

Report on an unannounced inspection of

Campsfield House Immigration Removal Centre

by HM Chief Inspector of Prisons

11–21 August 2014

Glossary of terms

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Introduction

At the time of this inspection, Campsfield House Immigration Removal Centre in Oxfordshire held 209 adult male detainees. The centre was operated by Mitie.

This was the latest in a sequence of positive reports about the centre, all of which have found consistent improvement. As with all inspections of immigration detention facilities, we were mindful that detainees were not held because they had been charged with a criminal offence or through normal judicial processes.

The centre was very safe. Detainees' own perceptions of safety compared favourably with other establishments and this was confirmed by what we found. Reception arrangements were efficient and early days arrangements were good. There was very little violence or bullying and the centre cared well for vulnerable detainees who might be at risk of self-harm. Force and separation were seldom used. There had been one self-inflicted death since the last inspection and the centre had implemented all the recommendations arising from the Prisons and Probation Ombudsman's investigation. Security was proportionate and restraints were only applied when justified by individual risk assessment. The use of razor wire in some areas was unnecessary.

The onsite Home Office team were conscientious in their work. However, we found examples of detainees who had been adversely affected by significant weaknesses in immigration processes outside the control of those working in the centre. At the time of the inspection, 14 detainees had been held in the centre for more than six months – the longest for 11 months – and some of these delays were unreasonable. One detainee's removal was delayed for two months because of failings by the escort contractor. Three children had been held in the centre since 2013; in two of these cases it took too long to carry out an age assessment and in one the detention had been authorised despite knowledge that the detainee was under 18. Rule 35 reports, which should have provided a safeguard for detainees who had been tortured, did not provide adequate clinical judgements to inform caseworkers' decisions.

Relationships between staff and detainees at the centre were excellent. In our survey, 90% of detainees told us that staff treated them with respect and 81% said they had a member of staff they could turn to if they had a problem. These good relationships were at the heart of the centre's strengths. There are plans to develop new accommodation built to more secure 'category B' standards adjacent to the existing site. It is important that this more secure accommodation does not adversely affect the positive culture of the existing centre. The quality of accommodation was reasonable but cleanliness was variable. The needs of the diverse population were generally well met and faith provision was good. Health services were also good.

The provision of activities had improved significantly since the last inspection and there were good opportunities to keep occupied for those detainees who wished to do so. Education provision was good and geared to the transient population and their often very uncertain futures. There was paid work available and allocation processes met requests to work fairly. Detainees had appropriate access to the internet in the well equipped library and internet suite. We were pleased to see that plans were being made to allow detainees to use Skype to contact their families. Detainees had good access to PE facilities.

In the six months before the inspection, 842 detainees had left the centre. About a third had been removed, a third released and a third moved to another centre. Welfare staff assisted by Asylum Welcome and the British Red Cross helped detainees prepare for all these outcomes. Some detainees needed more help to reach their final destination after arriving in their home country. Visits arrangements were good. The very busy staff in the short stay unit, where detainees were located on arrival and prior to removal, worked sensitively with the detainees they were responsible for.

Overall, this was a very positive inspection. Staff and managers at Campsfield House should be congratulated in dealing professionally and sensitively with detainees who were going through what, for many, was a difficult and unhappy time. However, whatever the strengths of the centre, detention should not be used for children, victims of torture or anyone for unreasonable lengths of time. Further improvements to national processes are required to ensure this does not happen.

Nick Hardwick
HM Chief Inspector of Prisons

January 2015

Fact page

Task of the establishment

Campsfield House detains people subject to immigration control.

Location

Kidlington, Oxfordshire

Name of contractor

Mitie

Number held

209

Certified normal accommodation

276

Operational capacity

276

Last inspections

16–18 May 2011 (short follow-up)

5–9 October 2009 (full)

Brief history

Originally a young offender institution, the site became an immigration removal centre in 1993. At one time, it held both men and women. Since 1997, it has only held male detainees. The contract to manage Campsfield House on behalf of the Home Office was awarded to Mitie in May 2011.

Name of centre manager

Neil Aubeelack

Escort provider

Tascor

Short description of residential units

A combination of single, double and multi-occupancy rooms across three accommodation blocks, with communal shower and toilet facilities.

Health service commissioner and providers

Mitie (commissioner)

The Practice (provider)

Learning and skills providers

In-house

Independent Monitoring Board chair

Kate Beswick

About this inspection and report

- A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.
- A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- A3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy establishment. The four tests of a healthy establishment are:
- | | |
|--|--|
| Safety | that detainees are held in safety and with due regard to the insecurity of their position |
| Respect | that detainees are treated with respect for their human dignity and the circumstances of their detention |
| Activities | that the centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees |
| Preparation for removal and release | that detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their country of origin and be prepared for their release, transfer or removal. Detainees are able to retain or recover their property. |
- A4 Under each test, we make an assessment of outcomes for detainees and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the Home Office.
- **outcomes for detainees are good against this healthy establishment test.**
There is no evidence that outcomes for detainees are being adversely affected in any significant areas.
 - **outcomes for detainees are reasonably good against this healthy establishment test.**
There is evidence of adverse outcomes for detainees in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
 - **outcomes for detainees are not sufficiently good against this healthy establishment test.**
There is evidence that outcomes for detainees are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of detainees. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- **outcomes for detainees are poor against this healthy establishment test.** There is evidence that the outcomes for detainees are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for detainees. Immediate remedial action is required.

A5 Although this was a custodial establishment, we were mindful that detainees were not held because they had been charged with a criminal offence and had not been detained through normal judicial processes. In addition to our own independent *Expectations*, the inspection was conducted against the background of the Detention Centre Rules 2001, the statutory instrument that applies to the running of immigration removal centres. Rule 3 sets out the purpose of centres (now immigration removal centres) as being to provide for the secure but humane accommodation of detainees:

- in a relaxed regime
- with as much freedom of movement and association as possible consistent with maintaining a safe and secure environment
- to encourage and assist detainees to make the most productive use of their time
- respecting in particular their dignity and the right to individual expression.

A6 The statutory instrument also states that due recognition will be given at immigration removal centres to the need for awareness of:

- the particular anxieties to which detainees may be subject and
- the sensitivity that this will require, especially when handling issues of cultural diversity.

A7 Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **housekeeping points:** achievable within a matter of days, or at most weeks, through the issue of instructions or changing routines
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for detainees.

A8 Five key sources of evidence are used by inspectors: observation; detainee surveys; discussions with detainees; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

A9 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection, unless these have already been reviewed by a short follow-up inspection. This inspection follows a short follow-up inspection and does not report directly on progress made against the previous recommendations.

This report

- A10 This explanation of our approach is followed by a summary of our inspection findings against the four healthy establishment tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the conditions for and treatment of immigration detainees*. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection.
- A11 Details of the inspection team and the detainee population profile can be found in Appendices I and II respectively.
- A12 Findings from the survey of detainees and a detailed description of the survey methodology can be found in Appendix III of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹

¹ The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance.

Summary

Safety

S1 *Detainees were generally positive about escorts, but one had been detained for an unnecessarily long time as a result of the escort contractor's inefficiencies. The reception area was cramped and could not always cope with the number of detainees passing through. Early days support and induction were good. There was very little violence and support for those at risk of self-harm was good. Security was generally proportionate. Elements of the reward scheme were punitive. Force and separation were used infrequently. Detainees had access to basic legal advice but too many did not receive substantive legal representation. A child had been held at the centre, which was unacceptable. Detainees had good access to a conscientious onsite Home Office team. Rule 35 initial reports (which require medical practitioners in immigration removal centres to report on the case of any individual whom they believe may have been a victim of torture) were poor and the process did not provide vulnerable detainees with sufficient protection. **Outcomes for detainees were reasonably good against this healthy establishment test.***

- S2** Most detainees said escort staff treated them well. Escort vehicles were clean and regular comfort breaks were offered during transfers. Records accompanying detainees were completed well. Restraints were now only used when justified by an individual risk assessment. There were still some avoidable overnight centre-to-centre transfers. The failure of escort vehicles to arrive on time or at all had prolonged one man's detention by over two months.
- S3** Reception was cramped and risk assessment interviews were not held in private. Staff interaction with detainees was good, but telephone interpretation was not used in some cases when it should have been. All new arrivals received an appropriate health care screening within two hours. Appropriate first night welfare checks were undertaken. In our survey, far more detainees than elsewhere said they had received help with problems within their first 24 hours at the centre. Cleanliness in the short-stay unit was variable and bed linen and pillows were in poor condition. Short-stay unit staff dealt sensitively with a range of complex issues faced by detainees. In our survey, detainees were positive about the information they received after their arrival. Induction information was good and available in writing and on DVDs in a wide range of languages.
- S4** The centre was fundamentally a safe place and there was very little bullying or violence. In our survey, fewer detainees felt unsafe than at other centres. Investigations into incidents of bullying were reasonable and action taken to challenge perpetrators and support victims was appropriate.
- S5** There were few self-harm incidents. There had been one self-inflicted death since the previous inspection. A Prisons and Probation Ombudsman investigation made recommendations on emergency response procedures, which had all been achieved. Assessment, care in detention and teamwork (ACDT) case management documents for those at risk of suicide or self-harm demonstrated a good level of care and support. Telephone interpretation was used appropriately during reviews. Some detainees were subject to excessive monitoring that was not related to their care needs, as a result of the requirements of a Home Office detention services order on food and fluid refusal. Detainees confirmed that they felt well supported. Adult safeguarding arrangements at the centre were good but links with social services were underdeveloped.

- S6 In 2013, two detainees were released after social workers assessed them to be minors. A third child was held by mistake and should never have been detained. The Mitie safeguarding children's policy was up to date and comprehensive, but there was no named member of staff who took the lead on safeguarding children. The security department appropriately identified detainees who were a risk to children and passed this information to visits staff.
- S7 Physical security was generally proportionate and detainees could move around the centre freely until late at night. However, there was an unnecessary amount of razor wire. Security information was managed appropriately, although detainees' rooms were routinely searched, including with drug dogs, which was disproportionate.
- S8 Very few detainees were subject to the standard level of the rewards scheme. However, while detainees were offered some appropriate incentives, the scheme allowed for inappropriate punitive sanctions, such as being deprived of a single room or employment.
- S9 Staff rarely used force; only five incidents took place since the beginning of 2014. Control and restraint techniques had been used correctly but useful lessons were not always drawn.
- S10 Detainees were rarely separated; there had only been 10 instances in the previous six months. Documentation provided us with some assurance that separation was justified and generally used no longer than necessary. The separation unit was stark but in reasonably good condition. Mobile phones were inappropriately removed from separated detainees.
- S11 Too many detainees were without an immigration lawyer. Detainees sometimes had to wait for over two weeks to access legal advice surgeries, which was too long. A rule allowing only one appointment was also too restrictive. Legal information was easily available on computers but hard copies of legal material in the library were out of date and poorly presented.
- S12 Fourteen detainees had been held in detention for more than six months, the longest for 11 months. Some detention was prolonged as a result of inefficient casework processes. The onsite immigration team's induction interviews were reasonably good, but fellow detainees were sometimes used as interpreters, which was inappropriate. Bail information was not routinely handed out. Despite efforts by the onsite immigration team, too many progress reports were overdue at the start of our inspection. Far more detainees than at other centres said it was easy to see the onsite team when they needed to. Most rule 35 reports merely repeated detainees' accounts and did not provide clinical judgements. They were of little use to caseworkers as a result and the process as a whole failed adequately to safeguard the most vulnerable detainees.

Respect

S13 *Accommodation was reasonable but becoming increasingly cramped. Cleanliness was variable. Staff-detainee relationships were very good. The needs of diverse groups were generally well met. Faith provision was good. The few complaints that were made were dealt with appropriately. Health services were good. The food was good and the shop met detainees' needs. **Outcomes for detainees were good against this healthy establishment test.***

- S14 Rooms were generally clean but cramped. They had limited storage space and were not adequately furnished. There were few communal areas where detainees could sit together. Cleanliness was reasonable but varied across the centre. Items regularly went missing from the crowded laundry room and washing machines were often broken. Detainees had good

access to showers and toilets, but a number of them needed deep cleaning and some bed linen had become worn.

- S15 Staff interacted with detainees well and in our survey 90% said that most staff treated them with respect, more than the comparator. Detainees were consulted regularly at forums that were also well attended by staff.
- S16 Equality and diversity monitoring data did not allow for out of range patterns to be identified or addressed. However, respect for diversity was promoted well, and detainees said they felt different groups were treated equitably. Not all detainees who needed an interpreter were provided with one. Pictorial information was used well. Consultation with different nationality groups was reasonably good. Detainees' protected characteristics were not systematically identified on arrival and those with disabilities were not always recognised. Detainees whose disabilities had been recognised and older detainees received some good support, including multidisciplinary care plans where necessary. However, young adults' specific needs were not addressed.
- S17 In our survey more detainees were positive about faith provision and respect for their religious beliefs than at other centres. The chaplaincy was well integrated into the centre and religious facilities were good. Buddhist or Hindu detainees had no chaplain but this was being addressed.
- S18 Few detainees made a complaint and concerns were generally dealt with by unit staff. Complaints were investigated reasonably well but staff did not routinely have access to a full complaints breakdown.
- S19 Health care clinical governance arrangements were good. Detainees had very good access to primary care services. There were no waiting lists for GP clinics and a good range of specialist clinics and screening services was offered. Detainees had access to a pharmacist but some aspects of medicines administration needed to be addressed. Waiting times for the dentist were not excessive but detainees did not receive enough information about dental arrangements. Detainees could be seen promptly by mental health nurses, and a psychiatrist was also available. Reasonable support was provided for the small number of detainees with alcohol problems.
- S20 Food was generally good. However, the dining area was not big enough for the number of detainees using it and hygiene in the kitchen required improvement. Some detainees could take part in a weekly cultural cooking activity, but there was no cultural kitchen, allowing detainees to cook their own food. Provision for meals during Ramadan had been very good. The shop was easy to access and provided a variety of goods to meet the population's culturally diverse needs. Staff responded to detainees' requests for specific items.

