



National Audit Office

Report

by the Comptroller
and Auditor General

Home Office and NHS England

Yarl's Wood Immigration Removal Centre

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Key facts

£10m

annual contract fees to Serco and G4S to provide services at Yarl's Wood

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Independent reviews of operations at the centre published between July 2015 – May 2016

35%

recommendations from the HM Inspectorate of Prisons' report that have not yet been implemented, one year after the inspection

410 residents maximum capacity of Yarl's Wood Immigration Removal Centre

3,969 people from 111 different countries entered the detention estate at Yarl's Wood in 2015

£8.8 million expected annual cost to the Home Office of the Serco contract to run the centre

£1.2 million annual contract fee to G4S from NHS England to provide healthcare in the centre

14.5% reduction in the Home Office budget between 2010-11 and 2014-15

Summary

Rationale for work

1 Yarl's Wood is an Immigration Removal Centre (IRC) that provides secure accommodation for women, adult families and, on a short-term basis, men whose cases are being assessed. The largely female and transient population at Yarl's Wood has complex needs. Residents can come from many different countries of origin, are often vulnerable and can suffer from mental health issues. Yarl's Wood has often been subject to considerable scrutiny. As the main IRC for women in the UK, it has been a focus of substantial public and media concern about the detention of women and children.

2 Yarl's Wood has been run by contractors, on behalf of government, since it opened in 2001. The Home Office is responsible for all aspects of Yarl's Wood except healthcare, which is now commissioned by NHS England. Following the award of new contracts, Serco has run the residential services under contract to the Home Office since April 2015 and G4S has run the health services under contract to NHS England since September 2014. Prior to that, Serco provided all services under contract to the Home Office.

3 In March 2015, a Channel 4 undercover documentary on Yarl's Wood made allegations about the way residents were treated by staff. The documentary coincided with the start of the new Serco contract. It was closely followed by an unannounced inspection of the centre by HM Inspectorate of Prisons (HMIP) and the Care Quality Commission (CQC) in April 2015. Since then, there have been a further four independent reviews. These were led by Kate Lampard for Serco, Stephen Shaw for the Home Office, Bedford Borough Council's Adult Services and Health Overview and Scrutiny Committee and the CQC. The reviews covered different aspects of the performance of Serco and G4S. The Home Office, NHS England, Serco and G4S subsequently drew up plans to respond to the reviews, and are introducing changes. **Figure 1** overleaf sets out the key events at Yarl's Wood.

Failure to deliver the specified services

13 The contracts required that training should be provided but staff at the centre were not adequately trained to deal with the particular concerns, issues and vulnerabilities of those in immigration detention. For example, training did not sufficiently address uncertainty in immigration status, the indefinite nature of detention and difficult experiences such as having witnessed or been victims of traumatic events, violence, abuse and torture. Serco has now addressed this with a review of the content and range of courses available (paragraphs 2.12 to 2.16).

14 G4S has been slow to meet its contractual obligations for training. G4S was required to provide staff with appropriate training on IRCs. Rule 35 assessments are specific to IRCs so people who had not worked in IRCs need training about them. The HMIP repeatedly issued recommendations to address weaknesses in the Rule 35 process during inspections in 2011, 2013 and again in 2015. However, neither commissioners nor contractors acknowledged the urgency of addressing these main recommendations. NHS England eventually provided training to GPs in July 2015, almost a year after the G4S contract started. G4S was also required to provide training to all staff at Yarl's Wood on mental health issues. NHS England did not enquire in the first six months of the contract whether G4S was providing mental health training to Serco staff. G4S offered training to Serco staff in April 2015, seven months after the start of the contract, but Serco was not able to take it up until October 2015. Training is now offered on a monthly basis (paragraphs 3.2 to 3.5).

Contract management

15 NHS England has limited powers to withhold payment if G4S does not deliver the service it is paying for, and has never withheld payment. NHS England did not withhold payments on the two occasions when it issued a 'breach notice' for G4S performance problems because it considered that they were quickly resolved. It has not set out how much it expects to recover in the event that G4S fail to deliver elements of the service it pays for (paragraph 1.24).

16 The Home Office contract is over-engineered and creates large theoretical financial credits for even trivial deviations from the contract. The Home Office is working on making it more streamlined. For example, if the Yarl's Wood gym opens five minutes late then this could generate a service credit. If Serco keeps the gym open for an extra five minutes at the end of the day, this would be acceptable mitigation and the service credit would not be imposed. The Home Office has imposed £56,000 of service credits out of a total of £585,600 credits generated, because it considered that there were mitigating circumstances for the vast majority of them. It is in the process of reducing the number of performance indicators from 120 to around 30, so that it can focus on any serious problems rather than requiring Serco to report every technical deviation from the contract and the mitigations it puts in place (paragraphs 1.22 and 1.23).

17 The Home Office and NHS England are content that the performance information they receive from their contractors is generally very accurate, although on a small number of occasions it has contained errors. They rely on Serco and G4S to self-report their performance against the contracts as part of their performance management regime. Both the Home Office and NHS England also conduct audits of specific elements of the service. Errors have occasionally been identified both by the Home Office and NHS England, and by the contractors who conduct their own reviews (paragraph 1.21).

Progress since the reviews

18 There has been some significant progress since the independent reviews, although 35% of the recommendations from HMIP's 2015 inspection have not yet been implemented. In particular, there have been improvements to healthcare facilities, the gender balance of operational staff, adult safeguarding and the residential regime. The CQC re-inspected healthcare at Yarl's Wood in May 2016, and found that all the required improvements had been made, and there was only one area requiring further work (paragraphs 2.9 to 2.11, 2.16 to 2.17, 2.22 to 2.25, 3.5 to 3.6, 3.9, 3.13 and Figure 10).

Concluding comments

19 The new contracts to run residential and health services at Yarl's Wood did not initially meet the needs of the vulnerable population detained there. Despite both NHS England and the Home Office having time to prepare for the new contracts, some of the problems that arose were foreseeable, and had been identified by previous inspectorate reports. Both commissioners and contractors, however, are now making progress in responding to the reviews and fixing the problems identified by them.

20 Many measures to secure value for money in public services do not easily apply to services for people who may be vulnerable. Unlike some public services, Yarl's Wood residents are not able to choose a different provider if they are unhappy with the service they receive. NHS hospitals use a 'friends and family' test (whether the patient would recommend the service to friends and family) that would clearly be inappropriate in Yarl's Wood. Residents may not speak English, and may be unwilling to complain from a fear that raising a complaint may have an impact on their immigration case. It is therefore particularly important that departments commissioning services for vulnerable groups consider how they will know whether the services that people receive represent good value for money.