An inspection of the Home Office’s management of asylum accommodation provision

February – June 2018

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Independent Chief Inspector of Borders and Immigration
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To help improve the efficiency, effectiveness and consistency of the Home Office’s border and immigration functions through unfettered, impartial and evidence-based inspection.

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The provision by the Home Office of asylum accommodation in line with the Immigration and Asylum Act 1999, which since 2012 has been delivered through 6 regional ‘Commercial and Operational Managers Procuring of Asylum Support Services’ (COMPASS) contracts, was examined by the National Audit Office (NAO) in 2014 and by the Home Affairs Committee (HAC) in 2017. Both found significant room for improvement.

Among the latter’s recommendations was the suggestion that the Independent Chief Inspector could complement a local authority-led inspection regime (rejected by the Home Office) by conducting periodic inspections to provide a country-wide overview of the system.

While this inspection did not set out to re-inspect every finding or recommendation made by the NAO or HAC, it took note of the Home Office’s responses to the latter in particular, and looked to see what actions had been completed and what improvements had been made.

For several reasons, not least the difficulty of extracting evidence from the Home Office, this inspection proved more challenging than most. My report is likely to please no-one. It is clear from the Home Office’s response to the draft report that this topic touches a nerve. It considers my criticisms unfair and believes its efforts have not been recognised. Meanwhile, I suspect that the many non-government organisations (NGOs) and other stakeholders engaged with asylum accommodation, and those living in it, will feel that the report has not gone far enough in challenging the standards of accommodation and support provided.

Discussions with the Home Office, Providers, NGOs and asylum seekers about particular properties showed just how difficult it was to agree on what constituted “an acceptable standard” of accommodation, and equally difficult for the parties to remain objective and to trust the intentions and actions of the other. The overriding impression from this inspection was of many individuals – from the Home Office, the Providers, NGOs and voluntary groups, statutory services and local authorities - up and down the UK, working hard to do their best for those in asylum accommodation, but often with quite different perspectives and priorities.

The system will always rely on collaboration, but it is the Home Office that holds most of the keys – to easing demand on asylum accommodation through more efficient management of asylum claims; to standardising data capture and improving information flows; to ensuring policies and practices support and protect the most vulnerable; to driving a UK-wide dispersal strategy for asylum seekers and refugees that engages more local authorities.

For all its efforts, this inspection found the Home Office too accepting of the limitations of the current COMPASS contracts and how things are, and too optimistic that the work it has in hand and the new contracts would bring about improvements. In reality, there is much more that it can and should be doing now, before September 2019 when the new contracts start. Otherwise,
the same underlying issues with asylum accommodation are likely to persist, whatever benefits
the new contracts may deliver.

This report makes 9 recommendations, some of them time-sensitive. It was sent to the Home
Secretary on 9 July 2018.

David Bolt

Independent Chief Inspector of Borders and Immigration
1. Purpose and scope

1.1 This inspection looked at how the Home Office oversees and manages its ‘Commercial and Operational Managers Procuring of Asylum Support Services’ (COMPASS) contracts, and ensures that it and the contract holders (“Providers”) are meeting the accommodation and other needs of asylum seekers (known collectively as “service users”).

1.2 Inspectors examined resources, policies, processes, and performance, specifically in respect of:

- the inspection regime for asylum accommodation (operated by the Home Office Contract Compliance Team, part of UK Visas and Immigration Directorate)
- the recording and handling of property defects and complaints
- the governance and oversight arrangements for the COMPASS contracts
- communication, in particular the sharing of relevant case-specific information, between the Home Office, the Providers, service users, non-government organisations (NGOs), and local authorities

1.3 The inspection also examined how the Home Office and the Providers identified and met the needs of particularly vulnerable service users, focusing on LGBTQI+ asylum seekers and pregnant and post-partum women.

1.4 The inspection paid particular attention to the 2017 Home Affairs Committee report into asylum accommodation and the Government response, and also took note of the 2014 National Audit Office report into the COMPASS contracts.

1.5 The inspection did not look in detail at the planning for, or contents of, the new asylum accommodation and support contracts, which were in the process of being retendered during the inspection.

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1 The Immigration and Asylum Act 1999 uses the term “asylum seeker”, while a “service user” is defined in the COMPASS contracts as an asylum seeker provided accommodation under Sections 95, 95A, 98 and 98A of the 1999 Act. Therefore, for clarity and consistency, this report also uses these terms in context.

2 https://publications.parliament.uk/pa/cm201617/cmselect/cmhaff/637/63702.htm

3 https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/551/55102.htm

2. Methodology

2.1 Inspectors:

- on 12 February 2018, chaired a meeting of the ICIBI ‘Refugee and Asylum Forum’, inviting views on asylum accommodation
- on 19 February 2018, posted a call for evidence on the provision of asylum accommodation on the ICIBI website
- on 21 and 22 February 2018, visited UK Visas and Immigration (UKVI) at Lunar House in Croydon for initial briefings with the Deputy Director of Asylum Operations and Head of COMPASS Contract Compliance, and for a familiarisation visit to the Asylum Intake Unit and the Asylum Support Routing Team
- on 23 February 2018, attended briefings at the head office of Clearsprings Ready Homes (“Clearsprings”), the Provider for ‘London and the South East of England’ and ‘Wales and the South West’
- on 26 February 2018, accompanied Clearsprings senior managers on a familiarisation visit to view properties in Cardiff
- on 27 February 2018, met Home Office contract compliance staff and the North West’s Regional Strategic Migration Partnership (SMP) in Liverpool
- on 5 and 6 March 2018, attended briefings at the head office of G4S, the Provider for the ‘Midlands and East of England’ and ‘North East, Yorkshire and Humber’ regions, and accompanied senior G4S managers to view properties in Worksop and Walsall
- between 19 February and 4 March 2018, received and analysed 43 submissions from stakeholders, principally non-government organisations (NGOs) directly involved with asylum seekers
- on 13 March 2018, attended briefings at the head office of Migrant Help, who hold the contract for advising asylum seekers on making a claim for asylum support
- reviewed and analysed open source material and documentary evidence provided by the Home Office, including policies, instructions and guidance
- conducted a sampling exercise of 100 randomly-selected property inspections completed by Home Office Contract Compliance inspectors
- between 27 March and 11 April 2018, accompanied NGO stakeholders to 16 properties used for asylum accommodation
- on 11 April 2018, met senior managers from Serco, the Provider for ‘North West’ and ‘Scotland and Northern Ireland’ and viewed properties in Glasgow
- between 23 April and 03 May 2018, accompanied Home Office Contract Compliance Officers to 53 properties used for asylum accommodation


• held 38 interviews or focus groups across all 6 COMPASS regions, with a range of Home Office and Provider staff involved with the operational delivery of asylum accommodation and contract compliance

2.2 The Independent Chief Inspector also met each of the Providers, and was shown asylum accommodation and spoke to service users in Cardiff, Glasgow and Walsall.
3. Summary of conclusions

3.1 Since 2012, asylum accommodation has been provided to eligible asylum seekers via 6 regional ‘Commercial and Operational Managers Procuring Asylum Support Services’ (COMPASS) contracts. These contracts are held by 3 Providers, each of which is responsible for 2 COMPASS regions. The contracts were initially let for 5 years, but in December 2016 they were extended by the Home Office for a further 2 years, to September 2019. The Home Office has been working on the replacement contracts since 2016.

3.2 Both the National Audit Office (NAO) (in 2014) and the Home Affairs Committee (HAC) (in 2017) have examined in depth the performance of the Home Office and the Providers in relation to the provision of asylum accommodation. Both found significant room for improvement, and both made a number of recommendations, aimed mostly at the Home Office, that they believed would achieve this.

3.3 While this inspection did not set out to re-inspect every finding or recommendation made by the NAO or HAC, it did take note of the Home Office’s responses to the latter in particular, and looked to see what actions had been completed and improvements made. This raised 2 immediate concerns.

3.4 Firstly, in its November 2017 response to the HAC’s challenge that, in the interests of those in the asylum system, including those in asylum accommodation, it needed to make asylum decisions more quickly and with fewer errors, the Home Office stated that it had made significant improvements in the efficiency and effectiveness of its management of asylum casework.

3.5 The Home Office cited in evidence the findings of the ICIBI report ‘An inspection of asylum casework’ (March – July 2015),7 published in February 2016. However, the later ICIBI report, ‘An inspection of asylum intake and casework’ (April-August 2017),8 published 28 November 2017, showed that despite asylum intake numbers continuing to fall since their 2015 peak, Home Office performance had deteriorated in 2016-17, due primarily to staffing difficulties, resulting in increased numbers of claims awaiting an initial decision and a greater proportion of claims deemed ‘non-straightforward’9 and set outside the 6-month initial decision service standard. The 2017 inspection also found issues with decision quality.

3.6 Secondly, as at the beginning of 2018-19, the Home Office did not have an ‘Action Plan’ in relation to the HAC recommendations. It referred to having taken steps during the course of 2016-17 to make service improvements where these were within the scope of the COMPASS contracts, and told inspectors that “6 or 7” of the HAC recommendations had become “business as usual”. Others were “being taken forward in planning for the next generation contracts”.

3.7 The clear sense was that, insofar as it agreed with the HAC recommendations (it dissented from the core finding that “too many” properties were sub-standard), the Home Office believed it had already

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9 The Home Office uses the category ‘non-straightforward’ to refer to cases where factors outside of the Home Office’s control mean it is not possible to make an initial asylum decision within 6 months of the asylum claim being lodged, and are therefore not measured against the customer service standard.
done everything possible within the existing COMPASS contracts, and any further improvements, beyond incremental advances and day-to-day fixes, would need to wait for the new contracts. The “plan” it produced in May 2018 in response to an internal request for “a plan that consolidates all elements of HAC and recent Home Office Internal Audit” merely reinforced this sense.

3.8 The current inspection received evidence from 43 stakeholders, principally NGOs. Of these, two-thirds (29) focused on poor property standards, with frequent references to defects, damp, dirt and vermin. Almost half (20) referred to the unsuitability of the accommodation provided for particular groups of asylum seekers, including survivors of torture, victims of domestic violence, pregnant women and new mothers, and LGBTQI+ asylum seekers.

3.9 In 69 property visits spread across 12 towns and cities, inspectors saw examples of accommodation that had various visible defects (leaks, damp, broken equipment), poor quality furnishings and fittings, and were dirty. Inspectors also saw examples (fewer) of pleasant, well-maintained properties. Discussions with the Home Office, the Providers, NGOs and service users about particular properties revealed how difficult it was to agree on what was “an acceptable standard” of accommodation, and equally difficult to remain objective and to trust the intentions and actions of the other party.

3.10 The HAC report concluded that the “current [COMPASS contract] compliance regime” was “not fit for purpose”. The Home Office rejected the HAC’s recommendation that responsibility for inspection should be transferred to local authorities. In its response to this inspection it made much of its creation in 2017 of a national Contract Compliance Team (CCT) “operating a consistent and well balanced programme of property inspections and audit checks”.

3.11 At the time of this inspection, there were 9 Home Office Contract Compliance Officers (in a CCT team of 14) covering the whole of the UK. They were based in Glasgow (1), Manchester (3), Leeds (2), Solihull (1), and Cardiff (2), from where they were responsible for inspecting properties in all 6 COMPASS regions. For some this meant considerable amounts of travel and time spent away from home, which as well as being inefficient, was a source of stress. Despite this, they told inspectors that they enjoyed their jobs.

3.12 The CCT was still relatively new, having been established in November 2017, but most Contract Compliance Officers were not. Some had been doing the job for many years, working under the regional Service Delivery Managers, during which time they had developed their own individual ways of working. CCT management recognised that achieving consistency was a challenge, but believed it would come in time. Meanwhile, inspectors identified inconsistencies across the board:

- in the training they had received (although since the creation of CCT they were all now required to attend Housing Health & Safety Rating System (HHSRS) training)
- in the extent of management oversight and support
- in their completion of risk assessments
- in the equipment they had been issued
- in their selection of properties to inspect (and whether this was “intelligence-led” based on complaints data, which on the evidence was not the case)
- in whether they gave service users notice of property inspection visits
- in the thoroughness of their inspections
- in whether they conducted meaningful “pastoral” (welfare) checks
- in categorising defects and repairs
• in their relationships with Provider staff
• in the extent to which their work was quality assured
• in carrying out re-inspections

3.13 As at April 2018, there were 1,691 Initial Accommodation (IA) bed spaces in use and 11,719 Dispersal Accommodation (DA) properties. With just 9 Contract Compliance Officers, inspection capacity was an issue. At the time of this inspection, CCT’s target was to inspect 33% of IA and DA properties a year, but there were plans to reduce this to 25%. Based on figures provided by the Home Office, the rate of inspections had already fallen (by a quarter) in the 12 months to 28 February 2018 compared to the previous 12 months, though whether deliberately or due to staffing difficulties was unclear.

3.14 In the 22 months to 31 January 2018, Contract Compliance Officers inspected 8,313 properties. Of these, just 1,988 (24%) were found to be “compliant” with the requirements of the COMPASS contracts. The majority of the remainder (3,567 or 43% overall) were assessed as “not fit for purpose” or “urgent”, meaning that the Provider was contractually bound to make the defect(s) safe within 1 working day of notification and effect a permanent repair within 7 days.

3.15 In practice, the Home Office inspection regime was one of “spot checks”, which were neither “intelligence-led”, nor backed up with re-inspections. Systematic, routine inspection was left to the Providers. Consequently, the monitoring of contract compliance relied to a large degree on self-reporting by the Providers against specified areas of performance. Provider senior managers were keen to stress that they took their inspection and reporting responsibilities seriously, and inspectors found no reason to doubt that this was the case. However, the inspection identified strengths and weaknesses with this Provider-led approach.

3.16 The frequency of Provider inspections meant that there were regular opportunities for service users to raise any issues with their accommodation. However, the HAC was concerned that asylum seekers generally had a low awareness of their rights and entitlements, including the Providers’ obligations in relation to their accommodation, and NGOs highlighted the barriers, both practical (such as language) and psychological (such as fear of the consequences), that asylum seekers faced in making any complaints.

3.17 The HAC did not believe that the low level of complaints made against 2 of the Providers was “a true reflection”, but more likely indicated “a lack of consistency around how complaints are defined and recorded”. In November 2017, the Home Office wrote that it had reviewed its accommodation induction packs, clarified the complaints process, and improved the ways asylum seekers could feed back, including directly to UKVI.

3.18 However, in May 2018 it reported that it had “conducted some further diligence” and had identified that one of the Providers did not provide information in a range of languages as it had previously indicated, raising questions about the thoroughness of its original review and the commitment it had given to expedite the provision of information to a consistent standard.

3.19 Of more concern, the data the Home Office provided for complaints about property standards received by Providers during 2017 was incapable of analysis because of the significant differences in the way each Provider categorised and reported complaints. Meanwhile, the Home Office had made no attempt to analyse complaints received directly into UKVI’s Central Complaints Team, and responded that a breakdown of complaints about Home Office or Provider staff was not readily available and could be provided only by examining individual complaint reports. This picture of inconsistent recording was the same for “incident” reports.

