

Annual Report 2013

Yarl's Wood Independent Monitoring Board (IMB)



**Independent Monitoring Board
YARL'S WOOD
IMMIGRATION REMOVAL CENTRE
Chair: Mary Coussey
Vice-Chair: Susan Jackson JP**

Section 1

Statutory Role of the IMB

The Prisons Act 1952 and the Immigration and Asylum Act 1999 require every prison and immigration removal centre to be monitored by an independent Board. Members of IMBs in Immigration Removal Centres are appointed by the Home Secretary from members of the community in which the centre is located.

The Board is required to:

- Satisfy itself as to the humane and just treatment of those held in the immigration removal centre
- Promptly inform the Secretary of State or any official to whom she has delegated authority as it judges appropriate, any concern it has
- Report annually to the Secretary of State on how far the immigration removal centre has met the standards and requirements placed on it and what impact these have on those held in the centre.

To enable the Board to carry out these duties effectively its members have right of access to every detainee and every part of the centre and also the centre's records.

IMB EQUALITY STATEMENT

We adopted the following equality statement in 2011:

The IMB will not discriminate directly or indirectly against anyone because of age, disability, gender reassignment, marital and civil partnership status, pregnancy and maternity, race including colour, nationality, ethnic or national origins, religion or belief, sex and sexual orientation, in recruitment, in the treatment of members, and in the way they monitor the treatment of people in custody.

Section 2

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DESCRIPTION OF CENTRE

3.1 Yarl's Wood IRC ("the Centre") is a purpose-built Immigration Removal Centre operated under the Detention Centre Rules 2001. It is located outside the village of Clapham in Bedfordshire and was opened in 2001.

3.2 Yarl's Wood is the principal UK centre for the detention of single women and families under immigration legislation. There have been no children detained at Yarl's Wood since a change in government policy in 2010. For the purposes of this report, therefore, the term "families" means couples or families detained with children over the age of 18. There is also a Short Term Holding Facility (STHF) at the premises, with accommodation for up to thirty-eight people. The Centre and the STHF are operated on behalf of the Home Office Immigration and enforcement unit by Serco Limited ("Serco" or "the Contractor").

3.3 The accommodation at Yarl's Wood IRC consists of five residential units housed in a large, two-storey building. Occupancy is an average 316, with the great majority being single women. There is a family unit, (Hummingbird) a female induction unit (Crane) and two female residential units (Avocet and Dove). The four main residential units are connected by a central corridor, from which all ancillary areas, including the Healthcare centre, can be accessed. Detainees in temporary confinement under rule 42 ("TC") are held in the separation unit, which also contains removal from association ("RFA") rooms.

3.4 There is a Healthcare Centre on site, which currently is operated by Serco Health. This provides primary healthcare for detainees, with secondary care being the responsibility of the local NHS Commissioning group. This will change in 2014, as responsibility will transfer to NHS England.

3.5 The STHF was opened in Bunting unit for single male detainees (known colloquially as "lorry-drop" cases) in February 2012.

3.6 In previous reports we commented that Yarl's Wood operated in the spotlight of intense interest from non-governmental organisations and pressure groups and, periodically, from the media. This has remained the case in 2013.

4.0 Executive Summary

4.1. The Cultural Kitchen, a popular and purposeful facility was closed for six weeks as a result of an absence of the officer in charge. We **recommend that additional staff are trained to substitute in the event that the officer in charge is absent.**

4.2. We are also pleased to report that from August 2013 the number of long-stay detainees had reduced considerably, so that by December there were

twenty-nine who had been in the Centre for 100 continuous days or more, compared with 114 in 2012. **We recommend that when each individual 's stay in detention is reviewed there should be more weight given to release and monitoring in the community.**

4.3. We have previously commented on the need for as many purposeful activities as possible, so that detainees can feel a sense of self-respect. We again welcome this emphasis in the Centre, and recognise that there are enthusiastic staff involved with organising activities. **We recommend that the Centre continue to actively promote new activities, and continue to support the work of the Activities team.**

4.4. We welcome the positive role played by the chaplaincy and the provision of services for all faiths. One innovation is a female assistant for Muslim detainees. We also welcome the support of Hibiscus which provides emotional and practical advice to detainees, to help with resettlement in the country of origin.

4.5. The Welfare Officer provides an important service at the Centre. We are pleased to note that this function has been expanded.

