

Report on an announced  
inspection of

**Yarl's Wood Immigration  
Removal Centre**

4–8 July 2011

by HM Chief Inspector of Prisons

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# Contents

<b>1</b>	<b>Introduction</b>	<b>5</b>
<b>2</b>	<b>Fact page</b>	<b>7</b>
<b>3</b>	<b>Healthy establishment summary</b>	<b>9</b>
<b>4</b>	<b>Arrival in detention</b>	
	Escort vehicles and transfers	19
	Reception and first night	20
<b>5</b>	<b>Environment and relationships</b>	
	Residential units	23
	Staff-detainee relationships	25
<b>6</b>	<b>Casework</b>	
	Legal rights	27
	Immigration casework	29
<b>7</b>	<b>Duty of care</b>	
	Bullying and suicide and self-harm	33
	Childcare and child protection	36
	Diversity	37
	Faith	38
<b>8</b>	<b>Health services</b>	<b>41</b>
<b>9</b>	<b>Activities</b>	
	Work and learning and skills	47
	Physical education	49
<b>10</b>	<b>Rules and management of the centre</b>	
	Rules of the centre	51
	Security	51
	Rewards scheme	52
	Discipline	52
	Use of force and single separation	52

	Complaints	53
<b>11</b>	<b>Services</b>	
	Catering	55
	Centre shop	56
<b>12</b>	<b>Preparation for release</b>	
	Welfare	57
	Visits	58
	Telephones and mail	59
	Removal and release	60
<b>13</b>	<b>Recommendations, housekeeping and good practice</b>	63
<b>14</b>	<b>Appendices</b>	
	I Inspection team	70
	II Detainee population profile	71
	III Summary of survey responses	74

# Introduction

Yarl's Wood is a purpose-built immigration removal centre that can hold up to around 400 adult women and a small number of their male family members. Yarl's Wood has had a troubled history. Significant damage was caused by a disturbance and fire in 2002 and its past role in detaining children made it a focus for intense scrutiny and concern.

This was our first inspection since the decision to no longer detain children - something that we welcome given our long-standing concerns about the adverse impact that detention has on children - was implemented. This was not the only improvement. Although there was still much more to do, we found the centre had improved in most areas.

The centre's new strategic plan had set out ambitious objectives for overall improvements to education and activities. Good progress had already been made and most detainees now reported that there were sufficient activities to fill their time. Staff and volunteers worked enthusiastically to provide a range of activities. These included four or five cultural, religious or learning one-day events each month that had good levels of participation and appeared to be enjoyed by the women. The 'cultural kitchens' where groups of detainees could come together to cook traditional food were popular.

The amount of work available had improved and some led to qualifications. However there were still too few places, particularly for the 30% of women who stayed in the centre for more than two months, and pay was low. Education classes had been relocated to a facility no longer needed for children. This was a good environment and the number of women attracted to a limited range of basic ESOL, numeracy and IT courses was improving. There were fewer activities available for the small number of men held.

The physical environment was good. Residential units and rooms were clean and comfortable. Each unit and the central facilities area had an attractive outside courtyard. Faith provision was good and there were impressive multi-faith facilities. Health care was generally satisfactory. Complaints investigations and responses were excellent, though replies took too long.

A high proportion of detainees told us they were treated with respect by staff. However, the number of female staff was too low. Men were sometimes left in sole charge of units at night. Women complained that male staff sometimes knocked and then entered their rooms without any pause.

There was little evidence of bullying and women at risk of suicide or self-harm were generally well cared for. An over-stretched but well-regarded welfare officer and a small support team provided practical assistance to women and helped to prepare them for release or removal, but this needed to be more systematic and better resourced. There was good provision for visits.

The good conditions in which most women were held did not disguise the ultimately difficult and stressful purpose of their detention. Detainees found it difficult to get advice about their cases and had insufficient contact with immigration staff based at the centre. The results of detention reviews were not consistently reported to detainees as required. The overall length of time detainees had spent in different establishments was not recorded and one was released during the inspection after spending almost three years in detention. Rule 35 reports that should have alerted immigration staff to detainees whose health might be adversely affected by detention were poorly understood by health staff and badly completed.

In some cases, the remit of immigration staff and the centre had become confused and staff were inappropriately separating partners and restricting access to work to motivate compliance with immigration procedures. Biometric data about visitors was collected for immigration purposes without the consent or knowledge of detainees and their visitors. Too many pregnant women, who should only have been held in exceptional circumstances, were detained in the centre. One of these women had had a four day journey from Belfast to Dungavel IRC in Scotland and then to Pennine House at Manchester Airport where she had collapsed; from there she had been taken to hospital before completing her journey to Yarl's Wood. We had particular concerns about other vulnerable detainees, including those with disabilities, who were under-identified, and older detainees for whom there was insufficient provision.

Yarl's Wood is a unique facility dealing with sometimes very vulnerable women at a difficult time of their lives. Nevertheless, this inspection found evidence of some significant improvements. However, concerns remain, particularly about how the needs of vulnerable women are met.

**Nick Hardwick**  
HM Chief Inspector of Prisons

**September 2011**

# Fact page

## **Task of the establishment**

The detention, care and welfare of people subject to immigration control.

## **Location**

Clapham, Bedfordshire

## **Name of contractor**

Serco

## **Number held**

Women: 229

Men: 27

## **Certified normal accommodation (CNA)**

n/a

## **Operational capacity**

405

## **Last inspection**

9–13 November 2009 (full unannounced follow-up)

## **Brief history**

Yarl's Wood is a purpose-built immigration removal centre (IRC), originally opened in November 2001. The centre initially housed 900 residents in two residential blocks. Following a disturbance and fire in February 2002, the B site was demolished. After extensive rebuilding, the A site reopened in September 2003 with an initial capacity of 60. This was expanded to 120 by August 2004 and to full operational capacity by the end of 2005. Yarl's Wood became the main IRC for women and families. Serco Ltd took over the management, operation and maintenance of the establishment in April 2007. No children have been detained there since December 2010.

## **Escort provider**

Reliance

## **Short description of residential units**

Yarl's Wood consists of a family unit, an induction unit (single women) and two further single women's units. The majority of the rooms are doubles. There are 318 female bed spaces and 87 family bed spaces accommodating couples and adult dependants.

## **Health service commissioner and providers**

UKBA; Serco Health

## **Learning and skills providers**

In-house; Serco



# Healthy establishment summary

## Introduction

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HE.1 The concept of a healthy prison was introduced in our thematic review *Suicide is Everyone's Concern* (1999). The healthy prison criteria, upon which inspections base the four tests of a healthy establishment, have been modified to fit the inspection of removal centres. The criteria for removal centres 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 detainees are able to be purposefully occupied while they are in detention

**Preparation for release** – that detainees are able to keep in contact with the outside world and are prepared for their release, transfer or removal.

HE.2 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 United Kingdom Border Agency.

- **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.

HE.3 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.

HE.4 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.

## Safety

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HE.5 Detainee feedback on escorts was generally positive but there was routine use of handcuffs for outside appointments undertaken by the main escort contractor. The reception area was comfortable and welcoming. Security was generally proportionate. Use of force had increased but management of incidents was generally good. Few people were separated but some detainees had spent too long in temporary confinement. Detainees at risk of suicide and self-harm were well cared for. There was little evidence of bullying and most detainees reported feeling safe. Most detainees had legal representatives but legal advice surgeries were oversubscribed and unable to meet the demand. Detainees had insufficient face-to-face contact with the onsite UK Border Agency team. A large number of Rule 35 reports were completed but they did not contain enough information to provide the intended safeguards. We had some concerns about casework in relation to pregnant women. Outcomes for detainees against this healthy establishment test were reasonably good.

HE.6 Detainees generally reported positively on their treatment by escort staff, although many arrived in the early hours of the morning and some had long journeys without comfort breaks. Ex-foreign national prisoners arrived with their prison records and these were used to inform the risk assessment process. However, about a third of detainees arrived from police stations with no custody records.

HE.7 While Serco handcuffed detainees only for outside appointments if there was a clear assessed risk, most escorts were undertaken by Reliance and involved routine and unnecessary use of handcuffs. A number of removals had been cancelled at short notice, often because of a lack of transport.

HE.8 There was an attractive and comfortable reception area and most detainees reported positively about their treatment on arrival. However, non-English speakers reported much less favourably on their treatment in reception, despite the playing of the useful

multi-lingual DVDs about the centre. Some use was made of telephone interpreting services but this did not appear to meet the need sufficiently.

- HE.9 Rooms for newly arrived detainees were clean and adequately equipped. Appropriate levels of observation were in place during the first night in detention. Induction had recently improved but was work in progress, and it was too early to judge its effectiveness.
- HE.10 The level of security was proportionate and most razor wire had been removed from outside areas. The flow of security information reports had been steady over the previous year; they were well processed and properly considered by the security committee. There were no prominent themes and there was little evidence of drug or alcohol use. There had been no strip-searching since 2009. The preponderance of male staff meant that a male officer was often present at rub-down searching of women.
- HE.11 The number of recorded uses of force had increased considerably but security committee minutes showed limited discussion to explore or explain this. Management data suggested that this might have been due to appropriate recording of light-touch physical contact but this did not fully explain our survey finding that twice as many people as at the time of the previous inspection reported physical restraint.<sup>1</sup> Video evidence and paperwork showed better communication during planned removals and generally well-coordinated and -managed use of force. In some cases, lead officers did not always maintain calm and controlled communication but there was mainly good evidence of de-escalation.
- HE.12 Relatively few people were separated under Rule 40 (removal from association in the interests of security or safety) and there was good monitoring and support of them. There was better governance of the Bunting care suite when it was used for separation before removal. In a number of cases, people had been held in temporary confinement when not recorded as actively violent or refractory, and the average time they spent in these conditions was too long.
- HE.13 Staff received ongoing safeguarding training. The Bunting care suite housed age dispute cases and detainees held there could access the central activities area under escort. Two detainees currently in the centre had been categorised as adults by immigration staff without an independent age assessment being undertaken by social services. There was no local policy for managing age dispute cases.

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<sup>1</sup> **Inspection methodology:** There are five key sources of evidence for inspection: 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, applying both qualitative and quantitative methodologies. All findings and judgements are triangulated, which increases the validity of the data gathered. Survey results show the collective response (in percentages) from detainees in the establishment being inspected compared with the collective response (in percentages) from respondents in all establishments of that type (the comparator figure). Where references to comparisons between these two sets of figures are made in the report, these relate to statistically significant differences only. Statistical significance is a way of estimating the likelihood that a difference between two samples indicates a real difference between the populations from which the samples are taken, rather than being due to chance. If a result is very unlikely to have arisen by chance, we say it is 'statistically significant'. The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance. (Adapted from Towel et al (eds), *Dictionary of Forensic Psychology*.)

- HE.14** The number of incidents of self-harm was similar to that at the time of the previous inspection. Safer detention meetings provided generally good strategic oversight but attendance was uneven. Management data were considered from month to month but not monitored over longer periods to identify trends.
- HE.15** Detainees subject to assessment, care in detention and teamwork (ACDT) procedures were well cared for, and the overall quality of ACDT documentation was reasonably good. There was evidence of good interaction between staff and vulnerable detainees. Those expressing current thoughts of self-harm were sometimes placed inappropriately on the less intensive monitoring regime of the raised awareness plans rather than an ACDT. There was appropriate use of telephone interpreting and continuity of care for those arriving on open ACDT documents. Immigration issues were the main triggers identified in most of the ACDT documents in our sample but UK Border Agency (UKBA) staff did not routinely attend reviews, although written information was occasionally submitted.
- HE.16** Detainees generally described feeling safe and there was little evidence of bullying. There were few recorded bullying-related incidents and appropriate action was taken to manage these situations. Investigations were good and well documented.
- HE.17** Most detainees said that they had a lawyer and could easily contact them. However, lawyers made fewer visits than in the past and detention duty advice surgeries were oversubscribed, with regular waits of 10 days. Legal visits facilities were good. UKBA induction interviews were well conducted but confidentiality was breached by a door being left open during some interviews. There were no country of origin reports in the library and few up-to-date legal textbooks. However, internet access to legal materials and country of origin information was good, although there were excessive restrictions on printing.
- HE.18** The longest held detainee was released during the inspection after almost three years in detention. There was no recording of the total accumulated length of detention in different facilities. Family members had been placed in different immigration removal centres, even though there was space in the family unit at Yarl's Wood, causing considerable distress to those concerned. There was file evidence that some were kept separated to motivate compliance with UKBA.
- HE.19** Detainees complained that it was difficult to see immigration staff. Most monthly review letters were served on time but we found some cases where they had not been served at all. There was no centralised log to monitor monthly reviews. A large number of Rule 35 reports (requiring notification to UKBA if a detainee's health is likely to be injuriously affected by detention, including if they may have been the victim of torture) were completed but health services staff appeared to have little understanding of their purpose, and many reports did not include sufficient information to provide the intended safeguards.
- HE.20** There were seven pregnant women at the centre at the time of the inspection. When we reviewed the UKBA files for five of them, only one of the monthly review letters mentioned pregnancy, and even that suggested the pregnancy was disputed, even though it had been confirmed for some time. In one case, a pregnant woman had been transferred over the course of four days from Northern Ireland to Scotland to Manchester, where she had collapsed and been treated, and finally on to Yarl's Wood. Local management of pregnant women was good. The weekly pregnant

women's meeting had good input from on site UKBA and centre staff, and considered welfare issues and support.

## Respect

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- HE.21** Residential areas were clean and rooms were comfortable. Staff–detainee relationships were good. Diverse groups of detainees lived together in harmony and there were good attempts to increase communication with non-English speakers. Some aspects of diversity work, particularly with those with disabilities and older detainees, were underdeveloped. Faith provision was good. Complaint responses and management were excellent. Food was reasonable and the cultural kitchens were valued by detainees. The health care unit provided a reasonably good service but there was little proactive engagement with detainees. Outcomes for detainees against this healthy establishment test were good.
- HE.22** Residential units were clean and good use was made of the attractive courtyards. Detainees' rooms were equipped with lockable cupboards and were comfortable, although mattresses were not suitable for some people, including pregnant women. Female detainees living on Crane unit were escorted when in the main centre, with no clear rationale. Noticeboard information was useful but mostly in English only. Consultation meetings were held regularly but the number attending both the general and the potentially useful nationality groups was consistently low.
- HE.23** In our survey, 84% of detainees said that they were treated with respect by most staff, substantially more than the national comparator and than at the time of the previous inspection. Although most detainees had a member of staff to turn to when needed, there was no personal officer scheme. Detainees complained about staff going into rooms too quickly after knocking, causing embarrassment. For a largely female population, the proportion of male residential staff was too high. Staffing levels were low, particularly at night, and sometimes male officers were left to manage units alone.
- HE.24** There was little evidence of tension between different nationality groups at the centre. A telephone interpreting service was used regularly, and in our survey non-English speakers reported relatively positively on most areas. There was a good level of interpreter support for the large Chinese group. There was some monitoring of nationality and ethnicity but little analysis of trends over time. There was some evidence that disparities identified via monitoring were investigated. There were few racist complaints and they were investigated appropriately.
- HE.25** There was no specific provision for older people, although support was given on an individual basis. Disability liaison officers had only recently been appointed and measures to identify people with disabilities were not robust.
- HE.26** Most detainees felt that their religious beliefs were respected, and most were positive about faith provision. Detainees could see a wide range of visiting chaplains, many of them women, and had good access to attractive and well-maintained places of worship. The religious affairs manager had an open-door policy and was visible around the centre.

- HE.27** Detainees had mixed views on the quality of the food but the meals we sampled were reasonably tasty and healthy options were available, including salad and fruit. Some detainees had the opportunity to undertake paid work in the kitchen, and the cultural kitchens were a much appreciated resource. Although shop prices were at or below the recommended retail price, this was still expensive for most detainees.
- HE.28** Application of the rules was generally fair and consistent. There was no longer a reward scheme, and there seemed little need for one. Detainees signed an anti-bullying compact during induction.
- HE.29** Complaint forms were accessible on the wings in 15 languages. Few complaints were submitted and they were well managed. The quality of investigations and replies to complaints dealt with by the centre was excellent, and some were upheld. Complaints were analysed appropriately and trends monitored. UKBA accepted complaints in foreign languages but replied in English only.
- HE.30** Health services were well managed and provision was reasonably good. Detainees could normally see a doctor or nurse within a day of the request. A female doctor was usually available only once a week, although detainees who asked to see a female doctor were able to do so. However, we received many individual complaints about access and treatment. There was little proactive engagement with detainees over health concerns, and consultation meetings had only just started. Telephone interpreting was used well but there was insufficient information in different languages and detainees did not always understand what health services were available.
- HE.31** The dental waiting list was not long but detainees waited a long time to see an optician. Pharmacy services were adequate overall. There was good access to external appointments. Mental Health support was reasonable and detainees had access to a visiting psychiatrist. Provision of counselling and alternative therapies was good.

## Activities

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- HE.32** More detainees than at the time of the previous inspection said that there was enough to fill their time. There were regular, well-planned and well-attended activities. There were more paid work places but hours and pay were limited. The range of education classes was narrow. The libraries provided a useful service overall. PE provision had improved. Outcomes for detainees against this healthy establishment test were reasonably good.
- HE.33** Detainees were able to move around the centre for nine hours a day, which was insufficient. The locking of unit doors during free association times remained an unnecessary restriction on freedom of movement.
- HE.34** Substantially more detainees than at the time of the previous inspection said that they had enough to do to fill their time, although the men in the family unit were less positive about the range of activities. For most detainees, there was a wide variety of well-planned and well-attended recreational activity, as well as regular cultural, religious and learning day events.

- HE.35** The amount and range of paid work had increased but there was still insufficient for the needs of the population, many of whom were at the centre for several months or more, and the rate of pay was low. No detainees were occupied for more than 12 hours a week. Some in-house qualifications could be attained in cleaning and kitchen work. Jobs were advertised well and allocated fairly. UKBA retained a veto on appointments to work for detainees who were not considered to be complying, inappropriately mixing centre and UKBA roles.
- HE.36** Education classes were held in a suitable learning environment. Promotion of classes had recently improved and attendance had increased but there were few places and advertised class times were not always adhered to, causing some frustration. The provision was limited to basic English for speakers of other languages (ESOL), numeracy and information technology, offered every weekday, with little higher-level provision for longer-stay or more able detainees. There were good partnership arrangements with a local college to provide a sewing class and a budget and debt management class.
- HE.37** There was good access to the main library. It provided an adequate range of books and DVDs but too few were in languages other than English. The smaller library situated on the family unit was under-resourced but detainees there were able to visit the main library.
- HE.38** PE provision had improved and five activity staff held appropriate qualifications to supervise sports and gym activities. Inductions were held frequently, to ensure that detainees could access the facilities soon after their arrival. Access to the gym and sports hall was good for all detainees. A variety of classes were run and team games were held regularly in the sports hall and sometimes outside, although space was limited. All detainees were screened by health services staff for their fitness to participate in sporting activities. There was no remedial gym, and no specific sessions for older detainees.

## Preparation for release

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- HE.39** The welfare officer provided good practical help for detainees and unit staff also provided some useful support. However, there was little systematic pre-release assessment or help. Visits provision was good and there was an active visitors group. There was good access to telephones, faxes and the internet. Outcomes for detainees against this healthy establishment test were reasonably good.
- HE.40** A well-regarded welfare officer assisted detainees with practical issues; four newly appointed welfare assistants provided extra support and cover for annual leave but there was no cover for the welfare officer at weekends. The welfare service was well advertised throughout the centre but primarily in English, and some detainees were not aware of the service. Hibiscus, a community group working specifically with women, provided valuable support to detainees over the telephone but was currently unable to visit the centre to meet the evident high need because of funding difficulties.
- HE.41** The visits hall was attractive and comfortable, with an accessible outside area. Visits were easy to book and most detainees reported good treatment by visits staff. There was an active befrienders scheme. Family days were run but attendance was low.

Information about visitors was used by UKBA for enforcement purposes. No substantial food was available in the visits hall. There was a free bus service taking visitors to and from the local train and bus stations. Evening visits did not start at the advertised time. A visits questionnaire was collated quarterly but was available in English only, and numbers returned were low.

