



Annual Report
of the
Independent Monitoring Board
at
IRC Heathrow

for reporting year
1 January to 31 December 2016

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Monitoring fairness and respect for people in custody

1. STATUTORY ROLE OF THE IMB

Every Prison and Immigration Removal Centre (IRC) in England and Wales has an independent monitoring board (IMB) made up of members of the public from the community in which the prison or IRC is situated. IMB members have access to all parts of the establishment they monitor and to all its records, and can speak to any prisoner or detainee. They are unpaid volunteers who are appointed by Ministers – in the case of IRCs by the Minister for Immigration. This Board monitored the Heathrow Immigration Removal Centre, which comprises two adjacent sites close to Heathrow Airport known as Harmondsworth and Colnbrook.

The Board is specifically charged to:

- (1) satisfy itself as to the humane and just treatment of those held in the Centre.

- (2) inform promptly the Secretary of State, or any official to whom he has delegated authority, as it judges appropriate, any concern it has.

- (3) report annually to the Secretary of State on how far Heathrow IRC has met the standards and requirements placed on it and what impact these have on those held in the Centre.**

This report has been produced to fulfil our obligation under (3) above.

Independent Monitoring Board at Heathrow IRC

Annual Report 2016

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3. DESCRIPTION OF HEATHROW IMMIGRATION REMOVAL CENTRE

Heathrow Immigration Removal Centre (HIRC) is situated about two miles away from Heathrow Airport, and comprises two physically separate sites known as Harmondsworth IRC and Colnbrook IRC. The Harmondsworth site provides accommodation for up to 676 males. Colnbrook provides accommodation for up to 369 males and 27 females. It stands a couple of hundred metres north of the Colnbrook-bypass section of the main A4 dual carriageway. HIRC has been operated throughout the year by MITIE Care & Custody (C&C), with healthcare provided by Central & North West London NHS Foundation Trust (CNWL).

There is a single management team across both sites. However only limited rationalisation across the two sites has been achieved due to the physical separation of the buildings. Security and Facilities Management have each been combined, and there is a single visitors' reception, administering the booking process, covering both sites. Segregation facilities are still maintained on both sites, although if detainees' stays are extended, there is now a process to house them on the Colnbrook site. Facilities related to healthcare, religion, kitchens, shops, gyms and activities continue to be replicated on both sites. Also, on both sites, detainees have access to outdoor spaces suitable for team games such as football and cricket and use of their own, or a centre-provided, basic mobile phone, with no internet or camera function. Bedrooms on both sites include a television set with a large number of national and overseas channels to choose from. Detainees can only smoke outside the buildings.

Harmondsworth

This site has two very distinct styles of accommodation:

Cedar and Dove are the two older hostel-style units housing 309 detainees, mostly in two-bedded rooms, but with some three and four bedded rooms. These detainees are restricted at nights to their own corridors of about 20 rooms. Showers and toilets are shared and provided off each corridor.

Ash, Beech, Gorse and Fir, are four newer, residential units housing a further 367 detainees. This accommodation is built to Category B Prison standard. The rooms contain bunk beds, a washbasin, and a toilet with no seat, behind partial screening. Showers with three quarter doors are located off corridors.

There is also a segregation unit (Elm) with six rooms for detainees who are removed from association or temporarily confined (under Rules 40 (R40) and 42 (R42) of the Detention Centre Rules).

Harmondsworth IRC has the most extensive healthcare facilities in the Immigration Detention Estate (IDE) and is the principal centre for male Detained Asylum Cases (DAC). DAC is a speeded up asylum process for people whose cases the Home Office (HO) believes it can determine quickly and who are held in detention while their cases are processed.

There are two entirely different and separate HO teams based at the Centre. The larger is the team of case-workers and support staff for the DAC process, which deals exclusively with the asylum cases of those on DAC. As with casework teams located elsewhere, the IMB has limited interaction with this team. The second is a small team which is part of the Detention and Escorting Services Directorate within the HO. It has responsibility to oversee the contracted services provided by C&C and the welfare of detainees. It has no hand in immigration casework but acts as the main conduit of information between detainees and caseworkers located around the country. The IMB has regular interaction with this team.

The turnover of detainees remains high and the number passing through has averaged around 1000 per month in 2016.

Colnbrook

The Centre was built so that difficult male detainees from the whole IDE could be managed with close supervision and care. At first sight the three-storey accommodation unit, with its four separate blocks, is reminiscent of a Category B Prison.

Accommodation in the four main residential units is arranged in twin rooms, eleven on each of the three floors. All rooms have toilets and washbasins in a partially screened off area, and each block has 12 shower cubicles and a laundry room comprising two domestic washing machines and two domestic dryers

Detainees are locked in their rooms from 9pm to 8am (8.30am at weekends). During the day, detainees are at liberty to move around the activities corridors and between the four units except at meal times when detainees have to return to their own unit.

The Centre also contains a separate section which was originally designed as a Short Term Holding Facility (STHF). This section is now used as an induction unit, although the original design of the Centre means that it continues to be physically separate from the rest of the accommodation units. There are 50 double rooms with a bunk bed, toilet and shower in each room. These rooms are much smaller and more cramped than the rooms in the other units. Access to the main activities corridors in the Centre is only available under escort, although once on the activity corridors, detainees have the same access to all the facilities.

There is a segregation unit with sixteen single rooms, six each on the ground and first floors, and four on the second floor. These rooms have basic facilities a bed, toilet and washbasin. These rooms are only designed for very short stays, in line with Detention Centre Rules 40 & 42. The second floor has been designated for disruptive females, although it can be used for male detainees if no females are in residence should all the other rooms in the unit be occupied.

There is a female unit called Sahara Unit (SU) with 27 beds in nine three-bedded rooms, which is situated on the top floor of the separate reception and visitors block. It has a more relaxed regime than the men's units, with a lounge area equipped with sofas and a large screen TV, and direct access to IT facilities. There is no direct access from this unit to fresh air and exercise yards; detainees have to be escorted for exercise at times when these facilities are not being used by the men.

The turnover of detainees has remained high and the number passing through has averaged in excess 1300 per month, in 2016.

4. EXECUTIVE SUMMARY AND RECOMMENDATIONS

This report covers the calendar year 2016 and is the second for the combined Heathrow IRCs.

Overall it has been another challenging year for HIRC. On the one hand, we have seen good progress made on updating some of the physical facilities (particularly on the Harmondsworth site), while on the other, in our experience, standards in the Centre have not always been satisfactorily maintained, which we at least partially attribute to inadequate staffing levels.

Overall, the Board is satisfied that at least minimum standards have been maintained but access to some of the added value activities which make such a difference to the detainees' experience was reduced at times during the year. The Board do acknowledge that all parties are working hard to address the issues raised in this report, that progress is being made, but there remains a lot that the Centre can do so that the detainees are consistently treated with dignity and respect.

4.1. Progress of Recommendations made in the 2015 Annual Report

In 2015, we made 16 recommendations in our report which was published at the beginning of May 2016.

The Board were disappointed that due to purdah around the Brexit vote and subsequent changes in ministerial responsibilities that a formal response from the Minister was not forthcoming to our report until September 2016.

The Board were disappointed that 7 of the 16 recommendations were rejected by Home Office (44%), and in the Board's opinion, some of these matters remain a concern, and will be covered again in this report. An action plan was put in place by the Home Office to address the recommendations that were not rejected. Of the recommendations accepted either in full or in part, there has been good progress on 55% which are now considered either resolved or improving. However, the Board have been disappointed in the lack of progress on our recommendations relating to extended use of R40 for vulnerable adults, laundry provision at Colnbrook, and provision of adequate social care (See Appendix A for further explanation). Recommendations are repeated in this report where the Board feels that the issues mean that detainees are not held in the decent humane conditions the Board are asked to monitor.

4.2. Recommendations in this Report

The recommendations set out below follow the sequence in sections 5 and 6 of this Report rather than relative importance.

4.2.1. Recommendations to the Minister of a Policy Nature

- 1. The Board recommend that the Minister introduces a review system, independent of the immigration authorities, for all cases where detention exceeds 6 months. This would ensure that detention cannot become extended without independent scrutiny. IRCs were only designed for short stays of up to three months and the facilities and levels of care reflect this. The environment is not acceptable for prolonged stays. (see 6.1)**

4.2.2. Recommendations for Home Office

- 2. The Board recommend that Home Office should ensure that the next escorting contract seeks to dramatically reduce the need for night time (between the hours of 10pm and 8 am) moves between IRCs on the grounds of decency (see 5.5.1)**
- 3. The Board recommend piloting a controlled facility for detainees to use Skype or other similar low/zero cost communication tools, to enable detainees to more effectively stay in touch with family and friends whilst in detention (see 5.5.4)**
- 4. The Board recommend that Rule 40 should not be used to house difficult individuals with mental health conditions. They are vulnerable and confinement is not a humane way to address the problems they experience. Home Office should consider undertaking a review of the scale of this issue across the Immigration Detention Estate and consider alternative options to managing their detention so that they receive better specialised care for their specific needs. (see 5.7)**
- 5. The Board recommend that urgent action is taken by Home Office to improve the effectiveness of the Criminal Casework Directorate processes to ensure that all time-served Foreign National Offenders who are no longer eligible to remain in the UK are removed directly from prison on completion of their sentences. (see 5.7)**
- 6. The Board recommend that C&C and Home Office review the adequacy of the staffing profiles in the light of the performance of the Contract and the findings from the HMIP Inspection during 2016. (see 6.5)**

4.2.3. Recommendations for the Centre Manager

- 7. The Board recommend that C&C give consideration to extending the use of the Cultural Kitchens to cover both lunch and dinner times each weekday. (see 5.1.3)**
- 8. The Board recommend that the risk assessment undertaken before a detainee is escorted off the premises for hospital appointments or other appointments is reviewed by C&C and Home Office, to ensure that the use of handcuffs is proportionate to the risk of escape. (see 5.5.3)**
- 9. The Board recommend that C&C and Home Office continue to review the provision of laundry services across both sites and consider replacing the unreliable domestic appliances on the Colnbrook site with industrial equipment both to improve reliability of service and to potentially reduce costs over time. (see 5.8)**
- 10. The Board recommend that C&C Facilities Management give a higher priority to repairing facilities and the fabric of the buildings as this is a constant source of detainee frustration. (see 5.8)**
- 11. The Board welcome the decision to return the Induction Unit rooms in Colnbrook to single rooms, and recommend that these changes are implemented as quickly as possible. (see 6.4)**

4.2.4. Recommendations to Healthcare Provider and NHS Commissioners

- 12. The Board recommend that CNWL consider introducing a system to text reminders to detainees of their appointments on the day of their appointment. (see 5.3.1)**
- 13. The Board recommend that CNWL address the shortfall in permanent Band 5 RGNs as a matter of urgency (see 5.3.3)**
- 14. The Board recommend that NHS Commissioners give consideration to using the already installed x-ray equipment for a wider range of uses, as this could reduce the need for detainees to be sent out of the centre for x-rays at local hospitals. (see 5.3.7)**

5. AREAS OF GENERAL INTEREST

5.1. Equality and Inclusion

The detainee population at HIRC are multi-national and multi-faith and has a wide variety of different needs in relation to food, religion and culture. The ten nationalities most highly and consistently represented are Indian, Pakistani, Bangladeshi, Nigerian, Albanian, Polish, Chinese, Vietnamese, Jamaican and Ghanaian. They represent around two thirds of the population housed at HIRC, with the other third comprising a multitude of different nationalities.

HIRC has dedicated staff focussing on welfare and religious issues who are based within the Centre, are accessible to detainees for advice and support and we believe are very much valued by the detainees.

Overall there is a good focus on equality and inclusion within HIRC, and the proportion of such issues raised with the IMB fell to 0.3% in 2016 from 1.8% reported in 2015.

5.1.1. Religious Facilities and Arrangements

There are usually significant populations of practising Muslims and Christians, with smaller populations of Sikhs, Hindus and Buddhists housed at HIRC, and their religious needs are well catered for. HIRC provides worship facilities for all these faiths on both sites. Muslims typically comprise over half the detainee population, so Friday prayers take place in the sports halls at Colnbrook and Harmondsworth and are well attended.