4.6. We continue to be concerned at the detention of pregnant women. The Home Office policy states that pregnant women should only be detained in exceptional circumstances, and we are not satisfied that these are always met. **We recommend that pregnant women should not be detained unless it is certain that removal is imminent, and that there is an evidenced risk of absconding if they remain in the community.**

4.7. We are also concerned at the detention of people with mental health problems. Detention is stressful and likely to exacerbate weaknesses in mental health. In addition, Healthcare staff on occasions have had to deal with detainees referred direct from the airports with severe mental health problems, putting additional pressure on their resources. **We recommend that people with significant mental health problems should not be detained.**

4.8. As reported in previous years detainees are often anxious and fearful of developments, concerned at the outcome of their immigration case and about their domestic arrangements and child care. This anxiety can be expressed physically for example in food refusals and self-harm. We welcome the part played by Healthcare staff in supporting the residential staff in monitoring food refusals and in encouraging detainees to eat and drink. We continue to liaise closely with Healthcare and residential staff to support them in their help with detainees.

4.9. A continuing concern is the length of time taken to process cases, sometimes because of detainees' own non-cooperation and lack of documentation. However it sometimes appears to us that Immigration Enforcement case officers give more weight to reasons for continuing detention rather than whether such detention is necessary and justified. **We**

recommend that more weight is given to health and family life when considering removal to other centres or countries.

4.10. In monitoring we regularly speak to distressed detainees who cannot understand the need for their being detained when they could be contacted in the community. We are told that the decision is based on an assumption that the person has a previous history of 'high harm' such as absconding. Although we recognise that this decision is not within our remit, it strongly affects detainees' state of mind when they resent and do not understand the reasons for detention. **We believe the decision to detain should be a last resort.** The Board recommends that Immigration Enforcement should review and assess the decisions to detain of case officers.

4.11. Some people have been detained without having being given a chance to sort out their affairs at home. The Welfare Office is an important resource for detainees to use for such practical problems.

4.12. We continue to be concerned at the length of time detainees are required to spend in transit between the Centre and airports, or between Yarl's Wood and other Immigration Removal Centres. This concern has been raised with the Immigration Minister and an enquiry is underway.

4.13. The ACDT process has now been improved. A protocol has been drawn up for a review of all complex cases, and there are daily and weekly individual needs meetings.

4.14. Although under discussion, there is still no provision for a Care Suite which proved such an asset in the past. It would provide a valuable resource particularly when dealing with vulnerable detainees prior to removal or at times of stress and could reduce the need to use Kingfisher.

4.15. Since the serious sexually inappropriate conduct by some staff, involving a detainee, steps are being taken by Immigration Enforcement and the Centre management to review safeguarding procedures, which we welcome.

5. Specific areas of monitoring

5.1. Equality and Diversity

5.1.1. The Centre's equality policy covers all the protected groups under the 2010 Equality Act, and the equality statement is displayed on notice boards throughout the centre. The monthly Equality Action Team meeting is the principal forum for reviewing the advancement of equality practice, and is attended by members of Serco staff responsible for Activities, Welfare, Religious Affairs and Healthcare, together with a member of the IMB. The final part of the meeting is open to detainees, who are invited to express any concerns they may have. These most frequently relate to issues concerning food or the availability of popular activities, such as Arts and Craft. Detainees

do not always elect to take advantage of this opportunity, but minutes of the EAT meetings are displayed on notice boards.

5.1.2. Detailed guidance on the treatment of transgender detainees has been issued by Immigration Enforcement and the Board continues to monitor how this is implemented within the Centre.

5.1.3. Equality and Cultural Awareness days for detainees are held regularly. These are popular and well attended. Taster food from the different nationalities represented in the Centre is prepared in the Cultural Kitchen, and through the media of films and quizzes detainees are encouraged to develop and increase their awareness of different cultures. Stands available on the day may include displays of different types of clothing, an information stand organized by the Religious Affairs Team, examples of Arts and Crafts created by the detainees as well as demonstrations of hair braiding or mehndi decoration.

5.1.4. These events run throughout the year and are well supported by the Religious Affairs Team who work tirelessly to provide spiritual and emotional support to detainees. Sunday morning services take place in the Visits Hall and the team meet regularly to discuss multi-faith provision in the Centre. All faiths are given the opportunity to attend prayers where possible. The Imam conducts Friday prayers which are well attended by all groups of detainees. The Imam and Pastor attend Bunting Unit to support the faith of the single male detainees.

