been achieved, one had been partially achieved and three had not been achieved.
- 1.4 We made two recommendations in the area of preparation for removal and release. At this inspection we found that one had been partially achieved and one had not been achieved.

Manchester Airport

- 1.5 We last inspected Manchester Airport in 2019 and made seven recommendations. The Home Office and Mitie fully accepted two of the recommendations and partially (or subject to resources) accepted four. It rejected one of the recommendations.
- 1.6 At our last inspection, we made five recommendations in the area of safety. At this inspection we found that two of those recommendations had been achieved, two had been partially achieved and one had not been achieved.
- 1.7 We made two recommendations in the area of preparation for removal and release. At this inspection we found that both of those recommendations had been partially achieved.

Yarl's Wood

- 1.8 We last inspected Yarl's Wood in 2020 and made 11 recommendations. The Home Office, Serco and Escorting contractors fully accepted six of the recommendations and partially (or subject to resources) accepted four. It rejected one of the recommendations.
- 1.9 At our last inspection, we made six recommendations in the area of safety. At this inspection we found that three of those recommendations had been achieved, one had been partially achieved and two had not been achieved.

- 1.10 We made one recommendation in the area of respect. At this inspection we found that this recommendation had been achieved.
- 1.11 We made four recommendations in the area of preparation for removal and release. At this inspection we found that one of those recommendations had been achieved and two had not been achieved. One recommendation was no longer relevant.

Notable positive practice

- 1.12 We define notable positive practice as innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for detainees; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.
- 1.13 Inspectors found no examples of notable positive practice during the inspections of Larne House or Manchester Airport.
- 1.14 Inspectors found one example of notable positive practice during the inspection of Yarl's Wood: the translation of common dosage instructions for medicines into 10 languages and the use of professional telephone interpreting services ensured that patients understood how to use their medicines. (See paragraph 4.54)

Section 2 Larne House

Safety

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

Arrival and early days in detention

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

- 2.1 The centre had not been busy recently, and we were told that there had been fewer detainees in July 2021 than in any month since the opening of the facility. Those arriving had had journeys of 40 minutes or less.
- 2.2 Arrangements for health and safety in response to COVID-19 were sound. Those arriving received a lateral flow test and temperature check before alighting from the vehicle. If the test was positive or isolation was needed for another reason, there was an alternative route into the centre, through a side entrance and into the designated isolation area of the accommodation.
- 2.3 For all arrivals, there was an initial conversation and risk assessment at the desk in the reception area. This was not private, even though no more than one detainee would normally be present in the area at a time. Staff said that they would take the detainee to a private area if they asked for it or seemed to need it. Records showed that professional telephone interpreting services were used routinely with those who did not have a strong grasp of English. Searching on arrival took place in a private, curtained booth. Detainees could make a telephone call free of charge on arrival, and if they had no funds they could make a free call each day.
- 2.4 The induction booklet was available in 20 languages. All new arrivals saw a nurse within two hours, usually much sooner, for initial screening.

Recommendation

- 2.5 **Reception interviews should be conducted in private.** (Repeated recommendation 1.7).

Safeguarding adults and personal safety

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

- 2.6 A Mitie safeguarding policy was now in place. The three levels of the Home Office's adults-at-risk policy were observed, and a vulnerable adult care plan (VACP) was initiated for anyone who was at risk. The assessment, care in detention and teamwork (ACDT) forms that we saw, for detainees at risk of suicide or self-harm, were of consistently good quality, with all sections well completed. ACDT care plans were full, detailed and were updated as necessary. Most VACP records were of reasonable quality, but in some the occurrence log contained no information about the behaviour or frame of mind of the person.
- 2.7 Staff training on keeping residents safe and on mental health awareness had improved, mainly in the form of online modules. Staff could be paid on rest days to undertake this training, which they said made it more easier. Live training sessions for groups of staff had also been delivered by Mind (the mental health charity) via a video calling platform. All staff had completed ACDT training, and a programme was in progress to train all staff as ACDT assessors by November 2021.
- 2.8 Notices and leaflets about modern slavery, and the options open to victims of it, were displayed in six languages around the facility. Staff were aware of the National Referral Mechanism and the need to refer any possible cases quickly to the Home Office staff as first responders.
- 2.9 The 'special cell' – a completely unfurnished room with a sleeping plinth – had not been used since the last inspection. There had been no use of force in recent months. Body-worn video cameras (BWVCs) were now in use at all times. It remained a disadvantage that Mitie managers could not review closed-circuit television footage directly, but rather had to make an application through the Home Office to the commercial provider, building in a delay when rapid reference to footage might be important. However, on-site managers were now able to review BWVC footage, which would be useful in case of incidents taking place in the presence of staff.

Recommendations

- 2.10 **Staff should record regular information about the person's behaviour and frame of mind in every vulnerable adult care plan.**
- 2.11 **Onsite managers should be able to retrieve and review closed-circuit television footage easily. (Repeated recommendation 1.19)**

Safeguarding children

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

- 2.12 No children had been held at Larnie House in recent months. If a person was brought to the facility who claimed to be a child, the policy was to keep them in the reception area, away from adult detainees and with a member of staff present at all times, until (on the same day) the local authority carried out an age assessment and they were taken away to be given care as appropriate.

Legal rights

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

- 2.13 The form explaining why the person was detained (IS91R) was still given in English only. Staff went through it with the detainee, with the use of professional telephone interpreting services if needed.
- 2.14 A list of local immigration solicitors was displayed and updated weekly. Legal consultations were normally held by telephone or via a video calling platform. Faxes could be sent between detainees and their solicitors, and staff scanned and emailed documents for detainees on request.
- 2.15 Mitie Care and Custody maintained a comprehensive electronic records system, which provided management information on the numbers detained, length of detention and so forth, as well as records of each individual episode of detention. There were frequent entries every day for each detainee.

Recommendation

- 2.16 **Detainees should be issued with an IS91R form in a language that they can understand.**

Respect

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

Accommodation and facilities

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

- 2.17 The environment and décor in the communal areas had been softened and improved since the last inspection. A wide range of bright, attractive and well-mounted pictures was displayed. A new screen in the dining area showed a rolling presentation of information in 15 languages, and a large-screen television had also been installed there.
- 2.18 The bedrooms were clean and functional, with natural light, but were cramped and bare; the great improvements to the shared areas compensated to some extent, but people held for up to a week needed a simple but adequate private room. There were no chairs or tables, and, as the Independent Monitoring Board had pointed out, the raised wooden edges of the bed frames made sitting on them uncomfortable. Staff said that additional furniture in the bedrooms would have to be fixed to the floor, but the need for this was unclear; it would be possible to take precautionary measures, where required, on the basis of individual risk assessment. The bedrooms contained a small lockable hotel-style safe for each detainee. Toilets and showers were in good condition, with hygienic dispensers for soap, paper towels and toilet tissue, and there was a properly equipped toilet/shower room for those with mobility difficulties. Fire drills had been held regularly.
- 2.19 Facilities for storing and cooking food were clean and fit for purpose. The range of food was limited mainly to frozen dishes and ambient-temperature ready meals, but staff also used the oven to cook simple items such as chips and pizza. Vegetarian and halal diets were catered for. There was a plentiful supply of fruit pots, yogurts, cereal bars and so forth, freely available at any time, as well as noodle pots and other microwaveable items, and a free hot drinks machine. There was a contract with a local shop to supply items such as milk and fresh fruit.