Activities

S21 *The majority of detainees said they had enough to do while at the centre. Education provision was good. There was sufficient work for the population. The library provided a reasonable service. Fitness facilities were good and well used. **Outcomes for detainees were good against this healthy establishment test.***

S22 The provision of activities had generally improved and, in our survey, more than three-quarters of detainees said there was enough to do to fill their time at the centre. Detainees

had good access to a wide range of activities that were matched to their needs, including a regular schedule of events, competitions and classes. Activities were promoted well.

- S23 A good range of education was offered. Classes ran more frequently and for longer than previously. Learning modules were adapted to the needs of short-stay detainees and efforts had been made to ensure they were relevant to detainees once they were in destination countries. Short skills training workshops were a new feature of the arts and crafts provision. A wide range of e-learning packages was available and those with a higher skills level in English could take an appropriate qualification. A few externally accredited courses were offered and centre-based awards were used appropriately.
- S24 Detainees had good access to paid work, which was well promoted throughout the centre; they were also occasionally employed on short-term specialist projects. Most work was fairly mundane and did not develop skills that would have been useful in detainees' destination countries. Detainees could now access paid work more promptly than previously following the appointment of a coordinator for paid work. Information about vacancies was updated regularly.
- S25 The library and internet suite provided a welcoming environment. The library was well used and detainees had very good access to it during weekdays, evenings and weekends. The library stock did not sufficiently match the languages of the detainee population and the labelling and organisation of stock were variable.
- S26 Detainees had good fair access to a wide range of fitness facilities; there was a well-equipped fitness suite, a sports hall and an outdoor sports pitch. Detainees were assessed on arrival to ensure they could participate in physical activity. Sports staff were either trained or working towards an appropriate qualification.

Preparation for removal and release

S27 *Welfare support was good and detainees appreciated it. Visits arrangements were good. There was reasonable access to communications. Detainees who were released or transferred were not always given adequate notice or seen systematically by welfare staff. **Outcomes for detainees were good against this healthy establishment test.***

- S28 Welfare staff saw all detainees soon after their arrival. Welfare officers had good links with external welfare agencies such as Asylum Welcome and the British Red Cross, to whom they made regular referrals. Interpreters were used when they were needed, although screening interviews did not take place in private. Appropriate welfare plans were drawn up for most detainees, but not all of them were comprehensive. Detainees who needed to get their property back could use a courier service, although not all of them could afford it.
- S29 The visits room was small but detainees and visitors reported no difficulties in booking visits. Visitors were searched respectfully and staff supervision was discreet. Visitors were not allowed to hand over documents during visits, which was unreasonable.
- S30 Access to mobile phones was good but the signal quality was poor. Detainees had good access to fax machines and the internet, but some social media sites were unnecessarily blocked. There were plans to introduce Skype.

- S31 In our survey, more detainees than at other centres said that staff had helped them prepare for release. Welfare staff saw all detainees before their removal, but not all those being released or transferred. Those being removed did not systematically receive funds to reach their final destinations. The centre did not routinely provide detainees with information about services in destination countries. Not all detainees received written information explaining why there were being transferred or given sufficient notice, and some were told only hours before their move.

Main concern and recommendation

- S32 Concern: Most rule 35 reports prepared by medical practitioners repeated detainees' accounts without providing clinical judgements. They were of little use to caseworkers as a result and the process as a whole failed adequately to safeguard the most vulnerable detainees, including those who had been tortured.

Recommendation: The Home Office should ensure that the rule 35 process provides vulnerable detainees with adequate protection. The reports should include a clinical opinion wherever possible, caseworkers' responses should address detainees' vulnerability and torture survivors should not be detained.

Section 1. Safety

Escort vehicles and transfers

Expected outcomes:

Detainees travelling to and from the centre are treated safely, decently and efficiently.

I.1 *Detainees were positive about escort staff. Comfort breaks and refreshments were offered during transfer. Some detainees were unnecessarily moved between centres at night. Inefficiencies prolonged the detention of a detainee by two months.*

I.2 In our survey, more detainees (74%) than at other centres (63%) said escort staff had treated them well. Escort staff informed reception of the number of escorted detainees and their expected arrival time. The escort vans we inspected were clean and carried adequate refreshments. Detainees were offered regular comfort breaks. Records accompanying detainees were completed well and included risk information. Some detainees arrived late at night, including from other centres; the reasons for them being moved at night-time were not clearly recorded. Restraints for outside appointments were only used following appropriate individual risk assessments (see section on security).

I.3 One detainee's detention was prolonged by two months because of Home Office and contractor failings: two attempts to remove the detainee were cancelled due to a lack of escort staff; a third removal was cancelled after the detainee was brought to the airport too late to board an aircraft. The detainee was finally removed on the fourth attempt after spending an additional unnecessary two months in detention.

Recommendations

I.4 **Detainees should not be moved during the night unless there is an urgent operational justification.**

I.5 **Escort failures should not prolong the time detainees spend in detention.**

Early days in detention

Expected outcomes:

On arrival, detainees are treated with respect and care and are able to receive information about the centre in a language and format that they understand.

I.6 *Reception staff were polite and courteous. Risk assessments were not conducted in private because of a lack of space. First night welfare checks were carried out on all newly arrived detainees. Induction was effective.*

I.7 Reception was open 24 hours a day, seven days a week. The area was clean, had some good facilities and we found reception staff to be polite. In our survey, more detainees (81%) than at other centres (63%) said staff in reception treated them well. However, the reception

process was not always completed promptly and some detainees waited in reception for several hours.

- 1.8** The reception area was cramped and risk assessments for new arrivals were not held in private. Some detainees did not understand what they were being asked as telephone interpretation was not always used when it should have been. A nurse screened all detainees promptly. Reception staff gave detainees receipts when they withheld personal documents. Detainees could make a free telephone call but not in private. Newly arrived detainees received a hot meal from the kitchen during the day and microwave meals at other times.
- 1.9** New arrivals were held in the short-stay unit, usually for about two days, where they received good support. Staff regularly checked detainees' welfare during their first 24 hours. In our survey, 57% of detainees who had problems said staff helped them deal with them within 24 hours of arrival, more than the comparator of 37%.
- 1.10** Cleanliness in the short-stay unit was variable; bed linen and pillows were in poor condition, some rooms were dirty and showers poorly maintained. New arrivals received hygiene packs. Short-stay unit staff dealt with detainees who had complex issues sensitively.
- 1.11** A helpful eight-page induction booklet that all new arrivals in the short-stay unit received was only available in English. Induction was delivered via a DVD within 24 hours of a detainee's arrival. Available in a range of different languages, the DVD was comprehensive and well structured. It was supplemented by a second induction booklet, which had been translated into 20 languages. In our survey more detainees (72%) than the comparator (44%) said that they had received information about the support available on their arrival. After induction each detainee met the welfare officer who gave them information and introduced them to the chaplaincy.

Recommendations

- 1.12 Reception staff should conduct interviews and risk assessments in private, using professional interpretation when detainees are not fluent in English.**
- 1.13 All induction booklets should be available in a range of languages.**

Housekeeping point

- 1.14** Rooms in the short-stay unit should be thoroughly cleaned and prepared for new arrivals.

Bullying and violence reduction

Expected outcomes:

Everyone feels and is safe from bullying and victimisation. Detainees at risk or subject to victimisation are protected through active and fair systems known to staff and detainees.

- 1.15** *Most detainees felt safe. There were very few violent incidents and action to challenge perpetrators and support victims was appropriate.*

- I.16** Campsfield House was fundamentally a safe centre. In our survey, fewer respondents than the comparator said they felt unsafe (19% against 33%), and throughout the inspection detainees told us that the centre provided a safe environment. In the previous six months, levels of recorded violence had been low: there had been six assaults against detainees, one assault against staff, six incidents of bullying and no fights. None of the seven assaults had resulted in serious injury.
- I.17** Investigations into bullying incidents were adequate. The anti-bullying policy was up to date and informed by detainee exit safety surveys. The three stages of the policy ranged from challenging the perpetrator to removing them from association. Only stage one, where perpetrators had been challenged, had been used in the previous six months. Observations of detainees placed on an anti-bullying log were reasonable and staff challenged any further negative behaviour. Targets were not set to address the reasons for the log being opened and interventions were limited to mediation. Support arrangements for victims of bullying were good. Victims could be placed on the raised awareness register (RAR) so that staff could monitor their wellbeing; the support they received was reviewed regularly.
- I.18** The safer detention committee met every month and was chaired by the head of residence and welfare. The committee monitored progress against the violence reduction and suicide prevention strategies. Attendance at the meetings was good and included detainee representatives. A safer detention report covered a range of data on violent incidents. Coordination between the safer custody team and security department was not sufficiently strong (see the section on security).

Recommendation

- I.19 The anti-bullying policy should include targets and interventions for perpetrators of violence or bullying.**

Self-harm and suicide prevention

Expected outcomes:

The centre provides a safe and secure environment that reduces the risk of self-harm and suicide. Detainees are identified at an early stage and given the necessary support. All staff are aware of and alert to vulnerability issues, are appropriately trained and have access to proper equipment and support.

- I.20** The number of self-harm incidents was low. Recommendations following a death in custody had been implemented in full. Assessment, care in detention and teamwork (ACDT) case management documents for detainees at risk of suicide or self-harm suggested a high standard of care. Constant supervision was not always used appropriately. Buddies were used well to support those in crisis.
- I.21** There had been two incidents of self-harm in the six months before the inspection, neither of which had resulted in serious injury. A total of 43 ACDT case management documents had been opened in the six months before the inspection. Two detainees were on an ACDT during the inspection. Both said staff supported them well.
- I.22** The safer detention meeting (see section on bullying and violence reduction) included the involvement of Samaritans and buddy peer mentors. Data across a range of self-harm indicators were discussed but trends were not analysed to inform the centre's strategy.

- I.23** Following our last inspection, there had been one self-inflicted death. The centre had reviewed its contingency plans and put in place an action plan. The Prisons and Probation Ombudsman's recommendations on emergency response procedures had been implemented in full and were reviewed regularly.
- I.24** ACDT self-harm monitoring documents were of a very high standard and described a good level of care. Staff continually assessed detainees' risk levels and took action as appropriate. Care maps were comprehensive and regularly updated. Case reviews were multidisciplinary and professional interpreters were used when required. Staff knew the individuals in their care well.
- I.25** Detainees had been placed on constant supervision on 12 occasions in the six months before the inspection. In a number of cases, Home Office immigration enforcement managers had insisted that detainees be watched constantly in line with a detention services order on food and fluid refusal; this excessive level of monitoring did not relate to the care needs of vulnerable detainees and was therefore unjustified.
- I.26** Buddies were used well to support detainees in crisis. They had been trained by the welfare manager to identify detainees' vulnerabilities and potential triggers. Detainees we spoke to said buddies were supportive of those in crisis. Ninety per cent of staff were trained in self-harm and suicide prevention.

Recommendation

- I.27** **Detainees refusing food and fluid should be monitored only as frequently as their care needs dictate.**

Housekeeping point

- I.28** Data collated about self-harm should be analysed to inform the centre's strategy.

Safeguarding (protection of adults at risk)

Expected outcomes:

The centre promotes the welfare of all detainees, particularly adults at risk, and protects them from all kinds of harm and neglect.²

- I.29** *Support arrangements for detainees at risk were good. Links with adult social services were underdeveloped.*

- I.30** Health care staff identified new arrivals who were at risk. Multidisciplinary care plans were formulated and shared with all departments. Arrangements to support detainees at risk were good and included increased awareness through the RAR (see section on bullying and violence reduction). Staff knew which detainees were at risk and that they had a responsibility to protect them from harm. Contact had been made with the local safeguarding adults board but the centre did not attend meetings to develop processes.

² We define an adult at risk as a person aged 18 years or over, 'who is or may be in need of community care services by reason of mental or other disability, age or illness; and who is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation'. 'No secrets' definition (Department of Health 2000).

Recommendation

- I.31 The centre manager should develop safeguarding processes with the local safeguarding adults board.**

Safeguarding children

Expected outcomes:

The centre promotes the welfare of children and protects them from all kind of harm and neglect.

- I.32** *Since 2013 three children had been held in the centre, one of whom should never have been detained. The centre's safeguarding children policy was comprehensive but there was no named safeguarding children lead staff member. Detainees whose age was in dispute were appropriately cared for. Visits staff appropriately managed detainees who were a risk to children.*

- I.33** No children were held at the centre from the start of 2014 to the inspection. In 2013, eight detainees claimed to be under 18. Social workers assessed five of them to be adults and two to be children. The eighth detainee was a child who was detained by mistake.
- I.34** In December 2012, police in Lincolnshire picked up a young person. Lincolnshire Social Services assessed the young person as being an adult. At Campsfield House the young person's solicitor threatened the social services department with a judicial review over the age assessment. Social workers subsequently conducted a second assessment and concluded that the young person was 16 years old. The child was released after 62 days in detention.
- I.35** In May 2013, the Home Office held a child following an enforcement operation. An official authorised his detention stating it was 'appropriate' despite computer records clearly stating that he was 17 years old. The child was taken to Campsfield House where the Home Office's mistake became apparent shortly after arrival. After three days in detention, an officer from the arrest team collected the detainee and took him to the social services department in North Wales.
- I.36** The centre's up-to-date safeguarding children's policy was comprehensive and set out how detainees whose age was disputed should be treated. They were held in a single room close to staff areas. A 'raised awareness' plan was established and staff monitored the young person. Some staff had undertaken the Mitie safeguarding e-learning package but the centre could not provide us with exact figures. A member of staff was to attend training with Oxfordshire's local safeguarding children board after our inspection. There was no named safeguarding manager to coordinate the safeguarding strategy.
- I.37** The security department had identified three detainees who were a risk to children. This information was passed to staff in the visits hall who ensured they were monitored and separated from children.

Recommendation

- I.38 The Home Office should ensure that children who have been identified as such are not held in detention.**

Housekeeping point

- 1.39** The centre should have a named lead staff member for safeguarding children.

Security

Expected outcomes:

Detainees feel secure in an unoppressive environment.