5.1.5. The Centre monitors the ethnic origin of detainees and staff. In the last four months of 2013 the Asian population, comprising those of Indian, Bangladeshi and Pakistani origin, has overtaken the Black African Caribbean population as the largest ethnic group. The main nationalities continue to be Indian, Pakistani, Nigerian, Jamaican, and Chinese. There can be up to fifty different nationalities within the Centre at any one time. Recent months have seen an increase in detainees from Syria and Eritrea (the latter predominantly Christian).

5.1.6. Christianity continues to be the largest faith within the centre, followed by Islam and Hinduism. As well as the Christian chapel, the centre provides a Muslim prayer room, a temple for Hindus and Sikhs and a Buddhist temple. A Chinese clergyman ministers to Chinese Christian detainees. Both Anglican and Catholic clergy hold services within the centre. Sunday morning service in the Visits Hall is well attended, as are Friday Prayers conducted by the Imam. The chaplain and his team perform a very valuable support for detainees.

5.1.7. The Focus Groups which are held throughout the month aim to provide a mechanism for detainees to raise concerns, and where issues are highlighted, this can help promote good relations between different national groups.

5.1.8. The size of different nationality groups and the trends in employment, violence reduction and discrimination incidents are monitored by the Equality Action Team, which includes the Religious Affairs Team. Tensions can arise between some of the main nationalities; this is closely monitored on the units where there may be an imbalance of certain nationalities and at present raises no cause for concern. The Religious Affairs Team along with the Residential Teams are often instrumental in informally mediating and defusing volatile situations that may arise when detainees of different faiths or cultures are living in close proximity to one another.

5.1.9. A busy calendar of cultural and religious events is organized; in October a Gospel Choir concert was held as part of Black History month and the principal festivals of all the main faiths, such as Ramadan, and cultures are celebrated throughout the year.

5.1.10. The ethnic origin and gender of staff is monitored by grade and following recommendations by HMIP there is a drive to recruit more female staff. At present both male and female officers continue to carry out roll call, and it would be an advantage if there were female officers

5.1.11. Equality and Diversity days at the Centre include a display provided by SCOPE, the disability awareness charity. Centre monitoring includes disability and there are designated disability officers. In December 2013 eleven detainees claimed to have a disability but of these only six were deemed to have a disability by Healthcare.

5.1.12. The Board formally adopted the national IMB Equality statement, see Section 1 above. It is important that membership of the Board reflects the ethnic diversity of the Centre we monitor. Unfortunately at present this is not the case. Currently, the Board numbers eight, of whom six are female, and seven white, with one male from an ethnic minority. Unfortunately, of the four members recruited in the previous year, three have now resigned, along with another long-standing member.

5.2. Activities, Education and Employment

5.2.1. The Activities team have had a difficult year as some of their number were affected by disciplinary proceedings during the year. The disciplinary proceedings and appeal were protracted. These led to dismissals and these positions could not be filled until they were completed. This led to a depleted team and fragmented activities programme. There is now a new Activities Manager and the Board hope that he has the support he needs to put the team back together and provide motivation.

5.2.2. Because of long term sickness leading to staff shortages, the Cultural Kitchens had to be closed for a considerable period in 2013. Although there is no contractual need for this service, we see it as valuable resource for detainees. It provides an opportunity for conversation, team work and

something resembling normal social interplay. It is not just an opportunity for familiar food but has a real benefit for the well-being of detainees.

5.2.3. In the Family Unit there have been family disputes and occasions of domestic violence when family members are confined together. In October six Violence Reduction Incidents were opened as the result of a family dispute in Hummingbird, and two Violence Reduction Incidents as the result of an allegation of domestic violence.

5.2.4. The Cultural Kitchen in the Family Unit is open only once per week, which is insufficient, and it would benefit these detainees.

We recommend that the Cultural Kitchens be kept open whenever possible and the staff responsible be given help and support to achieve this with back up staff if necessary.

5.2.5. In spite of these problems there has been a full programme of events planned monthly and organised on a cultural and religious basis. These are well attended and well organised and generally popular with detainees. There are discos, also quiz evenings and sporting events. For example in April a Multicultural World Games Day was held, with cricket and pool competitions. There is a gym which is well used, keep fit classes, and badminton in the Sports Hall. Additionally there are Music in Detention sessions, and the Befrienders are very active to following up matters raised by detainees. Other organisations working with the Centre are the Bedford Credit Union, Refugee Action, and Samaritans.