10 Different regions used different terms for the same level of defect.
3.20 Given the inconsistencies in data capture and reporting by the Providers, and lack of any analysis by the Home Office, it was difficult to see the justification for the Home Office’s confidence in the inspection and monitoring regime, especially as its auditing (“compliance reviews”) of Provider IT and paper records was erratic.

3.21 This inspection did not examine in detail the application of service credits in response to failures by the Providers to conform to the key performance indicators (KPIs) set out in the contract, focusing instead on the governance and oversight arrangements. The latter operated at different levels, up to Executive Oversight Boards involving Senior Civil Servants and Provider Chief Executives in the case of the 2 Providers that held other Home Office contracts.

3.22 However, most if not all substantive decisions on service credits were made at an operational level by regional management and were not routinely examined by Home Office senior managers or validated by the higher-level boards, and inspectors did not see any evidence that the uneven application of service credits in 2017 had been questioned or quality assured.

3.23 NGOs play a major role in supporting and advocating for asylum seekers, including intervening with Providers on behalf of individuals in asylum accommodation. Regionally and locally there are different fora at which the Home Office, the Providers, NGOs and local authorities can come together. The quality and extent of engagement between NGOs and the Home Office and the Providers varied considerably from region to region, and within some regions. Dealings tended to be problem-oriented, and therefore engagement had the feeling of “fire-fighting” rather than of continuous improvement.

3.24 Nationally, the Home Office saw its National Asylum Stakeholders Forum (NASF), and sub-group dealing with asylum support, as the primary mechanism for engaging NGOs. However, the terms of reference for this had been in draft since 2015, and the view of Home Office senior managers that national NGOs attending NASF would cascade outputs to locally-based charities and volunteer groups misunderstood how the sector worked. Tellingly, no NGO mentioned the NASF in its evidence submission to this inspection.

3.25 The Home Office had recognised the importance of effective engagement between the Providers and the various stakeholders, including NGOs, in developing the new asylum accommodation and support contracts. It had run a consultation exercise with some NGOs. And, it had written into the new contract the requirement for Providers “during the normal course of its operations, liaise and co-operate with these other support organisations including LAs, NGOs, NHS and the Police, so that the interests of the Service Users are best served”.

3.26 While it had freed up some of the 6 regional Service Delivery Managers’ time by creating the CCT, and put some additional money into the 12 Strategic Migration Partnerships (SMPs), it was difficult to see what the Home Office’s strategic goals were for these stakeholder relationships, beyond clarifying the terms of the COMPASS contracts and seeking to manage expectations.

3.27 In November 2017, the Home Office had told HAC that it would review the role of the SMPs, and their funding for 2018-19 and beyond. The outcome of this review was outside the scope of this inspection, but from discussions with the Providers their clear priority for the SMPs was to secure the agreement of more local authorities to become COMPASS areas, and they told inspectors that they saw little evidence of this happening.

3.28 The HAC report had argued that the wellbeing of asylum seekers should be at the heart of the asylum process, and that monitoring and inspection of asylum accommodation should be more
focused on supporting vulnerable groups. The Home Office made additional funding available for Provider welfare officers, as recommended, and referred to its commitment to supporting “all vulnerable groups”, particularly while in IA.

3.29 The May 2018 response to the Assurance and Audit Unit described a number of actions in relation to disabled asylum seekers, pregnant women and those with school age children, and victims of domestic violence, though the descriptions were short on specifics and delivery dates. However, it did state “We have introduced customer welfare checks as a standard part of the property inspections process”.

3.30 The evidence from the inspection did not bear this out. Based on record sampling and observations by inspectors, “pastoral” checks by Contract Compliance Officers were not always carried out or were cursory, with different staff having different understandings of their purpose and value, and an absence of specific written guidance on what Contract Compliance Officers should do if they identified any safeguarding or welfare issues.

3.31 In practice, since the Providers had more frequent contact with asylum seekers once they had moved into DA they were better-placed to monitor their wellbeing and respond to individual needs. However, while it is delivered under commercial contracts, the provision of asylum accommodation remains a Home Office statutory function, and the department needs to assure itself that its delivery partners have the necessary safeguarding policies and procedures in place and are applying them correctly. In fact, it had not reviewed or evaluated these policies since the commencement of the contract, despite developments and growing experience elsewhere in the Home Office in safeguarding and identifying and managing vulnerable individuals.

3.32 NGOs raised 2 key concerns. Firstly, accepting that asylum seekers may be reticent about sharing intimate personal information with the Home Office, the latter was not working hard enough to identify, record and share information on vulnerability. Secondly, because vulnerabilities were not static, Provider staff needed to be trained to identify vulnerabilities, to be confident to engage service users about such matters, and to be alive to the fact that an individual’s vulnerabilities and needs may change.

3.33 The Providers were also critical of the Home Office's failure to share information that might be directly relevant to the allocation of appropriate DA or specialist help. Based on the inconsistent recording and reporting of other categories of data (such as complaints), it was clear that information sharing in both directions regarding vulnerabilities needed to improve.

3.34 The inspection looked at the treatment of 2 particularly vulnerable groups: LGBTQI+ asylum seekers and pregnant and post-partum women.

3.35 The Home Office routed LGBTQI+ asylum seekers into asylum accommodation in the normal way, that is on a “no choice basis”, and relied on the individual to inform the Provider if problems arose, for example homophobic bullying and violence by other service users in shared asylum accommodation. Providers followed essentially the same approach.

3.36 While a new Asylum Policy Instruction (API) on ‘Gender Identity and Expression in Asylum Claims’, in development in March 2018, recognised the need to exercise particular care when accommodating trans and intersex individuals, it did not appear to alter the Home Office’s underlying approach to the provision of asylum accommodation to these or other LGBTQI+ asylum seekers.
3.37 Leaving aside the barriers that might prevent someone from complaining about the accommodation they had been allocated, or about any discrimination or harassment they had suffered, it was difficult to see how the system could take proper account of the needs of LBGTQI+ individuals given the hit or miss recording and sharing of sexual orientation and gender identity information by the Home Office, and inconsistent categorisation of complaints and incidents by the Providers.

3.38 Improvements in the provision of asylum accommodation for pregnant women and those with children featured heavily in the May 2018 account to the Assurance and Audit Unit about actions taken and planned in response to the HAC report.

3.39 This inspection found problems with the recording and sharing of information in relation to pregnant and post-partum asylum seekers. Not least, the Home Office was unable to say how many pregnant women were in asylum accommodation as the “information is not held in a readily reportable format by the Home Office or its accommodation Providers”. Instead, individuals were “managed on a case by case basis in accordance with their individual needs”.

3.40 Of course, these are not mutually exclusive, and while addressing the particular needs of the individual is paramount (particularly given the greatly increased health risks for asylum-seeking pregnant women compared to the general population), an overall grip on the numbers and distribution of pregnant and post-partum women within the asylum accommodation system is not a “nice to have”, but essential to a proper understanding of whether the present policies and practices are meeting the needs of this particularly vulnerable group, especially in relation to the availability and continuity of medical care. In any event, NGOs were critical of how the “case by case” approach worked in practice, and about poor information-sharing and communication in general.

3.41 The inspection heard about some of the difficulties new mothers in asylum accommodation faced: (in IA) not having ready access to sinks, sterilisation equipment or facilities to boil water; being placed in DA, often an HMO, that was not practical; not being provided with essential equipment, such as a cot; delays in additional support payments.

3.42 In some regions, Providers had created “mother and baby” homes. NGOs reported that these homes offered important support networks to women at a particularly vulnerable time in their lives. But, they could also be claustrophobic, with too many women and children in too little space, which created tension and led to arguments.

3.43 To sum up, the overriding impression from this inspection was of many individuals – from the Home Office, the Providers, NGOs and voluntary groups, statutory services and local authorities - up and down the UK working hard to do their best for those in asylum accommodation, but often with quite different perspectives and priorities.

3.44 Although it is incumbent on all of the parties to work together, it is the Home Office that holds most of the keys – to easing demand on asylum accommodation through more efficient management of asylum claims; to standardising data capture and improving information flows; to ensuring policies and practices support and protect the most vulnerable; to driving a UK-wide dispersal strategy for asylum seekers and refugees that engages more local authorities.
4. Recommendations

The Home Office should

1. By 1 October 2018, produce a comprehensive ‘Action Plan’ for asylum accommodation that:

   a. Addresses the findings and recommendations from this inspection and revisits those from previous audits and inspections; includes all relevant parts of the Home Office, plus the Providers; and, sets out clear deliverables, dates, dependencies, and owners for each action
   
   b. Has a nominated Senior Civil Servant as Senior Responsible Owner to oversee progress and report regularly (at least quarterly) to the Home Office Audit and Risk Assurance Committee (ARAC) or other appropriate departmental governance body

2. Introduce regular quality assurance checks for decisions about the application of service credits for non-conformance with COMPASS contract Key Performance Indicators (KPI) that are independent of those involved in the decision, and have the Contract Management Group (CMG) provide a written monthly account of service credits applied and waived for approval by a UKVI manager with delegated authority for expenditure at or above the total value of the applied and waived credits.

3. In advance of the commencement of the new COMPASS contracts:

   a. Review the role, size, structure, geographical distribution, workload and performance targets of the Contract Compliance Team, and confirm it is “fit for purpose”, and staff are fully-trained for their roles
   
   b. Agree and enforce (through line management and quality assurance) the Standard Operating Procedures (SOPs) for Contract Compliance Officers, covering as a minimum:
      
      • the selection of properties to inspect, including when to follow-up
      • a complaint and when to re-inspect
      • mandatory completion of risk assessments
      • consistent application of Housing Health & Safety Rating System (HHSRS) methodology and the COMPASS contract ‘requirements’
      • how to carry out meaningful “pastoral” (welfare) checks, and how to deal with any safeguarding or other issues that arise
      • managing relationships with Provider staff

4. Establish a process to capture data about local authority inspections of asylum accommodation, including a record of all Houses in Multiple Occupation (HMO) licences held for COMPASS properties, and any local authority objections to bedroom sharing or other Provider arrangements.
5. In relation to information sharing:
   a. Discuss and agree with Providers, involving NGOs and other stakeholders as appropriate, what information needs to be shared (and in what form and detail), especially in the case of particularly vulnerable individuals, to ensure that they are accommodated appropriately, and make the necessary improvements to Home Office collection and record-keeping to enable this
   b. (In addition to the commitment, under the new contracts, to “provide software and training aids as required to enable the Provider to manage, administer and share appropriate data in relation to each Service User and their dependants with the relevant entities”), define the data standards (and terminology) the Providers must employ in 2018-19 in relation to the reporting of inspection visits, defects/repairs, complaints and incidents, and any other essential categories of information, such as signs of vulnerability, and ensure that these are in regular use by Q3 2018-19, so that the data can be compared and analysed, and lessons learnt, before the new contracts go live

6. Review the Providers’ policies, processes and practices in respect of safeguarding and the identification and handling of vulnerabilities, and ensure that they are in line with those of the Home Office and reflect the department’s latest experience in these areas and understanding of ‘best practice’.

7. Capture and analyse data in relation to particularly vulnerable groups, such as LGBTQI+ individuals, victims of torture or domestic violence, trafficking victims, and pregnant and post-partum women, to test:
   a. The appropriateness in such cases of the “longstanding policy of providing accommodation to asylum seekers on a no choice basis”, including bedroom sharing in some instances
   b. The effectiveness (outcomes) of requests from asylum seekers with particular vulnerabilities, care needs or health problems for specialist accommodation

8. Review (and finalise) the purpose, terms of reference and membership of the National Asylum Stakeholders Forum (NASF), and its sub-group dealing with asylum support, checking members’ willingness and ability to cascade outputs to locally-based charities and volunteers, and establishing an effective and reliable alternative way of doing this, if required.

9. Provide an update on the development of any new “measures to assist the integration of those granted asylum” as a result of the Home Office’s consideration of the conclusions of the Casey Review into Opportunity and Integration.
5. Background

Legislation

5.1 Sections 4, 95 and 98 of the Immigration and Asylum Act 1999 set out the circumstances under which asylum seekers may be provided with accommodation by the Home Office.\(^\text{11}\)

‘Section 98 - Temporary support’

5.2 Section 98 empowers the Home Secretary to:

“provide, or arrange the provision of, support for –

(a) asylum-seekers, or

(b) dependants of asylum-seekers

who it appears to the Secretary of State may be destitute”\(^\text{12}\)

5.3 The Home Office applies Section 98 when considering the provision of Initial Accommodation (IA). IA is typically hostel-style, full-board accommodation. However, at the time of the inspection one of the Providers had recently opened a self-catering IA facility in Derby, and it planned to open similar facilities elsewhere.

5.4 The Home Office aims, in most cases, to move asylum seekers from IA within 19 days,\(^\text{13}\) during which time their asylum support application\(^\text{14}\) will be assessed and longer-term (“dispersal”) accommodation found for them.

‘Section 95 - Persons for whom support may be provided’

5.5 Section 95 applies once the asylum support application has been assessed. Eligibility includes those who appear to be destitute “or to be likely to become destitute within such period as may be prescribed”, which in practice is the time it will take to make a decision on their asylum claim. Successful claimants who have been in receipt of Section 98 support are “transitioned” onto Section 95 support.

5.6 The 1999 Act introduced national dispersal, designed to alleviate the pressure on local authorities in London and the South East, with the result that most Dispersal Accommodation (DA) is found in other regions of the UK. However, the Providers can locate DA only in areas

\(^{11}\) [https://www.legislation.gov.uk/id/ukpga/1999/33](https://www.legislation.gov.uk/id/ukpga/1999/33)

\(^{12}\) Defined within the Act as not having “adequate accommodation or any means of obtaining it (whether or not his other essential living needs are met)” or having “adequate accommodation or the means of obtaining it, but cannot meet his other essential living needs”. In determining whether accommodation is “adequate”.

\(^{13}\) Noted in the 2014 NAO report and confirmed in the Government response to the HAC report in November 2017.

where the local authority has agreed to take asylum seekers (up to a “cluster limit” of one asylum seeker per 200 residents), and while the numbers who have agreed have increased over the lifetime of the COMPASS contracts the majority of the UK’s local authorities have proved unwilling to do so.

5.7 Under Section 95, asylum seekers are entitled to free, furnished accommodation (with utility bills and council tax paid), and a weekly cash allowance of £37.75 for each person in their household.

5.8 If an application for Section 95 support is rejected the claimant may appeal. Legal aid is available only for appeals involving applications which include accommodation.

**Effect of the asylum decision**

5.9 Asylum seekers who are granted refugee status, humanitarian protection, or discretionary leave to remain, will have their asylum support terminated 28 days after the decision, and are then usually entitled to work and claim state benefits.

5.10 Asylum seekers whose claims are refused, and who have no dependent children at the time of a final refusal decision, will have their asylum support terminated 21 days after the decision.