The arrangements for Ramadan went extremely well this year with few complaints. The arrangements were no different from previous years, so this reflects the level of pre-planning and communication with the Muslim detainees by the Imam. As detainees were already locked in their rooms before the fast was over, arrangements were made to provide “tiffin tins” which retained heat for a reasonable period of time so that detainees observing the fast had a hot meal to break their fast. In July, ‘Eid ul Fitr’ which marked the end of Ramadan, was successfully celebrated. For the first time the whole Muslim population of Harmondsworth was able to celebrate together to mark the end of Ramadan with communal prayers and a meal which was clearly very much appreciated by the detainee population. This was managed very successfully despite the main summer annual leave period for staff, and demonstrates the success of the new annual leave arrangements that were implemented this year, which better spreads annual leave throughout the calendar year.

The Christian chapel at Colnbrook is a bright and welcoming space with a semi-circular seating area for worship and quiet prayer. A number of services are conducted each week in both the Anglican and Catholic traditions. The open regime in the Centre has continued to make these services accessible to those wishing to worship.

The gurdwara continues to be well used, and the part time Sikh and Hindu faith leaders continue to be visible around HIRC.

During the year the Centre plans to celebrate a variety of festivals that provide a good mix across the various faith groups. In 2016 there were 15 festivals celebrated which included; Chinese New Year, Easter, Vaisaki, Ramadan, Eid ul Fitr, Eid ul Adha, Diwali and Christmas.

5.1.2. Language Arrangements

HIRC employs a diverse workforce who can communicate with the detainees in a wide range of languages. Staff, detainees and IMB members can also request use of the “Big Word” translation facility if there are no staff available to translate. Literature in the Centre is produced in the main languages stipulated by the Home Office.

5.1.3. Cultural Facilities

HIRC has continued to operate cultural kitchens on both sites throughout 2016, which allow detainees to cook their own meal and then share this with their friends amongst the detainee population. These kitchens are very popular with detainees and there is a waiting list to use them. Whenever we visit them we see detainees who are enjoying the opportunity to cater for themselves. The kitchen at Colnbrook is now starting to look tired, and will need to be upgraded in the near future.

Currently these facilities are used at weekday lunch times only. Given their popularity, consideration should be given to extending the use to cover the evening meal times as well.

The Board recommend that C&C give consideration to extending the use of the Cultural Kitchens to cover both lunch and dinner times each weekday.

5.1.4. Disabled and Disability Arrangements

The Board are pleased to report that in October 2016, one room at the Colnbrook site was refurbished to properly cater for a wheelchair user. This is a significant improvement in the facilities available for physically disabled detainees, and is welcomed. Whilst this addresses some of the concerns the Board have previously raised in relation to the treatment of physically disabled detainees, the layout of the Centre makes it very difficult for wheelchair users to access the full range of facilities.

The Board has expressed concerns about how the requirement for disability aids is assessed and the time taken for that assessment to be undertaken. Additionally, where a need is identified, in providing the relevant aids to the detainee, especially for mobility related issues, such as providing relevant specification wheelchairs and/or other walking aids such as sticks.

5.2. Education, Learning and Skills

Unlike a prison, an IRC does not have an objective to develop the education and skills of detainees. The expectation is that the vast majority of detainees will only be held in detention for short periods of time which are not compatible with undertaking significant education courses. The average stay of detainees during 2016 was 56 days, down from 62 days in 2015.

Consequently, the facilities provided at HIRC are predominantly geared towards providing a variety of activities for detainees, including some opportunities to learn and develop certain skills if the detainees wish.

HIRC provides regular ESOL classes, which attract a small but steady stream of detainees. Courses are also run on IT, particularly on the use of spreadsheets and word processing. There are arts and crafts facilities, libraries, music and media rooms on both sites. These are all well utilised by detainees. The open regime introduced by C&C in 2015, which has operated throughout the year on the Colnbrook site, and extended to Harmondsworth in July, has given detainees greater access to all of these activities, and this is welcomed by the IMB. There have been occasions during the year when some of the activities have been closed due to a shortage of staff in the Centre. When staff illness and absence is high, these facilities are, regrettably, often the first to be withdrawn.

HIRC provides centralised internet access for detainees, although the use of social networks and internet based communications facilities, such as Facetime and Skype, is not allowed. These facilities are provided in dedicated rooms on the activities corridors on both sites and are well used by detainees, both to access information that is relevant to their situation and also to keep in touch with family and friends via e-mail. Rotas are operated so that detainees on all units have access to the internet each day. At the Colnbrook site, the Induction Unit, which is physically remote, has a small number of dedicated PCs available on similar time frames to those on the main units and the Sahara Unit for females has dedicated facilities, which are available for longer periods. At the Harmondsworth site, there are also some PCs located in the library and on some units.

These facilities are generally well run although inevitably, given the extensive use this equipment is subjected to, there is usually a proportion of PCs that are not working, and the speed of access is also showing signs of deterioration due to the age of some of the equipment. A refresh of the PC equipment would be beneficial in the foreseeable future.

The IMB have experienced only a few issues relating to education and activities representing only 1.7% of issues raised with the IMB (1.4% in 2015) and these are generally easily resolved.

5.3. Healthcare and Mental Health

Healthcare provision at HIRC is provided by CNWL under a contract that has been specified by NHS England. This contract commenced on 1 September 2014.

Although this contract has been established for over two years now, the IMB continue to receive a significant number of concerns from detainees regarding the healthcare provision at HIRC. During 2016, we received 423 requests from detainees in relation to healthcare related matters representing 35.2% (23.8% in 2015) of all concerns raised with the IMB. This is clearly the Boards most significant area of concern.

The IMB understands that the service provided by CNWL, in common with healthcare provided at other custodial establishments, is one of domiciliary care, providing care and support in a residential setting. However, both sites have units that have previously been described as inpatient units, where detainees are housed in a ward type environment at Harmondsworth, or in single rooms on a discrete unit at Colnbrook. CNWL do not regard these units as offering secondary care, as they are not registered with the Care & Quality Commission (CQC) to provide it.

To address this apparent contradiction, CNWL have now redefined these units as “Enhanced Care Units”, the detainees housed there being subject to “Care Plans” that CNWL are managing. These will typically involve healthcare staff visiting these detainees as agreed in their personal care plans, with a minimum of one visit each day. This has been described to the IMB as similar to a District Nurse visiting someone in their own home. In terms of the residential nature of these units, CNWL see this as the responsibility of C&C to run the units and to request visits from healthcare staff where these are warranted.

When detainees require secondary care, CNWL arrange for them to be transferred to an external hospital. The enhanced care unit at Harmondsworth has been fully renovated and refurbished which has led to a marked improvement in the cleanliness of the unit.

- **Case Study 1 – Mr A arrived at Harmondsworth in August 2015. He struggled to integrate into the regime, and was unable to adequately care for himself. In particular, his personal hygiene became problematic. The situation was allowed to deteriorate and he was found by the IMB, in early 2016, to be living in what could only be described as squalid conditions. Once the issue had been highlighted he was re-housed in the enhanced care units at both Harmondsworth and Colnbrook between February and early July when he was discharged to an external medical facility.**

Following the above case, where a mental health patient did not get adequate care and attention, CNWL agreed to widen the coverage of the care plans for each detainee, to include assessing them on their ability to self-care (general ability to perform activities of daily living regardless of whether their issues arise from a physical, mental or learning disability) and this would be documented at each visit. This has led to an improvement of the care provided but the IMB still occasionally encounters obviously vulnerable detainees whose beds have no sheets and duvet covers despite being deemed able to look after themselves.

The IMB have concerns that DCOs with no specific healthcare background or training are monitoring the enhanced care unit on the Colnbrook site and are not adequately trained to know when healthcare should be called. This is of course the same on all residential units, but by definition, those who have been housed in the enhanced care units are on a care plan so are not typical of the detainee population as a whole. In the IMBs experience, detainees can be housed on these units for long periods of time with significant mental and physical health issues and considerable care needs which are not always well met.

5.3.1. GP and Nurse Triage Appointments

One of the most common concerns raised with the IMB regarding healthcare is the inability to obtain prompt appointments to access the service. The IMB generally are content with the approach taken to appointments by healthcare and whilst inevitably there are breakdowns in this process from time to time, overall our view is that this process works effectively.

The process undertaken is that an initial appointment is made with a nurse who will assess whether the healthcare issue needs to be referred to a GP or whether it is something that the nurse can deal with directly. Where the nurse concludes that a GP appointment is necessary she will make the relevant referral. The average time that detainees have waited for both nurse triage and GP appointments during 2016 has been 2 days for each, so typically a detainee will wait for 4 days to see a GP where this is necessary.

These timescales are not inconsistent with the wait times experienced in the community at large, in the experience of our members. The number of GP appointments per month has ranged between 574 and 786 averaging around 700, and the number of nurse triage appointments has ranged between 759 and 1105 averaging around 950.

The IMB often receive complaints from detainees that they do not want to see a nurse, but just want to see a doctor. Usually this is just a misunderstanding of the process that operates and when explained detainees will comply with the process, although on occasions it is apparent that in some cultures men do not want to be examined by female nurses. However, the Do Not Attend (DNA) statistics for appointments are quite high, ranging between 15% and 25% per month for nurse triage and between 10% and 20% per month for GPs. Part of this could be explained by the reluctance of some cultures to see a nurse, detainees having left the establishment, or detainees having other appointments, for example with Immigration or legal visits. However, the IMB also believe that the process of informing detainees of their appointments could be improved. It is currently driven by paper slips being passed to detainees by DCO's and these can easily be lost or if left in their room when they are not there, may not always get to them in time. A system that texts reminders to detainees mobile phones could significantly reduce the DNA statistics, and lead to a more effective use of the healthcare resources available.

The Board recommend that CNWL consider introducing a system to text reminders to detainees of their appointments on the day of their appointment.

5.3.2. Dentist

After nurse triage and GP appointments, dentistry is the next most used healthcare service, with on average around 80 appointments per month, with the exception of November when there were only 32 appointments held. The average wait times for dental appointments are around 7 days. The IMB do receive complaints regarding the dental service, but these usually relate to the extent of the service provided, which is essentially an emergency service and is not designed to deal with more complicated dental treatments.

5.3.3. Staffing Levels in Healthcare

The levels of staffing in Healthcare have continued to be under pressure. There has been recruitment during the year, but this continues to be hampered by the need to obtain DBS and CTC clearance for new recruits, and this has on occasions not been forthcoming. Even where it has been obtained it has been slow to arrive. In addition, the IMB understand that there is no salary enhancement for working in the challenging detention centre/prison environment which means that there are relatively few applicants.

The Care & Quality Commission (CQC) issued a requirement notice in March in relation to staffing, following the joint inspection with HMIP between 29 February and 11 March 2016. There has been extensive use of agency "bank" staff to cover the permanent shortfalls, particularly in relation to Band 5 Registered General Nurse roles, where only half the permanent roles were filled at the end of 2016, and this has resulted in staffing shortfalls on many occasions during the year, simply due to the lack of supply and the unreliability of agency staff.

There was an incident over the Christmas period where agency staff failed to attend having been booked. There have been no physiotherapy clinics since July due to staff vacancies.

The position was further weakened in December with the suspension of 3 healthcare staff pending an investigation.

There have also been a number of changes in the leadership of the service during the year which has not helped in progressing these issues.

The Board recommend that CNWL address the shortfall in permanent Band 5 RGNs as a matter of urgency

5.3.4. Rule 35 Assessments

Where a detainee claims to be a victim of torture, a Rule 35 assessment will be undertaken by a GP. Rule 35 assessments are also requested for other reasons such as confirming fitness to fly. The number of requests for Rule 35 assessments has continued at a high level through the year, and the Home Office have commissioned some additional clinics with the aim of clearing the backlogs and reducing the wait times.

