



# **Annual Report of the Independent Monitoring Board at Derwentside Immigration Removal Centre**

**For reporting year  
1 January to 31 December 2023**

**Published July 2024**



# Contents

<b>Introductory sections 1 – 3</b>	<b>Page</b>
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Key points	5
 <b>Evidence sections 4 – 7</b>	
4. Safety	10
5. Fair and humane treatment	15
6. Health and wellbeing	21
7. Preparation for return or release	24
 <b>The work of the IMB</b>	
Board statistics	27
Applications to the IMB	27
 <b>Annex A</b>	
Table: Home Office data on lengths of stay	28

All IMB annual reports are published on [www.imb.org.uk](http://www.imb.org.uk)

## Introductory sections 1 – 3

### 1. Statutory role of the IMB

The Immigration and Asylum Act 1999 requires every immigration removal centre (IRC) to be monitored by an independent board appointed by the Secretary of State from members of the community in which the IRC is situated.

Under the Detention Centre Rules, the Board is required to:

- monitor the state of the premises, its administration, the food and the treatment of detained people
- inform the Secretary of State of any abuse that comes to their knowledge
- report on any aspect of the consideration of the immigration status of any detained person that causes them concern as it affects that person's continued detention
- visit detained people who are removed from association, in temporary confinement or subject to special control or restraint
- report on any aspect of a detained person's mental or physical health that is likely to be injuriously affected by any condition of detention
- inform promptly the Secretary of State, or any official to whom authority has been delegated, as it judges appropriate, any concern it has
- report annually to the Secretary of State on how well the IRC has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively, its members have right of access to every detained person and every part of the IRC and all of its records.

The Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights treaty designed to strengthen protection for people deprived of their liberty. The protocol recognises that such people are particularly vulnerable and aims to prevent their ill-treatment through establishing a system of visits or inspections to all places of detention. OPCAT requires that states designate a National Preventive Mechanism to carry out visits to places of detention, to monitor the treatment of and conditions for detained people and to make recommendations for the prevention of ill-treatment. The IMBs are part of the United Kingdom's National Preventive Mechanism.

## **2. Description of the establishment**

**2.1** Derwentside is the principal UK Immigration Removal Centre (IRC) for women and is located in Consett, County Durham. It opened in November 2021, with an operating capacity of 84, and the first women were transferred from Yarl's Wood IRC on 28 December 2021. It occupies the site of the former Hassockfield Secure Training Centre (previously Medomsley Detention Centre).

**2.2** The buildings of the old secure training centre were extensively refurbished before the IRC opened, but all the facilities are still not open more than two years later. Residential accommodation is in three single-storey units placed around a large, grassed area and there is a separate building for regimes, reception and the care and separation unit (CSU). Healthcare occupies a separate, new, pre-fabricated building. A further building, block 4, is intended to house additional facilities, including the care and induction suites and the cultural kitchen, but it is these that are still not open, as well as part of the CSU.

**2.3** During 2023, Derwentside was not run at full capacity: the table below shows the numbers of women detained there on each quarter date:

31 March	29 <sup>1</sup>
30 June	19
30 September	26 <sup>2</sup>
31 December	40

A total of 373 women left detention at Derwentside during 2023<sup>3</sup>.

**2.4** From its opening until 31 August 2023, Derwentside was run for the Home Office by Mitie Care & Custody (C&C). On 1 September 2023, Serco took over the operation of the IRC. The healthcare contractor also changed during the year: Spectrum Community Health CIC ran the service until 30 September, when Practice Plus Group (PPG) took over. C&C holds the contract for escorts and transfers.

**2.5** The Detention Centre Rules 2001 (the DC rules) govern the running of the centre. The Home Office is represented by a local Detention Services (DS) Compliance Team, which has responsibility for monitoring the contract, and by a Detention Engagement Team (DET), which has responsibility for engaging with the detained women about the progress of their cases.

---

<sup>1</sup> Source for Q1 and Q2: Mitie.

<sup>2</sup> Source for Q3 and Q4: Serco.

<sup>3</sup> Source: Home Office Detention Datasets December 2023.

### **3. Key points**

#### **3.1 Background to the report**

**3.1.1** Derwentside is a controversial establishment, partly because it detains women in a remote location, far from the largest UK cities and its principal airports, and partly because of the history of the previous establishment on the site. Protests and prayer vigils are held at the gates of the IRC most weekends, but these are invariably peaceful.

**3.1.2** In late September 2023, it was announced by the Home Office that Derwentside would be re-roled to become an IRC for men. This, together with the changes of main and healthcare contractors, has inevitably had an impact on the smooth running of the centre. However, as of May 2024, there is no indication of when the change in role will come into effect.

#### **3.2 Main findings**

##### **Safety**

**3.2.1** From the Board's observations, Derwentside provides a generally safe environment, with very few incidents involving violence or the use of force. Reception staff are welcoming on arrival, but better use could be made of quiet offices in reception to provide a calmer atmosphere. Suicide and self-harm prevention processes are well-managed and detained women have reported to the IMB that they feel well-supported by staff.

**3.2.2** A high proportion of the detained women are considered to be 'adults at risk', with mental health illnesses a common occurrence and some extremely vulnerable women remaining in detention for long periods, even after their release has been authorised, while arrangements are made for post-release accommodation and/or support. There have also been examples of detention being maintained after a rule 35 (3) report, in which a medical practitioner has attested to concerns that the woman may have been the victim of torture.

##### **Fair and humane treatment**

**3.2.3** In our 2022 report, we expressed the view that the location of Derwentside, together with its inadequate communications infrastructure, was unsuitable. This led to the treatment of detained women that was, in some respects, inhumane, and, in any event, unequal and unfair compared with the treatment of detained men. We remain of this view. In 2023, we continued to observe that women were subjected to long and frequent journeys, sometimes at night, and generally with a disruptive overnight stop at Manchester Residential Short-Term Holding Facility (RSTHF) on the way (see 5.1.5).

**3.2.4** Two years after opening, the block containing important facilities such as the induction and care suites, and the cultural kitchen, is still not open for use by the detained women. The rest of the accommodation remains in good condition and is kept clean and tidy. There is access to plenty of natural light and outside space. However, on our visits, the quality of the food was a source of frequent dissatisfaction and comment among the women.

**3.2.5** Throughout the year, we observed many interactions between staff and detained women, which were positive and empathetic. There have also been examples of impressive multi-disciplinary working towards achieving good outcomes for women. Our conversations with women have evidenced that many have valued the response of staff members to their need for support, often in trying and difficult circumstances.

**3.2.6** The Board, again, highlights deficiencies in the availability and use of translation services, which can help relieve feelings of isolation for women whose first language is not English.

**3.2.7** We do not consider it is either fair or humane to detain people for indefinite periods of time.

### **Health and wellbeing**

**3.2.8** Our monitoring indicates that healthcare provided a good service in 2023, with the appointment of an additional GP increasing access. The healthcare contractor changed on 1 October, with physical and mental healthcare being brought together under the same contract. All the physical healthcare staff chose to transfer to the new contractor, PPG, but the mental health team did not, necessitating the recruitment of a new team and the use of some agency and bank staff. Despite this, the transition seems to have gone smoothly.