1.40 *Detainees could move freely around the centre until late at night. There was an excessive amount of razor wire, creating an oppressive atmosphere in some areas. Security information was managed appropriately. Routine searches of detainees' rooms were unnecessary. Strip-searches and handcuffs were only used when justified.*

- 1.41** The physical security of the centre was generally proportionate. Detainees could move freely around the centre until 11pm and outside until dark. After this time they were locked in their units but not in their rooms, allowing them to move around at night. In three of our four group discussions with detainees, being able to move around freely was identified as one of the most positive aspects of the centre.
- 1.42** Some outside areas, such as the outdoor sports pitch, were marred by the prevalence of razor wire, which created an oppressive atmosphere and was unnecessary.
- 1.43** The security department was small, but it managed security information appropriately. In the six months before our inspection, staff submitted 103 security information reports. Information in the reports was processed promptly and appropriately. Managers reviewed the reports and implemented action where necessary.
- 1.44** Some elements of procedural security were disproportionate. Staff searched detainees' rooms once a month and all rooms were searched with drug dogs once every three months. These searches yielded few banned items and were intrusive.
- 1.45** Strip-searching was very rare. In the year before our inspection, one detainee was strip-searched as a result of concerns based appropriately on evidence about the possession of drugs. Staff had submitted nine drug-related security information reports on the detainee and during a routine search dogs indicated that the man was in possession of drugs. The search did not yield any drugs.
- 1.46** The use of handcuffs was proportionate to the risks posed. Staff carried out a risk assessment of each detainee before outside medical appointments. We reviewed paperwork in 70 cases. Handcuffs were used in less than a third of cases and, in all but one, they were removed during the examination. In many cases, handcuffs were removed as soon as the detainee entered a building. Paperwork justified the use of handcuffs.

Recommendation

- 1.47** **Detainees' rooms should only be searched where intelligence suggests it is necessary. Routine searching should cease.**

Housekeeping point

- I.48** The amount of razor wire should be reduced so it is proportionate to the risks posed by the population.

Rewards scheme

Expected outcomes:

Detainees understand the purpose of any rewards scheme and how to achieve incentives or rewards. Rewards schemes are not punitive.

- I.49** *The use of commendations to encourage detainees to take part in activities was good. For the small number of detainees who were on the standard level, the use of punitive sanctions was disproportionate.*

- I.50** Various schemes encouraged detainees to participate in activities, which included a talent show, sporting competitions and a 'keep your room tidy' competition. Detainees were aware of the schemes in place; they were promoted on notices and in the centre's monthly newsletter.

- I.51** The incentives scheme comprised three levels: induction, enhanced and standard levels. Information about the scheme was included during induction. The scheme was rarely used as a sanction to control behaviour and only two detainees in the previous six months were on the standard level. Sanctions for those on the standard level included depriving them of employment and access to a single room. These sanctions were punitive and inappropriate.

Recommendation

- I.52** The rewards scheme should not be punitive or based on sanctions.

The use of force and single separation

Expected outcomes:

Force is only used as a last resort and for legitimate reasons. Detainees are placed in the separation unit on proper authority, for security and safety reasons only, and are held on the unit for the shortest possible period.

- I.53** *Force and separation were rarely used. Control and restraint techniques were used correctly but de-escalation and dialogue were not always used to their full potential. Paperwork justified the use of separation. The separation unit was austere but in reasonably good condition. Mobile phones were unnecessarily removed from separated detainees.*

- I.54** Staff rarely used force; only five incidents had taken place since the beginning of 2014. Staff used approved control and restraint techniques correctly but in two cases reviewed force was used without sufficient de-escalation.

- I.55** In the second case, a detainee complied with his move to the separation unit until he reached the threshold of the unit where he stopped. Rather than guiding the detainee by his arms, full control and restraint locks were used risking injury to staff and the detainee.
- I.56** In contrast, in another case we found that de-escalation was used well when a detainee refused to move to the separation unit. An officer spoke to him calmly for over 15 minutes through a telephone interpreter, until he was persuaded to walk to the unit without the use of force.
- I.57** Detainees were rarely separated; there were only 10 instances in the six months before our inspection. Documentation assured us that separation was justified and generally used no longer than necessary. Separation was not used during our inspection but paperwork showed detainees received a reasonable regime. Cell doors were usually left unlocked and detainees could watch TV. The unit was austere but clean and consisted of three cells. Detainees exercised in the area immediately outside the unit. As a result of a Home Office instruction, mobile phones were routinely taken away from all separated detainees, which was inappropriate.

Recommendation

- I.58 De-escalation should be used to its fullest extent before force is employed.**

Housekeeping point

- I.59** Separated detainees should be allowed to keep their mobile phones.

Legal rights

Expected outcomes:

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

- I.60** *Too many detainees who required an immigration lawyer did not have one. Legal surgeries were oversubscribed. Detainees received some bail information and advice but more was required. Detainees could easily access legal information on library computers but hard copies of legal information were out of date and poorly organised.*

- I.61** In our survey 22% of detainees said they did not have a lawyer. Most detainees with lawyers said it was easy to contact them, but only about a third said they had received a visit from them, fewer than the comparator (47%) and compared with our previous full inspection (54%).
- I.62** Three solicitors' firms, funded by the Legal Aid Agency, ran legal advice surgeries in the centre twice a week. All detainees could receive half an hour's free legal advice. Waiting times for the surgeries were too long, sometimes over two weeks. To reduce waiting times, detainees were restricted to one visit, which was too restrictive. Asylum seekers who qualified for free legal aid could be taken on and substantively represented. All detainees should have received ongoing representation during bail proceedings but we were not assured this was happening.

- I.63** In our survey, 40% of detainees said it was easy to obtain bail information. While this figure was higher than the comparator (30%) not enough was being done to advise detainees of their bail rights. Bail information was available in the welfare office and on two computers dedicated to legal information in the library. The voluntary sector organisation, Bail for Immigration Detainees, ran a monthly surgery providing detainees with one-to-one advice; however, many staff and detainees were unaware of this service. Welfare staff tried to assist by running a weekly workshop to explain bail procedures to detainees, but they were not accredited by the Immigration Services Commissioner. In July 2014, 30 detainees were granted bail and 89 were temporarily admitted to the UK.
- I.64** Legal information was clearly displayed on the two library PCs and included links to solicitors' websites, Home Office immigration policies and other helpful sites. Key support groups' websites were also accessible. Detainees could write letters on PCs and print them in the library. Hard copies of legal text books were disorganised and many were out of date.

Recommendations

- I.65** **The Home Office should invite the Legal Aid Agency to investigate the reasons for detainees' poor access to representation in immigration removal centres.**
- I.66** **Only independent immigration advisors registered with the Immigration Services Commissioner should provide detainees with advice on bail matters.**

Housekeeping points

- I.67** Detainees and staff should be aware of the monthly Bail for Immigration Detainees workshops.
- I.68** Hard copies of legal text books in the library should be up to date and presented in an orderly manner.

Casework

Expected outcomes:

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

- I.69** *Some detainees were detained for unreasonable periods of time. Home Office caseworkers sometimes failed to act with reasonable diligence and expedition. Rule 35 reports (which require medical practitioners in immigration removal centres to report on the case of any individual whom they believe may have been a victim of torture) repeated detainees' accounts of torture without providing clinical judgements. Responses to rule 35 reports were timely but dismissive. The onsite Home Office team was diligent, visible and accessible. Induction interviews were reasonably good.*

- I.70** At the start of our inspection, 14 detainees had been held for more than six months, the longest for 11 months.

- 1.71** Offsite Home Office caseworkers did not always act with reasonable diligence and expedition³. Inefficient casework prolonged some detainees' detention. In September 2013, a man arrived at Gatwick airport on a false passport in breach of a deportation order. After being stopped at the border and detained, the man claimed asylum. The Home Office did not interview the detainee about his asylum claim until May 2014. By the time of our inspection a decision on his asylum claim had not been made and he had spent almost 11 months in detention.
- 1.72** In a second case, a man was detained following a criminal sentence in August 2013. In September 2013, the detainee wrote to the Home Office stating he feared returning to his home country. A senior caseworker incorrectly refused to treat this as an asylum claim because the detainee had, 'not provided any information regarding a specific risk or fear of return.' In November 2013, the detainee repeated his worries; this time his case was treated as an asylum claim. It took a further four months to make a decision on his claim. By the time of our inspection, he had spent almost a year in detention.
- 1.73** Some cases could not be concluded within a reasonable period of time. An Iranian national who had been held for almost 10 months refused to cooperate by applying for new travel documents. The Home Office's guidance on supplying Iranians with new travel documents stated: 'We have no established process at present and are unable to apply for emergency travel documents for enforced removals. Escorted removals are not possible at present.' There was little prospect of this case being resolved within a reasonable period and ongoing detention therefore appeared illegitimate. No attempt had been made to prosecute the detainee for non-compliance with the Home Office.
- 1.74** The Home Office contact management team held an induction with all new arrivals and liaised between detainees and their caseworkers around the country. The induction interviews we observed were reasonably good. Detainees were reminded of the reasons for their detention and updated on their case. The Home Office official was polite and reassuring and gave detainees a helpful information leaflet, but did not emphasise their bail rights or provide them with a bail application form. In our survey more detainees (55%) than at other centres (24%) said it was easy to see the onsite Home Office contact management team when required.
- 1.75** The conscientious onsite Home Office team quality checked monthly progress reports before passing them on to detainees. Despite monitoring and follow-up, 42 reports were overdue at the start of our inspection; this had been reduced to 22 at the end of the inspection. Reports varied – some noted actions taken since the previous report, while others were repetitive and showed little progress.
- 1.76** Rule 35 reports were all written by a doctor, contained body maps and were generally legible. We saw two examples of detainees being released following the submission of a rule 35 report. However, many merely repeated the detainee's account and failed to provide a medical opinion, for example, on the consistencies between scarring and alleged methods of torture. Caseworkers' responses were prompt, although sometimes dismissive, while others did not comply with Home Office policy. In two separate cases, a doctor stated that a detainee might have been the victim of torture but caseworkers maintained they should remain in detention stating that this would not impact on the detainee's health; the impact

³ The Home Office must follow the Hardial Singh principles when using their power to detain. The principles, reiterated by the Supreme Court in the case of *Walumba Lumba (Congo) v SSHD* [2011] UKSC 12, are:

- (i) The Secretary of State must intend to deport the person and can only use the power to detain for that purpose;
- (ii) The deportee may only be detained for a period that is reasonable in all the circumstances;
- (iii) If, before the expiry of the reasonable period, it becomes apparent that the Secretary of State will not be able to effect deportation within a reasonable period, he should not seek to exercise the power of detention;
- (iv) The Secretary of State should act with reasonable diligence and expedition to effect removal.

on their health was irrelevant as Home Office policy is not to detain torture survivors. In another case, a caseworker maintained that a person should remain in detention because he 'did not mention being tortured during your screening interview' (see main recommendation S32).

Recommendations

- I.77 Home Office caseworkers should act with diligence and expediency to conclude cases.**
- I.78 Detainees should only be detained when removal is likely within a reasonable period of time.**
- I.79 Monthly progress reports should contain meaningful information and detainees should receive them on time.**

Housekeeping point

- I.80 Onsite Home Office staff should provide detainees with detailed information on their bail rights and a bail application form.**

Section 2. Respect

Residential units

Expected outcomes:

Detainees live in a safe, clean and decent environment. Detainees are aware of the rules, routines and facilities of the unit.

- 2.1** *Accommodation was generally in good order, but detainees' rooms were cramped and not all communal areas were adequately furnished. Cleanliness across the centre was variable. Some laundry equipment needed to be repaired.*
- 2.2** Accommodation was generally clean and corridors in the residential units were brightly decorated and in good order. Individual rooms did not have sufficient storage space and were not adequately furnished. Too many detainees lived in cramped conditions, with four sharing accommodation designed for two. There were no comfortable communal spaces where detainees could socialise.
- 2.3** The number of showers and toilets was adequate and in our survey 96% of detainees said they could normally have a shower every day compared with 92% in other centres. However, some toilets and showers were very dirty and needed maintenance. Staff carried out daily checks on rooms, but bed linen was in poor condition and we saw soiled pillows and mattresses.
- 2.4** Detainees were allocated locker keys on arrival but did not have keys to their own rooms. Little information was posted on notice boards in the residential units, and the centre rules were not displayed in a wide enough range of languages.
- 2.5** Weekly consultation meetings were held with detainees to discuss issues, including the environment and facilities on the house blocks. Attendance was good and concerns were followed up, although some problems, such as the very hot water supply in the showers, took a long time to resolve.
- 2.6** Detainees wore their own clothing and visitors could bring in extra items. Staff issued kit bags containing underwear and socks to those who did not have sufficient clothing on their first night. Detainees washed their clothes in the self-service laundry. The laundry was not big enough for the population. During our inspection two washing machines did not work and detainees said this was a regular occurrence. Clothes regularly went missing from the laundry.
- 2.7** In our survey 71% of detainees said that they could normally gain access to their property compared with only 49% at other centres. Detainees were provided with clean bed linen and could obtain additional sheets.

Recommendations

- 2.8** **Rooms should not hold more people than they were designed for.**
- 2.9** **Each detainee should have a table and a space to store and hang clothes.**

- 2.10 Detainees should have access to comfortable communal areas.**
- 2.11 The laundry should be sufficient for the size of the population, and broken machines should be fixed promptly.**

Housekeeping points

- 2.12** Toilets and showers in all residential units should be deep cleaned.
- 2.13** The centre rules should be displayed in a wide range of languages within each house block.

Staff-detainee relationships

Expected outcomes:

Detainees are treated with respect by all staff, with proper regard for the uncertainty of their situation and their cultural backgrounds.

- 2.14** *Detainees reported that staff treated them well. We observed good staff-detainee interactions. Detainees were consulted in a meaningful way and on a regular basis.*

- 2.15** In our survey, far more detainees (90%) than the comparator (76%) and compared with our last full inspection (85%) said that most staff treated them with respect. Staff interacted well with detainees; many were aware of the complexities of their personal circumstances. They addressed detainees respectfully, using their first names and knocked before entering their rooms. Senior managers were visible around the centre and interacted professionally with detainees.
- 2.16** Although a personal officer scheme was not in place, detainee custody officers regularly updated detainees' files and were aware of important dates relating to their legal cases. Personal files were checked every day and the house block manager kept a log to ensure that all detainees were monitored effectively. In our survey, 81% of detainees said that they had a member of staff they could turn to for help if they had a problem, compared with only 64% in other centres.
- 2.17** At least six detainees attended the weekly detainee consultative committee with staff; information from the forum was available to all detainees in the centre.