5.2.6. The Library continues to be well organised and provides vital information about access to legal advice and other services. The Welfare team are very active particularly with detainees who want to pursue AVR and provide help and support liaising with families, tracking down property and signposting detainees who feel lost in the process.

5.2.7. The weekly Market is still very popular with detainees and now occupies permanent premises within the Centre.

5.2.8. Formal education is available in the form of English (ESOL) and IT classes daily.

5.2.9.. There is a hairdressing and nail salon open to detainees and the centre can now offer acupuncture by appointment as well as Yoga and fitness classes.

5.2.10. Employment opportunities remain similar to 2012 (when there were 59), and there are meeters and greeters who help new entrants settle in. Detainees are also employed in the kitchens. The proportion of employed detainees broadly represents their proportion in the Centre apart from Pakistani nationals who again are underrepresented.

5.3. Healthcare and Mental Health

5.3.1. In 2013 the Healthcare department was relatively settled, with the improved services noted in previous IMB reports continuing to operate well. HMIP reported positively on the department following its unannounced inspection in June.

5.3.2. The IMB received 17 applications about Healthcare in 2013: this includes informal oral approaches as well as written complaints. This is a reduction from the 20 complaints made in 2012; although in real terms could be viewed as an increase in that in 2012 one detainee was responsible for 12 of the 20 complaints. That detainee was still detained in 2013 and made at least 3 complaints to the IMB about Healthcare. In 2013 detainees 76 complaints were made under the DCF9 about Healthcare, of which 26 were clinical, A further three were referred to the Professional Standards Unit (PSU). This is an increase from 2012 which were 12 clinical complaints, and two medical. As these DCF9 complaints were classified as "Clinical" the IMB did not have access to them, so we are unable to comment on them. There was only one complaint about Healthcare staff's conduct, which was partially upheld.

5.3.3. A common theme of the complaints to the IMB was medical appointments – mainly external. A few detainees asked us to follow up on referrals: when we did so we found that the referrals had been made as required and the waiting times were comparable with those that patients would experience in the community. One detainee complained to us that an external appointment had been cancelled because of difficulties with transport. This was doubly frustrating for her because she had missed a previous appointment in order to attend a High Commission interview. Another complained that a surgical procedure she needed had been cancelled. On investigation we received an explanation from Healthcare that was quite different to the one given by the detainee, who had complex needs but was refusing to engage at all with Healthcare. We highlight the case as an example of situations where, given the stresses of the detention setting, detainees may be unable or unwilling to understand decisions relating to their care, and this itself causes extreme stress and anxiety.

5.3.4. Overall in 2013 the IMB received fewer complaints or negative comments from detainees about the attitude and demeanour of Healthcare staff than in previous years. However, we were concerned to receive four complaints from pregnant detainees or their partners about what they perceived as an uncaring attitude from Healthcare; sadly, two of these women had lost their babies while in detention. We are satisfied that this was not due to the uncaring attitude of Healthcare, nor can any portion of blame be attributed to their treatment in detention. This is extremely difficult at the best of times,

but in the stressful environment of detention, women who suffer such a loss need very careful and sympathetic treatment. Home Office policy is that pregnant women are only to be detained in exceptional circumstances. We are not satisfied that these are met. On the positive side there is now a dedicated officer responsible for the welfare of pregnant detainees, and a midwife is available to carry out all checks which would be done in the community. However, as already indicated in paragraph 4.6. **we recommend that pregnant women should not be detained.**

5.3.5. The resident referred to in paragraph 5.3.2. above as making 12 complaints about Healthcare in 2012 was still detained in 2013 and continued to complain about Healthcare. Examples of her complaints included Healthcare's refusal to provide her with a wheelchair, which Healthcare said was entirely unnecessary, as there was no medical reason for her to use one. This was confirmed after many appointments with hospital specialists and a physiotherapist. She also complained about the removal of some of her in-possession medication. We continued to experience the same difficulties in assessing this detainee's needs and she refused to give us access to her records. Given our lack of access to medical records and the breakdown of the relationship between patient and Healthcare. Although this detainee had removal directions served on two separate occasions during 2013, she was ultimately bailed after 678 days in detention.