- HE.42 Mobile telephones were available to hire if detainees did not have, or could not retain, their own. There were sufficient incoming and outgoing telephones for the population but call tariffs were high. Most residents were not aware that they could have a free five-minute telephone call every seven days. Mail systems were efficient and detainees had good access to faxing and to the internet.
- HE.43 There was no systematic approach to assessing needs and helping detainees to prepare for removal or release. Instead, it was largely down to the detainee to raise issues with staff; when they did so, there was evidence of good assistance from unit and welfare staff. High-risk detainees due for removal were discussed at a daily meeting but there was no evidenced multi-agency care planning approach to their management. For detainees who were not removed under the auspices of the assisted voluntary returns packages or facilitated return scheme, there was no formal system of financial assistance for detainees being removed, although staff made applications to the detainee fund managed by UKBA on a case by case basis.

## Main concerns and recommendations

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- HE.44 Concern: Many Rule 35 reports (relating to fitness to detain and experience of torture) did not include sufficient information and many UKBA replies were poor. The process was not providing the intended safeguards for vulnerable detainees.

**Recommendation: Rule 35 reports should provide objective professional assessments – for example, commenting on the consistency between injuries and alleged methods of torture. Case owner replies should carefully address all relevant factors in reviewing ongoing detention.**

- HE.45 Concern: A number of pregnant women were detained and there was evidence of poor case owner reviews of their detention, which took no account of the pregnancy.

**Recommendation: Pregnant detainees should not normally be detained. In exceptional circumstances, continued detention should be considered in line with the UK Border Agency's (UKBA) published policy on the detention of pregnant women.**

- HE.46 Concern: No work was available for more than 12 hours a week and education was at too low a level to provide occupation for more able detainees.

**Recommendation: There should be more paid work and more higher-level education to meet the needs of longer-stay and more able detainees.**

- HE.47 Concern: There was no systematic approach to assessing needs and helping detainees to prepare for removal or release; it was largely down to the detainee to raise issues with staff.

Recommendation: There should be a proactive, coordinated and strategically managed approach to removal and release, beginning with a needs assessment on the day that the detainee arrives.



# Section 1: Arrival in detention

## Expected outcomes:

Escort staff ensure the well being and respectful treatment of detainees under escort. On arrival, detainees are treated with respect and care and are able to receive information about the centre in a language and format that they understand.

## Escort vehicles and transfers

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- 1.1 Detainees were generally positive about their treatment by escort staff, although non-English speakers were less so. Many detainees arrived at the centre in the early hours of the morning and some arrived from police cells without any records of their time spent in police custody. The main escort contractor routinely handcuffed detainees for outside appointments.
- 1.2 The main escort contractor was Reliance, following a change of contract earlier in 2011. The vans used to transport detainees were comfortable but there was sometimes insufficient space to accommodate detainees' luggage. Although detainees generally reported that escort staff treated them well, in our survey non-English speakers were considerably less positive about their experience of escort staff. In our groups, detainees reported mixed experiences of being offered food, drinks or comfort breaks during their journeys, even though the vans carried cold food and water.
- 1.3 Fewer detainees than at comparator establishments reported journeys lasting longer than four hours, although we came across some examples of long journeys to the centre (see also section on immigration casework). Many detainees arrived at the centre in the evening or early hours of the morning. Of 66 records we sampled for one week in June, 33 detainees had arrived between midnight and 6am, and 12 between 10pm and midnight. A number of removals had also been cancelled with little notice, often because of a lack of transport.
- 1.4 According to the centre's records, 30% of detainees arrived in reception from police custody. In the records we sampled, two-thirds of arrivals from police cells occurred between midnight and 4.15am. Detainees arrived without any records of their time in police custody, which hampered the risk assessments carried out by reception staff.
- 1.5 All the reception files that we inspected contained the necessary forms of authorisation. Reception staff said that they refused to accept detainees who were not accompanied by an IS91, the authority to detain. The IS91s we inspected contained helpful information about the risks of harm to self or others. Movement orders for detainees, which were available in reception for arrivals and departures, also usually contained this information. Ex-foreign national prisoners arrived with their prison files, and reception staff used these to gain information for the detainee's risk assessment.
- 1.6 Serco handcuffed detainees for outside escorts only when a risk assessment indicated the need. However, most escorts were undertaken by Reliance staff, who, in line with UK Border Agency (UKBA) guidance, routinely handcuffed detainees, some of whom expressed surprise and distress at this practice. This was excessive and unnecessary.

## Recommendations

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- 1.7 Detainees arriving from police stations should be accompanied by police records and relevant risk information.
- 1.8 Detainees should not be subjected to exhausting overnight journeys.
- 1.9 Handcuffs should be used only on the basis of individual risk assessment.

## Reception and first night

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- 1.10 The reception area was bright, clean, welcoming and well organised. Reception staff were polite and respectful towards detainees. Some detainees experienced long waits when they arrived. Telephone interpreting was not used sufficiently by reception staff, and non-English speakers reported relatively worse experiences in reception. First night accommodation was clean and properly equipped. First night observations were in place and detainees reported feeling safe on their first night at the centre.
- 1.11 Reception was open 24 hours a day, seven days a week. There was always at least one female member of staff on duty to carry out rub-down searches of female detainees (see section on security). The reception area was bright, clean, comfortable and well supervised, and waiting rooms were well furnished. There were separate waiting rooms for unaccompanied women and family groups. A female detainee had been able to go to reception in the early hours of the morning to be reunited with her husband, who had been transferred in from another centre.
- 1.12 In the three months before the inspection, an average of 306 detainees had arrived each month, with 387 detainees discharged. Reception staff were usually given an approximate time of arrival by escorts. There were no reports of excessive waits in escort vehicles, and detainees were quickly able to access one of the waiting rooms to wait to be searched and their documentation to be checked. Of the records we reviewed, the time elapsed between arrival at the centre and getting to first night accommodation varied from 33 minutes to four or five hours.
- 1.13 In the main reception area, detainees could have a hot or cold meal, fruit and a drink while they sat in a waiting room and watched a DVD about the centre. This was available in a variety of languages and was supplemented by a written introductory guide to the centre, available in 10 languages. Toilets and showers were available in the reception area.
- 1.14 Reception staff wore identification badges and were professional in their dealings with detainees. In our survey, more detainees than at comparator establishments said that they had been treated well by reception staff. However, fewer non-English speakers than their English-speaking peers said that they had been treated well or very well in reception, and fewer said that they had received information about available support on the day of arrival. Telephone interpretation was used in reception but the majority of such uses were by health services staff carrying out screening interviews, rather than by reception officers. All detainees were screened by health services staff in private on arrival.
- 1.15 Reception staff interviewed all newly arrived detainees and examined the IS91 (and the prison file, for ex-foreign national prisoners) to identify risk factors. These were shared with induction unit staff and helped to inform decisions about the level of observations that a new arrival

should be subject to on their first night. Staff searched detainees' property in front of the reception desks. Clean clothing, including nightwear, was available for detainees who needed it.

- 1.16 Detainees were able to take £20 in cash into the centre and their remaining money was held in an electronic account which was attached to their electronic file. Passports and other identity documents were forwarded to UKBA by reception staff. These documents were recorded on the detainee's list of valuable property. Detainees were not given a written receipt for the documents or given a photocopy, although photocopies could be requested if needed for legal purposes.
- 1.17 Most female detainees went to Bunting unit, the dedicated first night and induction unit. Couples and family groups went straight to Crane family unit for their induction. All new arrivals were identified to night staff and were monitored regularly through the first night, in accordance with the risk assessment carried out in reception. In our survey, more respondents (54%) than at comparator establishments (46%) and than at the time of the previous inspection (43%) said that they had felt safe on their first night. Rooms were clean and prepared for new arrivals with bed linen, toiletries and sanitary items.

## Recommendation

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- 1.18 Telephone interpreting should be used for reception and induction interviews whenever there is doubt about a detainee's understanding of English.

## Housekeeping point

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- 1.19 Detainees should be given a receipt or photocopy of their passport or other identity documents when handing them in to reception.

## Induction

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1.20 Induction had recently been revamped, to address detainee feedback that it was not meeting their needs. It appeared to be improved but it was too early to judge effectiveness.

- 1.21 In our groups, many detainees were negative about their induction experiences. In response to similar feedback, centre staff had revamped the induction process a few weeks before the inspection, breaking it down into three separate blocks of information. Inductees were asked to give their feedback at the end of the process, to inform the future direction of induction. With the new arrangements, induction was delivered in groups or one to one, depending on language needs. The induction PowerPoint presentations were available in audio form in three languages, and the induction booklets that accompanied the presentation had been translated into 10 languages. In the session we observed, detainees were given the written material in a language they understood while an officer talked through the presentation in English. The tone of the presentation was reassuring, with an emphasis on trying to provide the assistance that detainees needed.
- 1.22 We were told that telephone interpreting was used during induction for detainees who needed it, but there were difficulties associated with this. The room used for induction on Bunting unit had neither a working telephone port nor a dual handset telephone. This often led to the unit office being used, which then had to be closed for the duration of the induction. The units also

had 'greeters', who were detainees who showed new arrivals around the unit and helped them to understand how to order food, ask for appointments with the health care unit or immigration, and access other services available at the centre. In our groups, detainees spoke positively about the assistance provided by the greeters.

## Housekeeping point

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- 1.23 Telephone interpreting facilities should be accessible in rooms used for induction.

# Section 2: Environment and relationships

## Residential units

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### Expected outcomes:

Detainees are held in decent conditions in an environment that is safe and well maintained.  
Family accommodation is child friendly.

2.1 Residential units were clean, and detainees' rooms were comfortable and equipped with lockable cupboards. Information displayed throughout the units was useful but mostly in English only. Detainees found night-time removals noisy and frightening. Consultation meetings were held regularly but attendance was low. Mattresses were not suitable for some detainees.

## Accommodation and facilities

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- 2.2 The main residential accommodation was divided between four units. Bunting unit housed single women in 42 beds, mostly in single rooms, with three double rooms. Avocet and Dove units housed single women, with a capacity of 130 and 145, respectively. All rooms were twin bedded, apart from two adapted rooms for detainees with disabilities (one on Avocet and one on Dove unit) and one single room on Avocet unit. All rooms had suitable en-suite toilet and shower facilities. Crane was the family unit; it housed families of adults (male and female) over the age of 18, in 43 double rooms with interconnecting doors, and one adapted room for those with disabilities. Doors to the units were kept locked, although detainees (except men on Crane unit) could ask staff to allow them off the unit into the shared central facilities area during the core day.
- 2.3 Avocet, Dove and Bunting units shared a central facilities area housing a shop, arts and crafts room, cultural kitchen, large faith zone, welfare central hub, computer suite, gym, library, hairdressing and nail salon, and a range of well-appointed association rooms. Crane unit was completely self-contained, except for the gym and education provision, in order to keep males separate; however, facilities on the unit were good, and as varied as those in the central area. Each unit had its own attractive courtyard and there was a central courtyard where detainees on the three main units could associate. When detainees on Crane unit needed to leave the unit – for example, when attending the visits hall – they were escorted by staff. The rationale for escorting male detainees was clear but it was not clear why the same practice was applied to female detainees.
- 2.4 The accommodation on each unit was light, well decorated and in a good state of repair. Detainees had their own room keys, and could go to the unit office, use the telephone or get a hot or cold drink at any time of the day or night. Rooms were adequately furnished and included a television and individual bedside lights. Cupboards were in good condition and lockable. For some detainees, mattresses were uncomfortably thin and were unsuitable for some, including pregnant women. Detainees did not seem to know that mattresses could be replaced, although staff said that this was possible.
- 2.5 Some detainees complained that rooms were too cold and had blocked the air conditioning vents. Although each room had a radiator, heating was controlled centrally. Detainees could

check their account, order meals and access information on staff via touch-screen kiosks located around the centre.

- 2.6 In our survey, 65% of detainees said that it was normally quiet enough in their room to sleep at night, which was better than the comparator. However, in our groups and around the centre, a consistent theme was the noise and distress caused by night-time arrivals and removals (see recommendation 1.7).
- 2.7 Information displayed throughout the units was colourful, bright and engaging but most was in English only. Colour-coded signs had been introduced, and some information was displayed in pictorial form.
- 2.8 A monthly general consultation meeting was held with detainees. However, attendance had been consistently low. Staff visited detainees to ask why they had not attended the unit-based meetings, and recorded the response, but it was not clear what, if anything, was being done beyond this to improve attendance.

## Recommendations

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- 2.9 All detainees should have mattresses that provide adequate support.
- 2.10 Temperature in bedrooms should be kept at a comfortable level at all times.
- 2.11 Information around the centre should be available in a range of appropriate languages.
- 2.12 A review should be undertaken to ascertain how better to engage detainees and ensure good attendance at consultation meetings.

## Housekeeping point

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- 2.13 Female detainees on Crane unit should not require an escort around the centre.

## Clothing and possessions

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- 2.14 Detainees could wear their own clothes, and those without enough could be given clothing by reception staff on arrival and removal if required (see also section on reception and first night). Sportswear could also be provided. Detainees could also have property brought in to them, six items of which could be handed over during visits. However, the total weight of property that they could hold (and in most cases take back) with them was 20 kg, although additional property was stored by the centre. Detainees could apply to leave with more than the specified 20 kg.

## Hygiene

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- 2.15 In our survey, 94% of detainees said that they could shower every day. Rooms had en-suite facilities and each residential floor also had a small bathroom and toilets, some of which were of the squat design. Detainees were given a pack of basic toiletries on arrival, and replacement supplies of these and sanitary products were available from unit offices.

- 2.16 Each unit had its own well-equipped laundry room, open until 10pm, with washers, driers and ironing boards. Detainees could wash their own clothes and their own bedding.

## Staff–detainee relationships

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### Expected outcomes:

Detainees are treated respectfully by all staff, with proper regard for the uncertainty of their situation and their cultural and ethnic backgrounds. Positive relationships act as the basis for dynamic security and detainees are encouraged to take responsibility for their own actions and decisions.

2.17 Most detainees said that they were treated with respect by staff and reported positive relationships. They found staff helpful but also said that they often had little time to interact with them. There was no personal officer scheme. There were too few female staff for a largely female establishment, and detainees complained that staff often entered rooms too quickly after knocking.

2.18 In our survey, 84% of detainees said that they were treated with respect by most staff, which was higher than the 66% comparator and than at the time of the previous inspection (64%). Our in-depth staff–detainee relationship interviews were positive about the helpfulness and decency of most staff, although some detainees felt that staff had little time to engage meaningfully with them. We noted that staff on Avocet and Dove units were particularly busy and had little time to spend with individual detainees. However, in all units we saw good staff interactions with detainees when they were approached. The following comment was typical of those made about staff in our in-depth interviews: *'I can't complain about the staff. Whenever I want them they are there for me. They answer questions as much as they can.'*

2.19 The number of staff on duty was low, particularly at night. As at the previous inspection, night staff (often men) told us that they sometimes managed female units alone. Some detainees complained about staff going into their rooms too quickly after knocking, sometimes causing embarrassment when this involved a member of the opposite sex. Comments such as the following from our in-depth interviews were typical: *'If they knock they are coming in, especially in the morning, and the roll count is too early',* and *'Officers ... they do knock but they still have the key so they just come in. It's not nice, they will knock and talk to us through the bathroom door.'*

2.20 The proportion of male-to-female residential staff was too high for a predominantly female establishment, at around 50/50. There was no personal officer scheme, although in our survey most detainees (68% against a comparator of 54%) said that they had a member of staff to turn to when needed. While a personal officer scheme would have been difficult to establish, more consistent support from a named member of staff would have benefited detainees, particularly those detained for more than a few weeks.

2.21 Use of history sheets varied, with some staff saying that they were unaware that they existed and others making uninformative entries. Some detainees said that staff they did not know addressed them by room number rather than name.

## Recommendations

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2.22 There should be a considerably higher proportion of female staff.

2.23 Detainees should have a named officer to provide consistent support.

### Housekeeping points

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2.24 Staff should not enter rooms until detainees have had a chance to answer them after knocking.

2.25 All staff should be aware of history sheets and use them to help to build a picture of detainees.

# Section 3: Casework

## Legal rights

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### Expected outcomes:

Detainees are able to obtain expert legal advice and representation from within the centre. They can receive visits and communications from their representatives without difficulty to progress their cases efficiently.

- 3.1 Most detainees had a lawyer but the detention duty advice scheme was oversubscribed. There were few notices in the centre providing up-to-date relevant information on legal advice. Detainees could easily contact their lawyers but fewer detainees than at other centres had had a visit from their lawyer. The library lacked sufficient relevant material. Good internet access to legal resources was hampered by excessive printing restrictions. Legal visits facilities were good. Bail for Immigration Detainees provided valuable workshops.
- 3.2 In our survey, more detainees (77%) than at comparator establishments (65%) said that they had a lawyer. However, the detention duty advice surgeries were oversubscribed. The Immigration Advisory Service (IAS) and two firms of solicitors were contracted to run the duty advice scheme by the Legal Services Commission. The surgeries were held twice a week and 10 slots were available on each day. During the inspection, the waiting time for an appointment was over 10 days, which was too long, given the timescales and deadlines faced by detainees. For example, following the refusal of an asylum application, detainees had five working days to submit an appeal. Those going through the detained fast-track process were allocated a lawyer automatically. Following the inspection, the IAS went into administration, and it was not clear how this closure would affect the scheme.
- 3.3 There were few notices around the centre providing up-to-date, relevant information about legal advice. There were some notices promoting the detention duty advice scheme but these were in English only. Other notices promoted the services of the Refugee Legal Centre, which had closed a year before the inspection. The library held a copy of the Immigration Law Practitioners Association members directory. This was unlikely to be helpful, as it contained the contact details of lawyers all over England, who may have been unwilling to attend the centre, and the details of barristers who could not take instructions directly from detainees.
- 3.4 Detainees were able to contact their lawyers by telephone, fax and email without impediment. In our survey, more detainees (83%) than at comparator establishments (68%) said that they could contact a lawyer easily. In our safety interviews, a detainee told us that: *'You can phone your lawyer at any time. And any time you want to fax it is free.'* In our survey, fewer detainees (43%) than at comparator establishments (55%) and than at the time of the previous inspection (57%) said that they had actually received a visit from their lawyer.
- 3.5 The library contained insufficient information for detainees to advance their immigration cases. It did not stock hard copies of country of origin reports or up-to-date legal textbooks, although it held copies of some immigration acts and the Bail for Immigration Detainees' 'How to get out of Detention' booklet. Leaflets in a variety of languages gave basic information on the asylum process and the work of the Red Cross.

- 3.6 Detainees had good internet access. There were 14 computers in the information technology (IT) room for single female detainees. Those in the family unit shared three computers. The home page of the residents' intranet had links to helpful websites, including Bail for Immigration Detainees, Freedom from Torture, Asylum Aid and Refugee Action. Detainees could use online email accounts and, unlike at many other centres, open Word and Adobe files. Foreign newspapers, country of origin reports, tribunal forms and case law could be accessed via the internet. However, there were excessive restrictions on printing: detainees could print only five pages per 30-minute session. There was no flexibility built into this rule and no option for detainees to pay for more pages. The Yarl's Wood detained fast-track appeal form was seven pages long, which meant that detainees were not able to complete the form and print it off in a single session.
- 3.7 Legal visits facilities were good. Two of the three visits rooms had dual handset telephones for easy use of telephone interpreting. Lawyers could bring laptops into the centre. The rooms were spacious and soundproofed. Staff told us that they let lawyers have reasonable use of the fax machine and copier based in the legal visits office.
- 3.8 There was no information in the centre promoting the Legal Ombudsman for detainees who wished to complain about their solicitors. Leaflets and complaint forms in a range of languages in relation to the Office of the Immigration Services Commissioner were displayed in the library.
- 3.9 Representatives from Bail for Immigration Detainees attended the centre regularly to run workshops on making bail applications. During the inspection, they ran a workshop specifically for pregnant detainees and those with children.

## Recommendations

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- 3.10 In liaison with the Legal Services Commission, the centre should ensure that detainees do not have to wait more than a week to access the detention advice surgery.
- 3.11 A list of lawyers who are willing and able to represent detainees in the centre should be freely available. This list should be regularly checked and updated. Notices in the centre relating to legal advice should be updated regularly.
- 3.12 The library should hold up-to-date country of origin information reports and legal textbooks.
- 3.13 Detainees should be able to print documents of reasonable length, and the rules about printing should allow flexibility.

