



Annual Report of the Independent Monitoring Board at Heathrow Immigration Removal Centre

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

Published April 2025



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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

Heathrow Immigration Removal Centre (HIRC, and the Centre), the largest of its kind in Europe, is located close to Heathrow Airport on the A4. It comprises two separate adjacent sites known as Harmondsworth IRC and Colnbrook IRC, separated by a service road. HIRC has a total capacity of 965 beds. The Harmondsworth site provides secure accommodation for up to 635 men, whilst the Colnbrook site provides secure accommodation for up to 312 men. The total number of people detained at HIRC throughout 2023 was 8284. A wing for accommodating women was closed in November 2023 and women are no longer detained at Colnbrook IRC.

HIRC is operated by Mitie Care & Custody (C&C, and Contractor) with healthcare provided by Practice Plus Group (PPG, and Healthcare Provider). There is a single management team across the two HIRC sites and some processes including visitors' reception and bookings, are managed centrally. All other facilities including segregation units, healthcare, faith rooms, cultural kitchens shops, gyms and activities, are replicated on both sites. Both sites have outdoor courtyard areas for recreation, fresh air, and team games such as football, basketball or cricket. There is also outdoor seating in each courtyard. There is no rain or shade cover. Computers with internet access along with Skype video call facilities are available on both sites. All bedrooms have a colour television with UK national channels and many international channels.

Harmondsworth site

The Harmondsworth site has two distinct styles of accommodation which vary depending on when they were built. Cedar and Dove are two older, hostel-style units usually housing men in twin-bedded rooms, accommodating 291 people. Those detained on these units are restricted at nights to their own corridors, each of about 20 rooms. Showers and toilets are shared and provided off each corridor. Dove has been closed for refurbishment.

Ash, Beech, Gorse and Fir are four residential units usually housing a further 165 detained people and was built to category B prison standard. The twin rooms contain steel bunk beds, a washbasin, and a toilet with no seat behind partial screening. Showers with three quarter doors are located off corridors. Self-service laundry facilities are provided on each unit.

There is a care and separation unit (CSU) with six rooms for detained people who are removed from association or temporarily confined under Rules 40 and 42 of the Detention Centre Rules. These rooms are very basic and contain one steel bed, limited furnishings, a toilet with no seat and a wash basin. There is a shared shower facility off the recreation space outside the room, which also contains a small dining table with a television fixed to the wall. There is a small, secure courtyard for fresh air, smoking and exercise.

Harmondsworth has the most extensive primary healthcare facilities in the immigration detention estate (IDE). It includes two six-bed inpatient wards, two isolation rooms, a pharmacy dispensary and numerous consulting rooms. GPs, dentists, opticians, mental health workers and other health visitors visit on a weekly basis. There was a podiatrist available but only for one month.

The approach to serving meals differs between the different units. In Cedar and Dove units, detained people visit a large communal dining room at set mealtimes. The room has large communal tables and seats enabling people to sit and eat together. In Ash, Beech, Fir and Gorse, meals are brought across on hot trolleys and served from a servery in the unit. Meals are mainly eaten in bedrooms, as there is limited seated communal space.

Colnbrook site

The Colnbrook accommodation in the four main residential units for men is arranged in twin rooms, 11 on each of the three floors. All rooms have a toilet with no seat and a washbasin in a partially screened off area and each unit has ten shower cubicles. Laundry facilities are provided on three of the units, which are shared across all four units. Colnbrook also contains a separate unit of 49 single rooms, which was used for medical isolation purposes during the pandemic.

The Sahara unit contains nine twin-bedded rooms, situated on the top floor of the separate reception and visitors' block, and was designated solely as female accommodation. It had a more relaxed regime than the men's units, with a lounge area equipped with sofas and a large screen TV, and direct access to IT facilities, cardio gym equipment, as well as crafts and games facilities. There is no direct access from this unit to fresh air, exercise yards or the shop; women were escorted for these activities at times when these facilities were not being used by the men. The Sahara Unit was closed down in September 2023 and is to be reopened as a male only unit.

There is a small care suite which comprises five bedrooms in a quiet and calm environment. The aim of this unit is to care temporarily for those individuals assessed as struggling to cope in the wider Centre. It is not designed to be a permanent residence, but to provide short-term respite whilst a longer-term solution is arranged, or resolution achieved. The facility is provided and managed by the Contractor rather than the Healthcare Provider.

There is a CSU with sixteen single rooms, six each on the ground and first floors, and four on the second floor. These rooms have basic facilities comprising a bed, toilet with no seat and washbasin. These rooms are only designed for very short stays, in line with Detention Centre Rules 40 and 42.

The Healthcare facility resembles a GP clinic and there is no inpatients' capability.

People in detention collect their food from a central servery and then return to their units to eat their meals. On the ground floor of some units there are communal tables where detained people can eat together, although there is insufficient space to enable all to do so.

3. Key points

3.1 Background to the report

3.1.1 The Board visited each site every week of the year. A major incident on the Harmondsworth site in November 2022 led to the site being closed for over 5 weeks, reducing the total capacity of HIRC to 330. The site was not fully reopened until mid-January 2023.

3.1.2 As in previous years, members visited at least once per week per site, and more usually 3 or 4 times. Some detained people made use of alternative means of communicating with the IMB through the dedicated 0800 number and the IMB central email address. However, contact remained overwhelmingly through face-to-face discussions whilst visiting the Centre.

3.2 Main findings

Safety

There were undoubtedly areas of concern, some longstanding, some new, that impacted the overall environment of the Centre during 2023.

3.2.1 The board has reached the consensus that the centre is less safe than previous years. There has been an increasing number of fights and assaults between detained people, an increasing number of assaults on staff and a number of frequent lock downs of individual wings. Increase in areas of concern are the number of throwovers, illicit drugs, vapes and phones. In 2023, 44 throwovers were recorded as compared to zero in 2022.

3.2.2 We remain concerned that people who are mentally unfit for detention are still assessed and approved by the Home Office Detention Gatekeeper for detention. The impact of Operation Safeguard wherein more Foreign National Offenders (FNOs) were held at the IRC on the conclusion of their sentence, increased the levels of violence and exposed custodial staff to a different set of challenges. The population of FNOs at the start of 2023 vs the end was 376 vs 109, the 376 representing 49.7% of the total population.

3.2.3 The IMB feels that failings of the detention engagement team (DET) to engage effectively may have contributed to feelings of frustration and powerlessness for some people detained at the Centre, potentially leading to incidents of self-harm. While the increase in population will have contributed to an increase in the number of acts of self-harming in 2023 there were 180 incidents of self-harm compared to 150 in 2022, any incident is one too many. We do not believe that the immigration detention estate (IDE) is an appropriate place for those who are mentally unfit for detention.

Fair and humane treatment

The Board concludes that there was an increased number of areas and circumstances in which detained people and those with mental health issues have not been treated fairly.

3.2.4 The fairness and humanity in which detained people are treated is severely tested by the dilapidated nature of the infrastructure at the Centre. The Board notes, in particular, the frequency of loss of services (power, gas, water and communications) throughout the year.

3.2.5 We are of the opinion that if the Centre is to continue to exist in its present location, significant investment is required to ensure its continued viability and to provide for the safety and security of the people detained here and all those who work within it. The delay in awarding the new contract by the end of 2023 resulted in a degree of uncertainty, which has affected the investment in the buildings infrastructure.

3.2.6 The Board recognises the difficulties encountered in catering for a diverse population of detained people on a limited budget but remains concerned about the effect the variety, quantity and quality of the food on offer is having on the physical and mental well-being of those detained, as well as on the safety and security of the Centre. There is a strong request for more fresh vegetables and more salad.

3.2.7 The CSU was used 52 times in the year to facilitate removal directions, in some cases a number of days in advance of flights which were then cancelled. The Board note that the CSU was used to house detained people who refused, to share a room when the Centre was nowhere near full capacity. Given the directions included in Rules 40 and 42 of Detention Services Order 02/2017 the Board does not believe that the CSU should not be used for these purposes.

3.2.8 The Board remains extremely concerned about the lack of DET engagement with residents throughout the year, which we believe has led to frustration, resulting in a number of incidents of concerted indiscipline self-harm incidents. While the Board is aware of the recruitment issues faced by DET, we continue to encourage the team to redouble their efforts to improve both the means and the frequency of their communications with detained people.

3.2.9 We have been told repeatedly by detained people that there is no point making complaints regarding contracted services, because they will not be properly investigated. The statistics for 2023 noted that a total number of 242 complaints were made, 77% of which were unsubstantiated and 9% were partly substantiated. The number of official complaints relating to the Contractor that were 'unsubstantiated' would seem to lend some credibility to these concerns. The Board considers that this is an area which could benefit from greater arms-length investigation. In our view, complaints should not in the first instance be investigated by Contractor officers based in the Centre. We believe this would help to build trust in the system.

Number of complaints in 2023 relating to the contractor

Unsubstantiated	204
Partly substantiated	21
Substantiated	21
Withdrawn	20
Allocated to HO	0
Total	266

Health and wellbeing

The Board concludes that in general, the health and wellbeing needs of people detained at HIRC are being met. However, there remain areas of concern.

3.2.10 At times staff shortages and a lack of escorts meant that hospital appointments had to be cancelled, leading to a worse health outcome for the detained person. In one instance, a detained man who became unwell at 7pm was told nothing could be done to help him until the next day, he was finally taken to hospital the next day at 1pm. There were 210 urgent hospital appointments in 2023 and 400 non urgent referrals to hospital.

3.2.11 While recognising the nationwide challenge related to healthcare recruitment, the Board has major concerns about ongoing personnel gaps being experienced by PPG and the potential impact on care for detained people.

Preparation for return or release

3.2.12 The Board repeats its concern for the fourth year running that too many detained people are held for unacceptably long periods of time without the prospect of imminent removal. The average length of stay in CB is 54 days and HW is 41 days. 5 men were held in HIRC for over 200 days each, with the longest stayer having spent 1,379 days before being released in July 2023.

3.2.13 The Board repeats its concerns about the time taken to find suitable accommodation for those granted bail, particularly for time served foreign national offenders (TSFNO). The population of FNO's is steadily growing. In 2023 the population at CB grew to over 44% and at HW the population grew to over 66%, levelling out to over 50% of the population by the end of the year. On top of the inconsistent communication between the Home Office, Probation Services and local authorities, the Board observed poor communication with the detained individuals themselves about their bail situation.

3.2.14 At Heathrow IRC there are training and educational facilities but more could be done to encourage detained people to make use of the available opportunities to gain various certificated qualifications.