Average wait times throughout the year have been around 2 weeks, although maximum wait times have exceeded a month on occasions, which is unacceptable.

Unsurprisingly, the IMB does receive concerns from detainees about Rule 35 which reflect both the time they are having to wait to get these assessments done, dissatisfaction with the outcome of the assessments, and concerns that even when they are deemed unfit for detention that the GPs assessment can be overridden by the HO caseworker and detention is maintained for other reasons. The IMB have been informed that there is a view among some detainees that they are entitled to a Rule 35 assessment and that this will result in their release from custody – neither of which is wholly true.

5.3.5. Missed Hospital Appointments

During 2016, the IMB continued to highlight concerns that hospital appointments were being missed due to operational difficulties. These were due to transport being unavailable or late.

There is a daily limit on the number of “booked” external escorts that can be accommodated within the contract, with recognition that there may also be emergency “unbooked” escorts to/from hospital. C&C staff also have to consider their overall staffing capacity and whether the risk within the Centre could be increased by deploying staff on escorts. For example, if an incident was in progress within the Centre, staff may have to be re-deployed at short notice, leading to cancellations.

Where there are more visits required than available capacity on a specific day, then CNWL will decide on the basis of clinical need which to fulfil, and this does lead to less urgent cases being cancelled at short notice. CNWL will contact the hospital to explain that the non-attendance was not due to the failings of the detainee and will secure another appointment.

Nevertheless, this does inconvenience detainees who through no fault of their own are prevented from attending their hospital appointment. Some have experienced multiple cancellations for operational reasons and get understandably upset.

- **Case Study 2 – Mr B had a serious injury to his hand that required a visit to an external consultant. Four planned NHS consultant appointments had been missed (two in December 2016 and two in January 2017) purely down to site operational and logistical reasons and his replacement appointment is now scheduled for March 2017.**

5.3.6. Mental Health

The IMB regularly meet detainees who are suffering with various degrees of mental illness. The more serious cases are housed in the Enhanced Care Units at the two sites. When their behaviour is too difficult for that environment, they are generally moved to one of the segregation units. Whilst these latter instances are unusual, there are at least two detainees whose cases the IMB have flagged in the section on Segregation (see 5.7 below). This is not an appropriate place in which to look after such vulnerable, though disruptive, detainees.

CNWL do recognise the need for mental health provision in the centre, and there is a Mental Health team to provide healthcare for those with such needs. This team includes two psychiatrists and a psychologist providing clinical leadership, and is loosely based on a Community Mental Health service, that a GP would refer to, so by definition represents a secondary care service. Where it is concluded that secondary care available is insufficient for their needs, mental health beds are sourced in Colne Ward at Hillingdon Hospital, although there can be significant waiting times before these beds become available, with only two beds allocated for detainees from the centre.

The IMB are concerned though for the welfare of detainees who cannot be held on the ECUs but are not so ill that hospitalisation is required. Whilst such individuals may not need hospital care if they were living in a normal domestic setting, account must be taken of the detention regime and the impact it has on the vulnerable. This means that the IMB believe that further thought should be given to how a more bespoke regime can be provided so long as such individuals must be detained. The IMB have seen individuals deteriorate significantly when removed from association for any length of time.

The IMB do acknowledge that the Vulnerable Adults policy implemented this year by the Home Office has a presumption of no detention for vulnerable adults, unless other security factors outweigh these considerations. Whilst this is welcomed, and should minimise the number of cases being detained, our concerns remain that for those who have to be detained the environment and care offered are not adequate.

5.3.7. X-Ray Equipment

The NHS has invested in the purchase and installation of an X-Ray machine at HIRC, which has necessitated changes to the structure of the building to ensure that the equipment could be operated safely. The purpose of this equipment was to screen detainees for TB, and the aim was to set the equipment up so that it would only be used for this purpose. This equipment has never been used, and we now understand that the NHS has changed its mind and is not intending to commission the equipment, as it has now concluded that TB is not a major concern in IRCs. This has resulted in a significant waste of public resources.

The Board recommend that NHS Commissioners give consideration to using the already installed x-ray equipment for a wider range of uses, as this could reduce the need for detainees to be sent out of the centre for x-rays at local hospitals.

5.3.8 Access by Enhanced Care Unit detainees to court yards

Detainees are entitled to smoke outside the building and in the court yards. For the majority of the detainees this does not present any undue problems, particularly given the new open regime system that exists.

However, detainees located on Enhanced Care Units at both sites rely on C&C DCO's to escort them to courtyards at defined times of the day. We have seen evidence of there being insufficient staff available to escort and to allow detainees outside; and DCO's arriving late and thereby reducing the recreational time given to the detainees. As a result this adds to stress and frustration to those detainees who are already under the care of CNWL.

5.4. Purposeful Activity

The average stay of detainees at Heathrow IRC during 2016 was 56 days, down from 62 days in 2015, which somewhat limits the opportunity to develop meaningful activities for detainees. The actual length of stay in the detention estate can be considerably longer than these averages, but the regular movement of detainees between detention centres also works against any meaningful engagement in purposeful activity.

There is good use being made of the recreation facilities on both sites. These include the courtyards which are regularly used for team games such as cricket and football when the weather allows, the multi-gyms, the sports hall, and the table tennis and pool tables situated on most units. One of the courtyards at Harmondsworth has not been able to be fully utilised during the year, this yard had been partially grassed over and is now awaiting confirmation that funding has been agreed to replace the courtyard with a new surface with integral outdoor gym equipment.

There are opportunities for gainful work in HIRC paying £1 per hour, which includes serving food at meal times to other detainees, some food preparation work in the kitchen, cleaning duties on the units, laundry attendant duties on the units, hairdressing and decorating duties around the Centre. The demand for paid work is high and there is usually a waiting list. The Home Office have to agree which detainees can undertake paid work, and they do withhold approval for detainees who are deemed to be non-compliant with the immigration process. The IMB is of the view that greater use could be made of paid work opportunities, but does acknowledge that C&C are already exceeding the contracted number of paid work positions.

All of these duties are primarily aimed at giving detainees something to do rather than developing their skills, and only basic instruction is provided. They enhance the detainees feeling of self-worth and the work undertaken is generally beneficial to the look and feel of the centre.

5.5. Resettlement: Movement of Detainees, Contact with Outside

The population at HIRC is constantly fluctuating with detainees coming and going on a daily basis. The average monthly number of movements in 2016 was 2,308, with a high of 2,540 in May. Tascor has the contract with the Home Office for moving detainees within and around the IDE.

It is therefore understandable that there are significant issues experienced that are associated with the movements into and out of HIRC. In previous Annual Reports for both Harmondsworth and Colnbrook, and the combined Heathrow IRC, recommendations were made regarding limiting the number of transfers between IRCs for administrative purposes and particularly those undertaken during the night.

5.5.1. Night Time Moves

The IMB undertook an analysis of the movements out of the centre for the month of July 2016 to establish whether there had been any material change from previous years in respect of the night time movements. The detail of this analysis is set out in Appendix B.

The main conclusions from this analysis is that there continue to be high levels of night time moves at the centre, many of which are related to the removals process and are therefore unavoidable, and the moves to Heathrow Airport are largely undertaken within the SLAs agreed between the Home Office and Tascor, the escort contractor. However, the night time transfers between IRCs, whilst reducing from 2015, continue to give cause for concern, and the IMB believe that these are not essential and are largely undertaken for the administrative convenience of the Home Office.

The Board recommend that Home Office should ensure that the next escorting contract seeks to dramatically reduce the need for night time (between the hours of 10pm and 8 am) moves between IRCs on the grounds of decency

5.5.2. Tascor resourcing

What is of significant concern is that anecdotal evidence obtained by IMB members, from Tascor staff, DCO's and detainees indicates that lack of Tascor resources has meant that detainees are regularly inconvenienced due to escorts arriving late, or not turning up at all, or are being moved at times that are unreasonable. Some of these failures have already been covered in respect of night time movements (see 5.5.1 above) and some other examples of the types of issues experienced are set out in the two case studies below.

- Case Study 3 – Mr C was processed by HIRC and collected at 10.40 am for a flight to Mumbai that was leaving Heathrow at 9pm – 10 hours and 20 mins before the flight was due to depart. The IMB were advised that Tascor did not have sufficient resources available later in the day and that the detainee would be held in a “holding room” at the airport till he was due to board.
- Case Study 4 – Mr D was taken to Heathrow airport on a stretcher, but was refused clearance at the airport by airport security as it appears that Tascor had not liaised with the airport authorities about the needs of the detainee. This resulted in the detainee being returned to the IRC and missing his flight.

5.5.3. Handcuffing of Detainees during Escorts

The Board reported in our 2015 report that there was an escape from custody during an escort to a local hospital, and whilst this was regrettable the Board hoped that this would not lead to a disproportionate response in relation to detainees being handcuffed during escorts facilitated by C&C. Prior to this incident the number of escorts undertaken without the use of handcuffs was regularly around 60% of the total escorts. Since this incident escorts without the use of handcuffs has fallen to below 20% and in some months we have seen 100% of escorts being handcuffed. The Board are disappointed in what appears to have been an overreaction to one particular failure.

The Board recommend that the risk assessment undertaken before a detainee is escorted off the premises for hospital appointments or other appointments is reviewed by C&C and Home Office, to ensure that the use of handcuffs is proportionate to the risk of escape.

5.5.4. Access to Internet, Phones and Faxes

Effective communication is essential for immigration detainees to enable them to stay in touch with their family, friends and legal advisors.

All detainees are provided with access to a basic mobile phone when they arrive at HIRC. This is either their own phone if it is acceptable (no camera or internet access) or one provided by the Centre. There have been periods when mobile phones were not available for some detainees on arrival, although these types of issue were normally resolved in a relatively short space of time.

Access to the internet is available within both sites at HIRC, so all detainees are able to gain access to their e-mail accounts and the internet for a period of time each day. There are some restrictions imposed on websites that can be accessed.

In the main, these restrictions are reasonable, although the current prohibition by the Home Office on access to free internet based communication applications such as Skype, are felt by the IMB to be overly restrictive and to remove a relatively cheap and effective way that detainees can keep in touch with their friends and family.

The Board feel that this decision should be reviewed, as access to these services would enable detainees to maintain better contact with their family and friends and could assist with their resettlement to their own country where removal is the outcome. The Board are not asking that detainees be given uncontrolled access to Skype, we agree that this would be wholly inappropriate. What we are seeking is that Skype access could be given to detainees as part of the visits process, where in effect a controlled facility could be made available within the visits area that detainees could use at pre-booked times to spend time on Skype with family or friends. There are already precedents for this type of technology, with the use of video conferencing facilities to enable detainees to attend court hearings remotely.

The Board are aware of instances where detainees are routinely moved around the IDE by the Home Office for administrative convenience, so detainees housed at HIRC often have family and friends living in the North of England, Wales and Scotland, who find it both expensive and logistically challenging to visit.

The provision of the facility to have a visit electronically via Skype, would enable family and friends to stay in touch with detainees, in such circumstances. Many detainees held at HIRC do not have any family in the UK, so for them visits are impossible, and telephone charges can be prohibitive. The ability for them to have a virtual visit by Skype would enable them to remain in contact with their family at no cost, and could also be a real benefit in organising their return to their native country.

The Board accept that there would be some capital cost in setting up the facilities, but these could be financed from the Detainee Welfare Funds, as these facilities would clearly be for the benefit of detainees. The ongoing costs of using these facilities are minimal, and the benefits to detainees would far outweigh these costs. The Board feel that the approach outlined should deal with any security concerns, although we do accept that security must always be properly considered in relation to any improvements in detainee facilities and that unrestricted access would be inappropriate.

The facility if established could have the potential to be extended to legal visits, although the IMB believe that this would be added value over and above an already strong rationale.

The Board recommend piloting a controlled facility for detainees to use Skype or other similar low/zero cost communication tools, to enable detainees to more effectively stay in touch with family and friends whilst in detention.