Dining area at Larne House

- 2.20 The association room was well stocked with books and DVDs in many languages, and activity resources, as well as the computer terminals. A small 'shop', a cupboard of snacks and other small items, was also in this room. There was a well-equipped laundry room.
- 2.21 The outdoor yard was much improved. It contained facilities for table tennis and table football, and was enhanced by a large mural of places of interest in Northern Ireland, and aromatic plants growing in planters. It was unfortunate that there was no exercise equipment, which was attributed to a lack of space.



The outside exercise area at Larne House

- 2.22 The prayer room was in use, with COVID-19 precautions, including disposable prayer mats. Ministers came in on a weekly rota, although contact currently was mainly by telephone, with detainees able to telephone a minister of their faith. Since the last inspection, visiting ministers had received specific training on ministry to immigration detainees.

Recommendation

- 2.23 **The improvements to the communal areas should be extended to the bedrooms, to give a simple but adequate private space.**

Respectful treatment

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

- 2.24 Staff spoke respectfully about detainees at all times and described many situations where they had taken good care of them. Many of the staff had served at Larne House for a number of years and showed a positive and mature attitude to their work. In all records, detainees were referred to by their name, and not in impersonal general terms. No personal data were displayed for others to see as there were no whiteboards with names and details visible to detainees or others passing through the facility.

- 2.25 There had been a renewed emphasis on diversity and inclusion. Members of staff were identified as champions for each protected characteristic. There was good provision for those with mobility difficulties – including a ramp at the entrance – and staff could competently describe their approach to supporting those with protected characteristics, including transgender people.
- 2.26 Hand-held translation devices were used for everyday communication, and telephone interpreting was also used often, with a dual handset available in the reception area. Many information notices were displayed in various languages; for example, forms to give emergency contact details were available in 12 languages, and a notice warning against fake legal advice in 10.
- 2.27 Women were accommodated in a separate area, although it could not be locked off from the men's section, and there was no separate communal room for them. Tenders were currently with the Home Office for alterations which would provide such a room, as well as some other improvements.
- 2.28 Complaint forms were freely available, in two locations, in 20 languages. Care and Custody feedback forms were freely available, in two locations, in 20 languages. We were told that if the form was completed in a language other than English, it would be kept until the end of the month, and the batch for the whole month would then be sent for processing. A helpful poster gave details about making a complaint to the Prisons and Probation Ombudsman.
- 2.29 A health care professional was on site at all times, with three full-time nurses and a reserve group of agency nurses. The local Curran Surgery was contracted to provide medical cover during normal hours, and response times were short. Out-of-hours cover was provided by Dalriada Urgent Care, and we were told that the service was good. Arrangements for medicines appeared to be sound. Detainees were able to keep inhalers in their possession, and the nurses were able to administer appropriate analgesics.

Recommendations

- 2.30 **Men and women should be held separately.** (Repeated recommendation 1.16).

Preparation for removal and release

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

Communications

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

- 2.31 Any detainee without a mobile phone, or with a smartphone, was supplied with a non-smartphone mobile phone; there was an ample stock of 19 phones and SIM cards. Detainees were able to use a video calling platform (in private, in an interview room), email and a mobile phone or payphone, to contact family or friends. There was still no access to social media for contacting family and friends.
- 2.32 There were two computer terminals in the association room, with internet access. Staff that, while a number of websites were blocked under central guidance, the Home Office was responsive in unblocking a particular site if it was being wrongly caught by the criteria.
- 2.33 Domestic visiting hours were from 2pm to 9pm, but there was flexibility to facilitate visits outside this period if there was a need. The routine length of visits was 30 minutes, but this too was treated flexibly. As at the previous inspection, there was no indication at the gate that it was the entrance to Larne House; visitors had to go to the adjacent police station to ask for admission to the short-term holding facility, which could give an intimidating and misleading impression.
- 2.34 The Independent Monitoring Board had maintained contact through the COVID-19 period, although this had been by telephone. Monthly remote board meetings had continued, with good attendance from Home Office and Mitie staff, and this had contributed to improvements in the facility, notably the continuing work to increase privacy for women. The Larne House visitors' group was also providing a telephone service during the COVID-19 period (for two hours, twice a week), as well as providing a small fund to supply suitable clothing on release to those needing it.

Recommendations

- 2.35 **Detainees should be permitted access to social media.**
- 2.36 **The entrance to the facility should be signposted for visitors.** (Repeated recommendation 1.39).

Leaving the facility

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

- 2.37 Clothing (including coats) and bags were made available to those being released. They were also given an information sheet about local services, a face mask and hand sanitiser. Travel warrants were issued routinely. There were some useful links to local organisations which could provide support, such as the Chinese Welfare Association in Northern Ireland. There was also useful information on display, such as a map of Britain and Ireland with all UK immigration removal centres marked.

Section 3 Manchester Airport

Safety

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

Arrival and early days in detention

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

- 3.1 The facility was open 24 hours a day, seven days a week, and always staffed by several detainee custody officers (DCOs) and a manager. We were told that there was always at least one female officer on duty.
- 3.2 With the exception of the few individuals who were detained following local immigration enforcement raids, staff usually had sufficient advance notice of new arrivals, to make sure that they were prepared. Staff were clear that no detainees would be accepted without the appropriate IS91 (authority to detain) paperwork.
- 3.3 One detainee was held in the facility during the inspection. He had arrived overnight from Dungavel House Immigration Removal Centre in Scotland. He had been at the facility previously, so was aware of general practices and the provisions available to him. He reported being treated well by staff, both on escort and at the centre. He had received an induction and was aware of the reasons for his detention.
- 3.4 Reception processes remained similar to those at the time of the previous inspection, with the addition of all new arrivals now being required to undergo a lateral flow COVID-19 test before being admitted into the building. Detainees were not handcuffed from escort vehicles and were searched in a private area. We were told that, in general, male and female detainees only arrived together if they were related.
- 3.5 Detainees were booked in and interviewed at an open desk by the waiting area, which compromised confidentiality and potential disclosure. Professional telephone interpreting services were used in reception when required, with local records indicating 187 uses in the previous six months. Staff demonstrated a responsive attitude towards detainee welfare; for example, they said that they always made sure that detainees fully understood the reasons for their detention when initially received.
- 3.6 Property was searched and any items not permitted to be in a detainee's possession were stored securely, including mobile phones (the centre provided replacement ones; see paragraph 3.41), charging cables, cigarette lighters, glass bottles and belts with large buckles.