**3.2.9** The new healthcare contract provided for mental healthcare to be available at weekends and on bank holidays, which was not the case previously.

### **Preparation for return or release**

**3.2.10** The provision for education and other activities, such as arts and crafts, reduced in the second half of the year, and the Board regards it as insufficient, with inadequate distraction or purposeful activities.

**3.2.11** There is no legal time limit for immigration detention, but the majority of women detained at Derwentside in 2023 left detention within 14 days of arrival. There are some examples, however, of women staying for many months, even after their release has been authorised, because of delays in suitable accommodation being secured or approved. More than half of the women detained were released on bail.

**3.2.12** There has been no progress on improving the mobile phone reception or providing Wi-Fi calling (which allows phone calls to be made and text messages to be sent over wireless internet networks rather than via a mobile signal), which was referred to in the Home Office's action plan in response to our 2022 report as "a priority piece of work". Difficulties for visiting families are largely due to the centre's location.

**3.2.13** We have been impressed by the care taken by staff in making travel arrangements for women who are being released on bail.

### **3.3 Recommendations**

#### **TO THE MINISTER**

**3.3.1** In the light of the issues and inequalities we have highlighted in this report, to reconsider the suitability of Derwentside as an IRC. *(This is a repeat recommendation from last year's report.)*

**3.3.2** To introduce a time limit for immigration detention *(repeat recommendation)*.

#### **TO HOME OFFICE IMMIGRATION ENFORCEMENT**

**3.3.3** Not to open a new immigration removal centre or other such establishment until all building work is completed and all facilities available for use *(repeat recommendation)*.

**3.3.4** To the detention gatekeeper: not to detain women with current, or a history of, serious mental health issues *(repeat recommendation)*.

**3.3.5** To establish or improve pathways with local authorities and other external agencies, including probation, to enable prompt access to housing, social support and other services, which are required to be put in place before vulnerable women leave detention *(repeat recommendation)*.

**3.3.6** To improve the communications infrastructure for Derwentside *(repeat recommendation)*.

**3.3.7** To increase the hourly rate for paid work for detained women.

**3.3.8** To take steps with the escorting contractor to reduce the incidence of night-time moves into and out of Derwentside.

**3.3.9** To reduce the number of moves experienced by detained women around the detention estate and to ensure that women understand where they are being moved to, and why.

#### **TO THE DIRECTOR/CENTRE MANAGER**

**3.3.10** To increase and improve the provision for, and women's access to, education and activities.

**3.3.11** To take steps to encourage and increase the uptake of paid employment.

**3.3.12** To improve communications with detained women whose first language is not English.

**3.3.13** To improve the quality and variety of the food served to the detained women.

**3.3.14** To ensure that the processes for identifying and catering for food allergies are completely failsafe.

**3.3.15** To make better use of the offices in reception to provide a quieter environment for new arrivals.

## **TO PRACTICE PLUS GROUP**

**3.3.16** To ensure that all residents are made aware of rule 35 on arrival to enable access to a medical practitioner and provision of reports to case-owners as soon as possible after arrival in detention.

## **TO MITIE CARE & CUSTODY**

**3.3.17** To take steps to reduce the incidence of night-time moves into and out of Derwentside.

### **3.4 Progress since the last report**

Recommendation	Response given	Progress
<b>To the Minister</b> 1. In light of the issues and inequalities that we have highlighted in this report, to reconsider the suitability of Derwentside as an immigration removal centre.	Not accepted.	Recommendation repeated for 2023.
2. To introduce a time limit for immigration detention.	Not accepted.	Recommendation repeated for 2023.
<b>To the Home Office</b> 1. Not to open a new immigration removal centre or other such establishment until all building work is completed and all facilities available for use.	Partially accepted.	Outstanding building work is not complete and facilities are still not available for use by detained women.
2. Not to detain women with current, or a history of, serious mental health issues.	Not accepted.	Recommendation repeated for 2023.
3. To establish or improve pathways with local authorities and other external agencies to enable prompt access to housing, social support and other services which are required to be put in place before vulnerable women leave detention.	Accepted. Pathways will [therefore] be established and strengthened on a case-by-case basis, taking account of the needs of individual residents.	Substantial delays in securing release accommodation still being experienced by vulnerable women. Recommendation repeated for 2023.
4. To improve the communications infrastructure for Derwentside IRC.	Accepted. Plans are in place to introduce Wi-Fi calling at Derwentside IRC. A pilot for the system is taking place at Gatwick	No progress at Derwentside. Recommendation repeated for 2023.



	IRC, with all infrastructure in place already. Timescales for roll out at Derwentside will be dependent on the outcomes of this pilot, but this is a priority piece of work that will proceed as soon as possible.	
5. To introduce routine pregnancy testing for women detained in residential short-term holding facilities.	Not accepted.	No cases during 2023, but we stand by the recommendation.
<b>To the centre manager</b> 1. To ensure all staff are trained and fully confident and competent in the governance, techniques and reporting requirements around use of force and rules 40 and 42.	Accepted. Commitment by both contractors to increase knowledge and training in use of force and rule 40/42.	Some improvement: reduced numbers of use of force and rule 40 incidents in 2023. Concerns raised in only one incident.
2. To improve communications with detained women whose first language is not English.	Partially accepted. Commitment by Mitie to the use of existing translation tablets; by Serco to introduce multi-lingual kiosks and to pilot more advanced translation devices.	Some improvement with the introduction of kiosks, but concerns remain around availability and use of translation tablets. No pilot of more advanced translation tablets. Recommendation repeated for 2023.
3. To improve the management of challenging behaviour, which can have an effect on the wellbeing of some women in Derwentside.	Partially accepted.	Improvement seen during 2023.
<b>To healthcare</b> 1. To commission access to mental health services at Derwentside IRC at weekends and over public holidays.	Partially accepted.	New healthcare contract (from 1 October) provides for mental health services at weekends and over public holidays.

## **Evidence sections 4 – 7**

### **4. Safety**

#### **4.1 Reception and induction**

**4.1.1** IMB members regularly visit reception to observe the admission of new arrivals and to review Personal Escort Records (PERs) (see 5.1.3). The physical environment is welcoming.

**4.1.2** Reception staff are well prepared for new arrivals and are friendly and relaxed with the women. We have observed them treating women with kindness and respect, asking for permission to search, folding clothing carefully and explaining why certain items must remain in storage. Clothing packs are provided for women who need them. On arrival, women are offered food and drinks and are given a simple mobile phone with some credit to enable them to contact family and friends. An information booklet giving an overview of the centre (in several languages) is also available. Following reception, the women are taken straight to healthcare for an initial screening by a nurse.

**4.1.3** Early in the year, two of the small offices attached to the main reception area were kitted out with computers and telephones to enable private conversations to take place and give easy access to The Big Word translation service. We were told by staff that they were “rarely used because we only have 30 minutes to admit the first new arrival, with an additional five minutes for each subsequent new arrival”. We raised this with the Detention Services team and centre manager. It transpired that the time limit was for the transfer from the escorting staff and not for completion of the whole reception process. Since then, we have observed the offices being used, although the majority of new arrivals we have observed continue to be dealt with in the main reception room, sometimes using translation tablets, sometimes The Big Word.