Equality and diversity

Expected outcomes:

The centre demonstrates a clear and coordinated approach to eliminating discrimination, promoting equitable outcomes and fostering good relations, and ensures that no detainee is unfairly disadvantaged. This is underpinned by effective processes to identify and resolve any inequality. At a minimum, the distinct needs of each protected characteristic⁴ are recognised and addressed: these include race equality, nationality, religion, disability (including mental, physical and learning disabilities and difficulties), gender, transgender issues, sexual orientation and age.

2.18 *The centre promoted respect for diversity well and detainees felt different groups were treated equitably. Strategic management of diversity was under-developed. Not all protected groups were identified on arrival but individual detainees received some good support.*

Strategic management

- 2.19** Respect for diversity was promoted well, and detainees we spoke to and who responded to our survey said they felt different groups were treated equitably. A reasonably comprehensive policy described the centre's approach to equality and diversity, including provision for protected groups. A diversity management group met every month. Meetings were chaired by the centre manager or head of residence, but key centre staff did not always attend. A number of issues were raised repeatedly but not dealt with.
- 2.20** Buddies attended most meetings, although there were no detainee equality representatives. Photos of members of the diversity committee were displayed around the centre. Two race equality officers coordinated tasks, liaising with lead staff on age, disability, sexual orientation and religion. They had not received specific training for the role.
- 2.21** Monthly diversity reports provided basic data about each protected characteristic but did not allow for potential discrimination to be identified. For example, data on attendance at education provided figures for each nationality, but did not show if attendance was in line with what was expected in relation to the numbers in the population.
- 2.22** Complaints regarding discrimination incidents were referred to a race equality officer for investigation. Two had been received in the previous six months and had been investigated appropriately.
- 2.23** The manager of religious affairs delivered a rolling training programme on diversity, race relations and cultural awareness to all new staff, and the majority of existing staff.

Recommendation

- 2.24** **An equalities action plan and comprehensive monitoring data should be used to ensure the needs of all protected groups are recognised and addressed.**

⁴ The grounds upon which discrimination is unlawful (Equality and Human Rights Commission, 2010).

Protected characteristics

- 2.25** There was no evidence of tension between different nationality groups. Group meetings were held to support dialogue with specific nationality groups through a rolling monthly programme, which was widely advertised to detainees well in advance. It was not clear how issues raised at these meetings fed into diversity meetings or strategies.
- 2.26** Not all detainees who needed interpreters were provided with them at important and sensitive meetings, including those with Home Office staff and during reception. Records were maintained of the languages staff and detainees spoke. Little translated information was displayed around the centre, although signage made good use of pictorial information.
- 2.27** Monitoring of religious affiliation was good. The provision had been adapted according to detainees' needs, for example, a Jehovah's Witness detainee had received support from a religious visitor. Detainees we spoke to were happy that their religious dietary and lifestyle requirements were met, and were particularly positive about arrangements for Ramadan.
- 2.28** Health care staff identified detainees with disabilities during screening on arrival. The centre was unaware of any disabled detainees, although, in our survey, 6% considered themselves to have a disability. Detainees who needed one were provided with a multidisciplinary care plan, coordinated by health care staff and involving appropriate input from other centre staff. Records showed this approach had led to some good tailored support for detainees with health and mobility issues, including one man with epilepsy. Staff knew which detainees required help in the event of an emergency and personal and emergency evacuation plans were in place for three detainees.
- 2.29** All detainees over the age of 60 were assessed for a multidisciplinary care plan. At the time of our inspection, one detainee was over 70 and three were aged between 50 and 59. Nine detainees were aged between 18 and 21. The centre did not focus specifically on the needs of young adults, although work in this area was due to begin.
- 2.30** Detainees were not systematically asked about their sexual orientation. They could contact the gender and sexuality liaison officer for individual support via a confidential phone line or text service, although no detainees were currently receiving support.

Recommendations

- 2.31** Detainees should be provided with professional interpreters during meetings where accuracy and confidentiality are important.
- 2.32** Detainees with protected characteristics should be identified soon after their arrival.

Housekeeping point

- 2.33** Translated material should be displayed around the centre to assist detainees with daily activities.

Faith and religious activity

Expected outcomes:

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

2.34 *Faith provision was good and detainees were positive about it, although there was no Buddhist or Hindu chaplain. Facilities for religious activities were good and the chaplaincy was involved in the day-to-day life of the centre.*

2.35 In our survey, more detainees than at other centres were positive about respect for their religious beliefs (89% compared with 77%), and access to chaplains (75% against 55%). The chaplaincy, consisting of two full-time and two part-time staff, was well known in the centre and coordinated a good programme of religious and cultural festivals and events. There had been no Hindu or Buddhist chaplain for several months prior to our inspection, despite efforts to recruit them. Detainees had been offered alternative support.

2.36 A newly refurbished 'faith corridor' included a multi-faith room, chapel and a mosque with washing facilities, all of which were in good condition and were well used. The mosque was not large enough to accommodate the whole Muslim population. Friday prayers were held in the sports hall, which worked effectively. Detainees in the short-stay unit could not attend early morning prayers in the mosque, which was an unnecessary restriction.

2.37 Chaplains attended key management and diversity meetings and one was a trained assessment, care in detention and teamwork (ACDT) case management assessor. Good links were established with faith communities in the local area. Staff received no specific training in faith awareness, although cultural awareness training was available (see section on equality and diversity, paragraph 2.19).

Housekeeping point

2.38 Detainees from the short-stay unit should be able to attend early morning prayers in the main centre.

Complaints

Expected outcomes:

Effective complaints procedures are in place for detainees, which are easy to access and use and provide timely responses.

2.39 *The number of complaints was low. Complaints were generally managed well; however, managers did not receive a full complaints breakdown so they could not identify systemic issues.*

2.40 Only 15 complaints had been made in the previous six months, most of which were about the loss of or damage to property. Detainees said that most issues were dealt with by detainee custody officers (DCOs) in residential units without the need for a formal

complaint. About two-thirds of detainees who had complained felt their complaint was dealt with fairly, far more than at other centres (25%).

- 2.41** Secure complaints boxes were easily available, and copies of complaint forms in a wide variety of languages were in all boxes that we checked. However, in our survey fewer non-English speaking detainees said it was easy to obtain a complaint form.
- 2.42** Complaints were investigated reasonably well and staff responses were prompt and polite. A complaint relating to staff conduct had been appropriately referred to the Home Office's professional standards unit.
- 2.43** A full complaints breakdown was not routinely available to the centre manager to help identify patterns and trends. Home Office staff collected complaints and distributed them to the appropriate agency to address, but did not provide the centre with any information on detainee complaints against the Home Office, Tascor or other agencies. Potentially important management information was not therefore available to centre staff.

Recommendation

- 2.44** **A full breakdown of complaints made and issues raised should be available to centre managers, and discussed at management meetings.**

Housekeeping point

- 2.45** Detainees should be made aware of the availability of complaints forms in languages other than English.

Health services

Expected outcomes:

Health services assess and meet detainees' health needs while in detention and promote continuity of health and social care on release. Health services recognise the specific needs of detainees as displaced persons who may have experienced trauma. The standard of health service provided is equivalent to that which people expect to receive elsewhere in the community.

- 2.46** *Good clinical governance arrangements ensured that health care was of a high quality. Detainees were generally satisfied with the service provided. Waiting times for all clinics were short. Access to primary care services was very good. Pharmacy services had improved but some issues still needed addressing. Access to dental services remained satisfactory. Mental health care was sufficient to meet the primary needs of the population.*

Governance arrangements

- 2.47** Clinical governance arrangements were good. The centre manager was actively involved and regularly attended partnership meetings. The health care manager had good relations with the centre's management team. Detainees were generally positive about access to and the quality of health care but some were less aware of the range of services available.

- 2.48** A health needs assessment completed in March 2014 was used to inform the delivery and development of services. The health care manager enthusiastically led a team of workers and was respected by detainees as well as staff. She was supported by a lead nurse for primary care. The department was fully staffed and used a regular bank of nurses when required.
- 2.49** Rooms in the small health care centre on the ground floor were very clean and suited to the care and treatment of patients. A small waiting area provided detainees with adequate seating and a good range of information in a variety of languages.
- 2.50** Health services were available 24 hours a day and included GP cover seven days a week. However, only one member of staff was available at night which was not compliant with current healthcare guidelines. A good range of appropriate clinics was provided. Each nurse had an area of expertise, including one who specialised in care for older detainees. Services could have been enhanced by additional specialist training. Staff development was monitored by the health care manager and all staff had received up-to-date mandatory training. Clinical supervision was available on an informal basis but was not sufficiently documented.
- 2.51** A rota of three GPs provided clinics every day for which there were no waiting lists. Detainees who attended the special sick clinic (immediate health treatment without an appointment) and those who needed to be seen by a GP got an appointment the following day at the latest. The GP rota also covered the out-of-hours provision.
- 2.52** Clinical records were managed on paper and stored appropriately. Staff were informed of national clinical guidelines and changes in policies and procedures through notices and meetings. Health care staff appropriately cared for detainees who refused food. Emergency resuscitation equipment, including an automated external defibrillator (AED), was located in the health care centre and was well maintained. Emergency oxygen was also available on the accommodation blocks, but there were no other AEDs and none of the custody staff had received training in their use.
- 2.53** Health care issues were raised by detainees at a general forum; however, there was no dedicated health care forum. Health promotion was well developed and a large amount of information was available, including leaflets, material focusing on themed topics and presentations.
- 2.54** Very few complaints were made about health care; the complaints process was not sufficiently confidential, although responses were typed and managed promptly and sensitively.

Recommendations

- 2.55** **The provision of health care staff overnight should comply with current health care regulations.**
- 2.56** **Automated external defibrillators should be available to custody staff, who should be trained in their use.**
- 2.57** **Specialist training for health care staff should be available to enhance services.**

Housekeeping points

- 2.58** All clinical supervision should be documented.

- 2.59** Detainees should be able to raise health care issues at a dedicated forum.

Delivery of care (physical health)

- 2.60** Health care screening was carried out in the health care centre within two hours of new detainees arriving. Telephone interpretation services were used when required and much of the written information was available in a wide range of languages. The health care centre was open four times a day, providing detainees with very good access to nursing staff. Each nurse had been allocated a specialist area of care.
- 2.61** The lead GP had attended training on recognising alleged acts of trauma and torture and shared this knowledge with the health care team (but see section on casework). Detainees who were separated were assessed and seen by health care staff every day.
- 2.62** Screening programmes were available for those detained for long periods of time and continued treatment was provided where appropriate. Attendance at outside hospital appointments was well organised and supporting escort arrangements were good.

Pharmacy

- 2.63** Lloyds Pharmacy supplied medicines every day and arranged weekend collections if required. The pharmacist visited every two weeks and was accompanied by a technician or dispenser once a month. The pharmacist was responsible for conducting clinical and drug chart checks and helping to monitor stock; they would also see patients when asked to. Medicine administration was generally well organised.
- 2.64** Prescriptions were hand-written and half of them were supplied from stock; they were not generally seen by the pharmacist, which meant contraindications and medicine interactions could have been overlooked. Furthermore nurses had labelled items supplied from stock inadequately, which could have posed a risk to patients. A nurse was observed giving a detainee a dose of ibuprofen without referring to his notes for contraindications, which was potentially unsafe.
- 2.65** A sealed bag of medicines belonging to detainees had been brought in on their arrival. Staff said that they would only be reissued to a detainee on the authority of the doctor in an emergency. However, the specifics of the procedure were not clear.
- 2.66** Patients could obtain their medicines promptly and at appropriate times. Nurses could also provide detainees with essential medicines at other times. Records showed that some detainees did not attend the clinic to obtain their medicines. Reminder messages were sent by text message, but it was not evident that they had received sufficient counselling on the importance of taking their medicines.
- 2.67** Approximately 60% of prescriptions were in-possession medicines; however, the in-possession and risk assessment policies had passed their review date. Risk assessments were kept with detainees' medication notes and prescription charts. Risk assessments for prescribing medicines were only based on patient profiles and the risks associated with tradable medicines. They did not include the risks that might have been associated with some medicines for certain patients, unnecessarily excluding some from having their medicine in possession.

- 2.68** Although there were no controlled drugs requiring safe custody at the time of the inspection, the controlled drugs cabinet had a broken lock and was screwed rather than bolted to the wall. Storage facilities for controlled drugs were therefore inadequate.

Recommendations

- 2.69** The pharmacist should have prompt access to all prescribing information so that interactions and contraindications can be identified and avoided.
- 2.70** A robust policy should be in place for the use of medication that detainees bring into the prison.
- 2.71** The risk assessment and in-possession policies should be reviewed.

Housekeeping points

- 2.72** Nurses should not label medicines supplied from stock other than in exceptional circumstances.
- 2.73** Medical notes should be consulted for contraindications before a special sick medication is administered.
- 2.74** Additional efforts should be made to monitor and ensure that patients attend clinics to receive their prescribed medicines.
- 2.75** The controlled drugs cabinet should be lockable and fixed into place with the required rag bolts to comply with safe custody regulations.

Dentistry

- 2.76** The local dental access centre provided detainees experiencing pain with dental services. There were two appointments available each week and three detainees were waiting to be seen at the time of our inspection. Detainees did not have enough information about dental care arrangements. Waiting times could be up to three weeks. Detainees held for longer periods could obtain further treatment if required. Oral health was included in the programme of health promotion activities.

Housekeeping point

- 2.77** Detainees should be provided with more information about dental care arrangements.

Delivery of care (mental health)

- 2.78** Detainees had good access to mental health nurses who made up the greater proportion of the primary care team. There was an open referral system and patients were assessed within 24 hours; continuing care was provided when required. Access to a psychiatrist was equally swift as good relations had been established with the local mental health unit. Detainees could also see a counsellor who was available for two days a month and could accommodate up to three detainees on each occasion. This was sufficient to meet the demand.

- 2.79** Mental health nurses saw all detainees on ACDTs. Detainees with enduring mental health problems were not managed at the centre and transfers to secure mental health units consequently were extremely rare. A programme of mental health awareness had been arranged with an outside provider, which had delivered one session.

