

Response

of the United Kingdom Government to the report of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) on its visit to the United Kingdom

from 27 March to 6 April 2023

The Government of the United Kingdom has requested the publication of this response. The CPT's report on the 2023 visit to the United Kingdom is set out in document CPT/Inf (2024) 08.

Strasbourg, 8 February 2024

Introduction

The UK government does not recognise much of the content of this report and feels it does not accurately reflect the important work we undertake to ensure the safety and wellbeing of those in our care.

The UK has a longstanding tradition of fulfilling our human rights obligations and ensuring rights and liberties are protected. The UK Government is firmly against torture and does not participate in, solicit, encourage, or condone the use of torture or cruel, inhumane, or degrading treatment or punishment for any purpose. It takes its international responsibilities to prohibit and prevent torture, both as part of the Council of Europe and the United Nations, extremely seriously.

The CPT visited the United Kingdom in March / April this year as they sought to examine the treatment and conditions in detention of persons held under immigration legislation, both in immigration removal centres and prison establishments, and the effectiveness of the safeguarding procedures in place for vulnerable persons deprived of their liberty in immigration removal centres and prisons, accommodating both men and women.

The CPT asked for a number of updates concerning a full account of action taken by the UK Government to implement the Committee's recommendations, along with replies to the comments and requests for information formulated in this report.

Since this visit took place, the Illegal Migration Act 2023 has completed its passage through Parliament and received Royal Assent. This will confer new powers to detain individuals who have entered the UK illegally and are subject to the duty to remove set out in the Act, pending their removal and whilst a determination is made as to whether an individual falls within the duty to remove.

Below is the UK Government response to the recommendations.

Paragraph 8

The CPT recommends that the United Kingdom authorities ensure that all foreign nationals arriving in the UK have a right to apply for asylum in the UK and have their case processed in line with international refugee and human rights law before any attempts are made to return them to their country of origin or to a safe third country.

The United Kingdom is satisfied that its immigration processes are in line with international refugee and human rights law. This includes (but is not limited to) the measures introduced by Parliament in the Illegal Migration Act 2023, and last year in the Nationality and Borders Act 2022.

The courts have recently reviewed safe third country processes, as implemented under previous provisions, and found the principle to be lawful.

Paragraph 11

The CPT reiterates its recommendation that the United Kingdom authorities introduce a time limit for detention under immigration legislation.

There has been much debate about the introduction of a time limit on immigration detention. The introduction of a time limit would severely constrain our ability to maintain the right balance and uphold the integrity of the immigration system.

Our immigration detention reforms have focused on ensuring that all decisions to detain are made with adequate safeguards in place, that detention is used for the minimum period necessary and that people in detention are treated with dignity and with due considerations to any vulnerability concerns.

We continue to focus on these priorities, while tackling abuse of the immigration system.

Paragraph 24

The CPT recommends that all custodial and other staff are provided with ongoing training and support, notably in relation of inter-personal skills and cultural awareness, as well as appropriate oversight to ensure that they are capable of offering a supportive environment to persons held in immigration detention.

To work in the immigration removal estate, the Home Office must be satisfied that a Detainee Custody Officer (DCO) is a fit and proper person to perform custodial and/or escorting functions and has received appropriate training. Both elements are essential as set out in the Immigration and Asylum Act 1999. This means that DCOs must complete appropriate security checks and their initial training course to a satisfactory standard before commencing their custodial or escorting duties.

The initial training course for DCOs includes training on interpersonal skills, cultural awareness, equality, diversity, religion and issues relating to the social, political, climatic, economic situations of key countries. Training is refreshed annually and reviewed, as appropriate, to ensure it remains fit for purpose.

Non-custodial staff, including the onsite Home Office Teams and Healthcare, are also provided with specific training in relation to their roles within a detention environment.

Paragraph 25

In this respect consideration should be given to providing more sheltered space outside to enable the residents to enjoy fresh air even when it is raining or very sunny.

We recognise the importance of residents having access to fresh air and the Detention Centre Rules 2001 require detained persons to have the opportunity to spend at least one hour in the open air every day. As noted, at Derwentside residents have access to the garden area throughout the day, with sheltered seating currently available outside residential units and plans in place to install further transparent shelters in outside association areas to provide shelter during inclement weather. Residents also have access to clothing suitable for all types of weather.

Paragraph 27

Further efforts should be explored at both IRCS in consultation with the residents about rendering the environment less austere, such as installing plants on the landings.

We continue to keep the environment at IRCS under review and look at opportunities to soften accommodation, taking into account security arrangements.

Paragraph 31

The CPT recommends that steps be taken to maintain the residential areas in a good state of repair which guarantees a healthy environment, notably in Harmondsworth IRC. Further, resolute action should be taken to improve the airflow systems in both Brook House and Colnbrook IRCS and efforts undertaken to improve the environment of the prison-like units at both IRCS. The toilets should be fully partitioned from the rest of the cell and all toilets should be fitted with a toilet seat.