**‘Section 4 – Accommodation’**

5.11 Section 4 of the Immigration and Asylum Act 1999, dealt with the provision of accommodation for former asylum seekers whose claim has been refused. It was repealed by the Immigration Act 2016. The 2016 Act inserted new sections 95A and 98A to cover support for “failed asylum-seekers, etc who are unable to leave UK”. However, at the time of this inspection Sections 95A and 98A had not yet come into force, and the Home Office was continuing to apply Section 4.

**Asylum accommodation providers – the COMPASS contracts**

5.12 Since 2012, accommodation for asylum seekers has been provided via 6 regional ‘Commercial and Operational Managers Procuring Asylum Support Services’ (COMPASS) contracts. These replaced 22 separate contracts involving 13 different providers.

5.13 Three companies each won 2 of the 6 regional contracts:

- **Clearsprings**  
  London & South East England  
  Wales & South West England

- **G4S**  
  North East England & Yorkshire and the Humber  
  Midlands & East of England

- **Serco**  
  North West England  
  Scotland & Northern Ireland

5.14 At the time, only Clearsprings had experience of providing asylum accommodation, however G4S and Serco were both experienced in providing other services to Government, including the Home Office.

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15 In order to qualify for Section 95A or 98A support, a person must face “a genuine obstacle to leaving the UK”, for example they are unfit to travel or are unable to return safely to their country of origin. The same destitution tests apply as for sections 95 and 98.

16 The Home Office explained that implementation “will involve engagement with local authorities, the devolved administrations and other partners on the preparation of the required regulations. We have not yet made a decision on the timing of this work”.

16
5.15 The COMPASS contracts were awarded initially for a period of 5 years (2012 to 2017), with the option of a 2-year extension. In December 2016, the Government announced that the COMPASS contracts would be extended until September 2019. At the time of this inspection, the initial bidding process for the next generation of COMPASS contracts had begun. The process was due to complete and new contracts be in operation by September 2019.

**The requirement for accommodation**

5.16 When the COMPASS contracts were drawn up in 2012, the Home Office forecast that between 20,000 and 25,000 asylum seekers would require accommodation at any one time.\(^{17}\) From the evidence available to inspectors, it was not clear precisely what assumptions informed this forecast, but these must have included annual asylum intake (the number of claims received) and asylum decisions made.

5.17 As it transpired, intake was significantly more volatile than could have been predicted – see Figure 1.

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of asylum claims</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>21,843</td>
</tr>
<tr>
<td>2013</td>
<td>23,584</td>
</tr>
<tr>
<td>2014</td>
<td>25,033</td>
</tr>
<tr>
<td>2015</td>
<td>32,733</td>
</tr>
<tr>
<td>2016</td>
<td>30,603</td>
</tr>
<tr>
<td>2017</td>
<td>26,350(^{18})</td>
</tr>
</tbody>
</table>

5.18 Meanwhile, as detailed in various ICIBI inspection reports about the asylum system, most recently ‘An inspection of asylum intake and casework’ (April-August 2017), published in November 2017, the Home Office was struggling to remain on top of the volumes of asylum claims it was receiving.

5.19 In the course of this inspection, the Home Office told inspectors that approximately half of all those who claim asylum also apply for asylum support. The spike in asylum claims in 2015 therefore created difficulties for the COMPASS providers. Unable to source sufficient rental accommodation,\(^{19}\) they had to resort to using hotels and hostels as “Temporary Dispersal Accommodation”, not only incurring greater costs than they had planned for, but also raising concerns about the standards and suitability of this type of accommodation.\(^{20}\)

**Bed spaces and properties in use for asylum accommodation in 2018**

5.20 Since 2015, the annual intake of asylum claims has reduced, and the Providers have adapted. As at April 2018, Home Office records indicated that there were 1,691 IA bed spaces in use (the data did not specify the number of IA properties). At the same time, there were 11,719 Dispersal Accommodation properties in use, including properties for families, single mothers, individuals, and a number of men or women sharing Houses in Multiple Occupation.

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\(^{19}\) [https://publications.parliament.uk/pa/cm201617/cmselect/cmhaff/637/637.pdf](https://publications.parliament.uk/pa/cm201617/cmselect/cmhaff/637/637.pdf)  
6. Previous audits and inspections

National Audit Office report 2014

6.1 In January 2014, the National Audit Office (NAO) released a report ‘COMPASS contracts for the provision of accommodation for asylum claimants’. The report raised concerns about failures to meet contractual standards:

“Although reported performance by COMPASS Providers is improving, overall Providers continue to fail to meet contractual standards in some areas. For example, both G4S and Serco have failed to meet a number of KPIs on finding properties for service users in a set timescale, and on property standards...

Particular concerns include the quality of the accommodation where backlogs in maintenance work are not being addressed by Providers in the contractual time frames, and the approach of some of the Providers’ housing staff.”

6.2 The NAO made 8 recommendations, 3 of which are most relevant to the current inspection:

“7e. [The Home Office should] make better use of its compliance teams to ensure the providers are meeting their contractual commitments and should prioritise these resources such that activity focuses on the riskier areas of the contract (including the issues of accommodation quality and maintenance, management of service user complaints, and whether providers are meeting contractual commitments on attendance at properties, use of interpreters and housing officer training).

7g. [The Home Office should work with the provider to ensure that they] audit the training of housing officer staff, with particular regard to understanding service users’ needs, and ensure that arrangements for accessing properties are applied consistently.

7h. [The Home Office should work with the provider to ensure that they] develop appropriate mechanisms to capture feedback from service users about their experiences living in asylum accommodation – for example customer satisfaction surveys or focus groups.”

Home Affairs Committee report 2017

6.3 In January 2017, the Home Affairs Committee (HAC) published its ‘Twelfth Report of Session 2016–17’ on ‘Asylum Accommodation’. The report had gathered evidence throughout 2016. It was wide-ranging, and made a large number of detailed recommendations, mostly aimed at the Home Office. These included:

22 https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/551/55102.htm
• resourcing asylum work to ensure claims are processed more quickly and with fewer errors
• ensuring asylum seekers do not stay too long in Initial Accommodation (IA), and supporting them while in IA, particularly pregnant women and new mothers
• increasing the number of local authorities where there is Dispersal Accommodation (DA), if necessary using the Government’s existing powers to require local authorities “to take their fair share”
• replicating the support available to local authorities (and to asylum seekers) under the Syrian Vulnerable Persons Resettlement Scheme, and involving them in the development of the new COMPASS contracts
• inspecting Temporary Dispersal Accommodation before its use is sanctioned and monthly thereafter, providing asylum seekers in temporary accommodation with some financial support, and including the numbers in the quarterly [transparency] statistics
• making greater use of Strategic Migration Partnerships to improve coordination and communication between the Home Office, Providers, local authorities and NGOs
• dealing urgently with accommodation that is substandard, poorly maintained or unsafe
• placing the ‘Performance Regime’ schedule, with details of how performance against contractual Key Performance Indicators is measured, in the public domain, and providing more extensive guidance on compliance standards for any future contracts
• explaining service users’ rights and entitlements in their ‘welcome packs’, plus the roles and responsibilities of Provider staff and landlords, and the complaints procedure (ensuring service users feel able to complain and calls to Providers are answered), and recording and reporting complaints or requests for maintenance in a consistent manner
• transferring responsibility for inspecting properties from the Home Office to local authorities, aligning property standards with local authority housing standards, and giving local authorities the power to conduct routine, proactive and unannounced visits and report their findings publicly, complementing this with periodic country-wide overviews by the ICIBI
• phasing out forced bedroom sharing and use of large-scale Houses in Multiple Occupation (HMO) for particularly vulnerable asylum seekers
• publishing the outcome of Home Office equality impact assessments of the delivery of the COMPASS contracts
• limiting the movement of asylum seekers without their consent, and doing this only in exceptional circumstances where individuals are engaged with local services, such as schools or welfare support
• with additional Home Office funding, increasing the number of Provider welfare officers, and reforming the monitoring and inspection process to capture the experiences of vulnerable service users, such as victims of torture and trafficking, pregnant women and new mothers, and putting the individual’s wellbeing at the heart of the asylum process
• improving Provider staff training by having them work with local NGOs to understand the experiences and anxieties of asylum seekers
• (Provider staff) not entering a property without giving the service user appropriate notice, and not at all when it is unoccupied without the service user’s permission
• publishing a Home Office policy on the use of body-worn cameras by Provider staff
• extending the 28-day grace period for asylum seekers granted refugee status, to enable a smooth transition by giving DWP time to manage applications for state support
6.4 The HAC report’s final recommendation was that the NAO should follow up its previous work by undertaking a further review to determine whether the Government would achieve the savings it expected from COMPASS and whether there had been a wider displacement of responsibilities and costs.

6.5 Acknowledging that changing the asylum system and developing and negotiating fundamental changes to the replacement COMPASS contracts needed time, which had led to the extension of the existing contracts, the report concluded:

“In this Report we have made recommendations that look to the long-term future of the asylum system and should be considered as part of the process of putting together a successor to COMPASS. However, many of our recommendations, which would bring real improvements to the service asylum seekers receive, do not require further renegotiation, and should be implemented with six months.”

**The Government response to HAC**

6.6 In its formal response to the HAC report in November 2017, the Government (Home Office) referred to “substantive changes in the [COMPASS] contract” that had been made since the HAC began taking evidence in January 2016, which were announced by the Immigration Minister when informing Parliament in December 2016 that the contracts would be extended until 2019.

6.7 The Minister’s announcement referred to increased Home Office funding for welfare officers and property management staff; reduced use of “contingency accommodation” by ensuring, through changes to the contract, that there is sufficient IA; and, a new higher price band for any increases in the numbers requiring asylum accommodation, to enable Providers to widen the areas in which they operate, along with an increase “by over one third in the past 18 months” of “the number of local authority areas participating in the asylum dispersal scheme”.

6.8 The Home Office agreed with HAC regarding the length of time service users should be in IA, and referred to its commitment to provide pregnant women and young mothers and “all vulnerable groups” with the support they need while in IA, including access to health services and catering for special dietary needs, and ensuring appropriate safety and privacy measures, and more gender-specific areas where practicable.

6.9 It also agreed that more local authorities should become involved in asylum dispersal, and stated that along with the Providers, it would continue to work with local authorities on the placement of asylum seekers within their areas. However, it drew attention to the fact that dispersal had to consider “where asylum seekers who do not apply for Home Office support are residing and how local authorities are contributing in other ways, for example through supporting unaccompanied asylum seeking children or refugees who are part of a resettlement scheme”.  

6.10 With regard to replicating the Vulnerable Persons Resettlement Scheme (VPRS) model for asylum seekers, the Home Office stated that although “good practice” could be shared across the different schemes “the challenges are different in many respects and therefore the model is not completely replicable”. It did not elaborate on the different challenges.

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23 By the end of 2017, 275 local authorities had resettled refugees under the Vulnerable Persons Resettlement Scheme. The figures for local authorities that have taken unaccompanied asylum-seeking children (UASC) under the National Transfer Scheme (NTS) (that facilitates transfers between local authorities) are not published. However, between 2016 Q3 and Q4, 550 UASCs were relocated through the NTS.
6.11 On temporary DA, the Home Office reported that it had “no plans to include a breakdown by premises type within the [quarterly transparency] figures”. While noting that such accommodation was to be used only to manage peaks in demand, it agreed that it must meet the same standards as IA and DA.

6.12 The Home Office disagreed with the HAC’s conclusion that “in too many cases Providers are placing people in accommodation that is substandard, poorly maintained and, at times, unsafe”, while welcoming “the recognition that the majority of accommodation is of a good standard” (the HAC had actually stated that “it is beyond doubt that ... in a significant minority of cases” Providers were not meeting their obligation to provide “safe, habitable accommodation”). The Home Office pointed out that the Providers were required to provide accommodation that complied with the ‘Decent Homes Standard’, plus standards outlined in relevant national housing legislation.

6.13 It also stated that the COMPASS contracts required Providers “to visit and inspect each property every month and UKVI inspects a significant proportion of properties each year to ensure standards are being met”, and that “UKVI has procedures in place to inspect, investigate and quickly resolve when specific information is received and a contract management regime to monitor supplier performance and take measures where appropriate”.

6.14 Responding to the HAC’s challenge that “the compliance and inspection system is failing”, in support of which HAC referred to the low number of fines for Provider failures to meet contractual KPIs, and to service users’ and NGOs’ lack of awareness of Providers’ contractual obligations and deadlines for rectifying faults, the Home Office stated that its “inspections have found that accommodation generally meets the required standards and where defects are identified they are resolved within the timescales set out in the contract”. However, it undertook to ensure that service users had the information they needed to raise complaints.

6.15 Given the above, it was entirely consistent that the Home Office rejected the HAC recommendation regarding the transfer of responsibility for the inspection of asylum accommodation to local authorities. In doing so, it stated:

“Following the recommendation of the National Audit Office in January 2014, the Home Office conducts some of its inspections jointly with the accommodation provider to ensure better access to the properties, agree what the defects are and allowing rectification work to start immediately. In the last financial year the Home Office inspected over 4,000 properties, which represented almost half of all the properties that were used to house asylum seekers.

... 

The Home Office works with local authorities and welcomes their involvement in ensuring that the properties are of the required standard where the local authority feels this is necessary. The Home Office has undertaken inspections jointly with local authorities and would be happy to continue that practice in the future.

The Home Office does not agree that property inspection should be handed over to local authorities as it would reduce the accountability of the Home Office and the ability to hold Providers to account. Discussions with local authorities have not indicated that this is a responsibility that they would like to assume.

24 Introduced alongside the 2004 Housing Act and relating to social housing. Revised by the Department for Communities and Local Government in 2006.
Local authorities may inspect any property in their area and the Home Office and its suppliers will continue to work with local authorities to facilitate such inspections.”

6.16 Regarding the wellbeing of service users, the Home Office responded to the HAC that it “ensures suitable accommodation is allocated according to the specific needs of all asylum seekers and their dependants” and that Providers are contractually required “to take account of any particular circumstances and vulnerability”. Meanwhile, it resisted the recommendation to put an end to room sharing, and held to its “longstanding policy of providing accommodation to asylum seekers on a no choice basis”.

6.17 However, it said it would “consider all requests from asylum seekers and their children who may have particular vulnerabilities, care needs or health problems that necessitate a need for specialist accommodation requirements”. All requests from Providers to relocate a service user required Home Office approval, and individuals “should not be moved on more than 2 occasions within a 12 month period”, with pregnant women not being “required to move accommodation for a period of 6 weeks prior to and after their due date, or until they are discharged from the care of their clinician”.

6.18 Addressing the HAC’s recommendation that there should be a focus on the service users’ wellbeing, the Home Office reported that its staff “now speak with service users who are present in a property and complete a short feedback form, capturing information about how their dispersal induction was conducted, their knowledge of and ability to access local services and any issues relating to antisocial behaviour, intimidation or hate crime (including providing help to report any such issues)”.