Substance misuse

Expected outcomes:

Detainees with drug and/or alcohol problems are identified at reception and receive effective treatment and support throughout their detention.

- 2.80** *There was little evidence of substance misuse and no dedicated services to care for users.*

- 2.81** Two GPs and three nurses had received specialist training in the care and management of substance users. Policies and protocols on the management of detainees with substance use problems had been developed, but the centre's main focus was on those with alcohol issues. A small number of detainees had been successfully managed through a programme of alcohol detoxification; however, their care during the first few nights was not carefully monitored. A large amount of information on support agencies was available for detainees but it all related to UK services.

Recommendation

- 2.82** **Detainees treated for alcohol detoxification should be adequately monitored in the initial days of their care.**

Housekeeping point

- 2.83** Information should be provided on substance misuse services in countries to which detainees may be removed.

Services

Expected outcomes:

Detainees are offered varied meals to meet their individual requirements and food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations. Detainees can purchase a suitable range of goods at reasonable prices to meet their diverse needs, and can do so safely.

- 2.84** *The food was good and detainees were positive about it. Consultation arrangements were in place. There was no cultural kitchen. The kitchen was not clean during our night visit. The shop provided a range of suitable goods to meet the diverse needs of the population.*

- 2.85** Detainees were provided with a range of meals, including options to meet religious, cultural and medical needs. In our survey, 57% of detainees said the food was good, which was far more than at other centres (28%).

- 2.86** Meals were served at appropriate times. The dining hall was not big enough to accommodate the population comfortably and there were long queues for meals. To alleviate this problem, detainees could pick up a quick meal consisting of a baguette, snack and drink. This had proven reasonably popular but the queues remained long. English language menus were accompanied by pictorial menus near the serving hatch.
- 2.87** Muslim detainees said that food during Ramadan was very good. Some detainees took part in weekly cultural cooking activities, but there was no specific cultural kitchen, allowing detainees to cook their own food and invite friends to eat with them.
- 2.88** During our night visit, the kitchen was dirty. The 24 detainees who worked there received a food hygiene induction and wore appropriate clothing. Detainees had access to a comments book in the dining hall. The catering manager regularly attended the detainee consultative committee to share ideas and provide feedback.
- 2.89** The shop provided a variety of goods and met the needs of the population. In our survey, 67% of detainees said that the shop sold a wide enough range of goods to meet their needs, more than the comparator of 47%.
- 2.90** Foreign currency could be exchanged in reception on arrival. Detainees could purchase items in the shop by presenting their centre ID card and having the item deducted from their account. Detainees had regular access to their personal financial records.
- 2.91** The shop was open seven days a week and detainees could purchase snacks and drinks throughout the day. Staff responded to detainees' requests for specific items and all prices were published. An efficient catalogue ordering system, offering a same or next day delivery service, allowed detainees to order authorised items that were not provided by the centre. Detainees could borrow DVDs and CDs from the shop at no charge.

Recommendation

- 2.92** **The catering manager should extend the cultural cooking activity and develop a cultural kitchen.**

Housekeeping point

- 2.93** The kitchen should be cleaned adequately at the end of each day.

Section 3. Activities

Expected outcomes:

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

3.1 *Detainees had good access to a varied range of purposeful activities, including recreational facilities, which were generally good. Most detainees said they had enough to do to fill their time. The centre offered a wide range of learning and skills programmes through timetabled classes. Classes were well attended and courses were often tailored to detainees' specific needs. Paid work opportunities were well promoted. Work was often mundane and part time, but detainees who wanted to work were given jobs soon after their arrival. The library and internet suite were popular and well used but the book stock did not meet the needs of the population sufficiently well. The sport and fitness facilities were good and a diverse range of activities were organised flexibly to meet detainees' needs.*

3.2 Detainees had good access to an appropriately varied range of purposeful activity. In our survey, 76% of respondents said that they had enough to do to occupy them compared with 55% in other centres and 48% at the previous full inspection. The centre offered a good range of learning and skills classes as well as a regular schedule of popular events and competitions. The two classrooms were centrally located, as were the barber shop, library and internet suite.

3.3 The range of learning opportunities had improved. The internet suite and information technology (IT) study centre had now been separated. The internet suite was popular; its 16 computers were used for email and research and access to it was reasonable.

3.4 Recreational activities included yoga, first aid courses and film evenings. There were two TV rooms where detainees could watch news channels from their country of origin or DVDs in their chosen language. They could also use the pool tables and play computer games and table football in two other day rooms, which were well used. Outside areas were clean and tidy and most had seating where detainees could spend time together. Activities were promoted well.

3.5 Induction to activities was prompt and reasonably effective. A short introduction to activities was included in the online induction. Most detainees could obtain information in their own language, but there were occasional lapses in checking how effective the induction was or whether detainees had understood the information. The learning and skills department ensured that all those interested in activities received clear and useful information on what was available.

Learning and skills

3.6 The centre provided education classes in English for speakers of other languages (ESOL), IT and arts and crafts. Within these three broad subject areas, a good, flexible range of learning opportunities was on offer, generally meeting the needs of the majority of detainees. Classes were now held for longer and more frequently. English and ESOL sessions were now available on four mornings each week, IT on five afternoons and arts and crafts on three mornings. However, classes were not available at weekends. Detainees could use the study centre on three evenings a week where they could work individually on their English or IT. Individual learning modules had been redesigned to make them shorter, more varied and

better suited to detainees' typical length of stay and wide-ranging needs. A Cambridge English award had been introduced for those with a higher skills level in English and there were also short skills training workshops in arts and crafts. A wider range of e-learning packages were now available in the IT classes.

- 3.7** Approximately 20 places were available in the two classrooms on most mornings and afternoons with a further 16 in the internet suite. Sessions were offered on a drop-in basis, which meant many more than 20 detainees attended them routinely. Attendance was good.
- 3.8** The quality of teaching, learning and assessment was generally good. Most was carried out through individual coaching and support so that detainees could work at a level and speed that suited their needs and abilities. Detainees made good progress. They developed a good range of arts and crafts skills, including tie dying, screen printing, mosaic work, card-making, sewing and beadwork, many of which could be used in small enterprises in detainees' country of origin. In IT classes, detainees developed skills in a range of computing applications, including word processing, Excel and art and design. In English classes, detainees practised and improved their skills in a range of appropriate and useful contexts. The centre had introduced internally certificated skills-based workshops, which it was planning to extend; internal certification was used well to acknowledge achievements, but there were still only a few opportunities to obtain external accreditation (see recommendation 3.16).
- 3.9** Sessions were well organised and had clear aims, which were effectively conveyed to those in the class. Some session planning focused too much on identifying activities for the session, rather than planning individual learning outcomes. Individual learning and progress were recorded well, but records were not used effectively enough to plan subsequent learning.
- 3.10** Staff were well qualified and experienced. They were enthusiastic and creative, helping detainees to find an activity that was useful, interesting and purposeful. Staff were adept at finding alternative online programmes to suit individual needs. For example, one detainee was following an online health and social care programme and another had studied basic electronics. Resources were generally satisfactory. Computing equipment was being upgraded and there was a new art room.
- 3.11** Self-assessment of learning and skills was good. The self-assessment report was comprehensive and focused on evaluating the provision; it had a realistic quality improvement plan, which was being regularly and effectively monitored. The arrangements for quality assurance and improvement were clear and well documented. Observations of teaching, learning and assessment had begun but were not yet well established. A head of learning, skills and regimes, a new post, had been appointed, along with an education coordinator. This had significantly improved formal support for teaching staff.

Paid work

- 3.12** Detainees had good access to paid work, which was well promoted throughout the centre. Seventy-four job roles, totalling 1265 hours of paid work per week, were offered. Short-term specialist projects also employed other detainees from time to time. Work was often mundane and part time. Opportunities included cleaning, kitchen and laundry work and well as classroom assistant and orderly roles; a production assistant position on the Campsfield House magazine was also available. Wages were paid weekly into detainees' wages accounts.
- 3.13** The centre operated a timely and transparent system for allocating work roles. Detainees were informed of the work available on induction. Risk assessments and checks were carried out promptly and recorded on a central management system that all appropriate staff could access. Detainees could start work in a temporary job soon after their arrival, while they

waited for their chosen job to become vacant. Information about vacancies was updated regularly and waiting lists were short. A recently appointed coordinator for paid work had improved the speed at which detainees could obtain paid work.

- 3.14** Detainees received basic training for their work roles using written ‘toolkit’ instructions, which included essential information about health and safety and food hygiene. Instructions were in English and those with little knowledge of the language might have found them difficult to understand. Detainees could not obtain formal accreditation for any training for work. Good regularly updated records were kept.

Recommendations

- 3.15** Internal training materials should be available in languages other than English.
- 3.16** The centre should offer detainees the opportunity to obtain external accreditation for education and training for work.

Library

- 3.17** The library and adjacent internet suite provided a welcoming and reasonably comfortable environment. The library was popular and detainees had very good access to the facility during weekdays and evenings and at weekends. Eighty four per cent of respondents to our survey said that it was easy or very easy to go to the library compared with 71% in other centres.
- 3.18** The library was stocked with books and dictionaries in a wide range of languages but many of the books did not match the languages of the detainee population. A fairly varied range of national daily newspapers in English and other languages and a small range of periodicals were delivered to the library, but they too were often not in the major languages of the majority of the population. Two computers in the library were specifically for access to up-to-date legal material, but some detainees did not know about this facility (see section on legal rights).
- 3.19** Staff in the library were drawn from a small group of officers; they were helpful and efficient but had to manage the library and monitor the internet suite at the same time. None had received specific assistant librarian training. Library stock was labelled and arranged in specific areas but some stock had become disorganised and in a number of cases labelling on shelves was missing. Information posters and leaflets were on display but they were uninspiring.

Recommendations

- 3.20** The library should regularly assess the most common languages in the centre and order stock accordingly.
- 3.21** Library staff should receive librarian training.

Housekeeping point

- 3.22** The organisation and labelling of library stock should be improved to enable detainees to access material more easily.

Sport and physical activity

- 3.23** Detainees had very good equitable access to a wide range of sports in a well-equipped fitness suite and a newly refurbished outside all-weather sports pitch. A large appropriately furnished indoor sports hall was also available.
- 3.24** A varied range of supervised sports and fitness activities was available on weekday mornings, afternoons and evenings and at weekends, including activities in the fitness suite, cricket, football, badminton, volleyball, circuit training and table tennis. The provision was popular and matched the needs and abilities of the majority of detainees. The programme of sports and fitness was promoted around the centre. Staff were flexible and could change provision at short notice to offer more popular activities. Detainees could use the sports hall for individual or recreational activities when it was not being used for supervised sports.
- 3.25** Detainees undertook sports and fitness activities in a safe and well maintained environment. Their suitability to take part in physical activity was assessed and recorded on arrival. Those who used the fitness suite were given a prompt and timely induction to the equipment, which was recorded on their identity cards. Staff checked the cards on each subsequent use to confirm the detainees had received an induction.
- 3.26** Sports staff were trained or were working towards a gym instructor training qualification at level 2. They interacted well with detainees. Any accidents or injuries were recorded and reported. Necessary remedial action was implemented and reported to fitness staff. Detainees had easy access to showering facilities in their residential blocks and were issued with appropriate sportswear if they did not have any of their own.
- 3.27** Arrangements to monitor the use of the sports facilities were good. Detainees' identity cards were scanned on entry. Information on use by faith and nationality was gathered and analysed and reported to the equality and diversity group meetings. Management and staff were aware of any groups who were not using the provision and made concerted efforts to provide activities that were suitable for them.

Section 4. Preparation for removal and release

Welfare

Expected outcomes:

Detainees are supported by welfare services during their time in detention and prepared for release, transfer or removal before leaving detention.

4.1 *Welfare provision was good and detainees were positive about the help they received.*

- 4.2** All new arrivals met with welfare staff. A screening interview identified detainees' concerns about property and family contact, whether they wanted to see a duty legal adviser, and if they wanted to participate in work or education. Concerns were followed up promptly and included arranging free five-minute calls to family overseas. Welfare staff also had good links with outside support agencies including Asylum Welcome and the British Red Cross and regular referrals were made. Telephone interpreting was used appropriately, but welfare interviews were not conducted in private. Detainees were not always told the purpose of the meeting or of the documents they were asked to sign, which risked undermining the support provided.
- 4.3** Staff drew up welfare plans and logs were opened to track actions taken, which often included efforts to retrieve property from prisons. Some plans we checked had information missing and it was not always clear whether issues had been followed up. More than 3050 welfare advice sessions had been logged in the six months prior to inspection, and 78 detainees had received more intensive support. Basic monitoring data was collated every month, but there was no data regarding the type of welfare query or effectiveness of the service provided.
- 4.4** It was positive that detainees who needed to retrieve property had access to a courier service, but not everyone could afford to pay for it. Staff told us these detainees were referred to Asylum Welcome for assistance, but this small voluntary organisation had no funds for this purpose.
- 4.5** There was no tailored training programme for welfare staff, although during the sessions we observed staff were knowledgeable and helpful.

Recommendations

- 4.6** **Detainees without the funds to retrieve their property should be given free assistance to do so.**
- 4.7** **The effectiveness of the welfare service should be assessed annually.**

Housekeeping point

- 4.8** Detainees should be told the purpose of the welfare interview, which should be conducted in private, and subsequent welfare plans should be completed in full.

Visits

Expected outcomes:

Detainees can easily maintain contact with the outside world. Visits take place in a clean, respectful and safe environment.

4.9 *Access to visits was good and visitors and most detainees were complimentary about the visits experience. Visitors were searched respectfully. Supervision in the visits room was unobtrusive. There were restrictions on visitors handing over documents to detainees during visits.*

4.10 Visits were available twice a day with sessions running from 2pm to 5pm and from 6pm to 9pm. Detainees could request an extended visit if space allowed and buy sandwiches from the centre shop for their visitors and themselves. Detainees or visitors could book a visit 72 hours in advance and reported no problems with the system. Asylum Welcome visited detainees who received no visits from family or friends. Visitors appreciated a free bus service from Oxford train station, which the centre provided.