5.3.6. Mental health provision was generally good with reasonably prompt access to primary care, although there were some exceptions to this, including one case where a mental health assessment appeared to have been recommended but not actioned.

5.3.7. Despite this, we continued to be extremely concerned about women detained with mental health problems. In our 2012 report we referred to a woman detained despite a history of depression, including recent in-patient treatment. She was temporarily admitted soon thereafter, so we were dismayed to meet her again during 2013 in what she told us was her fourth period in detention. Quite apart from the humanity of the situation, it is difficult to see how these repeated periods of detention were contributing to enforcing immigration controls.

5.3.8. In 2013 there was a worrying new phenomenon at Yarl's Wood: the detention of women with serious mental health issues straight from the airport. The Board is aware of four examples of this through the year. The numbers involved may be small, but these women were plainly not fit for detention and appeared to be sent to Yarl's Wood because there is no pathway at the airport for them to access a place of safety and treatment. That is not a valid reason for people to lose their liberty and end up in a detention situation. Moreover, the presence of these patients, one of whom was psychotic, puts an enormous strain on staffing and resources at Yarl's Wood in terms of their day-to-day

management and in negotiating to find in-patient beds. **We again recommend that people with significant and serious mental health problems should not be detained.**

5.3.9. On a point of access, we are disappointed that our work to improve our understanding of Healthcare matters has not fully borne fruit: Communication difficulties have meant that the Board has not had representation at meetings of the Healthcare Partnership Board; also attendance of Healthcare at our own board meetings has not been as regular as would be desirable.

5.3.10. As reported in previous years detainees are often anxious and fearful of developments, concerned at the outcome of their immigration case and about their domestic arrangements and child care. This anxiety can be expressed physically for example in food refusals and self-harm. We welcome the part played by Healthcare and Residential staff in monitoring food refusals and in encouraging detainees to eat and drink. We continue to work closely with Healthcare to support them in their help with detainees, particularly by talking to such detainees and encouraging them to eat. .

5.4. Security, Removal from Association and Use of Force

5.4.1. A Security Committee meets monthly to review the monthly intelligence report and security threats. The IMB is present at these meetings whenever possible and in 2013 attended 9 out of 12. Unfortunately we are not always informed when meeting dates are changed and consequently we face difficulties in attending. This is true of other meetings which we are required to attend.

5.4.2. Threat priority areas are reviewed, along with room searches, of which a regular number are carried out monthly. Detainees have expressed concern at room searches when conducted by male officers, and these were commented on by the HMCIP Report in October 2013, as vulnerable women feel threatened by these activities. Where possible there is a review of Use of Force video recordings.

5.4.3. Contingency plans are also reviewed and updated. A live desk-top contingency exercise was carried out on 29 November 2013 which the IMB attended. The exercise ran smoothly and staff were clear on their roles and responsibilities.

5.4.4. There were 72 occasions on which Removal from Association (RFA) was used. In such cases the IMB is informed and the member on duty will visit the person to monitor whether they understand the reasons for this action and monitor its justification. The numbers of RFA use have declined from the 78 in 2012 and 81 in 2011, which we welcome. However, last year we questioned the use of RFA as prelude to removal from the Centre. Temporary

confinement was used on 15 occasions, and this too is a reduction of 40% from the 25 instances in 2012.

5.4.5. Force was used 125 times in 2013, compared with 130 in 2012 and 155 in 2011. We welcome this reduction. It is worth noting that 51 or 40% of the recorded uses of force were employed either to prevent self-harm or in offering assistance to detainees, for example to sit up or walk in the case of disabled detainees.

5.5. Safer Detention and Security

5.5.1 Safer Detention meetings are held monthly with attendance from Senior Managers, Counselling, Religious Affairs, Healthcare, Immigration Enforcement, IMB and invited guests. There is now a Safer Detention Lead and 2013 saw the introduction of an annual Safer Detention Report which will look at trends not only month on month but year on year. The Safer Detention Lead is also building on contacts with other IRCs to share best practice.

5.5.2. The monthly report considers ACDTs (Assessment, Care in Detention and Teamwork), who these are opened by and for what reasons, and monitors any trends. Following DSO 03/2013 introduced in May, any resident who misses 6 consecutive meals or has no fluid for 24 hours must be placed on ACDT.