**4.1.4** Women often arrive at the centre appearing dazed and confused after a long journey. The main reception area can seem very busy when there is a group of new arrivals. At the same time, there may also be women preparing to leave, including tagging taking place, members of the DET team serving papers or women being prepared for escort to health appointments at local hospitals. This can sometimes give the impression of a noisy and disorderly environment, increasing the confusion and possible upset of new arrivals. In these circumstances, more regular use of the newly equipped offices and The Big Word (when appropriate) could significantly improve the reception process for the women.

**4.1.5** Induction takes place on the residential units within 24 hours of arrival, followed shortly by an induction with the DET team. The Board regularly observes women being shown the layout of the centre and the facilities available by members of staff. Women are checked throughout their first night in the centre. It is very disappointing that the dedicated induction suite in block 4 has still not opened, more than two years after the centre opened.

## **4.2 Suicide and self-harm, deaths in custody**

**4.2.1** The assessment care in detention and teamwork (ACDT) process is used to monitor the welfare of women considered at risk of suicide and/or self-harm. IMB members regularly review the paperwork of open cases, often speak to the women involved and have attended some review meetings as observers.

**4.2.2** The paperwork we have seen has been completed well with regular, meaningful comments. They include notes of interactions with other women, as well as with staff, and demonstrate a good knowledge of the individual concerned and of the triggers for potential self-harm. Threats of self-harm have, for example, occurred following the release of a roommate, the receipt of removal directions from the Home Office or simply from being detained.

**4.2.3** Review meetings are well attended by staff and include representatives from healthcare, the mental health team, welfare, chaplaincy and staff from the residential unit (although, as noted in 6.3.2, mental health staff were not available at weekends or on bank holidays until the healthcare contract changed in October). The Big Word is sometimes used. Staff attending the meetings we have observed were overwhelmingly kind, supportive and reassuring and offered help with practical issues. At the end of review meetings, we have observed staff updating their colleagues on the residential units so that they are well placed to support the distressed woman. We have observed many instances of care and kindness shown by staff to women on open ACDTs. We have heard positive comments from the women about their interactions with staff, such as “I feel well supported by staff” and “I feel looked after”.

**4.2.4** Most review meetings with the women are held in the small multi-faith rooms on the residential units. Although staff attending review meetings all have a part to play, we have raised concerns that the combination of a small room with all seats taken and a number of attendees having to stand can make for an oppressive atmosphere for women who are clearly distressed.

**4.2.5** Distraction packs are available on the residential units and women who are upset or distressed have been encouraged to take part in activities in the centre such as arts and crafts and English lessons. We were particularly struck by the kindness of the arts and crafts teacher, who we witnessed taking craft kits to units for women she knew were having a tough time. Unfortunately, due to a loss of regimes staff, including that teacher, towards the end of the year, there are fewer organised activities and less encouragement to take part. We are concerned about the impact this could have on women dealing with thoughts of suicide or self-harm.

**4.2.6** Threats of suicide are taken seriously. Disappointingly, there is still no care suite available more than two years after the centre was opened. Constant supervision continues to take place on the residential units.

#### 4.2.7 Relevant statistics for the year are:

	Total number of women detained	Total number of ACDT files opened	Instances of self-harm	Instances of constant supervision	Deaths in detention
2023	560+ <sup>4</sup>	80	13	2	0
2022	520	67	7	13	0

### 4.3 Violence and violence reduction

**4.3.1** Instances of violent behaviour continue to be rare at Derwentside. Three women were removed to the CSU under Detention Centre Rule 40 during the year: one for assaulting another detained woman and two for assaulting staff (see 5.3.1, below). Resulting injuries were, thankfully, not too serious. We have observed, both on CCTV and body-worn video camera footage, staff stepping in quickly to de-escalate violent situations.

**4.3.2** There has also been a small number of women who have shown openly aggressive behaviour towards staff, and other women, short of actual violence. Such behaviour can have a significant impact on the wellbeing of those who are quiet and reserved and may also be vulnerable as a result of previous trauma. In such cases, a 'challenging behaviour' log is opened and the individual's behaviour is closely monitored. For example, one of the women was accompanied at all times by a member of staff when she moved throughout the centre. A total of 11 such logs were opened in 2023 (with three being opened in the period from June to December 2022). We commented in our 2022 report on the negative effect of the threatening and aggressive behaviour of a small minority of women on others. Evidence during 2023 suggests that closer monitoring of such women has brought about a real improvement.

### 4.4 Detained people with specific vulnerabilities, safeguarding

**4.4.1** In 2023, we continued to note that a significant proportion of the population was recorded as being an 'adult at risk', indicating that there was evidence – depending on the level – to suggest they would be vulnerable to harm from detention. Numbers vary but at any one time they have made up as many as half of the population. Many are at Level 2, which means that there is professional and/or documentary evidence that the individual is an adult at risk and, hence, vulnerable to harm. We are not always aware of the nature of the vulnerability, but serious mental health issues, such as psychosis and paranoia, are not uncommon, as are anxiety and depression. The Board has certainly seen a number of women who have presented as extremely disturbed, while many tell us they are anxious, have difficulty sleeping or have digestive problems.

**4.4.2** In terms of identifying vulnerabilities, the detained women are seen by a nurse within two hours of arrival. As many women arrive tired after long journeys,

---

<sup>4</sup> This is the number of women arriving at Derwentside IRC during 2023, from contractor figures for monthly arrivals. It is not complete, as the data for September 2023 has not been made available.

especially if they arrive at night, or are disoriented or stressed, a second nurse assessment is carried out the following day to ensure that essential information has been captured.

**4.4.3** Rule 34 provides that people entering detention must also be examined by a medical practitioner within 24 hours of admission (provided they consent). The purpose of this examination is to assess whether there are any physical or mental conditions that require attention or will render the detained woman particularly vulnerable to harm in detention and, from that, to indicate whether the woman should have an examination by a doctor for the purposes of rule 35 (see below). All new arrivals are offered an appointment with the GP, but not all choose to take it up.

**4.4.4** Rule 35 requires the medical practitioner to report to the manager and to the Home Office if there are concerns that a detained person's health might be injuriously affected by continued detention or any conditions of detention (rule 35(1)); that they have suicidal intentions (rule 35(2)); or that they may have been the victim of torture (rule 35(3)). The detained person can request an examination under this rule at any time, or they may be referred after their initial screenings. If, on examining the detained person, the doctor has relevant concerns, they must send a report to that effect, with detailed medical evidence, to the Home Office rule 35 team. They must then decide whether to release the detained person or to maintain detention.

**4.4.5** These assessments and reports concern matters of extreme sensitivity that are covered by patient-doctor confidentiality. The IMB does not, therefore, see individual reports. We receive information locally on waiting times for appointments; and, from the Home Office, we receive data on the number of reports filed and whether they were made under rule 35(1), (2) or (3), and whether the women on whose behalf the reports were made were released or remained in detention. Unfortunately, the Home Office data was not provided to us for every month in 2023, nor was it provided in a timely fashion, so the picture is not complete.