4.11 Visitors and most detainees we spoke to were complimentary about the visits experience. In our survey, 89% of respondents said visits staff treated them well against the comparator of 73%. We observed visitors being treated with respect and subject to minimal searching. However, they were not allowed to hand documents over to detainees during visits, which was unreasonable; they also had to wear distinguishing wrist bands. The centre sent a text message to detainees who were not at the visits room on time but this method was unreliable as the mobile phone signal around the centre was often poor (see section on communications).

4.12 The visits room was clean and bright; although small, it was adequate. Ten tables and an unsupervised play area for children were available. There was an outside space with picnic tables. The atmosphere in the visits room was relaxed, there were no unreasonable restrictions on contact and staff supervision was unobtrusive. A visitors' comments book was available so possible improvements could be identified.

Housekeeping points

4.13 Detainees should be allowed to have documents handed to them during visits.

4.14 Visitors should not have to wear identifying wrist bands.

Communications

Expected outcomes:

Detainees can regularly maintain contact with the outside world using a full range of communications media.

4.15 *Detainees had good access to telephones, fax machines, email and the internet, but no access to social networking sites. The planned trial of Skype was a welcome initiative.*

- 4.16** Access to telephones was good. Detainees could retain their own mobile phone if it had no camera or internet access; alternatively, the centre provided them with a phone on loan. In our survey, 67% of respondents said it was easy to use the phone, the same as the comparator. However, throughout the inspection detainees said that the mobile phone signal was poor, particularly in accommodation areas (see section on visits, paragraph 4.11). The centre management was aware of the problem and had plans to install signal boosters around the site. Detainees had good access to unit office and welfare department telephones and fax machines. The shop stocked a good selection of mobile network top up cards and sold discounted cards for cheaper international mobile calls. Those who had no money could receive a free letter and a 10-minute telephone call every week.
- 4.17** A suite of computers was available from 9am to 10pm, seven days a week. The suite was usually busy and detainees had to pre-book a one-hour session. However, this was flexible and, if space allowed, longer sessions were available. Detainees said access was good. Internet and email availability was good and detainees could print out attachments in the IT suite. The centre appropriately vetted internet sites that detainees wished to visit, and a wide range of legal websites and foreign language news sites were accessible. However, social networking sites which could have enhanced contact, continued to be routinely blocked. The centre was about to trial the use of Skype to improve contact between detainees and their families, which was a welcome initiative.

Recommendation

- 4.18** **Detainees should only be prevented from accessing social networking sites on the basis of an individual risk assessment.**

Removal and release

Expected outcomes:

Detainees leaving detention are prepared for their release, transfer, or removal.

Detainees are treated sensitively and humanely and are able to retain or recover their property.

- 4.19** *Welfare staff saw detainees who were being removed. Those being transferred were not always given adequate notice or seen systematically. Not all those being removed had adequate funds to reach their destination or information about support services.*

- 4.20** In the six months before our inspection, 842 detainees had left the centre, 36% had been removed, 34% released and 29% transferred to another immigration removal centre. In our survey, more detainees (30%) than at other centres (14%) said that staff had helped them prepare for release.
- 4.21** Detainees being removed on escorted charter flights were accommodated in the short-stay unit for up to 48 hours before leaving the centre. However, they could move freely to and from the main centre at most times. The Home Office onsite team notified welfare staff every day of those served with removal directions. Staff then held a pre-removal meeting with detainees to discuss any practical issues. However, detainees' anxieties about their ability to reach their final destination were not always effectively addressed. One man we met had no funds to travel the 300 miles from the airport to his home town. Welfare staff did not systematically provide detainees with information about services in destination

countries, although they told us they would provide individual detainees with information on request.

- 4.22** Detainees being released or transferred were not systematically seen by welfare staff. Not all detainees being transferred received written information about the reasons for this, and several we met were informed only hours in advance, causing unnecessary stress and anxiety. One man was informed of his transfer only two hours beforehand, but had a pre-booked visit with his wife. The transfer was appropriately postponed to allow the visit to take place, but this meant the journeys of three other detainees travelling in the same vehicle were delayed as a result.
- 4.23** Reception staff provided those being released with a rail warrant for travel to their destination, and the centre visitors' bus took them to the station. Staff told us they would print out journey details and train times if necessary but no other written information was available.
- 4.24** All detainees leaving the centre were provided with a letter outlining any care and treatment that had been provided during their detention. Detainees receiving medication were given an appropriate supply on discharge.
- 4.25** The discharge waiting area was cramped and had limited seating. Escorts searched detainees being transferred or removed in the main waiting area, offering little privacy.

Recommendations

- 4.26 Detainees being removed should receive information about appropriate support services in destination countries and given the means to reach their final destinations where necessary.**
- 4.27 Detainees being released or transferred should be seen by welfare staff before leaving the centre. Those being transferred should receive reasonable notice and a written account of the reasons for their transfer in a language they can understand.**

Housekeeping point

- 4.28** Escorts should search detainees in a private area.

Section 5. Summary of recommendations and housekeeping points

The following is a listing of repeated and new recommendations, housekeeping points and examples of good practice included in this report. The reference numbers at the end of each refer to the paragraph location in the main report, and in the previous report where recommendations have been repeated.

Main recommendation

To the Home Office

- 5.1** The Home Office should ensure that the rule 35 process provides vulnerable detainees with adequate protection. The reports should include a clinical opinion wherever possible, caseworkers' responses should address detainees' vulnerability and torture survivors should not be detained. (S32)

Recommendations

To the Home Office

Safeguarding children

- 5.2** The Home Office should ensure that children who have been identified as such are not held in detention. (1.38)

Legal rights

- 5.3** The Home Office should invite the Legal Aid Agency to investigate the reasons for detainees' poor access to representation in immigration removal centres. (1.65)

Casework

- 5.4** Home Office caseworkers should act with diligence and expediency to conclude cases. (1.77)
- 5.5** Detainees should only be detained when removal is likely within a reasonable period of time. (1.78)
- 5.6** Monthly progress reports should contain meaningful information and detainees should receive them on time. (1.79)

Complaints

- 5.7** A full breakdown of complaints made and issues raised should be available to centre managers, and discussed at management meetings. (2.44)

Recommendations

To the Home Office and escort contractors

Escort vehicles and transfers

- 5.8** Detainees should not be moved during the night unless there is an urgent operational justification. (1.4)
- 5.9** Escort failures should not prolong the time detainees spend in detention. (1.5)

Recommendations

To the centre manager

Early days in detention

- 5.10** Reception staff should conduct interviews and risk assessments in private, using professional interpretation when detainees are not fluent in English. (1.12)
- 5.11** All induction booklets should be available in a range of languages. (1.13)

Bullying and violence reduction

- 5.12** The anti-bullying strategy should include targets and interventions for perpetrators of violence or bullying. (1.19)

Self-harm and suicide prevention

- 5.13** Detainees refusing food and fluid should be monitored only as frequently as their care needs dictate. (1.27)

Safeguarding (protection of adults at risk)

- 5.14** The centre manager should develop safeguarding processes with the local safeguarding adults board. (1.31)

Security

- 5.15** Detainees' rooms should only be searched where intelligence suggests it is necessary. Routine searching should cease. (1.47)

Rewards scheme

- 5.16** The rewards scheme should not be punitive or based on sanctions. (1.52)

The use of force and single separation

- 5.17** De-escalation should be used to its fullest extent before force is employed. (1.58)

Legal rights

- 5.18** Only independent immigration advisors registered with the Immigration Services Commissioner should provide detainees with advice on bail matters. (1.66)

Residential units

- 5.19** Rooms should not hold more people than they were designed for. (2.8)
- 5.20** Each detainee should have a table and a space to store and hang clothes. (2.9)
- 5.21** Detainees should have access to comfortable communal areas. (2.10)
- 5.22** The laundry should be sufficient for the size of the population, and broken machines should be fixed promptly. (2.11)

Equality and diversity

- 5.23** An equalities action plan and comprehensive monitoring data should be used to ensure the needs of all protected groups are recognised and addressed. (2.24)
- 5.24** Detainees should be provided with professional interpreters during meetings where accuracy and confidentiality are important. (2.31)
- 5.25** Detainees with protected characteristics should be identified soon after their arrival. (2.32)

Health services

- 5.26** The provision of health care staff overnight should comply with current health care regulations. (2.55)
- 5.27** Automated external defibrillators should be available to custody staff, who should be trained in their use. (2.56)
- 5.28** Specialist training for health care staff should be available to enhance services. (2.57)
- 5.29** The pharmacist should have prompt access to all prescribing information so that interactions and contraindications can be identified and avoided. (2.69)
- 5.30** A robust policy should be in place for the use of medication that detainees bring into the prison. (2.70)
- 5.31** The risk assessment and in-possession policies should be reviewed. (2.71)

Substance misuse

- 5.32** Detainees treated for alcohol detoxification should be adequately monitored in the initial days of their care. (2.82)

Services

- 5.33** The catering manager should extend the cultural cooking activity and develop a cultural kitchen. (2.92)

Activities

- 5.34** Internal training materials should be available in languages other than English. (3.15)

- 5.35** The centre should offer detainees the opportunity to obtain external accreditation for education and training for work. (3.16)
- 5.36** The library should regularly assess the most common languages in the centre and order stock accordingly. (3.20)
- 5.37** Library staff should receive librarian training. (3.21)

Welfare

- 5.38** Detainees without the funds to retrieve their property should be given free assistance to do so. (4.6)
- 5.39** The effectiveness of the welfare service should be assessed annually. (4.7)

Communications

- 5.40** Detainees should only be prevented from accessing social networking sites on the basis of an individual risk assessment. (4.18)

Removal and release

- 5.41** Detainees being removed should receive information about appropriate support services in destination countries and given the means to reach their final destinations where necessary. (4.26)
- 5.42** Detainees being released or transferred should be seen by welfare staff before leaving the centre. Those being transferred should receive reasonable notice and a written account of the reasons for their transfer in a language they can understand. (4.27)

Housekeeping points

Early days in detention

- 5.43** Rooms in the short-stay unit should be thoroughly cleaned and prepared for new arrivals. (1.14)

Self-harm and suicide prevention

- 5.44** Data collated about self-harm should be analysed to inform the centre's strategy. (1.28)

Safeguarding children

- 5.45** The centre should have a named lead staff member for safeguarding children. (1.39)

Security

- 5.46** The amount of razor wire should be reduced so it is proportionate to the risks posed by the population. (1.48)

The use of force and single separation

- 5.47** Separated detainees should be allowed to keep their mobile phones. (1.59)

Legal rights

- 5.48** Detainees and staff should be aware of the monthly Bail for Immigration Detainees workshops. (1.67)
- 5.49** Hard copies of legal text books in the library should be up to date and presented in an orderly manner. (1.68)

Casework

- 5.50** Onsite Home Office staff should provide detainees with detailed information on their bail rights and a bail application form. (1.80)

Residential units

- 5.51** Toilets and showers in all residential units should be deep cleaned. (2.12)
- 5.52** The centre rules should be displayed in a wide range of languages within each house block. (2.13)

Equality and diversity

- 5.53** Translated material should be displayed around the centre to assist detainees with daily activities. (2.33)

Faith and religious activity

- 5.54** Detainees from the short-stay unit should be able to attend early morning prayers in the main centre. (2.38)

Complaints

- 5.55** Detainees should be made aware of the availability of complaints forms in languages other than English. (2.45)

Health services

- 5.56** All clinical supervision should be documented. (2.58)
- 5.57** Detainees should be able to raise health care issues at a dedicated forum. (2.59)
- 5.58** Nurses should not label medicines supplied from stock other than in exceptional circumstances. (2.72)
- 5.59** Medical notes should be consulted for contraindications before a special sick medication is administered. (2.73)
- 5.60** Additional efforts should be made to monitor and ensure that patients attend clinics to receive their prescribed medicines. (2.74)

5.61 The controlled drugs cabinet should be lockable and fixed into place with the required rag bolts to comply with safe custody regulations. (2.75)

5.62 Detainees should be provided with more information about dental care arrangements. (2.77)

Substance misuse

5.63 Information should be provided on substance misuse services in countries to which detainees may be removed. (2.83)

Services

5.64 The kitchen should be cleaned adequately at the end of each day. (2.93)

Activities

5.65 The organisation and labelling of library stock should be improved to enable detainees to access material more easily. (3.22)

Welfare

5.66 Detainees should be told the purpose of the welfare interview, which should be conducted in private, and subsequent welfare plans should be completed in full. (4.8)

Visits

5.67 Detainees should be allowed to have documents handed to them during visits. (4.13)

5.68 Visitors should not have to wear identifying wrist bands. (4.14)

Removal and release

5.69 Escorts should search detainees in a private area. (4.28)

Section 6. Appendices

Appendix I: Inspection team

Nick Hardwick	Chief inspector
Hindpal Singh Bhui	Team leader
Colin Carroll	Inspector
Sarah Cutler	Inspector
Fionnuala Gordon	Inspector
Deri Hughes-Roberts	Inspector
Andy Lund	Inspector
Rachel Murray	Research officer
Joe Simmonds	Research officer
Njilan Morris-Jarra	Research trainee

Specialist inspectors

Mick Bowen	Health services inspector
Karena Reed	Care Quality Commission
Linda Truscott	Ofsted

Appendix II: Detainee population profile

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

Population breakdown by:

(i) Age	No. of men	No. of women	No. of children	%
Under 1 year	0	0	0	
1 to 6 years	0	0	0	
7 to 11 years	0	0	0	
12 to 16 years	0	0	0	
16 to 17 years	0	0	0	
18 years to 21 years	9	0	0	4.3
22 years to 29 years	104	0	0	49.8
30 years to 39 years	71	0	0	34
40 years to 49 years	21	0	0	10
50 years to 59 years	3	0	0	1.4
60 years to 69 years	0	0	0	
70 or over	1	0	0	0.5
Total	209	0	0	100

(ii) Nationality Please add further categories if necessary	No. of men	No. of women	No. of children	%
Afghanistan	15	0	0	7.25
Albania	9	0	0	4.35
Algeria	3	0	0	1.45
Angola	0	0	0	0
Bangladesh	24	0	0	11.59
Belarus	0	0	0	0
Cameroon	3	0	0	1.45
China	6	0	0	2.90
Colombia	0	0	0	0
Congo (Brazzaville)	0	0	0	0
Congo Democratic Republic (Zaire)	0	0	0	0
Ecuador	0	0	0	0
Estonia	0	0	0	0
Georgia	0	0	0	0
Ghana	2	0	0	0.97
India	37	0	0	17.87
Iran	2	0	0	0.97
Iraq	2	0	0	0.97
Ivory Coast	0	0	0	0
Jamaica	2	0	0	0.97
Kenya	0	0	0	0
Kosovo	0	0	0	0
Latvia	1	0	0	0.48
Liberia	0	0	0	0
Lithuania	2	0	0	0.97
Malaysia	0	0	0	0
Moldova	0	0	0	0