5.5.3. Constant Supervision, the highest level of ACDT, is only used when a resident is deemed at high risk of suicide or self-harm and only for the shortest possible time. Raised Awareness is no longer used following incidents mentioned in last year's report where this was seen to be ineffective. Care and Support plans are opened for detainees requiring extra support but with no thoughts of self-harm. These are typically used for mobility or mental health issues or following bereavement. All these issues are considered at the daily and more intensive weekly Individual Needs Meetings with input from the Safer Detention Lead where possible.

5.5.4. Violence Reduction Incidents (VRIs) also form part of the monthly report. These are opened if there is evidence of bullying or conflict between detainees or if an officer is physically or verbally abused. There is then a staged process leading to eventual closure of the VRI. The monthly Safer Detention meeting also receives a report from the Deputy Centre Manager who reviews all ACDT paperwork and provides feedback on quality and accuracy.

5.5.5. It is important both with VRIs and the post closure process for ACDTs that a consistent approach is taken particularly with regard to paperwork and that the correct procedures are followed so that outcomes are clear for all concerned. **We recommend that reviews of the ACDT process should be conducted on a more multi-disciplinary basis.** We appreciate that this is affected by the availability of Immigration Enforcement staff and may therefore

only be possible in the most complex of cases but the more input that can be recorded prior to the reviews the better.

5.5.6. Other areas discussed at the monthly meetings are Policy Development, Staff Training, the Continuous Improvement Plan and Promotion of a Safer Environment.

5.5.7. Management figures¹ show that in 2013:

358 ACDTs were opened, 7.6% of 4692 admissions. This is an increase on last year but can largely be explained by the inclusion of food refusers following a new DSO.

186 Constant Supervisions, 3.9% of admissions. 24 VRIs were opened, 0.5% of admissions but six of these relate to one single incident involving families on Hummingbird Unit so is in effect lower than previous years.

67 Care and Support plans were opened, 1.4% of admissions. 9 detainees since June have had Care Plans opened because of concerns about their Mental Health. There have also been Care Support plans for disabled detainees. We welcome the detailed and careful consideration given to disabled detainees.

5.5.8. There is still no provision for a Care Suite which proved such an asset in the past. This is under discussion but has been for some time. This would provide a valuable resource particularly when dealing with vulnerable detainees prior to removal or at times of stress and could reduce the need to use Kingfisher. **We recommend that establishing a Care Suite should be given greater priority.**

5.6. Foreign National Offender (FNOs)

5.6.1. The numbers of FNOs have been relatively low. However we have been informed that Immigration Enforcement will be significantly reducing the numbers of FNOs held in prisons and thus IRCs will be receiving many more in the coming year. We repeat our comments made last year that **we recommend that FNOs with a history of disruption should not be detained in the Centre in order to help ensure its smooth running.**

5.7. Length of Detention

5.7.1. We again highlight the position of single women detained for excessively long times. The length of stay of family detainees is lower. The numbers of long-stay detainees have reduced significantly since July 2013, which is an improvement on the position in 2012. Nevertheless length of time in detention continued to be a major concern for most of the year. The longest stay resident, a Chinese national, has been in detention for 690 days. The basis of detention is that a person currently has a realistic prospect of removal in a reasonable time.

¹ These figures are taken from internal management information; as such they are provisional, subject to change and do not form part of national statistics.

5.7.2. The majority of complaints received by the Board relate to immigration issues. Many detainees express frustration at the length of stay, the uncertainty of their situation and the difficulty of obtaining access to and information from their caseworkers. Added to this is the reliability of the decision to detain in the first place.

5.7.3. The Board is particularly concerned about the detention of pregnant women. This should only happen in exceptional circumstances but these are vaguely defined and difficult to ascertain. We propose that this should be interpreted strictly and only when Removal Directions have been served. Pregnant women in particular find detention very stressful.

5.7.4. We note the high number of detainees who are eventually released into the community. Management figures show that of 3,965 detainees who left detention in 2013, 2,457 (62%) were granted Temporary Admission or bailed. This must bring into question the quality of the initial decision to detain. Again **we recommend that Detention should be when removal is imminent and for the shortest possible time.**

5.7.5. The Board, as last year, would urge Immigration Enforcement to look at the process prior to detention and to regularly review the longest stay detainees and consider whether there is a realistic prospect of removal. It must also be possible to look at alternative methods of monitoring people in the community especially families. We recently saw a resident who had to make arrangements for their car to be removed from a car park, as the decision to detain was unexpected. This year a Chinese resident was granted TA on a tag after 1329 days in detention and another long stay resident with mobility issues was bailed after 678 days most of which were spent on a Care Plan.