**4.4.6** From the information available to us, we can see that there were short waiting times for rule 35 appointments, once requested. Most rule 35 reports were received by the rule 35 team within around 10 days of a woman being detained. However, there are some examples of reports being received after longer periods in detention: in one case, a woman was in detention for 122 days before being released after a rule 35(3) report. We do not know the reasons for these delays: it may be that the detained women did not want to raise these sensitive issues until they had been in detention for a while; it may be that they were not immediately made aware of rule 35. We have discussed this with the healthcare providers and stressed the importance of the women being informed about it at the earliest possible stage.

**4.4.7** The data made available to the Board shows that the overwhelming majority of reports were made under rule 35(3), and that monthly release rates varied between 22% and 66%<sup>5</sup> of the numbers of rule 35 reports filed. In October, 12 rule 35(3) reports were filed, but only four of these led to release. This means that, in relation to eight women, the doctor had concerns that they may have been a victim of torture, and yet detention was maintained. In the months for which we have data, four reports were filed under rule 35(2), leading to release in two cases and the maintenance of detention in two.

---

<sup>5</sup> Source: Home Office monthly rule 35 data provided to the IMB Chair.

**4.4.8** While women with vulnerabilities remain in detention, vulnerable adult care plans (VACPs) may be opened for them to manage their care, and their cases are discussed at weekly adults at risk and vulnerable adults' meetings. The IMB often observes these meetings and is impressed by the knowledge that staff from different parts of the IRC have about the individual women concerned: there are detailed discussions, with a focus on appropriate care.

**4.4.9** Elsewhere in this report, we highlight the long and frequent journeys, often at night, that are a feature of detention at Derwentside IRC; part of our motivation in raising these is that a significant proportion of the detained women are vulnerable. In our view, the way in which they are moved around the estate risks increasing the harmful effects of detention. By way of example, a young woman was arrested in February and taken to Heathrow IRC; the next day to Manchester RSTHF and the day after to Derwentside: three different places of detention in three days. On arrival at Derwentside, she presented as extremely disturbed and, possibly, traumatised, unable or unwilling to speak to staff. Staff were so concerned about her mental state that she was put on constant supervision on arrival and was seen by a psychiatrist within days. We suggest that the three days of travelling and being subjected to processing in three different locations must have contributed to her distress. Healthcare and IRC staff worked hard to look after her and gain her trust, and after a few days she was calmer and engaging with staff. She was released after about two weeks.

## **4.5 Use of force**

**4.5.1** Force was used on seven occasions during 2023. This is a reduction from the 13 incidents in 2022, even though more women were detained at Derwentside IRC in 2023. The IMB was informed on each occasion, although the paperwork was not consistently supplied to us. We were satisfied with the reasons given for the use of force, which were: to break up altercations between detained women; after staff had been assaulted; to prevent an assault on staff; and to move a detained woman to a different location, although the Home Office compliance team reported that a non-approved technique had been used by Mitie on this final occasion.

## **5. Fair and humane treatment**

### **5.1 Escort, transfer and transport**

**5.1.1** In our 2022 report, the first since Derwentside opened, we highlighted the long and disruptive journeys, often at night, which the detained women experienced. We expressed the view that the long journeys that many of the women endured on the way to Derwentside, often after a short stay at Heathrow IRC, followed by an overnight stop at Manchester RSTHF must contribute to, and in many cases increase, the anxiety, disorientation and fear they would experience as result of their detention. We commented that women in detention may well have been trafficked and may have experienced very difficult and frightening journeys in the past. In this respect, we also concluded that detained women received unequal treatment compared to detained men.

**5.1.2** In 2023, we continued to monitor journeys and found a very similar picture, which has led us to the same conclusion.

**5.1.3** Under Mitie, arrival and departure times were generally recorded on the daily briefing document, which we received, but since September, Serco has not continued that practice. We look at as many individual PERs as we can, but we did not have access to the Detainee Management System (see section 8, below) so were unable to see the complete picture. However, following a meeting with the escorting contractor, Mitie C&C, in May, we started to receive monthly statistics, which show the number of moves into Derwentside during the night state (22:00 to 06:00). We do not have the corresponding figures for moves out of Derwentside, but we know that when transport brings women to the IRC from Manchester RSTHF - which is the vast majority of moves - it also takes women back there. So, if women are moved into Derwentside at night, then there will be corresponding moves out at night.

**5.1.4** From our monitoring, it is clear that night-time moves have been taking place throughout the year, with some spikes, such as in July, for example, and that there was an increase in the final quarter. C&C figures show that in October, 21%, in November, 31% and in December, 45% of women arriving at Derwentside did so between 22:00 and 06:00.

**5.1.5** There were also many examples of women being transported around the estate. From our conversations with the detained women, we are not confident that they always understand why or to where they are being moved.

Some examples:

- On 30 January, a woman was arrested and taken to Heathrow IRC. She left on 2 February for Manchester RSTHF, arriving at 00:20 on 3 February. Later on 3 February, she arrived at Derwentside. She left Derwentside on 15 March for Manchester, leaving Manchester at 00:45 on 17 March and arriving back at Heathrow IRC for the purposes of a High Commission interview, at 04:30 (the timing of this journey is particularly problematic if she needed to attend an interview). On 21 March, she left Heathrow for Manchester and the next day arrived back at Derwentside again.

On 11 April, a woman was detained at London Heathrow airport and taken to

Heathrow IRC. She was transported to Manchester RSTHF on 16 April, to Derwentside on 17 April, then back to Manchester on 19 April.

- On 23 April, a woman was released from HMP Peterborough and taken to Yarl's Wood IRC in Bedfordshire. On 25 April, she was taken to Manchester RSTHF, arriving at 02:30 and leaving again at 07:00 for Derwentside. HMP Peterborough is about 3.5 hours' drive from Derwentside.
- In January, a resident was taken from Derwentside to Manchester RSTHF during the night, and then on to Heathrow IRC for a removal flight. The removal was cancelled at the last minute and she was taken back to Heathrow IRC. She refused on two occasions to transfer back to Derwentside, because she said she felt "messed about" and "passed from place to place".

**5.1.6** In May, the IMB was informed of a plan to transfer six women per week from Yarl's Wood to Derwentside, but this did not come to fruition, largely, we understand, because the women refused to leave Yarl's Wood.

## **5.2 Accommodation, clothing, food**

**5.2.1** Accommodation is provided in three single-storey residential units set around an open, grassed area. Over the year, flower beds and borders have been created which, through the efforts of the women themselves and with support and encouragement from staff, have greatly enhanced the outdoor space. Visits, activities, the gym and healthcare are in separate buildings close by. Women have free access to all parts of the site, apart from short periods at mealtimes and after 9pm, when they have to stay in their own units but are not locked in their rooms.

**5.2.2** Sleeping accommodation is mainly in single rooms, although some rooms are double. The accommodation was extensively re-furnished before the centre opened in 2021 and remains in good condition, clean and with good access to natural light. Each unit has two communal areas, with attached laundry rooms, a small servery and two large tables for eating. A multi-faith room is also provided. Temperatures inside the units are consistently warm, even in winter months. Food is trolleyed down to each unit from a central kitchen.

**5.2.3** Mobile telephone reception and Wi-Fi availability have been problematic in the residential units, some more than others. This impacts the detained women's contact with family and friends, as well as the functioning of translation devices (see 5.5.5 and 7.3.1).