3.3 Recommendations

TO THE MINISTER

3.3.1 The Home Office has a duty of care for those with mental health problems and to ensure that they are safe in the community they are released into. Robust support is required for detained people with mental health people who are released on bail.

3.3.2 The Board has many concerns regarding the application of Detention Centre Rule 35. There is an issue surrounding adherence to Home Office deadlines for responding to Rule 35 reports. After accepting receipt, responses to Rule 35 reports should be provided by the Home Office within two working days, and the response must be copied to the detained person's legal representative. All reports are reviewed, and the appropriateness of the individual's detention considered. A responsible officer must take prompt action to release the individual, if appropriate. Many of the Rule 35 reports are not responded to within the timeline of two working days and as a result, many adults at risks remained detained when they should have been released. The IMB observed many people that remained detained for more than 100 days and were still waiting to be released. This is an unacceptable practice. Priority must be given to those identified as an Adult at Risk and timelines regarding Rule 35 adhered to.

3.3.3 The Board consider Rules 40 and 42 are being misused. There were several instances in 2023 where Rule 40 and 42 have been used for prolonged situations. It is imperative that Rules 40 and 42 are used for the shortest possible time and as a means of last resort. It should not be used to hold mentally ill detained people or for those who refuse to share a room. CSU is not the solution to these problems. An alternative mental health pathway needs to be established to care for people experiencing mental health problems in detention. The IMB have observed prolonged detention in CSU to increase anxiety and the poor mental health of detained people, many of whom are already suffering from trauma.

3.3.4 More work is required to consider different ways of dealing with those who have mental health problems. There should be an increase in external mental health beds for people in detention who display increased or increasing levels of mental health problems. A clear mental health pathway should be made available to those with mental health difficulties, the detention centre is not an appropriate place and more collaboration to work with the NHS to provide the necessary mental health services and pathways to deal with these complex medical needs.

3.3.5 Funding should be in place to increase the security at the IRC to prevent the increasing levels of throw overs on the Colnbrook Site of the Heathrow Estate.

3.3.6 Increase the work between the Home Office, the Ministry of Justice and HMPPS to enable additional resources and funding in prisons to enable a seamless process prior to TSFNOs being transferred to detention.

TO HOME OFFICE IMMIGRATION ENFORCEMENT

3.3.7 The Board is very concerned about the deterioration in the mental health of many detained people and too many detained people are resorting to self-harm. It is imperative that appropriate support, care, and mental health services are promptly provided to individuals grappling with mental health vulnerabilities.

3.3.8 There are many people detained at HIRC who have been identified as Adults at Risk (AAR) Level 3 and who have been in the detention centre for more than 80 days. These individuals should be released from Heathrow IRC as soon possible.

3.3.9 People with severe mental health problems should not be detained in the CSU for extended periods of time. Detained individuals with severe mental health issues should be treated in a mental health setting external to the Heathrow Detention Centre. The Home Office should reduce the use of CSU for those who do not wish to share a room with another person.

3.3.10 The increased number of TSFNOs detained at Heathrow IRCs has led to a change in the demographic's population. This has led to increasing levels of assaults, verbal abuse, and racial abuse from detained people. It is important that a violence reduction policy is put in place to protect everyone in the Detention Centre.

3.3.11 The Home Office should improve the time scales for those that wish to return to their home country voluntarily. Any Delays to voluntary returns can exacerbates anxiety and mental health issues for detained people.

3.3.12 The Home Office should improve communication with HMPPS to ensure that all the necessary immigration paperwork is correct and complete prior to arrival in immigration detention. This will help prevent any delays for their return and reduce the

amount of time spent in Heathrow IRC. TSFNOs who wish to return voluntarily to their home country have experienced many delays because the wrong paperwork has been submitted, paperwork has been lost, or there have been delays in securing travel documents (ETD) and decisions relating to further criminal charges and missed flights. TSFNOs should only be transferred to the Heathrow Detention Centre if there are no barriers to return to enable a swift and seamless return to home countries.

3.3.13 The Home Office should strive to improve the communication between all the teams working within the Immigration centre/service, this includes the Probation Team, DET and the Courts.

TO HOME OFFICE IMMIGRATION ENFORCEMENT AND THE DIRECTOR/CENTRE MANAGER

3.3.14 The infrastructure at Heathrow IRC needs crucial investment, this includes heating, ventilation, electrical infrastructure, IT infrastructure and replacement of the core lift in Harmondsworth. It is very important to improve the living conditions of detained people. We urge the minister to fund improvement to the Heathrow IRC estate.

TO THE DIRECTOR/CENTRE MANAGER

3.3.15 The IMB would support broader use of the Colnbrook Care Suite for short term respite, particularly for detained people with deteriorating mental health conditions. We also urge the Contractor to replicate the Colnbrook Care Suite facility in Harmondsworth.

3.3.16 It is our view that improvements need to be made to the security of the Heathrow Estate. The contractor should work to reduce the number of throwovers and reduce the number of illicit drugs that enter Heathrow IRC. Addressing this issue should involve implementing stricter security protocol or enhancing surveillance and inspection procedures. The contractor should record/document the number of illicit drugs that enter the centre correctly, i.e. weighed, counted and documented.

3.3.17 The contractor should make every effort to reduce smoking in the units, as this could lead to fires. People in detention should be challenged about smoking inside the wings.

3.3.18 The contractor should offer meaningful activities during the day and evening to elevate levels of boredom. Practical activities would be welcomed that will enable people to gain meaning full/ Part-time employment when they reach their home countries or are released into the local community.

3.3.19 Ventilation systems within the Heathrow IRC needs a thorough overhaul as some wings are extremely hot or cold. There appears to be little that can be done to regulate the temperature.

TO THE HEALTHCARE PROVIDER

3.3.20 The Board found feedback from the healthcare team to the weekly questions and concerns set out in the IMB Rota visit report to be untimely and we encourage this to be improved.

3.3.21 Wait times for Rule 35 assessments vary and in some cases the wait time for an assessment is more than 14 days. This should be improved given the increasing number of people in detention that are considered an Adult at Risk.

3.3.22 The numbers of people experiencing mental health issues are increasing at Heathrow IRC. It is important that external mental health beds in the community are made available to detained people who present with a severe mental condition, that cannot be managed within Heathrow IRC.

3.4 Progress since the last report

Issue raised 2022 Issues and Concerns	Response given	Progress
To Home Office		
The policy which results in people with severe mental health issues being held in IRCs should be reviewed	Not accepted	<p>The IMB acknowledges that its 2022 recommendations were not adopted. However, the IMB firmly maintains that people with severe mental health conditions should not be held in the IRC. This practice must be reviewed to ensure people are placed in an environment that does not worsen their condition and which upholds humane standards. There is an urgent need for the HO to coordinate with Mental Healthcare in the borough of Hounslow to increase the number of mental health beds available. Currently only 2 mental health care beds are allocated to Heathrow IRC, which is inadequate with the number of emerging vulnerable detained people that are detained at the centre.</p> <p>The Care Suite is already being used to its</p>

		maximum capacity as a short-term gap for vulnerable detained people. Another Care Suite would be of benefit to the vulnerable people detained at the Harmondsworth site.
The Home office should consider ways of improving the MDT(Multi-Disciplinary Team) reviews in the CSU in order not to overcrowd or overwhelm detained people	Partially accepted	The Home Office should explore ways to enhance the effectiveness of Multi-Disciplinary Team (MDT) reviews in the Care and Separation Unit to avoid overcrowding or overwhelming detained people. This can be particularly intimidating for those with poor mental health. Establishing a dedicated safe area where detained people can feel at ease and freely express themselves would be a valuable step in addressing this concern.
The Home Office should fund a complete overhaul of the heating and ventilation system at HW and CB	Partially accepted	The heating and ventilation systems are under review, with some works scheduled for implementation. However, it remains unclear whether the entire system will be replaced. Over the past year, the heating and ventilation system has been inconsistent, requiring decisive action to ensure reliable and effective operation.
The Home Office should fund a complete replacement of the core lift in Harmondsworth,	Partially accepted	A dilapidation survey was carried out with a response due in June 2022. To date the IMB

vital for enabling detained people with mobility issues to access healthcare.		has not observed any action on this topic. The lift service continues to be erratic, and a complete overhaul would improve the access for vulnerable detained people.
To Mitie Care and Custody		
C&C should consider working more closely with the healthcare provider to maximise the value of the care suite for respite care for vulnerable detained people	Not accepted	Care and Custody and Healthcare are working collaboratively, with many healthcare initiatives introduced and supported by Care and Custody. While good care is provided to vulnerable people with mental health issues, prolonged detention has a detrimental impact, worsening their already fragile mental health. This issue is exacerbated by the critical shortage of mental health beds within the Hounslow community, requiring immediate attention and action. The Care Suite is already being used to its maximum capacity; in fact another Care Suite would be of benefit to the Harmondsworth site.
C&C should be more nimble regarding food selection to accommodate the varying detainee population. To help detainees with limited command of the English language, menus should always be provided with explanatory photos reflecting the choice	Partially accepted	The IMB has noted that meeting the diverse meal preferences has become increasingly challenging. To address this, significant progress has been made in enhancing the menu offerings. Changes include updates to lunch and dinner options, a simplified breakfast

available each week.		selection, and the introduction of a color-coded menu featuring picture symbols for better accessibility. Additionally, efforts are underway to develop The Cultural kitchen, aimed at providing detained people with a wider range of culturally appropriate food choices. Moving forward it would be of benefit to the detained population if C&C encouraged greater and innovative use of the Cultural Kitchens.
C&C should review the translator service from Big Word to one which enables access to a wider pool of translators.	Partially accepted	There has been no change in using this system. There is a need to explore other digital systems, that are portable and quick to access e.g. a tablet to be made widely available.
To Practice Plus Group (PPG)		
The Healthcare Provider should continue to review how they communicate with detainees, especially in relation to the role of the person they are seeing and the associated benefits- for example promoting the benefits of seeing a nurse. The Board observes that many detainees do not attend a medical appointment they have booked, as they are unsure about seeing a nurse instead of a doctor.	Partially accepted	Notable progress has been achieved in this area with the implementation of a triage system utilized by detained people. This system has significantly reduced wait times to see a doctor, ensuring detained people receive more prompt medical attention.

<p>The healthcare provider should review the high level of ambulance call outs given they have 24/7 fully serviced medical suites on site.</p>	<p>Partially accepted</p>	<p>The IMB has been informed that Healthcare encounters challenges in obtaining accurate data on the number of ambulance call-outs. To enhance the process, a paramedic has been appointed as the first point of contact for medical assessments. The paramedic will evaluate cases to determine the necessity of an ambulance. It is important to note that the paramedic's role is not intended to replace ambulance call-outs. In genuine emergencies, an ambulance will be summoned immediately.</p>
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Evidence sections 4 – 7

4. Safety

4.1.1 On arrival at the Centre, detained people's needs are assessed by both the Contractor and the Healthcare provider. The screening provided by the Healthcare Provider is described in Section 6.