The availability of fax machines is of critical importance to detainees because they transmit documents to and receive documents from immigration caseworkers and their legal advisors. During the year, C&C have made considerable efforts to upgrade the fax facilities in use at HIRC, these improvements are welcomed by the IMB.

5.5.5. Access to Legal Advice

The IMB regularly hears from detainees that they do not have access to legal advice. There is a process in place on both sites for three legal firms to provide legal surgeries to detainees. These firms of solicitors provide a 30-minute surgery to each detainee aimed at answering their questions and undertaking an initial assessment of their immigration case. In most cases, the legal firms choose not to take their immigration cases on, which then leaves detainees with no legal support, unless they have the financial means to obtain private legal advice or can find an NGO to take on their case. During the year, we received a number of concerns from detainees that legal firms were arriving late for appointments and having raised this with the Home Office and C&C, a review was commissioned by C&C to record the actual times of arrivals by legal firms that did indeed confirm that some legal firms were regularly arriving late for appointments which both inconvenienced detainees and also resulted in some appointments being postponed. The matter was taken forward by the Home Office to address the issue.

5.6. Safer Custody

The Assessment, Care in Detention, and Teamwork (ACDT) process has applied to HIRC throughout the year. This aims to identify detainees who have either self-harmed or are at heightened risk of self-harming. A file is opened in relation to each individual detainee identified and there are procedures which kick in to monitor their situation until the point where the risk is reduced to a normal level when the file is closed. All staff are trained in the use of this process and to be on the look-out for vulnerable detainees. The IMB will on occasion highlight detainees that could benefit from being subject to an ACDT.

During 2016, on average 63 (46 in 2015) ACDT files were opened each month, with a high of 81 in October. On average there were 98 (66 in 2015) open ACDTs at the end of each month, with a high of 138 in May. Open ACDTs at each month end varied in a range of 5.5% to 14.6% of the detainee population. These figures show an increase in ACDTs on the previous year but the IMB welcome this as a sign that Safer Custody is being taken seriously in HIRC. The actual instances of self-harm in HIRC during 2016 averaged 12 per month with a high of 19 in August and September. These figures show a marginal improvement on the prior year.

The Board are satisfied that the ACDT process is comprehensive and operates well in the Centre. Whilst any instances of self-harm are regrettable, the numbers experienced in 2016 are low relative to the throughput of detainees at HIRC, which averages 2,308 per month.

There were 2 deaths in custody during the year which are both subject to investigations by the PPO. The Board regret any deaths in custody and our sympathy is extended to those families who have lost loved ones.

In September, a multidisciplinary violence reduction workshop was held off site to analyse and review all recorded incidents of violence with the aim of identifying solutions and determining clear actions in order to help reduce levels of violence at HIRC. During the workshop, participants discussed the definition of violence, impact of violence for both staff and detainees, reviewed historical violent incidents and violence triggers as well as staff welfare & support. A Violence Reduction Action Plan was formulated which is now being implemented. This action plan was subsequently discussed at full staff meetings on both sites.

5.7. Segregation, Care and Separation, Close Supervision

At HIRC, both sites operate segregation units to deal with detainees who are subject to "Temporary Confinement" (Rule 42) and "Removal from Association" (Rule 40).

At the Harmondsworth site there are six rooms in Elm Unit that are used for both R40 and R42 purposes. At Colnbrook there are sixteen rooms, ten designated for use as R40 on the first and second floors and six designated for use as R42 on the Ground floor of the segregation unit. For operational reasons, C&C choose to move detainees held in R40/R42 from Harmondsworth to Colnbrook, when the period of confinement is likely to exceed 24 hours.

Each week and for each site, there is a rota of IMB members who visit the segregation units on a regular basis. The Centre advises the member for each site on rota that week of all movements to the Segregation Unit, and this member will attend the site in an emergency situation.

Whilst the IMB should be informed as soon as possible when detainees are held in Rule 40/42, there have been numerous occasions throughout the year when the IMB member on duty has not been contacted by phone or contact has been made through the Mitie email. This is unsatisfactory as IMB members are not routinely logged onto their Mitie email accounts. This does cause concern as the IMB cannot perform its duties effectively if it is unaware of movements into R40/42.

The use of R42 in 2016 averaged 4.5 month with a high of 9 in July. The stays in R42 are usually for very short periods of time, typically a matter of hours.

The use of R40 was more extensive, averaging 63 (42 in 2015) uses per month with a high of 85 in December. The increases seen in usage have been across the year, there are no particular spikes of activity that are distorting these trends. The majority of these will be for short periods of time, typically less than two days, however, there is an increasing number of stays that can and do become extended. These include individuals who undertake dirty protests, others who have been unable to integrate into the normal regime, including individuals with serious mental health issues.

Some examples from our experience in 2016:

- Case Study 5 – Mr E was housed in R40 between 30 November 2016 and 11 January 2017, he was unable to cope on the residential units, was withdrawn and had very poor personal hygiene which resulted in other detainees refusing to share rooms with him. Despite efforts to encourage him to take care of himself he refused to engage and it was decided to transfer him to another IRC to give him a fresh start. This move failed and he was returned to HIRC 10 days later to resume his residence in R40.
- Case Study 6 – Mr F was brought to HIRC from Heathrow Airport having being detained due to his bizarre behaviour on a flight from Dubai. He was held in R40 for 9 days displaying bizarre behaviour, refusing to wear clothing, and remaining awake for extended periods. C&C took great efforts to pay for hotel accommodation for his parents and through them establish that he had suffered previous mental health experiences, and the Healthcare team were able to make contact with his previous doctor and establish what medication would assist his condition. He refused however to take any medication believing that they were trying to poison him. Ultimately, he was given medication by force under provisions in the Mental Care Act, and this improved his situation, and he was then able to be sectioned to a bed in Colne Ward at Hillingdon Hospital for further treatment.

These cases illustrate the difficulties that a minority of detainees experience and of course the sort of challenges being faced within the IDE. The DCOs generally do a good job of caring for these individuals, but they are not qualified or specifically trained to deal with individuals with these types of conditions, although they have been provided with mental health awareness training by CNWL. Given the current facilities and care arrangements in HIRC, the IMB believe that it is not a suitable environment for the detention of such vulnerable individuals.

Under the new Adults at Risk Policy, there is a presumption against detention where individuals are deemed to be vulnerable, however, case workers can overturn this presumption where it is considered that immigration factors outweigh the vulnerability factors. Consequently, there will continue to be cases where vulnerable adults are detained who are unsuitable for detention in the normal regimes.

The Board recommend that Rule 40 should not be used to house difficult individuals with mental health conditions. They are vulnerable and confinement is not a humane way to address the problems they experience. Home Office should consider undertaking a review of the scale of this issue across the Immigration Detention Estate and consider alternative options to managing their detention so that they receive better specialised care for their specific needs.

The Home Office also authorise the use of R40 to create sterile conditions for detainees who have previously disrupted removal directions by self-harming or threatening self-harm, to reduce the risk of them secreting razor blades. The IMB is concerned when these stays become extended.

Finally, there are detainees who are not suitable to be housed in an IRC, who in the past would have been accommodated in prison beds under an agreement between Immigration Enforcement and NOMS. The number of prison beds available under this arrangement has been substantially reduced, and the Board understand that there is currently no available capacity to move disruptive detainees from IRCs to the prison estate. The Home Office recognise this issue and have established a weekly Excessive and Disruptive Detainee (EDD) weekly conference call involving all IRCs around the IDE to co-ordinate approaches to managing this population within the IDE. Inevitably these detainees end up housed in the Segregation Units as they become too disruptive to remain on normal units, and their stays in the segregation units extend well beyond the normal time limits. These detainees are almost always Criminal Casework Directorate (CCD) cases, which means they have served their prison sentence in the UK and as a result of their sentence are no longer eligible to remain in the UK. The Board strongly believe that more should have been done by casework teams to arrange the removal of these detainees immediately on completion of their prison sentences, and their continued detention in IRCs is a failure of these casework processes.

The Board recommend that urgent action is taken by Home Office to improve the effectiveness of the Criminal Casework Directorate processes to ensure that all time-served Foreign National Offenders who are no longer eligible to remain in the UK are removed directly from prison on completion of their sentences.

The combination of the above factors is leading to increased usage of the segregation units, and this does cause concern for the Board.

5.8. Residential Services

2016 has been another challenging year for HIRC. There have been a number of significant improvements implemented by C&C, but there continue to be challenges that were inherited that have not yet been addressed, either because C&C are awaiting HO approval for funding or because they are on project plans, but have been given lower priority so have yet to be completed. The scale of dilapidations, that were inherited from the previous contractor, and the ongoing failure of critical systems means that non-essential work is having by necessity to be re-programmed leading to delays.

For example, urgent issues have arisen with the electronic doors, requiring a software upgrade of a legacy system; boilers have failed and ad-hoc repairs have had to be undertaken and bespoke parts made.

During the year, there have been improvements to the Centre including :

- Upgrade of all toilets, showers and foot wash areas on Cedar & Dove units at Harmondsworth
- Upgrade of the Security Controls system at Harmondsworth
- New cooking range and kitchen facilities at Harmondsworth
- Pigeon netting over court yards at Harmondsworth
- Replacement of laundry equipment at Harmondsworth
- Upgraded Perimeter intrusion detection system at Colnbrook
- Upgrades to security fencing and perimeter lighting at Colnbrook
- Installation of new floors and stair treads
- New foot baths being built
- New commercial e-fax machines for detainee use

The Board welcome the introduction in July of the 50/50 regime on the Harmondsworth site, which provides all detainees housed there with greater freedom of movement within the site. In essence all detainees now have access to half the centre, whereas previously they were restricted to specific units. This follows a successful opening up of the regimes on the Colnbrook site in the previous year.

The design of HIRC creates a number of issues for detainees, particularly the lack of fresh air, as there are no opening windows throughout the centre. This is particularly challenging in the summer months when temperatures in the centre can become unbearable and the lack of fresh air makes the environment stuffy. This situation was made worse this year on the Colnbrook site as there was a need to close exercise yards on a rotating basis whilst improvements were made to the security arrangements in these yards.

In the winter months, the ageing boilers struggle to heat the centre effectively and rooms that are located at the end of wings can become particularly cold. Whilst extra duvets will be provided when requested by detainees, the conditions in the centre are far from ideal. Efforts have been made to improve the situation in the Induction Unit at Colnbrook by fitting self-closing doors to the exercise yard to retain more heat, and this has made a difference. It is hoped that the lessons from this exercise can be applied throughout the Centre. This winter there have also been issues with the hot water temperatures at the Colnbrook site. There is a safety feature which shuts down the boilers when there is a fire alarm triggered, and this takes time to override and get the temperatures back up to a normal level. This has been frustrating at times for detainees.

There has been no change during the year to the laundry equipment arrangements on the Colnbrook site, the equipment fails regularly and is inadequate for the purpose. Each of the four residential units is equipped with two washing machines and two dryers, which aim to provide laundry facilities for 66 detainees on each unit. The machines installed are essentially domestic appliances and are not really designed for the constant use they are subjected to, and it is therefore inevitable that they will fail on a regular basis. This has been the case throughout the year with complaints being raised in 8 of our 12 monthly reports. Effectively, detainees are living with inadequate laundry facilities on a continuing basis.

Laundry provision on the Harmondsworth site is much better where industrial grade washing machines and dryers have been installed, these are operated by paid laundry assistants. Detainees hand over their dirty clothing, are given a tag which matches one on a basket and can pick up their freshly laundered and dried clothing later in the day. The IMB view these facilities as being appropriate for the scale of use envisaged in the centre.

The Board recommend that C&C and Home Office continue to review the provision of laundry services across both sites and consider replacing the unreliable domestic appliances on the Colnbrook site with industrial equipment both to improve reliability of service and to potentially reduce costs over time.

C&C are aware of the recurring problem during the year on the Harmondsworth site of outbreaks of bed bugs, particularly in the hostel type accommodation. They have engaged with the services of Mitie Pest Control on an on-going basis. C&C have undertaken several initiatives to try and resolve this including the replacement of mattresses and bedding, use of a specially trained bed bug detection sniffer dog to identify affected rooms, regular treatment of rooms found to be infected.