Ventilation within the bedrooms at Brook House IRC meets the requirements as set out in Detention Services Order 06/2018 Accommodation: Lighting, Heating and Ventilation. Ventilation of the building is tested during the annual ductwork inspection, where the duct is tested for cleanliness and air flow readings are recorded. Recommended actions from inspections will be taken forward as appropriate.

At Colnbrook and Harmondsworth IRCS, following a ventilation report, an action plan is being developed to achieve the rebalance/maintenance of the ventilation system to improve its effectiveness and efficiency. In addition, approved partitions to the toilets were provided in 2018, with additional works planned to improve the toilets at Harmondsworth IRC.

Paragraph 32

The CPT recommends that steps be taken at Brook House, Colnbrook and Harmondsworth IRCS to provide all the outdoor yards with shelter from rain and sun as well as to render them more inviting, including by installing some greenery.

Planning work has been undertaken at Brook House.

The courtyards at Harmondsworth and Colnbrook IRCS are enclosed, meaning that areas of shade are usually available.

Paragraph 33

The CPT recommends that increased efforts be made to meet the dietary requirements of the resident populations in all the IRCS visited, taking due care that menus contain the requisite daily requirement of proteins and vitamins.

Service Delivery providers are committed to continuing improvements in this area. Food and menus are an agenda item at the weekly Residents Committee at

Derwentside IRC (attended by the catering team), with feedback taken on board. Menus have been altered considerably since the Committee visited Derwentside and feedback on the quality and range of food available has improved.

The menus in place at Harmondsworth and Colnbrook IRCs have been devised and approved to meet the cultural and nutritional needs of the residents. The contractor holds monthly food forums with residents and provides feedback books in serveries.

In all centres, those who have specific dietary requirements (for example for religious or cultural reasons) are offered meals suitable for their needs. Residents are also able to purchase other items at centre shops.

Paragraph 37

In sum, the activities available were very good for short periods of stay. However, there should be a broader range of purposeful activities (vocational and work) for persons staying for longer periods; the CPT invites the United Kingdom authorities to develop such activities for the persons concerned.

A range of recreational and educational activities are provided in all IRCs. These vary between centres but include, for example, haircuts/barbers, gym facilities, cultural kitchens, arts and crafts, education and faith provision.

Education programmes started during a person's stay at Brook House can be continued and completed following release. Educational provision at Harmondsworth and Colnbrook IRCs is modular, enabling short term residents to engage in short courses, and longer-term residents to combine modules into longer term study.

Paragraph 40

The CPT recommends that steps be taken in the reception area of Brook House to stop the alarm going off every time the doors are opened as it undermined any attempts to offer a trauma informed approach towards new arrivals. Further, all new arrivals should be provided with an information brochure on the centre at reception.

The alarm issue has been resolved by the IRC service provider.

In line with Detention Services Order (DSO) 06/2013, individuals receive an induction upon arrival at an IRC and are provided with written information, where available.

Paragraph 42

The CPT reiterates its recommendation that the United Kingdom authorities review the procedures regulating the transfer of detained persons under immigration legislation to avoid them travelling at night and arriving at IRCs between the hours of midnight and 7:00. Further, women being transferred to Derwentside should be provided with information on the journey and the centre prior to departure.

Every effort is taken by the Home Office and the escorting contractor to avoid routine night-time transfers of individuals around the immigration removal estate, where

possible. However, in some cases, night-time transfers may be unavoidable and necessary, for instance when positioning an individual ahead of their scheduled removal. All proposed moves consider the impact on the care and welfare of individual residents, including the time and length of the move.

Paragraph 44

The CPT recommends that the induction units at Brook House and Colnbrook be brought into service and that all the IRCs consider the introduction of a “buddy” type system for new arrivals. In addition, staff need to be attentive to provide the necessary support to persons entering a detention facility for the first time.

Buddy schemes are in place in a number of IRCs, including Derwentside and Colnbrook. [DSO 06/2013](#) provides guidance on the process for admitting, inducting and discharging a detained person from an immigration removal centre, short-term holding facility or the pre-departure accommodation.

Paragraph 45

The CPT recommends that greater efforts be made to communicate clearly with detained persons on their situation and the reasons behind any delays in getting bail accommodation. Further, more should be done by the Home Office to secure accommodation once bail has been granted for detained persons. It would also like to be informed as to why the processes could not be initiated for many of the detained persons while they are still in prison.

For Foreign National Offenders (FNOs) any proposed address (private or Home Office) must be checked for suitability by the Probation Service if the FNO is subject to Probation Licence conditions. There is an escalation process in place which ensures that requests from the Home Office to Probation for address checks are completed within appropriate timescales and escalated at day 14, 17 and 20 if Probation have not responded.