4.1.2 The approach to the care and management of detained people who are at risk of self-harm and/or suicide is set out in Detention Services Order (DSO) 6/2008 entitled 'Assessment, Care in Detention and Teamwork' (ACDT). Detained people who are identified as such have individual ACDT care plans in which their state of mind, care and supervision must be regularly recorded. Anyone on an open ACDT or previously assessed as an Adult at Risk (AAR) level 3 is seen by one of the Contractor's safer community officers on or soon after arrival.

4.1.3 Although we have questioned the consistent application of some of the screening, particularly in relation to mental health, procedures are in place to establish needs and that, as a result, vulnerable adult care plans (VACP) are put in place where needed. The updated ACDT DSO implemented in August 2022, introduced new obligations for the Contractor and an overall strengthening of the care element. ACDT case coordinators must be on site at all times. The Contractor seemed well prepared for all the changes; however, early feedback on the new ACDT forms from staff has not been universally positive. The Board will continue to monitor their effectiveness.

4.1.4 Like other officers with decision-making roles, members of the Contractor's reception team are trained to level 3 safeguarding to enable them to identify issues which may need further care. Given an appropriate time allocation for each reception interview, it should be possible to achieve reasonably accurate assessments at this very early stage.

4.1.5 Although we tend to speak of one induction process, there are two systems running in parallel and fulfilling different functions: the induction into the Centre provided by the Contractor's staff covering everyday life and services, and the Home Office induction' detailing ways in which the detained people can find out more about the progress of their immigration case.

4.1.6 People arriving in detention are also given a 'How Do I?' leaflet by the Contractor, which is available in a multitude of languages and available in the Welfare Office and corridors in the centre between wings. This details necessary information about life within the Centre, including general topics (food, health, bedding etc.), legal (how to find their caseworker, how to apply for bail), activities (education, Open University courses, nationality meetings), and welfare (LGBT+ support and advice, tracing family, disability help, translator help etc.). The Board welcomed the advertising of the facilities and the many competitions available. The offer of the cultural kitchen was not taken up by all people in detention. The shops on both sides have expanded the offer of food. However, more fresh food should be made available like onions, lemons, and lettuce, to enable individuals to supplement their diet with food familiar back home.

4.1.7 The Home Office induction, which is the responsibility of the DET, covers ways in which people in detention can make contact with their engagement officer (EO) and find out more about the progress of their immigration case. Individuals are given a card

with the name and mobile number of their EO, together with a five-page document with details of the immigration bail process and a leaflet about the services offered by Hibiscus, a voluntary services organisation. Though throughout the year the DET service was improving, the Board still came across a number of cases where detained people fell through the net and were not inducted for several weeks. Detained people also continued to struggle to contact their allocated EOs, with calls going unanswered or to 'dead' numbers.

4.2 Suicide and self-harm, deaths in custody

4.2.1 Sadly there was one incident of death by suicide in custody at Colnbrook. A review of will be published by the coroner once completed. This incident did prompt some other incidents, including one mass-protest which was incited to draw attention to the frustration of detained people at the lack of progress in immigration cases.

4.2.2 A total of 576 ACDTs care plans were opened throughout the year for those identified as at risk of suicide or self-harm, up from 523 in 2022. This was indicative of the increase in the numbers of people detained in total. A further 59 people arrived at the centre with an ACDT already in place.

4.2.3 There were 180 acts of self-harm during 2023, up from 150 in 2022. Of these, 40 involved the use of improvised ligatures. Most cited frustration, either with their immigration case or at not being released, as the primary cause for their action.

4.3 Violence and violence reduction

4.3.1 In 2023, there were more incidents of violence in HIRC than in 2022. 131 incidents of violence between detained people were recorded of which 8 were classed as serious up from 60 and two in 2022, representing a notable increase year on year. Assaults on staff also significantly increased, at 54 of which five were classed as serious compared to 23 and one in 2022.

4.3.2 We continue to observe that staff work hard to minimise violent incidents through a variety of techniques, the most obvious being listening and talking calmly to detained people. A process of de-escalation through effective communication skills (when the detained person is agitated and threatening harm to themselves or others) has again been observed on numerous occasions to be a powerful and successful tool. Mediation and restorative justice are tools used frequently and successfully.

4.3.3 The Contractor's violence reduction policy was put in place in 2015 and is now reviewed annually by the designated senior manager and the safer communities' manager with the safer community meeting taking place monthly. The policy was reviewed and is supported by the Centre's Anti-bullying Strategy.

4.3.4 Verbal and written applications to the IMB from detained people about staff behaviour, including bullying, represented 4.4% of total complaints made throughout the year. While any incident is unacceptable, we do not judge 4% as excessive. On the whole they related to incidents where detained people were not happy with the rules that were being explained to them or the way these rules were communicated; for example, not being able to visit a friend in another unit or being reprimanded for smoking indoors.

4.3.5 Detained people are also able to raise official complaints, including those relating to bullying by staff, through a Home Office DCF9 form. There were 242 DCF9

Forms submitted during 2023, 149 in 2022. Of these, 19 were partly substantiated and 16 substantiated.

There were 77 local resolution complaints; three were partly substantiated, 18 substantiated, 50 unsubstantiated and six were withdrawn. There was instance of a staff member assaulting a detained person.

4.3.6 A reportable incident is defined by the Home Office and relates to incidents about which the Contractor is contractually obliged to inform the Home Office and other agencies (including the IMB). Examples of incident reports (IRs) include cases of self-harm, emergency hospital transfers, food protests and unlocked doors. There were 2,968 IRs in 2023 compared with 1,886 in 2022.

4.3.7 Security information reports (SIRs) relate to the general security and safety of the Centre. They may be an official incident but could also be an observation, feeling or anything that a person feels the Contractor needs to be aware of. In that respect they provide a useful sense check of the Centre's environment. There were 1,185 SIRs raised in 2023 compared with 1,042 in 2022.

4.4 Detained people with specific vulnerabilities, safeguarding

4.4.1 HIRC has provision for those with mental health problems, although the recruitment of mental health nurses was particularly challenging for the Healthcare Provider throughout the year. Through the Healthcare Provider there is access to psychiatric evaluation and to specialist nurses. However, we continue to maintain, as in the past five years, that detention is inappropriate for people with significant mental health issues unless there is a real prospect of imminent removal to a country where mental health support is available.

4.4.2 Despite the introduction of Home Office guidance, and the best efforts of officers who are not specially trained to meet the needs of detained people with severe mental health issues, we remain concerned that people who are mentally unfit for detention are still being detained and some remain detained for long periods. We do not believe that HIRC is able to take responsibility for those who are mentally or physically unfit for detention.

4.4.3 The Care Suite in Colnbrook is managed by the Contractor, not by the Healthcare Provider. It is an important facility for vulnerable people in detention and is intended to be used in crisis situations when a detained person is having difficulty coping. The decision to offer a detained person time in the Care Suite is taken by the duty shift manager in consultation with the duty director. In 2023 it was used 38 times (vs 39 in 2022); on each occasion the occupant was placed on an ACDT. Examples of trigger situations for an ACDT include family bereavement, depression, self-harm and anxiety.

4.4.4 The Board appreciates that the Care Suite is not intended to house detained people with mental health issues; it is there to support people in crisis. However, the positive impact of the facility on behaviour and ongoing challenges relating to the detention of men and women with mental health issues is such that we would support its more flexible use in a broader range of situations. Please note there is not a care suite facility in Harmondsworth.

4.4.5 The approach to ensuring that particularly vulnerable people in detention are brought to the attention of those with direct responsibility for authorising, maintaining

and reviewing detention is set out under Detention Centre Rule 35. Many people detained in HIRC present a case for Rule 35; specifically, that a) their health could be significantly affected by continued detention, b) a suspicion that they have suicidal tendencies, or c) a concern that they may have been a victim of torture. In 2023 there were 2531 Rule 35 applications in HIRC (vs 2,093 in 2022, 297 Rule 35's missed the mandated deadline for a decision. See also Section 6.1.9) There were 1,236 Rule 35 decisions made.

4.4.6 In 2023 the Centre looked after 116 detained people with physical disabilities, all of whom had VACPs raised and 92 people had personal emergency evacuation plans (PEEPS) put in place.

4.4.7 In reviewing the Contractor's Monthly Reports and in speaking with officers, the Board noticed a continual shift towards a centre more focused on individuals' needs and sensitivities. This is evident in the provision of stress-reducing activities through the regime's programmes and flexibility around access to activities. We commend the Contractor for these efforts, which despite some of the examples herein, we believe had a positive impact on the atmosphere across the Centre.

4.5 Use of force

4.5.1 The term 'use of force' describes an incident requiring the Contractor's staff to physically assist a detained person – this ranges from using a guiding hold to accompany a detained person, to handcuffs or body restraints to control movement. Use of force was required 281 times in 2023, up significantly from 58 in 2022 (handcuffs were used 71 times compared to 20 times in 2022 and guiding holds/pushes to create space were used 213 times. This trend of increased use of force is a concern to the Board.

4.5.2 The Board is supplied with data to show the breakdown of instances of use of force by nationality. We can report that instances in 2023 were almost entirely in line with their representation as a percentage of the Centre's population.

4.5.3 The Command Suite was opened 26 times in 2023 (up from 20 in the previous year). Of these, the majority were linked to incidents at height, concerted indiscipline or external protests. The Command Suite was operational during the death at Colnbrook. IMB members are always alerted when the Command Suite is opened and attend in line with the Board's incident management monitoring contingency plan. Our observations of those incidents we attended were that they were well managed.

4.5.4 The disproportionate size of the Albanian population (at times representing more than 50%) led to some tensions among the broader population, which resulted in some safety incidents. Examples included concerted acts of ill-discipline (repeated damage to property e.g. washers/driers) the above-mentioned courtyard protests about food and DET engagement and concerns about the lack of availability of literature in Albanian.

4.6 Substance misuse

4.6.1 There were 104 drug finds in the Centre in 2023, up from 71 in the previous year. Our working assumption remains that drugs (specifically spice though cannabis and cocaine has also been found) still make their way in. It therefore remains a serious issue that we will continue to monitor.