## Housekeeping point

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- 3.14 Legal Ombudsman notices, leaflets and complaint forms should be available.

# Immigration casework

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## Expected outcomes:

Decisions to detain are based on individual reasons that are clearly communicated and effectively reviewed. Detention is for the minimum period necessary and detainees are kept informed throughout about the progress of their cases.

- 3.15 Detainees' accumulated period of detention was not recorded. All detainees met a UK Border Agency (UKBA) contact management officer within 24 hours of arrival but found it difficult to see immigration staff thereafter. Induction interviews were reasonably good but confidentiality and decency were compromised by a door being left open. Some family members were detained in separate centres, causing unnecessary distress. Most detention reviews for the seven pregnant women in the centre did not consider their pregnancy. Local management of pregnant women was good. Most monthly reviews were served on time but some were late or missing completely. UKBA had no adequate system for monitoring monthly reviews. The Rule 35 process was not sufficiently robust.
- 3.16 On the first day of the inspection, 326 detainees were held in the centre. Twenty had been held there for more than six months and 10 for more than 10 months. The longest-held detainee was released during the inspection after spending almost three years at the centre. The UK Border Agency (UKBA) did not record the accumulated length of detention across the detention estate. On the first day of the inspection, 29% of the population were in the detained fast-track (DFT) process.
- 3.17 The onsite UKBA contact management team comprised the UKBA manager, two assistant managers at executive officer grade and six administrative officers. The team was supported by two immigration officers from the criminal casework directorate, who attended once a week. The contact management team inducted all detainees held at the centre within 48 hours of arrival. The team was present seven days a week and liaised between case owners and non-DFT detainees.
- 3.18 Detainees in our groups and in safety interviews complained that it was difficult to see immigration staff, and fewer respondents to our survey (27%) than at comparator establishments (44%) said that it was easy to see the centre's immigration staff. Detainees could complete an application form to request information from UKBA. Forms were readily available on the wings. Contact management officers replied in writing, forwarded the application to the case owner or, if necessary, spoke to the detainee in person. Monthly reviews (IS151Fs) were not served in person, even when the detainee did not speak English, but removal directions were.
- 3.19 Induction interviews conducted by the contact management teams were reasonably good. We sat in on three interviews. Telephone interpreters were used where necessary and in one case where an appropriate interpreter could not be located, the officer duly postponed the interview. The interviews were generally conducted well but confidentiality was breached by the door being left open. The contact management officer checked that detainees had seen health services staff, had a lawyer, understood why they had been detained and knew how to make a bail application. Detainees who did not have a lawyer were referred to the librarian, who made appointments for the detention duty advice scheme. Bail application forms were not given to detainees. The seats in the interview room were fastened to the floor, some by chains. All detainees were asked to sign a disclaimer allowing UKBA access to their medical records, although the reasons for this were not clear.

- 3.20 Some family members were held in separate immigration removal centres (IRCs), even though there was space in the family unit in Yarls Wood, causing considerable distress to the individuals concerned. We examined the immigration file of one couple that had been separated. The wife was being held in Yarls Wood and the husband in Harmondsworth IRC. The wife had requested at her induction interview that she be reunited with her husband. The UKBA contact management officer had duly made a request to UKBA's family detention unit (FDU); however, this had been refused, and it was clearly indicated that the reason for this had been to motivate compliance with UKBA.
- 3.21 Seven pregnant women were being held at the centre at the time of the inspection, something that should be exceptional. We reviewed the files for five of them. Only one of the monthly review letters mentioned pregnancy, and even that one suggested that the pregnancy was disputed, although it had been confirmed for some time (see main recommendation HE45). Local management of pregnant women was good. The weekly pregnant women's meeting had good input from onsite UKBA and centre staff, and welfare and support issues were considered appropriately. One pregnant detainee had originally been detained in Northern Ireland and had undergone a four-day journey to Yarls Wood: from Belfast, she had been transferred to Dungavel IRC in Scotland and then to Pennine House at Manchester airport, where she had collapsed. She had been taken to hospital and treated before completing the rest of her journey to Yarls Wood, where she went through the DFT process.
- 3.22 Most IS151Fs were served on time but some were missing or served late. The contact management team manually went through each of the 300 or so paper files once a month, to note overdue reviews. This meant that a review could have been overdue by 29 days before being noted. There was no electronic spreadsheet or database to monitor monthly reviews.
- 3.23 Processes concerning Rule 35 (requiring notification to UKBA if a detainee's health is likely to be injuriously affected by detention, including if they may have been the victim of torture) did not result in their intended safeguarding outcome. Health services staff submitted approximately 40 Rule 35 reports a month but appeared to have little understanding of the purpose of this Rule. In one case, the report merely contained a single line that read: '*The above named detainee states that she is subject including a torture* [sic]'. In another, the report recorded in detail the detainee's account of ill treatment at the hands of her in-laws but did not record any objective evidence of distress or how the mistreatment had subsequently affected the detainee. Another report provided diagrams and a description of the scarring on a victim of domestic violence but did not comment on whether the scarring and the account were consistent. In another case, a report had been submitted for no apparent reason, as the detainee had not been tortured and her health had not been affected by detention.
- 3.24 The contact management team tracked the progress of replies to Rule 35 reports and recorded relevant data on a spreadsheet, which was forwarded regularly to UKBA's detention services in Croydon for monitoring purposes. We reviewed two cases where the outstanding reply had been chased on five occasions by onsite contact management officers. None of the 10 Rule 35 reports we examined had resulted in detainees being released from detention. Many of the replies were dismissive and lacked logic. For example, in reply to a case of domestic violence, the case owner wrote: '*In the meantime, to forestall any unfairness against your asylum decision, it is best to reserve any comments against the issues raised in the Rule 35 report ... Any claimed of health/suicidal intentions/concerns of being a victim of torture are being managed/can be managed by Yarls Wood* [sic]'. We found one example of a Rule 35 report being treated as a claim for asylum (see main recommendation HE44).

## Recommendations

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- 3.25 The UK Border Agency (UKBA) should keep easily accessible records of detainees' accumulated length of detention across the estate.
- 3.26 UKBA staff should be visible and accessible to detainees.
- 3.27 Detained family members should be held together, unless clear documented risk factors suggest otherwise.
- 3.28 Monthly reviews should be served on time. UKBA managers should be able easily to monitor outstanding monthly reviews.

## Housekeeping points

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- 3.29 The door to interview rooms should be closed when UKBA staff interview detainees.
- 3.30 Detainees should be given bail application (B1) forms at their induction interviews.
- 3.31 Detainees should not be interviewed on chairs fastened to the floor, unless an individualised risk assessment has deemed this to be appropriate.



## Section 4: Duty of care

### Expected outcomes:

The centre exercises a duty of care to protect detainees from risk of harm. It provides safe accommodation and a safe physical environment.

## Bullying and suicide and self-harm

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4.1 There was little evidence of bullying or violence and detainees overall reported feeling safe. Violence reduction investigations were good and well documented. The strategic approach to suicide and self-harm prevention was generally good. Some detainees at risk of self harm were placed on raised awareness plans rather than assessment, care in detention and teamwork (ACDT) documents. The quality of ACDT documentation was reasonably good and women subject to ACDTs were well cared for. The food refusal strategy was robust. High-risk strategy meetings were poor. Detainees had access to the Samaritans but the service was not widely advertised. There was no formal peer support scheme.

### Bullying

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- 4.2 There was little evidence of bullying or violence. In the six months before the inspection, there had been six assaults: three on staff and three on detainees. Detainees generally reported feeling safe. In our survey, fewer detainees than at the time of the previous inspection and than at comparator establishments said that they had been victimised by another detainee (12% versus 25% and 31%, respectively). Similarly, fewer said that they had been victimised by a member of staff (13% versus 23% and 25%, respectively).
- 4.3 Detainees believed that staff would challenge inappropriate behaviour or bullying. In our safety interviews, comments such as the following were typical: *'They don't tolerate any misbehaviour'*, and *'If they see inappropriate behaviour the staff will talk to the detainees'*. Most detainees we spoke to in our safety interviews had not seen any bullying but many felt that they would be able to tell a member of staff if they were being bullied: *'I think I could tell an officer. They are very approachable. I can tell them anything'*.
- 4.4 The centre's strategy to tackling violence and bullying was good. The violence reduction policy was up to date. Violence reduction and bullying were managed by the safer detention team, which comprised the deputy director, the head of residence and regimes, and two unit managers. Safer detention meetings were held monthly. Meetings were well minuted and actions progressed but UKBA had not attended any of the last six meetings, and the reception manager and head of security rarely attended. A monthly 'violence reduction investigations/anti-bullying' report containing relevant data was discussed at the meetings. Eight incidents had been recorded for the first six months of 2011, a similar figure to that in the same period in 2010. As the numbers were low, trends could not be usefully identified.
- 4.5 Actions to tackle bullying and violence were good. The violence reduction investigations we reviewed had been well investigated and documented. Witnesses, bullies and victims had been interviewed in detail and notes kept of the interview. Most cases had involved low-level arguments, queue jumping and name calling. In many cases, sitting down and formally challenging the bully had been enough to resolve the issue. One interview record noted: *'To begin with she denied all knowledge of being aggressive towards [the victim] but by the end of*

*the meeting she apologised for her behaviour and blamed it on being depressed and ill. She asked if she could apologise to [the victim] and I have told her I will try and set up a meeting'.* All managers in the centre had been trained in mediation and this was offered occasionally. When mediation did not take place, bullies were placed on a behaviour log, which involved the setting of targets, and monitoring and reviewing behaviour. Victims of bullying could be supported through raised awareness plans or 'caring for residents who require additional support' plans.

- 4.6 A bullying survey had been conducted in late 2010, in 14 languages. A total of 300 forms had been distributed but only 20 detainees had responded.

## Recommendation

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- 4.7 Safer detention meetings should be attended by representatives from all relevant departments in the centre, including UKBA, reception and security.

## Housekeeping point

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- 4.8 Managers should ensure that future bullying surveys have a reasonable level of response.

## Suicide and self-harm

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- 4.9 Overall, the care of those at risk of self-harm or suicide was good. There had been 25 incidents of self-harm in the first six months of 2011, which was similar to the number at the time of the previous inspection. There were seven open assessment, care in detention and teamwork (ACDT) documents during the inspection.
- 4.10 The strategic approach to self-harm and suicide prevention, managed by the safer detention team (see section on bullying), was generally good, and the policy was well written and practical. A detailed ACDT report was discussed at the monthly safer detention meetings. The report covered ACDT documents, raised awareness plans and constant watches. Each was analysed by location, religion and nationality. The centre's 'self-harm data capture' report was comprehensive and detailed. Comparisons with the previous month's data were made at the safer detention meeting but there was no longer-term, analysis. This may have resulted in long-term trends or seasonal variations being missed.
- 4.11 Detainees expressing thoughts of self-harm or suicide were cared for through ACDTs; the less intensive monitoring regime of raised awareness plans was intended for those requiring support but not expressing thoughts of self-harm or suicide. In the first six months of 2011, 70 ACDT documents had been opened for 63 individuals. In the same period, 113 raised awareness plans had been opened. However, these figures may have been inaccurate because ACDTs had not been opened for all detainees at risk of self-harm or suicide. Of 11 raised awareness plans that we sampled, four had been opened because the detainee had expressed existing thoughts of self-harm or suicide. In 2011, there had been 54 constant watches.
- 4.12 The quality of ACDT documentation was reasonably good and those subject to ACDTs told us that they were well cared for. Immediate action plans identified relevant actions but not all actions were completed. Assessment interviews were good and telephone interpreters used when necessary. However, care maps were poor. In one case, a detainee feared being returned to her country of origin and killed in order to protect her family's honour. The care

map very inappropriately suggested that the detainee obtain a statement from her family, confirming their intention to kill her, and submit it as evidence in support of her asylum claim. Attendance at case reviews was variable. The chaplain and counsellor attended many reviews but UKBA rarely attended, despite immigration factors being a trigger in all the cases we reviewed. On occasion, UKBA supplied written information to case reviews. The continuity of care for those transferred to the centre from prison was good. Case reviews for those arriving on open assessment, care in custody and teamwork (ACCT) documents took place within 24 hours. Observation entries were detailed and evidenced meaningful and caring interactions with detainees.

- 4.13 The ACCT post-closure review system was confused. Some detainees on ACCTs had not had a post-closure interview. In other cases, monitoring and reviews had continued after the ACCT had been closed. Post-closure reviews were not recorded on clearly identifiable documentation. A total of 146 members of staff had undertaken ACCT refresher training. The training for 33 staff was outstanding. Fifteen members of staff acted as ACCT assessors.
- 4.14 A food refusal policy had been updated in May 2011 and was robust. Detainees' meal consumption was monitored. Those who missed lunch or the evening meal were spoken to and the reasons for missing the meal recorded. They were included in the morning briefings the following morning. A food refusal spreadsheet was updated daily with the detainee's nationality, meals missed, number of consecutive meals missed, whether the detainee had purchased food from the shop and the reasons for missing a meal. If a detainee missed a total of nine consecutive meals they were referred to the health care unit and their weight and hydration levels were checked. Those showing signs of deterioration were placed on an ACCT document.
- 4.15 Detainees had access to the Samaritans but the service was not widely advertised. A button on the payphones put detainees directly through to a range of freephone numbers, including the Samaritans. Detainees in crisis were not guaranteed to be able to make a call confidentially, as there were other payphones in the telephone rooms which were used regularly (see section on telephones). There was no formal peer support scheme. All staff carried anti-ligature knives and most were first-aid trained.

## Recommendations

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- 4.16 Safer custody data should be monitored over 12-month periods, to determine long-term trends, and compared with the same period in previous years, to establish seasonal trends.
- 4.17 Assessment, care in detention and teamwork (ACCT) documents should be opened when detainees express current thoughts of suicide or self-harm.
- 4.18 UKBA should attend, or supply written information to, ACCT case reviews where immigration is a trigger.
- 4.19 Post-closure care should be consistent and managed efficiently by staff.
- 4.20 Detainees should be able to make calls to the Samaritans in private and the service should be well advertised.

# Childcare and child protection

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## Expected outcomes:

Children are detained only in exceptional circumstances and then only for a few days. Children are well cared for, properly protected in a safe environment and receive suitable education. All managers and staff safeguard and promote the welfare of children, as do any services provided by other bodies.

- 4.21 Children were no longer detained at the centre. Staff received ongoing safeguarding training. There was no age dispute policy and some age dispute cases were not assessed by immigration staff alone without input from the local authority.
- 4.22 After the government announcement in 2010 setting out changes to child detention, the centre had ceased to detain children under the age of 18.
- 4.23 All staff received basic safeguarding training as part of their initial training course, and ongoing refresher training. As a result of the centre's previous role, all but one of the senior management team had also attended the local safeguarding children board's safeguarding and inter-agency working training. The contract director took the lead for safeguarding, supported by the deputy director and the deputy head of diversity and regimes. There was a safeguarding policy, setting out roles, responsibilities and reporting pathways both internally and externally to the local authority child protection and emergency duty teams. There was a code of practice setting out procedures to follow in the event of staff needing to raise concerns about the conduct of colleagues in relation to the treatment of children.
- 4.24 There was no local age dispute policy. It was normal practice for all age dispute cases to be treated as minors until proven otherwise, and housed separately in the Bunting unit care suite with a member of staff. From here, they could go to the main part of the centre to take part in activities, provided that they were accompanied at all times by a member of staff. There had been six such cases at the centre since the beginning of April 2011, of which only four had been age assessed by the local social services department. The remaining two had been assessed as being significantly over 18 by a chief immigration officer only, and therefore integrated back into the main population at the centre.
- 4.25 The centre held multidisciplinary welfare meetings weekly to discuss pregnant women, as part of the safeguarding responsibility towards the unborn child.

## Recommendations

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- 4.26 A local age dispute policy should be introduced.
- 4.27 All age dispute cases should be assessed by social services.

# Diversity

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## Expected outcomes:

There is understanding of the diverse backgrounds of detainees and different cultural norms. Detainees are not discriminated against on the basis of their race, nationality, gender, religion, disability or sexual orientation, and there is positive promotion and understanding of diversity.

- 4.28 The centre generally managed diversity issues well, although insufficient work had been done on some of the diversity strands. Disability appeared to be under-identified and there was no specific provision for older people. There was little evidence of any tension on the basis of nationality or ethnicity among detainees. The programme of diversity-themed events that took place throughout the year helped to promote an ethos of tolerance and understanding of difference.
- 4.29 The centre had a diversity policy which covered all the main diversity strands, and was underpinned by separate policies for race and disability. A well-attended race equality action team (REAT) met monthly and was usually chaired by the director. In spite of efforts by the centre, there was no external representation at the meeting. Detainees could attend for the second part of the meeting, to raise their issues, although few chose to do so.
- 4.30 Monthly statistics were prepared for the meeting, broken down by the nationality, ethnicity and religion of the population. Monitoring was carried out across a wide range of areas, including access to employment, separation and use of force, food refusal, access to activities (other than education), complaints and ACDT, raised awareness procedures and constant watches. A written analysis flagged up any inconsistencies for the REAT to consider, and anomalies were investigated, including under-representation of a particular nationality among detainees employed in paid jobs. There was no month-on-month comparison of trends across the year, although this was addressed in the annual report prepared in May each year. Improvements to the monitoring undertaken had been made throughout the previous year, building on discussions at the REAT meeting. While information about detainees with a disability was included in the monthly information, discussion about disability, older detainees or sexual orientation was not a standing agenda item at the REAT meeting.
- 4.31 Detainees who did not speak English were mostly positive about their experience of the centre. A telephone interpreting service was used, on average, over 200 times each month. The biggest use was made by health services staff but all the residential units, as well as welfare, the chaplaincy and reception, also used the facility. An interpreter enabled useful communication to take place with the sizeable Chinese population at the centre. Focus groups for different nationality groups took place monthly but some were poorly attended (see recommendation 2.12).
- 4.32 There was little evidence of tension between different nationality/ethnic groups at the centre. Racist incident report forms, in English, were available to detainees or staff who wished to make a complaint. Six complaints had been made in 2011, all relating to racist remarks. All had been investigated and dealt with appropriately, in a timely manner, and there had been no recorded further incidents involving the same detainees again. In our survey, fewer detainees said that they had been assaulted or victimised because of their nationality or religious background, in comparison with other immigration removal centres.
- 4.33 In our survey, 13% of detainees said that they had some form of disability. However, the health care reception screening process had identified only two detainees with disabilities, which

indicated a need for improved identification and information sharing. Both of these detainees had a care plan and a personal emergency evacuation plan. One had had to wait a considerable time for suitable sanitary products to be provided for her, and for a while had worn nappies. Despite entries to the contrary on her care plan, the detainee told us she found this humiliating. There was no procedure for identifying learning disabilities that could impact on a detainee's ability to cope in a new setting. Disability liaison officers had recently been appointed and were to attend Prison Service training shortly after the inspection.

- 4.34 All staff working directly with detainees received training on diversity during their period of initial induction and annual refresher training. Figures provided by the centre showed that 68 members of staff had attended this refresher training between 1 May 2010 and 30 April 2011. Cultural away-days for staff involved visiting sites in the community to learn more about faiths and cultures, and members of the diversity team had benefitted from some externally sourced training. A member of staff who was to take on the role of race liaison officer had attended the relevant Prison Service training
- 4.35 There were no specific arrangements to care for older detainees; for example, there were no remedial gym sessions or other activities specifically for older people. The centre had challenged the need for detention of an older woman and had provided individualised support for her when her detention had continued.
- 4.36 There was an impressive programme of events to celebrate religious and cultural diversity throughout the year. The events incorporated information about different cultures and religions with enjoyable activities, and detainees were involved in their planning and delivery (see section on activities).

## Recommendation

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- 4.37 **Older detainees and those with disabilities should be identified and offered coordinated services as necessary by staff with relevant training and knowledge.**

## Housekeeping points

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- 4.38 External organisations should be represented at the diversity meeting.
- 4.39 Key trends over time should be included in the monthly diversity monitoring statistics.