Staff generally demonstrated a common-sense approach and said that they would make an assessment regarding other items, based on the detainee's demeanour and any available risk information. Detainees were permitted to keep their cash if they wished.

- 3.7 All detainees were offered a free telephone call to their families on arrival. Following the completion of a room-sharing risk assessment, they were given a tour of the facility and provided with toiletries, clothes and bedding as required.
- 3.8 Health care staff were on site 24 hours a day, seven days a week, and completed a screening interview/health assessment with all new detainees in a private dedicated health care room.

Recommendation

- 3.9 **Reception interviews should take place in private.**

Safeguarding adults and personal safety

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

- 3.10 All DCOs we spoke to had some awareness of Mitie's safeguarding adults policy and how to identify detainees with potential vulnerabilities. We were told that this was a topic covered in an annual general training refresher day that all staff attended. Despite posters promoting awareness about modern slavery, no DCOs knew about the National Referral Mechanism, to identify and support victims of trafficking. When prompted, DCOs said that if they had a specific concern, they would report it to their manager. Records provided to us indicated that there had been one modern slavery concern raised with the Home Office in the previous six months, but we were unclear of the outcome.
- 3.11 All DCOs had been trained in suicide and self-harm awareness and use of the assessment, care in detention and teamwork (ACDT) case management system for detainees at risk of suicide or self-harm. Some had undertaken further voluntary training to further their knowledge and were able to act as ACDT case managers and assessors.
- 3.12 Acts of self-harm were rare. Four ACDTs had been opened in the previous six months - one due to a threat of self-harm, two for thoughts of self-harm, and one due to a previous suicide attempt. During this period a single use of force incident had also occurred to prevent a detainee from harming themselves. Incident and use of force reports indicated that the force used had been proportionate, and detainee welfare had been assured.

- 3.13 Staff received annual refresher training in Home Office approved techniques for the use of force, and always carried handcuffs and an anti-ligature knife. There was a separation cell, but it had never been used.
- 3.14 Adult vulnerable care plans were used to monitor detainees identified with special vulnerabilities, such as impaired mobility or health conditions such as asthma or diabetes. The sample of documents that we checked were of reasonable quality, with an adequate number of entries.
- 3.15 Both men and women could be held in the facility, but in two distinct areas. Three bedrooms off the main corridor had been designated for use by women, alongside toilets, a shower and an association room. This corridor could be locked off, if required, during the day and was locked at night if required or when a female was present to ensure decency and safety. Men could be detained in this area, if required, but only when no women were being held. Similarly, if the facility held a higher number of women, they could be located in the area designated for men, as long as none were being held.
- 3.16 Detainees were not locked in their rooms at night, but did not have a key or the ability to lock their own doors. They were checked every hour by staff, from a security perspective, and then every three hours as part of a more detailed welfare check. As at our last inspection, male DCOs undertook checks of women's rooms during the night.
- 3.17 Men and women continued to share communal spaces, such as the outdoor area, internet area and dining hall; however, there were always enough staff in place to supervise them appropriately. The facility was monitored adequately by closed-circuit television cameras, but footage could only be downloaded with the assistance of Home Office staff, in what could be a long process. At least one DCO and a manager wore body-worn video cameras, footage of which could be downloaded promptly.

Recommendations

- 3.18 **Mitie Care and Custody should make sure that detainee custody officers are aware of the National Referral Mechanism (NRM), to identify and support potential victims of trafficking.**
- 3.19 **The centre should maintain a record of referrals to the NRM.**
- 3.20 **Only female detainee custody officers should check women's rooms at night.**

Safeguarding children

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

- 3.21 Children were not held at the facility and, since the previous inspection, there had been no cases of detainees whose age was in dispute.

Legal rights

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

- 3.22 All detainees arrived at the centre with an IS91 form. However, staff told us that, often, detainees did not understand the documentation because of their poor English, and centre staff had to use professional telephone interpreting services to explain the contents to them. In addition, staff could not recollect ever having seen an IS91 in any language other than English.
- 3.23 Detainees who already had a legal representative could maintain contact with them. There was a designated legal visits room, which could be used for in-person legal visits or communications via a video calling platform.
- 3.24 There was a list of registered immigration advisers and solicitors, taken from the Office of the Immigration Services Commissioner (OISC) and Law Society websites, published around the centre. The detainee we spoke to confirmed that he had been provided with a list of immigration solicitors and understood how to get one if he wished.
- 3.25 The facility had some multi-lingual notices warning detainees against using fake solicitors, and a notice in English promoting the Manchester Immigration Detainee Support Team (MIDST).
- 3.26 Detainees could send and receive faxes from their solicitors, and centre staff would also scan and email documents for detainees on request.

Recommendation

- 3.27 **Detainees should be issued with an IS91R form in a language that they can understand.**

Respect

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

Accommodation and facilities

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

- 3.28 The facility was clean and in good order at the time of the inspection. It was made up of 12 bedrooms, a reception area, two association rooms, dining facilities, visits rooms, a health care room and staff offices. Rooms were well ventilated and had reasonable levels of natural light. However, the windows were frosted and could not be opened, which prevented a view of the outside and meant that detainees could not control the airflow. There was a small outdoor area in which detainees could access the open air.
- 3.29 The facility could accommodate 32 detainees; two single rooms were set aside specifically for vulnerable detainees who required additional support or regular observations, and the remaining 10 rooms were a mixture of one-, two- and four-bed rooms. Bedrooms were basic, but clean and well maintained; however, the environment remained clinical and little had been done to rectify this. Each detainee had a small storage cupboard, including a personal safe which could be used to store valuable items. Clean bedding, towels and blankets were issued to all arriving detainees, as well as a basic hygiene pack containing items such as toothpaste and soap. The bedroom windows were fitted with shutters, which were closed each night; staff told us that this no longer happened at a set time, but when detainees indicated that they were ready. Shower and toilet facilities were communal, but were clean and in good condition.



Four-bed men's room at Manchester Airport short-term holding facility (RSTHF)

- 3.30 There were two association rooms, one for women and one for use by all detainees. These contained televisions, books, games and computers for detainee use, although most of the reading material we saw was in English. The larger association room also contained an Xbox. Detainees could ask to borrow a portable DVD player and DVDs to view in their room, or an e-reader, through which they could access a range of reading material, including in languages other than English.



Association room at Manchester Airport RSTHF

- 3.31 The outdoor area had been repainted since the previous inspection and provided a pleasant environment. However, it remained covered by overhead netting and was too small to allow detainees to exercise properly. There was a small sheltered outdoor area, with a cigarette lighter built into the wall. Staff told us that, although access to this area was curtailed at midnight, detainees who wished to smoke late at night would always be permitted to do so.