A further escalation process will be incorporated into the Case Progression Panel process (from the 3-month stage onwards) to review cases granted bail where accommodation issues prevent release.

Sourcing of suitable accommodation may be delayed for a number of reasons, including:

- The application has not been made or made under the wrong provision
- The application has been refused as the FNO is not eligible
- The FNO may appeal against any refusal to provide HO accommodation
- The FNO has risk factors which may preclude them from the majority of HO funded properties
- Probation may deem the HO property as unsuitable, so another property search is required

The Detention Engagement Team have recently increased their staffing numbers and have embarked on several recruitment campaigns. With this uplift in staff, it is anticipated that capacity for resident engagement will increase.

HMPPS are responsible for ensuring all FNO release addresses are checked in line with Public Protection considerations. Resettlement planning activity takes place before a FNO is detained. However, Home Office funded accommodation cannot be made available prior to the conditional release date as it is mandated following the grant of either Secretary of State bail or Immigration Judge Bail.

Once bail accommodation has been sourced, the HO uses a dedicated form to request approval of the address for Probation Supervision and licence purposes.

To increase responsiveness to the unique challenges FNOs experience, the Probation Service has initiated a national change programme to develop FNO semi-specialist practitioners within every single Probation Delivery Unit. These semi-specialists will be provided with an enhanced HO interest caseload to develop and nurture their FNO practice.

The Probation Service has implemented a central FNO Coordination Hub to better stakeholder engage Foreign National Offenders Returns Command (FNORC). This includes embedding a small number of Probation Officers to signpost best practice and champion a more efficient interface between the two departments.

All FNO's receive an IS151F (a progress report) from the HO/FNORC however it is accepted that these can be very generic and do not necessarily clearly explain the pertinent issues around bail/addresses/release clearly.

In addition, there are some complex considerations at times on release addresses and each case is different. Case owners can struggle on occasion to identify cases where applicants have access to public funds. This is a key part of the consideration as the HO/FNORC then liaise with the local authority/probation if any support is needed. Furthermore, this would also make them in most cases unable to apply for HO accommodation, as a difficult situation can arise whereby a person can have access to public funds when they enter detention however, a subsequent deportation order/appeal dismissal of an appeal rights exhausted decision could then revoke this eligibility in these cases.

Furthermore, it is also important to note that the detainee is required to apply for HO accommodation themselves and that request cannot be actioned, and their subsequent eligibility considered, until such time that the appropriate paperwork has been received into the FNORC Accommodation Team.

If an FNO is granted conditional Immigration Judge (IJ) or Secretary of State (SoS) bail, they will not have applied for accommodation at that point in time. The HO/FNORC then need to start that process with the FNO applying accordingly. If their application is refused and this needs to be reconsidered, this will also add to the time taken. Additionally, accommodation will often need to be checked by Probation colleagues if the individual is subject to licensing conditions, and so this adds further to the timeframes.

Previous resource vacancies within the FNORC Accommodation Team have now been backfilled, as well as an increase in overall headcount to help cope with increased demand for accommodation. The team are also now utilising additional

support from HO Asylum Support colleagues to process cases swiftly. Weekly meetings with all stakeholders including HO Asylum Support and HMPPS/Probation colleagues take place to address accommodation challenges, and to ensure that we can move people out of detention and into accommodation as quickly as possible. One proposal to come out of these checkpoint meetings for example, is for pre-approved premises to be identified by Probation colleagues to speed up that element of the process. Table-top exercises are also about to be embarked on to identify key blockages within the secure accommodation system, so that FNORC/the HO can introduce measures to address these wherever applicable and streamline the process if possible.

Paragraph 47

The CPT recommends that a healthcare professional be present during all ACDT interviews in IRCs.

Healthcare staff attend ACDT reviews where practicable, and particularly if there are health concerns with the individual in question. This is not always practical however, particularly at the larger centres due to resourcing constraints.

DSO 01/2022 Assessment care in detention and teamwork provides guidance on the care and management of individuals under the ACDT process.

Paragraph 49

The CPT recommends that further reflection be undertaken to render the observation process by staff of persons on constant watch more interactive and supportive for the persons being observed. Further, there should be a clearer link to the Rule 35(2) process.

The new ACDT booklet affords time for staff undertaking constant supervision to directly engage with residents who are on constant supervision, however, that level of engagement is often led by the resident. Staff undertaking constant supervision are encouraged to engage with the resident, and where possible, staff who speak the same language as residents will be placed on constant supervisions. However, language barriers and the requirement for telephone translation often limits the amount of direct conversation possible.

Managers have been reminded to ensure language barriers are managed by the deployment of appropriate staff to constant supervisions providing that this is not detrimental to the resident or to the staff member if such resource is limited amongst our staff group.