## Faith

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### Expected outcomes:

**All detainees are able to practise their religion fully and in safety. The faith team plays a full part in the life of the centre and contributes to detainees' overall care, support and release plans.**

- 4.40 More detainees than at the time of the previous inspection said that their religious beliefs were respected. Detainees had good access to the coordinating chaplain and to attractive and well-maintained places of worship. There was a wide range of visiting chaplains, many of them women.

- 4.41 In our survey, over 83% of detainees said that their religious beliefs were respected, which was higher than at the time of the previous inspection (76%) and than the 64% comparator. Most detainees also reported positively on faith provision in our group interviews.
- 4.42 All of the various faith rooms were laid out attractively, well maintained and in a good state of repair. The rooms were accessible and well used by detainees. Most were located in the multi-faith area near Dove unit, and included a central Christian chapel, a mosque, a multi-faith room used by Sikhs and Hindus, and a Buddhist prayer room. There were separate rooms for Christian and multi-faith worship on the family unit. Religious festivals were observed regularly and we received some positive comments about the efforts made to celebrate events such as Ramadan.
- 4.43 The religious affairs manager was supported by a large team of permanent part-time and visiting chaplains, as well as a range of volunteer faith visitors. Together, they were able to provide well for the variety of need at the centre. There had been successful efforts to recruit more female chaplains and visitors, and a female Muslim visitor visited the centre regularly. The female Buddhist chaplain also assisted with interpretation for the population of Chinese detainees.
- 4.44 In addition to religious services, social events and ad hoc discussion groups with chaplains, detainees could attend timetabled Qur'anic and Bible study classes. The coordinating chaplain maintained an open-door policy and was perceived by detainees as being highly visible and supportive. He attended key committee meetings and ACDT reviews regularly.



## Section 5: Health services

### Expected outcomes:

Health services are provided at least to the standard of the National Health Service, include the promotion of well being as well as the prevention and treatment of illness, and recognise the specific needs of detainees as displaced persons who may have experienced trauma.

5.1 Health services were well managed and provision was reasonably good. However, we received many complaints about access and treatment, and specific consultation meetings had only just started. Access to the available primary health services was timely and the GP service was available daily. Nurse triage was in place daily and being developed. Interpretation was used appropriately. Dental services were adequate, with reasonable waiting lists, but the waiting list for the optician was too long. Pharmacy services were reasonably good. There were no undue delays in accessing secondary care. Mental health services were adequate and counselling services were good.

### General

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- 5.2 Health services were commissioned by the UK Border Agency (UKBA) and 24-hour primary care services were provided by Serco Health. Health services were well managed. The health services contracts manager was a member of the senior management team and was well supported by a clinical lead. Good relationships were being developed with NHS Bedfordshire. There were quarterly partnership meetings, with clear terms of reference. There was a newly published health needs assessment, which was thorough and identified some key recommendations.
- 5.3 In our survey, 40% of detainees reported positively about health care services, which was better than the 33% comparator. Telephone interpreting was used regularly. However, in our groups and individual discussions, detainees told us that they experienced delays in obtaining appointments and treatment. Our evidence indicated that access to services was good and that detainees could see a health services professional on the day they applied or on the following day. However, there was a high number of failures to attend for some nurse-led clinics, and there had been little proactive engagement with detainees over health services. Detainees had access to a consultation forum but this had only just started and there had been no attendance at the first meeting. We observed detainees being treated respectfully, although some told us that they did not feel as though their health needs were always taken seriously.
- 5.4 The health care centre provided a wide range of facilities, including treatment and consultation rooms, a dental suite and an inpatient unit. There was a treatment room for the administration of medicines and consultations on Crane unit (the family unit). All areas for the treatment and care of patients were clean, spacious and well decorated. However, services were hampered by the fact that primary care services were provided from a relatively small, hot and busy area. The inpatient area was rarely used.
- 5.5 The waiting areas in the health care centre were clean and of a reasonable size. Detainees could drop in throughout the day, as the services were run in a similar way to those of a walk-in centre. The reception area contained a room for health care screening. No health care rooms were secured on a separate health care suite key, and other staff had access to them.

## Recommendations

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- 5.6 There should be ongoing proactive engagement with detainees over their health needs and concerns about access to services.
- 5.7 The use of space in the health care suite should be reviewed to determine its best use so that it can provide a full range of services.

## Housekeeping point

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- 5.8 Health care rooms should be used only by health services staff and should be secured with a health care suite key.

## Clinical governance

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- 5.9 There was an adequate range of policies and procedures, including a system for recording that staff had read and understood them. There had been an infection control audit and we were told that regular record-keeping audits were undertaken. There were regularly held local and national clinical governance meetings. Overall, clinical governance was well managed.
- 5.10 The nursing staff consisted of a team of registered nurses and mental health nurses, and one health care support worker. Regular bank staff were used. Vacancies had been filled and there was a satisfactory skill mix to meet the needs of the population. There were opportunities for staff to have clinical supervision and there was good access to continuing professional development. Some staff were undertaking higher education courses to masters degree and PhD level.
- 5.11 Emergency resuscitation equipment and automated external defibrillators (AED) were available in the health care centre and in the corridors. All emergency bags were sealed and checked regularly. Resuscitation and first-aid training was available and there was good take-up by officers, as well as clinical staff.
- 5.12 Paper clinical records were used. Storage, while compliant with the Data Protection Act, was disorganised, causing frustration for staff, who regularly could not find the records they required. We were told that SystmOne, a computerised record system, was likely to be introduced by the end of 2011. National Institute for Health and Clinical Excellence (NICE) guidelines and National Service Frameworks were followed and generally used to inform practice.
- 5.13 Complaints were managed through the centralised system and there had been 13 health care-related complaints in the previous six months. Those that we scrutinised had been dealt with well. Responses usually included an apology and addressed the concerns raised by the complainant.
- 5.14 Staff were aware of action to be taken for the management of communicable diseases.

## Recommendation

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- 5.15 Managers should ensure that patient records are easily accessible when they are required.

## Primary care

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- 5.16 The initial screening of all new detainees was carried out in reception using a paper screening tool. It was available only in English but staff made good use of telephone interpreting to communicate with those who spoke little English. All detainees were offered an appointment to see the doctor on the day after arrival at the centre.
- 5.17 Risk registers were compiled for detainees with long-term conditions. Nurses held lead roles and there was evidence that clinics had been run, although they were not well advertised. There was limited take-up by detainees and some clinics had not been held for a few months. There was access to physiotherapy, although take-up seemed low. Smoking cessation services were available through NHS Bedfordshire and the GP service but, again, this service was not well used. An optician attended monthly and there was a focus on reducing the waiting list; at the time of the inspection, the waiting time to see the optician was too long, at eight weeks. There was access to a midwife once a week. An emergency childbirth kit was available in the department. Overall, the support for the pregnant women held at the time of the inspection was reasonably good, although two of the women's ultrasound scans had been delayed. A female doctor was available once a week, and this was advertised in a range of languages. A weight, information and nutrition (WIN) project was being developed.
- 5.18 The GP service was available daily, including sessions at the weekend. However, out of hours, only telephone advice was available, provided by the Serco out-of-hours call centre in Cornwall. There had been no calls to the service over the previous six months.
- 5.19 Nurse triage was in place daily and being developed. There was a range of triage algorithms. A nurse attended Kingfisher unit (the care and separation unit) daily and liaised closely with the GP, who visited it three times a week.
- 5.20 Health promotion information was displayed in health care suite and to a limited degree elsewhere in the centre. Health promotion leaflets in a range of languages were not easily available. There had been a well-received health promotion event.

## Recommendation

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- 5.21 **There should be a full range of well-advertised nurse-led clinics, and health services information should be available across the IRC in a variety of languages.**

## Pharmacy

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- 5.22 Medication was supplied by a local pharmacy supplier, who delivered medication six days a week; access to medications out of hours was possible. The pharmacist checked prescriptions against faxes, audited the controlled drugs and checked the medication cabinets, as well as answering any queries raised by staff or patients. Aggregated prescribing data were supplied. Pharmacy-led clinics and medicine use reviews were not held. The supply-only model in use did not allow access to a complete pharmaceutical service. The medicines and therapeutics committee met regularly, with input from NHS Bedfordshire and the pharmacist.
- 5.23 All medication information was in English only. Medication was administered at appropriate times. There was an in-possession risk assessment attached to each prescription and administration chart, although they were not always completed. Some medicines were administered as not in-possession, when there appeared to be no reason to do so. Risk

assessments for in-possession medication were usually signed by a doctor; however, the local procedure identified that a nurse would undertake this role during assessment at reception. This was not observed to be in place during the inspection.

- 5.24 The room used for administration was adequate but very busy. Prescriptions were stored in a number of locations and it took a lot of time to find them. They were legally written but larger quantities of medicines were given to patients than had been prescribed, owing to not having adequately labelled pre-packed stock. Stock inhalers were kept in cupboards and were presumably dispensed (contrary to proper practice) by nurses. Medication could be obtained when the pharmacy was closed. We saw an out-of-date British National Formulary, but were informed that a GP took all of these for a charity.
- 5.25 Paracetamol was available from officers on the units, and a centre shop list was available for the purchase of medicines; however, residents were not given their own supply of paracetamol and there was a limited list of medication which could be supplied without a prescriber. Patient group directions were only available for Hepatitis B vaccination at the time of the inspection, which was insufficient. There was a high use of codeine, paracetamol and amitriptyline for pain control.

## Recommendations

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- 5.26 A pharmacist should be available for counselling sessions, pharmacist-led clinics, clinical audit and a medication review.
- 5.27 Suitably labelled pre-packs should be provided, and no more medication should be supplied than is prescribed.
- 5.28 Patient group directions (PGDs) should be produced, to enable the supply of more potent medicines by the nursing/pharmacy staff where appropriate. A copy of the original signed PGDs should be present in the pharmacy and read and signed by all relevant staff.
- 5.29 The use of paracetamol, codeine and amitriptyline should be reviewed. A step-wise approach to pain management, such as the World Health Organization analgesic ladder, should be modified for the IRC environment and used to reduce opiate usage.

## Housekeeping points

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- 5.30 Medication information should be available in a form that detainees can understand; the use of symbols might be beneficial.
- 5.31 In-possession medication risk assessments should be undertaken on all detainees.
- 5.32 Prescription charts should be filed in a manner to enable fast access to records.
- 5.33 Old reference books should be discarded, and only the most recent copy should be kept.

## Dentistry

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- 5.34 There was access to a dentist and dental nurse weekly. The waiting list was reviewed regularly and the average waiting time was three to four weeks. Dentistry was fully integrated into the

health care system and there was a good level of communication with the health services team. There was access to out-of-hours dental treatment, following assessment and agreement with senior nurses. The dental surgery contained equipment that was well maintained and in good working order. Cross-infection controls were satisfactory but no separate area was used for the cleaning and decontamination of equipment. Emergency oxygen and resuscitation equipment were available nearby.

- 5.35 Dental checks and treatment at least to the range available in the NHS were provided and oral health information was supplied on a one-to-one basis by the dentist.

## Inpatients

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- 5.36 A five- to six-bedded modern inpatient unit was part of the health care suite. There were admission criteria and access the beds was assessed by the health care contract manager. The inpatient area had been used eight times in the previous six months.

## Secondary care

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- 5.37 The centre provided two escort opportunities each day for external hospital appointments. There were no undue delays or cancellations as a result of a shortage of escort staff. Appointments were managed by an administrator, who followed up appointments if there were delays by the hospital.

## Mental health

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- 5.38 There were two nurses identified as the primary mental health lead, and the nursing team comprised an equal mix of mental health nurses and registered general nurses; however, there was no clear distinction between the roles. There was no caseload monitoring and there had been only 23 mental health assessments since the beginning of 2011. There was access to a psychiatrist, when required, who would attend the site within 48 hours. We were told that relationships with the local mental health acute services were variable and noted that there had been recent work undertaken for South Essex Partnership University NHS Foundation Trust (SEPT) to provide acute care and crisis management. No detainees had been transferred to a secondary care bed during the previous 12 months. Four detainees had received emergency inpatient care at Bedford Hospital NHS Trust during this period and had then been transferred back to Yarl's Wood.
- 5.39 There was good access to counselling services, provided by well-qualified practitioners. Services included a wide range of drop-in sessions, face-to-face counselling, alternative therapies, multi-sensory rooms, distraction techniques and herbal remedies that were suitable for all detainees. Talking therapy was possible for detainees whose first language was not English. Counselling services were monitored, with over 100 patient contacts a month. Counsellors had an awareness of cultural differences.
- 5.40 Limited mental health awareness training was available via the assessment, care in detention and teamwork (ACDT) course and mental health first-aid training, although take-up for the latter appeared limited and detainee custody officers told us that this training was optional.

## Recommendation

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- 5.41 There should be robust primary mental health care services for detainees and regularly held mental health clinics.
- 5.42 All staff should receive mental health awareness training.

## Substance use

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- 5.43 Substance use services were generally not offered; it was a requirement that detainees be on a maintenance treatment before being admitted to Yarl's Wood. At the time of the inspection, there was one detainee on a maintenance dose of methadone; there had been a maximum of three at any one time. Staff had received no specific training in substance use. If required, there was access to advice from a GP with a special interest in substance use. The deputy health care contracts manager was developing links with local services. Counselling services could support the needs of detainees who had previously misused substances.

## Section 6: Activities

### Expected outcomes:

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

6.1 The centre provided a range of well-planned and -attended activities for short-stay detainees, and more detainees than at the time of the previous inspection said that there was enough to fill their time. However, for the small number of male detainees, the range of activities was limited. The number and variety of work places had increased but was still insufficient for the size of the population and few detainees worked for more than 10 hours a week. The range of education provision was narrow, with little available for more able or longer-stay detainees. The quality of education classes was broadly satisfactory but there was an over-reliance on paper-based materials to support learning. The libraries provided a useful service but the book stock was limited in the small library on the family unit. PE provision had improved and detainees had good access to a range of facilities, organised classes and team games.

### Work and learning and skills

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- 6.2 The number of work places had increased from 49 to 63 but was still insufficient for the size of the population, with over 30% of detainees staying longer than two months (see main recommendation HE46). Few detainees worked over 10 hours a week, and none for more than 12. The kitchen was now a registered training centre and all kitchen and servery workers took an accredited level 1 qualification in food safety. There were plans to provide a level 2 qualification in food preparation, providing a good progression route for longer-stay detainees. All detainees who worked as cleaners participated in an induction run by the domestic service manager. They received appropriate practical training using the British Institute of Cleaning Science standards as guidelines. Other jobs were available in the laundry, hairdressing and nail salon, gym, library, clothing workshop and central activities. Eight support workers called 'greeters' provided help and support for newly arrived detainees by acting as a point of contact to help them to settle in (see also section on induction).
- 6.3 Work places were allocated fairly, with applicants selected from the date that the application was made. However, the UK Border Agency (UKBA) could veto appointments to work if detainees were not considered to be complying, which inappropriately mixed centre and UKBA roles. Work places were well advertised on noticeboards, with each having a clear job description and details of hours of work, paid at £1 an hour. All detainees received a basic allowance of 71 pence a day, redeemable as cash through the shop (see recommendation 8.10).
- 6.4 There was a sufficient variety of activities for the women who stayed at the centre for a short time, and more detainees than at the time of the previous inspection (57% versus 34%) said that there was enough to fill their time. However, the small number of men on the family unit were more negative about the range of activities that they could access. Detainees were able to access the activity areas of the centre for nine hours each day, and the locking of unit doors further restricted freedom of movement (see section on security).
- 6.5 Ten activity staff were deployed in the library, gym and sports hall and education department. They were enthusiastic and helpful, and helped to create a positive atmosphere in the main activities centre. Facilities included two cinema rooms showing a range of English and foreign

language films, a knitting club, a craft class, a cultural kitchen (see section on catering), a hairdressing and nail salon (managed by two qualified hairdressers), an internet room (which was well equipped with new computers) and a games room with board and electronic games, a pool table and table football. Most facilities in the central activities area were replicated on the family unit. The knitting club, run by a volunteer two mornings a week, developed good practical skills and was popular with detainees.

- 6.6 Four to five well-planned cultural, religious and learning one-day events took place each month. Activities staff made efforts to plan interesting and enjoyable activities which ran throughout the day and in the evening. Detainees' views were sought through regular focus group meetings to help to plan appropriate activities, particularly for cultural events linked to their national days. Events were well attended and enjoyed by detainees and were often linked to prizes, to encourage attendance. Other events, such as music in detention, ran at various times throughout the year.
- 6.7 The centre's strategic plan set out suitably ambitious objectives to improve overall education and activities for detainees. Work towards achieving some of the objectives had already been successful. For example, the centre was affiliated with HMP Dartmoor to provide Storybook Mums, to enable detainees to send books and recordings to their children.
- 6.8 Education classes had recently been relocated to accommodation adjacent to the family unit, which provided a light, airy and suitable learning environment, and attendance had grown following a recent stepping up of the advertising and promotion of education opportunities. However, detainees complained of a lack of continuity and of consistency with advertised class times, causing frustration when they had planned to attend. The provision was limited to basic English for speakers of other languages (ESOL), numeracy and information technology, offered every weekday. On completion of the courses, detainees were issued with an in-house certificate of achievement in ESOL and an e-digital competence certificate in IT. A qualified teacher taught both classes. The quality of education classes was broadly satisfactory but there was an over-reliance on paper-based resources to develop detainees' English and IT skills. In IT, detainees could study at basic and intermediate level, which provided some progression opportunities for longer-stay detainees. However, some detainees had poor reading skills and did not understand what they were typing. No software packages were used to help them develop their English skills, and the IT room was not fully resourced. No printer was available and software packages, such as touch typing, had yet to be loaded onto the system for detainees to access. Barnfield College was contracted to provide a range of short programmes, which extended the provision. To date, a sewing class and a well-planned budget and debt management class had been run, and more classes were planned. There was no higher-level provision for longer-stay or more able detainees (see main recommendation HE46).
- 6.9 Well-organised arts and crafts activities, including clay, beadwork, card and bag making, and painting, ran for half a day each weekday in the main activities area and on the family unit. These were popular with detainees, who engaged well with the activities and quickly made progress to develop their craft skills.

## Library

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- 6.10 Two libraries were available and access to the facilities was good, at nine hours a day, seven days a week. The library in the central area was operated by a member of the activities staff and provided a satisfactory service. The book stock had recently increased by 2,500 books and provided an adequate range of fiction, non-fiction and foreign language books and

dictionaries, and books suitable for emergent readers. The stock of newspapers and magazines was satisfactory. A wide range of DVDs was available for loan but too few were in languages other than English. Attendance and borrowing were recorded electronically and this had reduced the book and DVD stock loss. The library was used well to promote events and also provided a useful facility for detainees to book legal visits.

- 6.11 An additional library was situated on the family unit and provided a small range of books and magazines, and six computers (three with internet access) for detainees residing on this unit. However, the computers were old and internet access was slow. The book stock there was limited and some of the books for emergent readers were inappropriate for the adult population. Detainees on the family unit had the opportunity to visit the main library for one hour each evening to borrow DVDs that were not available to them in their library.

## Recommendations

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- 6.12 Detainees' cooperation or failure to cooperate with UKBA should not affect the process of allocating paid work roles.
- 6.13 The range of activities available for male detainees should be reviewed and more done to encourage them into suitable activities.
- 6.14 The range and quality of the book stock in the family unit library should be improved.

## Housekeeping points

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- 6.15 Software packages to support English for speakers of other languages (ESOL) and information technology (IT) classes should be loaded onto the computers, to provide an alternative to paper-based learning resources, and a printer should be installed in the IT classroom, to enable detainees to obtain a hard copy of their work.
- 6.16 The computers in the family unit library should be upgraded to the same standard as those in the main central activity area.

## Physical education

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- 6.17 Five appropriately qualified activity staff managed PE activities well, and the provision had improved considerably. Inductions were held frequently, to ensure that detainees could access the facilities soon after their arrival. Access to the gym and sports hall was good for all detainees.
- 6.18 A large sports hall was used for team games and exercise classes, and as a venue for cultural and religious events. A small, reasonably equipped gym provided resistance weights, two exercise bicycles, four upper-body machines, a cross-trainer and three running machines, although one had been out of order for some time. Yoga and aerobics classes were held once a week, taught by an externally contracted teacher. Other classes, such as stretch and toning, were run by activities staff. However, they were not always held at the same time each week, as staff shift patterns prohibited this, which caused detainees some frustration. In an attempt to keep detainees informed, daily events were advertised outside the sports hall on a white board. Team games such as volleyball, table tennis, badminton and cricket were held regularly in the sports hall and sometimes outside in the central courtyard, although space was limited. An outside sports court had not been used for some time, as the surface was uneven.