4.6.2 Drug detection dogs were used throughout the Centre on a regular basis, with three visits in 2023 (also three in 2022). We continue to see efforts being made to prevent drugs entering the Centre and training sessions are held regularly for staff to bring new hiding places to light, helping officers more easily spot instances of concealment. Investing in enhanced security measures at Heathrow detention centre is essential to ensure the safety of both detained people and staff. The presence of illicit drugs and contraband items within the facility has a detrimental impact on its overall environment and operations. Strengthening security protocols will help mitigate these risks and promote a safer setting.

4.6.3 There has been a significant number of incidents involving 'throwovers' from outside the centre. There were 44 recorded throwovers which is alarming when considering none were recorded in the previous four years. Most appeared to contain drugs (cannabis, spice, cocaine, and heroin) although lighters, vapes, iPhone and vodka were also discovered.

5. Fair and humane treatment

5.1 Escort, transfer and transport

5.1.1 C&C centre staff manage escorting arrangements for such things as routine hospital appointments. Detained people's movement beyond HIRC to other IRCs are organised by Home Office's Detainee Population Management Unit and managed by Mitie Escorting Services using ES vehicles.

5.1.2 The IMB Charter Flight monitoring team CFMT monitors and reports on the conditions and treatment of people removed from the UK on charter flights. Its remit begins when the detained person is transferred to the custody of overseas escorts in the IRC and ends at the point of handover to local officials at the receiving destination. It produces its own report, which details considerations regarding escorts and transfers and transport.

5.2 Accommodation, clothing, food

5.2.1 The accommodation is in line with a category B prison standard, with laundry facilities in each unit for washing of clothing and bedding. The Centres provides each detained person with towels, pillows and other bedding.

The facilities require significant upgrades, and the living conditions must be improved for the people detained at Heathrow IRC.

5.2.2 There is very limited recreational space for relaxing or mixing with others in the unit, other than within the individuals' bedrooms. Cedar and Dove are in desperate need of refurbishment (refurbishment of Dove started in November 2023). The Board considers that there should be substantial investment into the living conditions of people in detention.

5.2.3 Cleanliness is very inconsistent across the HIRC some wings have insufficient number detained people employed as cleaners which has resulted in high levels of uncleanliness. Lock up is in the middle of the day to provide an opportunity for cleaning, some units are cleaned well whereas others are cleaned to a very poor standard.

5.2.4 Damage to washing machines and tumble dryers remain frequent with machines remaining unfixed for periods of time. This results in clothes being hung over the railings in the wings to dry.

5.2.5 The nature of the shower provision varies according to the accommodation type, there are continuous problems with showers and toilets, blockages and bad smells continue. Many toilets are out of order. This is very common especially in Cedar and Dove. Problems with both shower and toilet facilities remained in 2023 with blockages and bad smells typically features of applications to the IMB. The Board has been informed that 'approval to proceed' has been given for improvement works to both the showers and toilets. However, the Board still awaits a confirmed date and associated timeline for such works to take place.

5.2.6 Detained people have access to their own clothing, which is kept in the secure property area. Anyone arriving in detention without property is offered a destitute clothing pack. This contains an assortment of clothes, including underwear, tracksuit bottoms, a t-shirt, a warmer top and shoes/flip-flops.

5.2.7 The board regularly tastes the meals that are served to detained people. The food is generally adequate. However, there have been many complaints about the food ranging from insufficient portions, the lack of fresh vegetables, fruit and vegetarian options as opposed to frozen veg. There were also complaints about the lack of variety and too many spices being used in some dishes.

5.2.8 Some detained people have been served with food that they could not eat for religious reasons. These people had indicated which menu options they would like and what would be acceptable, only to find when they went to collect their food their food option has been ignored. This leads to frustration and sometimes results with the individual walking away from the servery without any food. Some have become aggressive and abusive when denied additional food options.

There were 1,106 number of oral applications to the board (973 in 2022 compared with 1,106 in 2023).

5.2.9 There was a passive protest in September 2023 where some detained people refused to collect the food that was on offer, wanting more healthy food options.

5.2.10 The multicultural, ethnically diverse and changing nature of the population makes it challenging to cater to all tastes. Issues around the food at Heathrow has been brought to the attention of management. We urge the contractor to make on going improvements to the food that is on offer at Heathrow IRC.

5.2.11 Detained people can purchase additional food items from the Centre shops. This includes snacks and sweets, soft drinks, pot noodles, condiments. The choice on offer could be improved. There have been many issues at the shop including a poor queuing system, resulting in altercations and rude abusive behaviour.

5.2.12 There is a need to improve the security at the shop as this has been an area where aggressive incidents arise, and where staff have been assaulted as well as detained people. IMB members have witnessed detained people acting in a very aggressive manner and being rude to staff. More staff are required to ensure that there is orderly behaviour at the shop.

5.2.13 During the course of 2023 there have been numerous issues relating to heating and ventilation. Poor heating and ventilation had a negative impact on people in detention which has led to anxiety and worsening sleep patterns.

The Board concluded in its 2022 report at 3.2.4 that they are of the opinion that if the Centre is to continue to exist in its present location significant investment is required to ensure its continued viability and provide for the safety and security of the detained person and all those who work within it. This recommendation was partially accepted by the Minister of State for Immigration in their published Action Plan in response to the 2022 Annual Report (Reference M1). That Action Plan states that 'a ventilation report provided on behalf of the Ministry of Justice (MOJ) was shared with the contractor on 16 July 2023. The contractor has been asked to supply an action plan on what steps will be taken to achieve the rebalance/maintenance of the ventilation system to improve its effectiveness and efficiency'. This remains ongoing.

At the time of writing, in 2024, there appears to have been very little progress on this issue. This has not been helped by a decision that has now been delayed for another nine months in relation to the provision of a new contract for the centre.

5.2.14 There were two instances of loss of power, as well as the loss of water twice and the loss of gas twice and the loss of communication (IT). There is a need for refurbishment and major renovation to the core infrastructure at Heathrow IRC. We urge the Home Office to undertake a major programme of works that will improve the living conditions and environment of the detained people at the Heathrow IRC estate.

5.3 Separation

5.3.1 Rules 40 and 42 of Detention Services Order 02/2017 of the Detention Centre Rules ('the Rules') allow removal from association to the Care and Separation Unit (CSU) if an individual's behaviour is considered to be a threat to the safety and wellbeing of themselves or others.

5.3.2 The Rules contain mandatory instructions and specify, amongst other things, that the use of Rule 40 and 42 to segregate a detained person placing them into separate accommodation (the CSU) must be necessary; used as a measure of last resort; justified and proportionate to the risk presented; for the minimum time necessary in all circumstances; and that detained individuals should be supported to move back into normal association as soon as possible.

5.3.3 The Detention Centre Rules also make it clear that particular care is needed to ensure that Rules 40 and 42 are used for the shortest time possible and only as a last resort for individuals presenting with mental health problems.

5.3.4 In 2023, Rule 40 was implemented 375 times across both sites; Rule 42 was used 88 times. On a number of occasions, detained people were removed to the CSU using physical force.

5.3.5 As was reported in last year's report 2022, in general, the Board is informed promptly when a detained person is moved to CSU. All people held in segregation are prioritised for a visit by Board members when in the Centre. However, during the course of 2023, and as was detailed in the Board's 2022 Annual Report, there were a number of instances of the CSU being used for reasons which it was difficult to determine as falling within a legitimate application of the Rules.

5.3.6 These instances included removal from association of detained people who declared they were not happy to share a room for physical or mental health reasons; and people who exhibited mental health issues for which the Centre determined that CSU was the only viable option available. In both such categories there were a number of instances where detention in CSU was in excess of several months. The Board strongly question both the legitimacy and legality of initially placing detained people in the CSU. There must be alternative pathways to resolve these issues.

5.3.7 As per last year's report, the Board again argues that the Home Office needs to consider different ways of dealing with detained people who, for physical or mental reasons, feel incapable of sharing a room and/or display severe mental health issues more generally. The Home Office should not be using the CSU as a punishment for detained people who resist a request to share or simply become difficult to deal with as a result of their mental health issues.

5.3.8 In response to the IMB annual report 2022, the then Minister of State for Immigration, included partial acceptance of Reference M5 in his Action Plan for HIRC. M5 raised the wider issue of the Home Office's need to review placing people with severe mental health issues into IRCs. The Home Office pointed to the on-site HO

Compliance team's close liaison with PPG (one of the contractors), leading to a 'a number of individuals being transferred to secure mental health facilities, and these transfers now take place more quickly...'.

5.3.9 This does not address the legality and legitimacy of placing such individuals into detention in an IRC in the first place. The assertion that transfers now occur more quickly between IRCs and mental health facilities is also erroneous. This has not been the case throughout 2023 borne out by the data for those placed into detention, who are shown to be suffering from severe mental health issues.

There has been both an increase in those placed into detention in IRCs suffering from severe mental health issues and there has been an increase in the time it has taken in such situations for those individuals to be transferred to more appropriate settings.

5.3.10 In several instances no such transfer ever occurred, despite being requested. Rather, the Home Office concluded that detention of a certain individual was in fact inappropriate because of their mental health issues, having already detained the individual for many months in isolated confinement in CSU. In several instances the Home Office then proceeded to release the individual without any follow-on support. This is deeply concerning to the Board. Specific case studies such as the one included below demonstrate this issue further.

5.3.11 This situation has become worse not better over the course of 2023. The Minister of State's Action Plan for 2022 stated under Reference M5 that it did 'not agree that a wholesale review of the role of the Detention Gatekeeper is required at this time.' Respectfully, the Board disagrees and this annual report in conjunction with the data from last year's report strongly supports a complete review of both the policy around detaining those individuals with severe mental health issues in IRCs and the application of the Detention Centre Rules to use solitary confinement to then handle the issues such individuals present when in immigration detention.

Case study 1 Mr N detained in solitary confinement for 88 days with severe mental health issues:

Mr N raised mental health concerns upon his arrival into detention in 2023. He was referred to the mental health team and some of his interactions and comments were reported by C&C officers and raised by IMB Board members as very concerning. Mr N was then placed into CSU in Colnbrook as a result of damaging centre property.

Mr N remained in CSU for 88 consecutive days. His symptoms got progressively more severe. He was finally transferred to a Psychiatric intensive care unit where the in-patient assessment team stated that they had not seen a case this severe for several years.

5.3.12 The Board cannot understand the length of time Mr N spent in isolated detention quite aside from when one then considers the severity of the symptoms he exhibited.

5.3.13 The response that was frequently offered was that 'there's no alternative.' The Board finds this unacceptable for at least two reasons. First, that does not legally or legitimately justify Mr N's continued detention particularly in CSU. Second, there are alternatives, outside of an IRC setting that would be and ultimately were appropriate. But the eventual solution was arrived at far too late.