6.19 In terms of visits to properties to carry out inspections or maintenance, the Home Office indicated that it might not always be possible to provide advance notice and that it might be necessary to access the property when the service user was not at home. However, Provider staff were expected to knock before entering, and identify themselves. The Home Office did not require Provider staff to wear body cameras, which was a matter for the Provider and the relevant Commissioners, however it supported measures, including Provider pre-employment checks and risk assessments, that ensured service users and Provider staff showed one another appropriate respect.

6.20 Finally, the Home Office reported that it had worked with the DWP to establish a new process to ensure that successful asylum seekers could access benefits before the 28-day transition period elapsed, and that it was considering the conclusions of the Casey Review on Opportunity and Integration and would respond in due course regarding measures to assist the integration of those granted asylum.

6.21 Summing up, the Home Office stated “[since 2016 it had] made a number of improvements to its inspection regime, including through making the service user experience more central in the inspection process [and had] also increased its engagement with the NGO and voluntary sectors to provide more opportunities for those who work with asylum seekers to feedback on how the system is working”. It also reaffirmed its commitment to continued improvement of the asylum support system.

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25 Information Commissioner and Surveillance Commissioner.
6.22 The current inspection was not intended to be a systematic re-inspection of each point or recommendation made by the NAO or HAC, or by the Home Office in its responses. However, they clearly form an important backdrop.

6.23 The decision to carry out the current inspection was influenced by the HAC’s recommendation that the Independent Chief Inspector of Borders and Immigration should conduct periodic UK-wide inspections of the asylum accommodation inspection regime, which has merit regardless of the Home Office’s rejection of the recommendation to transfer responsibility for inspection to local authorities.

6.24 The current inspection also complements 3 recent ICIBI inspections that touched on the treatment of asylum seekers and refugees, including their dispersal around the UK:

- ‘An inspection of asylum intake and casework’ (April-August 2017), published 28 November 2017
- ‘An inspection of how the Home Office considers the ‘best interests’ of unaccompanied asylum-seeking children’ (August-December 2017), published 28 March 2018

6.25 The 2017 inspection of asylum intake and casework is particularly relevant in that it provided an update of how the Home Office was managing asylum claims and therefore the demand on asylum accommodation. This showed that the Home Office’s response to the HAC that it had made significant improvements in the efficiency and effectiveness of its management of asylum casework, which cited in evidence the ICIBI report ‘An inspection of asylum casework’ (March – July 2015), published in February 2016, was no longer sustainable.

6.26 The 2017 report identified problems with the recruitment and retention of asylum decision makers, lengthy staffing gaps, and high levels of inexperience. Together with the abstraction of staff in autumn 2016 to deal with children cleared from the Calais migrant camps, this had affected the performance of the Asylum Intake and Casework Unit (AIC). The 2017 inspection found that the number of claims awaiting an initial decision had risen during 2016-17, as had the proportion deemed ‘non-straightforward’ and therefore set outside the published service standard of 6 months for a decision. It also found issues with decision quality.

6.27 In response to the 2017 inspection, the Home Office described the asylum system as “in transition”, and referred to plans to transform it, enabling it to cope better with peaks in demand, including a project aimed at significantly reducing the number of outstanding non-straightforward claims. The message from this, and other asylum-related inspections, was that the Home Office needed to accelerate these plans and put itself in effective control of the asylum process as soon as possible. Otherwise, the next peak in asylum intake, or trough in staffing levels, would see it fall further behind, which in turn would place further strain on an already stretched asylum accommodation system.

Home Office follow-up to the Home Affairs Committee report

6.28 In February 2018, in response to the preliminary evidence request for the current inspection, the Home Office reported:

“The Assurance and Audit Unit\(^{27}\) have been commissioned with producing a plan that consolidates all elements of HAC and recent Home Office Internal Audit. This is scheduled to be presented to the Asylum Accommodation governance Board in March 2018.”

6.29 However, in March 2018, in response to the formal evidence request, it stated:

“We do not currently hold a formal action plan in pursuance of the HAC report from January 2017. The Home Office responded in full\(^{28}\) to the report and included details of the steps taken to improve the performance of the asylum accommodation contracts and the experience of service users in the asylum accommodation system since the Committee began taking evidence in January 2016. We have, in the course of business as usual, implemented a number of steps in respect of items where service improvements were available within the scope of the COMPASS contracts, and others have been taken forward in planning for the next generation contracts.”

6.30 The clear sense was that, insofar as it agreed with the HAC recommendations, the Home Office believed it had already done everything that was possible within the existing COMPASS contracts, and any further improvements would need to wait for the new contracts. This was reinforced by senior managers, who told inspectors that there were “6 or 7” recommendations from the HAC report that were now part of “business as usual” and “some” would be going into the new contracts.

6.31 In May 2018, the Home Office sent inspectors a spreadsheet entitled “HASC Validation Table final”, which appeared to be a response to the February 2018 commission. This identified 30 HAC recommendations and responses, with a further column headed “Key actions taken by ASSC” (Asylum Accommodation Support & Specialist Casework). The first 2 items related to “Demands of the asylum system”. Both were annotated “This is for AIC”, immediately raising concerns about how complete this plan was and by whom it had been seen and signed off.

6.32 In keeping with its earlier response, most of the entries describe completed actions, while in 6 cases the entry reads simply “None further”. Some entries repeat what was in the formal response, for example regarding the provision of additional funding for Strategic Migration Partnerships. Although in this case, details are included of further engagement with local authorities and NGOs involving numerous ‘roadshows’ and presentations by the Providers covering accommodation standards, categorisation of defects, and resolution timescales.

6.33 A few entries refer to the centralising of Home Office functions to provide better visibility, coordination, and consistency, in relation to dispersals from IA, for example, and in particular in respect of contract compliance. The latter makes much of the creation of a national Contract Compliance Team “operating a consistent and well balanced programme of property inspections and audit checks”, and this became a focus of the current inspection.

\(^{27}\) Part of Asylum Support.
\(^{28}\) The government responded to the HAC report in November 2017 and its full response can be found at https://publications.parliament.uk/pa/cm201719/cmselect/cmhaff/551/551.pdf
6.34 Similarly, the current inspection examined the Home Office’s statements in relation to an “improved”, “centralised” complaints process “linked ... with the property inspections process so that we have more capability to conduct targeted inspections in response [to complaints]”.

6.35 A key feature of the Home Office response to the HAC was its rejection of the picture painted of accommodation standards. The ‘Validation Table’ reiterated the Home Office’s position, adding that “we thought some of the information the Committee had received was not well balanced”, that “the property standards in the existing contracts are set and are, we believe, in most respects aligned to or higher than those encountered elsewhere in social housing” and that “all properties used for asylum accommodation are also subject to consultation with the relevant local authorities, and are required to comply with all relevant national and local requirements, including to be licensed as appropriate in accordance with licensing schemes operated by the local authorities”.

6.36 To the extent action was needed in respect of accommodation standards, in addition to the creation of the national Contract Compliance Team, trained in the same Housing Health and Safety Rating System as local authorities, and consultations with “local authority property inspectors, through an expert group convened by their professional body, the Chartered Institute of Environmental Health” regarding the requirements for the new contracts, this was primarily about managing service user expectations by means of Provider-supplied induction packs (in a range of languages).

6.37 Some reported actions appear to be ongoing, for example: “We have been continuing to engage heavily with local authorities to secure wider participation in dispersal, with considerable success.” Here, the entry notes that the HAC recommendation was “helpful” as its reference to ministers using their powers to compel local authority participation “has enabled a more robust engagement which has been more successful in getting additional local authorities on board than previously”. Nonetheless, the Providers told the current inspection that they would like to extend into new local authority areas and felt the Home Office should be doing more to enable this.

6.38 In relation to the wellbeing of asylum seekers, the entry states “we have been working with local authorities and our providers to improve the local authorities’ assessment of disabled asylum seekers with care needs at the start of the process and to ensure the relevant information flows through to the accommodation providers so they can better understand the relevant accommodation requirements prior to dispersal.” It also states: “We have introduced customer welfare checks as a standard part of the property inspections process.” The current inspection sought to test this.

6.39 The spreadsheet does contain some references to planned actions, but without delivery dates or owners. For example, the Home Office plans to use its new IT system (ATLAS) to “triage vulnerabilities” and “optimise dispersal provision for pregnant women and those with school age children”. Similarly, it plans to make funding available for “asylum seekers who are victims of domestic violence to be able to access refuge accommodation where appropriate”, which has agreement in principle from ministers but is with “policy colleagues” who are “engaging with Women’s Aid and other relevant stakeholders to address a number of issues before this comes in to place”. In the meantime, the current inspection looked at how vulnerabilities were identified, information was shared, and particularly vulnerable groups were treated.

6.40 Roughly a third of the entries refer to the “next generation” accommodation contracts. These include reference to having engaged local authorities and NGOs in the design of the contracts, and building in requirements for “dedicated areas for women and children and more facilities
for disabled customers” in IA, plus “vulnerable service users will not be required to share rooms ... and services to vulnerable asylum seekers will be enhanced and better joined up”, and “women in late stages of pregnancy or with newborn children should not be required to move accommodation other than if required for health and safety reasons”.

**Wider awareness of the HAC report, recommendations and response**

6.41 During the course of this inspection, it was evident that not all of the Home Office managers and staff to whom inspectors spoke were well-sighted on the HAC report, including some senior managers. However, others said that implementation of the HAC’s recommendations formed part of their workload.

6.42 External stakeholders, meanwhile, seemed generally better informed about the report. Some told inspectors that they had seen improvements to asylum accommodation as a result of it. For example, one stakeholder told inspectors it had seen an improvement in transport provided for pregnant women and new mothers to access medical appointments. However, others commented they had seen no improvements, and were disappointed that the recommendations had not been acted upon.
7. Inspection findings: Stakeholder evidence

Stakeholder response

7.1 The current inspection received 43 evidence submissions from stakeholders, the majority from Non-Governmental Organisations (NGOs). A large number of NGOs are involved in providing support and advocacy for asylum seekers. They range from national organisations to local groups of volunteers. Their perspectives on asylum accommodation are shaped by some or all of the following:

- the NGO’s overall objectives and policies
- the reported and observed experiences and needs of those who use their services
- the numbers and types of asylum seekers with whom they are in contact
- where they operate
- the asylum accommodation they have seen or know about
- their interactions with the Home Office and with the Providers
- their understanding of the COMPASS contracts

Property standards

7.2 The evidence submissions highlighted a range of issues. Two-thirds (29) of the submissions focused on poor property standards. The 29 ranged from smaller NGOs reporting evidence from a particular area or cohort of asylum seekers to larger NGOs with knowledge of asylum accommodation across a number of COMPASS contract regions. One of the latter reported:

“Our welfare and housing department receive frequent reports of bed bugs, rats and other vermin infestations.”

7.3 One of the submissions was received from an ex-employee of one of the Providers. This stated:

“Where 7-day urgent issues exist such as pest infestations, leaks or damp, they are not prioritised and the effect of these issues on children were not always considered. I have known children suffering with health problems such as asthma stay in houses with severe damp and were not considered for relocation. To avoid KPI failure [Provider] will ‘look at’ the boiler and provide temporary heating within 24 hours. The temporary heaters are often tiny fan heaters and I have known one to be provided per family. This is useless and cruel. During a visit it is common to see people dressed in coats and outside wear. A young child in a basement flat in [town] has been living in the property since birth. It is dark, damp with dirty carpets.”

29 Some of the themes highlighted in the submissions were out of scope for this inspection. For example, several organisations drew attention to the paucity of support for the moving on period (the 28-day “grace” period refugees are given once granted asylum to move to alternative accommodation and access “mainstream” state benefits).
Inspectors sought to test whether the descriptions provided by stakeholders were isolated examples or typical. 6 NGOs were asked to facilitate site visits to properties highlighted in their submissions, and in March and April 2018 the inspection team visited 16 properties and met with NGO representatives and asylum seekers in their homes.

In the majority of these cases, what inspectors saw tallied with the submissions received from the NGOs. The team found examples of infestations, mould, damp, broken equipment, and poor quality fixtures and fittings.

**Property cleanliness**

Under the COMPASS contracts, the Home Office is able to raise a “routine fault” where issues of cleanliness have been identified. The contracts specify the standard of cleanliness the Provider is required to meet in respect of various features or areas, for example “Internal and external aspects of the accommodation [should be] clean prior to Service Users taking up occupancy: ... All surfaces including walls, tiling, sills, fireplace surrounds, worktops, interiors and exteriors of cupboards and drawers to be washed down, cleaned of grease and other natural and unnatural deposits or coatings and disinfected where appropriate.” However, these standards left room for interpretation.

Inspectors found that the Providers took different approaches to the cleaning of their properties. Some service users in Dispersal Accommodation (DA) were given cleaning equipment (vacuum cleaner, mop, cleaning products) and would receive a warning letter if the property was not kept clean. However, there was no contractual requirement to provide a vacuum cleaner, for example.

In some locations, the Provider sub-contracted the cleaning of communal areas in Houses in Multiple Occupation (HMO) to a cleaning company, but one Regional Manager accepted that their sub-contracted cleaning company was not providing a good service, while adding that a cleaning service was not included in the COMPASS contract, and that Housing Managers visited properties at least once a month and could commission a property to be cleaned at any time.

Service users and NGOs told inspectors that not having a vacuum cleaner made it challenging to keep a property clean. Inspectors visited some properties, housing mothers with babies, where carpets were encrusted with dirt, and also heard from service users who had saved up from their weekly living allowance to purchase a vacuum cleaner, or had scrubbed all the carpets themselves when they first arrived in the property.

When inspectors raised concerns about poor standards of cleanliness with the Home Office and the Providers, a common response was that responsibility for keeping properties clean was shared with the service users, and that the absence of meaningful sanctions (a problem service user could not be evicted as this would make them destitute) did not help.

Inspectors saw some examples of service users, particularly young men in HMOs, making little effort to keep their accommodation clean and tidy, both the communal areas and their bedrooms. Equally, inspectors visited some family homes that were spotless.
Case study 1: Examples of dirty properties

Suitability of accommodation

7.12 Almost half (20) of the stakeholder submissions focused on the unsuitability of accommodation provided for particular groups of asylum seekers. These included those suffering with Post Traumatic Stress Disorder (PTSD), survivors of torture, and victims of human trafficking, who were required to share rooms with strangers or were placed in accommodation where men could easily access female areas.

7.13 Other examples included large Initial Accommodation (IA) units where single mothers had to leave their babies unattended to do their laundry, which inspectors were also told about by service users; women with small children placed in areas with poor public transport, making it difficult to access support; and young people with high levels of trauma placed in Houses in Multiple Occupation (HMO) with older men who had alcohol and drug abuse problems.

7.14 Several NGOs reported that although they had raised such issues with the Home Office or with the Provider, their clients had not been provided with more suitable alternative accommodation.