- 6.19 Suitable footwear and clothing were provided for detainees who did not have their own. All detainees were screened by health services staff, to ensure that they were fit to participate in sporting activities. However, there were insufficient links with the health care unit to refer detainees for remedial gym or provide specific sessions for older detainees.

## Recommendations

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- 6.20 Links with the health care unit should be developed, to refer detainees for remedial gym.
- 6.21 Gym sessions specifically for older detainees should be introduced.

## Housekeeping point

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- 6.22 Faulty equipment in the gym should be repaired.

# Section 7: Rules and management of the centre

## Expected outcomes:

Detainees feel secure in a predictable and ordered environment.

7.1 The rules of the centre were clear, and applied consistently. Security was proportionate, apart from the locking of unit doors, and security intelligence was well managed. There was no longer a rewards scheme and there was little need for one. The amount of recorded use of force had increased. Use of force was carried out competently but further training was needed on maintaining calm communication under pressure. Review of uses of force at the security committee was not sufficiently focused or thorough. The management of separation had improved, with few extended stays, and the care suite was used well. However, temporary confinement was sometimes used in the absence of violent or recalcitrant behaviour, and for longer periods than appropriate. Local management of complaints was robust. Investigations and replies were of a high standard but most replies took too long.

## Rules of the centre

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7.2 The rules were available in the induction unit in the 12 main languages used, and had been updated in the previous month. Detainees signed an anti-bullying compact during the induction process. Telephone interpreting was used regularly by induction staff to explain the rules for those who could not understand one of the 12 languages. Application of the rules was generally fair and consistent.

## Security

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- 7.3 Razor wire had been removed since the previous inspection, leaving only a small amount around a potentially vulnerable low-roofed area. Security measures were not excessive, although the locking of the unit doors during times when there was otherwise free movement around the centre limited detainees' freedom of movement and tied up officers with frequent requests to open the doors.
- 7.4 The flow of security information reports had been steady over the previous year, at a rate of between 60 and 80 a month. Analysis and follow-up of these was thorough and well controlled. There were no prominent themes and there was little evidence of drug or alcohol use.
- 7.5 The security committee met monthly, with reasonable multidisciplinary attendance, and covered all the areas of security information and set relevant objectives. However, it was rare for a member of UK Border Agency staff to attend the meetings.
- 7.6 Rub-down searching of women was carried out by a woman but frequently in the presence of a man. There were appropriate measures for the authorisation of strip-searching but there had been no strip-searches since 2009. Staff did not carry defensive weapons

## Recommendation

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7.7 Both members of staff present at a rub-down search of a woman should be female.

## Housekeeping point

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- 7.8 UKBA should be represented at meetings of the security committee.

## Rewards scheme

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- 7.9 There was no longer a reward scheme. It had been judged unnecessary and this seemed an appropriate conclusion.

## Discipline

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- 7.10 There was no evidence of informal or group sanctions to enforce discipline or punish infringements, and staff maintained order mainly through positive relationships. The use of separation was sometimes documented in ways that suggested a punitive response; on several occasions, the authorisation record used phrases such as *'for a period of reflection'* but, in practice, the use of separation was moderate and generally proportionate (see below).

## Use of force and single separation

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- 7.11 There had been 79 incidents of use of force in the preceding six months, representing a large increase over time; this was attributed by managers to the net-widening effect of including the most minor occurrences of physical contact. There was no evidence of unnecessary or excessive use of force. However, in our survey twice as many people as at the time of the previous inspection said that they had been subject to physical restraint in the previous six months (12% versus 6%), suggesting that the increase was not due simply to improved record-keeping.
- 7.12 All planned interventions were filmed, and the recordings viewed by managers. Learning from this scrutiny was fed back into control and restraint training. Incidents of use of force were reviewed individually at the monthly security meetings but no comments on the manner or legitimacy of the uses of force were recorded as having been raised by anyone, and there had been little discussion of the increased number of incidents.
- 7.13 There was evidence of repeated attempts at de-escalation before and during the use of force, and methods of physical restraint were properly used. Communication and coordination in uses of force had improved; recordings showed that, in general, a single lead person maintained communication but this officer did not always maintain a calm and controlled manner. The behaviour of staff taking part in removals was not always confident or appropriate; for example, a male officer holding a detainee's arm as she walked called her 'darling' and 'sweetheart' – this incident had been picked up by managers and appropriate action taken.
- 7.14 In our survey, fewer people than at comparator establishments said that they had spent a night in separation under Rule 40 (10% versus 18%), and the governance arrangements, monitoring and support for detainees located in the separation (Kingfisher) unit had improved. Although at the time of the inspection a detainee had been held in separation for over five days, she was unsuccessfully invited to return to normal location each day, and in the preceding six months no detainees had stayed in separation for more than 48 hours. The Bunting unit care suite was used to separate individuals or families from the main population when there was evidence of a risk of non-compliance with removal; the level of supervision, support and oversight of such detainees was appropriately the same as for Kingfisher unit, with care plans in each case.

Those in the care suite were able to attend some activities, accompanied by a member of staff, and a member of staff was with them at all times.

- 7.15 Temporary confinement under Rule 42 (in a cell without normal furniture) had been used 13 times in the previous six months, and this figure was rising. The average length of time spent in temporary confinement was seven and a half hours, indicating use beyond the period when a detainee was actively violent or recalcitrant. It had recently been used for a passively non-compliant detainee, for another who had not offered physical resistance and a third who was recorded as 'speaking very loudly and aggressively to staff'. It was also clear that detainees remained in these conditions after they had become calm and compliant; for example, a detainee had been put in this type of cell at 3pm, was not recorded as offering any violence or resistance, 'appeared calmer' at 4.40pm but had not been moved to a normal separation cell until 9pm.

## Recommendations

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- 7.16 Managers should analyse in detail the reasons for an increase in use of force and take remedial action.
- 7.17 Communication during use of force should be calm and respectful, as well as appropriately assertive, and training should emphasise this.
- 7.18 The care suite should be the first choice for separation when the risk of harm to persons or property is low.
- 7.19 Temporary confinement under Rule 42 should be used only when a detainee is violent or refractory on arrival on Kingfisher unit, and only for as long as this behaviour continues.

## Housekeeping point

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- 7.20 The security committee should identify and record specific learning points from use of force incidents.

## Complaints

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- 7.21 Complaint forms were readily available in English and 14 other languages on all units, although in our survey fewer detainees (29%) than at the time of the previous inspection (37%) said that they had made a complaint. Far fewer non-English-speaking detainees (10%) than their English-speaking counterparts (35%) said that they had made a complaint. Complaints in foreign languages were translated but replies were in English only. In total, 52 complaints had been made in the six months before the inspection. The largest single subject of complaint (14) was health care.
- 7.22 Local management of complaints was sound. Detainees posted them in sealed boxes on the wings, which were emptied daily by UK Border Agency (UKBA) staff. They were then passed to the UKBA manager, who reviewed all complaints. They were scanned and emailed to UKBA's detention services customer services unit (DS CSU) in Croydon, where it was decided who would deal with the complaint. The onsite UKBA manager improved the efficiency of the system by forwarding relevant complaints to Serco before sending them to the DS CSU.

- 7.23 Complaint investigations and responses by Serco staff were excellent. Replies were polite and constructive, and documented thorough investigations, during which efforts were made to speak to complainants and witnesses. However, only one of the 10 complaints we examined had been responded to within three working days. Three of these replies had been upheld. Responses to complaints handled by UKBA's professional standards unit were also of a high standard; they involved more complex investigations, and responses could take many months.
- 7.24 Complaints were analysed appropriately and trends were monitored at senior management team meetings and at the fortnightly contract monitors meeting, by nationality, subject of complaints, location and nationality. Data relating to individual staff members were also monitored. The centre's 'request and complaints procedure', despite being issued in May 2011, was out of date.

## Recommendation

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- 7.25 **Complaints should be replied to promptly, in the language in which they have been submitted.**

## Housekeeping point

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- 7.26 The centre's request and complaint procedure should be updated in light of the current Detention Service Order on complaints handling.

## Section 8: Services

### Expected outcomes:

Services available to detainees allow them to live in a decent environment in which their everyday needs are met freely and without discrimination.

8.1 The standard of the food was generally good. The cultural kitchens were well used by detainees. Detainees and staff could eat communally in the dining halls, and the atmosphere there was relaxed. The two shops at the centre offered a wide range of goods at reasonable prices, although they were expensive for detainees with no source of income other than the daily allowance of 71 pence.

### Catering

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- 8.2 The kitchen was clean and tidy, with food stored appropriately, and there was a current hygiene certificate from the local authority. Meals were produced on a four-week menu cycle and there was an emphasis on using fresh ingredients. Breakfast comprised toast, cereals and porridge every day and there was a three-course hot meal at lunchtime and in the evening. A hot drink and a snack were served every night. Vegetarian and healthy options were offered at each meal and special diets were catered for, in consultation with health services and/or religious leaders. A salad bar had recently been introduced into each dining room and there was a good supply of fresh fruit at mealtimes. If detainees disliked the food choices at a particular meal, they could opt to have three pieces of fruit instead. Hot and cold drinks were available throughout the day.
- 8.3 Most detainees ordered their food via the touch-screen kiosks, which included pictures of all the food. Despite this pre-order system, we observed long queues building up before the start of the meal service. Detainees on Crane and Bunting units did not pre-order food and were able to select from the choices available on the hotplate. Unit staff noted who turned up for meals and checked with detainees who missed a meal, to find out why (see paragraph 4.14).
- 8.4 In our survey, more detainees than at comparator centres said that the food was good or very good but views expressed in our groups were mixed. The food we sampled was tasty and portion sizes were good. Some negative comments had been made in food comments books, and the catering manager had invited some detainees who had made comments to supply recipes or cook in the main kitchen.
- 8.5 The cultural kitchens were popular with detainees. They allowed groups of up to six detainees to come together to cook traditional food using ingredients provided by the centre. There was a perception among some that certain groups had more access to them than others, and access was monitored at the monthly race equality action team meetings. The cultural kitchens were also used to provide food for the themed cultural, religious and diversity events that took place regularly. South Africa Day took place during the inspection, and the main cultural kitchen produced a range of food for detainees and staff who attended the event.
- 8.6 Each unit had its own dining room. These were clean and contained sufficient tables and seats for the population living there. A number of detainees worked in the kitchen and served food to their peers, supervised by catering staff. The atmosphere in the dining rooms was pleasant and some staff ate in the dining rooms with the detainees.

## Housekeeping point

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- 8.7 The perception among some detainees that there was inequitable access to the cultural kitchens should be addressed.

## Centre shop

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- 8.8 There were two shops, located in the central area and on Crane unit, and they were run efficiently. The central shop was open for five and three-quarter hours and the Crane unit shop two and half hours a day. A range of confectionery, groceries and toiletries, mobile telephone top-up cards, stamps, tobacco products and greetings cards was available, and orders for newspapers and magazines could be placed. There was ongoing consultation with detainees, and products were added as needed. Detainees could also order goods from approved internet sites. A popular weekly market took place in the sports hall, at which detainees could buy clothes, accessories and cosmetics.
- 8.9 Detainees did not have to use cash to buy from the shop and could have the value of their purchases deducted from their account at the centre. They were allowed a maximum of £20 in cash in their possession and could withdraw cash from their account in the shops. Prices in the shops were comparable with high street stores and some cheaper non-name brands were available alongside named brands. However, detainees without access to money from family or friends outside the centre had limited purchasing options if they were dependent on the 71 pence a day allowance provided by the UK Border Agency. This was further compounded if their mobile telephones were not approved for use in the centre and they had to pay 50 pence a week for the hire of a mobile telephone. Some detainees with limited funds also complained to us about having to pay for over-the-counter medications in the shop which had previously been provided free of charge from the health care unit.

## Recommendation

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- 8.10 The 71 pence per day allowance given to detainees should be reviewed.

# Section 9: Preparation for release

## Expected outcomes:

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.

- 9.1 There was a well-regarded welfare officer, who assisted detainees with practical issues. Detainees reported positively on treatment by visits staff but evening visits did not start on time. Information about visitors was being used by the UK Border Agency for enforcement purposes. There was good access to telephones, although tariffs were high, and detainees had access to the internet and email. There was no coordinated approach to removal and release.

## Welfare

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- 9.2 A well-regarded welfare officer worked from Monday to Friday assisting detainees with practical issues, such as recovering property. Four newly appointed welfare assistants provided a total of three hours a week of support to the welfare officer and cover for annual leave. There was no cover at weekends. The service was well advertised throughout the centre but primarily in English, and some detainees said that they were not aware of the service.
- 9.3 The number of active cases being held by the welfare officer had steadily reduced from 82 in January 2010 to 40 in May 2011. The officer also recorded around 50 'corridor' or 'office' consultations each month, which did not necessarily result in the start of a new formal record but were sometimes related to open cases. The two issues that the officer most commonly dealt with were recovery of property from a previous establishment and money issues. He was also the link person for community organisations delivering surgeries in the centre – for example, the Red Cross, Refugee Action, Bail for Immigration Detainees and the Bedford Credit Union. An external event planner had been produced, setting out when different agencies were at the centre, and had been posted on various noticeboards. Hibiscus, a community group working specifically with women, no longer visited the centre following the loss of funding, although they still undertook a considerable amount of work for detainees by way of telephone referral. Detainees told us that they valued the assistance they had received from Hibiscus.
- 9.4 Basic data were collected, including a limited analysis of the number of ex-foreign national prisoners who asked for welfare assistance; month-on-month, this group was over-represented in the figures but there was no analysis of which groups were under-represented and why. The welfare officer was not consistently involved in preparing detainees for release, transfer or removal (see section on release and removal).

## Recommendation

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- 9.5 The welfare service should be advertised clearly in a range of relevant languages and cover should be provided at weekends.

## Housekeeping point

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- 9.6 More detailed analysis of over- and under-representation of specific nationalities and groups should be undertaken by the welfare officer.

## Visits

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- 9.7 In our survey, 79% of detainees said that they were treated well by visits staff, and 54% that they had received a visit from family or friends since being at the centre, both figures being better than the comparators. Only 39% of non-English speakers we surveyed said that they had received a visit.
- 9.8 Social visits took place every day from 2pm to 5pm and 6pm to 9pm, although evening visits did not start on time owing to the roll count, which delayed detainees' arrival in the visits hall until approximately 6.30pm. Visitors were allowed to attend both sessions if space permitted, although they had to leave between sessions. All visitors were required to book in at the visitors centre, which utilised a biometric system. Lockers were provided, and visitors could book in property for detainees. We were told that only female staff were allocated to visits reception and we saw them searching male visitors, without checking that they were comfortable with this.
- 9.9 The visits hall was spacious, with soft seating at 20 tables. One corner had been decorated in a café style, with vending machines for hot and cold drinks and snacks, but there was no substantial food available. This was a considerable disadvantage for families that had travelled long distances and there were no food outlets near the centre. A small unsupervised play area and a separate book corner were provided for children, and there was a large wall-mounted television. Detainees and their visitors could access an outside area, which had a small number of tables and chairs. There were two noticeboards displaying information and some useful leaflets about the centre in the hall but they were all in English only. A separate room was available for managing sensitive and difficult visits. There was an active befrienders scheme, with over 40 volunteers providing support to a large number of detainees.
- 9.10 A free bus service operated for visitors between the train and bus stations and the centre. Some visitors travelling by car had encountered difficulties owing to confusion over the correct postcode for the centre, as a consequence of the closure of a previously well-used entrance.
- 9.11 A visits questionnaire was available in the hall for visitors to complete and post in the box provided; this was emptied by the visits manager quarterly. However, the questionnaire was available in English only and the return rate was low. The responses were collated and a quarterly report produced. Visitors identified problems with getting through to the booking line, which was not operated by dedicated booking staff, although detainees told us that visits were easy to book. The line was open from 9am to 9pm but after 6pm only one member of staff was able to take calls. However, there was a message service on the line, enabling visitors to leave their details and a member of staff to call back. There was no comments book in the hall.
- 9.12 Themed family days ran but were poorly attended, with some having no attendees at all. Around 80% of the visits staff had been trained by Kids VIP, a third-sector organisation, and had made efforts to ensure that these days were well structured and fun.
- 9.13 We were concerned to find that the UK Border Agency (UKBA) used visitor data for enforcement purposes; there was no awareness of this fact among visits staff, who could not therefore give clear information to detainees or visitors about the use to which biometric data

was put. This could have deterred visitors from attending the centre and at the very least lacked transparency. Staff in the visits hall and the visitors centre thought that visitor information was kept for three months (or less, if the visitor so requested) and then destroyed, and did not appear to be aware that the information was being used for other purposes.

## Recommendations

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- 9.14 Substantial food should be available for purchase by visitors.
- 9.15 All visits should start on time.
- 9.16 Information in the visits hall, including questionnaires, should be available in a range of languages.
- 9.17 Managers should consult detainees and visitors to find out why family days are so poorly attended and take remedial action as appropriate.
- 9.18 The centre should have a written policy on the use of biometric data and this should be accurately reflected in information displayed in reception and on the contractor and UKBA websites. Visitors' biometric data should be destroyed once the visited detainee has left the centre, or at the request of the visitor.

## Housekeeping points

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- 9.19 Female staff should check that male visitors are comfortable with being searched by them.
- 9.20 The correct postcode for visitors to the centre should be advertised to visitors.
- 9.21 A comments book should be provided in the visits hall.

## Telephones and mail

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- 9.22 All detainees were given a telephone card to make a free five-minute international telephone call on arrival and could keep their mobile telephone, provided that it did not have a camera or internet access. Those without a suitable mobile telephone could hire one from the centre, subject to availability, for 50 pence a week. Staff said that detainees were also entitled to a free five-minute call every seven days, although most detainees we spoke to were not aware of this.
- 9.23 All units had a reasonable number of fixed incoming and outgoing telephones, most of which were in a separate room, and all had privacy hoods. Instructions on using the telephones were displayed in a wide range of languages. Detainees could use the telephone at any time but the incoming line was connected between 9am and 9pm. Detainees were alerted to an incoming call over the unit public address system, although this was difficult to hear in detainees' rooms or the gym. In our survey, 70% of detainees said that it was easy or very easy to use the telephone, which was better than the 54% comparator. However, some detainees said that the payphones were expensive; a local or national call was charged at 20 pence a minute, and the cost of international calls ranged from 65p to £2.46 a minute. The tariffs were displayed in each telephone room.

- 9.24 Systems for receiving and sending mail were efficient. In our survey, only 13% of detainees said that they had encountered problems sending or receiving mail, which was better than the 28% comparator. During the inspection, detainees did not raise any specific concerns regarding mail. Detainees had good access to email; the internet rooms were well used and key information sites were accessible when tested. Detainees had easy access to the fax machines on each unit and could send a fax to their lawyer or UKBA free of charge.

## Recommendations

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- 9.25 Detainees without suitable telephones should be lent a mobile telephone without a hire charge.
- 9.26 Detainees should have access to outgoing telephones that accept budget national and international telephone cards, which should be available to buy.

## Housekeeping point

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- 9.27 The availability of a free five-minute call each week should be better publicised to detainees.

