



HM Inspectorate of
Prisons

Introduction & Summary
of Findings: Inspection of
five Immigration Service
custodial establishments.

April 2003

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1. Immigration Removal Centres: an overview

1.1 These five inspection reports are the first carried out in the immigration removal estate since this Inspectorate was given statutory responsibility for inspecting detention centres (now re-named removal centres). The reports provide a detailed account of five removal centres operating in England during 2002, three of which are run by private contractors¹ and two by the Prison Service². Uniquely, they draw upon the experience and comments of detainees themselves, who were surveyed and consulted in their own languages. It was revealing that for many detainees this was the first time that they had been able directly to express their views to any person in authority.³ As in all our inspections, the perceptions of detainees were triangulated against the observations of inspectors, and views and information obtained from staff and managers at the centres.

1.2 The findings of these inspections have been discussed with managers in the centres and with those in the Immigration Service with responsibility for the overall running of the detention estate. We have also spoken with outside bodies such as non-governmental organisations, the Legal Services Commission and the Office of the Immigration Services Commissioner. As a result of these conversations, we are pleased that some of the recommendations in the reports have already been taken up. In particular, we are aware that there have been improvements in the monitoring of detention by the Immigration Service, and that information has been produced by non-governmental organisations to assist those needing legal advice and representation. We are also aware that the inspections took place at a time of transition for the Prison Service establishments, as they were faced with implementing the new Detention Centre Rules; and we are assured that changes have subsequently taken place. We look forward to assessing and recording all these changes when we begin the regular round of inspections later this year.

1.3 We inspected these removal centres against our four tests of a healthy custodial environment. The reports reveal five establishments that, in many respects, operated differently, but out of which some clear common themes emerged.

Detainees are held in safety

1.4 This test concerns two aspects of safety. The first is that detainees are protected from physical and psychological harm. This includes the management of the risks of fire, accident, violence, intimidation and mistreatment; it also includes the quality of mental health care provided. The second is that the insecurity of the position of detainees is not exacerbated by being unable to obtain timely information about the progress of their cases, by anxiety about

¹ Tinsley House, Oakington, Campsfield House

² Haslar, Lindholme

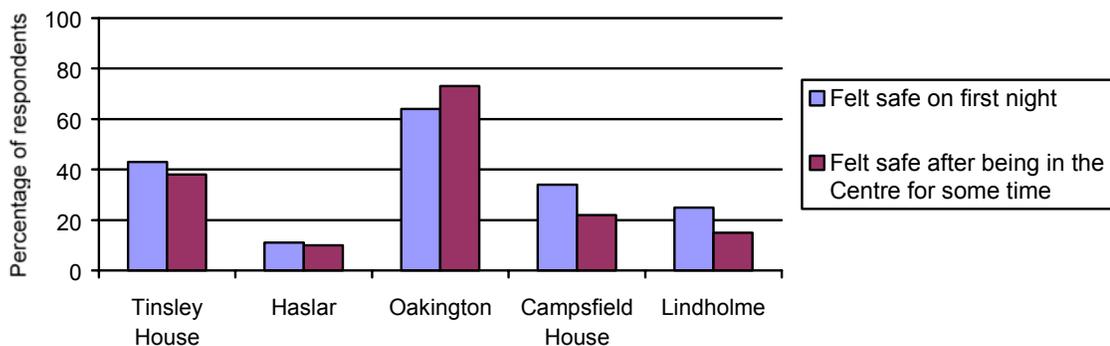
³ see Appendix

welfare concerns outside, or by difficulty accessing competent legal advice that may prevent their removal to an unsafe country or situation.

1.5 Detainees are unlikely to experience feelings of safety and security. Some will have been imprisoned elsewhere in less than humane conditions; for others, this will be their first experience of a custodial environment and in a strange country. None will know how long they are to be held or whether they will be able to remain in the UK.

1.6 Perceptions of safety were not, therefore, high anywhere: only 37% of detainees overall told us they felt safe and at all the establishments except Oakington the proportion reporting feeling safe decreased the longer they were held there. However, it is evident that detainees felt particularly unsafe in the two Prison Service run Centres. Only 10% of those at Haslar, and 15% of those held in Lindholme told us they felt safe after some time there. At Lindholme there were low staffing levels, particularly at night. At Haslar the physical environment was unsafe and unsatisfactory. Many detainees were in dormitories that were cubicles without doors and with gaps between the walls and the ceilings, and there was nowhere to isolate difficult or disturbed individuals. By contrast, two thirds of those held in Oakington initially felt safe, and this rose to three-quarters after some time there.

FIGURE 1. PERCENTAGE FEELING SAFE INITIALLY AND AFTER SOME TIME AT THE CENTRE.

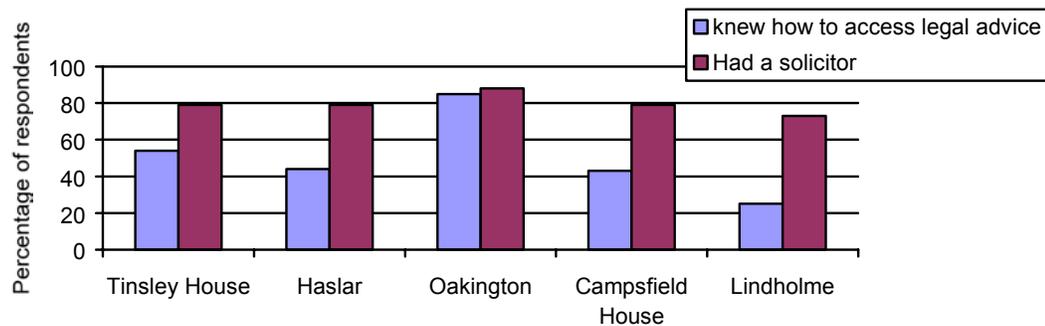


1.7 Two of the centres, Oakington and Tinsley House, held children and families. We did not consider that they were suitable places for lengthy detention, of anything other than a few days at most; and indeed they did not normally hold children for longer periods.

1.8 For detainees in all centres, though, except for Oakington, their insecurity was heightened by the fact that they were unable to obtain reliable information from the immigration authorities about the reasons for their detention or the progress of their cases, or to access competent independent legal advice. For many, this was the greatest insecurity of all. From the surveys, it was clear that reviews of detention, if they took place, were not effectively communicated to detainees. From the inspections it became clear that immigration officers on site did not know, and did not communicate, how cases were progressing: nor was it evident to us that they were progressed efficiently. The case studies in the reports include cases where detainees were unable to return home when they wished to, as well as those wishing to challenge their removal.

1.9 Nor were detainees easily able to obtain competent independent legal advice to explain their situation or represent them; indeed, in a number of centres they were clearly targeted by unscrupulous advisers who were able to prey on their vulnerability. Only at Oakington were on-site immigration officers involved in and informed about detainees' cases; and there was also on-site and properly regulated specialist legal advice and representation. The main perceived problems there were the speed and apparent inflexibility of the process in relation to complex cases, and the need to emphasise and support the capacity and independence of on-site advisers.

FIGURE 2. PERCENTAGE KNOWING HOW TO OBTAIN LEGAL ADVICE OR A SOLICITOR

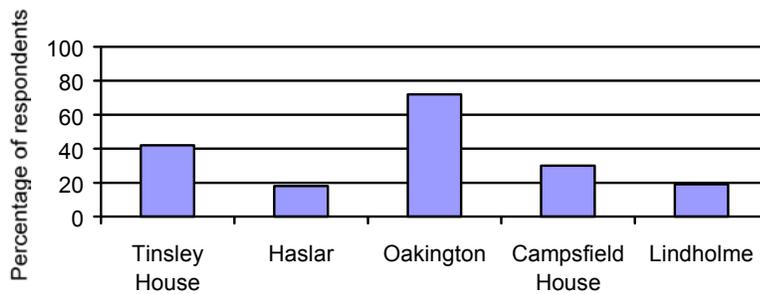


Detainees are treated with respect as individuals

1.10 This test concerns the extent to which the centre meets detainees' basic needs to be treated humanely and with compassion. It applies to all aspects of centre life, but specifically it concerns staff attitudes to detainees, the way they are received into the establishment, the provision of interpreters and translated information, race relations and concern for welfare needs. It also concerns the quality of accommodation, food, healthcare and the regime, the provision of an effective complaints system and the means for detainees to be able to practise their faith.

1.11 Perceptions of safety were clearly linked to perceptions of respect, and the standard of custodial care. Detainees at Oakington talked of the positive attitude of staff "*they treat us as equals*" and the high standard of custodial care: 72% said that staff had asked after them in their first few days. Groups of detainees at Lindholme and Haslar, however, complained of staff attitudes. 81% of those at Lindholme and 82% at Haslar said that no member of staff had asked after them. At the other two centres, responses were more mixed, with few complaints at Tinsley House, but more at Campsfield House.