7.15 Case studies 2 and 3 illustrate some of the issues reported by stakeholders and observed by inspectors during their visits.
Case Study 2: Example of unsuitable accommodation

The property

A converted basement flat, located underneath a Houses in Multiple Occupation (HMO) used to accommodate single asylum-seeking males.

The service users

The flat was being used as Section 95 Dispersal Accommodation (DA) for a married couple and their 3-year old child.

Issues

The service users told inspectors that there had been numerous problems with the flat, including ventilation, damp, a water leak and noise from the house above, plus there was a lack of outside space for the child to play.

Inspectors were informed that the child had health issues and were shown a letter from the NHS which stated that these were caused by the ventilation and damp conditions in the property.
Case Study 3: Example of dedicated mother and baby unit

The property
A Houses in Multiple Occupation (HMO), in use as a “mother and baby unit”.

The service users
7 mothers with children under 2-years old.

Issues
ICIBI inspectors spoke with the service users, who explained that there were regular arguments, mostly about cleaning or noise. Many of the bedrooms were not carpeted, which contributed to the noise from above.

Other issues with the property included a lack of cleaning of the communal areas (the property visitation log, which went back to January 2018, did not record any cleaning of the communal areas), broken equipment, window bars (which one resident said made them feel like that they were “in prison”), blocked drains, an infestation of rodents, damp and mould.
Response to complaints

7.16 Of the 43 stakeholder submissions 20 referred to the complaints process, slow responses and poor remedial action from the Providers. NGO representatives and asylum seekers living in the 16 properties highlighted similar concerns to inspectors: having to complain several times before any action was taken to fix defects, slow response times, and poor communication, including not telling them when problems would be fixed.

7.17 In its submission, one stakeholder commented that the “poor” complaints process was placing a significant burden on NGOs, who were having to advocate on behalf of their clients, while a coalition of organisations referred to the challenges for asylum seekers, for example, not understanding the language or the process, anxiety about the possible impact of complaining on their asylum claim, and fear of those in authority based on their pre-flight experiences.

7.18 Several NGOs reported that there was little appreciation of the need to respond more flexibly to complaints from vulnerable service users. Inspectors were told about families being left with limited cooking facilities, and about vermin infestations and mould. One NGO commented that while a complaint might receive an initial response immediately, any repairs could take a long time. Another stated:

“... long-term experience of working with clients who are residents of asylum support accommodation bears out the view that the inspection regime in London is ineffective. There appears to be no clear system of accountability for low standards of housing, health and safety. Those who advocate for individual residents have to do so on a case-by-case basis, suffering delays and a lack of response in many cases.”

7.19 Inspectors were presented with email correspondence between one NGO, the Provider and the Home Office about the accommodation standards in 4 separate properties. The issues included insect and rodent infestations, faulty boilers, faulty appliances and broken furniture. From the emails, it appeared that the Provider had failed to respond to the NGO’s repeated complaints, which had led to a worsening relationship between the two, and a request for the Home Office to mediate.

Provider – Service user relationships

7.20 In 7 submissions, stakeholders repeated anecdotal evidence from clients in asylum accommodation of bullying and intimidation. For example:

“My client has been told by [Provider] that if she complains she will make trouble for herself; moreover, she has been told that she must not say that she sleeps in the living room.”

7.21 Some service users had told stakeholders that they felt they were looked down upon and had the sense that Provider staff saw them as “immigrants getting something for free” who “should be grateful”. One NGO said that its clients were disrespected or disbelieved when they reported maintenance issues in their homes:

“... clients often report that they have been treated with hostility and that their complaints are dismissed by staff (including housing managers and staff in the local office)”.

32
Another NGO described how its clients were under instruction not to touch any fittings themselves, and had had to wait for 2 weeks for a light-bulb to be replaced. Inspectors heard similar stories from asylum seekers. In one case, inspectors were told that a post-partum mother was given a cot, but instructed not to assemble it herself. She waited a month for the cot to be assembled, during which time her new-born baby had to sleep with her in her bed.

During their visits, inspectors did not witness any evidence of poor interactions between service users and Provider staff. However, some of the notices on display in IA properties could have been read as intended to intimidate. For example, one informed service users that they would be reported to UKVI if they brought their own food into the IA.

Home Office – Stakeholder engagement

The Home Office told inspectors that, nationally, its National Asylum Stakeholders Forum (NASF) was its primary mechanism for engaging NGOs.

NASF’s terms of reference, drafted in 2015, include the statement:

“NASF recognises that stakeholders’ roles are independent of the HO and aim to scrutinise and hold to account the HO in the running of the UK asylum process. This will mean that from time to time there may be areas of disagreement between stakeholders and the HO on aspects of UK asylum policy and practice. The HO recognises that stakeholders will not limit their comments and views to the NASF, but will engage in the broader political and advocacy arena to profile their views and priorities.”

Inspectors were told about a NASF sub-group dealing with asylum support, which was where issues relating to asylum accommodation were discussed. Home Office senior managers emphasised that they were open to dialogue with NGOs, and keen to be accountable. However, when issues were brought to their attention and further details were requested from NGOs these were not always forthcoming.

Senior managers also told inspectors that they expected that NASF outputs would be cascaded from national NGOs to locally-based charities and volunteer groups. This implied a stakeholder hierarchy and network for which inspectors found little evidence. In fact, as no NGO mentioned the NASF in its evidence submission, or during follow-up meetings with inspectors, it was unclear what value they saw in it.


31 "HASC Validation Table final" sent to inspectors in May 2018 refers to the need to update the ToRs.
Inspectors were also told that, as a result of the creation of the national Contract Compliance Team, the Home Office’s 6 Service Delivery Managers (SDMs) now had more time to focus on building local relationships with NGOs.

By its own account, the Home Office works collaboratively with NGOs. One example given was the work with Oasis, an organisation that provides clothing, support and assistance to asylum claimants and refugees in Cardiff. A regional Service Delivery Manager told inspectors:

“Some demands [from NGOs] used to be unrealistic. We have seen a decrease in issues as NGOs have a better understanding of how things work. NGOs now better understand when someone would qualify for a move for instance”.

In another COMPASS region, inspectors were informed by the Service Delivery Manager that:

“This [NASF] is a useful conduit for charities to present the issues of the day as they see them, and also for us to educate them on what they can expect from the contract. We have had some good wins from that type of forum.”

The Home Office had recognised the importance of effective engagement between the Providers and the various stakeholders, including NGOs, in developing the new COMPASS contracts. For several NGOs, getting the new contracts right was a key concern. In February 2018, it noted that the ‘Statement of Requirements’ (SoR):

“... now states that the Provider shall, during the normal course of its operations, liaise and co-operate with these other support organisations including LAs, NGOs, NHS and the Police, so that the interests of the Service Users are best served. This will include, but not be limited to, participation in multi-agency forums or meetings, as required, to protect and safeguard the welfare of Service Users. The Provider ... [will] act in a collaborative manner.”

Inspectors were told by one Provider that its staff already attended local and regional fora, and it believed that they had positive and constructive discussions with NGOs. Meanwhile, NGOs told inspectors that they were more able to ensure that their clients received the expected level of service by developing good working relationships with individual COMPASS Housing Managers. However, the quality and extent of engagement between NGOs and the Home Office and the Providers varied considerably from region to region, and within some regions.

Local authorities

Under the powers granted by the Housing Act 2004, local authorities operate property licensing schemes for HMOs. These apply to properties housing multiple “households” who have to share facilities, such as a toilet, bathroom, or kitchen. All local authorities are required to license larger HMOs, have discretion to license smaller HMOs, and some also operate selective licensing schemes for privately rented properties more generally. Licensing therefore extends to some properties used by the Providers for asylum accommodation. The landlord is responsible for payment of the licence fee.

32 The 6 SDMs are each responsible for 1 COMPASS contract area. Their objective is to ensure that the services set out in the contract are being delivered and to manage the relationship with the Provider and with other stakeholders, such as local authorities, NGOs, education authorities, police and NHS.
33 Local authorities.
34 A “household” may be an individual or a family.
35 https://www.gov.uk/house-in-multiple-occupation-licence
36 The fee is set by the local authority, and may vary depending whether it is a first-time license or a renewal.
Local authorities undertake inspections of licensed properties to ensure compliance with the terms of the licence. These inspections have a different purpose and scope from inspections carried out by the Home Office Contract Compliance Team, though some of the issues they raise, such as whether fire safety measures are appropriate, may overlap.

Under the Housing Act 2004, local authorities also have powers in relation to overcrowding. In March 2017, a sub-contractor of one of the Providers was instructed by Newcastle Council to end room sharing in their properties. However, the company appealed the decision in March 2018, and in May 2018 the Property Chamber, Northern Residential Property, First Tier Tribunal found in its favour.

Home Office senior management indicated that it was aiming for greater collaboration with local authorities as part of its broader improvement plans. For example, all Home Office Contract Compliance Officers (inspectors) had embarked on Housing Health & Safety Rating System (HHSRS) training. Together with closer alignment to the ‘Decent Homes Standard’, managers hoped to improve consistency between Home Office and local authority inspections.

Inspectors asked the Home Office for any relevant data it held. The Home Office did not collect data on local authority inspections of asylum accommodation, nor did it have a record of all HMO licences held for COMPASS properties. Inspectors were told that this was the Providers’ responsibility. As a result, the Home Office was unable to confirm that every property requiring an HMO licence had one. Inspectors were told that it believed this happened every time a new HMO property was acquired by a Provider.

Meanwhile, one local authority reported that it was:

“... sometimes asked by the Provider to check suitability of a property or inspection of a property or an area (e.g. community cohesion considerations) where asylum-claimants are due to be placed. However, these requests are not an established regular process, therefore it is not possible to give an authoritative overview of the accommodation standards across the whole stock”.

The Home Office was not collecting data on the costs borne by local authorities where asylum accommodation was being provided. The Home Office informed inspectors:

“All of our accommodation contracts are with private Providers. Local authorities’ duties in respect of properties housing asylum claimants, and their occupants, are understood to be the same as their duties in respect of other properties and residents.”

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37 Jomast, a sub-contractor for G4S.
38 https://www.chroniclelive.co.uk/news/north-east-news/firm-fighting-councils-ban-asylum-14456757. On 16 May 2018, the Property Chamber, Northern Residential Property, First Tier Tribunal made its determination. It allowed the appeal and instructed that the council’s Overcrowding Notices for the properties in question should be quashed. The Notices were found to be defective, as they failed to refer to all the rooms in the properties. However, the Tribunal also found that had they been valid they would also have fallen to be quashed. It reasoned that the guidance on accommodation standards the council relied upon did not have the force of law, and “The occupants occupy the properties at the discretion of the Home Office. Individual occupants can be (and quite often are) instructed to move elsewhere by the Home Office at very short notice. The occupants apparently come to the accommodation after undergoing a screening process overseen by the Home Office. The Home Office may specify that specific named occupants should have a single room. In essence the accommodation is to fulfil a Home Office requirement for temporary accommodation.” It continued “The Tribunal accepted that it was clear that certain individuals should be offered single rooms e.g. torture victims and pregnant women, and on appropriate medical grounds. The evidence given to the Tribunal was that the screening process had already taken place, as certain individuals came with an instruction that they were to have a single room.”
39 At the factual accuracy stage, the Home Office informed inspectors that: “This is data that would need to be compiled by local authorities and is not something we could otherwise ‘collect’. We have asked, through the SMPs and otherwise, for detail on the costs to Local Authorities of asylum seekers housed in their localities, but have had no detail provided.”
The Service Delivery Managers also had a role in engaging local authorities, as did the Strategic Migration Partnerships (SMPs). The latter could be used to share information about asylum seekers and issues such as the impact on local services, which could inform local authority planning and resource allocation.

However, it was clear from stakeholder submissions that information sharing and collaboration with local authorities was uneven. In some areas it worked well, but it was described as “often dependent on the goodwill of individual stakeholders at a local level, rather than being consistently maintained in all dispersal areas.” A submission from one of the SMPs made the same point.

Local authorities often faced significant local opposition to the dispersal of asylum seekers to their area. For example, the inspection team received a number of submissions from individuals and groups concerned with a proposal to convert a nursing home in the north west of England into IA. The submissions argued that the COMPASS Provider had failed to adhere to local authority requirements.

For asylum seekers with particular health or care needs, local authorities have a duty under the Care Act 2014 to conduct a ‘needs assessment’. For this to work effectively, local authorities, the Providers and the Home Office have to work together. Again, the evidence suggested that this functioned unevenly. Inspectors were told by one Provider of slow response times from local authority social care teams in assessing the needs of service users. It was unclear how widespread this issue was, but one stakeholder commented:

“The local NRPF (social care) team have no extra resources to accommodate for the extra burden of Barry House [London Initial Accommodation] clients that have on-going social care needs and so it is difficult to get individuals assessed and this means vulnerable people are accommodated there for long periods without support.”

The devolved administrations

Scotland, Wales and Northern Ireland have their own legislation governing housing. This explained some of the differences in how the Home Office engaged with local authorities, and how the authorities themselves engaged with the question of asylum accommodation.

The evidence submitted by one Welsh NGO highlighted that asylum accommodation was not covered by Rent Smart Wales (landlord licensing and accreditation regime) which protected renters. In Scotland, one organisation highlighted the disconnect between Scottish housing standards and the standards required in the COMPASS contracts, which they contended failed to reflect the devolved context.

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40 There are 12 Strategic Migration Partnerships, funded by the Home Office. The SMPs aim to develop and support local asylum seeker, refugee and migrant networks, encompassing grass roots organisations and local public services.
41 Guidance on this is provided to Home Office staff under the “Asylum Claimants with Care Needs” policy.
42 At the factual accuracy stage, the Home Office commented: “a local authority ‘No Recourse to Public Funds team’ would typically be responsible for accommodating and financially supporting households who are not eligible for DWP benefits or asylum support but where a local authority duty arises, rather than providing for care needs of households who are eligible for asylum support. Specifically, Southwark covers Barry House and it not their NRPF team is responsible for providing care for our service users there, thus the quotation is factually incorrect.”
8. Inspection Findings: The inspection regime

Bed spaces and properties in use for asylum accommodation

8.1 Home Office records indicated that, as at April 2018, there were 1,691 Initial Accommodation (IA) bed spaces in use (the data did not specify the number of IA properties). At the same time, there were 11,719 Dispersal Accommodation properties in use, including properties for families, single mothers, individuals, and a number of men or women sharing Houses of Multiple Occupation (HMO).

Home Office Contract Compliance Team

8.2 The Home Office Contract Compliance Team (CCT) is responsible for ensuring that the properties used by COMPASS Providers for the purpose of Section 98 or Section 95 accommodation comply with the requirements set out in ‘Schedule 2: Accommodation and Transport Statement of Requirements’ of the COMPASS contracts.

8.3 These requirements are expressed in the form of ‘Key Performance Indicators’ (KPIs). The CCT measures the Providers against these KPIs to ensure that properties are “safe” (KPI4), “habitable” (KPI5) and “fit for purpose” (KPI6). For a property to be deemed “compliant”, it must meet all 3 KPIs.