Yard at Manchester Airport RSTHF

- 3.32 Catering arrangements remained adequate. Detainees could access the dining room 24 hours a day. The dining facilities were comfortable and spacious, and detainees were offered hot meals four times a day. Snacks, such as cereal, crisps, biscuits and fruit, and drinks, including hot drinks, were freely available all day. The menu we saw showed that vegetarian and halal foods were available at each meal, and the menu was available in several languages. The detainee we spoke to told us that he had been offered a meal on arrival, and that the food was adequate. The food storage and preparation areas were clean and well stocked. Detainees could buy a limited range of confectionery, soft drinks and personal hygiene products from the facility shop.

Respectful treatment

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

- 3.33 The detainee being held at the time of the inspection was positive about his treatment by centre staff, saying that they had explained things clearly and provided him with everything that he needed. We

saw staff who were polite and respectful, and aware of detainees' needs. The centre was relaxed and the detainee told us that he felt able to approach staff. Staff wore name badges to identify themselves.

- 3.34 Detainees could complain formally in writing. Complaints forms in English and several other languages were freely available throughout the centre, as were boxes to submit complaints. Five complaints had been submitted in the previous year – all of which referred to incidents or property loss which had taken place at other detention facilities or airports. The responses to complaints had been given directly to detainees, and neither Home Office nor Mitie Care and Custody staff could provide us with them, so we were unable to assess their quality or timeliness.
- 3.35 There was a lift available for detainees who were unable to climb the flight of stairs that led to the facility. However, there was no other special provision for disabled people, and staff told us that because of this, the facility did not accept detainees with disabilities. Staff that we spoke to told us that equality and diversity issues were covered during their regular DCO refresher training, but that there was no formal refresher training on these issues.
- 3.36 Staff told us that professional telephone interpreting services were used regularly when needed. However, neither Mitie Care and Custody staff nor Home Office staff on site were able to provide us with records of how often interpreting had been used in the centre.
- 3.37 The facility had a multi-faith room, which was open to detainees 24 hours a day. It held various religious texts and prayer mats, and the direction of Mecca was clearly signalled. Chaplains from the nearby Manchester Airport chaplaincy could attend the facility in person, or speak to detainees by telephone if they were in need of spiritual support.
- 3.38 Women were accommodated on a separate corridor which was not accessible to male detainees (see paragraph 3.15). Women held in the centre had access to a separate association room, but could also use the larger mixed association and dining areas (see paragraph 3.30). The women's bathrooms were clean and private, and provided sanitary items. Since the previous inspection, one pregnant woman had been held at the facility.
- 3.39 The health care room was staffed by a nurse 24 hours a day. Detainees were given a thorough health screening on arrival, which included mental health. The facility was not equipped to take detainees with long-term conditions or substance abuse issues, or those who were on complex medications. The health care team could issue basic medications such as painkillers and supervise detainees who had been prescribed certain medications. There was an emergency bag, which included a defibrillator; this was checked weekly and was in-date. The health care team had 24-hour access to a GP and told us that detainees could generally see a doctor on the same day if necessary.

- 3.40 Detainees were given a lateral flow test and a temperature check for COVID-19 before they could enter the facility on arrival. During a recent outbreak of COVID-19 at the site, the detainees who had tested positive were isolated in the women's area of the facility, as no women were on site, and those who had not tested positive were moved to other detention facilities. The detainees who remained in the centre were then permitted access to all the facilities. The outbreak was managed with the support of Public Health England, and all the affected detainees were released or transferred to other detention facilities following their isolation period.

Preparation for removal and release

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

Communications

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

- 3.41 Detainees were not permitted to hold on to their own mobile phones in the facility. Replacement phones were provided routinely, which detainees could use with their own SIM cards. If their SIM card was not compatible with the phones provided, detainees could retrieve numbers from their own phones. The detainee held at the time of the inspection confirmed that he had been issued with a replacement phone. There were also two landline telephones in the centre, for incoming calls only.
- 3.42 Detainees could use the internet to send and receive emails and browse websites. Social media and video-calling websites remained blocked to detainees. However, they could use video-calling technology to speak to their legal representatives (see paragraph 3.23).
- 3.43 Visitors could attend the facility. Since the last inspection, the government website had been updated to show the address of the new facility; however, it was still poorly signposted and difficult to locate. Records showed that, in the previous month, 15 social visits had taken place. Personal visits could be booked for 30-minute slots, although staff told us that they would often allow visits to extend for longer if the visits room was not in high demand. Detainees could also receive legal visits, either in person or using a video calling platform. No in-person legal visits were recorded as having taken place in the previous month, and staff told us that there were no central records of the number of legal 'visits' that had taken place via the video calling platform. Both the social and legal visits rooms were clean and adequately sized, with the social visits room including comfortable sofas and a range of toys for children.
- 3.44 Detainees could telephone friends and family to inform them if they were being transferred to another detention site. Since the previous inspection, the facility had provided detainees with useful information

cards showing the name, address and contact details of other detention facilities.

Recommendation

3.45 Detainees should be permitted access to social media.

Leaving the facility

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

3.46 On leaving the centre, detainees were seen by a nurse from the health care team, given a rub-down search and had their property returned to them. Staff told us that detainees were not handcuffed routinely when leaving facility and being transferred to an immigration removal centre. We were also told that they could be provided with warm coats and/or small payments to assist them in their onward journey when necessary.

Section 4 Yarl's Wood

Safety

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

Arrival and early days in detention

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

- 4.1 The centre continued to be busy, with migrant Channel crossings the primary source of new arrivals. In the previous six months, approximately 3,500 detainees had arrived at the centre, with over 1,000 in July alone. Nearly 95% had been brought from Dover and were held under short-term holding facility (RSTHF) conditions. During the inspection, we did not observe any new arrivals.
- 4.2 Detainees arrived from Dover port facilities seven days a week and at any time of the day. Centre staff reported some improvements in communication with Home Office staff, so that they were better able to anticipate and prepare for new arrivals. Coaches now arrived in a more staggered and coordinated manner, resulting in detainees being able to disembark from them with much less delay than was noted at the last inspection.
- 4.3 COVID-19 management measures continued to be in place. All detainees received a lateral flow test before leaving Dover and had temperatures taken by health care staff at the centre before being permitted to disembark from their coaches (see paragraph 4.50). Hand sanitiser was freely available, and also personal protective equipment (PPE; see Glossary of terms) for staff and masks for detainees. To ensure social distancing, all holding rooms were currently permitted to accommodate a maximum of six detainees only.
- 4.4 Arrangements for processing new arrivals were the same as we had noted at the previous inspection, with several detainees dealt with simultaneously from one main central desk and professional telephone interpreting services used where necessary. We remained concerned about the lack of confidentiality and potential inhibition of disclosure by detainees as a consequence. Health care staff were always available and conducted their screening interviews in a private office. However, as there were generally only one or two health care staff available, delays sometimes occurred.
- 4.5 Detainees had their photographs and fingerprints taken as part of processing arrangements and their property was checked, with items

not allowed in possession, such as cash and smartphones, being removed. The centre provided all detainees with a replacement phone, if needed, and some phone credit if they had no funds. Before going to their residential unit, detainees were provided with clean bedding, towels, clothes and toiletries as required.