FIGURE 3. PERCENTAGE REPORTING THAT A MEMBER OF STAFF HAD ENQUIRED HOW THEY WERE.



1.12 It is, however, clear that staff in most centres were not sufficiently alert to, or trained in, the specific needs of immigration detainees. Again, this was particularly apparent in the two Prison Service establishments, where both the attitudes of staff and the procedures adopted were geared towards offenders. We accept that these establishments were only just coming to terms with the application of Detention Centre, rather than Prison, Rules at the time of the inspection (though they had, of course, been looking after detainees for some time, particularly in Haslar). However, there was clearly a significant task for managers in those centres to train and support staff in developing a detainee-focused approach.

1.13 The three dedicated removal centres, and especially Tinsley House and Oakington, had better staff-detainee relationships. At Tinsley House and Oakington, staff engaged more positively with detainees to provide the dynamic security that was necessary to maintain a safe environment. However, those centres lacked some of the necessary procedural safeguards that the Prison Service is accustomed to providing and that were more evident in prison establishments: clear suicide, self-harm and anti-bullying strategies and processes, clear management and monitoring structures for race relations. This could result in gaps and deficiencies. Campsfield House, for example, was the only removal centre where we encountered claims of sexual harassment⁴; and Tinsley House appeared to consider that race and ethnic relations were the province of the religious affairs manager, rather than the responsibility of the Centre as a whole.

1.14 The provision of interpreters and translated information for those who did not speak English was poor in all the centres except Oakington. Other detainees were used in this role, which was appropriate for domestic matters, but not for important and sensitive interviews. Our surveys indicated that about two-thirds understood spoken English and about half written English, and that Language Line was insufficiently exploited. Significant proportions of detainees did not understand why they were being held in detention, the rules and routines of the centres, or what the centre doctor or their legal representatives had said to them.

FIGURE 4. THE PERCENTAGE OF RESPONDENTS WHO HAD BEEN TOLD WHY THEY WERE BEING DETAINED IN A LANGUAGE THEY COULD UNDERSTAND AND WHO UNDERSTOOD THE RULES AND REGIME AFTER A FEW DAYS.

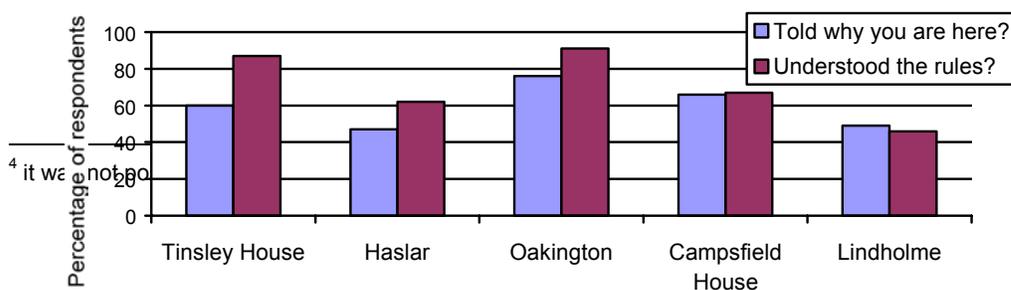
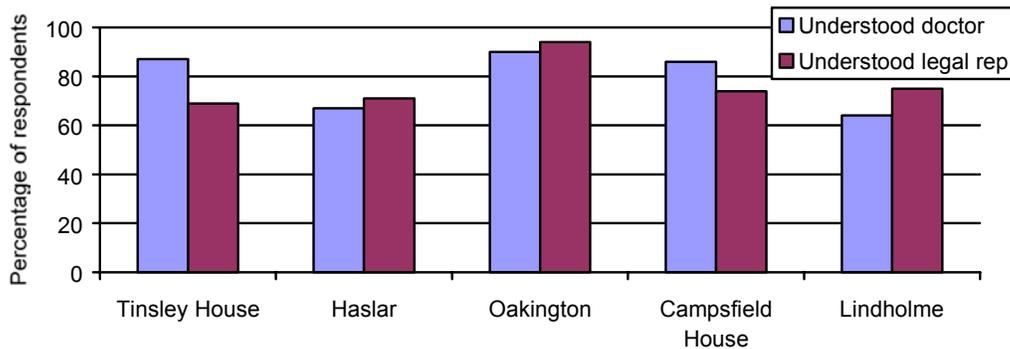


FIGURE 5. THE PERCENTAGE OF RESPONDENTS WHO COULD UNDERSTAND THE DOCTOR AND LEGAL REPRESENTATIVE IN A ONE TO ONE INTERVIEW.



1.15 A major cause for concern, at all centres, was the absence of any specific provision to deal with the welfare needs and anxieties of those who had suddenly, and sometimes after extended periods of residence in the UK, found themselves detained indefinitely. Many had been abruptly separated from families who were culturally unprepared to deal directly with the outside world. Others had possessions and homes that they had left behind and to which they might not return. One of our recommendations is that all centres should have an independent welfare adviser, who can deal with these practical problems (and also assist with practical issues arising from release or removal).

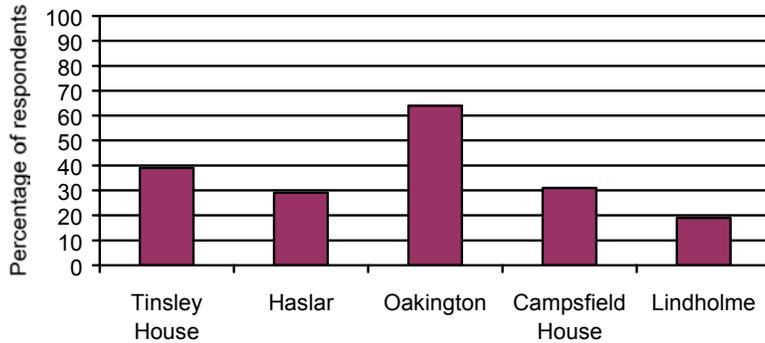
1.16 Healthcare, and particularly mental health care, was an issue in most centres. Communication between centres and with community health services who had provided, or would go on to provide, treatment was often poor. We also point to the need to ensure appropriate mental health care for people who may have experienced trauma, and for proper Protocols for the exchange of information between healthcare professionals, who may find evidence of previous torture or ill-treatment, and immigration caseworkers and representatives.

Detainees are engaged in constructive activity

1.17 This test concerns the extent to which a full regime is provided, together with the incentive to engage with it so that detainees are able to keep themselves active, fit and healthy during the time they are detained.

1.18 In all centres, there was insufficient constructive activity for detainees, despite some imaginative recreational and educational provision. Overall, only about a third of detainees said they had enough to do, except in Oakington where the proportion was closer to two thirds. We describe an 'impressive range of facilities' at Tinsley House; and all centres had some educational provision. However, in the Prison Service centres we inspected, we concluded that there was insufficient constructive activity on offer. We recognise, of course, that until very recently, they had been able to rely on the provision of work opportunities to provide activity for those who chose to take them up, but this had ceased with the application of the Detention Centre Rules.

FIGURE 6. PERCENTAGE REPORTING THEY HAD ENOUGH TO DO IN THE CENTRE.



1.19 Previously, detainees had been able to assist in cleaning, catering and other duties within centres. However, as all centres now operated under Detention Centre rather than Prison Rules, there were said to be legal obstacles to offering any work opportunities to detainees. Clearly, detainees should not be compelled to work, or suffer any disadvantage for not doing so. However, the inability to choose to work left many detainees inactive and frustrated, and increased the potential for problems of control within the centres. This was an issue that was raised with us by detainees and managers at all the centres inspected.

1.20 We urge the Immigration and Nationality Department to find ways of overcoming the obstacles that exist to providing detainees with work opportunities.

Detainees are able to keep in contact with the outside world and prepare for their release, transfer or removal

1.21 This test concerns the extent to which the damaging effect of detention is mitigated by opportunities to keep in touch with family, friends and the outside world and to access crucial information about their countries of origin. It also concerns the extent to which the centre assists detainees to prepare for their release, transfer or removal by providing adequate notice and help.

1.22 The reports draw attention to considerable variations in practice between centres in relation to contacts with the outside world. Best practice on visits, as at Tinsley House and Campsfield, allowed legal visits over a 12-hour period, and family visits over a 7-hour period, including at evenings and weekends. However, Haslar allowed only two-hour visits, six days a week. Both Prison Service centres, at the time of the inspection, still randomly strip-searched detainees after visits, rather than as a result of reasonable suspicion. This was unacceptable and unnecessary.