8.4 At the time of the inspection, the CCT had 14 staff - see Figure 2.

<table>
<thead>
<tr>
<th>Role</th>
<th>Grade</th>
<th>No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>National Team Leader</td>
<td>Senior Executive Officer (SEO)</td>
<td>1</td>
</tr>
<tr>
<td>Provider Team Leader</td>
<td>Higher Executive Officer (HEO)</td>
<td>3</td>
</tr>
<tr>
<td>Contract Compliance Officer</td>
<td>Executive Officer (EO)</td>
<td>9</td>
</tr>
<tr>
<td>Contract Compliance Support Officer</td>
<td>Administrative Officer (AO)</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>14</strong></td>
</tr>
</tbody>
</table>

8.5 The CCT was created in November 2017. Previously, management of the Contract Compliance Officers, who at the time of the inspection were based in Glasgow (1), Manchester (3), Leeds (2), Solihull (1), and Cardiff (2), was devolved to the 6 regional Service Delivery Managers.

8.6 Between them, the 9 Contract Compliance Officers are responsible for inspecting all IA and DA properties, and had been set a target to inspect 33% of them per year. However, CCT managers and staff told inspectors that there were plans to reduce this target to 25%.

44 As set out in an organogram provided to inspectors.
45 The staff refer to themselves as “Inspectors”. However, the title “Contract Compliance Officer” is used throughout this report to avoid confusion with ICIBI inspectors.
Inspectors interviewed or held focus groups with the Contract Compliance Officers responsible for each of the 6 COMPASS regions, and triangulated this with written evidence and observations, and a sample of property inspection reports. This identified inconsistencies in:

- training
- management oversight and support
- risk assessments
- equipment
- selection of properties to inspect – using complaints data
- prior notification to service users of property inspections
- inspection process
- “pastoral” checks
- categorising defects and repairs
- relationships with Provider staff
- quality assurance
- re-inspections

**Training**

8.8 The Home Office informed inspectors that all Contract Compliance Officers must have had valid, up-to-date Personal Safety Training (PST), and that they had all attended a ‘Safeguarding Workshop’ and a ‘Keeping Children Safe’ course in 2017.

8.9 When this inspection began, the Contract Compliance Officers had not received training specific to property inspection or surveying. However, during the course of the inspection, as part of the development of the Contract Compliance Team, existing staff embarked on Housing Health & Safety Rating System (HHSRS) training and the intention was to provide this to all new joiners. This training included a risk-based evaluation methodology focused on identifying and protecting against potential hazards to health and safety from deficiencies in residential properties.

8.10 Contract Compliance Officers told inspectors that their lack of training impacted their ability to do their job effectively and led to inconsistencies. One said:

“We have not had any relevant training for years. We have the Personal Safety Training annually, but nothing relevant to property inspections. I was given some training when I first started, but other than that knowledge is just obtained on the job. New staff are reliant on existing staff to train them, but the older staff are set in their ways. There needs to be a standard format of how we do this job, but there isn’t, and that is also down to the lack of training.”

8.11 Another added:

“The problem is that this is quite a specialised job. We are not trained surveyors, but are told to “go into a property in a surveying capacity.”
8.12 The limited training given to Contract Compliance Officers contrasted with the training Providers gave their staff. Inspectors were shown training packs that covered initial induction training, plus specific training packages on ‘Race relations and cultural awareness’, ‘Modern Slavery’, ‘Suicide and Mental Health’ and ‘Safeguarding and self-harm refresher training’.

8.13 One Provider told inspectors it had employed a consultant with 20-years’ experience of safeguarding to review all new legislation and its impact on the Provider’s existing training materials. As a result, all staff had received updated training on safeguarding and users at risk.

Management oversight and support

8.14 Inspectors found that the new (as of autumn 2017) Contract Compliance Team structure had resulted in a shift to “remote” line management in some areas. In fact, this had already been the case for some Contract Compliance Officers prior to the restructure, and one commented that for years they felt that they had been working “on their own without supervision or guidance”.

8.15 The new structure had highlighted how inconsistently the regional teams had been operating:

“Now, as a national team, it is becoming clear that our definition of defects is all different. The bulk is based on common sense, but it means that there is scope for the Provider to argue.”

8.16 Senior management was sure that, in time, the new structure would lead to a more consistent approach, but noted:

“People are used to doing things in a certain way... The teams here are sceptical because they have always worked separately ... it is a cultural problem.”

8.17 The Contract Compliance Officers referred to their heavy workloads. They told inspectors that staffing gaps and the slow process of recruiting new staff had significantly increased the pressures on them. Commenting on the amount of travelling and the impact on their home life, one said:

“It is very pressured at the moment. Someone went on sick recently and there is currently the feeling that they are now getting “more for less” – but, it’s no good for the staff. There is no work life balance. It’s not a case of people not pulling their weight rather the lack of resources.”

8.18 Despite this, all of the staff to whom ICIBI inspectors spoke seemed to enjoy their jobs, and working relationships appeared close and constructive. One Contract Compliance Officer summed it up:

“... I love this job, it’s really interesting, lots of different people, good view on the asylum system. It’s a unique job, you are out and about, you have flexibility and are not micromanaged.”

Risk Assessments

8.19 Prior to conducting a property inspection, Contract Compliance Officers are required to complete a risk assessment. The requirement is set out in Home Office ‘Standard Operating Procedures’, which state:
“Under no circumstances should an inspection take place without a risk assessment being undertaken in advance of the inspection. The risk assessment process is designed to alert inspectors to known risk to enable them to prepare adequately for the inspection.”

8.20 The purpose of the risk assessment is to determine if it is safe for inspection staff to enter the property and conduct an inspection. It should cover any identified safeguarding or vulnerability concerns, any health issues, and details of any previous disruptive, aggressive or violent behaviour by the service users.

8.21 Inspectors examined a sample of 100 property compliance inspections covering the period 1 March 2017 to 28 February 2018. In 15 of these, there was no evidence that a risk assessment had been completed. The 85 risk assessments that had been completed differed in format and depth. Some had not been signed off by the Contract Compliance Officer’s line manager. Inspectors were told that oversight of risk assessments varied. Some Contract Compliance Officers were required to share assessments of “challenging” service users only, while others had 10% of their monthly risk assessments checked by their line manager.

8.22 Inspectors were told that changes to Home Office IT systems had impacted the Contract Compliance Officers’ ability to complete meaningful risk assessments: “6 months ago [I] would have said that we had the right information, now this is no longer the case. ATLAS however is really lacking information.” Inspectors were also told that where information was recorded it was not easily retrievable from ATLAS, and that the Providers regularly had more information about the service user(s) living in a particular property than the Contract Compliance Team did.

8.23 During the course of this inspection, inspectors accompanied Contract Compliance Officers on visits to 53 properties, and noted regional differences in sharing or discussing risk assessments with Provider staff. In one region, Contract Compliance Officers told inspectors they “carry out and share risk assessments before going to the inspection”. However, referring to risk assessments, a Provider Housing Manager stated:

“If they exist then the Home Office don’t share with us. When going to a property there is no formal prior assessment and we don’t really know who is waiting behind the door”.

While another commented:

“If information is withheld the risk assessment is useless. Generally, information sharing could be improved between all parties involved in the asylum process”.

8.24 Inspectors were told that the lack of systematic information sharing impacted on the safety of Provider staff. For example, they may be unaware that a service user had suicidal thoughts. Over time, however, Provider staff may become better informed than their Home Office counterparts because they are interacting with a service user more frequently. Providers told inspectors that they recorded and reported “serious issues” to the Home Office on a monthly basis, but inspectors found that each Provider had its own criteria and method of recording this information, and it was unclear what use the Contract Compliance Team made of it.

**Equipment**

8.25 The equipment the Home Office had provided to Contract Compliance Officers differed between regions and also differed from what Provider staff used. For example, some Contract Compliance Officers had safety boots, a damp meter, and a laser measuring tool. Others had none of these.

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46 ATLAS – the new case management system rolled out from Spring 2018.
Inspectors were told that, previously, Contract Compliance Officers had been issued with a “kit bag”, containing a first aid kit and “specialist” equipment, but this was no longer the case. Home Office senior management told inspectors that Contract Compliance Officers did not require specialist equipment as “they were not surveyors”, and that it was the Providers who were required to have specialist equipment in relation to testing properties.

8.26 Some Contract Compliance Officers said they felt at a disadvantage when engaging with their Provider counterparts due to not having comparable equipment:

“The Home Office don’t have a damp meter – we were told that we couldn’t use them as we didn’t have the right training and weren’t trained in damp. This could leave the Home Office open to dispute.”

8.27 While there were differences between the 3 Providers, their staff were typically equipped with a GPS tracking device, panic alarm and electronic tablet, with which they were able to report property defects in real time.

8.28 In December 2016, one of the Providers began equipping its staff with body-worn cameras. These were not permanently on, but could be activated where there was a heightened risk, such as when a Housing Manager was delivering an adverse asylum decision letter. The Provider’s operating procedures required the wearer to notify the service user and advise them that they could request not to be filmed. Inspectors witnessed Provider staff following these procedures.

8.29 The Home Office relied on a “safe systems of work” process, introduced since the Contract Compliance Team was created, requiring Contract Compliance Officers to contact their manager by phone periodically to update them on their whereabouts. The process also involves mandatory carrying of panic alarms, Home Office issued mobile phones, and completion of risk assessments prior to visits.

**Selection of properties for inspection – using complaints data**

8.30 The Contract Compliance Team (CCT) had a target to inspect 33% of the properties in the asylum accommodation estate per year. The 33% target was applied to each area where there was a “cluster” of properties, but the particular properties in that area to be inspected were selected at random by the Contract Compliance Officer, who was also able to conduct “intelligence-led” inspections, where complaints had been raised, including by MPs. However, inspectors were told that the latter did not happen routinely. Of the 100 sample inspection reports examined by inspectors, only 1 was “intelligence-led”.

8.31 Some Contract Compliance Officers commented that information about complaints relating to their region was not routinely shared with them or fed into their inspection regime.

8.32 The inspection team requested evidence of the total number of complaints relating to property standards, faults and defects received by the Home Office or a Provider between 1 April 2016 and 31 March 2018. In response, the Home Office provided 6 pieces of evidence. These indicated that complaints were not being recorded in a consistent way.

8.33 Complaints about Clearsprings properties in London & South East and Wales & South West regions were recorded in a single document, which categorised them as relating to ‘accommodation’, ‘provider behaviour’, ‘service user behaviour’, ‘service delivery’ and ‘other’.
Between 1 April 2016 and 31 March 2018, 234 complaints had been recorded, of which almost half (108) related to ‘accommodation’, and a quarter (64) to ‘service delivery’. Eight of the 234 complaints related to ‘provider behaviour’.

8.34 Complaints data for G4S-provided properties was supplied in 4 separate documents. The complaints had been categorised as relating to ‘accommodation standards’, ‘fixtures and fittings’, ‘Provider staff’ and ‘racial harassment’. Between 1 April 2016 and 31 March 2018, 39 complaints had been recorded, of which 37 related to ‘accommodation standards’. The other 2 complaints had not been categorised.

8.35 Complaints data for Serco properties was broken down by complaint type, using 6 categories: ‘defect’, ‘induction’, ‘service’, ‘translation’, ‘transport’ and ‘other’. There were 454 complaints recorded against Serco in Scotland and Northern Ireland between 1 April 2016 and 31 March 2018. The data provided for the other Serco region, North West of England, covered only 1 April 2016 to 31 March 2017. During this period, 88 complaints were recorded.

8.36 The different ways of categorising complaints made it hard to compare the Provider performance or to identify trends or patterns, but the Home Office did not provide any evidence to the inspection team to suggest that it had tried to analyse or use the complaints data it receives. It acknowledged that Providers “collated their complaints information in heterogeneous formats”, and reported that it had recently taken steps to centralise this function and had requested Providers capture data “in a more consistent and uniform format across the contract areas.”

Prior notification to service users of inspection visits

8.37 As the legal tenants of the properties they provide for asylum accommodation, each of the Providers claims the right to enter a property without giving notice to the resident service user.47 This right has been extended to Contract Compliance Officers under the terms of the COMPASS contracts.

8.38 Inspectors were told that the Provider in one region always informed service users when it would be making its monthly visit or when there was planned maintenance. However, this was not required contractually, and was not normal practice in other regions.48

8.39 The processes followed by Contract Compliance Officers were similarly inconsistent. In some regions they gave no notice of visits,49 while in one the service user was notified by letter 5 days in advance. Inspectors were told that the notification letter had been introduced in response to objections from NGOs to the Home Office entering properties without notice. The text of the letter stated: “Failure to be available for a meeting could affect your support”. It did not explain how. Meanwhile, in the same region, the Provider’s maintenance staff could still enter properties without notice and without the service user being present, which defeated the object of the Home Office providing written notification.

Inspection process

8.40 Home Office senior management told inspectors that an internal review of Contract Compliance Officer working practices had found that these differed from region to region. A set of ‘Standard Operating Procedures’ had been developed. However, at the time of the inspection, inspectors

47 Asylum seekers are not classed as “tenants” but as “service users”, and as such do not hold tenant’s rights, such as the right to 24-hours notice where the landlord wishes to access the property – see https://www.gov.uk/private-renting
48 West Midlands inspection rounds, Cardiff inspection rounds.
49 West Midlands inspection rounds, Cardiff inspection rounds.
found little evidence that these had yet resulted in greater consistency, and Contract Compliance Officers said that there was no checklist or best practice guide to completing a property inspection.

8.41 Inspectors observed 53 inspections. Some involved a thorough physical inspection of the property, including testing: all smoke and heat alarms, and fire doors; the taps to check for hot water and any leaks; the window locks; and inside cupboards to check for infestations. Where any defects were found these were photographed. Others appeared cursory, and involved a brief visual inspection of the property, which missed defects that inspectors saw and pointed out, for example missing window locks, broken bathroom extractor fans, and water damage.

"Pastoral" checks

8.42 The Home Office told inspectors that Contract Compliance Officers conducted a “pastoral” check with any service users present at a property during an inspection. Inspectors observed that the form these checks took differed substantially from region to region. Contract Compliance Officers appeared to have different understandings of the purpose of these checks. Some said they were to check contract compliance. Others saw little purpose in them.

8.43 In one region, the questions centred on whether the Provider Housing Manager had provided service users with relevant local information (such as the location of local shops) during their induction to the property, even where this was some years before. In another region, the focus was more on how the individual was settling in, for example whether they had had any issues registering with a GP. Some service users were simply asked “is everything ok?”, while in some cases the service user was not asked any welfare questions.

8.44 Inspectors asked senior managers about the Home Office’s approach to these checks, and were told “Pastoral checks are completed on an ad hoc basis. The inspection staff are not welfare officers” and “the pastoral checks are not part of the ‘teams’ targets”. Another senior manager told inspectors “There is not enough training to be able to identify safeguarding and vulnerability”.