## Removal and release

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- 9.28 During June 2011, 107 detainees had been temporarily admitted or given bail. All had been offered a rail warrant and had either been taken to the station or caught the free visitors' bus. During the same period, 230 detainees had left, following the issue of removal directions, and one had been transferred.
- 9.29 There was no strategy for the removal and release of detainees or any guidance for staff, setting out how to advise and support detainees who were leaving the centre. No data were collected on the scale or nature of the problems that detainees faced when leaving the centre. No senior manager had been allocated the functional responsibility for removal and release. Detention custody managers said that officers helped detainees leaving the centre whenever possible, and we saw numerous good examples of this, but this was not carried out in a consistent and coordinated manner and usually relied on detainees approaching officers for help (see main recommendation HE47).
- 9.30 Planning for removal or release did not begin on the detainee's first day at the centre, and the approach taken was reactive rather than proactive, with no structured needs assessment. The welfare officer was given details of detainees who had received removal directions and then placed an invitation under their room door to attend a welfare appointment. Take-up was low, and there was no follow-up of detainees who did not attend. This system did not apply to detainees who had been granted temporary admission or released, on the grounds that there was not enough notice to provide any assistance.
- 9.31 High-risk strategy meetings, held to discuss the removal of at-risk detainees who had been served with removal papers, were superficial. The meetings were held every weekday but there was no evidenced multi-agency care planning approach. Actions from previous meetings did not appear to be discussed.
- 9.32 For detainees being removed who did not benefit from the assisted voluntary returns packages or facilitated return scheme, there was no formal system of financial assistance. However we saw some good examples of centre and local UKBA staff working closely together to help

detainees reach their country of origin safely. Applications could be made by staff to the detainee fund on a case-by-case basis, and were subject to approval by UKBA. Payments were usually small, for taxi fares and similar, but some were larger, to pay for onward domestic flights or a place in a hostel on return. Detainees could also access the surgeries delivered by community organisations in the centre for help (see paragraph 9.3).

## Recommendations

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- 9.33 **The welfare officer should see all detainees who have been issued with removal directions to offer assistance.**
- 9.34 **Multidisciplinary care plans should be agreed at the daily high-risk strategy meeting to manage the removal of high-risk detainees, and be evidenced in detainee files.**



# Section 10: Recommendations, housekeeping and good practice

The following is a listing of recommendations and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report.

## Main recommendations

To the Chief Executive, UKBA

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- 10.1 Rule 35 reports should provide objective professional assessments – for example, commenting on the consistency between injuries and alleged methods of torture. Case owner replies should carefully address all relevant factors in reviewing ongoing detention. (HE44)
- 10.2 Pregnant detainees should not normally be detained. In exceptional circumstances, continued detention should be considered in line with the UK Border Agency's (UKBA) published policy on the detention of pregnant women. (HE45)

## Main recommendations

To the centre manager

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- 10.3 There should be more paid work and more higher-level education to meet the needs of longer-stay and more able detainees. (HE46)
- 10.4 There should be a proactive, coordinated and strategically managed approach to removal and release, beginning with a needs assessment on the day that the detainee arrives. (HE47)

## Recommendations

To the Chief Executive, UKBA

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- 10.5 Detainees arriving from police stations should be accompanied by police records and relevant risk information. (1.7)
- 10.6 The UK Border Agency (UKBA) should keep easily accessible records of detainees' accumulated length of detention across the estate. (3.25)
- 10.7 UKBA staff should be visible and accessible to detainees. (3.26)
- 10.8 Detained family members should be held together, unless clear documented risk factors suggest otherwise. (3.27)
- 10.9 Monthly reviews should be served on time. UKBA managers should be able easily to monitor outstanding monthly reviews. (3.28)
- 10.10 UKBA should attend, or supply written information to, ACDT case reviews where immigration is a trigger. (4.18)
- 10.11 Detainees' cooperation or failure to cooperate with UKBA should not affect the process of allocating paid work roles. (6.12)
- 10.12 The 71 pence per day allowance given to detainees should be reviewed. (8.10)

## Recommendations

To UKBA and the centre

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- 10.13 Safer detention meetings should be attended by representatives from all relevant departments in the centre, including UKBA, reception and security. (4.7)
- 10.14 All age dispute cases should be assessed by social services. (4.27)

## Recommendations

To UKBA and the escort contractor

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- 10.15 Detainees should not be subjected to exhausting overnight journeys. (1.8)
- 10.16 Handcuffs should be used only on the basis of individual risk assessment. (1.9)

## Recommendations

To the centre manager

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### Arrival in detention

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- 10.17 Telephone interpreting should be used for reception and induction interviews whenever there is doubt about a detainee's understanding of English. (1.18)

### Environment and relationships

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- 10.18 All detainees should have mattresses that provide adequate support. (2.9)
- 10.19 Temperature in bedrooms should be kept at a comfortable level at all times. (2.10)
- 10.20 Information around the centre should be available in a range of appropriate languages. (2.11)
- 10.21 A review should be undertaken to ascertain how better to engage detainees and ensure good attendance at consultation meetings. (2.12)
- 10.22 There should be a considerably higher proportion of female staff. (2.22)
- 10.23 Detainees should have a named officer to provide consistent support. (2.23)

### Casework

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- 10.24 In liaison with the Legal Services Commission, the centre should ensure that detainees do not have to wait more than a week to access the detention advice surgery. (3.10)
- 10.25 A list of lawyers who are willing and able to represent detainees in the centre should be freely available. This list should be regularly checked and updated. Notices in the centre relating to legal advice should be updated regularly. (3.11)
- 10.26 The library should hold up-to-date country of origin information reports and legal textbooks. (3.12)
- 10.27 Detainees should be able to print documents of reasonable length, and the rules about printing should allow flexibility. (3.13)

## **Duty of care**

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- 10.28 Safer custody data should be monitored over 12-month periods, to determine long-term trends, and compared with the same period in previous years, to establish seasonal trends. (4.16)
- 10.29 Assessment, care in detention and teamwork (ACDT) documents should be opened when detainees express current thoughts of suicide or self-harm. (4.17)
- 10.30 Post-closure care should be consistent and managed efficiently by staff. (4.19)
- 10.31 Detainees should be able to make calls to the Samaritans in private and the service should be well advertised. (4.20)
- 10.32 A local age dispute policy should be introduced. (4.26)
- 10.33 Older detainees and those with disabilities should be identified and offered coordinated services as necessary by staff with relevant training and knowledge. (4.37)

## **Health services**

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- 10.34 There should be ongoing proactive engagement with detainees over their health needs and concerns about access to services. (5.6)
- 10.35 The use of space in the health care suite should be reviewed to determine its best use so that it can provide a full range of services. (5.7)
- 10.36 Managers should ensure that patient records are easily accessible when they are required. (5.15)
- 10.37 There should be a full range of well-advertised nurse-led clinics, and health services information should be available across the IRC in a variety of languages. (5.21)
- 10.38 A pharmacist should be available for counselling sessions, pharmacist-led clinics, clinical audit and a medication review. (5.26)
- 10.39 Suitably labelled pre-packs should be provided, and no more medication should be supplied than is prescribed. (5.27)
- 10.40 Patient group directions (PGDs) should be produced, to enable the supply of more potent medicines by the nursing/pharmacy staff where appropriate. A copy of the original signed PGDs should be present in the pharmacy and read and signed by all relevant staff. (5.28)
- 10.41 The use of paracetamol, codeine and amitriptyline should be reviewed. A step-wise approach to pain management, such as the World Health Organization analgesic ladder, should be modified for the IRC environment and used to reduce opiate usage. (5.29)
- 10.42 There should be robust primary mental health care services for detainees and regularly held mental health clinics. (5.41)
- 10.43 All staff should receive mental health awareness training. (5.42)

## **Activities**

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- 10.44 The range of activities available for male detainees should be reviewed and more done to encourage them into suitable activities. (6.13)
- 10.45 The range and quality of the book stock in the family unit library should be improved. (6.14)
- 10.46 Links with the health care unit should be developed, to refer detainees for remedial gym. (6.20)
- 10.47 Gym sessions specifically for older detainees should be introduced. (6.21)

## **Rules and management of the centre**

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- 10.48 Both members of staff present at a rub-down search of a woman should be female. (7.7)
- 10.49 Managers should analyse in detail the reasons for an increase in use of force and take remedial action. (7.16)
- 10.50 Communication during use of force should be calm and respectful, as well as appropriately assertive, and training should emphasise this. (7.17)
- 10.51 The care suite should be the first choice for separation when the risk of harm to persons or property is low. (7.18)
- 10.52 Temporary confinement under Rule 42 should be used only when a detainee is violent or refractory on arrival on Kingfisher unit, and only for as long as this behaviour continues. (7.19)
- 10.53 Complaints should be replied to promptly, in the language in which they have been submitted. (7.25)

## **Preparation for release**

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- 10.54 The welfare service should be advertised clearly in a range of relevant languages and cover should be provided at weekends. (9.5)
- 10.55 Substantial food should be available for purchase by visitors. (9.14)
- 10.56 All visits should start on time. (9.15)
- 10.57 Information in the visits hall, including questionnaires, should be available in a range of languages. (9.16)
- 10.58 Managers should consult detainees and visitors to find out why family days are so poorly attended and take remedial action as appropriate. (9.17)
- 10.59 The centre should have a written policy on the use of biometric data and this should be accurately reflected in information displayed in reception and on the contractor and UKBA websites. Visitors' biometric data should be destroyed once the visited detainee has left the centre, or at the request of the visitor. (9.18)

- 10.60 Detainees without suitable telephones should be lent a mobile telephone without a hire charge. (9.25)
- 10.61 Detainees should have access to outgoing telephones that accept budget national and international telephone cards, which should be available to buy. (9.26)
- 10.62 The welfare officer should see all detainees who have been issued with removal directions to offer assistance. (9.33)
- 10.63 Multidisciplinary care plans should be agreed at the daily high-risk strategy meeting to manage the removal of high-risk detainees, and be evidenced in detainee files. (9.34)

## Housekeeping points

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### Arrival in detention

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- 10.64 Detainees should be given a receipt or photocopy of their passport or other identity documents when handing them in to reception. (1.19)
- 10.65 Telephone interpreting facilities should be accessible in rooms used for induction. (1.23)

### Environment and relationships

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- 10.66 Female detainees on Crane unit should not require an escort around the centre. (2.13)
- 10.67 Staff should not enter rooms until detainees have had a chance to answer them after knocking. (2.24)
- 10.68 All staff should be aware of history sheets and use them to help to build a picture of detainees. (2.25)

### Casework

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- 10.69 Legal Ombudsman notices, leaflets and complaint forms should be available. (3.14)
- 10.70 The door to interview rooms should be closed when UKBA staff interview detainees. (3.29)
- 10.71 Detainees should be given bail application (B1) forms at their induction interviews. (3.30)
- 10.72 Detainees should not be interviewed on chairs fastened to the floor, unless an individualised risk assessment has deemed this to be appropriate. (3.31)

### Duty of care

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- 10.73 Managers should ensure that future bullying surveys have a reasonable level of response. (4.8)
- 10.74 External organisations should be represented at the diversity meeting. (4.38)
- 10.75 Key trends over time should be included in the monthly diversity monitoring statistics. (4.39)

## **Health services**

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- 10.76 Health care rooms should be used only by health services staff and should be secured with a health care suite key. (5.8)
- 10.77 Medication information should be available in a form that detainees can understand; the use of symbols might be beneficial. (5.30)
- 10.78 In-possession medication risk assessments should be undertaken on all detainees. (5.31)
- 10.79 Prescription charts should be filed in a manner to enable fast access to records. (5.32)
- 10.80 Old reference books should be discarded, and only the most recent copy should be kept. (5.33)

## **Activities**

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- 10.81 Software packages to support English for speakers of other languages (ESOL) and information technology (IT) classes should be loaded onto the computers, to provide an alternative to paper-based learning resources, and a printer should be installed in the IT classroom, to enable detainees to obtain a hard copy of their work. (6.15)
- 10.82 The computers in the family unit library should be upgraded to the same standard as those in the main central activity area. (6.16)
- 10.83 Faulty equipment in the gym should be repaired. (6.22)

## **Rules and management of the centre**

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- 10.84 UKBA should be represented at meetings of the security committee. (7.8)
- 10.85 The security committee should identify and record specific learning points from use of force incidents. (7.20)
- 10.86 The centre's request and complaint procedure should be updated in light of the current Detention Service Order on complaints handling. (7.26)

## **Services**

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- 10.87 The perception among some detainees that there was inequitable access to the cultural kitchens should be addressed. (8.7)

## **Preparation for release**

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- 10.88 More detailed analysis of over- and under-representation of specific nationalities and groups should be undertaken by the welfare officer. (9.6)
- 10.89 Female staff should check that male visitors are comfortable with being searched by them. (9.19)

- 10.90 The correct postcode for visitors to the centre should be advertised to visitors. (9.20)
- 10.91 A comments book should be provided in the visits hall. (9.21)
- 10.92 The availability of a free five-minute call each week should be better publicised to detainees. (9.27)

## Appendix I: Inspection team

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Nick Hardwick	Chief Inspector
Hindpal Singh Bhui	Team leader
Colin Carroll	Inspector
Martin Kettle	Inspector
Bev Alden	Inspector
Angela Johnson	Inspector
Helen Carter	Health care inspector
Sheila Willis	Ofsted inspector
Amy Summerfield	Researcher
Joseph Simmonds	Researcher

## Appendix II: Detainee population profile

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

(i) Age	No. of men	No. of women	No. of children	%
Under 1 year	N/A	N/A	N/A	N/A
1 to 6 years	N/A	N/A	N/A	N/A
7 to 11 years	N/A	N/A	N/A	N/A
12 to 16 years	N/A	N/A	N/A	N/A
16 to 17 years	N/A	N/A	N/A	N/A
18 years to 21 years	3	21	N/A	7.36
22 years to 29 years	8	77	N/A	26.07
30 years to 39 years	12	103	N/A	35.28
40 years to 49 years	1	67	N/A	20.86
50 years to 59 years	1	22	N/A	7.06
60 years to 69 years	2	9	N/A	3.37
70 or over	N/A	N/A	N/A	0
<b>Total</b>	<b>27</b>	<b>299</b>	<b>N/A</b>	<b>100</b>

(ii) Nationality	No. of men	No. of women	No. of children	%
Afghanistan	1	2	N/A	0.92
Albania	N/A	N/A	N/A	N/A
Algeria	1	2	N/A	0.92
Angola	N/A	1	N/A	0.31
Bangladesh	N/A	3	N/A	0.92
Belarus	N/A	1	N/A	0.31
Cameroon	N/A	8	N/A	2.45
China	4	26	N/A	9.20
Colombia	N/A	N/A	N/A	N/A
Congo (Brazzaville)	N/A	N/A	N/A	0.92
Congo Democratic Republic (Zaire)	N/A	3	N/A	0.92
Ecuador	N/A	N/A	N/A	N/A
Estonia	N/A	N/A	N/A	N/A
Georgia	2	1	N/A	0.92
Ghana	N/A	14	N/A	4.29
India	4	24	N/A	8.59
Iran	N/A	7	N/A	2.15
Iraq	N/A	N/A	N/A	N/A
Ivory Coast	N/A	N/A	N/A	N/A
Jamaica	N/A	17	N/A	5.21
Kenya	N/A	8	N/A	2.45
Kosovo	N/A	N/A	N/A	N/A
Latvia	N/A	N/A	N/A	N/A
Liberia	N/A	N/A	N/A	N/A
Lithuania	N/A	N/A	N/A	N/A
Malaysia	1	4	N/A	1.53
Moldova	N/A	N/A	N/A	N/A

Nigeria	1	44	N/A	13.80
Pakistan	6	27	N/A	10.12
Russia	N/A	1	N/A	0.31
Sierra Leone	N/A	1	N/A	0.31
Sri Lanka	N/A	16	N/A	4.91
Trinidad and Tobago	N/A	N/A	N/A	N/A
Turkey	N/A	N/A	N/A	N/A
Ukraine	N/A	1	N/A	N/A
Vietnam	1	12	N/A	3.99
Yugoslavia (FRY)	N/A	N/A	N/A	N/A
Zambia	N/A	1	N/A	0.31
Zimbabwe	N/A	2	N/A	0.61
Bolivia	2	5	N/A	2.15
Brazil	N/A	7	N/A	2.15
Eritrea	1	5	N/A	1.84
Malawi	N/A	5	N/A	1.53
Nepal	2	3	N/A	1.53
Philippines	N/A	5	N/A	1.53
South Africa	N/A	5	N/A	1.53
Uganda	N/A	5	N/A	1.53
Thailand	N/A	4	N/A	1.23
Namibia	N/A	3	N/A	0.92
Somalia	N/A	3	N/A	0.92
Gambia	N/A	2	N/A	0.61
Bosnia Herzegovina	N/A	1	N/A	0.31
Cote d'Ivoire	N/A	1	N/A	0.31
Dominican Republic	N/A	1	N/A	0.31
Guinea	N/A	1	N/A	0.31
Guyana	N/A	1	N/A	0.31
Hong Kong	N/A	1	N/A	0.31
Korea DR	N/A	1	N/A	0.31
Lebanon	N/A	1	N/A	0.31
Lesotho	N/A	1	N/A	0.31
Mexico	N/A	1	N/A	0.31
Mongolia	N/A	1	N/A	0.31
Niger	N/A	1	N/A	0.31
Romania	N/A	1	N/A	0.31
Senegal	N/A	1	N/A	0.31
Serbia	N/A	1	N/A	0.31
Singapore	N/A	1	N/A	0.31
Slovakia	N/A	1	N/A	0.31
Spain	N/A	1	N/A	0.31
Swaziland	N/A	1	N/A	0.31
Switzerland	N/A	1	N/A	0.31
Tanzania	N/A	1	N/A	0.31
United States	N/A	1	N/A	0.31
<b>Total</b>	<b>27</b>	<b>299</b>	<b>N/A</b>	<b>100</b>

(iv) Religion/belief	No. of men	No. of women	No. of children	%
Buddhist	3	27	N/A	9.2
Roman Catholic	2	19	N/A	6.44

Orthodox (Greek)	N/A	1	N/A	0.30
Other Christian religion	7	143	N/A	46.0
Hindu	4	23	N/A	8.28
Muslim	7	53	N/A	18.4
Sikh	1	11	N/A	3.68
Agnostic/atheist	2	9	N/A	3.37
Unknown	N/A	5	N/A	1.53
Jehovah's Witness	N/A	4	N/A	1.22
Traditional beliefs	1	3	N/A	1.22
Ahmadi Muslim	N/A	1	N/A	0.30
<b>Total</b>	<b>27</b>	<b>299</b>	<b>N/A</b>	<b>100</b>

(v) Length of time in detention in this centre	No. of men	No. of women	No. of children	%
Less than 1 week	6	58	N/A	19.63
1 to 2 weeks	4	38	N/A	12.88
2 to 4 weeks	2	47	N/A	15.03
1 to 2 months	10	63	N/A	22.39
2 to 4 months	3	55	N/A	17.79
4 to 6 months	2	18	N/A	6.13
6 to 8 months	0	6	N/A	1.84
8 to 10 months	0	4	N/A	1.23
More than 10 months (please note the longest length of time)	0	10	N/A	3.07
<b>Total</b>	<b>27</b>	<b>299</b>	<b>N/A</b>	<b>100</b>

(vi) Detainees' last location before detention in this centre	No. of men	No. of women	No. of children	%
Community	0	0	N/A	0
Another IRC	2	13	N/A	4.60
A short-term holding facility (e.g. at a port or reporting centre)	17	141	N/A	48.47
Police station	7	93	N/A	30.67
Prison	1	52	N/A	16.26
<b>Total</b>	<b>27</b>	<b>299</b>	<b>N/A</b>	<b>100</b>

# Appendix III: Summary of survey responses

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## Detainee survey methodology

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A voluntary, confidential and anonymous survey of the detainee population was carried out for this inspection. The results of this survey formed part of the evidence-base for the inspection.

### Choosing the sample size

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At the time of the survey on 27–28 June 2011, the detainee population at Yarl's Wood immigration removal centre (IRC) was 325. The questionnaire was offered to all detainees.

### Selecting the sample

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Questionnaires were offered to all adult detainees available at the time of the visit. A liaison officer, supplied to us by the IRC, organised nationality groups based on language to be convened throughout the course of the day. This ensured that all detainees were approached by the Inspectorate.

Completion of the questionnaire was voluntary. Questionnaires were offered in 21 different languages.

Interviews were carried out with any respondents with literacy difficulties. In total, three respondents were interviewed.

## Methodology

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Every attempt was made to distribute the questionnaires to each respondent, either individually or in language groups. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, respondents were asked to do one of the following:

- to have their questionnaire ready to hand back to a member of the research team at a specified time;
- to seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable; or
- to seal the questionnaire in the envelope provided and leave it in their room for collection.

Respondents were not asked to put their names on their questionnaire.