1.23 Similarly, there were wide divergences in detainees' ability to telephone relatives or legal advisers. Best practice, as at Tinsley House, was to provide all detainees without means with a free £5 phone card each week; and 75% of detainees told us they were able to make outgoing

phone calls. Lindholme, by contrast, had only one outgoing phone working in the Centre at the time of the inspection (having experienced considerable problems of vandalism) and provided no free phone cards after initial reception. At some centres, Oakington in particular, the only phone cards available for purchase were extremely expensive in relation to outside rates.

1.24 These matters need to be clarified and standardised in operating standards and contractual arrangements, to bring all centres up to best practice so that detainees can have reasonable contact with the outside world, their families and legal advisers. We would also urge that detainees be allowed to use e-mail facilities, by far the cheapest way of contacting relatives overseas.

1.25 After detention, many detainees will be removed to their countries of origin. Others will be transferred to other places of detention. Some will be released into the community, permanently or temporarily, some for the first time and some to take up their lives again. These decisions are made by the immigration authorities; and detainees need advance notice and preparation for these major moves. We found little evidence that this was provided in any centre. Indeed, in some, officials told us that they withheld information about removal or continued detention from some detainees until the last moment. In some cases, this meant that they were unable even to inform families and legal representatives of their removal from the country. These hurried, and sometimes deceptive, arrangements were apparently designed to minimise security and self-harm risks. However, we consider that those risks should be managed properly, rather than evaded or passed on to the next centre. We point out that if detainees are not properly prepared for removal, they are more, not less, likely to create security and control problems at the point of departure. The provision of independent welfare advice (see para.1.15 above) would assist in dealing with practical problems.

1.26 Specific recommendations for each centre are included in individual reports, and below we list the strategic recommendations that concern the operation of the whole estate.

Strategic Recommendations

- 1. All removal centre staff must be trained in the specific issues that affect immigration detainees, and aware of the cultural, national and ethnic background from which they come*
- 2. The Prison Service, if it is to hold detainees, must ensure that removal centre staff are specifically recruited for and designated to this function*
- 3. Translated information should be available in all centres in the languages of detainees, and interpreters should be provided for important immigration meetings and sensitive medical matters.*
- 4. Operating standards should ensure that relevant processes, and the appropriate staff training, are in place to deal with suicide, self-harm, anti-bullying and race and ethnic relations.*
- 5. The detention of children should be avoided wherever possible, and only take place for the shortest possible time, in no case more than seven days.*

6. *Establishments holding children should have in place robust child protection safeguards and effective liaison with local Area Child Protection Committees.*
7. *The Immigration Service should ensure that the casework of those detained is expedited, and all detainees are kept informed, in a language they understand, about the reasons for their detention and its continuation and the progress of their cases. On-site immigration staff should be able to communicate up-to-date case information directly to detainees.*
8. *The Immigration Services Commissioner should pay particular attention to monitoring the quality of legal advice provided to detainees, who are an exceptionally vulnerable group; and information about properly regulated advisers should be available in all centres.*
9. *The Immigration and Nationality Department and the Legal Services Commission should consult with professional bodies to ensure that access to competent independent legal advice and representation is provided.*
10. *Protocols should be agreed for the release of medical information, with consent, to the immigration authorities and detainees' representatives, if such information is relevant to fitness to detain or to the detainee's asylum claim, and the action that should follow.*
11. *All removal centres should follow best practice in relation to visits and phone calls: allowing extended family and legal visits (including during the evening and at weekends) and issuing weekly a £5 phone allowance or phone cards to those without means. Consideration should be given to making e-mail facilities available to detainees.*
12. *Detainees who wish to do so should be allowed to undertake paid work while in detention; alternatively, or in the meantime, there should be incentives for participation in centre activities*
13. *Removal centres should have independent welfare support advisers, able to assist with family and home problems, and to advise and support detainees on release, transfer or removal.*
14. *Immigration and centre staff should give detainees adequate notice of any movements.*



HM Inspectorate of
Prisons

An Inspection of Tinsley House Immigration Removal Centre

18th – 20th Feb 2002

Acknowledgements

The inspection of Tinsley House was carried out between the 18th and 20th of February 2002. The team consisted of:

Colin Allen	HM Deputy Chief Inspector of Prisons
Monica Lloyd	Head of Thematic Reviews
Marjorie Simonds-Gooding	Consultant Inspector
Rev Jim Siller	Consultant Inspector
Tish Laing-Morton	Medical Inspector
Jane Mackay	Health Management Inspector

The questionnaire⁵ analysis and management of interpreters⁶ was carried out by:

Victoria Richardson	Senior Research Officer
Dee Lewis	Research Officer

The team were assisted by:

Christina Pourgourides	Consultant Psychiatrist ⁷
Nicola Rogers	Immigration Specialist ⁸
Tim Snewin	Pharmacy Inspector
James Wallace	Adult Learning Inspector

⁵ Translation arranged by Sally Walker Language Services

⁶ Provided by Lexicon Linguistics

⁷ Sutton South Community Mental Health Team

⁸ Garden Court Chambers, Temple

2. Fact page

Task of the Establishment

The task of Tinsley House is to hold those detained by the Immigration Service as overstayers, illegal entrants or failed asylum seekers prior to their removal from the country. Most detainees remain in the Centre for relatively short periods.

Location

Perimeter Rd South, Gatwick Airport, W Sussex.

Contractor

Wackenhut UK Ltd

Number held

97 at the time of the inspection

Escort provider

Wackenhut Escort Services UK

Type of accommodation

The Centre is modern and purpose built to a high specification. The accommodation provides bed spaces for 93 male detainees, 23 female detainees and five families within zoned and separate residential accommodation. Men and women mix for activities and share communal areas. Rooms hold either two, three, four or five detainees, with one single room.

Last full inspection

August 1997.

3. A Healthy Establishment summary

We have applied to the inspection of removal centres four tests which we consider determine whether overall they provide a healthy environment. They are:

- *that detainees are held in safety;*
- *that they are treated with respect;*
- *that they are purposefully occupied during the day;*
- *that they are able to keep in contact with the outside world and are prepared for their release, transfer or removal.*

Below, we summarise the findings in this report under those four heads:

Detainees are held in safety

3.1 In applying this test we have been mindful that those detained at Tinsley House were not only held against their wishes, but also often contrary to their expectations. Many were picked up without warning and had not been able to put their affairs in the UK in order. Some were separated from children or close families. All were faced with an enforced life change which they did not want and which represented a severe reversal in their fortunes. In these circumstances detainees were not likely to report feelings of wellbeing, and nor did they. Only about a third claimed to feel safe, despite a conscientious level of custodial care.

3.2 Dynamic security had been adopted as a founding principle of the Centre and relationships between staff and detainees were positive. There was a high level of engagement despite the language barriers and staff were, on the whole, responsive to detainees' needs. Yet there was no system to address immediate welfare matters on first arrival in custody, and the services of the Gatwick Detainee Welfare Group were not facilitated. Those in distress, where identified, were given close attention, and special rooms for the control of disruptive or at risk individuals were used only in extreme circumstances. A consistent level of staffing around the clock and careful attention to health and safety meant that detainees were as safe at night as they were during the day. Arrangements for fire safety were good and well practised, though there was no sprinkler system in the event of a fire. There was little evidence of any significant bullying within the Centre or of racial incidents, and accident reports were few; however, there needed to be clearer and well understood procedures for dealing with and monitoring bullying and suicide risks. The Centre was aware of the importance of protecting the children in its care and tried to do so conscientiously within the physical constraints of an environment that we did not consider to be suitable for anything other than very short stays of no more than a week. Formal links with the local Area Child Protection Committee were missing.

3.3 Arrangements were in place to provide in-patient psychiatric care in the community for those who were seriously mentally ill, but those who were disturbed but not sectionable and arguably not fit for detention remained in a custodial rather than a therapeutic environment. The provision of a psychology service was helpful in assisting with the assessment of stress

disorders but it was inappropriate to provide treatment in a custodial environment and their assessments were not routinely used to inform an alternative disposal.

3.4 Though most detainees remained in Tinsley House for relatively short periods and immediately prior to anticipated removal, the great majority had already been detained elsewhere. During the period of their detention, information about the progress of their cases, which was of over-riding importance to detainees, was very difficult to obtain and not communicated in their own languages. There was no controlled access to the internet which may have allowed detainees to access official country information reports and make their own assessment of the personal risk of return. On-site immigration officers avoided face to face contact and withheld removal directions until the last minute from those they feared would resist being removed. Access to legal representation and advice was not facilitated and detainees were not informed of their legal rights. Legal faxes and letters were allowed but advice lines to specialist organisations were ineffective.