Nigeria	9	0	0	4.35
Pakistan	46	0	0	22
Russia	1	0	0	0.48
Sierra Leone	1	0	0	0.48
Sri Lanka	7	0	0	3.38
Trinidad and Tobago	1	0	0	0.48
Turkey	2	0	0	0.97
Ukraine	0	0	0	0
Vietnam	3	0	0	1.45
Yugoslavia (FRY)	0	0	0	0
Zambia	0	0	0	0
Zimbabwe	0	0	0	0
Sudan	5	0	0	2.42
Eritrea	5	0	0	2.42
Portugal	4	0	0	1.45
Nepal	2	0	0	0.97
Morocco	1	0	0	0.48
Mexico	1	0	0	0.48
Guinea	1	0	0	0.48
Egypt	1	0	0	0.48
Barbados	1	0	0	0.48
Mauritius	1	0	0	0.48
Philippines	1	0	0	0.48
Romania	1	0	0	0.48
Somalia	1	0	0	0.48
Syria	1	0	0	0.48
South Africa	1	0	0	0.48
Spain	1	0	0	0.48
Libya	1	0	0	0.48
Iran	1	0	0	0.48
Macedonia	1	0	0	0.48
Total	209	0	0	100

(iv) Religion/belief Please add further categories if necessary	No. of men	No. of women	No. of children	%
Buddhist	4	0	0	1.91
Roman Catholic	6	0	0	2.87
Orthodox	4	0	0	1.91
Other Christian religion	28	0	0	13.4
Hindu	22	0	0	10.52
Muslim	116	0	0	55.5
Sikh	17	0	0	8.13
Agnostic/atheist	0	0	0	
Unknown	11	0	0	5.26
Jehovah Witness	1	0	0	0.48
Total	209	0	0	100

(v) Length of time in detention in this centre	No. of men	No. of women	No. of children	%
Less than 1 week	45	0	0	21.53
1 to 2 weeks	38	0	0	18.18
2 to 4 weeks	36	0	0	17.22
1 to 2 months	79	0	0	37.8

2 to 4 months	3	0	0	1.44
4 to 6 months	5	0	0	2.40
6 to 8 months	3	0	0	1.44
8 to 10 months	0	0	0	
More than 10 months (please note the longest length of time)	0	0	0	
Total	209	0	0	100

(vi) Detainees' last location before detention in this centre	No. of men	No. of women	No. of children	%
Community	12	0	0	5.74
Another IRC	57	0	0	27.27
A short-term holding facility (eg at a port or reporting centre)	42	0	0	20.09
Police station	76	0	0	36.36
Prison	22	0	0	10.52
Total	209	0	0	100

Appendix III: Summary of detainee survey responses

Detainee survey methodology

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

Sampling

The questionnaire was offered to all detainees.

Distributing and collecting questionnaires

Every attempt was made to distribute the questionnaires to respondents individually. This gave researchers an opportunity to explain the purpose of the survey and to answer respondents' questions. We also stressed the voluntary nature of the survey and provided assurances about confidentiality and the independence of the Inspectorate. This information is also provided in writing on the front cover of the questionnaire.

Our questionnaire is available in a number of different languages and via a telephone translation service for respondents who do not read English. Respondents with literacy difficulties were offered the option of an interview.

Respondents were not asked to put their names on their questionnaire. In order to ensure confidentiality, respondents were asked to seal their completed questionnaire in the envelope provided and either hand it back to a member of the research team at a specified time or leave it in their room for collection.

Refusals were noted and no attempts were made to replace them.

Survey response

At the time of the survey on 11 August 2014 the detainee population at Campsfield House immigration removal centre (IRC) was 226. Questionnaires were distributed to all 226 detainees.

We received a total of 116 completed questionnaires, a response rate of 51%. No questionnaires completed via interview. Twenty-four respondents refused to complete a questionnaire, 83 questionnaires were not returned and three were returned blank.

Returned language	Number of completed survey returns
English	77
Albanian	6
Arabic	6
Urdu	5
Vietnamese	4
Punjabi	3
Bengali	2
French	2
Pashtu	2
Tamil	2
Turkish	2
Chinese	1
Farsi	1
Kurdish Sorani	1
Portuguese	1
Russian	1
Total	116

Presentation of survey results and analyses

Over the following pages we present the survey results for Campsfield House IRC.

First a full breakdown of responses is provided for each question. In this full breakdown all percentages, including those for filtered questions, refer to the full sample. Percentages have been rounded and therefore may not add up to 100%.

We also present a number of comparative analyses. In all the comparative analyses that follow, statistically significant⁵ differences are indicated by shading. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading. If the difference is not statistically significant there is no shading. Orange shading has been used to show a statistically significant difference in prisoners' background details.

Filtered questions are clearly indented and preceded by an explanation of how the filter has been applied. Percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the entire sample. All missing responses have been excluded from analyses.

Percentages shown in the full breakdown may differ slightly from those shown in the comparative analyses. This is because the data has been weighted to enable valid statistical comparison between establishments.

The following comparative analyses are presented:

- The current survey responses from Campsfield House in 2014 compared with responses from detainees surveyed in all other detention centres. This comparator is based on all responses from detainee surveys carried out in nine detention centres since April 2010.
- The current survey responses from Campsfield House in 2014 compared with the responses of detainees surveyed at Campsfield House in 2009.
- A comparison within the 2014 survey between the responses of non English speaking detainees and English speaking detainees.

⁵ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. Our significance level is set at 0.05 which means that there is only a 5% likelihood that the difference is due to chance.

Survey summary

Section I: About you

Q1	Are you male or female?	
	Male	113 (98%)
	Female.....	2 (2%)
Q2	What is your age?	
	Under 18	0 (0%)
	18-21	9 (8%)
	22-29	56 (49%)
	30-39	35 (30%)
	40-49	12 (10%)
	50-59	3 (3%)
	60-69	0 (0%)
	70 or over	0 (0%)
Q3	What region are you from? (Please tick only one)	
	Africa	21 (19%)
	North America.....	0 (0%)
	South America	1 (1%)
	Indian subcontinent (India, Pakistan, Bangladesh, Sri Lanka)	56 (50%)
	China	1 (1%)
	Other Asia.....	11 (10%)
	Caribbean	3 (3%)
	Europe.....	14 (13%)
	Middle East	5 (4%)
Q4	Do you understand spoken English?	
	Yes	92 (81%)
	No.....	22 (19%)
Q5	Do you understand written English?	
	Yes	86 (77%)
	No.....	26 (23%)
Q6	What would you classify, if any, as your religious group?	
	None.....	4 (3%)
	Church of England	4 (3%)
	Catholic	7 (6%)
	Protestant.....	3 (3%)
	Other Christian denomination	8 (7%)
	Buddhist	6 (5%)
	Hindu	19 (17%)
	Jewish	0 (0%)
	Muslim	50 (43%)
	Sikh.....	14 (12%)
Q7	Do you have a disability?	
	Yes	6 (6%)
	No.....	101 (94%)

Section 2: Immigration detention

Q8	When being detained, were you told the reasons why in a language you could understand?	
	Yes	89 (79%)
	No	23 (21%)
Q9	Including this centre, how many places have you been held in as an immigration detainee since being detained (including police stations, airport detention rooms, removal centres, and prison following end of sentence)?	
	One to two	80 (74%)
	Three to five	23 (21%)
	Six or more	5 (5%)
Q10	How long have you been detained in this centre?	
	Less than 1 week	16 (14%)
	More than 1 week less than 1 month	51 (45%)
	More than 1 month less than 3 months	28 (25%)
	More than 3 months less than 6 months	6 (5%)
	More than 6 months less than 9 months	8 (7%)
	More than 9 months less than 12 months	3 (3%)
	More than 12 months	1 (1%)

Section 3: Transfers and escorts

Q11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	
	Yes	66 (57%)
	No	35 (30%)
	Do not remember	14 (12%)
Q12	How long did you spend in the escort vehicle to get to this centre on your most recent journey?	
	Less than one hour	8 (7%)
	One to two hours	53 (46%)
	Two to four hours	38 (33%)
	More than four hours	13 (11%)
	Do not remember	4 (3%)
Q13	How did you feel you were treated by the escort staff?	
	Very well	33 (29%)
	Well	52 (45%)
	Neither	23 (20%)
	Badly	2 (2%)
	Very badly	3 (3%)
	Do not remember	2 (2%)

Section 4: Reception and first night

Q15	Were you seen by a member of healthcare staff in reception?	
	Yes	105 (93%)
	No	5 (4%)
	Do not remember	3 (3%)
Q16	When you were searched in reception, was this carried out in a sensitive way?	
	Yes	69 (61%)
	No	30 (26%)
	Do not remember/ Not applicable	15 (13%)

Q17	Overall, how well did you feel you were treated by staff in reception?	
	Very well.....	31 (27%)
	Well.....	62 (54%)
	Neither.....	12 (10%)
	Badly.....	3 (3%)
	Very badly.....	4 (3%)
	Do not remember.....	3 (3%)
Q18	On your day of arrival did you receive information about what was going to happen to you?	
	Yes.....	67 (59%)
	No.....	38 (33%)
	Do not remember.....	9 (8%)
Q19	On your day of arrival did you receive information about what support was available to you in this centre?	
	Yes.....	83 (72%)
	No.....	24 (21%)
	Do not remember.....	9 (8%)
Q20	Was any of this information given to you in a translated form?	
	Do not need translated material.....	49 (45%)
	Yes.....	29 (27%)
	No.....	31 (28%)
Q21	On your day of arrival did you get the opportunity to change into clean clothing?	
	Yes.....	102 (89%)
	No.....	10 (9%)
	Do not remember.....	2 (2%)
Q22	Did you feel safe on your first night here?	
	Yes.....	79 (70%)
	No.....	24 (21%)
	Do not remember.....	10 (9%)
Q23	Did you have any of the following problems when you first arrived here? (Please tick all that applies to you.)	
	Not had any problems.....	62 (58%)
	Loss of property.....	8 (8%)
	Contacting family.....	11 (10%)
	Access to legal advice.....	9 (8%)
	Feeling depressed or suicidal.....	22 (21%)
	Health problems.....	13 (12%)
Q24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	
	Not had any problems.....	62 (60%)
	Yes.....	24 (23%)
	No.....	18 (17%)

Section 5: Legal rights and immigration

Q26	Do you have a lawyer?	
	Do not need one.....	10 (9%)
	Yes.....	77 (69%)
	No.....	25 (22%)

Q27	Do you get free legal advice?	
	Do not need legal advice	23 (22%)
	Yes	47 (44%)
	No.....	36 (34%)
Q28	Can you contact your lawyer easily?	
	Yes	57 (53%)
	No.....	15 (14%)
	Do not know/ Not applicable	35 (33%)
Q29	Have you had a visit from your lawyer?	
	Do not have one	35 (33%)
	Yes	26 (24%)
	No.....	46 (43%)
Q30	Can you get legal books in the library?	
	Yes	61 (55%)
	No.....	17 (15%)
	Do not know/ Not applicable	32 (29%)
Q31	How easy or difficult is it for you to obtain bail information?	
	Very easy.....	9 (8%)
	Easy	35 (32%)
	Neither	26 (24%)
	Difficult.....	12 (11%)
	Very difficult.....	15 (14%)
	Not applicable.....	12 (11%)
Q32	Can you get access to official information reports on your country?	
	Yes	34 (31%)
	No.....	41 (38%)
	Do not know/ Not applicable	34 (31%)
Q33	How easy or difficult is it to see the centre's immigration staff when you want?	
	Do not know/ have not tried	21 (18%)
	Very easy.....	15 (13%)
	Easy	47 (41%)
	Neither	16 (14%)
	Difficult.....	10 (9%)
	Very difficult.....	5 (4%)

Section 6: Respectful detention

Q35	Can you clean your clothes easily?	
	Yes	90 (80%)
	No.....	23 (20%)
Q36	Are you normally able to have a shower every day?	
	Yes	107 (96%)
	No.....	4 (4%)
Q37	Is it normally quiet enough for you to be able to relax or sleep in your room at night time?	
	Yes	84 (73%)
	No.....	31 (27%)

Q38	Can you normally get access to your property held by staff at the centre if you need to?	
	Yes	82 (71%)
	No.....	10 (9%)
	Do not know.....	23 (20%)
Q39	What is the food like here?	
	Very good.....	17 (15%)
	Good.....	48 (42%)
	Neither	30 (26%)
	Bad	12 (11%)
	Very bad.....	7 (6%)
Q40	Does the shop sell a wide enough range of goods to meet your needs?	
	Have not bought anything yet.....	2 (2%)
	Yes	76 (67%)
	No.....	35 (31%)
Q41	Do you feel that your religious beliefs are respected?	
	Yes	100 (88%)
	No.....	0 (0%)
	Not applicable.....	13 (12%)
Q42	Are you able to speak to a religious leader of your faith in private if you want to?	
	Yes	85 (75%)
	No.....	7 (6%)
	Do not know/Not applicable	21 (19%)
Q43	How easy or difficult is it to get a complaint form?	
	Very easy.....	19 (17%)
	Easy	43 (38%)
	Neither	12 (11%)
	Difficult.....	0 (0%)
	Very difficult.....	4 (4%)
	Do not know.....	36 (32%)
Q44	Have you made a complaint since you have been at this centre?	
	Yes	14 (12%)
	No.....	92 (80%)
	Do not know how to.....	9 (8%)
Q45	If yes, do you feel complaints are sorted out fairly?	
	Yes	7 (6%)
	No.....	4 (4%)
	Not made a complaint.....	101 (90%)

Section 7: Staff

Q47	Do you have a member of staff at the centre that you can turn to for help if you have a problem?	
	Yes	91 (81%)
	No.....	21 (19%)
Q48	Do most staff at the centre treat you with respect?	
	Yes	101 (90%)
	No.....	11 (10%)