It has now been established that the source of the outbreaks is due to a combination of the beds being of a design where the bed bugs can infest them, and the rooms have become infested by bed bugs getting behind skirting boards and other areas that cleaning cannot reach. A programme to replace the beds and to refurbish the affected rooms is under consideration by the Home Office. The Board recognises that the infrastructure of the building is a contributing factor and also recognises that this issue will not be completely eliminated – it can however be better controlled. The Board would urge that C&C and the Home Office continue the work they have undertaken and identify solutions to minimise the risk of future infestations.

The level of cleanliness of the Centre does fluctuate, in the main the cleaning is acceptable, but there are occasions where standards slip usually where detainees are engaged in undertaking paid duties without adequate supervision.

As reported last year, there was an issue of full black bin bags being stored in stairwells on the Colnbrook site, this continued into the early part of 2016, and the IMB are pleased that containers on wheels have now been provided to collect these bags and assist with the removal to the external bin areas

While we have undoubtedly seen improvements in the course of the year, there are still significant issues with the overall structural quality of the building fabric and further urgent investment and improvement is needed. For example, on the Colnbrook site there were ongoing problems with stair treads on major thoroughfares which were loose and dangerous, damaged table tops in dining areas, broken shower doors that were hanging loose, blocked sinks in rooms, and variable water temperatures in showers. On the Harmondsworth site a significant number of showers and toilet facilities have been out of commission for extended periods (sometimes months) in the residential blocks. Such issues appear to be given a low priority by Facilities Management and are therefore often left for considerable periods of time before they are fixed, giving an overall impression that the detainees' living areas are not important. Whilst these may all seem like low level issues, they are important to the detainees who become frustrated when nothing is done about remedying them.

The Board recommend that C&C Facilities Management give a higher priority to repairing facilities and the fabric of the buildings as this is a constant source of detainee frustration.

Accommodation issues improved marginally during the year, although they still remain as the third most frequently complained about issue behind health and detention, at 17.2% this year (20.6% in 2015).

5.8.1. Food

The Board receive relatively few complaints in relation to the food provided at HIRC. We regularly taste the food available at HIRC and we find it to be of a mostly good quality, although on occasions lukewarm at the time of serving. The issues raised by detainees largely relate to the different tastes of both certain ethnic groups and individuals. Detainees often say that the menus are repetitive and choices somewhat limited. Some detainees feel that their individual dietary needs are not being adequately met.

HIRC has operated a pre-select menu throughout 2016, which enables detainees to select their meals for the week ahead. The menus provide up to four choices per meal at lunch and dinner, including vegetarian options. The weekly menus rotate on a monthly cycle, and the IMB review these with the Catering Manager.

There was an unannounced inspection by the Environmental Health Officer of the kitchen facility at the Harmondsworth site during September 2016, which identified some significant concerns in relation to rodent activity in the kitchen area. This resulted in swift action to address the points of entry and implementation of improved detection and treatment associated with rodent activity. C&C have also increased commercial deep cleaning of both kitchens from 6 monthly to 3 monthly.

The Centre has replaced plastic crockery with porcelain china, initially on the Harmondsworth site and more recently at the Colnbrook site. The Board welcome this initiative on the grounds of decency, although the washing facilities at Colnbrook have yet to be upgraded which is causing some issues, and there has been some concern raised by detainees that china plates could be used as weapons.

The Board has raised concerns that food is not always being served “hot”, whilst being assured that food leaves the kitchens at the right temperatures and that these are all properly logged. There have been instances of heated trolleys failing to maintain temperatures.

Overall the Board are satisfied with the catering facilities available at HIRC and the quality of food provided. The food issues raised with the IMB during 2016 have fallen marginally to 3.6% (2015: 3.8%) which does not indicate this to be one of the major concerns for detainees.

6. AREAS OF SPECIFIC CONCERN FOR THE BOARD

The following areas have been recurring themes noted from the Board's activities during 2016.

6.1. Length of Detention

The Board have raised length of detention consistently over many years and have called for, and continue to call for, independent scrutiny once stays become extended. This is because the Centre is designed to detain individuals where there is a reasonable and imminent prospect of removal; not to cater for extended stays. We are concerned that in some cases the regime materially and adversely affects detainees' mental health. We present at Appendix C the analysis of the detention figures for 2016, from which the following conclusion is reached.

The average times in detention, for detainees held in excess of 6 months, are relatively stable over the last 2 years, at around 18 months detention, although these averages mask substantial variations.

- Case Study 7 - the highest detention period recorded in 2016 for an individual who was then granted Temporary Admission to the UK was 3 years and 3 months.
- Case Study 8 - a detainee from Poland was unfit to fly due to DVT and therefore required a land only removal across several borders. This significantly increased the complexity of the removal due to negotiating transport across international borders with several jurisdictions.

The National Preventative Mechanism, established under the UK's obligations as it is a party to the Optional Protocol to the Prevention of Torture (OPCAT) (and of which IMBs are one of 20 bodies overseeing detention), has now also decided to call for a time limit on immigration detention, in its latest Annual Report. The relevant extract from its Annual Report is reproduced below: -

"Immigration detention In November 2015, NPM members discussed the UK's unique situation of having no statutory time limit on immigration detention. The UK has opted out of the EU Returns Directive, which sets a maximum time limit of six months (and 18 months in exceptional circumstances). This situation has been criticised by a number of international human rights bodies, including most recently the UN Human Rights Committee, which called on the UK to 'establish a statutory time limit on the duration of immigration detention and ensure that detention is a measure of last resort and is justified as reasonable, necessary and proportionate in the light of the relevant circumstances'. The Scottish Human Rights Commission proposed that in light of the significant harm caused by indefinite detention, and considering the NPM's responsibility under OPCAT to make recommendations that take into account relevant UN standards, the NPM should take a position on the issue. Some individual NPM members have already called for there to be a time limit. As a result, NPM members agreed that the NPM should call for a time limit on immigration detention."

The Board recommend that the Minister introduces a review system, independent of the immigration authorities, for all cases where detention exceeds 6 months. This would ensure that detention cannot become extended without independent scrutiny. IRCs were only designed for short stays of up to three months and the facilities and levels of care reflect this. The environment is not acceptable for prolonged stays.

6.2. Property

Concerns raised with the IMB related to detainees' property have fallen significantly in the last twelve months.

On the whole HIRC deals well with detainees' property whilst they are resident in the Centre. There are central store areas at both sites where most of their property is held. Detainees can arrange access to their property via the Customer Service Applications Process. There are sometimes delays reflecting the availability of staff to take detainees to access their property.

HIRC operates a cashless environment. All detainees have an account set up for their cash on arrival and can use their account to make purchases at the shop, or via mail order.

The most prevalent property related issue arises after they have been transferred from another IRC, prison or police cells. Detainees sometimes experience difficulties in being reunited with their property. Assistance is provided by the welfare staff at HIRC but it can become a protracted process, to resolve these issues.

Property issues also occurred when foreign nationals in the community were detained "without warning" while they were signing on as part of their regular reporting obligation to the HO. The IMB has come across a few cases where such men were brought into the centre with nothing other than what they were wearing and nobody secured and sent on all their property, which remained in their accommodation. Ultimately the detainees have no way of retrieving their property or personal documentation, which landlords may well destroy if it is left unclaimed.

6.3. Complaints

6.3.1. Home Office Complaints System

All complaints other than those relating to healthcare are initially received by Home Office staff and forwarded to a central HO Complaints Hub to be registered on the central Complaints Monitoring System (CMS), who then allocate the complaints to one of a number of parties: the contractor for the IRC; the Professional Standards Unit (PSU); the escorting contractor; NHS England for healthcare complaints; or a Home Office department, depending on the nature of the complaint. Throughout the year the complaints clerk at HIRC logs all complaints which relate to the service delivery of the contractor, C&C, except where there are allegations of serious misconduct against staff, which are dealt with by the Professional Standards Unit (PSU), and those complaints relating to escorting or Home Office issues in the first place.

The IMB are satisfied that complaints are dealt with effectively when they are correctly allocated to the relevant contractor or department, but there are occasions when the Home Office Complaints Hub allocate complaints incorrectly and in these circumstances the system appears to be unable to respond effectively. The following case study is an example of the issues that arise.

- **Case Study 9 – Mr G, complained that he had missed his bail hearing due to being moved from The Verne to HIRC. The complaint was allocated to C&C at HIRC on the grounds that he was located at this IRC when he complained. However, the bail hearing had been arranged when he was resident at the Verne, and the normal process is for DEPMU to place a block on moves when a Bail hearing has been organised. This did not happen in this case so the detainee was moved and as a consequence missed his bail hearing. C&C at HIRC concluded that the complaint was unsubstantiated simply because they had no control over the movement order or him missing his bail hearing. The IMB queried this outcome as a result of our regular checking of complaints, and it is clear, that his complaint was not unsubstantiated, although the failure was by DEPMU.**

This case indicates that there is a lack of quality control in the Complaints process.

6.3.2. Healthcare Complaints

In the early part of the year the complaints process operating in Healthcare was ineffective, this culminated in the Care and Quality Commission (CQC) issuing a Requirement Notice on 29 March 2016, following a joint inspection with HMIP between 29 February and 11 March. This has resulted in improvements from April onwards, and the complaint trends since April have shown a total of 126 complaints registered in the 9 months to the end of December, with a low of 8 during August and a high of 22 in October. Around a third of these complaints relate directly to the medical services provided, with 27 relating to the nursing service and 11 to the GP service. The remaining two thirds of complaints relate to other matters such as cancelled hospital appointments and medication. The NHS standard is that complaints have to be responded to in 25 days, and CNWL are achieving this standard in around three quarters of the complaints raised, which is less than satisfactory.

6.4. Induction Unit at Colnbrook Site

The accommodation in these units is considerably more cramped than the rooms on the main units in the IRC, comprising bunk beds, a screened off shower / toilet area, a small wash basin and a TV mounted on a high level shelf. There is very limited open floor space in these rooms. The accommodation was originally built as a Short Term Holding Facility (STHF) with intended stays of no more than 7 days, and were originally single occupancy rooms.

The accommodation on the ground floor is typically used as a First Night/Last Night Unit (FN/LN) to facilitate moves into and out of the Centre particularly at night time when the normal residential units are locked down.

During the day, all the occupied rooms and landings remain unlocked allowing the detainees freedom to associate with each other, and a number of former meeting rooms have been converted into a lounge area, a games area, and a room with IT facilities.

Detainees on this unit are also escorted twice a day to a wider set of activities and detainees housed on the main units in Colnbrook. Due to the physical design of the building, it is not feasible to give these detainees unrestricted access to the main activities corridors. Clearly this is a more restrictive regime than that applied to detainees in the main residential wings who can circulate more freely and return to their rooms as they wish.

The Home Office acknowledges that the rooms in Induction are more cramped than those in the main wings of the IRC, and that it is the intention that these rooms are to be used for short term stays only, with a limit set at a maximum of 7 days. However, the IMB routinely find instances of detainees remaining on this unit in excess of 7 days.

The main reason given to the IMB for detainees remaining in these rooms for more than 7 days, is the shortage of rooms elsewhere in the centre that can be used for single occupancy. The Board also acknowledge that some detainees prefer to stay in the Induction Unit and refuse to be re-located, although this is not considered a major factor accounting for the level of detainees spending over 7 days in these units.

The previous statutory safeguard that was in place when the building was in use as a STHF has been removed and replaced with an operational measure which does not seem to be as effective in ensuring that these facilities are only used for short stays.

The IMB have recently been informed that the Home Office have approved the removal of the bunk beds from these rooms, so that they will be returned to their original design of being single rooms. There is also approval for a change to the physical layout of the building to enable permanent access from this unit to the main activities areas in the Centre without the need for escort by officers. The IMB welcome these proposed improvements and if implemented these changes would address the concerns that the IMB have been raising in recent years.

The Board welcome the decision to return the Induction Unit rooms in Colnbrook to single rooms, and recommend that these changes are implemented as quickly as possible.