3.5 We conclude that Tinsley House was a safe custodial environment, but one in which it was impossible to deliver appropriate mental health care. There was also no effective system for providing advice and help with detainees' welfare problems outside the Centre. The level of access to legal support and information about the progress of their cases was poor. These factors afforded little protection against the damaging effect of unanticipated and indeterminate detention.

Detainees are treated with respect as individuals

3.6 Staff attitudes were positive and they readily engaged with detainees on an individual basis. Compassion and kindness were shown to new arrivals, though more awareness of the needs of children was required, and of welfare problems caused by unexpected detention. The House Rules were provided in several languages and new arrivals were given an informal tour of the establishment, but notices were mainly in English and there was insufficient use of site plans and visual symbols to help those who could not read in any language. The Religious Affairs department made good multi-faith provision, though pastoral input was mainly Christian. There were no formal systems for racial, ethnic or national monitoring, for promoting race and cultural equality, or for awareness training for staff dealing with a wide range of nationalities, religious and ethnic groups.

3.7 Provision for healthcare was good though the lack of shared records between the different centres and the community meant that medical histories were often missing, and medication was removed on arrival as a blanket policy. The reluctance to use interpreters or language line meant that detainees had difficulty discussing the detail of their health concerns and revealing health issues that were difficult to discuss but relevant to their asylum claims. The policy for managing food refusal was in need of review, and there was no national forum for health practitioners working with detainees to meet together to develop their practice.

3.8 The building was of good quality and was clean and well maintained. The practice of staff and detainees eating together was normalising and the food attempted to cater for multi-national tastes, though detainees were dissatisfied with the extent to which this was achieved. Detainees without means were provided with the bare minimum for daily living and the distribution of donated toiletries and clothing was not efficient. The shop provided a good service to detainees and visitors, though not after 5 pm. There were very few official complaints

although detainees did have grievances, and this suggested that the complaints procedures were not perceived as effective or confidential. The lack of interpreters was a widespread omission. The tannoy was very intrusive and a particularly inappropriate way to communicate with people in stressful circumstances, though the facility for detainees to receive incoming calls was excellent.

3.9 Overall we conclude that detainees at Tinsley House were treated with respect. Relationships between staff and detainees were positive and the standard of healthcare and multi-faith awareness was high. The lack of interpreters and consultation with detainees detracted from this; as did the absence of Centre-wide procedures and training in race, cultural and ethnic issues.

Detainees are engaged in constructive activity

3.10 There was an impressive range of activities available to detainees during the 14 hours they had free access to the Centre, including individual and group recreational activities, formal English teaching and arts and crafts lessons. Opportunities were provided for outside activities and detainees were able to get free access to the fresh air. Sports and games staff encouraged detainees to take part in activities and were enthusiastic and professional in their approach. There was more scope for the uptake of activities to be incentivised, and the policy of giving shop vouchers to those who succeeded in team games could be extended to those who took up other activities and made a positive contribution to the life of the Centre. Many detainees also wished to be able to work in the Centre.

3.11 We conclude that Tinsley House afforded a high level of constructive activity, but that the lack of opportunity to undertake paid work for those who wished to was an omission.

Detainees are able to keep in contact with the outside world and prepare for their release, transfer or removal

3.12 Arrangements for detainees to maintain contact with the outside world by phone, fax and letter were very good, except for access to e-mail, the internet and to free advice lines. The access to legal visits over a 12 hour period and domestic visits over seven hours was excellent, though there was an urgent need for the welfare services of the Gatwick Detainees Welfare Group to be better advertised, and for volunteer visitors to be put in touch with detainees at an earlier stage.

3.13 There was, however, no acceptance of any obligation on the part of the Immigration Service to prepare detainees either for transfer to another place of detention, temporary admission to the country or their removal from the UK. Detainees were given insufficient warning of their next move and were unable to prepare themselves or inform their families, friends or legal representatives what was happening to them. Those granted admission to the UK on benefits were given no help to orientate themselves to life in the UK or to understand the system that would support them. Those being removed were lucky to have more than three days notice, and some did not have that. There was no assistance to ensure that their affairs in the UK were closed and they knew what to do on arrival at their next destination.

3.14 We conclude that Tinsley House succeeded in allowing detainees to keep in touch with the outside world through phone, fax and visits, but that there was insufficient preparation for release, transfer or removal.

Conclusion

3.15 The application of these four tests indicate that Tinsley House was essentially a place of safety where detainees experienced a good standard of custodial care. They were treated with respect and provided with adequate health care and opportunities to practise their religion, engage in constructive activities and to retain contact with the outside world. However, their security was undermined by the fact that they were not easily able to find out about the progress of their cases, receive help with external welfare needs or access specialist legal advice or representation. They were not prepared for their release, transfer or removal and there was a form of institutional blindness to the practical difficulties caused by detention and to the fate of many after release.

An Inspection of Haslar Immigration Removal Centre

25th –27th February 2002

Acknowledgements

The inspection of Haslar was carried out between the 25th and 27th of February 2002.
The team consisted of:

Colin Allen	HM Deputy Chief Inspector of Prisons
Monica Lloyd	Head of Thematic Reviews
Marjorie Simonds-Gooding	Consultant Inspector
Joss Crosbie	Inspector
Jim Siller	Consultant Inspector
Tish Laing-Morton	Medical Inspector
Jane Mackay	Health Management Inspector

The questionnaire⁹ analysis and management of interpreters¹⁰ was carried out by:

Victoria Richardson	Senior Research Officer
Lucy Richardson	Research Officer

The team were assisted by:

Nicola Rogers	Immigration Specialist
Chris Collier	Pharmacy Inspector
Ian Comerford-Dunbar	Adult Learning Inspector

⁹ Translation arranged by Sally Walker Language Services

¹⁰ Provided by Lexicon Linguistics

4. Fact page

Task of the Establishment

The task of Haslar is to hold those detained by the Immigration Service as overstayers, illegal entrants or failed asylum seekers prior to their removal from the country. It also holds a proportion of detainees whose cases have not yet been determined, but who are considered to be at risk of absconding.

Location

Gosport, Hampshire

Provider

HM Prison Service

Operational capacity

160 male detainees, 141 at the time of the inspection

Escort provider

Wackenhut Escorting Services UK

Type of accommodation

The Centre originally operated as an army facility, then a Young Offender Detention Centre and latterly an Immigration Detention Centre. The residential accommodation provides spaces for 160 male detainees in six dormitories. Three of these are divided into separate rooms with their own doors but three are partitioned into cubicles with the walls not extending to the ceiling and with open doorways.

Last full inspection

June 1998

5. A Healthy Establishment summary

5.1 We have applied to the inspection of removal centres four tests which we consider determine whether overall they provide a healthy environment. They are:

- *that detainees are held in safety;*
- *that they are treated with respect;*
- *that they are purposefully occupied during the day;*
- *that they are able to keep in contact with the outside world and are prepared for their release, transfer or removal.*

Below, we summarise the findings in this report under those four heads:

Detainees are held in safety

5.2 In making judgements about the safety of detainees we have been mindful that detainees in Haslar were by definition insecure. Some had been picked up without warning after several years in the UK. Others had been brought in to the country by unscrupulous traffickers who misled them about what would happen to them on arrival in the UK, and some had experienced long, uncomfortable and sometimes dangerous journeys. Detainees were also fearful of being in an establishment run by the Prison Service. Overall, being in Haslar represented a severe reversal in their fortunes and they were not likely to report feelings of wellbeing. Nor did they. However, this feeling of insecurity was even more marked than in most other centres we inspected. Only 10% said they felt safe compared with a norm for the other centres of 37%.

5.3 There was little information provided on arrival to allay their fears. All detainees were strip-searched and the reason for this was not explained. The traumatic impact of this on many of the nationalities in the Centre did not seem to be appreciated. Feelings of insecurity were compounded by inadequate staff supervision in the dormitories and the absence of doors to most of the rooms. There were no first night procedures to settle in new arrivals, and relationships between staff and detainees were superficial, hindered by language barriers and a culture of non-engagement. There was no equivalent of a personal officer scheme, little effort made to check on the wellbeing of detainees and no system to check that they took their meals regularly. Detainees were also concerned about the risk of fire when locked into their dormitories, a concern that we shared.

5.4 There were established links with the local community health team, but detainees who were disturbed but not sectionable and arguably not fit for detention remained in a custodial rather than a therapeutic environment. No help with interpreting was provided. The doctor communicated any concerns he had about fitness for detention to the authorities, though he received no acknowledgement or feedback and detention continued in most cases.