5.7.6. According to official figures a total of 2,957 single women left detention at Yarl's Wood compared to 3,162 in 2012. The following table² shows the

Number of Days leaving detention	Number
A: 3 days or less	253
B: 4 to 7 days	449
C: 8 to 14 days	525
D: 15 to 28 days	541
E: 29 days to less than 2 months	636
F: 2 months to less than 3 months	235
G: 3 months to less than 4 months	120
H: 4 months to less than 6 months	87
I: 6 months to less than 12 months	41
J: 12 months to less than 18 months	6
K: 18 months to less than 24 months	3
L: 24 months to less than 36 months	1
M: 36 months to less than 48 months	

breakdown of the number of women leaving detention by length of stay. At the time of writing the longest stay female was resident for 690 days.

5.7.7 Official figures do not show the length of stay for families; management figures show an average stay of 43 days for single women, and the longest stay family had been resident for 236 days at the end of December.

5.7.8. The Board are concerned about the suitability of the family unit. The dining room and server are cramped and the men lack freedom of movement particularly when staff levels are low.

5.7.9. The Board regularly questions the reasons for the continuing detention for lengthy periods. **We recommend as in our previous reports that Immigration Enforcement should give greater weight to monitoring people in the community.**

5.8. Detainee Complaints

5.8.1. According to the information supplied by the Immigration Enforcement statistics, the number of complaints submitted by detainees via the DCF9 procedure was 76, a drop from 96 in 2012. The highest number was concerning misconduct, 21 complaints. The most serious complaint of sexual misconduct by Activities staff, was registered in December 2012. It was upheld in 2013, and disciplinary action was taken against three officers, resulting in three dismissals. The police declined to take action initially on the ground that it was consensual, but the Centre Management never accepted that it was consensual. The police are reconsidering the matter as a detained person is unable to give such consent. The incident received publicity in the national press.

5.8.2. The publicity occurred after an inspection by HM Prisons Inspectorate. Fifty detainees selected randomly were interviewed and no further inappropriate behaviour was identified. However concerns were expressed at male staff entering rooms allegedly without waiting for a reply after knocking. We fully endorse the drive by the Centre to recruit more women staff, and are monitoring progress on this. We have also reviewed how we monitor safety in order to make us more accessible to detainees. Additionally, steps are being taken by Immigration Enforcement and Centre Management to improve the safety of detainees following the inappropriate behaviour. The IMB and other IRC staff are involved in this initiative.

5.9. Detainee movements

5.9.1 Detainee movements by Tascor continue to be a concern, because of the time taken to transport detainees to and from airports and between centres, and the fact that a high proportion are at night. For example, monitoring with other IMBs indicated that between Colnbrook IRC and Yarl's Wood IRC in September 2013 of 16 movements all except one were at night. Twelve

began at 23 hours plus, and 3 began a little after 22.00. The average journey time was almost three hours.

5.9.2. We have expressed concern at this and it has been raised with the Immigration Minister. A review is being conducted. **We recommend that future contracts for escorting should include maximum times within which detainees are in transit.**

5.10. Access to legal advice and other assistance

5.10.1. The availability of legal advice has become a greater concern to detainees since the reduction in legal aid. We understand that whereas 90% of detainees had legal aid, the proportion now is only 10%. Given that people are detained and likely to be removed against their will, this is unacceptable. **We recommend that the Legal Advice Agency should review the criteria for aid to detainees so that a higher number are eligible.**

5.10.2. We recognise the value of work done by Hibiscus. **We recommend that the funding for this valuable service should be continued and enhanced.**

5.10.3. We also recognise the important role of the Welfare Officer. It appears that demand for this service has increased so much that it is no longer possible for one officer to cover and we support an increase in staffing. Other important assistance provided includes the Key Support Workers Scheme, and Family Liaison Officers. A designated officer supports pregnant detainees.

5.11. Food

5.11.1. The Centre offers a variety of diets such as Vegan, Halal, and special meals to meet medical needs. There is a summer barbeque Christmas dinner and special meals for other festivals. The Board member on rota duty normally eats a meal with detainees. On the whole we can report favourably on the quality of food, although we have expressed concern at the excessive quantity of carbohydrates for lunch. There is a food comments book in each dining room and we are pleased to note that it is used and staff respond to comments.