The Rule 35 process is a medical assessment and does not necessarily imply that an ACDT is required and nor does a resident being on an ACDT imply a Rule 35 is required.

Paragraph 54

The CPT recommends that, at both Brook House and Colnbrook IRCs, steps be taken to fill the vacant healthcare posts and that, at Brook House, the presence of a psychiatrist should be increased to 0.5 FTE.

Healthcare in all immigration removal centres in England is commissioned by NHS England. Providers of health services are expected to ensure that the staffing is appropriate and safe. The NHS service specification states “the provider will ensure staff capacity and capability is consistent with operational and strategic planning processes. The provider will ensure that the workforce is able to work flexibly and provide cover where required and appropriately manage shortfalls in staff cover. The provider is expected to have a workforce contingency plan in place, which should include provision for supporting locum staff induction and training.”

NHS England commissioners regularly review the health needs of the population and commission services to meet these needs.

Paragraph 56

The CPT recommends that the United Kingdom authorities ensure that the above-mentioned procedures for the recording and reporting of injuries concerning alleged ill-treatment are in place at all immigration detention centres.

It is not the role of healthcare to test the credibility of accounts on how injuries may have been incurred; the role of the GP is to consider the health and wellbeing of the individual. If an injury is historic and believed to impact on whether an individual is fit for detention, the Rule 35(iii) process is available.

Evidence of any current or fresh injury sustained within an IRC would, of course, be highlighted and investigated.

Paragraph 57

The CPT would appreciate the comments of the United Kingdom authorities on this matter [a two-tier approach to screening].

Rule 34 of the Detention Centre Rules 2001 requires that every detained person be given a physical and mental examination by a medical practitioner within 24 hours of admission to an immigration removal centre. We remain interested in the findings from the pilot project at Derwentside and will take these into consideration as we keep the operation of the Detention Centre Rules 2001 under review.

Paragraph 59

The CPT would appreciate the comments of the United Kingdom authorities on this matter [recommendation that there must also be a flexibility to provide support to those in need when it is required].

This is site specific to Colnbrook. A walk-in nurse clinic is available and the healthcare provider will direct detained individuals to that clinic when appropriate.

Paragraph 60

The CPT recommends that steps be taken at Brook House to find additional space for the healthcare clinics and that at Colnbrook call bells be installed in the rooms of the Enhancement Unit.

At Brook House, in addition to the healthcare clinics within healthcare space, there are two additional clinics in the reception area and a dental suite is currently being planned.

The only area of Colnbrook where rooms do not have a call bell is in the care suite. In that area residents are under high levels of supervision and there are landlines available that can be used to make emergency calls. Supplier staff carry radios and would use those in the event of an incident, both to report the incident and to trigger any necessary emergency response.

Paragraph 65

The CPT recommends that the management of Derwentside ensure that whenever a resident on an ACDT raises clear concerns about actions resulting in re-traumatisation the supervision plan should be amended accordingly, in line with the Trauma-informed Compassion Focused Model of Care.

Staff at Derwentside ensure that the management of residents on an ACDT is undertaken in line with all relevant guidance, and with input from both the Multi-Disciplinary Team and the resident. This would take into account any known sensitivities and supplementary information to ensure the safety and welfare of the resident and will be tailored accordingly should new information come to light.

The supplier currently considers all risks raised by residents and takes into consideration risks, sensitivities and concerns when creating support plans. If previous trauma has been highlighted through engagement with Home Office or healthcare staff, the resident will be considered an Adult at Risk level 1 and a rule 35 interview will be conducted.

Paragraph 65

Further, the CPT recommends that the United Kingdom authorities consider extending the Trauma-informed Compassion Focused Model of Care to other IRCs.

The welfare of residents across all IRCs is taken seriously, with specific welfare considerations made on a case by case basis across the IRCs.

Paragraph 69

The CPT recommends that the UK authorities take all necessary measures to ensure that persons detained in immigration detention centres displaying symptoms of severe mental illness, who are certified by the IRC mental health team as requiring treatment in a psychiatric hospital, are transferred to an appropriate facility as soon as possible and, at the latest, within 14 days. If a person is suffering from an episode of acute decompensation in mental illness, they should be immediately transferred to hospital care.

The Draft Mental Health Bill, published in June 2022, has recently been subject to pre-legislative scrutiny. The Joint Committee on the Draft Mental Health Bill published its report on 19 January 2023 detailed here <https://committees.parliament.uk/committee/605/joint-committee-on-the-draft-mental-health-bill/news/175494/government-urged-to-strengthen-draft-mental-health-bill/>.

We are considering the Committee's recommendations and will respond in due course.

Where a person has been identified as requiring treatment in a psychiatric hospital, the Home Office will take all available steps to ensure that the transfer to hospital is completed in the shortest time possible. Currently, the transfer process is managed according to the good practice guidance developed by NHS England which sets the transfer period to be completed within 28 days, from the date of initial assessment to hospital admission. Whilst many transfers will be accomplished within this timescale, some are not, due to the availability of bedspace, which is not within the Home Office's control.