5.5 Immigration officers on site were not permanently assigned to the Centre and had little information about individual cases. Monthly reviews were late or contained little substantive

information and systems for delivering detainees to bail or appeal hearings were unreliable. A significant proportion of detainees had no legal representation and the majority of those who were un-represented did not know how to obtain legal advice or to determine its quality. A number appeared to be being exploited by their representatives or to be receiving inadequate representation. The length of time allowed for legal visits was unacceptably short and communication with legal representatives was hampered by the lack of the necessary funds to make phone calls.

5.6 We could not conclude that Haslar was a place of safety. There was insufficient reassurance given to new arrivals, staff supervision in the dormitories and information about the Centre. The accommodation afforded neither safety nor privacy, and it was not possible to deliver the necessary mental health care without specialist interpreters and in a custodial environment. There was also no effective system for providing advice and help with detainees' welfare problems outside the Centre. The level of access to legal support and information about the progress of their cases was poor and afforded little protection against the damaging effect of unanticipated and indeterminate detention.

Detainees are treated with respect as individuals

5.7 Detainees were given appropriate refreshment during the reception process and placed with others who spoke their language wherever possible, but accommodation was not prepared for new arrivals and there was insufficient storage space for in-possession property. An immigration liaison officer undertook to induct detainees and assist with problems caused by their detention, but 84% of detainees in our survey claimed they had such problems still, and there was little liaison with the Haslar Visitors Group. The accommodation was unfit for its purpose and lacked privacy, warmth, quiet or recreational space. It was hard to settle at night when competition for the phones continued. There was an obvious under-investment in furniture, facilities, heating and repair. Neither were there facilities for detainees to launder their own clothes. The adoption of an incentive scheme which mimicked prison service practice and allowed detainees limited access to their own money was inappropriate.

5.8 Detainees without funds were supplied with essential items, but the failure to provide phone cards to those without means was a major omission. Detainees were very dissatisfied with the amount, quality and suitability of the food for their dietary, religious and cultural needs and there was no pre-select menu. The choice of products available in the shop was also limited, prices were high and the only language spoken was English. There needed to be more consultation with detainees about these essential services. The system for allowing preferential access to the dining hall as an incentive was entirely inappropriate.

5.9 The quality of health care and the policy of allowing medication to be held in-possession were both good, though there should be access to simple remedies when the health care centre was closed. There was good provision for TB screening and regular 'well man' clinics were provided, but there was little specialist interpretation. Custody staff were disengaged from detainees and the milieu of the Centre was not supportive to those suffering psychological distress. The lack of shared records between the different centres and with the community meant that medical histories were often missing. The policy for managing food refusal was in need of review, and there was no national forum for health practitioners working with detainees to meet together to develop their practice.

5.10 There was provision for multi-faith religious worship, but this could not be accessed easily. There were few applications to see the Board of Visitors and a small number of complaints, though our survey indicated that detainees were not at all satisfied with many aspects of their treatment. Where they had complained, they were unhappy with the way their complaints had been dealt with, and independent scrutiny needed to be strengthened. Although there was a high level of awareness of the importance of good race relations, there had been an under-investment in the amount of time allowed to the Race Relations Liaison Officer and there was some evidence of racist behaviour among a small minority of staff.

5.11 We could not conclude therefore that detainees were treated with respect. Staff appeared to lack understanding of detainees and showed insufficient interest in their welfare.

Detainees are engaged in constructive activity

5.12 Detainees no longer had the opportunity to work in the Centre and were unable to launder their own clothes or cook their own food. Some attended education and others attended the gym, but less than a third said they had enough to do in the Centre. There was also insufficient equipment in the residential areas for leisure activity: only one pool table for example in the whole Centre and detainees appeared to spend considerable periods of time in their rooms or dormitories with very little to do. Sports and education staff encouraged detainees to take part in activities and were enthusiastic and professional in their approach, but there was scope for the uptake of activities to be incentivised to encourage participation. Many detainees regretted not being able to work any longer in the Centre.

5.13 We could not conclude therefore that detainees were sufficiently well occupied in Haslar.

Detainees are able to keep in contact with the outside world and prepare for their release, transfer or removal

5.14 The visits area was well appointed but the way the system operated was a legacy from the time the Centre had been a prison establishment. Visits operated only two hours a day six days a week. Property could not be handed in by visitors even when this was the last chance to restore property before removal. Detainees were randomly strip searched afterwards whether or not there were grounds for suspicion. Free mail and fax facilities were available but the system for receiving phone calls was overloaded and making calls was very difficult for those without means. There was no access to the cheapest method of international communication, the e-mail, or to the internet as a source of detailed information about the situation in countries of origin.

5.15 There was no obligation on the part of the Immigration Service to prepare detainees either for transfer to another place of detention, release or removal from the UK. Detainees were given insufficient warning of their next move and were unable to prepare themselves or inform their families, friends or legal representatives what was happening to them. Those granted admission to the UK for the first time were given no help before they were released to orient themselves to life in the UK or to understand the system that would support them. Those being removed were lucky to have more than three days notice, and some did not have that. There was no removal plan which ensured that their affairs in the UK were closed and they

knew what to do on arrival at their next destination. No-one would choose to board a plane in these circumstances, and it was inappropriate to expect detainees to do so.

5.16 We could not conclude that Haslar succeeded in making proper provision for detainees to keep in touch with the outside world through phone calls and visits, nor that it was able for them to make sufficient preparation for their release, transfer or removal.

Conclusion

5.17 We concluded that Haslar did not do enough to help detainees settle and to provide them with an environment in which they were safe. Staff were disengaged, the quality of the accommodation was poor, and incentive and anti-bullying schemes based on prison practice were inappropriate. The lack of information about their cases, the restricted visiting times and the failure to receive detainees' property all communicated disrespect. Detainees were under-occupied, despite the best efforts of Centre staff. Contact with the outside world and preparation for release were also inadequately provided for.

An Inspection of Oakington Reception Centre

4th – 6th March 2002

Acknowledgements

The inspection of Oakington was carried out between the 4th and 6th of March 2002. The team consisted of:

Colin Allen	HM Deputy Chief Inspector of Prisons
Monica Lloyd	Head of Thematic Reviews
Marjorie Simonds-Gooding	Consultant Inspector
Jim Siller	Consultant Inspector
Jane Mackay	Health Management Inspector

The questionnaire¹¹ analysis and management of interpreters¹² was carried out by:

Victoria Richardson	Senior Research Officer
Lucy Richardson	Research Officer
Mark Challen	Research Officer

The team were assisted by:

Nicola Rogers	Immigration Law Specialist ¹³
Christina Pourgourides	Consultant Psychiatrist
Jill Williams	Pharmacy Inspector
John Grimmer	Adult Learning Inspector

¹¹ Translation arranged by Sally Walker Language Services

¹² Provided by Lexicon Linguistics

¹³ Garden Court Chambers, Temple

6. Fact page

Task of the Establishment

The task of Oakington is to hold 'fast track' asylum seekers over a seven to ten day period whilst their asylum claims are processed.

Location

Longstanton, Cambridgeshire.

Contractor

Group 4.

Number held

253 at the time of the inspection.

Escort provider

Wackenhut Escorting Services UK and Group 4.

Type of accommodation

The accommodation is created from part of the site of a previous RAF air field. At the time of the inspection four separate blocks were refurbished and in use as residential accommodation within a secure area contained by a double chain link fence. Three blocks were for single males and one for single females. There was also a family block outside the fence which provided 42 family rooms. Other buildings accommodated the organisations providing legal representation, the Immigration Service and the immigration caseworkers.

Last full inspection

This is the first full inspection of this facility which opened in March 2000.

7. A Healthy Establishment summary

7.1 We have applied to the inspection of removal centres four tests which we consider determine their overall 'health'. These are:

- *that detainees are held in safety,*
- *that they are treated with respect,*
- *that they are purposefully occupied during the day*
- *that they are able to keep in contact with the outside world and are prepared for their release, transfer or removal.*

Below, we summarise the findings in this report under those four heads.

Detainees are held in safety

7.2 In applying this test to Oakington we have been mindful that two thirds of the population of the Centre had not been long in this country and many had arrived in unorthodox ways after frightening and arduous journeys. A relatively high proportion of the survey sample (two-thirds) said that they felt safe on their first night, and after a few days this figure rose to three-quarters. The same proportion also claimed that staff had approached them to enquire about their wellbeing, which is a tribute to the high quality of staff-detainee relationships in the centre. From the survey, levels of victimisation within the centre were almost negligible.

7.3 Fire and Health and Safety arrangements had benefited from a strong management drive. Suicide prevention was conscientiously addressed and incidents of self-harm were relatively rare. A safe room was needed to assist with the management of those at risk of self-harm, and the Detainee Departure Unit (DDU) had come to serve this purpose for those facing transfer to further detention. This location needed to be refurbished if it was to continue to play this role.