6.5. Staffing and Resources

Since a new contract was established in September 2014, the IMB has been unable to obtain information from either the Home Office or the contractor on the agreed staffing levels for operating the Centre, as this is deemed to be commercially sensitive information. We have been assured by both the Home Office and the contractor that there is an agreed staffing profile and that this has been fully achieved throughout the year.

The IMB regularly comment on staffing levels on our rota visits to the Centre, and it is apparent that the profile can be put under pressure by a higher than normal use of constant watches or emergency hospital escorts / bed watches, by a higher than normal level of sickness absence and by unexpected suspension of staff whilst incidents are being investigated. A combination of these factors will inevitably lead to a curtailment of certain activities within the Centre.

One consequence of staffing shortages at times has led to officers being moved around and no longer allocated to a certain unit. The ability to build up relationships with detainees on units lowers the risk of vulnerable detainees not being identified as such and this frequent redeployment has led to wide spread dissatisfaction among staff.

The IMB are generally content that the safety of the Centre is not being compromised, however, the activities that are usually curtailed are the activities that will often enhance the welfare of detainees, such as Welfare Office, gyms, access to property in store and the activities rooms, and inevitably at times of strain staff do not have time to spend with detainees sorting out their legitimate individual needs.

The IMB were aware that during December, around the Christmas period, there was an unusually high level of sickness absence which had a detrimental impact on the running of the Centre.

C&C regularly undertake Initial Training Courses to recruit new staff, and these are now organised so that security clearances are obtained during the training so that these staff can be immediately deployed once they have successfully completed their training.

At the time of writing this report a proposed change to the staffing profile, designed to address some of these concerns and improve consistency in designated areas, was initially rejected by the recognised trade union, but this has now been taken forward to ballot.

The Board recommend that C&C and Home Office review the adequacy of the staffing profiles in the light of the performance of the Contract and the findings from the HMIP Inspection during 2016.

7. THE WORK OF THE IMB

7.1. Board Statistics for 2016

Approved complement of Board Members	24
Number of Board Members as at January 2016	17
Number of Board Members as at December 2016	19
Number of new members joining during 2016	3
Number of members leaving during 2016	1
Number of members on sabbatical during 2016	1
Number of Board Meetings during the Year	12
Number of visits to HIRC	577
Total Number of Concerns raised with the Board	1203
Total Number of Segregation/Separation Visits	181

Issues raised in requests to see IMB

Code	Subject	2016 No.	2016 %	2015 No.	2015 %	2014 No.	2014 %
A	Accommodation	207	17.2	254	20.6	237	16.3
B	Rule 40/42	0	0.0	14	1.1	3	0.2
C	Equality & Diversity	4	0.3	22	1.8	15	1.0
D	Education/Activities	20	1.7	17	1.4	25	1.7
E	Family/Visits	26	2.2	37	3.0	41	2.8
F	Food/Kitchen	43	3.6	47	3.8	71	4.9
G	Health	423	35.2	293	23.8	386	26.6
H	Property	59	4.9	100	8.1	109	7.5
I	Detention/Immigration Status	285	23.7	295	24.0	336	23.1
J	Staff/Detainee	64	5.3	77	6.3	152	10.5
K	Transfers	9	0.7	8	0.7	26	1.8
L	Miscellaneous	63	5.2	67	5.4	52	3.6
	Total Number of Concerns Raised	1203		1231		1453	

8. GLOSSARY OF ABBREVIATIONS USED

Abbreviation	Meaning
ACDT	Assessment, Care in Detention & Teamwork
DIAC	Detainee Information Activities Committee
DCO	Detention Custody Officer
ESOL	English for Speakers of Other Languages
Ex FNO	Ex Foreign National Offender
HIRC	Heathrow Immigration Removal Centres
HMCIP	Her Majesty's Chief Inspector of Prisons
IDE	Immigration Detention Estate
IMB	Independent Monitoring Board
IRC	Immigration Removal Centre
PPO	Prison and Probation Ombudsman
PSU	Professional Standards Unit
RDs	Removal Directions
SLA	Service Level Agreement
STHF	Short Term Holding Facility

Andrew Newell

Chair of IMB at Heathrow IRC

March 2017

**IMB at Heathrow IRC
A4 Colnbrook by Pass
West Drayton
UB7 0FX**

STATUS OF PREVIOUSLY REPORTED MATTERS

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that the Minister instigates a regular review system, independent of the Immigration authorities, for all cases where continuous detention exceeds 12 months. IRCs were only designed for short stays of up to three months and the facilities and levels of care reflect this. The environment is not acceptable for prolonged stays. A review system would ensure that detention cannot become extended without independent scrutiny.</p> <p>Recommendation Rejected</p>	<p>The Government already intends to introduce a new approach to case management. The new gatekeeper function provides additional oversight and scrutiny to ensure that detention is the most appropriate option for those entering the detention estate. Furthermore, a new approach to detained casework management, with a clear focus on removal plans and panel reviews on at least a quarterly basis will ensure that only those who should be detained remain detained.</p> <p>In addition to these internal reforms, the Immigration Act 2016 will introduce a duty on the Home Office to arrange referral to the First Tier Tribunal for consideration of bail for immigration detainees, ensuring judicial oversight of immigration detention. Referrals will be made automatically four months after detention begins and every four months after the last consideration. Individuals will still be able to make an application for bail themselves at any point.</p>	<p>Deteriorating</p> <p>The monthly statistics provided by the Home Office are showing that the number of cases in excess of 6 months have been steadily rising over the last 6 months.</p>
<p>The Board recommend that the disabled facilities and social care are substantially upgraded as soon as practicable in order to provide physically disabled detainees with respect and dignity during their stay. The regime is difficult for all detainees, but the level of care for physically disabled detainees falls below an acceptable level too often. Failing this, physically disabled detainees should not be housed at HIRC.</p> <p>Recommendation Accepted</p>	<p>The refurbishment and updating of a room specifically for disabled usage and the installation of specialist toilet and shower facilities has been agreed and signed off for the Colnbrook site. The work will start following security clearance of a new works contractor.</p> <p>January update - The room for disabled usage is now complete and in use. Home Office IRC management continue to emphasise to enforcement and casework teams that cases requiring social care are not currently suitable for this IRC environment and press for release for any case requiring more advanced disabled facilities</p>	<p>Resolved</p>

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that further consideration is given to enabling detainees to access Skype or similar internet voice facility, in an appropriately controlled way, as this would facilitate detainees keeping in touch with family and friends and assist with their resettlement to their own country.</p> <p>Recommendation Rejected</p>	<p>The provision of internet access in IRCs is an important means of helping detainees to remain in contact with family, friends and legal representatives and to prepare for removal.</p> <p>We are taking action to standardise internet access across the detention estate to prevent misuse or access to inappropriate material and ensure parity of access for detainees. This includes work with the voluntary sector to develop a 'white list' of legitimate websites including news, education, employment and legal, which detainees in all IRCs can access; development of a new Detention Service Order setting out requirements for access and monitoring/audit; and strengthening our approach to ensure detainees cannot access prohibited websites including social media.</p> <p>We have no plans to enable detainees to access to social media or Skype.</p> <p>The new DSO on internet provision was published in May 2016.</p>	<p>No Change</p>
<p>The Board recommend that vulnerable individuals who are assessed as being victims of torture, should not be detained.</p> <p>Recommendation Partly Accepted</p>	<p>The Home Office is working to improve the Rule 35 report process and response templates, to support their better completion and thus improve the Rule 35 process overall.</p> <p>Home Office detention policy requires that individuals for whom there is independent evidence of torture are not normally detained.</p> <p>January update -The use of R35 has been revised to incorporate the Vulnerable Adults policy. Any individual for whom there is independent evidence of torture would not normally be detained and will be reviewed if this is highlighted while in detention.</p>	<p>Resolved</p>

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that Enhanced Care Units should not be used to house vulnerable individuals with serious Mental Health conditions, as the level of care currently available is insufficient for their needs. The regime is difficult for all detainees, but the level of care for those with mental health conditions that fall short of them needing Sectioning under the Mental Health Act falls below an acceptable level too often. Alternatively, the Home Office should negotiate Secondary Care provision for the Enhanced Care Units with NHS England in the contract for Healthcare Provision.</p> <p>Recommendation Rejected</p>	<p>A more detailed mental health needs assessment in IRCs, using the expertise of the Centre for Mental Health, has been carried out and will be published in due course. NHS commissioners will use that assessment to consider and revisit current provision to ensure healthcare needs are being met appropriately. We are introducing a new “adult at risk” concept into decision-making on immigration detention with a clear presumption that people who are at risk should not be detained, building on the existing legal framework. The adults at risk draft statutory guidance was laid before Parliament on 21 July. The adults at risk policy will ensure that individuals suffering from mental illnesses will, alongside all others with conditions which render them vulnerable, be detained only when the immigration factors outweigh the vulnerability factors.</p> <p>January Update - The new Adults at risk policy is now in place and this along with the introduction of a 'Detention Gatekeeper' is intended to reduce the number of mental health cases entering detention. Any Mental Health cases will ideally be released but where there is a need to detain Colnbrook ECU will be used as opposed to Harmondsworth.</p>	<p>Improving</p>
<p>The Board recommend that DEPMU should ensure that the next escorting contract seeks to eliminate the need for night time (between the hours of 10pm and 8 am) moves between IRCs on the grounds of decency</p> <p>Recommendation Rejected</p>	<p>The Home Office requires its escort supplier to carry out moves 24 hours per day but it aims to keep the number of night moves to an absolute minimum. Night-time moves may take place to meet time-critical elements such as opening times of prisons, early arrivals for flights, hospital appointments, and court hearings. All proposed moves consider the impact on the care and welfare of individual detainees. Where moves do take place during the night the Home Office provides detainees with as much advance notice as possible.</p>	<p>No Change</p>

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that Immigration Enforcement review the provision of Legal Advice to include urgent cover at weekends.</p> <p>Recommendation Rejected</p>	<p>The Legal Aid Agency (LAA) operates legal advice surgeries across the entire Immigration Removal Centre estate in England and Wales, whereby detainees are able to receive up to 30 minutes of advice regardless of substantive merits during a given slot. Currently there are four surgery days per week at Harmondsworth, with appointments for up to 10 detainees each day. At present a need to increase surgery slots has not been identified for Harmondsworth. The LAA work closely with each IRC to monitor capacity and will increase capacity where and when the need arises. All legal aid providers who deliver services in Harmondsworth are required to be level 2 accredited under the Law Society's Immigration and Asylum Accreditation Scheme.</p>	<p>No Change</p>
<p>The Board recommend that R40 should not be used to house difficult individuals with Mental Health conditions. They are vulnerable and confinement is not a humane way to address the problems they experience.</p> <p>Recommendation Partially Accepted</p>	<p>The Home Office accepts that R40 conditions are not appropriate in a large number of mental health cases but notes that in isolated cases and for the protection and positive seclusion of a detainee use of R40 separation for a limited period may be appropriate. A new Detention Services Order is being developed on the use of Rules 40 (removal from association) and 42 (temporary confinement).</p> <p>A more detailed mental health needs assessment in IRCs, using the expertise of the Centre for Mental Health, has been carried out and will be published in due course. NHS commissioners will use that assessment to consider and revisit current provision to ensure healthcare needs are being met appropriately.</p> <p>We are introducing a new "adult at risk" concept into decision-making on immigration detention with a clear presumption that people who are at risk should not be detained, building on the existing legal framework. The adults at risk draft statutory guidance was laid before Parliament on 21 July. The adults at risk policy will ensure that individuals suffering from mental illnesses will, alongside all others with conditions which render them vulnerable, be detained only when the immigration factors outweigh the vulnerability factors.</p> <p>January Update - As above - The Home Office and Mitie fully accept that R40 is not an ideal environment for mental health cases and is only used for safety reasons for the individual or others with the agreement of Healthcare while sectioning or release are progressed.</p>	<p>No Change</p>