**5.2.4** Towards the end of the year, there were considerable problems with laundry facilities. A number of washing machines and dryers broke down and the delay in sourcing spare parts or replacement appliances created challenges in managing the throughput of clothes and bedding needing to be washed and dried. Women became frustrated about having to take their laundry to other units, particularly as numbers increased, and about clothing being dried on radiators in communal areas and going missing. This was not resolved until February 2024.

**5.2.5** A further building on site, block 4, is yet to be fully completed. It is intended to accommodate a further residential unit, care suite, induction suite, cultural kitchen, salon and shop. Throughout this second year of Derwentside's operation, there has been considerable frustration at the slow progress towards these important facilities becoming available. A small shop and salon (without running water) have been



made available elsewhere and are greatly valued by the women. A cultural kitchen would provide a further opportunity for women to spend their time purposefully during detention. It would also go some way to alleviating some of the justifiable dissatisfaction about the food provided, as well as, like the other proposed facilities in block 4, improving the women's wellbeing and mental health.

**5.2.6** Whilst women are permitted to wear their own clothing, it is not unusual for women to arrive at Derwentside with very little property of their own, including clothing. In these circumstances, a basic pack can be provided by reception staff, typically comprising underwear, flipflops, jogging bottoms, tee-shirt and jumper. Thereafter, the welfare department have a clothing store that women can access should they need additional items. Welfare works with three charities to be able to provide clothes that are secondhand but in good condition, in a range of sizes.

**5.2.7** We do not underestimate the challenges to catering staff of providing meals that will satisfy the diverse range of nationalities, cultures and personal tastes of the fluid population of Derwentside. We understand that this must be particularly trying on a limited budget. However, whilst it is the case that we have had reports from women about meals they did enjoy, throughout the year there have been frequent expressions of dissatisfaction to Board members about the variety and quality of meals provided and the inadequate portion sizes. We have consistently observed a very high reliance on carbohydrates in menus provided.

**5.2.8** The high turnover of catering managers and staff has been a feature throughout the year and is ongoing. This lack of continuity has made it very difficult to progress any significant and consistent change. In addition, the two mechanisms in place for women to give feedback on the food on offer, positively as well as negatively, are not well used. The food comments books (more recently, a revised form), available on each unit, are not routinely accessed by women and when they are, it is not clear what happens as a result. Similarly, the weekly meetings for residents to meet with staff are not always well attended by residents and although there are examples of food-related issues being raised, again, it has not been always clear what, if anything, happened. Access to a cultural kitchen, which would provide women with an opportunity to prepare their own meals, would help to alleviate the dissatisfaction with the food, but as noted elsewhere, this is located in block 4, which is still to be completed.

**5.2.9** The shop plays an important role for some women in being able to access, at cost, different food options or supplements to the food provided, such as chilli sauces and other spicy condiments, for example. Although, for a variety of reasons, it may not always be possible, efforts are made by the shop manager to respond to requests from women for specific items to be stocked.

**5.2.10** During Ramadan, there was a proactive and positive response by catering staff, advised by the religious affairs manager, to meeting the needs of the albeit small number of Muslim women detained at the time. We have also witnessed examples of staff responding positively in relation to meeting the needs of women's specific dietary needs.

**5.2.11** The management of residents' food allergies has been a matter of concern, which the IMB pursued over a number of months after hearing a resident complain she had been given a meal containing an ingredient to which she was allergic – as declared at her initial healthcare screening. Our investigations revealed that

information about allergies was not making its way onto the unit serveries. Under Mitie, women chose from written, illustrated menus that listed common food allergens, but which were only available in English. At the end of October, Serco installed kiosks (self-service computer terminals) in each residence from which women can perform certain administrative tasks, including selecting their meals. The kiosks offer information in various languages but while the names of the dishes are translated, the ingredients remain in English. So choosing appropriate food and avoiding allergens depends on the person's understanding of English. One chef told the Board that any detained person who had a known food allergy would not be able to choose freely from the menu but would sit down at the beginning of the week with a member of the catering staff to choose suitable meals. As far as we are aware, this has not happened and we remain concerned about the robustness of the procedures.

### **5.3 Separation**

**5.3.1** Rule 40 (removal from association) was used on only three occasions in 2023: one for an assault on another detained woman and two for assaults on staff. The IMB was informed but was not provided with the paperwork for all three. The use of the power appeared to be appropriate in the light of the threat to other detained women or staff. Two of the women concerned returned to the residential units within 24 hours; the third, who had initially refused to engage with staff, within 26 hours. One of these women had serious mental health issues.

**5.3.2** The IMB visited each of the women in CSU and observed multi-disciplinary review meetings. With the support of residential staff, healthcare, welfare and chaplaincy, women were supported to return to the residential units as quickly as possible, when it was considered safe for them to do so.

**5.3.3** One of the women located in one of the usable rooms in CSU continued to be violent, smashing articles in her room and using broken glass to scratch her arms. This situation was also potentially unsafe for staff, who could not monitor her without opening the room door. But the rule 42 (temporary confinement) cells, designed to be used in more violent situations, are still not available for use, more than two years after the centre opened.

### **5.4 Staff and detained people relations**

**5.4.1** Throughout the year, the Board observed many interactions between staff and detained women that were positive and empathetic. There have been examples of impressive multi-disciplinary working towards achieving good outcomes for women, by challenging the system and escalating matters when the situation demanded. Our conversations with women have evidenced that many have valued the response of staff members to their need for support, often in trying and difficult circumstances.

**5.4.2** There has been a small number of complaints about staff attitudes or about staff not respecting privacy, for example, on entering bedrooms. In relation to staff attitudes, the Board has only seen the response to one complaint, so does not have all the information. With regard to the privacy issue, management issued reminders to all staff about the need to knock and wait at bedroom doors.

**5.4.3** The use of translation software for routine interactions is not as embedded as it should be – see 5.5.5.

## **5.5 Equality and diversity**

**5.5.1** The transient nature of the centre's population and the low numbers of women detained at Derwentside throughout the year (a maximum of 60 but often less than 30 at any one time) together mean that it is difficult to draw meaningful conclusions from statistical analyses of the population.

**5.5.2** The Board has continued to see throughout the year good examples of activities to promote tolerance and inclusion and celebrate diversity. Examples include celebrations of Chinese New Year, Holocaust Day, International Women's Day and Black History Month. We have seen a number of examples of regimes staff working with the chaplaincy and the Hibiscus Initiatives team (a charity supporting migrant women in prison and immigration detention) to organise events and encourage women to attend.

**5.5.3** There is an Equality, Diversity and Inclusion team in the IRC, with displays in the regimes corridor and on the residential units. A representative of the team will usually attend the Residents' Consultative Committee meeting and hold 'drop-in' events in the residential units, but these have not been well attended.

**5.5.4** There are rooms in the residential units that have been adapted for women with mobility issues. There is a lift to enable access to the regimes building and a ramp to support access to healthcare. However, because of the distances between the buildings and the fact that the site is on a slope, women with mobility issues often stay within or near to the residential units. It has been good to observe staff from across the centre taking activities to such women rather than vice-versa.