7.4 The Centre was aware of its responsibilities for child protection and met these well, though the need to protect children from contact with single adults resulted in family members over the age of 18 being placed in separate accommodation. Families and couples were usually kept together, though it was not always easy to determine the precise nature of family relationships.

7.5 Medical screening was perfunctory and allowed detainees to conceal their own or their children's health problems if they believed these might prejudice their asylum claims, with implications for the health of individuals, other detainees and the public. The lack of routine provision for mental health screening and the reliance on self-assessment meant that mentally ill patients lacking insight into their difficulties could be overlooked. There was a limited service from the local psychiatric hospital, but staff reported a high prevalence of insomnia, anxiety and panic, which remained largely un-addressed. The system for onward referral relied on a hand-held record.

7.6 Unlike at other centres, on-site immigration officers were actively involved in detainees' cases. However, the speed of the process (which was all carried out within seven days of arrival at the Centre) was inappropriate for full consideration of complex cases. The provision

of legal representation on site avoided the problems associated with lack of access elsewhere in the detention estate, though on site representatives did not have the capacity to represent all cases since they had become more complex. They were also constrained by the inflexibility of the fast track process and needed to emphasise their independence from it.

7.7 We conclude that Oakington provided a safe custodial environment, but lacked the necessary mental and physical health screening to identify problems with consequences for the health of individual asylum seekers and the wider public. Detention at Oakington had the advantage of being for a finite and predictable term, and access to legal advice, case information and interpretation was good, though there were concerns associated with the inflexibility and speed of the fast track process.

Detainees are treated with respect as individuals

7.8 New arrivals were treated kindly and respectfully by reception staff, though they were kept waiting for a long time in reception with no explanation and with insufficient translated and video information about life in the Centre. There was no awareness of or provision for meeting the welfare needs of those who had been picked up 'in country' without notice. Neither was there any provision for children in reception, and different arrangements were needed for the reception of families, which avoided the long wait in reception until the early hours of the morning.

7.9 Detainees could retain certain medication in possession, which was good practice, but there was little oversight of the pharmacy service and some irregularities in the storage of drugs. Almost two thirds of the survey sample claimed to have health problems connected with mistreatment in their country of origin, of whom two thirds had disclosed this to health care staff. This information was passed on to the authorities without the written consent of the patient, though not to legal representatives, and health care staff received no feedback about the outcome.

7.10 The design of the accommodation blocks was good and adequate showers, toilets and launderettes were provided. The standard of cleaning was high during our visit, though we understood that this was not always the case. The catering was rated highly by detainees, and the provision of a central restaurant shared with staff was 'normalising' and good practice, as was the provision of pre-packed food and drinks for new arrivals and discharges.

7.11 Essential needs were met in the first instance by the provision of 'destitute packs' which we thought would be better named 'reception packs'. These were adequate, except for the provision of a £3 phone card: best practice elsewhere suggests that this should be £5 and issued weekly. It was not clear how replacement items were to be supplied to detainees, though the provision for property to be stored centrally and in personal lockers was good.

7.12 The incidence of complaints was low and the survey confirmed that detainees were generally satisfied with their treatment. This was due in some part to the relatively short and finite length of stay and the nature of the people being detained, but also to the quality of custodial care. Provision for religious worship was satisfactory, but visiting ministers were exclusively Christian and there was scope for greater celebration of cultural diversity.

7.13 Adult children, aged over 18, were separated from their families, not only in terms of accommodation but also in terms of the processing of their asylum claims. The reason for it (the protection of juveniles) was understandable, but it was unacceptable that family members seeking refuge in the UK were separated from one another at a time of stress, and their asylum claims processed separately so that they could be dispersed to different parts of the country.

7.14 We conclude that, overall, detainees were treated well in Oakington and provided with a good standard of accommodation and services. The separation of families with over-18 children gave us most cause for concern.

Detainees are engaged in constructive activity

7.15 The purpose of the Centre was the fast track processing of asylum claims, and to this end a series of meetings and interviews were attended during the period of detention, though there was scope for other activities. An amenities block provided a range of unstructured activities during the day and ESOL¹⁴ classes in the evenings, but the English classes excluded those under 16 years. There were few specific activities for women or older people or incentives to engage in them.

7.16 We conclude that there was scope for more time-tabled activities, more use of the outside area, greater differentiation of provision for young people, women and older people, and more incentives for participation.

Detainees are able to keep in contact with the outside world and prepare for their release, transfer or removal

7.17 Arrangements for sending and receiving mail were good, though little used. Faxes could be sent free and good use was made of this facility. Phones were a source of frustration. Calls were expensive, with a service monopoly, international phone cards were not available, those without means were limited to one £3 phone card and the lack of privacy hoods made it almost impossible to hear what was being said during a tannoy announcement. There was no access to e-mail or the internet. The visits room was small and under-used, and visitors, both legal and domestic, were required to give 24 hours notice.

7.18 Detainees granted temporary admission were issued with an address and travel ticket by the National Asylum Support Service, but received no orientation courses to prepare them for life in the UK as asylum seekers. Those being taken into further detention were not told of this until the morning of departure and, during the inspection, had not been allowed to use the phone to communicate this to family and friends.

7.19 We conclude that detainees at Oakington were not given sufficient help to keep in touch with the outside world or to prepare for their release or transfer into further detention.

¹⁴ English for Speakers of Other Languages

Conclusion

7.20 The application of these four tests indicated that Oakington was essentially a place of safety providing a high standard of custodial care. The needs and dignity of detainees were respected by Centre staff, except for the splitting of families during and after detention, and within the limits of a fast and inflexible process. Unlike at other centres, there was access to on-site case information and legal representation, though there could be more structured activities, particularly for juveniles, and incentives to take part, in order to ease the tension associated with the serious business of the Centre. Arrangements for those leaving the Centre needed improvement. A forward destination and the means of travel were provided to those granted temporary admission, but they were given no support to orient to life in the UK. Those destined for further detention were not informed about this until the day of departure, and appeared to be unable at this stage to contact family, friends or legal representatives.

An Inspection of Campsfield House Immigration Removal Centre

18th – 20th March 2002

Acknowledgements

The inspection of Campsfield House was carried out between the 18th and 20th of March 2002. The team consisted of:

Colin Allen	HM Deputy Chief Inspector of Prisons
Monica Lloyd	Head of Thematic Reviews
Marjorie Simonds-Gooding	Consultant Inspector
Rev Jim Siller	Consultant Inspector
Jane Mackay	Health Management Inspector

The questionnaire¹⁵ analysis and management of interpreters¹⁶ was carried out by:

Victoria Richardson	Senior Research Officer
Sarah Leask	Research Officer

The team were assisted by:

Nicola Rogers	Immigration Law Specialist ¹⁷
Christina Pourgourides	Consultant Psychiatrist ¹⁸
Tim Snewin	Pharmacy Inspector
Lynda Cole	Adult Learning Inspector

¹⁵ Translation arranged by Sally Walker Language Services

¹⁶ Provided by Lexicon Linguistics

¹⁷ Garden Court Chambers, Temple

¹⁸ Sutton South Community Mental Health Team

8. Fact page

Task of the Establishment

The task of Campsfield House is to hold those detained by the Immigration Service as overstayers, illegal entrants or failed asylum seekers prior to their removal from the country. It also holds a proportion of detainees whose cases have not yet been determined, but who are considered to be at risk of absconding.

Location

Kidlington, Oxfordshire

Contractor

Group 4

Number held

184 male detainees, 168 at the time of the inspection

Escort provider

Wackenhut Escorting Services UK

Type of accommodation

There are 184 places for male detainees in 91 rooms with single, double or multiple occupancy within three blocks. All services are located within the main building with the exception of the education facility which is provided in two temporary classrooms within a central courtyard, and a prefabricated two cell separation facility also outside the main building.

Last full inspection

October 1997

9. A Healthy Establishment summary

9.1 We have applied to the inspection of removal centres four tests which we consider determine whether overall they provide a healthy environment. They are:

- *that detainees are held in safety;*
- *that they are treated with respect;*
- *that they are purposefully occupied during the day;*
- *that they are able to keep in contact with the outside world and are prepared for their release, transfer or removal.*

Below, we summarise the findings in this report under those four heads.