5.3.14 The Board appreciates the resource strains on the immigration system but suggests that is why the Home Office should review its policy for detaining this category of person in the first place. The Home Office should ensure that appropriate assessments are made around use of separation units when people present such issues whilst in immigration detention.

5.3.15 Whilst a detained person is in the separation unit, Rule 40(9) states that the manager, the medical practitioner and (at a contracted-out detention centre) an officer of the Secretary of State shall visit all detained persons who have been removed from association at least once each day for so long as they remain removed.

5.3.16 The Board suggests that this is part of the reason as to why HIRC sees detained people kept in CSU for several months at a time. A detained person cannot be removed under R40 for a period of more than 24 hours without SoS authority (R40(3)) and not for a period of longer than 14 days (R40(4)). It has become routine for Board members to visit detained people within any given month that have been confinement in the separation unit for over the 14-day period as per R40(4).

5.3.17 The Board appreciates and has direct experience of the challenges that non-communicative individuals in detention present for adequately assessing their condition and suitability for the relevant accommodation they are afforded. The Board suggests that in the case of justification for confinement in CSU, the absence of communication cannot support a decision to continue such confinement for longer than the maximum period specified under R40(4).

5.3.18 There were several instances in 2023 where the HO had decided to release individuals that had spent several months in CSU. However, because they were non-communicative, they remained in detention. Such examples demonstrate the current problems in the HO decision making process that such a situation is allowed to continue under removal from association rules. At the time of writing, this situation has continued in 2024.

5.3.19 In relation to vulnerable people in detention, the Board also has significant concerns regarding the application of Rule 35 (R35) and the associated Home Office accountability in relation to its use. **We understand that some of deadlines for Rule 35 were missed, which is extremely concerning for the Board.**

5.3.20 R35(1) of the Rules states that the medical practitioner shall report to the manager on the case of any detained person whose health is likely to be injuriously affected by continued detention or any conditions of detention and, under R35(4) that any report made in relation to this must be sent to the SoS without delay. In DSO 17/2012 it further states that a R35 report must be considered and responded to as soon as possible, but no later than the end of the second working day after the day of receipt. The DSO states that holding responses are not acceptable and responses must always be returned on time, regardless of other events close to the deadline.

5.3.21 There have been several instances in 2023 where the Board has discovered that this deadline of the 'end of the second working day' has been missed by a number of weeks, or in some cases, a number of months, as the case study below demonstrates.

Case study 2 Over 57-day delay in receiving a R35 response.

Mr A had a R35 assessment completed by a doctor at Colnbrook and the report was sent by the Home Office DET to the Home Office R35 team on the same day. The assessment had concluded that Mr A should be considered as an Adult at Risk Level 3 (AAR), the HO categorisation applied to detained people for which there was extensive professional evidence of their vulnerability. For such people, continued detention can then only be justified on a judgment that the immigration factors in the individual's case outweigh all other considerations.

The medical assessment included the doctor's recommendation that Mr A should not remain in detention owing to, in the doctor's view, positive evidence of scarring, nightmares, flashbacks and other trauma from previous torture.

Irrespective of the ultimate decision made by the Home Office, a response must be received by no later than the end of the second working day and as also stated, there are no acceptable mitigating circumstances for any delay to this.

5.3.22 A written reply was only produced 57 days later and then posted out, so at this point was still not received by Mr A. The written reply was only produced following two direct engagements with the Home Office and escalation to senior management level by IMB Board members. By the time the written reply was produced, the Home Office had decided to release Mr A. This delay is of serious concern to the Board. It appears that the R35 process had completely broken down in this case, not least because the HO only became aware of the issue when the IMB Board raised it with them directly. From that point it still took over four weeks before the HO could confirm a written response had been drafted. The response confirmed Mr A's status as AAR Level 3 and that his continued detention was assessed as inappropriate and the HO would be releasing him, at which point, Mr A had already been released from detention.

5.3.23 The Board asked the Home Office what After Action Review (AAR) / Lessons Learnt procedures the Rule 35 team conducted when there were such significant failings and how and by whom the team were held accountable. To date the only response the Board have received is as follows:

'The R35 team worked with the responsible casework team to establish all facts prior to drafting a response to Mr A, however actions of the Drafting Officer were not timely, and an unacceptable delay occurred, for which we apologise.'

5.3.24 One of the major issues this case highlights is the lack of accountability. The IMB Board were only able to make representations to the HO DET situated within HIRC. As was made clear, the R35 team are a separate HO team, and it was not possible to engage with them directly to understand how they review their internal procedures and what accountability there is when mistakes are made. The Board are still unaware of the answers to such critical questions raised in the case study above despite repeated requests for clarification and explanation.

5.3.25 Oral representations made by HO representatives to the Board gave examples of how casework team, DET and R35 teams had relevant inputs. Whilst the Board recognises the complexity of some of the facts involved in R35 decisions, the number of stakeholders involved does not excuse a late decision. Rather it underscores the importance of having a clear and effective internal process and policy with appropriate accountability.

5.3.26 Mr A's case was not an isolated incident in 2023. The Board has specific details of several other individuals whose decisions took several months to arrive, and, in several cases, the HO concluded their continued detention was unjustified. It is very difficult to assess the extent of the problem, and so more worrying, when the HO does not explain the reasons for delay and the accountability process for late R35 decisions. Particularly so when the failure rate for timely R35 decisions was at 24% for 2023.

5.4 Staff and detained individuals' relationships

5.4.1 Our observation is that the relationship between staff and detained people is generally good. Some Staff go above and beyond their duties, engaging with detained people in a respectful manner and listening to their issues. Staff are often caught in the middle, dealing with the frustrations of the detained people and lack of engagement from DET, Probation team and Home Office.

5.4.2 There have been a number of assaults towards staff taking the form of verbal abuse, racial abuse, physical abuse, aggressive abuse and sexual abuse. In 2023 there were 54 assaults on staff by detained people and five were considered serious. In 2022 there were 23 assaults on staff, and one was considered serious.

5.4.3 There have been several altercations between detained people. There were 131 assaults of which eight were classed as serious.

This pattern has increased This is due to the change in the demographic population of the IRC. The population make-up of the IRC population is unbalanced. TSFNO towards the end of the year reached over 50% in HW and 45% in CB. More TSFNs are being released from prisons and entering Heathrow IRC. The IRC is not set up for managing challenging behaviour, it is considered there should be a discussion with the HO around the timely removal of disruptive detained people.

5.4.4 The Board has serious concerns regarding the effects that Operation Safeguard has had on HIRC. The Board wrote to the Director of Detention Services to formally raise these concerns in October 2023.

5.4.5 One consequence of the increase to 50% of the HIRC population constituting TSFNs is that the free flow of detained people between units was more routinely restricted in 2023, a situation which continues. Lockdowns of individual units became more prevalent in 2023 and continue at the time of writing. Curtailment of regimes such as access to the library and other activities increased throughout 2023 as a result of the effects of Operation Safeguard and the further demands this has placed on already understaffed and under resourced Home Office and contractor teams.

5.4.6 The staff is very diverse, and officers take pride in finding a colleague who can speak the language or dialect of a detained person and hence can give more support. This is much appreciated from detained individuals and management alike. When conversations are carried out in the individual's own language, it eliminates some miscommunication and understanding, detained people calm down more quickly in tense situations when spoken to in their language of choice.

5.4.7 In 2023 detained people continued to experience a lack of engagement with the detention Engagement Team (DET), Probation Service and the Home Office. Detained people have raised a number of concerns and applications about the lack of contact, being allocated an Engagement Officer and being unable to make contact with their probation officers. Issues arising from the replacement of Engagement Officers, left

without updates about their case. The major concern has been that many requests have been made about voluntary returns under the Facilitated Return Scheme. Detained people have filled in FRS forms in prison prior to arriving at Heathrow IRC and it there is a 3-4 month wait in the IRC before they are returned to their home country. This leads to high levels of anxiety, frustration, and depression.

5.4.8 In November there was a passive/silent sit-down protests which started at 6.50pm and concluded with those involved returning to their wings by 8.30pm. 40 detained people were concerned about the lack of engagement from the DET team and unfair treatment from healthcare. Lack of engagement from the DET team is a persistent complaint from the people detained at Heathrow, which has led to an increase in incidences of concerted indiscipline.

5.4.9 The degree to which all aspects of the asylum process were communicated to detained people, the quality and quantity of information provided to those at risk of removal to Rwanda under MEDP were all areas discussed on a number of occasions at the IMB Board meeting.

5.4.10 The Board is concerned with the level of communication regarding case progression and particularly delays regarding the provision approved accommodation. There were frequent approaches to the IMB Board regarding the delays experienced by people who had been granted bail and remained in detention for weeks and months awaiting decisions on accommodation. This does have a negative impact on an individual's mental health. These issues are flagged repeatedly in our rota visit reports and Monthly Reports throughout the year.

5.5 Equality and diversity

5.5.1 HIRC has a number of diversity initiatives referencing protected characteristics which are well documented and regularly shared with detained people.

5.5.2 Physically disabled detained people can be, and are, accommodated within the Centre. Both sites have specialist disabled rooms which are larger than standard and have a wet room area within. Most stairwells have signage to remind detained people who struggle with mobility to ask for help. Both sites have lifts (only accessible if accompanied by a staff member with a pass) to enable access to different regimes on different floors for those with mobility issues. During 2023 the main lift in Harmondsworth from the ground floor to the Healthcare departments was out of action for a number of months. An injured detainee could not be escorted to hospital because the lift was out of action. This was brought to the attention of the Contractor on several occasions, noting the difficulties this was occasioning for both detained people and staff.

5.5.3 In 2023, 116 detained people were recorded as having a disability. Disabilities are identified through a variety of means such as interviews with the resident, medical screening on arrival, previous history, medical notes, and movement orders. Every resident who requires a care plan for disability undergoes an individual assessment and has an individual Personal Emergency Evacuation Plan (PEEP).

5.5.4 In 2023 the largest national population in the Centre was Albanian nationals 33.9% at year end. Other notably large populations were from India 12%, Poland 6.3.0%, Brazil 6.1% and Romania 5.1%.

Information throughout the Centre is available in a wide range of languages. In addition to officers speaking to detained people in their own language or dialect (see 5.4.4), The Big Word (phone interpreter service) is available.

5.6 Faith and religious affairs

5.6.1 A very wide range of religious activities and support is available in HIRC. All main faiths are catered for, including Christians, Hindus, Buddhists, Muslims and Sikhs. Detained people of Rastafarian and Jewish faith also receive religious support if required, although they do not have a dedicated place of worship.