- 4.6 Detainees we spoke to were mainly positive about their initial arrival and reported staff as generally being friendly and helpful. Food and drink (including hot drinks) were available and staff demonstrated reasonable awareness and understanding of the stresses and anxieties that detainees would be under, and their role in providing some mitigation.
- 4.7 The induction process was currently less detailed than before the pandemic, but was offered to all detainees. There were adequate governance arrangements to make sure that this took place, although in some cases it was not within their first 24 hours at the centre, as intended. All newly arrived detainees received additional welfare checks in their first 24 hours.
- 4.8 Detainees were given an information booklet in reception, in addition to information about the asylum process and COVID-19 safety measures.

Safeguarding adults and personal safety

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

- 4.9 Home Office staff had little contact with detainees before their arrival at Yarl's Wood. They told us that detainees often arrived with blank IS91 (authority to detain) documents and generic risk information, and that the reasons for detention were filled out retrospectively.
- 4.10 The Home Office asylum screening interview was often not held until the fourth day of detention. During the pandemic, this had been an abridged version, mainly concerned with clarifying detainees' identities, and was conducted over the telephone, with the use of interpreting services. This meant that there could be no visual assessment, and that Home Office staff could not identify issues, such as trafficking indicators, arising from detainees' appearance or demeanour.
- 4.11 The lack of prompt information gathering, particularly regarding potential detainee vulnerability, was a concern and undermined the effectiveness of any Home Office safeguarding practices. Some Home Office staff told us that they relied on Serco staff to pick up evidence of vulnerabilities in their initial reception interview. We were not confident that this would be the case with such large numbers of detainees needing to be processed.

- 4.12 The centre held monthly safer detention meetings, alongside a useful weekly individual needs meeting which identified any additional measures needed for particularly vulnerable individuals, including those on assessment, care in detention and teamwork (ACDT) case management documents for those at risk of suicide or self-harm; any identified under the adults-at-risk policy at level two; or those on a supported living plan (see below). To mitigate the risk of any cases being missed, with such a high turnover, this meeting was also carried out informally each day, which was a positive initiative.
- 4.13 At the time of the inspection, there were 11 detainees identified at level two of the adults-at-risk policy in the centre, but none within the population held in the RSTHF. Although such detainees were identified by Serco managers, the Home Office made little use of this information when it related to the RSTHF detainee population. However, we found evidence that Serco and health care partners used it appropriately in overarching management plans, including when making community referrals in advance of detainees' release where applicable.
- 4.14 Serco staff had some awareness of safeguarding issues, the identification of detainee vulnerabilities and the adults-at-risk policy. They told us that if they had any concerns about an individual detainee, they would make a referral to the health care department and/or the Home Office, while also informing their manager.
- 4.15 Modern slavery is a key risk factor for this population, but many staff, including some in reception, were not aware of the National Referral Mechanism. Serco managers maintained a log of how many potential cases they had referred to the Home Office. However, Home Office staff did not keep a log of how many they had subsequently referred.
- 4.16 Health care staff booked Rule 32 appointments (see Glossary of terms), but several did not take place because of detainees being released before their appointment. Unlike at the time of the previous inspection, health care staff now described a proactive approach to notifying the Home Office when there were any medical factors relevant to Rule 32. However, it was unclear what the Home Office did with this information.
- 4.17 There had been 124 supported living plans opened in the previous six months, representing about 4% of the population held during that period. They were used mainly to support detainees with mobility issues or any health concerns that increased their vulnerability to contracting COVID-19. Plans we looked at were reasonably good, with sufficient and detailed entries, although care plans were not always updated.
- 4.18 Acts of self-harm were rare, with only one recorded in the previous six months. In the same period, eight ACDT documents had been opened, mostly because detainees had stated that they would harm themselves. The documents we viewed were often open for only one or two days, and care plans were not always updated adequately. However, case reviews were always completed before a detainee

release and there was evidence of professional telephone interpreting being used as part of the assessment and ongoing management process.

- 4.19 Detainees we spoke to said that they felt safe in the centre and free from bullying and violence. They had keys to their rooms and were able to lock them from the inside.
- 4.20 There had been five use of force incidents in the previous six months. Paperwork we viewed indicated that such incidents often involved low-level force being used to separate detainees from one another. Documentation was completed appropriately and was subject to adequate assurance checks. All staff received annual refresher training in control and restraint, and this had not been affected adversely by the pandemic.
- 4.21 On two occasions during the previous six months, detainees were held separately from others. Both were as a result of an assault – in one case against staff and in the other against another detainee. In both cases, authorisation paperwork was completed appropriately, and the decisions were justified. In one case, Home Office permission was sought and granted for an extension.

Recommendation

- 4.22 **Home Office asylum screening interviews should be held as promptly as possible following detainees' arrival.**

Safeguarding children

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

- 4.23 Of concern, 15 children had arrived at Yarl's Wood from Dover since the beginning of 2020, not having been identified as such at the coast. Thus, almost half of the 31 age assessments during that time, on detainees who claimed and/or appeared to be under 18, confirmed that the person was a child. While this was not within the control of staff at Yarl's Wood, it suggested that a key recommendation in our October 2020 inspection relating to Dover arrivals, that the Home Office should make sure that its practice at Dover complies with its duty to safeguard and promote the welfare of children arriving in the UK, was likely to remain relevant.
- 4.24 The county council's social services department was quick to respond to requests for age assessments, performing them on the same day, and care plans for children were good. There had been no overnight detentions of children or of people waiting for an assessment.

Recommendation

- 4.25 **The Home Office should ensure that its practice at Dover complies with its duty to safeguard and promote the welfare of children arriving in the UK, so that children are not taken to places of adult detention.**

Legal rights

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

- 4.26 The Home Office was unable to provide us with accurate records about the average length of detention. However, records showed that in the previous six months, 31 detainees were held for longer than five days. In 30 of these cases, this was due to a lack of suitable release accommodation. In one case, a detainee with social care needs was held at the centre for 15 days while social services established the support he would need and put this into place.
- 4.27 Home Office staff on site told us that detainees often arrived at the centre with incomplete IS91 paperwork, including incorrect personal details and a lack of robust risk assessment. Home Office and Serco records showed that this had resulted in detainees who were minors, or who had serious injuries or health concerns, being transferred to Yarl's Wood from the south coast. We were also told that IS91R paperwork was not always issued promptly and was often given to detainees several days after arrival at the centre.
- 4.28 There were currently no Home Office surgeries taking place, to advise detainees on their cases. Almost all the detainees that we spoke to told us that they had had little meaningful contact with the Home Office during their time in the centre, other than during their screening interview, which was conducted by telephone. Home Office staff told us that screening interviews often did not take place until a detainee's fourth day in detention, in order to alleviate pressure on accommodation services. This posed a risk of serious vulnerabilities, such as concerns about trafficking, not being identified promptly.
- 4.29 Detainees were provided with a list of legal representatives, in English, during their induction. The detainees we spoke to knew what this was for, although not all understood how to obtain a solicitor. Information about legal representatives was displayed prominently in communal areas, such as the library and the computer room. Detainees could meet their legal representatives in person at the centre, and could also call, fax or email them. There was currently no provision for video-calling legal representatives, as there was limited capacity for the video calling platform, and the centre had prioritised using it for social 'visits'.