Detainees are held in safety

9.2 In applying this test we have been mindful that detainees had received a major setback by being taken into detention and were facing an uncertain future. In these circumstances we did not expect them to report feelings of wellbeing, but we did expect that would feel safe within the Centre. From the survey of detainees at Campsfield House only a third felt safe on their first night and after a few days this had fallen to less than a quarter (22%), and those who said they did not feel safe (52%) said they felt this way most of the time. Detainees were not able to lock the doors to their rooms and nor were they locked in by staff. The connecting doors between the blocks were only locked down at midnight. Only 30% of detainees claimed that staff had enquired after their wellbeing, despite this being a requirement under the Detention Centre Rules¹⁹, and there were no call bells anywhere in the detainees' accommodation to summon help from staff. Levels of staff supervision were too low in our view, and we shared the concerns of detainees that they would not be able to evacuate safely in the event of a fire. Detainees reported quite high levels of, though not frequent, verbal and physical victimisation by staff and other detainees, and a degree of sexual harassment which was virtually non-existent in the other centres²⁰.

9.3 That said, there had never been a suicide and the Centre staff were experienced at managing distress, self harming behaviour and food refusal within a multi-disciplinary model which included health care and religious affairs staff. The new induction arrangements promised to be able to provide closer supervision and assessment of new arrivals before they were placed in the main accommodation. However, there were no arrangements for dealing with detainees' welfare problems or needs outside the Centre, or their concerns about families left behind. A local consultant psychiatrist was able to offer in-patient beds to those who were sectionable, but those who were not, but who were still in need of psychiatric care remained in the non-therapeutic milieu of the Centre. The nursing staff provided support to those who

¹⁹ SI 2001 No 238

²⁰ From the way this question was asked it was not possible to tell whether unwanted sexual attention came from staff or detainees, though we think it more likely that it came from detainees.

wished to remain in their quiet room throughout the day and an exceptional rapport existed between the nursing staff and their patients.

9.4 There were major concerns however over access to information about detainees' immigration cases, or to good quality legal representation. Casework was not progressed efficiently and on-site immigration staff had little involvement in this. Many detainees did not know why they were being detained and monthly reviews, where they were occurring, did not inform them about the progress of their cases. Some detainees were not being produced for their bail or appeal hearings, and there was no access to the internet despite the importance to detainees of accessing information about their countries of origin. A significant proportion of detainees had no legal advice or representation, and many did not know how to obtain it. A number were receiving an inadequate service and there was no monitoring of its quality.

9.5 We could not conclude overall that Campsfield House was a safe custodial environment, though the quality of multi-disciplinary work with the vulnerable was very good. There was also no effective system for providing advice and help with detainees' welfare problems outside the Centre. The level of information about the progress of cases or access to legal support was poor and afforded little protection against the damaging effect of unanticipated and indeterminate detention.

Detainees are treated with respect as individuals

9.6 This test concerns the extent to which the Centre meets detainees' basic needs to be treated humanely and with compassion. It applies to all aspects of Centre life, but specifically it concerns staff attitudes to detainees, the way they are received into the establishment, the provision of interpreters and translated information, race relations and concern for welfare needs. It also concerns the quality of accommodation, food, healthcare and the regime, the provision of an effective complaints system and the means for detainees to be able to practise their faith.

9.7 There were long delays in reception for those being admitted and the area was too small for the numbers passing through. Although there were photographs of the Centre on display, there was a lack of written information in the languages of detainees explaining where they were and how the Centre operated. Searching was carried out sensitively and strip searching only on the basis of a positive indication. But there was no means of phoning relatives or friends from reception, and those who had been taken into detention without warning or who were being discharged without warning were not able to pass on this essential information. There was also no system for identifying and addressing immediate welfare concerns.

9.8 The Healthcare centre was new and provided good accommodation and the medical staff had received specialist training in the health needs of asylum seekers and the Islamic culture. Long term detainees were given a thorough health check and completed a health questionnaire in their own language. They were checked for TB and offered vaccination with no compulsion. Specialist HIV counselling and treatment was also available. Patients were asked about previous mistreatment, though specialist interpreters were not used, and two thirds of those claiming to have health problems associated with mistreatment had revealed these to health care staff.

9.9 The accommodation was of a good standard though detainees did not all have a chair or access to a table in their rooms. There was a no-smoking policy, which was enforced, and an incentive scheme to encourage pride in their surroundings. There were low levels of vandalism and graffiti. Detainees were able to wear and launder their own clothes, had access to good showers at any time and experienced full access to the Centre's facilities except for a period overnight when they were confined to their accommodation blocks and encouraged to remain in their rooms. The system for receiving phone calls was the best we had seen in the detention estate, and there was no intrusive tannoy.

9.10 There was good provision for detainees to worship in their own faith and all enjoyed a high level of pastoral care from the Manager of Religious Affairs, though the facilities for Christian worship were not ideal. The food was varied, balanced and culturally suitable and meals were provided at suitably spaced intervals with snacks in between, though packed lunches were not reaching those being discharged. The Centre shop did not provide a sufficient range of products or phone cards and there was confusion about who was eligible for free toiletries and phone cards. Ongoing efforts were being made to consult with detainees about the food and the shop, with mixed results. Staff did not readily engage with detainees and the attitude of some suggested that they did not have a wide appreciation of the cultures and conflicts which characterised the backgrounds of different national groups. Detainees had direct access to the Visiting Committee and were able to make an official complaint, though they had no access to an independent Ombudsman if they were dissatisfied with how their complaints had been handled. The lack of interpreters was a major omission.

9.11 Overall, we conclude that Campsfield House treated detainees with respect. The accommodation was in good order and the facilities provided were generous within the physical limitations of the Centre. Those who were vulnerable were monitored and supported by good multi-disciplinary work that included very good input from healthcare staff. There was a need for more training to help residential staff understand the backgrounds of detainees and engage with them, and scope for more translated information and use of interpreters.

Detainees are engaged in constructive activity

9.12 This test concerns the extent to which a full regime is provided, together with the incentive to engage with it so that detainees are able to keep themselves active, fit and healthy during the time they are detained.

9.13 Education was delivered to a good standard by the local education authority and met detainees' interests in English and IT. In addition dedicated activities staff worked alongside teachers and games staff and provided a range of competitive events and entertainment, and encouraged participation. There was a well-equipped fitness room providing good access, induction and qualified supervision, and sports kit was provided. The library was popular and provided computer games, board games and weekly newspapers in most of the relevant languages, but not the internet. However, detainees felt under-occupied and about half expressed a desire to work.

9.14 We conclude that Campsfield House afforded a good level of constructive activity, though not enough to satisfy the needs of detainees, and there were no opportunities for paid work.

Detainees are able to keep in contact with the outside world and prepare for their release, transfer or removal

9.15 This test concerns the extent to which the damaging effect of detention is mitigated by opportunities to keep in touch with family, friends and the outside world and to access crucial information about the situation in countries of origin. It also concerns the extent to which the Centre assists detainees to prepare for their release, transfer or removal by providing adequate notice and help to prepare a viable release plan.

9.16 The provision for visits was good, but the visits room was small. The system for sending and receiving mail and faxes worked well, as did that for receiving incoming phone calls. However the price of phone cards was prohibitive, particularly for international calls, and the provision of free phone cards for those without means had ceased.

9.17 There was also no acceptance of any obligation on the part of the Immigration Service to prepare detainees either for their transfer to another place of detention, temporary admission to the country or removal from the UK. Detainees were given insufficient warning of their next move and were unable to prepare themselves or inform their families, friends or legal representatives what was happening to them. Those granted admission to the UK for the first time were given no help to orientate themselves to life in the UK or to understand the system that would support them. Those being removed were lucky to have more than three days notice, and some did not have that. There was no removal plan which ensured that their affairs in the UK were closed and they knew what to do on arrival at their next destination. No-one would choose to board a plane in these circumstances, and it was inappropriate to expect detainees to do so.

9.18 We conclude that Campsfield House succeeded in allowing detainees to keep in touch with the outside world through phone, fax and visits, but that there was insufficient preparation for release, transfer or removal.

Conclusion

9.19 We could not conclude that Campsfield House was a place of safety, mainly because of poor levels of supervision and despite the best efforts of most staff. Detainees were however treated with respect in terms of the quality of custodial care, health care and pastoral care they received. However, there was a blindness to their welfare needs outside, and a lack of information about their cases or access to competent independent advice and representation. Detainees were however professionally served in terms of activities and entertainment within the limits of a regime that did not allow paid work, but they were inadequately prepared for their release, transfer or removal.