Categorising defects and repairs

8.45 Under the terms of the COMPASS contract, the Providers are required to make repairs to asylum accommodation within specified timeframes according to the severity of the defect: ‘Immediate’, ‘Emergency’, ‘Urgent’, and ‘Routine’.

<table>
<thead>
<tr>
<th>Classification</th>
<th>Response Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Immediate</strong> – there has been a material adverse effect on a service user’s health, safety or security or loss of a fundamental service or facility</td>
<td>Continuous call out facility to investigate and restore or provide temporary alternative accommodation <strong>within 2 hours</strong> of notification by the service user or the Provider becoming aware of the defect</td>
</tr>
<tr>
<td><strong>Emergency</strong> – there may be a material adverse effect on a service user’s health, safety or security or loss of a fundamental service or facility</td>
<td>Continuous call out facility to investigate and restore or provide temporary alternative accommodation <strong>within 24 hours</strong> of notification by the service user or the Provider becoming aware of the defect</td>
</tr>
</tbody>
</table>
Urgent – there has been an adverse effect on the comfort of a service user or [the condition of the property] is likely to lead to serious damage

Investigate and make safe within one Working Day after notification by the service user or the Provider becoming aware of the defect and to affect a permanent repair or remedy within 7 Working Days of such a time

Routine – although defective having regard to the Provider’s obligations, the works can be deferred without causing serious discomfort or inconvenience to the service user, or damage

To be carried out within 28 Working Days of notification by the service user or the Provider becoming aware of the defect

8.46 The categorisation of defects takes account of the impact on the service user. ‘Immediate’ defects are ones that could impact on the service user’s safety, such as a gas leak. ‘Routine’ defects are ones that are not causing serious discomfort or inconvenience to the service user, such as external repairs. The COMPASS contracts sets out examples of “faults, failures, defects or incidents” for each of the categories.

- immediate
  - gas leak
  - structural instability
  - fire damage
  - flooding or free-standing water within the accommodation
  - water penetration through the structure of the accommodation
  - damaged or friable asbestos linings or insulation products

- emergency
  - failing or unstable ceiling fabric
  - hole in or weakened floor
  - bare or exposed electrical wiring
  - no operational hot water supply
  - no operational space heating system
  - blocked drainage either inside or outside the accommodation that affects the accommodation
  - plumbing leaks that give rise to potential flooding within the accommodation of an adjacent, other property
  - partial loss of mains water or electrical services
  - no operational smoke or fire alarm
  - ground floor windows and any entrance doors are not capable of being closed and locked etc.
  - complete loss of mains water or electrical services, gas supply etc
• urgent
  ◦ taps requiring new washers
  ◦ doors and windows requiring easing
  ◦ broken glazing
  ◦ minor blockages and leaks in roof damage
  ◦ no valid gas and/or electrical certification
• routine
  ◦ requirement for cleaning etc.
  ◦ external repairs etc.
  ◦ glazing repairs etc.

8.47 Even with such a long list of examples there is room for interpretation. However, where inspectors visited properties with Contract Compliance Officers and Provider Housing Managers they observed that the two generally agreed on the categorisation of any defects found.

8.48 But, a number of the service users inspectors met did not know how defects in their properties had been categorised, or that there were specified response times for different categories, and there was no formal process for notifying a service user when a defect would be fixed. Some NGOs also appeared unaware of how the system worked, and the mismatch of expectations was a source of friction.

8.49 Several service users and NGOs in one region also told inspectors about problems with Provider maintenance staff entering properties to carry out repairs without knocking, or when the service user was not in. Women living in properties alone or with young children described this as “frightening” and “distressing”.

8.50 An NGO operating in another region highlighted that response times were particularly important where there were vulnerable service users. The NGO believed that the Provider in that region stuck rigidly to the required response times and did not respond more quickly even if the service user was “very vulnerable”. In addition, they said that communication was poor:

“The level of engagement of repair staff with the clients is lacking. If clients try to self-advocate they are left feeling confused and unsure about the procedure. People do turn up to start on a repair but they do not explain to the person who lives in the house, what can be done and when it will be done.”

8.51 The same NGO reported that the required response times could also affect the quality of the repair, saying that the Provider would make temporary fixes rather than long-term repairs. For example, a service user had been given an electric heater when their boiler was broken, enabling the Provider to meet the 24-hour response time for what had been categorised as an ‘Urgent’ defect.

Relationships with Provider staff

8.52 Inspectors interviewed “Housing Officers” and “Regional Managers” from all 3 Providers. 50 Regional Managers managed a number of Housing Officers. The Housing Officers managed

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50 The Providers had different titles for these 2 roles, but the duties were broadly similar.
a portfolio of properties, which they inspected at least once a month, and dealt with any problems or issues as they arose. They were responsible for “inducting” new service users, and providing information and advice about local services and charities. Inspectors found them to have a good overview of what was happening on their “patch” and interested in the wellbeing of their service users.

8.53 Contract Compliance Officers told inspectors that they had good (“professional”) working relationships with Housing Officers and Regional Managers, and inspectors witnessed this during joint property inspections. One Contract Compliance Officer said:

“They [Provider staff] are good. Many of them have been working across multiple contracts so have been in post for a really long time”.

8.54 However, there was no Home Office guidance or training for Contract Compliance Officers about how to manage these relationships, and they were dependent on the personalities of those involved.

8.55 One Regional Manager told inspectors that working relationships were “effective” and “pragmatic”. Another referred to “a good clear line of communication between Home Office and COMPASS staff during in the inspection process” and said that “feedback is fluid” in relation to property inspection findings.

8.56 One Contract Compliance Officer told inspectors:

“We work closely with [Provider], who we accompany on all inspections. The [Provider] managers complete the inspection reports and we sign them off and get a scanned copy. They do the work, and we tell them what to write and agree the classification. This minimises duplication of work and works well.”

8.57 Nonetheless, the process was sometimes problematic. One Housing Officer told inspectors:

“One of the problems I’ve found is that you go round with the HO inspectors and spot issues, but sometimes there isn’t time for that little chat at the end of the visit to agree what needs to be done. This means I can’t get on with fixing stuff straight away.”

Quality Assurance

8.58 The ‘Standard Operating Procedures’ (SOPs) for Contract Compliance Officers set out the levels of quality assurance for inspection reports. These specify that the Contract Compliance Team Leader must:

“Carry out a QA check every month, of 20% completed inspection reports for each CCO during the year.”

8.59 The SOPs also require the Team Leader to complete a quality assurance checklist, which must be “retained for 12 months after the end of the operational year in which the accompanied visit has taken place”.

8.60 Inspectors found only limited evidence that the SOPs on quality assurance were being followed. Of the 100 sample inspection records examined, none contained any evidence or audit trail of quality assurance checks. Meanwhile, interviews with Contract Compliance Team staff revealed
that quality assurance was inconsistent. In the past, some Contract Compliance Officers had been accompanied on inspections by a Team Leader, but this was no longer happening, which the Contract Compliance Officers said was due to staff shortages and sickness. Others said they were managed remotely and rarely had any contact with their Team Leader.

8.61 Home Office senior management acknowledged that there were regional inconsistencies:

“Team leaders should have been doing quarterly checks and quality assuring the risk assessment and the inspections. That wasn’t happening systematically and now [team leaders have been asked] to provide a summary of what their compliance inspectors are doing so they are being managed more robustly.”

Re-inspections

8.62 Each Provider is required to upload the outcome of its inspections, including any defects found and the timescale for repairs, onto its IT systems. Each has its own separate IT systems. The Providers are also required to report to the Home Office if they have not made a repair within the specified timeframe, so that these can be discussed.\(^{51}\)

8.63 The Home Office property inspection regime includes re-inspections to check that repairs have been completed. However, inspectors found that re-inspections were neither routine nor systematic, and practices varied between regions. One Contract Compliance Officer told inspectors that if more re-inspections were completed the Home Office would “certainly pull back more in-service credits” as the Provider was not always able to make repairs within the required timeframes.

8.64 A Service Delivery Manager stated that re-inspections were “the key to identifying KPI breaches”, and believed this view was “supported at the most senior levels”. However, in another region, Contract Compliance Officers said they had been told by their line manager that re-inspections were not a priority, and they were “not in the spirit of the contract” which relied on Provider self-reporting.

8.65Inspectors asked the Home Office for data for re-inspections carried out during 2017. The Home Office responded that “follow-up” inspections were recorded but not “distinguished” in its data, so it could not say how many re-inspections had been completed.

8.66 Home Office management told inspectors that, rather than re-inspections, they were moving towards more “desk-based reviews” of how efficiently Providers made repairs following inspections. They felt that this would save time and was a “smarter” way of working. A priority for Contract Compliance Officers for 2018-19 was “a monthly compliance review of Providers’ MI data to ensure that all reported defects found during joint inspections have been recorded by the Provider and rectified in accordance with the contract timescales”.

Recording, collating and analysing data

8.67Inspectors requested data from the Home Office on the outcomes of contract compliance inspections. This revealed that different regions were using different terminology.

8.68 London & South East, Wales & South West, Scotland & Northern Ireland, and North East & Yorkshire & Humber recorded the outcome of a property inspection as “compliant”, “not

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\(^{51}\) This is done at pre-Contract Management Group (pre-CMG) and Contract Management Group (CMG) meetings.
correctly equipped”, “not fit for purpose”, “uninhabitable” or “unsafe”. North West and Midlands & East England used “compliant”, “routine”, “urgent”, “emergency” or “immediate” (in line with the COMPASS contract terms for required timeframes for repairs).

8.69 Home Office managers pointed out that for contract compliance purposes, and from an audit and assurance perspective, the terminology used in the COMPASS contract was “poor” and “unhelpful”. Several managers told inspectors that if their own homes were inspected, they would be found to be “non-compliant” against the COMPASS contract standards. The terminology was also proving problematic in terms of NGO engagement.

8.70 Between 1 April 2016 and 31 January 2018 (22 months), the Home Office completed 8,313 property inspections. Of these, just 1,988 (24%) properties were found to be “compliant” with the requirements of the COMPASS contracts – see Figures 4 and 5.

**Figure 4: Home Office property inspections – 1 April 2016 to 31 January 2018**

<table>
<thead>
<tr>
<th>Region</th>
<th>No of inspections</th>
<th>Compliant</th>
<th>Not correctly equipped</th>
<th>Not fit for purpose</th>
<th>Un-inhabitable</th>
<th>Unsafe</th>
</tr>
</thead>
<tbody>
<tr>
<td>London &amp; South East</td>
<td>870</td>
<td>263</td>
<td>4</td>
<td>473</td>
<td>122</td>
<td>8</td>
</tr>
<tr>
<td>Wales &amp; South West</td>
<td>672</td>
<td>160</td>
<td>1</td>
<td>375</td>
<td>103</td>
<td>22</td>
</tr>
<tr>
<td>Scotland &amp; Northern Ireland</td>
<td>1,467</td>
<td>352</td>
<td>556</td>
<td>205</td>
<td>111</td>
<td>0</td>
</tr>
<tr>
<td>North East &amp; Yorkshire &amp; Humber</td>
<td>1,669</td>
<td>161</td>
<td>295</td>
<td>982</td>
<td>203</td>
<td>2</td>
</tr>
</tbody>
</table>

**Figure 5: Home Office property inspections – 1 April 2016 to 31 January 2018**

<table>
<thead>
<tr>
<th>Region</th>
<th>No of inspections</th>
<th>Compliant</th>
<th>Routine</th>
<th>Urgent</th>
<th>Emergency</th>
<th>Immediate</th>
</tr>
</thead>
<tbody>
<tr>
<td>North West</td>
<td>1,679</td>
<td>436</td>
<td>221</td>
<td>936</td>
<td>82</td>
<td>4</td>
</tr>
<tr>
<td>Midlands &amp; East of England</td>
<td>1,956</td>
<td>616</td>
<td>511</td>
<td>596</td>
<td>168</td>
<td>3</td>
</tr>
</tbody>
</table>

At the factual accuracy stage, the Home Office clarified that “it is the “Compliant/Not fit/Uninhabitable/Unsafe” set of descriptors that we said we chiefly thought were particularly unhelpful.”
Analysis of 100 property inspection records

8.71 Inspectors examined 100 property inspections records completed by Contract Compliance Officers. The 100 records were selected at random from a total of 3,593 inspections carried out between 1 March 2017 and 28 February 2018. Inspectors requested:

- the completed property inspection report
- any correspondence between the Home Office and the Provider resulting from the inspection
- evidence of any repair work carried out as a result of the property inspection, including costs and dates
- evidence of any follow-up action or re-inspection by the Home Office
- any other documents retained in relation to the property inspection process

8.72 In the sample, 31 properties were categorised by the Contract Compliance Officer as “compliant”, while 64 were placed into one of the 4 non-compliant categories. In 5 cases there was either no inspection report or it was not detailed enough for inspectors to determine the outcome – see Figure 6.

<table>
<thead>
<tr>
<th>Compliant</th>
<th>Not correctly equipped/ Routine</th>
<th>Not fit for purpose/ Urgent</th>
<th>Un-Inhabitable/ Emergency</th>
<th>Unsafe/ Immediate</th>
<th>Not known</th>
</tr>
</thead>
<tbody>
<tr>
<td>31</td>
<td>16</td>
<td>39</td>
<td>9</td>
<td>0</td>
<td>5</td>
</tr>
</tbody>
</table>

8.73 Inspectors also found:

<table>
<thead>
<tr>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>No evidence of a risk assessment having been conducted</td>
</tr>
<tr>
<td>Re-inspection (following up a previous “non-compliant” inspection)</td>
</tr>
<tr>
<td>Provider made repair(s) within the contractually required timeframe</td>
</tr>
<tr>
<td>‘Intelligence-led’ inspection (resulting from a complaint)</td>
</tr>
<tr>
<td>Evidence that defects had been escalated to a senior manager</td>
</tr>
<tr>
<td>Evidence of quality assurance checks or senior manager reviews</td>
</tr>
<tr>
<td>Evidence that the service user had been moved to alternative accommodation where their property was deemed “uninhabitable” or had an “emergency” defect.</td>
</tr>
<tr>
<td>Evidence that any defect had resulted in a KPI service credit</td>
</tr>
</tbody>
</table>
ICIBI property visits

8.74 ICIBI inspectors visited 69 asylum accommodation properties. Of these, 53 visits were made with Contract Compliance Officers. The other 16 visits were arranged by NGOs. – see Figure 8.