Delays in transfers can occur for several reasons including the need for a more comprehensive assessment of the patient's needs as well identifying the best placement to meet the needs of the individual. The UK is fully committed to the 28-day timeframe, and we are seeking to improve the transfer and remission process to ensure delays are reduced and avoid IRCs and prisons being used inappropriately. There is an adequate supply of adult secure beds, the focus therefore is on improving efficiency across the whole pathway, such as ensuring appropriate lengths of stay, reducing transitions, and thereby improving throughput.

Home Office safeguarding policies will continue to operate alongside multi-disciplinary healthcare provision throughout the pre-admission period, in recognition of the individual's vulnerable status.

Paragraph 76

The CPT recommends that the United Kingdom authorities develop a mandatory training course on the Rule 35 mechanism and systematically offers it to all medical practitioners and other relevant healthcare professionals working in immigration detention centres. Such training should not be left to the contracted healthcare providers. Further, it should ensure input from the Rule 35 team to ensure all parties have a common understanding of the process.

A training package has been developed by the Rule 35 Team, with input from Healthcare Partners to ensure it meets the needs of medical staff and effectively supports work to improve the standard of Rule 35 reports. The course focuses on the processes for preparing and considering reports submitted in accordance with Detention Centre Rule 35 and Short-Term Holding Facility Rule 32, outlining the standards and key information to include within the reports. The Home Office started delivering training sessions to medical practitioners and other relevant healthcare professionals in 2022 and continues to deliver sessions across the immigration removal estate.

Paragraph 77

The CPT would also appreciate the comments of the UK Government on the justification for maintaining a person in immigration detention when it is considered clinically injurious to their health and when there is no immediate possibility of removing that person from the UK.

Decisions to detain are made on a case-by-case basis. There are systematic safeguards in place to identify the vulnerable and any vulnerabilities will be factored into decision-making. Decisions to detain are reviewed on an ongoing basis to ensure continued detention is appropriate.

The Adults at Risk in Immigration Detention policy strengthens the presumption against detention for vulnerable individuals. Individuals considered to be vulnerable under the policy may be detained but only where the evidence of vulnerability in their particular case is outweighed by immigration control factors. These factors include timescales for removal, public protection concerns and compliance issues.

Home Office detention policy is clear that detention should only be for the shortest period necessary and that there must be a realistic prospect of removal within a reasonable timescale for a person to be detained for the purpose of removal.

Paragraph 77

In this context, the CPT would be interested to learn whether there are currently any countries to which the UK authorities will not remove a foreign national.

If a person has no right to remain in the UK, we expect them to leave voluntarily. If they do not, we may seek to enforce their return where it is safe to do so, on a case-by-case basis. This position applies to all countries.

Paragraph 86

The CPT recommends that all persons held in the CSU are offered a minimum of one hour of outdoor fresh air every day.

In line with published guidance, DSO 02/2017 Removal from association (detention centre rule 40) and temporary confinement (detention centre rule 42), residents held in the CSU are offered a minimum of one hour of outdoor fresh air each day.

Paragraph 90

The CPT recommends that the UK authorities end the policy of handcuffing women to a bed when they are escorted to an outside hospital for an assessment or treatment.

Each resident handcuffed will have undergone an individual risk assessment based on their own personal circumstances. There may be cases where for their own safety, or for the safety of staff, handcuffing may be necessary, and so a blanket policy avoiding handcuffing is not possible. Where possible, handcuffing in hospital is avoided, and the dignity of women in our care is a top priority.

DSO 06/2016 Women in detention set out guidance to ensure the different needs of women are consistently identified and met in the detention estate and under escort.

Paragraph 91

The CPT recommends that steps be taken to improve the possibilities for women detained at Derwentside to remain in contact with the outside world.

Daily mobile phone signal checks are carried out by onsite Home Office staff and all women detained at the centre continue to have access to other means of communication, such as video conferencing, email and landline telephones. We provide modern communication links for women at Derwentside IRC with uninhibited access to the internet and Skype during core hours to ensure they can maintain the same level of communications as our other sites.

A pilot for a Wi-Fi calling system is currently taking place at Gatwick IRC; the timescale for any roll out of the system to Derwentside will be dependent on the outcomes of this pilot.

Paragraph 108

The CPT reiterates its recommendation that time-served foreign national offenders, if they are not deported at the end of their sentence, be transferred immediately to a facility which can provide conditions of detention and a regime in line with their new status as a person detained under immigration legislation.

The Home Office and HM Prison & Probation Service (HMPPS) have a service level agreement governing the provision of bed spaces within prisons. Under that agreement, HMPPS make a number of bed spaces available for use by the Home Office to hold people under immigration powers.