An Inspection of Lindholme Immigration Removal Centre

25th – 27th March 2002

Acknowledgements

The inspection of Lindholme was carried out between the 25th and 27th March 2002. The team consisted of:

Colin Allen	HM Deputy Chief Inspector of Prisons
Monica Lloyd	Head of Thematic Reviews
Marjorie Simonds-Gooding	Consultant Inspector
Rev Jim Siller	Consultant Inspector
Paul Fenning	Inspector
Jane Mackay	Health Management Inspector

The questionnaire²¹ analysis and management of interpreters²² was carried out by:

Victoria Richardson	Senior Research Officer
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The team were assisted by:

Nicola Rogers	Immigration Specialist ²³
Christina Pourgourides	Consultant Psychiatrist ²⁴
Steve Gascoigne	Pharmacy Inspector
Bernard Moroney	Dental Inspector
Matthew Coffey	Adult Learning Inspector

²¹ Translation arranged by Sally Walker Language Services

²² Provided by Lexicon Linguistics

²³ Garden Court Chambers, Temple

²⁴ Sutton South Community Mental Health Team

10. Fact page

Task of the Establishment

The task of Lindholme Removal Centre is to hold those detained by the Immigration Service as overstayers, illegal entrants or failed asylum seekers prior to their removal from the country. It also holds a proportion of detainees whose cases have not yet been determined, but who are considered to be at risk of absconsion.

Location

Hatfield Woodhouse, Doncaster, South Yorkshire, adjacent to HMP Lindholme, a category C prison establishment.

Provider

HM Prison Service

Number held

98 at the time of inspection

Escort provider

Wackenhut Escorting Services UK

Type of accommodation

The accommodation is a refurbished previous RAF officers mess with its own perimeter fence adjacent to a prison establishment. The accommodation consists of two wings at opposite ends of a central corridor and central facilities. An education, gym and visits block are located beyond an inner fence.

Last full inspection

This is the first inspection of the Removal Centre since its opening in March 2001.

11. A Healthy Establishment summary

11.1 We have applied to the inspection of removal centres four tests which we consider determine whether overall they provide a healthy environment. They are:

- *that detainees are held in safety;*
- *that they are treated with respect;*
- *that they are purposefully occupied during the day;*
- *that they are able to keep in contact with the outside world and are prepared for their release, transfer or removal.*

Below, we summarise the findings in this report under those four heads

Detainees are held in safety

11.2 In making judgements about the safety of detainees we have been mindful that the population held in Lindholme was by definition insecure. They were faced with being removed from this country, some after several years of residence in the UK, and they were fearful of being in an establishment run by the Prison Service. They had experienced a severe reversal in their fortunes and they were not likely to report feelings of wellbeing, and nor did they. However the low proportion of 15% claiming to feel safe contrasted poorly with the norm for the other centres of 37%, and feelings of safety decreased with length of time in the centre. There were low levels of staff supervision, particularly at night, and detainees did not feel safe from one another or from fire. Our survey indicated that intimidation and hostility was present though not widespread, and some individuals were made to hand over property. Detainees also became depressed the longer they spent in detention. Staff were vigilant with regard to depression and the risk of suicide or self harm, and conscientious with regard to monitoring those at risk, but there was little use of other detainees or volunteer visitors who spoke the same language to provide support.

11.3 Detainees did not receive ongoing information about the progress of their cases in their own languages, nor did immigration staff on site have access to this information. They were therefore unable to anticipate when life-changing decisions were imminent, and when decisions were made they were not informed promptly or helped to discuss its implications and prepare for their future. Access to legal representation and advice was not facilitated and detainees were not informed of their legal rights. Nor were they told how to get a solicitor, the quality of service they should expect or how to complain if they did not receive it. Faxes and letters were allowed, but legal visits only took place in the afternoons and phones were not only vandalised and inoperable, but phone cards were prohibitively expensive in relation to detainees' means.

11.4 We could not conclude therefore that Lindholme was a place of safety or that it acted to provide as secure an environment as possible for those struggling to cope with the consequences of indeterminate detention and an uncertain future.

Detainees are treated with respect as individuals

11.5 Staff attitudes to detainees were mainly respectful, but they were used to dealing with offenders and did not fully appreciate the fundamental difference in detainees' and prisoners' perceptions of the legitimacy of their situation (though we accept that it was only immediately before the inspection that they had had to operate under Detention Centre, rather than Prison, Rules). Detainees were very sensitive to being in an establishment run by prison staff, and any sense of being treated as prisoners was taken badly. Leaving newly arrived detainees waiting in vans for long periods was not respectful, and both strip searching without reasonable suspicion, the wearing of prison clothes as standard practice and subjecting them to a prison based incentive scheme were all inappropriate. The provision of translated information about the centre and a dedicated Immigration Liaison Officer were both strengths, but the lack of concern for urgent welfare needs outside was an omission.

11.6 The quality of accommodation was satisfactory, but the heating was inadequate and this problem had persisted despite numerous complaints. The quality of the food was poor, as was its quantity, standard of preparation, variety, and suitability for multi-national tastes, and there was no pre-select menu. The health care facilities were also poor and health care was not delivered by dedicated staff with the necessary specialist knowledge or clinical supervision. Interpreters were not used and there were some irregularities in the storage of drugs. There was good attendance from ministers of other faiths, but no full time Manager of Religious Affairs to engage with the day to day problems of detainees and provide pastoral support. Complaints had been made via the centre's request and complaints procedure, but few of those who had complained were satisfied with the way this was handled. Sharing one Board of Visitors between the prison and the removal centre was inappropriate given their different roles under Detention Centre Rules. Understanding of its purpose was poor among detainees and there was no direct and confidential access.

11.7 We could not therefore conclude that Lindholme afforded detainees appropriate respect. Overall there was as yet insufficient appreciation of the dissimilarity between immigration detainees and prisoners and of the important ways in which the centre should operate differently to meet the needs of detainees.

Detainees are engaged in constructive activity

11.8 There was no longer any paid work available in the centre and activities were confined to education, PE and leisure. A basic payment of £2.50 was made to each detainee regardless of whether he engaged actively with any aspect of the regime. Those with skills which could be deployed within the centre were not encouraged to use them, except for those who could interpret, but this service was not rewarded in any way. The gym programme was subject to disruption caused by staff shortages, and there was no access to the popular common room after 7.45 pm in the evening.

11.9 We could not therefore conclude that detainees at Lindholme were engaged in constructive activity that would give them a sense of worth and support their mental and physical health.

Detainees are able to keep in contact with the outside world and prepare for their release, transfer or removal

11.10 The ability of detainees in Lindholme to keep in touch with the outside world was limited by the lack of access to e-mail and the internet and to phones that worked or that they could afford to use. In practice fax and letters appeared to be provided free of charge to those without means, on formal application. The location of the centre meant that only a minority of detainees received social visits and the services of volunteer visitors provided a life line which the centre appeared not to fully value or exploit. There was no assistance available to detainees being released or transferred. Removal papers were served at the last minute and at weekends when there were few staff available to provide support or help with preparations. There was no removal plan which ensured that their affairs in the UK were closed and they knew what to do on arrival at their next destination. No-one would choose to board a plane in such circumstances, and it was inappropriate to expect detainees to do so.

11.11 We could not conclude therefore that Lindholme provided the means for detainees to keep in contact with the outside world or prepare for their release.

Conclusion

11.12 The outcome of our inspection and the application of our four tests lead us to conclude that Lindholme Removal Centre was not a healthy establishment for detainees and that fundamental and far-reaching changes were needed to bring it up to the standard expected.

Appendix

Sampling methodology

11.13 It was impractical to employ our usual random sampling methodology for removal centres as detention centres do not operate patrol states during which named individuals can be easily located. We therefore employed saturation sampling using a census methodology. The attrition rate is contained in Table 1. Overall we were able to reach 59% of the population of the five centres by means of a questionnaire in a language each respondent could understand.

TABLE 1. THE PROPORTIONS SAMPLED IN FIVE IMMIGRATION REMOVAL CENTRES

	Population (n)	Quest. in own language (%)	Sampling frame * (n)	Return (n)	% sampled
Tinsley House	105	95	102	43	42
Haslar	147	98	147	107	73
Oakington	259	92	207	112	54
Campsfield House	168	95	168	84	50
Lindholme	100	98	100	74	74
Average					59

* this was reduced in Centres holding families as we counted each family as two potential respondents. Children were not surveyed.

11.14 We attempted to check the key features of our sample against the key features of the populations of each of the centres to determine whether we had captured a representative sample. This proved to be difficult in terms of age as we collected age data using different categories than that used by the centres. In terms of nationality and ethnicity the samples were broadly comparable, except that black detainees were over-represented in three of the Centres, despite there being under-representation of Jamaicans across all five. Whites were also under-represented in three of the centres, though the differentials were not large. We also, however, spoke to groups of detainees by nationality, with interpreters present, as well as English speaking groups. We found that those who did not wish to fill in questionnaires were often willing to talk in groups. This applied to the Jamaicans in particular.

11.15 We are therefore reasonably confident that we have been able to sample detainee opinion fairly comprehensively. The methodology of inspection is one of triangulation in which judgements are informed by information from three sources. The survey data did not therefore stand alone, but was considered alongside other information to contribute to an overall picture.