**5.5.5** Women detained at Derwentside are often unable to speak or understand English. As referred to in 5.2.11, kiosks were installed on the residential units to enable services such as meal ordering to be provided in a range of languages (although these have their limitations, as we have noted). Additionally, The Big Word is used for formal meetings with staff, such as ACDT reviews or appointments with healthcare. Unfortunately, despite these measures, there is still a gap in promoting inclusion across the centre. This can lead to social isolation for some of the women. The paid 'buddying' roles attempt to match women who share a first language, but we are not aware that this matching-up happens as a matter of course unless there is a paid buddy who speaks the same language. Disappointingly, we have rarely seen the use of tablets with translation software. On our visits, we routinely ask to use the tablets on each of the three residential units, but frequently encounter problems such as unavailability or inadequate Wi-Fi signal. The use of The Big Word requires an office with a landline and is not appropriate for less formal conversations. The availability of translation tablets and the encouragement of their use by staff and women could help to alleviate social exclusion.

## **5.6 Faith and religious affairs**

**5.6.1** There is a mixture of employed and volunteer chaplains in the religious affairs team. Christian and Muslim faiths are covered by a managing chaplain and two part-time chaplains, with volunteer chaplains from other faiths available to be called on as required. We are, for example, aware that Buddhist and Salvation Army chaplains have attended the centre and we were told that Jehovah's Witness ministers attended to run a bible studies class.

**5.6.2** Where there had previously been a Muslim prayer room and a chapel, there is now a single multi-faith room readily accessible to the women. Each residential unit has a small multi-faith room, with religious texts available for the women to use. Religious festivals are celebrated: for example, there was a carol service and nativity play at Christmas and a celebration of Eid al-Fitr following Ramadan. Inclusivity is encouraged: all women at the centre were invited to attend the Eid celebrations.

**5.6.3** The chaplains are involved in many aspects of life in the centre, such as attending ACDT reviews and supporting women who have been removed from association under rule 40: attending reviews and helping to support them in returning to the residential unit. The Board regularly sees chaplains on the residential units speaking to the women and they often have women visiting the chaplaincy office seeking their support. As well as spiritual support, the women often look to the chaplaincy for emotional and social support. We are aware, for example, that the managing chaplain arranged for a visitor to speak to a Bangladeshi woman who was isolated because of language barriers. We regularly hear positive feedback from the women about the support they receive: for example, the managing chaplain received a round of applause from women attending an RCC meeting.

**5.6.4** The chaplains are proactive in organising events for the women, working with other teams in the centre to celebrate, for example, International Women's Day and World Gratitude Day. They now also run a drop-in session for the women in the multi-faith room on Friday afternoons, where tea and biscuits are provided.

## **5.7 Complaints**

**5.7.1** The Board has limited information about complaints and how they are handled: the Home Office stopped providing central complaints data to the IMB early in 2023 and the information we have received relates only to complaints brought against the contractors, copies of which are provided to the IMB Chair. Numbers of complaints each month are low. Although the Chair is also supposed to receive responses to complaints, only one has ever been provided, which was about insulting language on the part of officers. We felt that the complaint was inadequately dealt with, in that the investigating manager appeared to accept the officers' accounts of an exchange between them and the complainant without interviewing her. We provided feedback to the contractor, which was accepted. The incident complained about took place under Mitie's tenure, but Serco handled the complaint during the transition period.

## **6. Health and wellbeing**

### **6.1 Healthcare: general**

**6.1.1** From the opening of the IRC at Derwentside in November 2021 until 30 September 2023, physical healthcare was provided by Spectrum Community Health CIC. The contract was taken over on 1 October 2023 by Practice Plus Group (PPG), which is running the service with an integrated team of physical and mental healthcare staff. All physical healthcare staff chose to transfer from Spectrum to PPG so the transition to a new provider for physical healthcare has been relatively seamless. The healthcare facilities at Derwentside are in a bright and spacious new block, separate from the residences. The individual consultation rooms are clean, spacious and well-equipped. A table in the entrance hall has a variety of health promotion literature in various languages, and feedback forms, again in various languages, for the detained women to give feedback about their medical treatment and make suggestions for improvement.

### **6.2 Physical healthcare**

**6.2.1** Nursing staff are available 24 hours a day, seven days a week. A member of the nursing staff attends review meetings for detained women on VACP or ACDT plans. They also attend the weekly adults at risk meeting, where detained people with particular vulnerabilities and/or complex needs are discussed, and their input is invaluable. A member of the healthcare team also attends the weekly residents' meeting. From speaking to detained women, the general view seems to be that healthcare staff are helpful, compassionate and provide a high standard of care. They have received praise, compliments and rounds of applause at the residents' meetings. One particular detained woman had diabetes, which was poorly controlled, and after her arrival, she was reluctant to engage with the nursing staff. By patient persistence, the nurses were able to gain her trust and the control of her diabetes improved significantly.

**6.2.2** We are aware of four complaints about healthcare services over the last year: one alleged that information recorded by the GP was inaccurate, another that the GP cut short a consultation, a third that the GP had declined to provide a wrist support and the details of the fourth were clinical and not shared with the IMB. The first three complaints were mentioned to IMB members during their visits, but in each case the detained person did not wish the IMB member to discuss their complaint with the GP. Given the number of women who have passed through Derwentside IRC this year, many with complex health needs, the number of complaints about the healthcare service is very low.

**6.2.3** The provision of GP services has improved since last year's report, with the recruitment of a second GP, and GP appointments are now available six days a week. There is an out-of-hours GP service if an urgent healthcare concern arises that cannot wait until the next planned GP session. Some of the nursing staff are able to prescribe, and the pharmacy service is generally good, with an out-of-hours service for urgent requirements. Women leaving the centre receive a written summary of their medical condition and treatment, and a seven-day supply of their medication.

**6.2.4** A dental service is provided by a nearby dental practice in a well-equipped surgery on site. A visiting optician provides a service to the centre, and a

physiotherapist visits on request. For any medical emergencies requiring hospital treatment, women are taken to University Hospital of North Durham, which is 12.4 miles away. Health-promotion events are held throughout the year and have focused on topics such as healthy eating, exercise and menopause awareness. Vaccinations against influenza and Covid-19 are offered, but we are told the take-up rate is low.

### **6.3 Mental healthcare**

**6.3.1** Under the previous contract arrangements, Spectrum sub-contracted the mental healthcare service to a team from Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV). When PPG took over the contract on 1 October 2023, their service model was to provide an integrated team of physical and mental healthcare staff. The team from TEWV elected to return to the NHS rather than transfer to PPG, which meant that a whole new mental healthcare team had to be recruited. Mental healthcare staff from other places of detention were temporarily seconded to Derwentside, and agency and bank staff have been used to fill gaps. The outgoing team from TEWV provided detailed information about the mental health needs of the detained women to ensure a smooth transition to the new team, and this seems to have gone well. There is a national shortage of mental healthcare staff, so not all the permanent posts at Derwentside IRC had been filled by the end of the reporting period, and recruitment is ongoing. A psychiatrist visits the IRC each once every two weeks, but there has been no success in recruiting a new psychologist since the last one left.