It is for the Home Office to determine how those bed spaces are used and the type of people who are held in them. The normal expectation is that the prison beds made available by HMPPS will be used to hold time served FNOs who are assessed as unsuitable for detention within the immigration removal estate.

Decisions to allocate specific individuals, whether time served FNOs or otherwise, to prison accommodation will be based on the presence of one or more risk factors or criteria.

When a decision is made to detain a time-served foreign national offender (TSFNO) under immigration powers, a dedicated Home Office team, the Detainee and Escorting Population Management Unit (DEPMU), conducts a careful and timely risk assessment of their suitability to transfer to the immigration removal estate.

Transfers for those risk assessed as suitable for an immigration removal centre (IRC), take place as soon as reasonably and operationally practicable.

When an individual is deemed unsuitable for a transfer to the immigration removal estate, their circumstances continue to be regularly reviewed.

Changes in circumstance can impact this decision and individuals may, on re-assessment, be then considered suitable and accepted for transfer into an IRC.

Requests for Information

Ref	Information Request	UK Government Response
Page 6/7 Point 11	Further, it would like to be informed of the current situation of the above-mentioned person from Somalia. [one man from Somalia met by the delegation had been held in Colnbrook IRC since 22 October 2019 following a failed deportation attempt by plane to Turkey].	The individual was deported to Somalia on the 1 August 2023.
Page 7 Point 12	The CPT would like to be informed about the steps the UK authorities have taken to ensure that the ADA process will not fall foul of the same problems encountered by the DFT.	The ADA has not yet been commenced.
Page 7 Point 13	<p>The CPT would like to be informed:</p> <ul style="list-style-type: none"> • whether all male and female adults who arrive by small boat across the English Channel will automatically be detained for a minimum period of 28 days? • where families with children and unaccompanied or separated children who arrive by small boat across the English Channel will be held and whether they will be able to apply for asylum and protection? • what steps will be taken to ensure that the implementation of Clauses 10 and 11 of the Bill in respect of children are in line with the principle of the best interests of the child? • what safeguards will be in place for victims of modern-day slavery who are already present in the UK, to encourage them to denounce their situation without fearing that they will automatically be detained and removed to a third country such as Rwanda? • what new facilities (including their location and capacity) will be used for the purposes of detaining the envisaged increase in the number of migrants who arrive in the UK without a valid visa or entry permit as defined by Clause 2 of the Bill? • what effective safeguards exist to enable persons to challenge continued detention even when the purpose for detention “cannot be carried out within a reasonable period of time” as set out in Clause 11 of the Bill? 	<p>In order to avoid creating a perverse incentive for people smugglers to prioritise unaccompanied children and families with children for dangerous crossings across the channel, any protection claims or human rights claims (in relation to their home country) made by accompanied or unaccompanied children who come to the UK illegally and who meet the conditions in clause 2 will be declared inadmissible.</p> <p>Anyone who falls under the duty to make arrangements for removal may be detained, but detention is not automatic. There is also no detention time limit – published Home Office detention policy is clear that detention must only ever be used for the shortest period necessary. This has not changed. Those in detention will be able to apply for First-tier Tribunal bail after 28 days but may make an application to the High Court at any time for a writ of habeas corpus challenging their detention. Secretary of State bail will be available at all times. Judicial reviews and the ability for the First-tier Tribunal to grant bail will be available after 28 days of detention.</p> <p>The Home Office are working to operationalise and implement this new law by increasing our detention estate capacity.</p> <p>The Home Secretary has a duty under Section 55 of the Borders, Citizenship and Immigration Act 2009 to make arrangements for ensuring that immigration, asylum and nationality functions are discharged having regard to the need to safeguard and promote the welfare of children who are in the UK. A Child’s Rights Impact Assessment has been produced and published online, which the recommended mitigations in relation to detention identified:</p> <ul style="list-style-type: none"> • Ensure these detention powers in relation to removal of unaccompanied children will only be exercised in very limited circumstances ahead of them reaching adulthood, such as for the purposes of family reunion or where removal is to a safe country of origin. Detention will be for the shortest possible time in appropriate detention facilities with relevant support provisions in place. In line with the current detention guidance, which we will review and update with the legislative changes, any welfare, medical and other safeguarding issues will be considered in all detention decisions. • When developing the accompanying policy to accommodate the legislative changes on detention of children and families with children, we will work closely with the Department of Education, and continue open dialogue with the Family Returns Panel and Children’s Commissioner to ensure that, where practicably possible, children’s needs can be met within detention. • Build upon our current detention facilities for families to ensure they are appropriate and provide safe and secure accommodation. We will ensure there are proper provisions in detention for children and families with children.
Page 10/11 Point 26	The CPT would like to be informed about the current use of the Sahara unit and to receive details about the purpose and operation of the Nightingale unit at Yarl’s Wood IRC.	<p>Nightingale Unit is a 58-bed standalone unit within Yarl’s Wood for women who are detained pending resolution of their immigration cases. The unit incorporates a range of facilities for women that includes: a cultural kitchen; a dedicated healthcare unit and pharmacy; designate interview rooms; a salon; arts and crafts facilities; a classroom; and a dedicated reception/discharge building. Staffing on the unit is delivered by predominantly female staff who are trained to recognise vulnerabilities and care specifically for female residents.</p> <p>The Sahara Unit is part of Colnbrook IRC (Heathrow) and provides 18 beds in twin-bedded rooms for women, close to the airport. The Unit is predominantly used to hold women for short periods, including as they await charter flights from Heathrow.</p>