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that reserve lists for charter flights need to be kept to a minimum and should not be needlessly unsettled by being placed as reserves on more than one charter flight.</p> <p>Recommendation Partially Accepted</p>	<p>The Home Office has kept its use of reserves under review which has included an analysis of the levels of legal attrition on each flight. As a result levels of attrition can be more accurately predicted limiting the use of reserves</p> <p>January Update - The only remaining charter to use the reserve system was Albania and we are now informed this is no longer necessary so the reserve process is closed. Action therefore closed</p>	Resolved
<p>The Board recommend that C&C complete their review of fax facilities and ensure that the provision of fax machines is sufficient to enable all detainees to send and receive faxes promptly.</p> <p>Recommendation Accepted</p>	<p>C&C acknowledge the demand for faxing of information is significant within the centre. C&C have purchased and trialled larger commercial units as the smaller standalone types have proven to be inadequate for the volume and quantity of faxes being sent. A full review was in March 2016. C&C are in dialogue with HO colleagues as having investigated the issues further, the fax reports indicate that up to 90% of faxes at times are not getting through to the main Home Office/DAC fax numbers although the issue is not happening with other fax numbers. This bottle neck in receiving faxes is the main cause of the back logs and repeated faxing which will not be resolved by providing further fax machines. C&C are looking at other long term alternatives in conjunction with the Home Office to resolve the problem.</p> <p>January Update - The new detainee run system of fax administration is now in place and new equipment has been introduced to combat this problem. Monitoring will continue to ensure this fully combats the issue</p>	Improving
<p>The Board recommend that C&C continue to review the provision of laundry services across both sites and consider replacing the unreliable domestic appliances with industrial equipment both to improve reliability of service and potentially reduce costs over time.</p> <p>Recommendation Accepted</p>	<p>During 2015/16 all of the domestic washing and drying machines at Harmondsworth have been replaced. A full survey has now been undertaken at Colnbrook to support a business case for the implementation of similar equipment to replace the existing domestic white goods. The business case is expected to be processed before September 2016.</p> <p>January Update - C&C are currently re-assessing costings and practicalities of the install of industrial machines in Colnbrook. The success of the completed work at Harmondsworth is fully appreciated and the same is proposed for Colnbrook, but certain practicalities (both financial and logistical) are currently being worked through.</p>	No Change

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that Facilities Management give a higher priority to repairing facilities and the fabric of the buildings as this is a constant source of detainee frustration.</p> <p>Recommendation Rejected</p>	<p>C&C have a full complement of Facilities Management (FM) staff. The FM team are required to complete both reactive and planned PPM in line with contractual expectations and this is being met. A significant capital investment programme has been underway since 2015 and this has continued into 2016/17. It is envisaged once these major works have been completed the number of minor repairs relating to detainee accommodation will be reduced.</p>	<p>No Change</p>
<p>The Board recommend that continuous stays in FN/LN and Induction units at Colnbrook site should not exceed 7 days</p> <p>Recommendation Accepted</p>	<p>C&C accept the current Induction unit at Colnbrook is not fit for purpose. Two significant refurbishment proposals have been forwarded to the Home Office which (if funded) will dramatically improve the standard and fabric of the accommodation in this area as well as reducing by 50% the detainee population held in Induction.</p> <p>January Update - All contract proposals and full Business Cases have now been submitted for the extensive refurbishment of the induction unit and are agreed in principle awaiting final Home Office authorisation. These changes are recognised as paramount and are to be progressed as quickly as possible once agreement is advised.</p>	<p>No Change</p> <p>Since the year end, approval has been given by the Home Office to return these rooms to single occupancy which will resolve this issue once implemented</p>
<p>The Board recommend that the staffing profile should be revisited to take into account a more realistic level of short term absences based on experience so that the Centre can be operated in a way that delivers a more acceptable level of service delivery on an ongoing basis.</p> <p>Recommendation Rejected</p>	<p>A full staffing complement has always been a key priority for C&C. C&C have consistently achieved this however levels of non effective (sickness, leave & training) and emergency operational requirements can and do impact on service delivery. C&C have worked hard to address absenteeism within the workforce and as of April 2016, this is at its lowest level since contract commencement. C&C have also introduced a policy of rostered leave which will ensure leave is proportionately spread across the year rather than peaking in January - March annually. Attrition levels are considered low compared to similar industry standards and new shift patterns have been introduced in February 2016. C&C anticipate an improved service delivery as a result and this will be reviewed at the six month point (August 2016).</p>	<p>No Change</p>

Recommendation from 2015 Annual Report	Update Provided by Immigration Enforcement	IMB Status
<p>The Board recommend that detainees on the Enhanced Care Units and any disabled detainees housed within the general population of the Centre should be assessed by Healthcare for their ability to self-care (general ability to perform activities of daily living regardless of whether their issues are physical, mental or learning disability), and where necessary, provide assistance to those with limited ability to self-care</p> <p>Recommendation Accepted</p>	<p>Healthcare is not currently commissioned or resourced to provide 'social care' for detainees however all assessments of detainees with healthcare needs should consider and evaluate the detainees ability to participate in 'activities of daily living' and where support is required inform Centre staff and participate in the development of multi-agency management plans to ensure the detainees has appropriate support. Healthcare staff will provide basic support in relation to washing / dressing etc for detainees located within the ECUs .</p> <p>January Update - As per recommendation no.5 above it is recognised that detainees with major social care needs are not able to be adequately managed in the IRC environment, and recent cases requiring such have been refused or managed to release under the vulnerable adults policy.</p>	<p>No Change</p>
<p>The Board recommend that CNWL/NHS England take urgent steps to implement an effective complaints process and ensure this is effectively communicated to detainees.</p> <p>Recommendation Accepted</p>	<p>Complaints made by detainees about healthcare in immigration detention in England are handled in accordance with Detention Services Order 3/2015, which sets out the role of NHS England in how healthcare complaints are handled, investigated and responded to. The Home Office is working with NHS England to streamline this process. At local level in the Heathrow IRCs action is being taken to improve detainee awareness of how to make a complaint through an intensive communication strategy. This will include: providing information verbally, issuing complaints forms in the appropriate language in the reception area; placing posters throughout healthcare and the centre on how to make a complaint. CNWL complaint leaflets are being provided in all healthcare areas and induction cards will provide brief information on complaints and clinicians explaining feedback processes within healthcare consultations. All complaints will be logged, effective immediately, on the Datix 'feedback' system so they are fully auditable. Referenced and standard letter templates have been produced to facilitate a quality response to all complaints. There will be oversight of all complaint responses from the CNWL Divisional director Lorna Payne.</p> <p>January Update - The monitoring of Healthcare complaints continues to be a matter for CNWL and NHS, but a review of process in the second part of 2016 would appear to have strengthened the system and we are not aware of any current delays in the response of healthcare complaints.</p>	<p>Resolved</p>

Night Time Moves

For the purposes of this analysis, the Board has used 10pm and 8am the following morning as the night time state, when detainees are locked in their rooms. The Board understand that DEPMU use a more constrained timeframe of 11pm to 6am, for their own measurement purposes of Night Time movements. The reality for detainees is that movements between 10pm and 8am will entail them being disturbed during what they would consider to be the night time state.

The following table summarise the departures from HIRC by reason of the discharge as recorded in the Detainee Management System (DMS) at HIRC operated by Mitie Care & Custody, the Board acknowledge that the Home Office have not verified the information contained in this system: -

Summary Discharges - July 2016		10pm to 8 am			
All Discharges	Category by % of All	Night Discharges	Category by % of Night	Night as % of All	
Bail	32	2.73%	2	0.63%	6.25%
Transfer to Prison	20	1.71%	1	0.32%	5.00%
Interview Offsite	4	0.34%	1	0.32%	25.00%
Removal Directions	638	54.48%	256	81.27%	40.13%
Temporary Admission	264	22.55%	11	3.49%	4.17%
Transfer to IRC	208	17.76%	41	13.02%	19.71%
Other	5	0.43%	3	0.95%	60.00%
Total	1171	100.00%	315	100.00%	26.90%

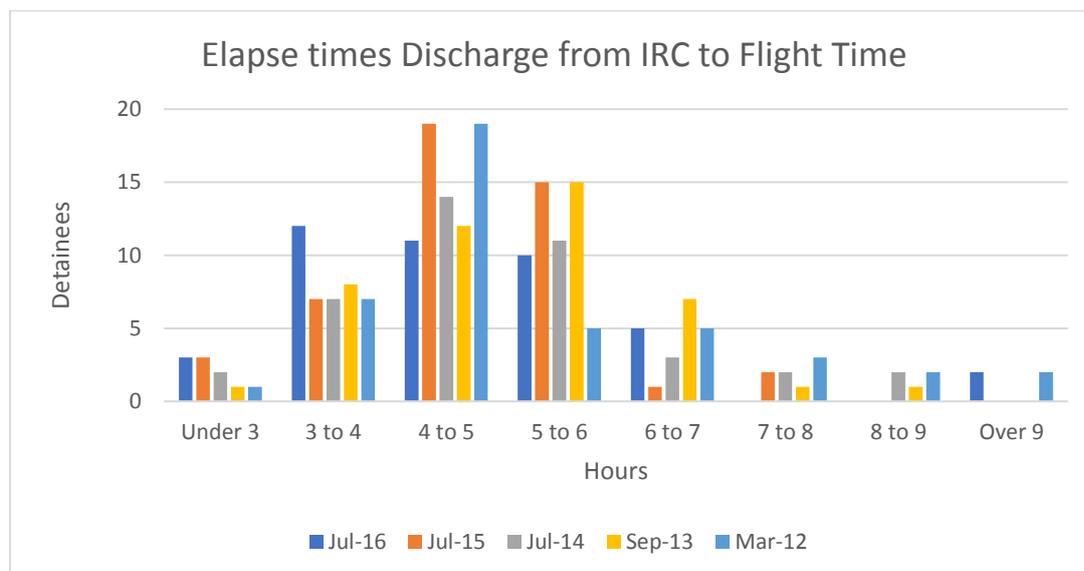
Night time moves account for just under 27% of all discharges from HIRC, and this level of discharges is consistent with the previous monitoring in July 2014 and July 2015.

The removal directions category is the largest reason for night time moves by some distance, and the vast majority of these are through Heathrow Airport which is located close to HIRC. The other significant reasons for night time moves are transfers to other Centres.

The remainder of this analysis focusses upon the Removals via Heathrow Airport and the Transfers to IRCs.

Of the night time moves, 81% (66% July 2015) of these moves related to Removals from the UK, and the timing will be largely dictated by the times of flights from Heathrow Airport. In order to test this hypothesis a sample of discharges to Heathrow airport were investigated with the assistance of Immigration Staff to ascertain the flight times that were related to these discharges, and the results of this sample of 43 flights from July 2016, were compared

with previous samples taken over the last few years at Colnbrook/HIRC. The following chart outlines the results of this sample.



The SLA that Tascor are working to with Immigration, is that detainees will only be brought to the airport a maximum of 5 hours before their flights. As the measurement used here is the time of departure from Colnbrook, compared to the flight time, it is likely that those falling in the 5 to 6 hours category would probably meet the SLA as the van drivers would be in a position to determine when they arrive at the airport. Nevertheless, from a decency point of view the detainee will have been disturbed some 30 minutes prior to these departure times in order to go through the discharge process. From the above analysis, it would appear that there continues to be marginal improvement each year in the length of elapse times with the vast majority of flights achieving the SLA set. The exceptional outliers this year has remained at 2 exceeding 7 hours (2 in 2015 sample).

The conclusion from this sample is that these night time moves are unavoidable if the removals are to be effectively executed. There would be some potential to reduce night time moves if the maximum of 5 hours before a flight was reduced, but Immigration maintain that this would increase the risk of failed removals due to flights being missed. The IMB believe that given the proximity to Heathrow Airport, this standard could easily be relaxed to 3 hours before a flight without any material increase in the risk of missing flights.