5.11.2. Dining also gives an opportunity for us to talk informally to detainees.

5.12. Charter Flights

5.12.1 Charter flights are organised at least every month to return large numbers of people to destinations such as Pakistan, Sri Lanka, Kosovo Nigeria and Afghanistan. Detainees from Yarl's Wood are included on these flights and there is a Charter focus group arranged prior to leaving to enable detainees to raise any concerns or questions. Detainees are also invited to discuss any concerns with the Welfare Officer. The IMB has monitored the process in Detainee Reception and on to the airport coach. If a charter flight

leaves from Heathrow, the Heathrow IMB can monitor the detainees onto the plane. However, most charter flights now leave from Stansted or Luton airports, where there is no IMB. This is a serious gap in monitoring and **we urge the Minister to expedite approval of the establishment of new boards to cover these airports as plans have been under discussion since before our previous report.**

5.12.2 We have observed several charter preparations in 2013. These have mainly proceeded calmly and professionally, with staff behaving courteously and patiently with the travelling detainees. There was also plenty of food and drink on the coaches. There were no incidents during the charters we monitored: but the whole process takes an extremely long time. It can be many hours from when detainees arrive in Reception until they finally leave the Centre.

5.13. Facilities management

5.13.1 The centre is generally well maintained and kept clean and tidy. The units and corridors have been decorated this year and the general impression is of a bright and cheerful establishment. In previous years the IMB have commented on the state of the laundries. These can still be messy on occasions but the ironing board covers are being replaced more often than before.

5.13.2. The main notice boards are now centralised in 'The Avenue'. The quality of the boards has improved, being covered in clear plastic and they contain important information in several languages. The IMB boards are still located in the individual units, beside the dining room. Our boards have needed updating for nearly a year now, as there are no photos of new members, and one photo has been missing for several months. We have all had new photos taken for the boards and hopefully they will be updated in the near future.

5.13.3 All the units now have white boards outside the office. These boards give information about individual appointments with doctors, legal and social visits etc. each day.

5.13.4 The information screen in the central area has been replaced by a much larger one. This gives a wide range of information about services available to the detainees, as well as a comprehensive description of past activities and celebrations, and advertisements of future events.

5.13.5 The venue of the popular weekly market has now changed from the Sports hall to a much smaller room. The consequence of this is that the visits to the market have to be staggered unit by unit. The order of visits is rotated each week, and goods are replaced after each unit has visited. This does seem to be a fair way of managing the sale.

5.14. Immigration staff locally

5.14.1. We have continued to receive assistance and co-operation from Immigration Enforcement staff during 2013. We have also been fortunate to have the services of a permanent clerk, who is extremely efficient. However there have been three occasions on which we had no clerk to service our meeting because of staff shortages. We understand the difficulties of covering when there are staff shortages. However **we recommend that Immigration Enforcement ensure that we always have the agreed level of support.**

Section 6

THE WORK OF THE INDEPENDENT MONITORING BOARD

BOARD STATISTICS	2013	Change versus 2012
Recommended Complement of Board Members	12	-
Number of Board members at the start of the reporting period	12	+1
Number of Board members at the end of the reporting period	9	-3
Number of new members joining within the reporting period	-	-1
Number of members leaving within the reporting period	4	+1
Total number of Board meetings within the reporting period	12	0
Average number of attendees at Board meetings during reporting period	9	0
Number of attendances at meetings other than Board meetings	Approx 70	
Total number of visits to the IRC (including meetings)	269	-30
Total number of applications/complaints received (written and oral)	65	74
Total number of segregation reviews held	N/A	N/A
Total number of segregation reviews attended	N/A	N/A

Subject-matter of Applications to the Board

Code	Subject	2013	Change versus 2012
A	Accommodation	1	-4
B	Access to/quality of legal advice	3	-5
C	Diversity related	3	+2
D	Education/employment/training/activities	0	-2
E	Family/visits	0	0
F	Food/kitchen related	13	+8
G	Health related	17	+3
H	Property	1	-4
I	Related to detainee's immigration case	7	-1
J	Staff/prisoner/detainee related	1	-11
K	Transfers/escorts	4	-1
L	Miscellaneous	1	-5