5.6.2 All religious functions for Christians, Sikhs, Hindus, Buddhists and Muslims are celebrated in the same way in Colnbrook and Harmondsworth. The Board feels that religious facilities continued to be available to all worshippers of different faiths and were managed in a respectful and orderly manner. The pastoral care teams made up of and including the priest and imam, reached out to detained people on a personal basis by walking round the units.

5.6.3 The Centre contains a Christian chapel, a number of Muslim prayer halls, a Sikh gurdwara, an Orthodox chapel and a Buddhist place of worship. There is a plentiful supply of Bibles, Qurans and other religious texts and materials. Overall, the Board observed that the places of worship within HIRC are well maintained and religious needs are being very well met.

5.7 Complaints

5.7.1 Detention Services Order 03/2015 about handling complaints in immigration removal centres set out the guidance for the complaints process. This Order was recently updated (Updated February 2023) to clarify the handling, investigating and escalation processes for complaints relating to different agencies or areas of service, including the new Independent Examiner of Complaints which was introduced by the Home Office on 17 October 2022.

5.7.2 Complaints regarding healthcare must follow the procedure of Practice Plus Group, the manager of the NHS-commissioned service at Heathrow IRC. Healthcare complaints include issues such as appointments with doctors (for example, delays, waiting times or cancellations), prescribing and medication issues (for example; changes, errors, delays or refusal to prescribe), delays in obtaining referrals and staff behaviour, attitudes and communication.

5.7.3 Detained people can raise a complaint with the Home Office by completing a DCF9 form and placing it in one of many well signposted yellow boxes. All boxes should have supplies of the forms in multiple languages. However, we have found on numerous occasions that the complaint forms are missing from the side of the box. Detained people can write in the language of their choice, and the complaint will be translated upon receipt.

5.7.4 The Compliance team collect complaints from the boxes daily. They screen the complaints, log them locally, and send these to the Detention Services Complaints team who allocate these to the appropriate person or team. If upon screening the complaint it is perceived that there is an immediate risk to the safety of individuals (e.g., self-harm intent) or to the good order of the IRC (e.g., planned protest), then the officer would immediately alert the contractor to take the appropriate action. The standard turnaround for responses is 20 working days. If the complaint is of a more serious

nature e.g. serious misconduct, it can take up to 12 weeks as such allegations will always be referred to the Home Office Professional Standards Unit, in line with the DSO 02/2020 Commissioning of Investigations. The log used to record complaints will record the topic of the complaint itself, and the outcome of it (substantiated or otherwise). A copy of this is shared with the Board each month.

5.7.5 If detained people are unhappy with the response that they receive they are able to escalate the situation for an independent external review. This will now include the new Independent Examiner of Complaints, whose team is tasked with providing a case specific complaint and resolution service, available to those who have exhausted the relevant Home Office complaints process and remain dissatisfied with the outcome.

5.7.6 DSO 03/15 sets out that every effort should be made to respond to a complaint, even if the complainant has moved to a different centre, left the removal estate, or has been removed from the UK. Where no forwarding address or contact details for the complainant are contained in records accessible to the supplier or Detention and Escorting Services, the complaint response should be held on file in case of future contact.

5.7.7 Although the introduction of the new Independent Examiner of Complaints is to be welcomed, it is to be seen what impact this will have on a system which already has extremely long lead times.

5.7.8 Complaints are grouped into themes including minor misconduct, property lost/stolen, availability of service, physical environment, catering, and poor communication. In 2023, there were a total of 254 the greatest number of complaints related to minor misconduct (102, 40% of the total). Service delivery which includes, property lost/stolen, availability of service and physical environment amounted to 149 which was 56% of the total.

The greatest number of substantiated and partly substantiated complaints related to property lost/stolen, which resulted in compensation of £167.55 paid by the contractor to those who whose property was lost/stolen.

5.7.9 These concerns were also expressed in the applications received by the Board on rota visits. The top two subjects detained people wished to speak to the IMB about in 2023 were issues relating to detainees' immigration cases, including access to legal advice, followed by health, including physical, mental and social care. Accommodation issues, the use of force and removal from association, food and catering were also brought up frequently by detainees.

RECEIVED COMPLAINTS/CATEGORY

HEATHROW IRC COMBINED		Service Delivery	Minor Misconduct	Serious Misconduct	TOTAL
Jan-23	Harmondsworth IRC	1	3	0	4
Jan-23	Colnbrook IRC	1	1	0	2
Feb-23	Harmondsworth IRC	4	8	0	12
Feb-23	Colnbrook IRC	2	2	0	4
Mar-23	Harmondsworth IRC	5	1	0	6
Mar-23	Colnbrook IRC	1	1	1	3
Apr-23	Harmondsworth IRC	7	3	0	10
Apr-23	Colnbrook IRC	5	1	0	6
May-23	Harmondsworth IRC	5	3	0	8
May-23	Colnbrook IRC	19	14	0	33
Jun-23	Harmondsworth IRC	7	10	0	17
Jun-23	Colnbrook IRC	7	1	1	9
Jul-23	Harmondsworth IRC	7	8	2	17
Jul-23	Colnbrook IRC	6	7	2	15
Aug-23	Harmondsworth IRC	5	5	0	10
Aug-23	Colnbrook IRC	4	1	1	6
Sep-23	Harmondsworth IRC	10	6	0	16
Sep-23	Colnbrook IRC	8	3	0	11
Oct-23	Harmondsworth IRC	7	5	0	12
Oct-23	Colnbrook IRC	11	8	0	19
Nov-23	Harmondsworth IRC	7	3	0	10
Nov-23	Colnbrook IRC	5	4	0	9
Dec-23	Harmondsworth IRC	5	2	1	8
Dec-23	Colnbrook IRC	4	2	1	7
COMBINED		143	102	9	
% OF TOTAL		56%	40%	4%	
TOTAL		254			

COLNBROOK	Service Delivery	Minor Misconduct	Serious Misconduct	TOTAL
Jan-23	1	1	0	2
Feb-23	2	2	0	4
Mar-23	1	1	1	3
Apr-23	5	1	0	6
May-23	19	14	0	33
Jun-23	7	1	1	9
Jul-23	6	7	2	15
Aug-23	4	1	1	6
Sep-23	8	3	0	11
Oct-23	11	8	0	19
Nov-23	5	4	0	9
Dec-23	4	2	1	7
COLNBROOK	73	45	6	
% OF TOTAL	59%	36%	5%	
TOTAL	124			

RECEIVED COMPLAINTS/CATEGORY

HARMONDSWORTH	Service Delivery	Minor Misconduct	Serious Misconduct	TOTAL
Jan-23	1	3	0	4
Feb-23	4	8	0	12
Mar-23	5	1	0	6
Apr-23	7	3	0	10
May-23	5	3	0	8
Jun-23	7	10	0	17
Jul-23	7	8	2	17
Aug-23	5	5	0	10
Sep-23	10	6	0	16
Oct-23	7	5	0	12
Nov-23	7	3	0	10
Dec-23	5	2	1	8
HARMONDSWORTH	70	57	3	
% OF TOTAL	54%	44%	2%	
TOTAL	130			

Total number of approaches to IMB during monitoring visits, 2023

Approaches on rota visits 2023	Approaches CB	Approaches HW	Total No of approaches across the Heathrow IRC
UOF	57	35	92
Accommodation	20	15	35
Food	11	13	24
Health	82	190	272
Immigration	239	285	524

5.7.10 In total, 80.5% of the official complaints in Colnbrook made during 2023 were unsubstantiated. 76% of the official complaints in Harmondsworth made during 2023 were also unsubstantiated. Please note that these figures were from June-Dec 2023.

Detained people expressed their scepticism to members of the Board regarding the process for carrying out the investigation of complaints, suggesting that making complaints about anything was pointless. In respect of complaints about service delivery, this was especially the case regarding food and catering, for which the Board received many more complaints (49 in total) than the eight received by the contractor, all of which were unsubstantiated upon investigation. We would urge the contractor to ensure maximum transparency when investigating complaints.

5.7.11 Complaints about healthcare services and provision are managed directly by Practice Plus Group. We are not privy to the details for reasons of patient

confidentiality, although the healthcare provider shares the themes emerging and the numbers involved. Official complaints totalled 33 in 2023; whilst, as a Board, 272 of all concerns raised by detained people during 2023 related to healthcare issues.

5.8 Property

5.8.1 All detainees' property is kept in locked storage facilities on site. Detained people are able to take clothing, toiletries and personal items to their rooms, where they have very limited storage space. All property is logged on entry to the Centre, and although mistakes are sometimes made, on the whole this process appears to work well.

5.8.2 People in detention are able to request items of their property from the store as described above. These items often include important court documents. Those who have been in the Centre for a long time often need to change their wardrobes as the seasons change, so need to go through their property to find warmer/cooler clothing.

5.8.3 There is a limit of 23kg of property that can accompany a detained person on their return flight. To this end, staff will only accept 23kg in the Centre. This means that detained people are often faced with the difficult challenge of sorting through their property on arrival to determine what needs to stay with them and arrange for everything else to be collected / returned to family.

5.8.4 Property going missing can cause great anguish to a detained person. A recurring problem is property going missing between prison and HIRC where the detained person arrives, but their property doesn't. Whilst in most cases the property is eventually found and returned, it seems to us an unnecessary stress for people to go through. In one case, some very important items of a detained person's property did not transfer with him from prison. The apparent lack of coordination between prisons and HIRC regarding property is the source of some frustration.

5.8.5 All property received into the Centre is scanned for the presence of drugs. There were 104 positive substance finds in 2023, compared with 71 in 2022.

5.8.6 The Board receives complaints about property that was sent to the Centre by family and friends going missing. It is very hard for the Contractor to deal with these as there is often little evidence of what was inside a parcel. Detained people are compensated when their complaint is upheld.

6. Health and wellbeing

6.1 Healthcare general

6.1.1 HIRC has the largest and most comprehensive healthcare provision in the IDE. Healthcare delivery is jointly provided by Practice Plus Group (PPG), Barnet, Enfield & Haringey Mental Health Trust (BEH) and Forward Trust. BEH is responsible for psychiatrist and psychology provision whilst Forward Trust provides psychosocial interventions.

6.1.2 Services include GP clinics on both sites, six-day coverage by Mental Health nurses and regular phlebotomy, optician, and sexual health clinics. Dentists visit twice a week. In addition, the Harmondsworth site has two six-bed inpatient wards alongside two isolation rooms.

The IMB considers the healthcare provision to be substantial and to meet the needs of the detained population.