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Ref	Information Request	UK Government Response
Page 12 Point 34	The CPT would like to be informed about the plans in place to meet such increased regime needs. It would also like to be updated on the opening of block 4 and whether the planned activities it is supposed to house (the cultural kitchen, music room and café etc.) as well as other activities such as horticulture and ICT classes are now operating.	Block 4 is due to open shortly and will offer a large shop, cultural kitchen, beauty and hair salon. Horticultural activities are currently on offer with a poly tunnel and vegetable patches recently installed.
Page 13 Point 36	The CPT would like to be informed whether the unlock hours at these two centres will be extended once the increased staffing arrangements come into force under the new management contract for Heathrow IRC in November 2023.	Under the new contracts unlock hours will be increased and will always meet the minimum, as set out in published guidance.
Page 15/16 Point 48	The CPT wishes to receive a copy of the coroner's report into this death and to be informed whether it has resulted in any change of practice surrounding the management of persons considered to be at risk of committing suicide.	The Coronial Inquest has not yet been heard.
Page 20 Point 66	At all the centres visited, the delegation found that detained persons had good access to the mental health teams, with appropriate clinical triaging taking place and patients seen in a timely manner. Patients had a care plan and a referral pathway, and the clinical records were good. At Brook House, the lack of a psychologist in place meant that certain patients with depression, anxiety and post-traumatic stress disorder were not having their needs met. The recruitment of two psychologists was ongoing at the time of the visit and the CPT would like to be informed that they are now in post.	Healthcare in all immigration removal centres in England are commissioned by NHS England. While the Home Office encourages the maintenance of staffing levels across these sites, recruitment is a matter for the NHS. The recruitment of 1 psychologist and one assistant psychologist has been completed and they are awaiting vetting clearance.
Page 24 Point 76	The CPT would also like to receive confirmation that all healthcare professionals carrying out Rule 35 assessments have access to professional interpretation services.	All healthcare professionals (largely GPs as required in the Detention Centre rules for IRCs although does differ for STHFs) do use professional interpretation services - including telephone translation services - for all resident appointments inclusive of those appointments considering the submission of a Rule 35 report. Strict guidance has previously been distributed that the use of staff or other residents to translate is not permitted and is not appropriate.
Page 25 Point 81	At Derwentside, the staffing levels were extremely good with on average 20 detention custody officers (DCOs) and two or three DCOMs on duty during the day (7:00 and 19:00) and on average 10 DCOs and 1 DCOM at night. The overall complement of staff was 120 DCOs and 13 DCOMs and 32 non-operational staff. There was a reasonable gender balance with women making up 57% of staff but only 31% of DCOM positions. The delegation noted that the staff was caring and supportive of the women held in the centre. However, in discussions with DCOs it emerged that there was some discontent over the dismissive behaviour of line managers. Staff felt they needed more support and better communication, particularly at shift handovers. They also complained that, in practice, they only had a 20-minute break in a 12-hour working day, during which they remained at their work post on the residential unit. The centre manager was made aware of these issues and intended to address them. The CPT would appreciate receiving an update on these matters.	As mentioned to the CPT during the visit, staff have access to a canteen area for breaks, as well as small kitchenettes in each of the work areas, where small appliances for the preparation of meals have been provided. It is not the expectation that staff remain on post during their break, and cover is organised via the Duty Shift Manager to ensure that staff can take their break away from the work area. Since the visit, the Centre has recruited new catering staff and hot and cold meal options are provided twice a day, free of charge, in the canteen for all staff (regardless of their role) to enjoy, in addition to existing vending machines for snacks. There are two opportunities for a handover for staff on duty. There is a daily morning briefing for managers on duty which is chaired by the Centre Manager, and includes the Home Office and Healthcare staff, and all staff working in the Centre receive a detailed daily written brief written containing relevant information pertaining to Residents and the wider Centre. The Centre Manager has taken the opportunity of the feedback from the CPT to remind managers of the need to ensure that DCOs feel supported in their role.
Page 25 Point 82	The CPT wishes to receive a breakdown of the staffing numbers foreseen for Colnbrook and Harmondsworth IRCs under the new service contract and, more generally, it would like to receive details of the training provided to custody officers on communication skills, de-escalation techniques and mental health awareness.	We do not publish details about the number of staff/staffing levels at the IRCs for reasons of both commercial sensitivity and security. We ensure that there are sufficient Detainee Custody Officers in place at all the IRCs to ensure the welfare and safety of detained individuals. New operating contracts incorporate a range of cross-estate contract improvements following Stephen Shaw's reviews of vulnerability in detention, including increased staffing levels.
Page 25 Point 83	The CPT would like to receive confirmation that the DET teams in the IRCs visited are now fully staffed.	The Detention Engagement Team have recently increased their staffing numbers and have embarked on several recruitment campaigns. With this uplift in staff, it is anticipated that capacity for resident engagement will increase.