- 4.30 Legal texts and resources were available in the library, which held a good range of resources, some of which were translated into other languages.

Recommendations

- 4.31 **Clear records of each individual detainee, and the amount of time that individuals spend in detention, should be maintained.**
- 4.32 **Detainees should be issued with an IS91R form in a language that they can understand.**
- 4.33 **Detention should be authorised individually, and this should be based on a risk assessment and clear authority to detain.**
- 4.34 **The Home Office should hold surgeries to inform detainees about their detention.**

Respect

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

Accommodation and facilities

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

- 4.35 The centre was clean and in good condition, despite the high turnover of detainees. Rooms were adequately sized and well furnished. The rooms we saw were free of graffiti and had working electrical items. Although rooms had been kept to single occupancy earlier in the pandemic, they were now being used to accommodate two detainees at times of high occupancy. The Avocet unit, which was currently being used to accommodate RSTHF detainees, had a laundry room so that detainees could wash their own clothes.



A shared room at Yarl's Wood

- 4.36 The Avocet unit had a large outdoor yard, with seating areas and some outdoor gym equipment, which was tidy and in good order at the time of the inspection. Detainees could access this area freely throughout the day.
- 4.37 Catering arrangements were adequate. Hot meals were always served, and cultural and dietary needs were catered for. The food we saw being served was suitably varied and of an appropriate portion size. All units had dining rooms, and detainees could choose whether to eat in the dining rooms or take food to their rooms. Staff monitored meal attendance, to make sure that detainees were eating. The facility also had a shop, selling snacks and other non-perishable goods, and detainees could access this during their association time.
- 4.38 An adapted regime was in place, to enable social distancing during the pandemic. Each unit was permitted two to three hours of time off their unit each day, during which they could access communal areas and activities. This enabled the centre to manage COVID-19 and make sure that different cohorts of detainees, including women held on site, were held separately, but meant that detainees spent much of their time in their rooms.



The exercise yard at Yarl's Wood

- 4.39 Detainees had access to a range of activities to keep them occupied during their stay in the centre. This included a gym and indoor sports hall, a library and computer room, and a barber's room, in which detainees could have haircuts. The library had a range of books in many languages, and a selection of DVDs which detainees could borrow to watch in their rooms.



The library at Yarl's Wood

- 4.40 A teacher was on site and was delivering some activities, mostly basic English lessons, to the short-term population.

Respectful treatment

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

- 4.41 We saw positive interactions between detainees and staff. Almost all of the detainees we spoke to reported positively about their treatment by staff, and told us that staff were approachable and helpful. The atmosphere in the centre was relaxed, which was impressive, given the high turnover of detainees. Staff we spoke to were sensitive to detainees' situations, and proactive in supporting them.
- 4.42 Records showed that the use of professional telephone interpreting services on the RSTHF units had improved. Staff also had access to hand-held translation devices, which could be used in brief or informal discussions. However, we saw some interactions in which interpreting was not used and would have been beneficial.

- 4.43 There had been one complaint from RSTHF residents in the previous year, regarding luggage that had been lost at a different centre. The response to the complaint was timely and polite, and addressed the issue that had been raised. Complaints forms – including health care and Independent Monitoring Board complaints – and information about how to make a complaint were available throughout the centre, and complaints forms were provided in several languages.
- 4.44 The centre identified detainees with protected characteristics during the reception process. Monthly equality meetings were held, and the minutes that we saw showed that these were effective in identifying trends. During the inspection, there was one transgender detainee held in the centre, who had indicated that she preferred to stay among male detainees. She was treated respectfully, and a plan was in place for her care.
- 4.45 Detainees with a disability, or who needed additional monitoring or help with everyday tasks, were placed on supported living plans. The plans we saw demonstrated adequate care and support. During the inspection, there were no detainees who had been assessed as needing a personal emergency evacuation plan. However, the plans we saw, relating to detainees who had been held recently, showed a suitable level of assessment and support.
- 4.46 The centre's chaplaincy operated an open-door policy to support detainees to practise their faith and provided them with religious materials where needed. Small corporate worship services had resumed in the centre. To protect detainees from the pandemic, services were socially distanced, disposable prayer mats were provided to Muslim detainees, and single-use communion cups were used to administer the eucharist.
- 4.47 Northamptonshire Healthcare NHS Foundation Trust had provided health services at Yarl's Wood since 2019. The conscientious health care team provided a responsive and good standard of care to the transient population who passed through the RSTHF.
- 4.48 Effective contingencies were in place between the centre and health care staff to manage COVID-19, with good support from Public Health England and health commissioners. Since the beginning of the pandemic, there had been only 17 positive cases in total within the whole centre, including two positive cases identified at the RSTHF, the last one being in May 2021. There was a good supply of PPE, and emergency equipment was checked regularly.
- 4.49 The large number of detainees arriving and leaving put pressure on the health care team, but they told us that the process had become more streamlined with coach arrivals being staggered (see paragraph 4.2).
- 4.50 A nurse wearing PPE checked detainees' temperatures on the coaches arriving from Dover. Any detainee displaying COVID-19 symptoms used a separate entrance to the building. A protective isolation unit was used for any symptomatic detainees, and a COVID-19 PCR test was

taken. The Home Office had informed health care staff that detainees would continue their isolation wherever they were going and would be transported with COVID-19 safety procedures in place.