6.1.3 All detained people are given a face-to-face health screening on arrival and receive a healthcare information pack. There is good access to information about healthcare provision throughout the Centre, including information about how to book appointments on notice boards. Within the healthcare clinics themselves, information is translated into multiple languages alongside picture/visual notice boards.

6.1.4 Healthcare issues are regularly raised with the IMB by detained peoples: dissatisfaction with provision of medication, for example, or the time needed to obtain appointments, both in the centre and at hospitals; and that hospital appointments have been missed, usually because staff shortages have meant that officers are not available to escort detained people. Official healthcare complaints (routinely handled by the Healthcare Provider for confidentiality issues) totalled 33 (compared with 16 in 2022); After investigation, none were upheld.

6.1.5 The Board is updated on staff vacancies monthly and acknowledges the work of the Healthcare Provider in trying to recruit new team members. Nevertheless, staffing remained a key concern for the IMB throughout the year; at the end of the year 53% of the posts in healthcare were vacant. This is a very slight improvement on the 2022-year end figure of 59% posts vacant.

The IMB appreciates the pressures of recruiting into a high security environment. The security clearances required take time and can significantly impact capacity. We applaud every effort to fill the gaps.

Case study 3

A detained person had a serious injury and could not be escorted to hospital because of a shortage of staff. The injury was reported at 7.00pm on the 10th of October the individual was taken to the hospital at 1.15pm on the 11th of October¹. The lack of staff is very problematic, it means that in some cases urgent duties cannot be carried out and does impact negatively on detained people.

¹ The Home Office has been unable to verify the circumstances of this case study, as the detained person has been reported on anonymously.

6.1.6 Detained people have often expressed concern to the IMB about the wait times for Rule 35 reviews. The Board monitors the situation relating to Rule 35 applications, wait times and related application backlogs. The proportion of the Centre's population at any one time requesting a Rule 35 review varied between 9.05% in November and 19.7% in June.

The wait times for a Rule 35 assessment varied between 4.2 days in June and 17.3 days in July.

Figure 1 R35 requests compared with monthly population

	Jan 23	Feb 23	Mar 23	Apr 23	May 23	Jun 23
% of R35 request compared to monthly population	19.74	16.76	18.17	16.13	14.15	18.34
Monthly Population	856	1032	1255	1277	1406	1385

	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23
% of R53 request compared to monthly population	14.29	15.04	18.01	13.51	9.05	11.41
Monthly population	1421	1509	1710	1762	1756	1473

Figure 2 Maximum wait vs mean wait.

	Jan 23	Feb 23	Mar 23	April 23	May 23	Jun 23
Maximum wait	61	77	87	54	67	42
Mean wait	12.33	23.86	27.25	23.45	16.95	18.95
	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23
Maximum wait	173	67	60	95	68	45
Mean wait	18.32	21.02	24.94	29.40	15.67	18.41

6.1.7 Detained people sometimes require secondary medical care. In these events they are seen at the local Hillingdon Hospital and are escorted by Centre staff. Routine visit numbers rose to 400 during 2023 (up from 159 in 2022). As the detained population increased so too did the number of emergency hospital appointments (up from 135 in 2022 to 210 in 2023).

6.1.8 A risk assessment is carried out prior to every hospital visit to determine if handcuffs are required for the journey. In 2023, it was deemed that 67% of all visits required handcuffs (compared with 56% in 2022).

6.1.9 The IMB commends all efforts to ensure a level of emergency health care comparable to that in the community. However, whilst not medically qualified professionals, we continue to question the high number of emergency ambulance call outs particularly given the 24/7 fully equipped inpatient facility in HIRC. When challenged by the Board about this continued practice, the Healthcare Provider advised that some more risk-averse GPs will insist on emergency call outs when the nurse on duty may not agree. However, nurses cannot overrule a GP.

6.1.10 We would also encourage a detailed review of the importance, including value for money, of the X-ray machine in Harmondsworth. It has been broken for some time, to the potential detriment of care for detained people and effective use of resources. A decision should be taken about its future role at the Centre and action taken accordingly.

6.2 Physical healthcare

6.2.1 In July 2022, the Healthcare Provider started to provide the IMB with details on average waiting times for routine/non-urgent GP appointments at HIRC.

6.2.2 In general, most detained people kept to their booked appointments. A process is in place whereby patients receive a text message advising them to attend Healthcare. As necessary, the Healthcare Provider also uses a support DCO to try and contact patients to attend appointments.

6.2.3 The IMB monitors the levels of “did not attends” (DNAs) by appointment type each month. For nurse triage appointments the DNA rate varied between 1.4% in June and 3.4% in November (the comparable range for 2022 was between 2 and 12%). For GP appointments the DNA rate varied between 14.6% in July and 18.5% in December (compared with 9-19% in 2022). Figure 3 Appointments DNAs of all nurse triage clinics.

	Jan 23	Feb 23	Mar 23	April 23	May 23	Jun 23
% appointments DNA'd of all Nurse Triage Clinics Appointments Booked	1.9	2.5	2.4	3.6	1.8	1.4
	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23
% appointments DNAd of all Nurse Triage Clinics Appointments Booked	1.8	1.9	2.0	2.0	3.4	2.4

Figure 4 Appointments DNAd of all GP clinics

	Jan 23	Feb 23	Mar 23	April 23	May 23	June 23
% of appointments DNAd of All GP Clinic appointments booked	15.2	17.5	16.0	16.9	17.2	16.9

	Jul 23	Aug 23	Sept 23	Oct 23	Nov 23	Dec 23
% of appointments DNAd of All GP Clinic appointments booked	14.6	19.0	17.4	17.5	15.5	18.5

6.2.4 A Telemedicine Agreement was signed with Hillingdon Hospital in September aimed at minimising waiting times for planned appointments and reducing the number of hospital escorts. Discussions are currently underway to agree which conditions the Agreement will cover. The service is in addition to, not a replacement for, the current GP services provided at the Centre.

6.2.5 The offer of Blood Borne Virus (BBV) testing for Hepatitis C, HIV and Hepatitis B was introduced at Reception during 2022, along with retinal screening, as part of diabetes care.

6.3 Mental healthcare

6.3.1 Mental healthcare is provided throughout HIRC via GP appointments, psychiatrist appointments and support from mental health services. Many people in detention present with mental health challenges and the Board has often observed many complex mental health needs amongst the population.

6.3.2 Whilst the IMB believes that the provision of support within the Centre for mental health care is not suitable enough especially with detained people with complex mental health needs, the wait times for transfer to outside mental health facilities can be extremely long, and this only adds to the distress of those already suffering.

Case study 4

One detained person, Mr S, a Polish man, arrived at Harmondsworth in September from prison. He has cerebral palsy and learning difficulties. Though ready to return to Poland we were told by the Home Office that he has no family there willing to accept him and the Polish Government refuse to arrange his care, suggesting that the UK Government could approach a Polish charity for help. At the time of writing, he had been detained in Harmondsworth for six months; the Centre staff have done their best to help him, accommodating him in the residential healthcare suite, but this is far from ideal, especially as he has no easy access to the courtyards for exercise and fresh air.

The government-to-government issues are beyond our remit, but the case raises two other issues:

- As we have said repeatedly, the Centre is not suitable for detained people with mental health issues, or some/serve physical disabilities.
- There seems to be a lack of liaison between prisons and the Centre, whereby the prison could give advance notice of those offenders who are due to be transferred and who have complex needs or who pose other challenges. Early notification could speed up deportation arrangements.

6.3.3 As noted above, all new arrivals undergo a medical screening on arrival at the Centre as part of their induction. As part of this process, detained people can share information about any personal mental health issues. These details are passed on to the GP who will arrange appropriate mental health support.

6.3.4 In 2023, referrals to the mental health team, ranged between four in February and 32 in May (compared with a range of one to five in each month of 2022).

Figure 3 Residents with IMHT referral triaged

	Jan 23	Feb 23	Mar 23	Apr 23	May 23	Jun 23
Unique Referral Triaged	122	145	223	230	262	299

	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23
	283	269	257	263	291	219

Figure 4 – Residents added to MH caseload

	Jan 23	Feb 23	Mar 23	Apr 23	May 23	June 23
Unique Referrals Triaged and accepted onto IMHT case loads	5	4	11	11	32	25

	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23
Unique Referrals Triaged and accepted onto IMHT case loads	22	27	19	21	22	8

6.4 Welfare and social care

6.4.1 HIRC provides a wide range of welfare support for detained people, including help with lost property, immigration matters, filling out paperwork, contacting support groups, connecting with friends and family, and other personal matters.

6.4.2 A number of recognised NGOs including Hibiscus, JRS (Jesuit Refugee Service) and BID (Bail for Immigration Detainees) continue to support the Centre. The availability of the NGOs alongside details of the full offer from the Welfare Team is well promoted throughout the Centre. The IMB appreciates the work of both the Welfare Team and the NGO partners for their support of detained people.

6.5 Exercise, time out of room

6.5.1 HIRC has comprehensive sports and recreational facilities: fully equipped gyms, sports halls, and cricket/basketball (outdoor) areas; arts and crafts activities, floristry, cake making, a music room (including access to recording/mixing/production desks), IT rooms and a library. In addition to a large range of books in multiple languages, the library offers magazines and daily newspapers, as well as a large DVD rental library. Some of the time the activities room was closed due to the lack of staff.

6.5.2 HIRC operates a daily 'lockdown' period between 1pm and 2pm. This time is used for cleaning of the units and communal areas. The lockdowns are well managed, and detainees have not expressed any views on this practice to the Board.

6.5.3 Apart from the lockdown period, access to outdoor courtyard space is usually available to detained people.

6.6 Soft skills

6.6.1 The Board continued to be impressed by the excellent work undertaken in the art rooms. They remain a space of calm, pride and achievement. We commend the work in this area. Financial prizes are also offered by the Contractor to people in detention for their efforts in art work, design and sugar craft.

6.6.2 Both sites offer a large range of wellbeing activities, including yoga and meditation groups, and the cultural kitchen where people in detention can apply as a group to cook for one another to a recipe of their choice with all ingredients purchased on their behalf.

6.6.3 An impressive variety of cultural, sporting and other events were celebrated by the Contractor during 2023, using its own catering service. These included Eid, Christmas, Easter, Chinese New Year, in addition to pizza nights, carnival (with a steel band), Black History Month, celebration of Guru Nanak Gurpurab with saag paneer and Indian sweets and cakes, and the Coronation, with courtyard parties.