Q49	Have any members of staff physically restrained you (C and R) in the last six months?	
	Yes	8 (8%)
	No.....	98 (92%)
Q50	Have you spent a night in the separation/isolation unit in the last six months?	
	Yes	9 (8%)
	No.....	98 (92%)

Section 8: Safety

Q52	Do you feel unsafe in this centre?	
	Yes	21 (19%)
	No.....	91 (81%)
Q53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	
	Yes	15 (14%)
	No.....	90 (86%)
Q54	If you have felt victimised by a detainee/group of detainees, what did the incident(s) involve? (Please tick all that applies to you.)	
	Physical abuse (being hit, kicked or assaulted)	1 (1%)
	Because of your nationality.....	5 (5%)
	Having your property taken.....	1 (1%)
	Drugs.....	1 (1%)
	Because you have a disability	1 (1%)
	Because of your religion/religious beliefs	2 (2%)
Q55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	
	Yes	11 (11%)
	No.....	90 (89%)
Q56	If you have felt victimised by a member of staff/group of staff, what did the incident(s) involve? (Please tick all that applies to you.)	
	Physical abuse (being hit, kicked or assaulted)	0 (0%)
	Because of your nationality.....	2 (2%)
	Drugs.....	1 (1%)
	Because you have a disability	1 (1%)
	Because of your religion/religious beliefs	4 (4%)
Q57	If you have been victimised by detainees or staff, did you report it?	
	Yes	6 (6%)
	No.....	7 (7%)
	Not been victimised	82 (86%)
Q58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	
	Yes	5 (5%)
	No.....	103 (95%)
Q59	Have you ever felt threatened or intimidated by a member of staff in here?	
	Yes	5 (5%)
	No.....	102 (95%)

Section 9: Healthcare

Q61	Is health information available in your own language?	
	Yes	48 (44%)
	No.....	25 (23%)
	Do not know.....	35 (32%)
Q62	Is a qualified interpreter available if you need one during healthcare assessments?	
	Do not need an interpreter/Do not know	66 (64%)
	Yes	20 (19%)
	No.....	17 (17%)
Q63	Are you currently taking medication?	
	Yes	38 (34%)
	No.....	73 (66%)
Q64	What do you think of the overall quality of the healthcare here?	
	Have not been to healthcare.....	12 (11%)
	Very good.....	15 (14%)
	Good.....	41 (37%)
	Neither	28 (25%)
	Bad	9 (8%)
	Very bad.....	6 (5%)

Section 10: Activities

Q66	Are you doing any education here?	
	Yes	30 (27%)
	No.....	82 (73%)
Q67	Is the education helpful?	
	Not doing any education	82 (75%)
	Yes	28 (25%)
	No.....	0 (0%)
Q68	Can you work here if you want to?	
	Do not want to work	24 (22%)
	Yes	75 (69%)
	No.....	10 (9%)
Q69	Is there enough to do here to fill your time?	
	Yes	84 (76%)
	No.....	26 (24%)
Q70	How easy or difficult is it to go to the library?	
	Do not know/ Do not want to go.....	4 (4%)
	Very easy.....	53 (47%)
	Easy	42 (37%)
	Neither	6 (5%)
	Difficult.....	4 (4%)
	Very difficult.....	4 (4%)

Q71	How easy or difficult is it to go to the gym?	
	<i>Do not know/ Do not want to go</i>	10 (9%)
	<i>Very easy</i>	41 (36%)
	<i>Easy</i>	47 (42%)
	<i>Neither</i>	11 (10%)
	<i>Difficult</i>	3 (3%)
	<i>Very difficult</i>	1 (1%)

Section 11: Keeping in touch with family and friends

Q73	How easy or difficult is it to use the phone?	
	<i>Do not know/ Have not tried</i>	9 (8%)
	<i>Very easy</i>	37 (32%)
	<i>Easy</i>	39 (34%)
	<i>Neither</i>	12 (11%)
	<i>Difficult</i>	10 (9%)
	<i>Very difficult</i>	7 (6%)
Q74	Have you had any problems with sending or receiving mail?	
	<i>Yes</i>	12 (11%)
	<i>No</i>	71 (63%)
	<i>Do not know</i>	30 (27%)
Q75	Have you had a visit since you have been here from your family or friends?	
	<i>Yes</i>	50 (45%)
	<i>No</i>	60 (55%)
Q76	How did staff in the visits area treat you?	
	<i>Not had any visits</i>	34 (32%)
	<i>Very well</i>	37 (35%)
	<i>Well</i>	26 (25%)
	<i>Neither</i>	4 (4%)
	<i>Badly</i>	3 (3%)
	<i>Very Badly</i>	1 (1%)

Section 12: Resettlement

Q78	Do you feel that any member of staff has helped you to prepare for your release?	
	<i>Yes</i>	30 (30%)
	<i>No</i>	71 (70%)

Main comparator and comparator to last time



Detainee survey responses: Campsfield House 2014

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

Key to tables

	Any percentage highlighted in green is significantly better	Campsfield House IRC 2014	IRC comparator	Campsfield House IRC 2014	Campsfield House IRC 2009
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		116	1439	116	124
SECTION 1: General information					
1	Are you male?	98%	90%	98%	100%
2	Are you aged under 21 years?	8%	10%	8%	19%
4	Do you understand spoken English?	81%	74%	81%	53%
5	Do you understand written English?	77%	70%	77%	47%
6	Are you Muslim?	44%	53%	44%	41%
7	Do you have a disability?	6%	12%	6%	18%
SECTION 2: Immigration detention					
8	When being detained, were you told the reasons why in a language you could understand?	80%	74%	80%	63%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	5%	6%	5%	6%
10	Have you been detained in this centre for more than one month?	41%	54%	41%	
SECTION 3: Transfers and escorts					
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	57%	43%	57%	28%
12	Did you spend more than four hours in the escort van to get to this centre?	11%	25%	11%	19%
13	Were you treated well/very well by the escort staff?	74%	63%	74%	53%
SECTION 4: Reception and first night					
15	Were you seen by a member of health care staff in reception?	93%	87%	93%	89%
16	When you were searched in reception was this carried out in a sensitive way?	61%	66%	61%	70%
17	Were you treated well/very well by staff in reception?	81%	63%	81%	63%
18	Did you receive information about what was going to happen to you on your day of arrival?	59%	36%	59%	31%
19	Did you receive information about what support was available to you in this centre on your day of arrival?	72%	44%	72%	
For those who required information in a translated form:					
20	Was any of this information provided in a translated form?	49%	32%	49%	21%
21	Did you get the opportunity to change into clean clothing on your day of arrival?	90%	62%	90%	68%
22	Did you feel safe on your first night here?	70%	53%	70%	61%
23a	Did you have any problems when you first arrived?	42%	67%	42%	54%
23b	Did you have any problems with loss of transferred property when you first arrived?	8%	8%	8%	20%
23c	Did you have any problems contacting family when you first arrived?	10%	16%	10%	6%
SECTION 4: Reception and first night continued					
23d	Did you have any problems accessing legal advice when you first arrived?	9%	17%	9%	11%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	Campsfield House IRC 2014	IRC comparator	Campsfield House IRC 2014	Campsfield House IRC 2009
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
23e	Did you have any problems with feeling depressed or suicidal when you first arrived?	21%	36%	21%	9%
23f	Did you have any health problems when you first arrived?	12%	27%	12%	15%
For those who had problems on arrival:					
24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	57%	37%	57%	32%
SECTION 5: Legal rights and immigration					
26	Do you have a lawyer?	69%	66%	69%	66%
For those who have a lawyer:					
28	Can you contact your lawyer easily?	79%	75%	79%	
29	Have you had a visit from your lawyer?	36%	47%	36%	54%
27	Do you get free legal advice?	44%	44%	44%	43%
30	Can you get legal books in the library?	55%	48%	55%	36%
31	Is it easy/very easy for you to obtain bail information?	40%	30%	40%	38%
32	Can you get access to official information reports on your country?	31%	23%	31%	19%
33	Is it easy/very easy to see this centre's immigration staff when you want?	55%	24%	55%	
SECTION 6: Respectful detention					
35	Can you clean your clothes easily?	80%	83%	80%	
36	Are you normally able to have a shower every day?	96%	92%	96%	97%
37	Is it normally quiet enough for you to be able to sleep in your room at night?	73%	67%	73%	72%
38	Can you normally get access to your property held by staff at the centre, if you need to?	71%	49%	71%	74%
39	Is the food good/very good?	57%	28%	57%	42%
40	Does the shop sell a wide enough range of goods to meet your needs?	67%	47%	67%	59%
41	Do you feel that your religious beliefs are respected?	89%	77%	89%	83%
42	Are you able to speak to a religious leader of your own faith if you want to?	75%	55%	75%	55%
43	Is it easy/very easy to get a complaint form?	55%	52%	55%	52%
44	Have you made a complaint since you have been at this centre?	12%	22%	12%	20%
For those who have made a complaint:					
45	Do you feel complaints are sorted out fairly?	64%	25%	64%	37%
SECTION 7: Staff					
47	Do you have a member of staff you can turn to for help if you have a problem?	81%	64%	81%	65%
48	Do most staff treat you with respect?	90%	76%	90%	85%
49	Have any members of staff physically restrained you in the last six months?	8%	10%	8%	12%
50	Have you spent a night in the segregation unit in the last six months?	9%	14%	9%	13%
SECTION 8: Safety					
52	Do you feel unsafe in this centre?	19%	33%	19%	
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	14%	19%	14%	15%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	Campsfeld House IRC 2014	IRC comparator	Campsfeld House IRC 2014	Campsfeld House IRC 2009
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
54a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	1%	4%	1%	1%
54b	Have you been victimised because of your nationality since you have been here? (By detainees)	5%	6%	5%	3%
54c	Have you ever had your property taken since you have been here? (By detainees)	1%	2%	1%	5%
54d	Have you been victimised because of drugs since you have been here? (By detainees)	1%	1%	1%	0%
54e	Have you ever been victimised here because you have a disability? (By detainees)	1%	1%	1%	1%
54f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	2%	4%	2%	2%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	11%	15%	11%	10%
56a	Have you been hit, kicked or assaulted since you have been here? (By staff)	0%	2%	0%	1%
56b	Have you been victimised because of your nationality since you have been here? (By staff)	2%	6%	2%	2%
56c	Have you been victimised because of drugs since you have been here? (By staff)	1%	1%	1%	0%
56d	Have you ever been victimised here because you have a disability? (By staff)	1%	1%	1%	0%
56e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	4%	3%	4%	0%
For those who have been victimised by detainees or staff:					
57	Did you report it?	46%	43%	46%	32%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	5%	11%	5%	6%
59	Have you ever felt threatened or intimidated by a member of staff in here?	5%	12%	5%	3%
SECTION 9: Health services					
61	Is health information available in your own language?	45%	39%	45%	33%
62	Is a qualified interpreter available if you need one during health care assessments?	19%	22%	19%	15%
63	Are you currently taking medication?	34%	43%	34%	35%
For those who have been to health care:					
64	Do you think the overall quality of health care in this centre is good/very good?	57%	47%	57%	41%
SECTION 10: Activities					
66	Are you doing any education here?	27%	23%	27%	19%
For those doing education here:					
67	Is the education helpful?	100%	94%	100%	82%
68	Can you work here if you want to?	69%	57%	69%	59%
69	Is there enough to do here to fill your time?	76%	55%	76%	48%
70	Is it easy/very easy to go to the library?	84%	71%	84%	78%
71	Is it easy/very easy to go to the gym?	78%	66%	78%	88%
SECTION 11: Keeping in touch with family and friends					
73	Is it easy/very easy to use the phone?	67%	67%	67%	
74	Have you had any problems with sending or receiving mail?	11%	21%	11%	18%
75	Have you had a visit since you have been in here from your family or friends?	46%	43%	46%	41%
For those who have had visits:					
76	Do you feel you are treated well/very well by staff in the visits area?	89%	73%	89%	86%
SECTION 12: Resettlement					
78	Has any member of staff helped you to prepare for your release?	30%	14%	30%	



Key questions (non-English speakers) Campsfield House IRC 2014

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

Key to tables

	Any percentage highlighted in green is significantly better	Non-English speakers	English speakers
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		22	92
8	When being detained, were you told the reasons why in a language you could understand?	66%	82%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	5%	5%
10	Have you been in this centre for more than one month?	51%	37%
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	39%	61%
13	Were you treated well/very well by the escort staff?	67%	75%
17	Were you treated well/very well by staff in reception?	72%	83%
18	Did you receive information about what was going to happen to you on your day of arrival?	54%	59%
19	Did you receive information about what support was available to you on your day of arrival?	72%	72%
22	Did you feel safe on your first night here?	56%	72%
23	Did you have any problems when you first arrived?	41%	42%
26	Do you have a lawyer?	59%	70%
33	Is it easy/very easy to see the centre's immigration staff when you want?	56%	53%
35	Can you clean your clothes easily?	90%	77%
36	Are you normally able to have a shower every day?	100%	96%
43	Is it easy/very easy to get a complaint form?	39%	58%

Key to tables

	Any percentage highlighted in green is significantly better	Non-English speakers	English speakers
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
44	Have you made a complaint since you have been at this centre?	5%	14%
47	Do you have a member of staff you can turn to for help if you have a problem?	80%	82%
48	Do most staff treat you with respect?	85%	91%
52	Do you feel unsafe in this centre?	26%	18%
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	12%	15%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	7%	12%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	5%	5%
59	Have you ever felt threatened or intimidated by a member of staff in here?	5%	4%
61	Is health information available in your own language?	59%	41%
62	Is a qualified interpreter available if you need one during health care assessments?	51%	12%
66	Are you doing any education here?	39%	25%
68	Can you work here if you want to?	71%	67%
69	Is there enough to do here to fill your time?	76%	77%
70	Is it easy/very easy to go to the library?	81%	85%
71	Is it easy/very easy to go to the gym?	76%	78%
73	Is it easy/very easy to use the phone?	76%	64%
74	Have you had any problems with sending or receiving mail?	5%	12%
75	Have you had a visit since you have been in here from your family or friends?	50%	45%
78	Has any member of staff helped you to prepare for your release?	36%	29%