- 4.51 Despite some delays due to the volume of detainees, all new arrivals received a health screen which identified any urgent physical or mental health needs, and appropriate care was provided within the short timeframe available. This included some detainees attending hospital if needed. All detainees were offered a GP appointment within 24 hours of their arrival, and anyone with an immediate health need or a long-term condition was prioritised. Health care staff made good use of professional telephone interpreting services during initial screenings and follow-up appointments.
- 4.52 There had been a major issue with burns and other injuries not being treated until arrival at Yarl's Wood. This had improved recently, following discussions with the Home Office and a review of the initial medical screening carried out at the coast to identify and treat any urgent medical needs. The results of lateral flow tests taken at Dover and physical health observations were now routinely recorded and sent with the detainee to Yarl's Wood.
- 4.53 The waiting time for a Rule 32 appointment was three days, which was reasonable, although it did not always enable detainees to be assessed before departure. In such cases, health care staff communicated to the Home Office the fact that a referral under Rule 32 had been made but the clinical assessment had not taken place, as well as noting it in the detainee's health records. However, it was unclear what happened with this information once the detainee had left, and the impact on any future asylum claims. Health care staff kept a central record of how many detainees received a Rule 32 appointment, but not of those missed, which prevented effective analysis. The health care team was proactive in informing the Home Office of any health needs that could affect detention, via an IS91 Part C form; this information was recorded in the detainee's medical record, but staff did not keep a central log of this, which was a missed opportunity to identify any trends.
- 4.54 The management of medicines was good, with detainees receiving medications promptly. There was now a pharmacist on site, who ran a minor ailments clinic, which was a good initiative. Although medicines were labelled in English, there was a 10-language translation of common dosage instructions, and professional telephone interpreting services were used when necessary, to make sure that patients understood how to use their medicines.
- 4.55 The mental health provision had been strengthened with psychology input, in addition to the responsive mental health nurses and the visiting psychiatrist. A well-being booklet for detainees, translated into 10 languages, had been devised and sounded promising. The team had a daily referral meeting to prioritise their workload, including referrals from reception screening and attendance at ACDT reviews. Staff from Kaleidoscope Plus Group (a registered mental health charity), commissioned by NHS England and NHS Improvement,

provided psychological well-being services. They also went to see detainees promptly at the RSTHF following a referral to the team, to give advice and guidance on issues such as managing anxiety and coping with stress and sleep issues. There had been no transfers under the Mental Health Act to a mental health unit from the RSTHF.

- 4.56 The need for substance misuse services was low, although appropriate monitoring and specialist GP prescribers were available, and a range of opiate substitution treatments were kept in stock. The team tried hard to arrange any follow-up care that was needed, but this was challenging because of the limited information available about the specific area or address to which detainees were going. Detainees needing alcohol detoxification were not admitted to the centre.
- 4.57 Urgent dental treatment was available if the detainee was in the facility on the day that the dentist attended, or they would be sent out to hospital if necessary. Antibiotics and pain relief were available whenever needed.
- 4.58 A nurse saw all detainees before they left Yarl's Wood. They had their temperature checked and were given a discharge summary of any health interventions and any prescribed medication.

Recommendation

- 4.59 **Health care staff should collect data on Rule 32 appointments that are missed and on IS91 Part C information they send to the Home Office, for effective analysis of any trends.**

Preparation for removal and release

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

Communications

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

- 4.60 Detainees were able to keep their own mobile phones if they were not smartphones. However, in practice, most phones were confiscated at Dover by Home Office officials or placed with detainees' stored property on arrival at Yarl's Wood. Basic phones were loaned to detainees on arrival, and they were permitted to save numbers from their personal phones. Welfare staff at the centre told us that they could help detainees to do this. All detainees received £1 in phone credit, and also £5 which they could exchange for further credit at the centre shop. A video calling platform and fax facilities were available to detainees in the library and communications room, respectively.

- 4.61 Internet access was available in the computer room adjoining the library. Detainees could access emails and most websites, but social media sites were blocked.
- 4.62 In-person social and legal visits were facilitated in the legal visits area at times when asylum screening interviews were not taking place, as the social visits area was being used for discharges at the time of the inspection. The visits area was spacious, and had 12 rooms, including some that could be used for video-links for substantive asylum interviews and bail hearings. There was relatively little demand for visits for short-term detainees; 70 social visits and 25 legal visits had taken place in the previous six months. We were told that 'Yarl's Wood befrienders', a group of volunteers, had returned to the centre and were available to visit detainees.

Recommendation

- 4.63 **Detainees should be permitted access to social media.**

Leaving the facility

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

- 4.64 The welfare team was available daily, based next to the RSTHF unit. Its staff dealt with enquiries, mainly about property (especially that seized or lost at the coast), and assisting detainees who needed to retrieve phone numbers from their own mobile phones or from other sources. The team worked hard to recover individuals' property – for example, from the police or other agencies in Kent.
- 4.65 During the inspection, large numbers were released to hotels after being given temporary admission. The complex process of releasing large numbers of detainees, to be taken by taxi to hotel accommodation, had been organised and streamlined to a point where it now went smoothly and efficiently. They were taken to the large visits hall, where staff dealt with them as individuals, addressing them by name and using a variety of means to help their understanding, including peers to interpret where appropriate, and also using hand-held translation devices. Hot food and drinks were provided. Two nurses spent time in the hall, speaking to each person and taking their temperature.
- 4.66 Detainees knew almost nothing about where they were going; the envelopes containing their release papers were simply marked with handwritten indications, such as 'North East Yorkshire Humberside' and 'Midlands and East of England'. No staff knew the destinations of the seven-seat taxis which collected those being released, so were unable to offer reassurance to the many detainees who asked where they were going; it was unclear whether there was a reason to withhold

the destination, or whether this was an unintended result of the dynamic day-to-day realities of the situation with arrivals across the Channel.

Section 5 Recommendations in this report

The following is a list of repeated and new recommendations in this report.

Recommendations to the Home Office and facility contractor

- 5.1 Recommendation 2.23: The improvements to the communal areas should be extended to the bedrooms, to give a simple but adequate private space. (Larne House)

Recommendations to the Home Office

- 5.2 Recommendations 2.16, 3.27 and 4.32: Detainees should be issued with an IS91R form in a language that they can understand. (All centres)
- 5.3 Recommendation 2.31, repeated recommendation 1.16: Men and women should be held separately. (Larne House)
- 5.4 Recommendations 2.36, 3.45 and 4.63: Detainees should be permitted access to social media. (All centres)
- 5.5 Recommendation 3.19: On site Home Office staff should maintain a record of referrals to the NRM. (Manchester Airport)
- 5.6 Recommendation 4.22: Home Office asylum screening interviews should be held as promptly as possible following detainees' arrival. (Yarl's Wood)
- 5.7 Recommendation 4.25: The Home Office should ensure that its practice at Dover complies with its duty to safeguard and promote the welfare of children arriving in the UK, so that children are not taken to places of adult detention. (Yarl's Wood)
- 5.8 Recommendation 4.31: Clear records of each individual detainee, and the amount of time that individuals spend in detention, should be maintained (Yarl's Wood)
- 5.9 Recommendation 4.33: Detention should be authorised individually, and this should be based on a risk assessment and clear authority to detain. (Yarl's Wood)
- 5.10 Recommendation 4.34: The Home Office should hold surgeries to inform detainees about their detention. (Yarl's Wood)

Recommendations to the facility contractor

- 5.11 Recommendation 2.5, repeated recommendation 1.7: Reception interviews should be conducted in private. (Larne House)

- 5.12 Recommendation 2.10: Staff should record regular information about the person's behaviour and frame of mind in every vulnerable adult care plan. (Larne House)
- 5.13 Recommendation 2.11, repeated recommendation 1.19: Onsite managers should be able to retrieve and review closed-circuit television footage easily. (Larne House)
- 5.14 Recommendation 2.37, repeated recommendation 1.39: The entrance to the facility should be signposted for visitors. (Larne House)
- 5.15 Recommendation 3.9: Reception interviews should take place in private. (Manchester Airport)
- 5.16 Recommendation 3.18: Mitie Care and Custody should make sure that detainee custody officers are aware of the National Referral Mechanism (NRM), to identify and support potential victims of trafficking. (Manchester Airport)
- 5.17 Recommendation 3.20: Only female detainee custody officers should check women's rooms at night. (Manchester Airport)
- 5.18 Recommendation 4.59: Health care staff should collect data on Rule 32 appointments that are missed and on IS91 Part C information they send to the Home Office, for effective analysis of any trends. (Yarl's Wood)

Section 6 Progress on recommendations from the last report

The following is a list of all the recommendations made in the last report, organised under the four tests of a healthy establishment. 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.