**6.3.2** Under the previous contract arrangements, mental health nursing cover was not provided at weekends and public holidays. We were aware of some women with significant mental health problems being admitted to Derwentside over a weekend or bank holiday, who waited two or three days before being seen by a specialist mental health nurse. Mental health cover is available seven days a week in other IRCs, and on discovering the gap in provision, leading to the unequal treatment of detained women, the IMB advocated with the Home Office for this to be introduced at Derwentside. Under the new contract, PPG are now providing mental health cover every day, weekends and public holidays included.

**6.3.3** Many of the women who pass through the IRC have been subjected to traumatic experiences. We have been impressed by the care taken by mental health staff, with a good example being of the woman referred to in 4.4.9. Another woman presented with serious mental health issues, leading to discussions about whether she should be sectioned under the Mental Health Act. We observed the efforts of the team to identify the best provision for her on release, but she remained in detention for nearly two months while decisions were made and the accommodation identified. It should also be noted that mental healthcare staff at Derwentside are able to provide therapy using a variety of techniques but, as the vast majority of women are detained for 28 days or fewer, there is generally insufficient time to complete a course of therapy.

**6.3.4** We remain concerned by the numbers of detained women with serious mental health problems who have been granted immigration bail but, nevertheless, remain in detention for weeks or months while appropriate accommodation is found for them or community support services are put in place (see also 7.2.2). This is something that the staff at Derwentside seem to have little influence over, despite diligent advocacy on the part of the healthcare team. While the detained women are

receiving therapeutic support at Derwentside that would be difficult to replicate in the community in some cases, this does not detract from the fact that mental health disorders are exacerbated in detention, which is not an appropriate place for such people.

#### **6.4 Welfare and social care**

**6.4.1** The welfare team carry out a vital function in pursuing a wide range of inquiries on behalf of the detained women. They run the detained duty advice scheme and the Board has observed them being proactive in this: for example, they booked a legal appointment for a new arrival after an ACDT review. We have heard women express their appreciation of the service, such as in helping one who needed a special diet.

**6.4.2** The charity Hibiscus also provides vital services, particularly in helping with resettlement.

#### **6.5 Exercise, time out of room**

**6.5.1** During the day, women can access most places on site and take advantage of the outside grassed area, with pleasant seating and outdoor gym equipment. Over the year, gardening has been encouraged, with beds and borders being dug and planted and a poly-tunnel built. Derwentside occupies an elevated and exposed site, so conditions are often not conducive to outside recreation. However, in good weather, this space is well used.

**6.5.2** There is a large very well-equipped gym, but over the year we have frequently noticed that it is not available for the women. It is also used for staff training and, for a period of time, was not accessible because of building work. In the last quarter, we found that it was consistently locked during the daytime. On enquiry, we were told that women could use the gym on request, which is not satisfactory. It is used much more in the evenings, for badminton, for example, which has reportedly become one of the most popular games on offer in the IRC. We have been told that yoga is also popular and is delivered in the residential units.

**6.5.3** Outside events have been arranged in the summer months and have been well received by residents. These have included health-promotion sessions, tie-ins with cultural festivals and a sports day with a BBQ.

## **7. Preparation for return or release**

### **7.1 Activities, including education and training**

**7.1.1** One of the most used and popular facilities available to the women is the library. It stocks a range of books, the majority in English, but some in a number of languages, both fiction and non-fiction, together with a sizeable collection of DVDs for women to borrow. Women also congregate in the library to do craftwork such as knitting and colouring, particularly now the arts and crafts room is almost permanently closed. There are also seven computers for the women to use. Unfortunately, problems have been encountered since the transition from Mitie to Serco IT systems which has reduced user ability to access some functions previously much valued by residents, including sound, family video downloads and access to some websites.

**7.1.2** The English and Maths teacher left mid-year and their replacement was not in post by the end of the year, with the education room being used as storage space. Last year's report noted the positive contribution the arts and crafts teacher made to the lives of women detained at Derwentside. Evidence of the work produced is still exhibited around the centre and was a talking point and source of pride for the women involved. One piece of artwork merited entry in the Koestler Awards for arts in criminal justice. Unfortunately, this teacher also left in August and has not been replaced, and the room is closed. It is said to be available to the women on request, but that depends on the availability of trained staff members. There has been a noticeable decline in the arts and crafts offer and output in the centre.

**7.1.3** The IT teacher provides initial assessments in English, Maths and reading for women who want to access educational courses, which also include Open Learn, an Open University package. From September, Serco introduced a virtual college, which offers online courses in 48 subjects, including practical subjects such as Food Safety. This is a positive contribution to the educational curriculum at Derwentside, although the courses are only available in English, a limitation that affects women's ability to take up paid employment in the centre, as qualifications are required for roles such as working in the servery.

**7.1.4** There are currently 20 paid jobs that women can apply for: two education orderlies, eight cleaners, one shop orderly, three servery helpers and six buddies (women who are matched with new admissions to help with orientation to the centre and translation). Although women who take up these jobs report they enjoy having something to do, not all the posts are filled. The pay remains at £1 per hour for up to three hours per week, the same as it was when paid work was first introduced across IRCs. As we observed in our 2022 report, it seemed low then.

**7.1.5** Overall, the activities and education provision has reduced over the reporting year, particularly since the main contractor has changed. We do not consider the provision to be adequate, as many of the women we speak to tell us they are bored.

### **7.2 Case management and access to legal advice**

**7.2.1** There is no legal time limit for immigration detention. In the Board's view, this adds to the anxiety and stress experienced by the women, many of whom suffer fragile mental health. The Home Office detention dataset table, showing numbers of women leaving detention from Derwentside and periods of detention during 2023, is



reproduced in Annex A of this report. It reveals that 373 women left detention at Derwentside during 2023. The data show that 83% of women leaving detention stayed for 28 days or fewer, and 56% for 14 days or fewer, which is positive.

**7.2.2** Despite this, as in 2022, there were some examples of women being held at Derwentside for long periods, sometimes even after their release on immigration bail had been authorised. Five women stayed between six and 12 months. This is often because of difficulties in securing suitable accommodation or having accommodation approved by the Probation Service. A woman with serious mental health issues, referred to in our 2022 report, was not released until February 2023, even though her release had been authorised in July 2022. Another woman – an AAR Level 2, which means that there was professional and/or documentary evidence that she was an adult at risk and, hence, vulnerable to harm in detention – was detained for around 200 days. She was granted bail and applied for asylum accommodation in early April but was not released until August. In those four months, the Board was concerned that she was becoming increasingly institutionalised, something we have also seen in other women held beyond their authorised release because of accommodation problems. At the time of writing, in March 2024, there is a woman who has been held at Derwentside for more than six months, even though bail was approved, in principle, in November.

**7.2.3** There were also women who complained to us that they were being held for weeks or months, even though they had agreed to return to their home countries voluntarily. Sometimes, their return was held up while decisions were made about outstanding prosecutions. The DET team were helpful in answering the Board's queries about this and, more importantly, were available to the detained women. They have a visible presence around the centre and run weekly drop-in surgeries.