<p>Page 27 Point 93</p>	<p>The CPT would like to be informed about the substance of the cases substantiated in 2023 and the subsequent actions taken in light of the outcome.</p>	<p>Please see below for complaints substantiated from Jan – August 2023</p> <p>January 2023</p> <p>There were 2 substantiated service complaints both relating to missing property.</p> <p>There were 2 substantiated minor misconduct substantiated complaints. One related to a resident’s phone being lost whilst it was being charged, in which the complainant was provided with an IRC phone to use. The other related to a resident-on-resident fight and measures were put in place to stop a reoccurrence.</p> <p>There was 1 serious misconduct complaint substantiated regarding a resident’s missing money. Any recommendations made will be taken forward, as appropriate.</p> <p>February 2023</p> <p>There were 3 substantiated service delivery complaints. One related to a broken chair in which an apology was issued. The second and third related to a damaged phone and lost property; both were offered compensation.</p> <p>There was 1 substantiated minor misconduct complaint relating to unprofessional conduct, in which wan an apology was issued.</p> <p>There was 1 serious misconduct complaint substantiated regarding use of force. Any recommendations made will be taken forward, as appropriate.</p> <p>March 2023</p> <p>There were 3 substantiated service delivery complaints. One related to access to the computer suite and an apology was issued. The second and third related to property being issued to another resident in error and missing post; both were offered an ex-gratia payment.</p> <p>There were 4 partially substantiated minor misconduct complaints in relation to unprofessional behaviour by DCOs, in which apologies were issued.</p> <p>April 2023</p> <p>There were 3 substantiated service delivery complaints in relation to missing property. All complainants were either reimbursed with the value of the property or credited for the missing money.</p> <p>There was 1 serious misconduct complaint substantiated regarding use of force. Any recommendations made will be taken forward, as appropriate.</p> <p>May 2023</p> <p>There were 2 substantiated service complaints. One related to the meal they ordered not being available and steps have been taken to improve communication. The second related to a missing postal order and an ex-gratia payment was offered.</p> <p>June 2023</p> <p>There were 6 substantiated service delivery complaints in relation to missing/withheld property.</p> <p>There was 1 substantiated minor misconduct complaint in relation to unprofessional conduct and the officer was reminded of his responsibilities to treat residents with respect and dignity.</p> <p>July 2023</p>
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CPT Report 2023 – UK Government response to requests for information – December 2023

Ref	Information Request	UK Government Response												
		There were 3 substantiated service delivery complaints in relation to missing/withheld property. All complainants were either reimbursed with the value of the property or credited for the missing money and provided with a goodwill gesture.												
Page 28/29 Point 98	The CPT would like to receive an update on this person's current situation: whether he remains in detention and if so where, and if not whether he has been removed or bailed.	The person in question was deported from the UK to China on 22 July 2023. He had previously been convicted of Violent Crime at Wood Green Crown Court, for which he was sentenced on 15 January 2016 to 12 years imprisonment.												
Page 29 Point 99	The CPT would like to be informed of the number of persons held in prison under immigration legislation for periods of three months or longer as of 31 August 2023, and to know how many of this number have been held in prison for periods in excess of six, 12 and 18 months, respectively.	<p>The latest published figures from 30/06/2023 show that there were 399 people held under immigration powers in a prison, which is broken down by length of detention as follows:</p> <p>Detention Duration:</p> <table data-bbox="1472 562 1929 758"> <tbody> <tr> <td>Under 3 Months</td> <td>200</td> </tr> <tr> <td>3-6 Months</td> <td>69</td> </tr> <tr> <td>7-11 Months</td> <td>40</td> </tr> <tr> <td>12-17 Months</td> <td>12</td> </tr> <tr> <td>18 Months or Longer</td> <td>78</td> </tr> <tr> <td>Total:</td> <td>399</td> </tr> </tbody> </table>	Under 3 Months	200	3-6 Months	69	7-11 Months	40	12-17 Months	12	18 Months or Longer	78	Total:	399
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