Larne House

Reception interviews should be conducted in private. (1.7)
Partially achieved (recommendation repeated, 2.5)

Mitie should publish a safeguarding policy and publicise this to all staff. The policy should include clear links with the Department of Health, Social Services and Public Safety, and the local safeguarding adults partnership board. (1.15)
Achieved

Men and women should be held separately. (1.16)
Not achieved (recommendation repeated, 2.31)

Detainees should be referred to by their preferred name in all documentation. (1.17)
Achieved

Detainees' clothing and toiletries should not be removed unless an individualised risk assessment indicates otherwise. (1.18)
Achieved

Onsite managers should be able to retrieve and review closed-circuit television footage easily. (1.19)
Not achieved (recommendation repeated, 2.11)

Detainees should be issued with and allowed to keep the reason for detention (IS91R) document in a language they can understand. (1.23)
Not achieved

Data that is important for purposes of accountability should be available regardless of changes in contractor, and should include numbers detained, length of detention and numbers of incident reports. (1.24)
Achieved

Manchester Airport

Reception and health care interviews should take place in private. (1.6)

Partially achieved

Mitie Care and Custody should ensure that detainee custody officers are aware of the potential vulnerabilities of detainees and of safeguarding mechanisms.

(1.14)

Achieved

Male detainees should not be held in the designated women's corridor. Women should not be held in rooms outside the designated women's corridor. Only female DCOs, and not male DCOs, should check women's rooms at night.

(1.15)

Partially achieved

Detainees' personal items should only be removed following an individual risk assessment. (1.16)

Achieved

Detainees should be issued with and allowed to keep the reason for detention (IS91R) document in a language they can understand. (1.20)

Not achieved

Yarl's Wood

Detention staff should use professional interpretation whenever necessary to ensure communication with detainees is effective. (2.9)

Achieved

The Home Office should ensure that detainees' vulnerability is thoroughly assessed at the earliest stage and that their identified needs are met. (2.11)

Not achieved

Onsite immigration staff should offer detention surgeries to detainees. (2.12)

Not achieved

Reception processes should be swift and safe. In particular, vehicles leaving Dover should be staggered and facility staff informed of their estimated time of arrival. (2.20)

Achieved

Detainees should receive comprehensive information on how to access legal support. (2.36)

Partially achieved

The centre should ensure that all detainees have a prompt and effective induction in a language they understand. (2.69)

Achieved

Respect

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

Yarl's Wood

Health care staff should inform the Home Office of all detainees identified as requiring Rule 32 assessments, including those whose assessments are not undertaken because they have left the centre before their appointment takes place. (2.57)

Achieved

Preparation for removal and release

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

Larne House

The entrance to the facility should be signposted for visitors. (1.39)

Not achieved (recommendation repeated, 2.37)

Detainees should be permitted access to Skype and social networking sites, as well as the internet and email. (1.40)

Partially achieved

Manchester Airport

Detainees should be permitted access to video-calling and social networking sites, as well as the internet and email. (1.37)

Partially achieved

The facility should be signposted for visitors, and the Home Office website updated. (1.38)

Partially achieved

Yarl's Wood

Detainees should be permitted to access social networking sites. (2.62)

Not achieved

The Home Office, escort contractor and centre staff should communicate effectively with one another to ensure that the discharge process for detainees is prompt. (2.68)

Achieved

Detainees should receive information about their onward destination in a language they understand before their release so they can inform family and friends. (2.69)

Not achieved

Detainees should have access to adequate toilet facilities during their journey from the centre. (2.70)

No longer relevant

Appendix I About our inspections and reports

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, secure training centres, immigration detention facilities, police and court custody and military detention.

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

All Inspectorate of Prisons reports carry a summary of the conditions and treatment of detainees, based on the tests of a healthy prison that were first introduced in this Inspectorate's thematic review *Suicide is everyone's concern*, published in 1999. For short-term holding facilities the tests are:

Safety

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

Respect

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

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.

(Note: One of our standard tests is 'purposeful activity'. Since they provide for short stays, there is a limit to what activities can or need to be provided. We will therefore report any notable issues concerning activities in the accommodation and facilities section.)

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

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 notable positive practice: innovative work or practice that leads to particularly good outcomes from which other establishments may be able to learn. Inspectors look for evidence of good outcomes for detainees; original, creative or particularly effective approaches to problem-solving or achieving the desired goal; and how other establishments could learn from or replicate the practice.

Inspectors use key sources of evidence: observation; discussions with detainees; discussions with staff and relevant third parties; documentation; and, where appropriate, surveys. 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.

Other than in exceptional circumstances, all our inspections are unannounced and include a follow up of recommendations from the previous inspection.

This report

This report provides a summary of recommendations made and notable positive practice identified during the inspection. There then follow sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the conditions for and treatment of immigration detainees* (Version 4, 2018) (available on our website at <https://www.justiceinspectorates.gov.uk/hmiprisons/our-expectations/immigration-detention-expectations/>). 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 lists all recommendations made in the report. Section 6 lists the recommendations from the previous full inspection and our assessment of whether they have been achieved.

Inspection team

This inspection was carried out by:

| | |
|------------------|-----------------------|
| Martin Kettle | Team leader |
| Rebecca Mavin | Inspector |
| Kam Sarai | Inspector |
| Maureen Jamieson | Health care inspector |

Appendix II Glossary of terms

We try to make our reports as clear as possible, and this short glossary should help to explain some of the specialist terms you may find. If you need an explanation of any other terms, please see the longer glossary, available on our website at: <http://www.justiceinspectors.gov.uk/hmiprisons/about-our-inspections/>

Rule 32 of the Short-term Holding Facility Rules

Sets out the requirement for health care professionals in residential short-term holding facilities to report on any detained person:

- whose health is likely to be injuriously affected by continued detention or any conditions of detention
- who is suspected of having suicidal intentions
- for whom there are concerns they may have been a victim of torture.

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