**7.2.4** Monthly figures provided by the contractor indicate that an average of 61% of women leaving Derwentside are released on immigration or magistrates' bail<sup>6</sup>, rather than being removed from the UK. Of the remainder, most are transferred to Manchester RSTHF and we are not aware of their ultimate destination. However, one woman we encountered illustrates the questions that arise around the purpose of detention and the delays inherent in the criminal justice and immigration enforcement processes: she was released from prison in 2020; a deportation order was not issued until July 2021; and she had been reporting in the community until she was detained in March 2023. She had serious mental health conditions and multiple scars on her arms from previous acts of self-harm. She was said to be barrier-free for removal from the UK but in May, after nearly two months in detention, she was released.

**7.2.5** The Detention Duty Advice scheme, which provides free, initial advice for people in detention, generally worked well during the year: visits were in-person with waiting times of only a few days. In the later part of the year, there were only two firms on the roster, both from Bradford, and there were occasional appointment cancellations. Many women arriving at Derwentside from other centres already had

---

<sup>6</sup> Source: Monthly figures from Mitie (January to August) and Serco (September and December) about women leaving detention and their destination. No figures provided for October or November.

solicitors in place and women we spoke to during our visits told us they had solicitors acting for them and that they were able to contact them.

### **7.3 Family contact**

**7.3.1** In our 2022 report, we highlighted the poor mobile phone reception at Derwentside and the impact it had on contact with friends and family. We recommended that the Home Office take steps to improve the communications infrastructure. This recommendation was accepted and, in its action plan, the Home Office reported that systems were in place to introduce Wi-Fi calling, following a pilot at Gatwick IRC. Although this was described as a “priority piece of work that will proceed as soon as possible”, Wi-Fi calling has not yet been introduced at Derwentside.

**7.3.2** Derwentside’s remote location makes it difficult for families to visit. We do not have figures for the total number of in-person social visits, but our impression is that there were more in 2023 than in 2022. The contractor started to provide taxis to transport family members to the centre from Durham train station, which helped to reduce the costs of visiting. Durham Visitors’ Group continued to visit and held weekly drop-in sessions, but uptake from the detained women was disappointing. Women are also able to contact their families via Skype video calls.

### **7.4 Planning for return or release**

**7.4.1** When women leave Derwentside, they are generally either released on immigration bail or transferred to another immigration facility, usually Manchester RSTHF. Concerns about the timings and reasons for the internal transfers are highlighted elsewhere. Where the reason is for removal from the UK, the women will generally be taken to Manchester, then to Heathrow IRC before removal. This means the whole process can take three days or more, with women being moved out of Derwentside at least three days before their flight date. Hibiscus provides valuable international resettlement services for women being removed from the UK.

**7.4.2** When women are released on bail, they will generally be taken to Durham train station by taxi for travel to their accommodation. They are given a print-out of their train journey, a packed lunch and £20 in cash. On occasions where women are considered to be particularly vulnerable or in need of assistance, they will be driven to their accommodation. The woman who was released in February (see 7.2.2) was driven by staff all the way to south London, as they felt she might not cope with the train journey alone. Another woman, whose case was highlighted above (4.4.9), was provided with a taxi to take her to her release accommodation, but in a worrying development she got out of the taxi at a service station and went missing.

**7.4.3** The Board has been impressed by the care taken by staff in organising onward journeys. One woman was being released to an address in Belfast in May and was unable to fly because she had no photographic identification document. We witnessed staff going to great lengths to organise her journey by train and ferry, working out the best times in an attempt to make it as easy as possible for her. In another thoughtful touch, Mitie provided floral plastic holdalls for women who had no proper luggage (many having been detained in only the clothes they were wearing to report in). Unfortunately, Serco have reverted to the checked bags that are usually associated with homeless people.

## 8. The work of the IMB

**8.1** We have worked hard to build and train a strong local board at Derwentside, with the assistance of experienced monitors who were dual-boarding. Monitoring visits take place at least weekly, and we meet monthly with the contractor, DS, DET and healthcare to discuss our findings and raise any concerns.

**8.2** We regret to say that we have continued to experience difficulties with practical matters in 2023. The most serious of these was the months-long delays in giving the Board access to first Mitie's, and then Serco's, IT systems, which meant we were denied access to the digital records of the IRC. This was not resolved until early 2024.

### Board statistics

Recommended complement of Board members	14
Number of Board members at the start of the reporting period	6, including 2 dual-Boarders
Number of Board members at the end of the reporting period	7
Total number of visits to the establishment	282

### Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation including laundry, showers	0	0
B	Use of force, removal from association	1	0
C	Equality	0	0
D	Purposeful activity including education, paid work, training, library, other activities	0	0
E 1	Letters, faxes, visits, phones, internet access	0	0
E 2	Finance including detained people's centre accounts	0	0
F	Food and kitchens	3	1
G	Health including physical, mental, social care	0	
H 1	Property within centre	0	1
H 2	Property during transfer or in another establishment or location	0	0
I	Issues relating to detained people's immigration case, including access to legal advice	0	0
J	Staff/detained people conduct, including bullying	0	5
K	Escorts	2	0
L	Other	1	1
	<b>Total number of applications</b>	<b>7</b>	<b>8</b>

## Annex A

### Home Office data on lengths of stay at Derwentside IRC

People leaving detention from Derwentside IRC by month and length of detention, 2023													
Length of detention	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
3 days or less	1	0	0	2	5	1	0	2	1	0	1	1	14
4 to 7 days	6	6	6	2	0	4	3	5	6	6	5	6	55
8 to 14 days	11	11	26	5	9	13	6	19	13	11	5	13	142
15 to 28 days	10	14	11	2	8	7	14	2	9	12	5	6	100
29 days to less than 2 months	3	3	2	4	5	4	2	1	4	2	6	1	37
2 months to less than 3 months	1	1	1	1	0	0	2	1	2	1	2	1	13
3 months to less than 4 months	1	0	0	0	2	1	0	1	0	0	0	0	5
4 months to less than 6 months	0	1	0	0	0	0	0	0	0	1	0	0	2
6 months to less than 12 months	0	2	0	0	1	0	0	0	1	0	1	0	5
12 months to less than 18 months	0	0	0	0	0	0	0	0	0	0	0	0	0
18 months to less than 24 months	0	0	0	0	0	0	0	0	0	0	0	0	0
24 months to less than 36 months	0	0	0	0	0	0	0	0	0	0	0	0	0
36 months to less than 48 months	0	0	0	0	0	0	0	0	0	0	0	0	0
48 months or more	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total leaving detention</b>	<b>33</b>	<b>38</b>	<b>46</b>	<b>16</b>	<b>30</b>	<b>30</b>	<b>27</b>	<b>31</b>	<b>36</b>	<b>33</b>	<b>25</b>	<b>28</b>	<b>373</b>
Source: Home Office, subset of data published in table Det 04b of the 'Detention summary tables, year ending December 2023'													



This publication is licensed under the terms of the Open Government Licence v3.0 except where otherwise stated. To view this licence, visit [nationalarchives.gov.uk/doc/open-government-licence/version/3](https://nationalarchives.gov.uk/doc/open-government-licence/version/3)

Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

This publication is available at <https://www.gov.uk/government/publications>

Any enquiries regarding this publication should be sent to us at [imb@justice.gov.uk](mailto:imb@justice.gov.uk).