## Response rates

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In total, 155 respondents completed and returned their questionnaires. This represented 48% of the detainee population. The response rate was 48%. In total, 170 detainees did not complete a questionnaire; detainees either refused, the questionnaire was not returned or was returned blank. Eighty-six questionnaires (55%) were returned in English, 21 (14%) in Chinese,

11 (7%) in Urdu, nine each (6%) in Hindi and Punjabi, five (3%) in Farsi, three (2%) in French, two each (1%) in Somali, Spanish, Vietnamese and Portuguese, and one each (1%) in Albanian, Russian, and Tamil.

## Comparisons

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The following details the results from the survey. Data from each centre have been weighted, in order to mimic a consistent percentage sampled in each centre.

Some questions have been filtered according to the response to a previous question. Filtered questions are clearly indented and preceded by an explanation as to which respondents are included in the filtered questions. Otherwise, percentages provided refer to the entire sample. All missing responses are excluded from the analysis.

The following analyses have been conducted:

- The current survey responses in 2011 against comparator figures for all detainees surveyed in detention centres. This comparator is based on all responses from detainee surveys carried out in nine detention centres since February 2009.
- The current survey responses in 2011 against the responses of detainees surveyed at Yarl's Wood IRC in 2009.
- A comparison within the 2011 survey between the responses of non-English-speaking detainees and English-speaking detainees.
- A comparison within the 2011 survey between the responses of detainees who consider themselves to have a disability and those who do not consider themselves to have a disability.
- A comparison within the 2011 survey between the responses of male and female detainees.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures – that is, the difference is not due to chance alone. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading and where there is no significant difference, there is no shading. Orange shading has been used to show a significant difference in detainees' background details.

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and that of the previous survey, both sets of data have been coded in the same way. This may result in percentages from previous surveys looking higher or lower. However, both percentages are true of the populations they were taken from, and the statistical significance is correct.

## Summary

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In addition, a summary of the survey results is attached. This shows a breakdown of responses for each question. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary, so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'Not made a complaint' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of

different totals (all missing data are excluded). The actual numbers will match up as the data are cleaned to be consistent.

Percentages shown in the summary may differ by 1% or 2 % from that shown in the comparison data as the comparator data have been weighted for comparison purposes.

# Summary of detainee survey results

## Section 1: About you

<b>Q1</b>	<b>Are you male or female?</b>	
	Male.....	18 (12%)
	Female .....	136 (88%)
<b>Q2</b>	<b>What is your age?</b>	
	Under 18.....	0 (0%)
	18-21.....	15 (10%)
	22-29.....	45 (29%)
	30-39.....	48 (31%)
	40-49.....	31 (20%)
	50-59.....	12 (8%)
	60-69.....	2 (1%)
	70 or over.....	0 (0%)
<b>Q3</b>	<b>What region are you from? (Please tick only one.)</b>	
	Africa.....	55 (36%)
	North America .....	3 (2%)
	South America.....	5 (3%)
	Indian subcontinent (India, Pakistan, Bangladesh, Sri Lanka).....	35 (23%)
	China .....	17 (11%)
	Other Asia .....	17 (11%)
	Caribbean .....	10 (7%)
	Europe.....	5 (3%)
	Middle East.....	4 (3%)
<b>Q4</b>	<b>Do you understand spoken English?</b>	
	Yes .....	111 (73%)
	No .....	41 (27%)
<b>Q5</b>	<b>Do you understand written English?</b>	
	Yes .....	92 (66%)
	No .....	47 (34%)
<b>Q6</b>	<b>What would you classify, if any, as your religious group?</b>	
	None .....	4 (3%)
	Church of England .....	13 (9%)
	Catholic .....	17 (11%)
	Protestant.....	10 (7%)
	Other Christian denomination .....	39 (26%)
	Buddhist.....	18 (12%)
	Hindu .....	7 (5%)
	Jewish .....	1 (1%)
	Muslim.....	33 (22%)
	Sikh .....	9 (6%)

<b>Q7</b>	<b>Do you have a disability?</b>	
	Yes .....	18 (13%)
	No .....	124 (87%)

## Section 2: Immigration detention

<b>Q8</b>	<b>When being detained, were you told the reasons why in a language you could understand?</b>	
	Yes .....	105 (73%)
	No .....	39 (27%)
<b>Q9</b>	<b>Including this centre, how many places have you been held in as an immigration detainee since being detained (including police stations, airport detention rooms, removal centres, and prison following end of sentence)?</b>	
	One to two.....	119 (86%)
	Three to five.....	17 (12%)
	Six or more.....	3 (2%)
<b>Q10</b>	<b>How long have you been detained in this centre?</b>	
	Less than 1 week.....	19 (13%)
	More than 1 week less than 1 month.....	48 (32%)
	More than 1 month less than 3 months .....	51 (34%)
	More than 3 months less than 6 months .....	17 (11%)
	More than 6 months less than 9 months .....	5 (3%)
	More than 9 months less than 12 months.....	5 (3%)
	More than 12 months.....	4 (3%)

## Section 3: Transfers and escorts

<b>Q11</b>	<b>Before you arrived here did you receive any written information about what would happen to you in a language you could understand?</b>	
	Yes .....	50 (34%)
	No .....	82 (55%)
	<b>Do not remember</b> .....	16 (11%)
<b>Q12</b>	<b>How long did you spend in the escort vehicle to get to this centre on your most recent journey?</b>	
	Less than one hour.....	2 (1%)
	One to two hours .....	33 (22%)
	Two to four hours.....	83 (55%)
	More than four hours .....	28 (19%)
	<b>Do not remember</b> .....	5 (3%)
<b>Q13</b>	<b>How did you feel you were treated by the escort staff?</b>	
	Very well.....	20 (13%)
	Well .....	60 (40%)
	Neither.....	56 (37%)
	Badly.....	4 (3%)
	Very badly.....	9 (6%)
	<b>Do not remember</b> .....	2 (1%)

## Section 4: Reception and first night

<b>Q15</b>	<b>Were you seen by a member of health care staff in reception?</b>	
	Yes .....	141 (92%)
	No .....	6 (4%)
	<b>Do not remember</b> .....	7 (5%)
<b>Q16</b>	<b>When you were searched in reception, was this carried out in a sensitive way?</b>	
	Yes .....	104 (70%)
	No .....	26 (18%)
	<b>Do not remember/not applicable</b> .....	18 (12%)
<b>Q17</b>	<b>Overall, how well did you feel you were treated by staff in reception?</b>	
	Very well .....	30 (20%)
	Well .....	72 (47%)
	Neither.....	36 (24%)
	Badly.....	8 (5%)
	Very badly .....	5 (3%)
	<b>Do not remember</b> .....	2 (1%)
<b>Q18</b>	<b>On your day of arrival did you receive information about what was going to happen to you?</b>	
	Yes .....	49 (32%)
	No .....	91 (59%)
	<b>Do not remember</b> .....	14 (9%)
<b>Q19</b>	<b>On your day of arrival did you receive information about what support was available to you in this centre?</b>	
	Yes .....	70 (46%)
	No .....	63 (41%)
	<b>Do not remember</b> .....	20 (13%)
<b>Q20</b>	<b>Was any of this information given to you in a translated form?</b>	
	<b>Do not need translated material</b> .....	43 (30%)
	Yes .....	25 (17%)
	No .....	76 (53%)
<b>Q21</b>	<b>On your day of arrival did you get the opportunity to change into clean clothing?</b>	
	Yes .....	109 (71%)
	No .....	33 (22%)
	<b>Do not remember</b> .....	11 (7%)
<b>Q22</b>	<b>Did you feel safe on your first night here?</b>	
	Yes .....	83 (54%)
	No .....	59 (39%)
	<b>Do not remember</b> .....	11 (7%)
<b>Q23</b>	<b>Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)</b>	
	<b>Not had any problems</b> .....	39 (28%)
	Loss of property.....	12 (9%)
	Contacting family .....	28 (20%)
	Access to legal advice.....	27 (19%)

<i>Feeling depressed or suicidal</i> .....	53 (38%)
<i>Health problems</i> .....	40 (29%)

<b>Q24</b>	<b>Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?</b>	
	<i>Not had any problems</i> .....	39 (30%)
	Yes .....	38 (30%)
	No .....	51 (40%)

## Section 5: Legal rights and immigration

<b>Q26</b>	<b>Do you have a lawyer?</b>	
	<i>Do not need one</i> .....	8 (5%)
	Yes .....	118 (77%)
	No .....	27 (18%)

<b>Q27</b>	<b>Do you get free legal advice?</b>	
	<i>Do not need legal advice</i> .....	9 (6%)
	Yes .....	45 (31%)
	No .....	89 (62%)

<b>Q28</b>	<b>Can you contact your lawyer easily?</b>	
	Yes .....	91 (61%)
	No .....	19 (13%)
	<i>Do not know/not applicable</i> .....	38 (26%)

<b>Q29</b>	<b>Have you had a visit from your lawyer?</b>	
	<i>Do not have one</i> .....	35 (24%)
	Yes .....	47 (33%)
	No .....	62 (43%)

<b>Q30</b>	<b>Can you get legal books in the library?</b>	
	Yes .....	78 (52%)
	No .....	32 (21%)
	<i>Do not know/not applicable</i> .....	39 (26%)

<b>Q31</b>	<b>How easy or difficult is it for you to obtain bail information?</b>	
	<i>Very easy</i> .....	11 (8%)
	<i>Easy</i> .....	25 (18%)
	<i>Neither</i> .....	36 (26%)
	<i>Difficult</i> .....	26 (18%)
	<i>Very difficult</i> .....	32 (23%)
	<i>Not applicable</i> .....	11 (8%)

<b>Q32</b>	<b>Can you get access to official information reports on your country?</b>	
	Yes .....	24 (17%)
	No .....	91 (63%)
	<i>Do not know/not applicable</i> .....	29 (20%)

<b>Q33</b>	<b>How easy or difficult is it to see the centre's immigration staff when you want?</b>	
	<i>Do not know/have not tried</i> .....	48 (33%)
	<i>Very easy</i> .....	13 (9%)

Easy.....	26 (18%)
Neither.....	18 (12%)
Difficult .....	25 (17%)
Very difficult.....	15 (10%)

## Section 6: Respectful detention

<b>Q35</b>	<b>Can you clean your clothes easily?</b>	
	Yes .....	134 (86%)
	No .....	21 (14%)
<b>Q36</b>	<b>Are you normally able to have a shower every day?</b>	
	Yes .....	142 (94%)
	No .....	9 (6%)
<b>Q37</b>	<b>Is it normally quiet enough for you to be able to relax or sleep in your room at night time?</b>	
	Yes .....	99 (65%)
	No .....	53 (35%)
<b>Q38</b>	<b>Can you normally get access to your property held by staff at the centre if you need to?</b>	
	Yes .....	84 (56%)
	No .....	44 (29%)
	<b>Do not know</b> .....	23 (15%)
<b>Q39</b>	<b>What is the food like here?</b>	
	Very good.....	3 (2%)
	Good.....	48 (32%)
	Neither.....	35 (23%)
	Bad.....	23 (15%)
	Very bad.....	42 (28%)
<b>Q40</b>	<b>Does the shop sell a wide enough range of goods to meet your needs?</b>	
	<b>Have not bought anything yet</b> .....	12 (8%)
	Yes .....	56 (38%)
	No .....	81 (54%)
<b>Q41</b>	<b>Do you feel that your religious beliefs are respected?</b>	
	Yes .....	127 (83%)
	No .....	15 (10%)
	<b>Not applicable</b> .....	11 (7%)
<b>Q42</b>	<b>Are you able to speak to a religious leader of your faith in private if you want to?</b>	
	Yes .....	92 (62%)
	No .....	24 (16%)
	<b>Do not know/not applicable</b> .....	33 (22%)
<b>Q43</b>	<b>How easy or difficult is it to get a complaint form?</b>	
	Very easy.....	28 (18%)
	Easy.....	54 (36%)
	Neither.....	18 (12%)
	Difficult .....	8 (5%)

Very difficult..... 3 (2%)  
**Do not know** ..... 41 (27%)

**Q44 Have you made a complaint since you have been at this centre?**  
 Yes ..... 44 (29%)  
 No ..... 97 (63%)  
**Do not know how to**..... 13 (8%)

**Q45 If yes, do you feel complaints are sorted out fairly?**  
 Yes ..... 7 (5%)  
 No ..... 32 (21%)  
**Not made a complaint**..... 110 (74%)

### Section 7: Staff

In order to assess how well you are being treated by staff, we ask that you fill in the following information. This will not affect your immigration case. Your responses to these questions will remain both confidential and anonymous. This means that we do not ask you to put your name on this questionnaire and centre staff will not have access to them.

**Q47 Do you have a member of staff at the centre that you can turn to for help if you have a problem?**  
 Yes ..... 100 (68%)  
 No ..... 46 (32%)

**Q48 Do most staff at the centre treat you with respect?**  
 Yes ..... 127 (84%)  
 No ..... 24 (16%)

**Q49 Have any members of staff physically restrained you (C and R) in the last six months?**  
 Yes ..... 16 (12%)  
 No ..... 120 (88%)

**Q50 Have you spent a night in the separation/isolation unit in the last six months?**  
 Yes ..... 14 (10%)  
 No ..... 126 (90%)

### Section 8: Safety

In order to assess how safe this centre is, we ask that you fill in the following information. This will not affect your immigration case. Your responses to these questions will remain both confidential and anonymous. This means that we do not ask you to put your name on this questionnaire and centre staff will not have access to them.

**Q52 Do you feel unsafe in this centre?**  
 Yes ..... 52 (36%)  
 No ..... 94 (64%)

**Q53 Has another detainee or group of detainees victimised (insulted or assaulted) you here?**  
 Yes ..... 18 (12%)  
 No ..... 128 (88%)

**Q54 If you have felt victimised by a detainee/group of detainees, what did the incident(s) involve? (Please tick all that apply to you.)**

<i>Physical abuse (being hit, kicked or assaulted)</i> .....	1 (1%)
<i>Because of your nationality</i> .....	6 (4%)
<i>Having your property taken</i> .....	2 (1%)
<i>Drugs</i> .....	0 (0%)
<i>Because you have a disability</i> .....	4 (3%)
<i>Because of your religion/religious beliefs</i> .....	0 (0%)

**Q55 Has a member of staff or group of staff victimised (insulted or assaulted) you here?**

Yes .....	18 (12%)
No .....	125 (88%)

**Q56 If you have felt victimised by a member of staff/group of staff, what did the incident(s) involve? (Please tick all that apply to you.)**

<i>Physical abuse (being hit, kicked or assaulted)</i> .....	4 (3%)
<i>Because of your nationality</i> .....	9 (6%)
<i>Drugs</i> .....	0 (0%)
<i>Because you have a disability</i> .....	4 (3%)
<i>Because of your religion/religious beliefs</i> .....	2 (1%)

**Q57 If you have been victimised by detainees or staff, did you report it?**

Yes .....	10 (7%)
No .....	12 (9%)
<b>Not been victimised</b> .....	117 (84%)

**Q58 Have you ever felt threatened or intimidated by another detainee/group of detainees in here?**

Yes .....	11 (9%)
No .....	117 (91%)

**Q59 Have you ever felt threatened or intimidated by a member of staff in here?**

Yes .....	20 (15%)
No .....	110 (85%)

## Section 9: Health care

**Q61 Is health information available in your own language?**

Yes .....	50 (35%)
No .....	63 (45%)
<b>Do not know</b> .....	28 (20%)

**Q62 Is a qualified interpreter available if you need one during health care assessments?**

<b>Do not need an interpreter/do not know</b> .....	62 (47%)
Yes .....	23 (17%)
No .....	47 (36%)

**Q63 Are you currently taking medication?**

Yes .....	74 (52%)
No .....	68 (48%)

**Q64 What do you think of the overall quality of the health care here?**

<b>Have not been to health care</b> .....	10 (7%)
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Very good.....	13 (9%)
Good.....	40 (28%)
Neither.....	39 (27%)
Bad.....	18 (13%)
Very bad.....	22 (15%)

## Section 10: Activities

<b>Q66</b>	<b>Are you doing any education here?</b>	
	Yes.....	22 (15%)
	No.....	120 (85%)
<b>Q67</b>	<b>Is the education helpful?</b>	
	<b>Not doing any education</b> .....	120 (86%)
	Yes.....	18 (13%)
	No.....	2 (1%)
<b>Q68</b>	<b>Can you work here if you want to?</b>	
	<b>Do not want to work</b> .....	35 (26%)
	Yes.....	74 (54%)
	No.....	27 (20%)
<b>Q69</b>	<b>Is there enough to do here to fill your time?</b>	
	Yes.....	79 (57%)
	No.....	60 (43%)
<b>Q70</b>	<b>How easy or difficult is it to go to the library?</b>	
	<b>Do not know/do not want to go</b> .....	5 (4%)
	Very easy.....	64 (46%)
	Easy.....	53 (38%)
	Neither.....	17 (12%)
	Difficult.....	0 (0%)
	Very difficult.....	1 (1%)
<b>Q71</b>	<b>How easy or difficult is it to go to the gym?</b>	
	<b>Do not know/do not want to go</b> .....	12 (9%)
	Very easy.....	42 (30%)
	Easy.....	62 (44%)
	Neither.....	15 (11%)
	Difficult.....	6 (4%)
	Very difficult.....	3 (2%)

## Section 11: Keeping in touch with family and friends

<b>Q73</b>	<b>How easy or difficult is it to use the phone?</b>	
	<b>Do not know/have not tried</b> .....	9 (6%)
	Very easy.....	47 (33%)
	Easy.....	52 (37%)
	Neither.....	14 (10%)
	Difficult.....	10 (7%)
	Very difficult.....	9 (6%)

<b>Q74</b>	<b>Have you had any problems with sending or receiving mail?</b>	
	Yes .....	18 (13%)
	No .....	76 (54%)
	<b>Do not know</b> .....	46 (33%)
<b>Q75</b>	<b>Have you had a visit since you have been here from your family or friends?</b>	
	Yes .....	76 (54%)
	No .....	64 (46%)
<b>Q76</b>	<b>How did staff in the visits area treat you?</b>	
	<b>Not had any visits</b> .....	52 (38%)
	<i>Very well</i> .....	34 (25%)
	<i>Well</i> .....	33 (24%)
	<i>Neither</i> .....	16 (12%)
	<i>Badly</i> .....	2 (1%)
	<i>Very badly</i> .....	0 (0%)

Main comparator and comparator to last time



Detainee survey responses: Yarl's Wood IRC 2011

Detainee survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

		Yarl's Wood IRC 2011	IRC comparator	Yarl's Wood IRC 2011	Yarl's Wood IRC 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>Number of completed questionnaires returned</b>		155	988	155	101
<b>SECTION 1: General information</b>					
1	Are you male?	12%	99%	12%	5%
2	Are you aged under 21 years?	10%	11%	10%	8%
4	Do you understand spoken English?	73%	75%	73%	75%
5	Do you understand written English?	66%	69%	66%	64%
6	Are you Muslim?	22%	41%	22%	18%
7	Do you have a disability?	13%	19%	13%	16%
<b>SECTION 2: Immigration detention</b>					
8	When being detained, were you told the reasons why in a language you could understand?	73%	68%	73%	75%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	2%	14%	2%	2%
10	Have you been detained in this centre for more than one month?	55%	52%	55%	
<b>SECTION 3: Transfers and escorts</b>					
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	34%	29%	34%	37%
12	Did you spend more than four hours in the escort van to get to this centre?	19%	27%	19%	35%
13	Were you treated well/very well by the escort staff?	53%	54%	53%	57%
<b>SECTION 4: Reception and First Night</b>					
15	Were you seen by a member of health care staff in reception?	92%	85%	92%	94%
16	When you were searched in reception was this carried out in a sensitive way?	70%	67%	70%	75%
17	Were you treated well/very well by staff in reception?	67%	56%	67%	64%
18	Did you receive information about what was going to happen to you on your day of arrival?	32%	30%	32%	30%
19	Did you receive information about what support was available to you in this centre on your day of arrival?	46%	50%	46%	
For those who required information in a translated form:					
20	Was any of this information provided in a translated form?	25%	24%	25%	23%
21	Did you get the opportunity to change into clean clothing on your day of arrival?	71%	50%	71%	54%
22	Did you feel safe on your first night here?	54%	46%	54%	43%
23a	Did you have any problems when you first arrived?	72%	70%	72%	76%
23b	Did you have any problems with loss of transferred property when you first arrived?	9%	24%	9%	24%
23c	Did you have any problems contacting family when you first arrived?	20%	22%	20%	21%