6.6.4 There are a number of paid roles available for detained people to apply for including cleaning, catering and working in the barbers. Roles are advertised and interested detained people are selected on a first come first served basis once approved by the Home Office. All jobs pay £1 an hour and under Home Office rules detained people can earn a maximum of £30 a week. Detained people who frustrate their immigration case are not eligible for paid roles. A total budget of £175,531 was spent on paid work during 2023. The rate of pay has not changed for some time and would benefit from a review.

7. Preparation for return or release

7.1 Activities including education and training

7.1.1 Detained people have many opportunities for education and training. These include English language courses, health and safety, CV writing, customer service and hair cutting/styling. There are also Open Learning courses available, including business modules. There are a number of ICT courses available most days including Excel, PowerPoint, Photoshop and Word. In addition, music and video editing, floristry and art classes are available. These classes are helpful in preparation for return or release, but it is unclear as to how much uptake there is of the classes. The IT room is always at full capacity. The IMB has noted that the library has been closed on several occasions due to insufficient staff to run it.

7.1.2 Many of the initiatives that existed in 2022 have been continued i.e. there is the opportunity to gain a fitness and nutrition level 2 qualification through the gym, in addition to nutritional courses, boxing and fitness classes. It may be the case that some detained people do not spend long enough in the IRC to gain a qualification. In the gym there are challenges with monetary rewards such as a prize for the maximum number of press ups performed within a certain time. The barber offers a course in barbering, including advice on being self-employed. There is also the opportunity to learn food hygiene for catering.

Month	Total Certificates issued	Of which External Certificates
Jan	58	23
Feb	No data	No data
March	55	24
April	70	23
May	82	25
Jun	102	31
Jul	177	74
August	66	24
Sept	68	28
Oct	65	29
Nov	No data	No data
Dec	86	39

The table illustrates the total number of certificates and the amount that were external qualifications.

We understand the library has been closed at certain periods, as there is shortage of staff to monitor educational activities. The library was shut 79 times in Harmondsworth and 45 times in Colnbrook.

7.2 Case management

7.2.1 The biggest issue on which the IMB was approached during visits was the difficulty detained people had in accessing both Engagement Officers and Case Workers regarding the progress of their case and their stages of detention. IMB follow-

up checks were not always concluded satisfactorily, as access to case workers by members is often not possible. Detained people become very frustrated with the lack of information regarding their case which can lead to mental health issues, self-harm and aggressive behaviour.

7.2.2 The longest stayer recorded was for 1379 days at Heathrow IRC.

The Board repeats our concern regarding people being detained in an IRC with no imminent chance of removal. The average length of stay was 35 days at Harmondsworth and 48 days for Colnbrook in 2023.

7.3 Family contact

7.3.1 Both sites have large visits halls for family and friends. Both welcome children and are well equipped with specialist play areas and equipment. The halls are large and airy with low tables and chairs around the tables, and the spaces are as welcoming and inviting as can be expected. The children's play area is particularly impactful and would certainly help a child visiting a loved one. Increasingly, the serving of snacks is done by a 'shop' managed by those in detention, stocked from the on-site shops. This provides a detained person a good opportunity to have a purpose as well as visitors to engage with a person not a machine. Visitors are searched before entering the visitors' hall. It is unclear if children are also searched.

7.3.2 The visits halls were open in line with general community restrictions. Though the rule on booking in visits was not always clear, the staff at the Centre were very accommodating when unexpected / unplanned visits were needed.

7.3.3 Overall there were 2,934 legal visits and 6,006 social visits. The Board strongly feels that visits are an important part of detained support and wellbeing.

7.3.4 Skype calls were well used by detained people and security approval is required prior to the call. The calls take place in a secure area within the IT rooms.

7.4 Preparation for return of release

7.4.1 Case Study 5 Mr X

This case demonstrates delays in securing Emergency Travel Documents (ETD) from the Chinese embassy and providing alternative accommodation once bail was granted.

The IMB raised this case in the August 2023 monthly report. Mr X, who has been in the UK for 26 years is keen to return to his native China as he feels a responsibility to look after his ageing parents. While it took months to secure any cooperation from the Chinese Embassy, who requested a proof that Mr X is indeed a Chinese citizen, an immigration judge also granted bail to him, yet the Home office was unable to provide him with accommodation. Mr X has also an outstanding NRM claim.

The Chinese embassy issued a one-way travel warrant for Mr X without recognising him as a Chinese Citizens thus without providing him with a Chinese ID card. We understand that without an ID card, Mr X could not even use public transport let alone work when back in China, he would be stateless with no rights. He had an expired Chinese passport in his possession, which would go a long way to persuade the Chinese authorities to recognise them as one of their citizens, when he had been arrested by police in 2019 for a criminal offence. Mr X told us that he had written many

letters to his caseworker, to ask whether the HO now had now passport in their possession and unfortunately had never received a response.

The IMB raised concerns regarding Mr X on a number of occasions. Due to an ongoing issue with IMB members being unable to access the Detainee Management System (DMS), the IMB could not ascertain what the outcome of this case was.

When requested, the Detainee Engagement Team (DET) was able to provide the following update; "As per our records, the resident was released on the 24/11/23, he was granted immigration judge bail, subject to tagging conditions."

This would indicate that Mr X was held in detention from at least August 2023 to November 2023, despite having been granted bail.

7.4.2 The above case study demonstrates a number of issues which the IMB frequently observes both on visits and within complaints received.

7.4.3 A common complaint is the lack of communication between residents, their case workers and the probation team. The IMB is often told by residents they are not given timely updates on their cases, and attempts to reach case workers often fails, leaving them unaware of the status of their case. This increases residents' frustration which often leads to a negative experience within the centre, feelings of isolation, and also can also exacerbate mental health issues within the centre.

7.4.4 The IMB came across too many instances where detained people who have agreed to be returned to their home nation voluntarily were left waiting for several months before they were returned.

7.4.5 There were several examples of paperwork being incomplete prior to removal directions being undertaken which resulted in detainees being moved back and forth unnecessarily.

7.4.6 When raised, responses have been given in some situations to explain that voluntary return still involves a level of complexity, and cases differ from one another, meaning whilst some residents may be able to return in a reasonable period of time, others may take much longer. The IMB feel that improvements in communication to explain these complexities to the resident, could provide them with an understanding and therefore ease their frustration.

7.4.7 Monitoring preparation for return or release in general is an important part of the IMB's work, to ensure transparency, fairness and accountability through the process and to assess whether detainees are being treated in accordance with legal and human rights standards and verify that all necessary resources and support systems are in place. The complexities of the return or release process can confuse detainees as to the merits of their specific detention. For example, the perceived inconsistency of how SCAs are handled resulted in several discussions with detainees as to why people arriving in to the UK on small boats were housed in hotels and they were kept 'in a prison'.

7.4.8 A number of issues arise around detention release from bail, and it is not always clear as to why, having been granted bail, a detained person is still in the Centre sometime later. This is often linked to the lack of communication with DET and probation teams. There is also a lack of HO accommodation for detainees to transfer

to. The IMB believes that once granted bail, more effort should be made by all key stakeholders to release detainees in a timely manner.

7.4.9 As the above case study shows, detained people may remain in detention for a significant period of time despite being granted bail. Quite often it is understood that the reason for this is a lack of suitable accommodation.

7.4.10 In some cases the reasoning for delays in the process is not relayed to the resident, therefore creating tension and frustration. The role of the IMB often allows for more speedy responses to resident's questions, and it is often found that the resident in question is satisfied and grateful to receive a response. This allows them to have a more realistic timeline of how long they are likely to be in the centre.

7.4.11 A common thread in this area is there is a lack of communication between the relevant organisations and detainees on the status of their case. It is felt that adequate communication would ease the feelings of frustration and tension in some cases.

8. The work of the IMB

8.1 Board members continued to carry out their work through conducting rota visits to the Centre throughout 2023. All members can be easily identified via posters which included our photos, which are located throughout the Centre. Detained people, even those with language barriers and / or mental health issues, appear to understand the role of the IMB and do seek us out to discuss their various issues. There are 11 clearly marked applications boxes in the Centre where people in detention can leave written applications for the Board. Members empty the boxes on each rota visit so detainees can be assured their concerns are acted on promptly.

8.2 The 0800 number that was set up in 2020 in response to the first lockdown has remained in place but is used by few detainees. Most detained people seem to prefer face to face interaction to the other avenues available.

8.3 Board members deal with the issues raised by detainees immediately, if possible, either with the Contractor, the Home Office or PPG. The Board member follows up any actions with the detained person and maintains a confidential written record. The top 2 topics for discussion in 2023 were the same as in all previous years - Immigration and Healthcare.

8.4 The size of HIRC and physical separation of the two sites means that we have separate teams for Harmondsworth and Colnbrook.

8.5 We dealt with 981 applications to the IMB compared to 973 on the previous year.

8.6 All Board members submit a rota report at the end of each visit as a record of actions taken on behalf of detained people. This report is circulated to all relevant parties, Home Office, the Contractor and PPG. As well as prompting action on outstanding issues, it helps drive continuity of support for individual detained people. We always encourage people in detention to use the official complaints system in addition to speaking to us as a formal complaint guarantees them a written reply.

8.7 All members were invited to attend mandatory training in 2022. In addition, the Board continued to hold monthly training sessions via Zoom during which specific topics were covered. We were, for example, pleased to welcome guest speakers from the DET team and Hibiscus (NGO) to two of our meetings to enhance our knowledge of their work and how we can work better together.

8.8 We hold a monthly board meeting with the Home Office, the Contractor and the Healthcare Provider. Papers are provided in advance of the meeting for reviewing and for preparation of questions.

8.9 The Board was disappointed to lose their experienced Chair in 2023. On a positive note, two new members joined during the year and further recruitment is underway. We encourage anyone reading this report to consider applying to join an IMB.

Board statistics

Recommended complement of Board members	18
Number of Board members at the start of the reporting period	8
Number of Board members at the end of the reporting period	9
Total number of visits to the establishment	Colnbrook = 80 times Harmondsworth = 98 times

Applications to the IMB

Code	Subject	Previous reporting year 2023	Current reporting year 2024
A	Accommodation including laundry, showers	62	32
B	Use of force, removal from association	66	108
C	Equality	1	3
D	Purposeful activity including education, paid work, training, library, other activities	15	10
E 1	Letters, faxes, visits, phones, internet access	9	13
E 2	Finance including detained people's centre accounts	8	6
F	Food and kitchens	49	26
G	Health including physical, mental, social care	225	247
H 1	Property within centre	15	27
H 2	Property during transfer or in another establishment or location	27	31
I	Issues relating to detained people's immigration case, including access to legal advice	413	431
J	Staff/detained people conduct, including bullying	40	41
K	Escorts	2	2
L	Other	41	12
	Total number of applications	964	981



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