The next most significant discharge category in the table above, accounting for 13% of night time moves (41 movements down from 66 movements in July 2015), were transfers to other IRCs which were initiated during the night time. This category has reduced by more than a third from the previous year, but remains higher than the levels recorded in the July 2014 sample. Whilst the Board welcome the improvement on the previous year, it still finds this disappointing as these moves are completely within the control of the Home Office.

Further analysis of the transfers to other Centres has been undertaken and is set out in the table on the next page: -

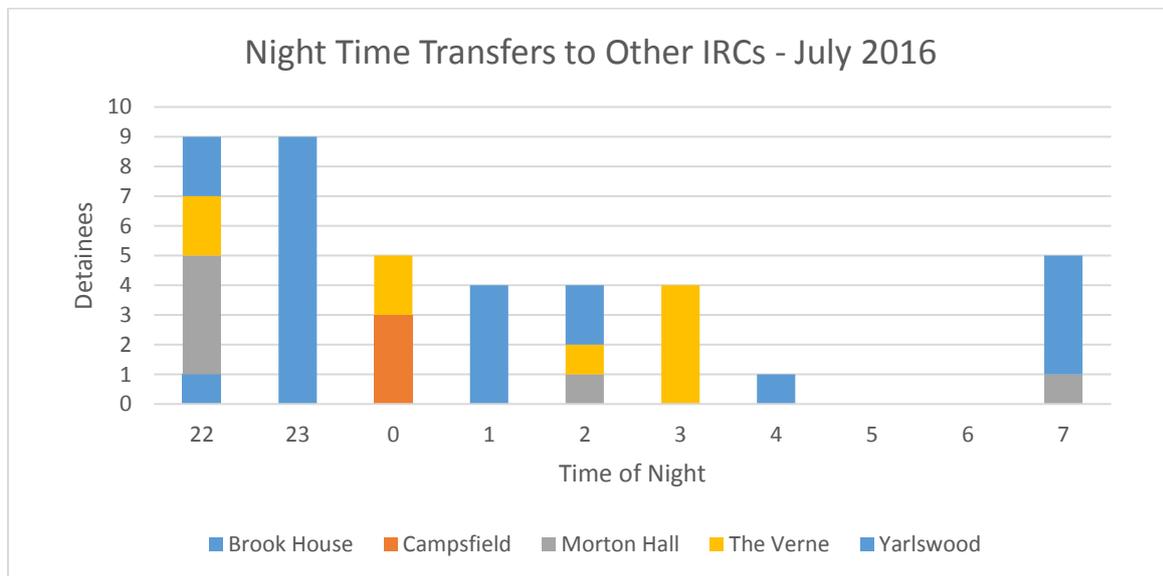
Summary of Transfers to Other Centres - July 2016

	All Moves	Night Moves	All Moves	Night Moves	Night %
Brook House	11	1	5.29%	2.44%	9.09%
Campsfield	11	3	5.29%	7.32%	27.27%
Morton Hall	20	6	9.62%	14.63%	30.00%
Pennine House	1	0	0.48%	0.00%	0.00%
The Verne	79	9	37.98%	21.95%	11.39%
Tinsley House	1	0	0.48%	0.00%	0.00%
Yarlswood	85	22	40.87%	53.66%	25.88%
Total	208	41	100.00%	100.00%	19.71%

The main recipients of night time movements are Yarlswood (22), and this reflects the need to move female detainees to a better environment. The majority of these take place between 10pm and Midnight, whilst some of these journeys start before 11pm, which is what DEPMU count as night state, they will certainly not arrive at Yarlswood until after 11pm, so all of these movements would fall into the category of night moves even under the shorter timescales that DEPMU utilise. There are also 4 moves that originate between 6am and 8am, DEPMU do not recognise these as night time moves, and yet they will require detainees being woken early in order to undertake their move to Yarlswood, however the small number of early morning moves do not change the overall conclusions.

The centre that receives the next highest number of night time transfers is The Verne (9), and then Morton Hall (6). Given the distances involved these journeys will take up a significant part of the night for the affected detainees.

The following chart shows the distribution of transfers from HIRC across the night time state



Length of Detention

The following analysis has been compiled using the monthly reports provided by the Home Office to the IMB at Heathrow IRCs, detailing all the detainees currently held at Colnbrook and Harmondsworth, who have been in continuous detention in excess of 6 months.

There has been a certain amount of data cleansing, as in some of the reports certain detainees' information has been duplicated. These duplicates have been removed from the statistics quoted in this report.

In addition, as the reports produced are compiled separately for Colnbrook and Harmondsworth, individual detainees who have been transferred between the two sites will also appear in both sets of data, for any information attributed to Heathrow IRCs as a whole, these individuals have been de-duplicated.

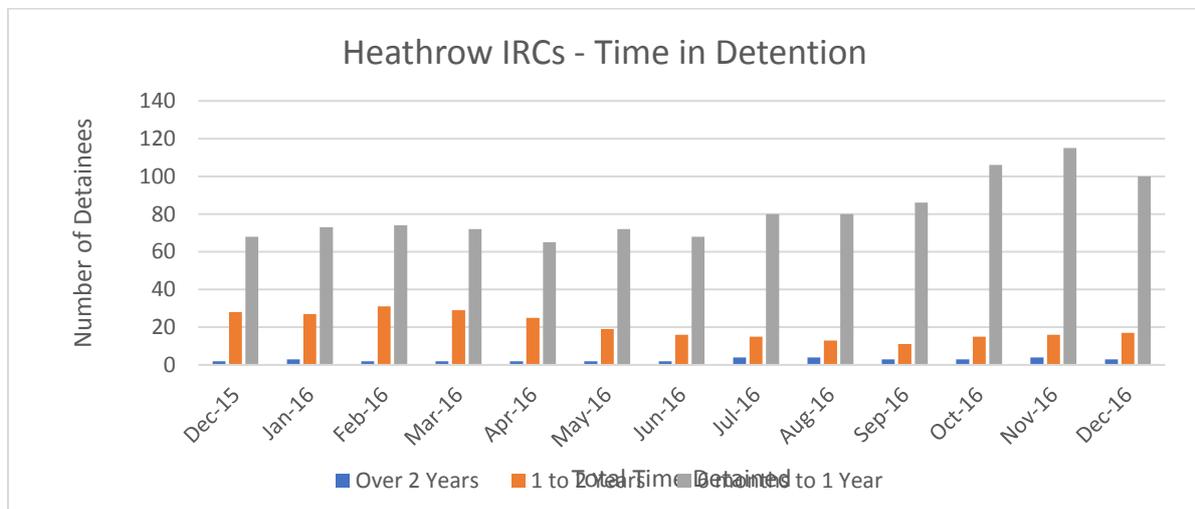
In order to establish the reason for leaving detention, the reasons recorded on DMS by C&C staff have been used as this information is readily available to the IMB. The IMB acknowledges that this information will not have been verified by the Home Office.

The overall numbers remained fairly consistent throughout the year up to the end of September, at the beginning of 2016, there were 98 detainees in residence and in September this figure was 100, with a low of 86 in June and a high of 107 in February. However, there was a step change increase in October to 124 and a further increase in November to 135, before settling back to 120 in December. Clearly the recent trend is a great cause of concern for the Board.

In the 1 to 2 year category the situation has steadily improved during the year with 28 detainees held at the start of the year, which then peaked at 31 in February which has then steadily declined throughout the year to a level of 17 at the end of December, although the low point for the year was in September at 11, consistent with the overall trend above. This is an encouraging trend, although the recent reversal needs to be watched carefully.

In the over 2 years category, the numbers have remained in a narrow range between 2 and 4 throughout the year.

The following graph shows the trends for the overall Heathrow IRCs.

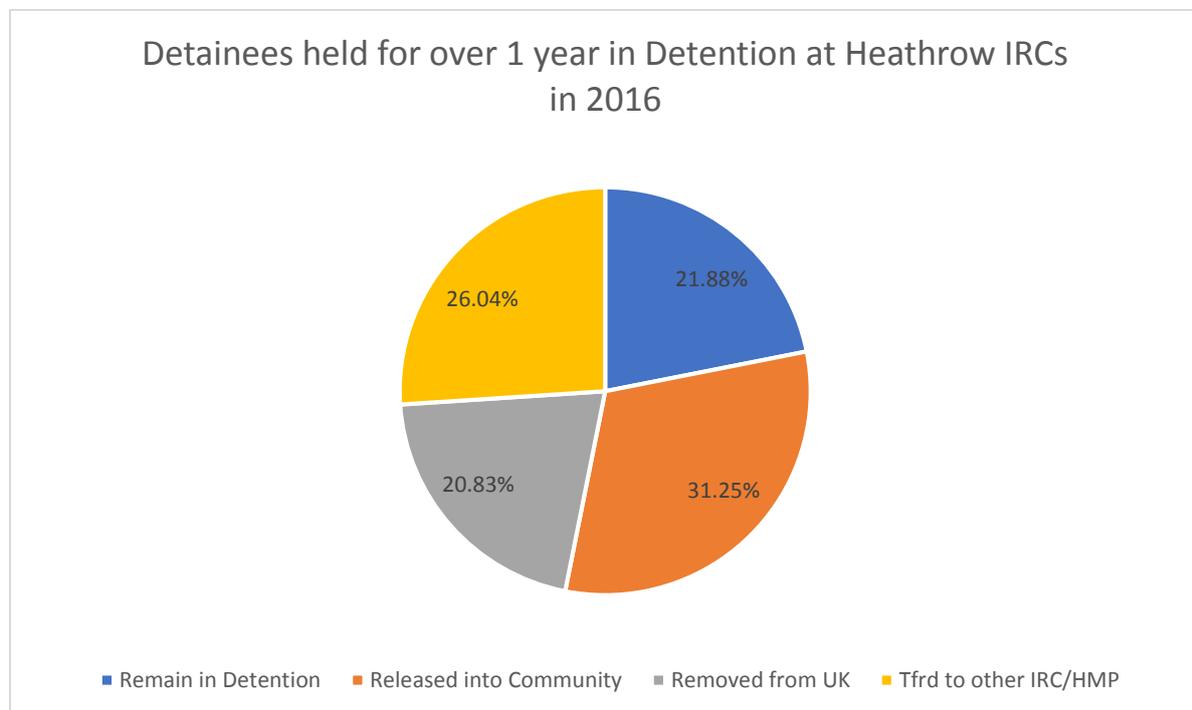


Detainees held in Detention for over 1 Year

The next part of the analysis has focussed on the subset of detainees who have been held in continuous detention in excess of 1 year, and has sought to understand for this group of detainees whether they still remain in detention as at December 2016, or if not why they are no longer being detained.

Almost 22% of the 96 detainees who have been held in this 12 month period, whose continuous detention has exceeded 1 year at any point during this period, remain in detention at the end of the period. Almost a third, have been released into the UK Community either through Temporary Admission, Bail or Leave to Remain. Only 21% have been removed from the UK, and the remainder have been transferred to other IRC's and the IMB has no information on what has subsequently happened to these detainees.

The graph below illustrates this breakdown



The analysis is compared to the previous years' experience at Heathrow IRCs in the table below: -

Status of Detainee	2015			2016		
	No.	%	Average Detention Period	No.	%	Average Detention Period
Released into Community	46	35.4	1 year 8 months	30	42.3	1 year 7 months
Removed from UK	56	43.1	1 year 5 months	20	28.2	1 year 5 months
Still in Detention	28	21.5	1 year 6 months	21	29.6	1 year 6 months
Total Analysed	130			66		
Transferred to Other IRCs	24			25		
TOTAL	154			96		

There has been a reduction in the absolute numbers which is to be welcomed, however, the proportion actually being removed has fallen, with a greater proportion being released into the community.

The average times in detention are relatively stable across the 2 years, although these averages mask substantial variations with the highest detention period in 2016 totalling 3 years and 7 months for an individual who remains in detention, and a further detainee held for 3 years 3 months who was then given Temporary Admission to the UK. This is clearly unacceptable, given that the Home Office are only empowered to detain individuals where there is a reasonable and imminent prospect of removal. These sort of timescales suggest that the decision making processes are potentially deficient, and would benefit from independent scrutiny.