## Main comparator and comparator to last time

### Key to tables

		Yarl's Wood IRC 2011	IRC comparator	Yarl's Wood IRC 2011	Yarl's Wood IRC 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 4: Reception and first night continued</b>					
<b>23d</b>	Did you have any problems accessing legal advice when you first arrived?	20%	20%	20%	27%
<b>23e</b>	Did you have any problems with feeling depressed or suicidal when you first arrived?	38%	27%	38%	40%
<b>23f</b>	Did you have any health problems when you first arrived?	29%	29%	29%	37%
For those who had problems on arrival:					
<b>24</b>	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	43%	27%	43%	33%
<b>SECTION 5: Legal rights and immigration</b>					
<b>26</b>	Do you have a lawyer?	77%	65%	77%	74%
For those who have a lawyer:					
<b>28</b>	Can you contact your lawyer easily?	83%	68%	83%	
<b>29</b>	Have you had a visit from your lawyer?	43%	55%	43%	57%
<b>27</b>	Do you get free legal advice?	32%	43%	32%	38%
<b>30</b>	Can you get legal books in the library?	52%	26%	52%	27%
<b>31</b>	Is it easy/very easy for you to obtain bail information?	26%	28%	26%	27%
<b>32</b>	Can you get access to official information reports on your country?	17%	15%	17%	10%
<b>33</b>	Is it easy/very easy to see this centre's immigration staff when you want?	27%	44%	27%	
<b>SECTION 6: Respectful detention</b>					
<b>35</b>	Can you clean your clothes easily?	87%	83%	87%	
<b>36</b>	Are you normally able to have a shower every day?	94%	94%	94%	97%
<b>37</b>	Is it normally quiet enough for you to be able to sleep in your room at night?	65%	52%	65%	49%
<b>38</b>	Can you normally get access to your property held by staff at the centre, if you need to?	56%	54%	56%	47%
<b>39</b>	Is the food good/very good?	34%	24%	34%	17%
<b>40</b>	Does the shop sell a wide enough range of goods to meet your needs?	38%	30%	38%	30%
<b>41</b>	Do you feel that your religious beliefs are respected?	83%	64%	83%	76%
<b>42</b>	Are you able to speak to a religious leader of your own faith if you want to?	62%	52%	62%	55%
<b>43</b>	Is it easy/very easy to get a complaint form?	54%	47%	54%	53%
<b>44</b>	Have you made a complaint since you have been at this centre?	29%	34%	29%	37%
For those who have made a complaint:					
<b>45</b>	Do you feel complaints are sorted out fairly?	18%	20%	18%	32%

## Main comparator and comparator to last time

### Key to tables

	Any percentage highlighted in green is significantly better	Yarl's Wood IRC 2011	IRC comparator		
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 7: Staff</b>					
47	Do you have a member of staff you can turn to for help if you have a problem?	68%	54%		
48	Do most staff treat you with respect?	84%	66%	84%	64%
49	Have any members of staff physically restrained you in the last six months?	12%	15%	12%	6%
50	Have you spent a night in the segregation unit in the last six months?	10%	18%	10%	8%
<b>SECTION 8: Safety</b>					
52	Do you feel unsafe in this centre?	36%	38%	36%	
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	12%	31%	12%	25%
54a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	1%	9%	1%	5%
54b	Have you been victimised because of your nationality since you have been here? (By detainees)	4%	9%	4%	8%
54c	Have you ever had your property taken since you have been here? (By detainees)	1%	9%	1%	2%
54d	Have you been victimised because of drugs since you have been here? (By detainees)	0%	4%	0%	0%
54e	Have you ever been victimised here because you have a disability? (By detainees)	3%	3%	3%	0%
54f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	0%	6%	0%	0%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	13%	25%	13%	23%
56a	Have you been hit, kicked or assaulted since you have been here? (By staff)	3%	5%	3%	1%
56b	Have you been victimised because of your nationality since you have been here? (By staff)	6%	9%	6%	5%
56c	Have you been victimised because of drugs since you have been here? (By staff)	0%	2%	0%	1%
56d	Have you ever been victimised here because you have a disability? (By staff)	3%	3%	3%	0%
56e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	1%	4%	1%	0%
For those who have been victimised by detainees or staff:					
57	Did you report it?	46%	46%	46%	35%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	9%	25%	9%	9%
59	Have you ever felt threatened or intimidated by a member of staff in here?	15%	20%	15%	17%

## Main comparator and comparator to last time

### Key to tables

		Yarl's Wood IRC 2011	IRC comparator	Yarl's Wood IRC 2011	Yarl's Wood IRC 2009
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
<b>SECTION 9: Health services</b>					
61	Is health information available in your own language?	36%	37%	36%	34%
62	Is a qualified interpreter available if you need one during health care assessments?	17%	12%	17%	18%
63	Are you currently taking medication?	52%	43%	52%	64%
For those who have been to health care:					
64	Do you think the overall quality of health care in this centre good/very good?	40%	33%	40%	33%
<b>SECTION 10: Activities</b>					
66	Are you doing any education here?	15%	27%	15%	14%
For those doing education here:					
67	Is the education helpful?	91%	86%	91%	83%
68	Can you work here if you want to?	54%	51%	54%	56%
69	Is there enough to do here to fill your time?	57%	34%	57%	34%
70	Is it easy/very easy to go to the library?	84%	70%	84%	77%
71	Is it easy/very easy to go to the gym?	74%	69%	74%	47%
<b>SECTION 11: Keeping in touch with family and friends</b>					
73	Is it easy/very easy to use the phone?	70%	54%	70%	
74	Have you had any problems with sending or receiving mail?	13%	28%	13%	25%
75	Have you had a visit since you have been in here from your family or friends?	54%	46%	54%	67%
For those who have had visits:					
76	Do you feel you are treated well/very well by staff in the visits area?	79%	62%	79%	71%



## Key questions (non-English speakers) Yarl's Wood IRC 2011

**Detainee survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

### Key to tables

		Non-English speakers	English speakers
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>41</b>	<b>111</b>
<b>8</b>	When being detained, were you told the reasons why in a language you could understand?	<b>78%</b>	<b>73%</b>
<b>9</b>	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	<b>0%</b>	<b>3%</b>
<b>10</b>	Have you been in this centre for more than one month?	<b>51%</b>	<b>56%</b>
<b>11</b>	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	<b>28%</b>	<b>37%</b>
<b>13</b>	Were you treated well/very well by the escort staff?	<b>40%</b>	<b>57%</b>
<b>17</b>	Were you treated well/very well by staff in reception?	<b>44%</b>	<b>76%</b>
<b>18</b>	Did you receive information about what was going to happen to you on your day of arrival?	<b>31%</b>	<b>33%</b>
<b>19</b>	Did you receive information about what support was available to you on your day of arrival?	<b>35%</b>	<b>50%</b>
<b>22</b>	Did you feel safe on your first night here?	<b>55%</b>	<b>55%</b>
<b>23</b>	Did you have any problems when you first arrived?	<b>74%</b>	<b>70%</b>
<b>26</b>	Do you have a lawyer?	<b>79%</b>	<b>76%</b>
<b>33</b>	Is it easy/very easy to see the centre's immigration staff when you want?	<b>26%</b>	<b>26%</b>
<b>35</b>	Can you clean your clothes easily?	<b>87%</b>	<b>88%</b>
<b>36</b>	Are you normally able to have a shower every day?	<b>93%</b>	<b>95%</b>
<b>43</b>	Is it easy/very easy to get a complaint form?	<b>51%</b>	<b>55%</b>
<b>44</b>	Have you made a complaint since you have been at this centre?	<b>10%</b>	<b>35%</b>
<b>47</b>	Do you have a member of staff you can turn to for help if you have a problem?	<b>69%</b>	<b>71%</b>
<b>48</b>	Do most staff treat you with respect?	<b>85%</b>	<b>83%</b>
<b>52</b>	Do you feel unsafe in this centre?	<b>34%</b>	<b>36%</b>
<b>53</b>	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	<b>10%</b>	<b>13%</b>

### Key to tables

		Non-English speakers	English speakers
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>55</b>	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	17%	12%
<b>58</b>	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	3%	11%
<b>59</b>	Have you ever felt threatened or intimidated by a member of staff in here?	9%	18%
<b>61</b>	Is health information available in your own language?	28%	39%
<b>62</b>	Is a qualified interpreter available if you need one during health care assessments?	37%	11%
<b>66</b>	Are you doing any education here?	17%	16%
<b>68</b>	Can you work here if you want to?	50%	56%
<b>69</b>	Is there enough to do here to fill your time?	67%	54%
<b>70</b>	Is it easy/very easy to go to the library?	82%	83%
<b>71</b>	Is it easy/very easy to go to the gym?	70%	75%
<b>73</b>	Is it easy/very easy to use the phone?	81%	67%
<b>74</b>	Have you had any problems with sending or receiving mail?	6%	16%
<b>75</b>	Have you had a visit since you have been in here from your family or friends?	39%	61%



## Diversity Analysis - Disability

### Key questions (disability analysis) Yarl's Wood IRC 2011

**Detainee survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>18</b>	<b>124</b>
<b>4</b>	Do you understand spoken English?	<b>77%</b>	<b>73%</b>
<b>9</b>	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	<b>6%</b>	<b>2%</b>
<b>10</b>	Have you been in this centre for more than one month?	<b>71%</b>	<b>54%</b>
<b>13</b>	Were you treated well/very well by the escort staff?	<b>55%</b>	<b>54%</b>
<b>15</b>	Were you seen by a member of health care staff in reception?	<b>100%</b>	<b>90%</b>
<b>16</b>	When you were searched in reception was this carried out in a sensitive way?	<b>78%</b>	<b>69%</b>
<b>17</b>	Were you treated well/very well by staff in reception?	<b>55%</b>	<b>69%</b>
<b>22</b>	Did you feel safe on your first night here?	<b>31%</b>	<b>59%</b>
<b>23</b>	Did you have any problems when you first arrived?	<b>100%</b>	<b>66%</b>
<b>23f</b>	Did you have any health problems when you first arrived?	<b>50%</b>	<b>26%</b>
<b>26</b>	Do you have a lawyer?	<b>61%</b>	<b>79%</b>
<b>33</b>	Is it easy/very easy to see this centre's immigration staff when you want?	<b>22%</b>	<b>27%</b>
<b>35</b>	Can you clean your clothes easily?	<b>78%</b>	<b>89%</b>
<b>36</b>	Are you normally able to have a shower every day?	<b>95%</b>	<b>94%</b>
<b>43</b>	Is it easy/very easy to get a complaint form?	<b>45%</b>	<b>57%</b>
<b>44</b>	Have you made a complaint since you have been at this centre?	<b>29%</b>	<b>29%</b>
<b>47</b>	Do you have a member of staff you can turn to for help if you have a problem?	<b>58%</b>	<b>69%</b>
<b>48</b>	Do most staff treat you with respect?	<b>89%</b>	<b>83%</b>
<b>49</b>	Have any members of staff physically restrained you in the last six months?	<b>17%</b>	<b>12%</b>
<b>50</b>	Have you spent a night in the segregation unit in the last six months?	<b>11%</b>	<b>10%</b>

## Diversity Analysis - Disability

### Key to tables

	Any percentage highlighted in green is significantly better	<b>Consider themselves to have a disability</b>	<b>Do not consider themselves to have a disability</b>
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in prisoners' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>52</b>	Do you feel unsafe in this centre?	<b>45%</b>	<b>33%</b>
<b>53</b>	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	<b>16%</b>	<b>12%</b>
<b>55</b>	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	<b>11%</b>	<b>13%</b>
<b>58</b>	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	<b>12%</b>	<b>9%</b>
<b>59</b>	Have you ever felt threatened or intimidated by a member of staff in here?	<b>23%</b>	<b>14%</b>
<b>62</b>	Is a qualified interpreter available if you need one during health care assessments?	<b>7%</b>	<b>18%</b>
<b>63</b>	Are you currently taking medication?	<b>69%</b>	<b>49%</b>
<b>66</b>	Are you doing any education here?	<b>23%</b>	<b>13%</b>
<b>69</b>	Is there enough to do here to fill your time?	<b>23%</b>	<b>62%</b>
<b>70</b>	Is it easy/very easy to go to the library?	<b>82%</b>	<b>84%</b>
<b>71</b>	Is it easy/very easy to go to the gym?	<b>66%</b>	<b>76%</b>
<b>73</b>	Is it easy/very easy to use the phone?	<b>62%</b>	<b>72%</b>
<b>74</b>	Have you had any problems with sending or receiving mail?	<b>6%</b>	<b>13%</b>
<b>75</b>	Have you had a visit since you have been in here from your family or friends?	<b>34%</b>	<b>57%</b>

## Gender comparator



### Detainee survey responses: Yarl's Wood IRC 2011

**Detainee survey responses** (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

#### Key to tables

		Male detainees	Female detainees
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
<b>Number of completed questionnaires returned</b>		<b>18</b>	<b>136</b>
<b>SECTION 1: General information</b>			
<b>2</b>	Are you aged under 21 years?	16%	9%
<b>4</b>	Do you understand spoken English?	66%	75%
<b>5</b>	Do you understand written English?	64%	67%
<b>6</b>	Are you Muslim?	31%	21%
<b>7</b>	Do you have a disability?	11%	13%
<b>SECTION 2: Immigration detention</b>			
<b>8</b>	When being detained, were you told the reasons why in a language you could understand?	71%	74%
<b>9</b>	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	0%	2%
<b>10</b>	Have you been detained in this centre for more than one month?	55%	55%
<b>SECTION 3: Transfers and escorts</b>			
<b>11</b>	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	40%	33%
<b>12</b>	Did you spend more than four hours in the escort van to get to this centre?	5%	21%
<b>13</b>	Were you treated well/very well by the escort staff?	50%	54%
<b>SECTION 4: Reception and First Night</b>			
<b>15</b>	Were you seen by a member of health care staff in reception?	95%	92%
<b>16</b>	When you were searched in reception was this carried out in a sensitive way?	78%	70%
<b>17</b>	Were you treated well/very well by staff in reception?	71%	66%
<b>18</b>	Did you receive information about what was going to happen to you on your day of arrival?	16%	34%
<b>19</b>	Did you receive information about what support was available to you in this centre on your day of arrival?	40%	47%
For those who required information in a translated form:			
<b>20</b>	Was any of this information provided in a translated form?	24%	25%
<b>21</b>	Did you get the opportunity to change into clean clothing on your day of arrival?	71%	72%
<b>22</b>	Did you feel safe on your first night here?	50%	55%
<b>23a</b>	Did you have any problems when you first arrived?	62%	73%
<b>23b</b>	Did you have any problems with loss of transferred property when you first arrived?	0%	10%
<b>23c</b>	Did you have any problems contacting family when you first arrived?	6%	21%

## Gender comparator

### Key to tables

	Any percentage highlighted in green is significantly better	Male detainees	Female detainees
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<b>SECTION 4: Reception and first night continued</b>			
23d	Did you have any problems accessing legal advice when you first arrived?	32%	18%
23e	Did you have any problems with feeling depressed or suicidal when you first arrived?	38%	38%
23f	Did you have any health problems when you first arrived?	12%	31%
For those who had problems on arrival:			
24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	21%	46%
<b>SECTION 5: Legal rights and immigration</b>			
26	Do you have a lawyer?	84%	76%
For those who have a lawyer:			
28	Can you contact your lawyer easily?	79%	83%
29	Have you had a visit from your lawyer?	54%	41%
27	Do you get free legal advice?	36%	31%
30	Can you get legal books in the library?	40%	55%
31	Is it easy/very easy for you to obtain bail information?	24%	26%
32	Can you get access to official information reports on your country?	34%	15%
33	Is it easy/very easy to see this centre's immigration staff when you want?	18%	28%
<b>SECTION 6: Respectful detention</b>			
35	Can you clean your clothes easily?	95%	85%
36	Are you normally able to have a shower every day?	90%	95%
37	Is it normally quiet enough for you to be able to sleep in your room at night?	90%	62%
38	Can you normally get access to your property held by staff at the centre, if you need to?	64%	54%
39	Is the food good/very good?	22%	36%
40	Does the shop sell a wide enough range of goods to meet your needs?	40%	38%
41	Do you feel that your religious beliefs are respected?	78%	84%
42	Are you able to speak to a religious leader of your own faith if you want to?	50%	63%
43	Is it easy/very easy to get a complaint form?	66%	53%
44	Have you made a complaint since you have been at this centre?	22%	30%
For those who have made a complaint:			
45	Do you feel complaints are sorted out fairly?	0%	20%

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<b>SECTION 7: Staff</b>			
<b>47</b>	Do you have a member of staff you can turn to for help if you have a problem?	<b>89%</b>	<b>66%</b>
<b>48</b>	Do most staff treat you with respect?	<b>71%</b>	<b>86%</b>
<b>49</b>	Have any members of staff physically restrained you in the last six months?	<b>7%</b>	<b>13%</b>
<b>50</b>	Have you spent a night in the segregation unit in the last six months?	<b>7%</b>	<b>10%</b>
<b>SECTION 8: Safety</b>			
<b>52</b>	Do you feel unsafe in this centre?	<b>23%</b>	<b>37%</b>
<b>53</b>	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	<b>0%</b>	<b>14%</b>
<b>54a</b>	Have you been hit, kicked or assaulted since you have been here? (By detainees)	<b>0%</b>	<b>1%</b>
<b>54b</b>	Have you been victimised because of your nationality since you have been here? (By detainees)	<b>0%</b>	<b>5%</b>
<b>54c</b>	Have you ever had your property taken since you have been here? (By detainees)	<b>0%</b>	<b>2%</b>
<b>54d</b>	Have you been victimised because of drugs since you have been here? (By detainees)	<b>0%</b>	<b>0%</b>
<b>54e</b>	Have you ever been victimised here because you have a disability? (By detainees)	<b>0%</b>	<b>3%</b>
<b>54f</b>	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	<b>0%</b>	<b>0%</b>
<b>55</b>	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	<b>11%</b>	<b>13%</b>
<b>56a</b>	Have you been hit, kicked or assaulted since you have been here? (By staff)	<b>0%</b>	<b>3%</b>
<b>56b</b>	Have you been victimised because of your nationality since you have been here? (By staff)	<b>11%</b>	<b>6%</b>
<b>56c</b>	Have you been victimised because of drugs since you have been here? (By staff)	<b>0%</b>	<b>0%</b>
<b>56d</b>	Have you ever been victimised here because you have a disability? (By staff)	<b>0%</b>	<b>3%</b>
<b>56e</b>	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	<b>0%</b>	<b>2%</b>
For those who have been victimised by detainees or staff:			
<b>57</b>	Did you report it?	<b>50%</b>	<b>45%</b>
<b>58</b>	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	<b>6%</b>	<b>9%</b>
<b>59</b>	Have you ever felt threatened or intimidated by a member of staff in here?	<b>11%</b>	<b>16%</b>

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<b>SECTION 9: Health services</b>			
<b>61</b>	Is health information available in your own language?	44%	34%
<b>62</b>	Is a qualified interpreter available if you need one during health care assessments?	28%	16%
<b>63</b>	Are you currently taking medication?	32%	55%
For those who have been to health care:			
<b>64</b>	Do you think the overall quality of health care in this centre good/very good?	39%	40%
<b>SECTION 10: Activities</b>			
<b>66</b>	Are you doing any education here?	7%	17%
For those doing education here:			
<b>67</b>	Is the education helpful?	100%	90%
<b>68</b>	Can you work here if you want to?	37%	57%
<b>69</b>	Is there enough to do here to fill your time?	56%	57%
<b>70</b>	Is it easy/very easy to go to the library?	76%	85%
<b>71</b>	Is it easy/very easy to go to the gym?	76%	74%
<b>SECTION 11: Keeping in touch with family and friends</b>			
<b>73</b>	Is it easy/very easy to use the phone?	94%	67%
<b>74</b>	Have you had any problems with sending or receiving mail?	7%	14%
<b>75</b>	Have you had a visit since you have been in here from your family or friends?	56%	54%
For those who have had visits:			
<b>76</b>	Do you feel you are treated well/very well by staff in the visits area?	88%	78%