<table>
<thead>
<tr>
<th>Provider</th>
<th>Location</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clearsprings</td>
<td>Cardiff</td>
<td>11</td>
</tr>
<tr>
<td>Clearsprings</td>
<td>London</td>
<td>6</td>
</tr>
<tr>
<td>G4S</td>
<td>Barnsley</td>
<td>2</td>
</tr>
<tr>
<td>G4S</td>
<td>Doncaster</td>
<td>1</td>
</tr>
<tr>
<td>G4S</td>
<td>Halifax</td>
<td>4</td>
</tr>
<tr>
<td>G4S</td>
<td>Leeds</td>
<td>7</td>
</tr>
<tr>
<td>G4S</td>
<td>Leicester</td>
<td>4</td>
</tr>
<tr>
<td>G4S</td>
<td>Walsall</td>
<td>7</td>
</tr>
<tr>
<td>G4S</td>
<td>Wolverhampton</td>
<td>2</td>
</tr>
<tr>
<td>Serco</td>
<td>Glasgow</td>
<td>8</td>
</tr>
<tr>
<td>Serco</td>
<td>Liverpool</td>
<td>3</td>
</tr>
<tr>
<td>Serco</td>
<td>Manchester</td>
<td>14</td>
</tr>
</tbody>
</table>

8.75 Inspectors identified a number of common issues: evidence of damp, mould and water damage; blocked drains; holes in floors, walls or doors; damaged fixtures and fittings, such as wardrobes or window locks; broken or faulty equipment, such as extractor fans or smoke alarms; poorly maintained gardens, with waste such as unwanted furniture; low standards of cleanliness; infestations of vermin.

Case study 4: Example of reported defects and Provider response

The property
In April 2018, ICIBI inspectors visited a 4-bedroom terraced property with an NGO. The property is classified as a HMO.

The occupants
At the time of the visit it was used to house 4 single males. One of the service users suffered from mental health issues and had been prescribed medication. The NGO was concerned that the living conditions were affecting the service user’s mental health.

Defects
A service user explained that a number of issues with the house had been reported to the Provider, including regular leaking water and missing stair carpet (which had caused him to fall). In the 6 months he had lived in the house, little had been done to rectify any of the reported defects.
Inspectors observed water cascading into the kitchen from the upstairs bathroom. Part of the kitchen ceiling was missing and a large pool of water had formed on the kitchen floor. There were signs of water damage to the kitchen and living room walls. The Provider had placed a sign in the bathroom requesting service users to mop up water to prevent leaks.

There was also a broken fire door, damp and mould in the bedrooms, and the missing stair carpet. There were holes in the wall and inspectors were told that some had been covered with a wire pad to try to stop rodents entering the house.

The carpets and communal areas of the house were dirty. The property visitation log indicated that they had last been cleaned 3 months ago. Various items (a bed frame, chair, mattress, mops, bits of wood) had been left in the back garden. A service user said they had been there when he arrived 6 months before.

**Home Office response**

ICIBI inspectors raised concerns about the property, specifically the leaking water and missing section of ceiling, with the Home Office, who responded:

“We and the accommodation Provider have investigated this matter and can confirm that steps are underway to resolve all of the issues highlighted. Home Office records show that we had not previously received any complaints about this property directly. [The Provider] advised us that they had received an e-mail on 11th December 2017 from the [NGO] on behalf of one of the occupants raising issues related to the washing machine, shower and heating, each of which was then resolved. The washing machine problem had already been identified and a part ordered on the Provider’s inspection in December and was repaired in January....

... [The Provider] has advised us that they have maintained monthly inspections of the property and have identified and fixed issues relating to water damage on a number of occasions following their inspections. [The Provider] have advised that the underlying issue is caused by inappropriate use of the bathroom facilities above the kitchen in the form of excessive flooding of the floor, which is resulting in damage to the floor and the ceiling below. We are in discussion with [The Provider] on improved communications and instructions relating to use of the bathroom facilities.

[The Provider] has advised us that the ceiling was re-plastered in May 2016, but a further leak was reported to [The Provider] and remedied in January 2018, with advice provided to service users on how to use the washing facilities without causing damage. [The Provider] records indicate that in their most recent inspection in March 2018 they identified further damage/defects resulting from water egress from the bathroom. These defects were classified as urgent. [The Provider] advise that they found no source of leak from existing plumbing or sealants and believe the water damage continues to be the result of residents’ use of the bathroom. [The Provider] has reported that the water leak, kitchen light and kitchen door closer were all remedied within the 7 day ‘urgent’ contractual deadline. In the case of the ceiling the remedy was to remove a section of the ceiling, as the photographs show, to allow the area to dry out in preparation for full repair. [The Provider]’s intention was to review its readiness in their April inspection. The issue with the fire door closer being disconnected is a common issue in asylum accommodation^53....

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^53 Inspectors observed this in a number of properties.
Following your referral, [The Provider] inspected the property again last week and report that there remains no identifiable issue with the plumbing, bathroom sealants or kitchen light. [The Provider] have confirmed they will carry out this repair within the next 28 days. [The Provider]’s area Business Services Manager and their local Welfare Support Officer will be visiting the service users shortly to discuss how they can work together to prevent issues and defects from occurring in the future, including how to prevent water damage, reminding service users not to store bicycles in the communal living room and to dispose of waste correctly.

The Home Office will be scheduling a targeted inspection of the property in order to satisfy ourselves that the specific defects have been addressed and that the property is managed and maintained in accordance with our expectations.”

**Independent Chief Inspector’s comment**

This case exemplifies how difficult it can be for the parties (the service users, the NGO, the Provider, the Home Office, and in this case the ICIBI inspectors) to come to a common understanding of problems and solutions, and to remain objective.

While there was general agreement that the property had numerous defects, responsibility for them was disputed. The Provider clearly felt it had made reasonable efforts to fix them. Equally clearly, the service users were dissatisfied.
9. Inspection findings: Governance and oversight of the COMPASS contracts

Performance measurement – KPIs and service credits

9.1 ‘Schedule 13, performance measurement’ of the COMPASS contracts sets out how the Providers’ performance will be measured. It is measured against a set of ‘Key Performance Indicators’ (KPIs). These detail the performance standards the Providers must meet.

9.2 ‘Schedule 13’ also outlines the process to be followed in the case of ‘non-conformance’ to a KPI, referred to colloquially as a “KPI failure”. Each Provider is required to record any KPI failures and report them to the Home Office. KPI failures incur “points”. If a Provider reaches a specified number of points on a particular KPI during a payment period a “service credit” should be applied. This results in a deduction, a “Service Credit Payment (SCP)”, from the Monthly Service Payment (MSP) to the Provider.

Performance reviews and oversight

9.3 Provider performance is reviewed at regular meetings between the Home Office and each Provider.54 Monthly pre-Contract Management Group (pre-CMG) meetings were usually attended by the relevant Provider Team Leader from the Home Office Contract Compliance Team (CCT) and the Provider Contract Compliance Manager.

9.4 The pre-CMG is not a formal part of the COMPASS contract governance process. Inspectors were told that it was an opportunity to discuss any KPI non-conformance the Provider had reported and to give the Provider “the chance to provide any mitigating reasons for KPI failures”. Home Office managers said that they would usually agree at the pre-CMG meeting if the mitigation offered was reasonable and whether service credits should be applied.

9.5 The Contract Management Group (CMG) also met monthly. This was usually attended by the relevant Home Office Service Delivery Manager (SDM),55 the Home Office Assistant Commercial Manager, and the Regional Manager for the Provider. At this meeting, service credits are formally agreed and recorded. Inspectors were told that the CMG meeting agenda also covered other issues, such as the safeguarding of service users, complaints and any incidents that had occurred in asylum accommodation.

9.6 The Home Office also convenes a quarterly Strategic Regional Management Board (SRMB),56 attended by senior managers from the Home Office and from the Provider. Inspectors were told that if service credits had not been agreed at the CMG, they would be discussed at the SRMB, however this was rare. One SDM commented that they “had never had a problem with making a decision on service credits [at the CMG]”, while a senior manager said that the “difficult decisions” were made at the pre-CMG meeting to allow conversations at the formal meetings to be more strategic and not “bogged down by defects”.

54 These performance meetings are separate for each of the 3 Providers.
55 In the Home Office, 6 Service Delivery Managers (SDM) are responsible for one contract area each and their overarching objective is to ensure that the services set out in the contract are being delivered.
56 There are 3 SRMBs, 1 for each Provider.
9.7 Home Office senior managers who sat on the SRMB told inspectors that although they did not get directly involved in the pre-CMG and CMG meetings, they had oversight of the outcomes of these meetings and felt that anything that needed escalating would find its way onto the SRMB agenda. They perceived that the process was “transparent enough” and were “satisfied” that all 3 Providers were self-reporting non-conformances.

Service credits in 2017

9.8 Home Office senior management pointed to the service credits applied during 2017 as evidence that the process was working effectively – see Figure 9.

**Figure 9: Service credits 1 January – 31 December 2017, broken down by Region and Provider.**

<table>
<thead>
<tr>
<th>Region</th>
<th>Provider</th>
<th>Service credit applied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Midlands &amp; East of England</td>
<td>G4S</td>
<td>£206,828.42</td>
</tr>
<tr>
<td>North East &amp; Yorkshire and the Humber</td>
<td>G4S</td>
<td>£115,845.10</td>
</tr>
<tr>
<td>North West</td>
<td>Serco</td>
<td>£72,576.99</td>
</tr>
<tr>
<td>Scotland &amp; Northern Ireland</td>
<td>Serco</td>
<td>£216,763.54</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td><strong>£496,168.95</strong></td>
</tr>
</tbody>
</table>

Assessing mitigations

9.9 Home Office managers told inspectors that there was no written guidance on how to manage KPI compliance, including when to accept what a Provider had presented as mitigation. Some managers felt that this was “more about common sense”. Meanwhile, Home Office managers involved in the pre-CMG and CMG meetings said they felt “confident” they could use these meetings to “robustly hold the Provider to account”.

9.10 Service Delivery Managers, in particular, said they had robust relationships with the Providers, due in part to the accountability of the CMG process. However, one told inspectors that the lack of resources to do follow-up inspections meant “it is difficult for me to prove or disprove whether fixes have been actioned – it’s hard to measure”. This was echoed by other managers.

9.11 Although it was rejected by senior management, the Contract Compliance Team suggested that the sustainability of the contract was an influencing factor, and that if service credits were applied for everything the Providers “would be paying a fortune”. To keep the contracts going, managers would “tend to waive” some service credits, as “we are not there to crack the whip, but rather to optimise what they are doing through the contract”. However, one senior manager believed that the Home Office had become “stricter” at applying service credits as the Providers were now operating in “business as usual” mode, rather than “fighting fires” as they had done during the surge in asylum support applications in 2015.

9.12 Home Office Contract Compliance Officers were not directly involved in the pre-CMG or CMG meetings. They said that the results of their property inspections were fed into these meetings by their managers or an SDM. Some said they were rarely informed about the outcomes of

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57 No service credits were applied to Clearsprings Ready Homes during 2017.
the meetings and felt dispirited by this. They perceived that the process “lacked transparency” and left them “unable to see where their work fitted into the bigger picture”.

9.13 Senior Home Office staff challenged this, saying they informed Contract Compliance Officers when service credits had been agreed. They acknowledged that Contract Compliance Officers did “a very difficult job” and said it was important that they had an understanding of how and why decisions were made in relation to service credits.

Other relevant oversight arrangements

9.14 The Asylum Accommodation Governance Board meets monthly to consider Asylum Support Accommodation and Compliance, Asylum Support Operations and Asylum Support Intake. It is attended by the Asylum Support Senior Leadership Team who review financial, contractual and operational performance, identify opportunities, and highlight and mitigate risk. This Board has oversight of service credits but plays no role in determining them.

9.15 The Home Office also chairs Executive Oversight Boards (EOB) that look across all its Serco and G4S contracts. These “cross-Home Office meetings” are attended by senior civil servants and the Chief Executives of Serco and G4S. The Home Office told inspectors that Clearsprings Ready Homes was not “a large enough contractor to warrant a HO-wide EOB meeting”.

Home Office compliance reviews (audits)

9.16 Periodically, Contract Compliance Officers carry out compliance reviews (also referred to as “audits”) of the Providers’ records, including their quality assurance reports. Some of this is “desk-based”, with the Home Office staff accessing the Provider’s IT systems remotely. Some require visits to the Provider’s Head Office to audit paper records. Copies of completed compliance review reports are sent to the Provider and relevant SDMs. The latter then follow them up with the Provider.

9.17 During 2017, the Home Office carried out 13 compliance reviews of Serco and 2 of G4S. There were no compliance reviews of Clearsprings. The Home Office informed the inspection team that:

“...the original suite of audit checks that were conducted at the start of the COMPASS arrangements are understood to have been de-prioritised in favour of property inspections as they routinely showed Provider compliance. We had also needed to focus heavily on managing down a large hotel contingency before putting in place a more robust and consistent national model. Audit checks were therefore variable during the reporting period,\(^58\) but they have recently been standardised again within the national team structure as reflected in the Standard Operating Procedures.”

9.18 This view was echoed in interviews with Contract Compliance Team members, some of whom were concerned about the requirement to carry out desk-based checks because of ongoing IT issues. In one region, staff reported that they had not had access to the Provider’s system for over a year, though access had been reinstated “in the past month”.

9.19 There was also concern because, in some areas, the Providers relied heavily upon sub-contractors for the provision of properties and services. In London, for example, there were 420 sub-contracted properties, provided through 11 sub-contracted “agents” and involving a team of 40 or 45 sub-contracted staff.

\(^58\) 1 January – 31 December 2017.
The Home Office told the inspection team that it did not carry out compliance reviews of a Provider’s sub-contracted agencies. Views differed on whether it should. One senior manager commented that “it may have an impact on the prime Provider’s ability to manage the relationship [with the sub-contracted agency]” and the Home Office might “get in the way”. However, another said that the Home Office “should audit sub-contractors more” and that this was an area for improvement.

### Service user complaints

The COMPASS contracts require Providers to provide a complaints mechanism for service users (or their representatives). The management of complaints by the Provider is covered by a specific KPI. KPI7 requires Providers to “seek to resolve any complaints within 5 working days”. The Home Office told inspectors that complaint numbers and trends are monitored and reported on a monthly basis at CMG meetings.

Service users may also complain to the Home Office (UK Visas and Immigration Central Complaints Team) if they are not satisfied with the service they have received. Complaints are forwarded to SDMs to investigate. Inspectors were told that, depending on the nature of the complaint, the SDM may share it with the Provider for further investigation and resolution.

The inspection team received oral and written evidence from service users and their representatives that they often had to make the same complaint a number of times before it was acknowledged and resolved. The issues raised included infestations of vermin, broken beds, and broken washing machines. Some complaints had not been resolved after 6 months. In one case, the Strategic Migration Partnership had had to intervene because the relationship between the NGO and the Provider had broken down. The NGO in question said that:

“There is a complaints email but we have never received a merit based response to any complaint apart from the standard phrase that ‘the issue is being investigated’.”

Inspectors requested Home Office data for complaints relating to property standards received by the Home Office or by a Provider during 2017. The data was not recorded in a form that could be analysed by inspectors, with significant differences in the way each Provider categorised and reported complaints. Meanwhile, the Home Office had not attempted to analyse the complaints received by UKVI’s Central Complaints Team.

Similarly, inspectors requested data for complaints made about Provider or Home Office staff. The Home Office responded that:

“A detailed breakdown of service user complaints concerning staff behaviour is not readily available from existing databases and could only be provided by examination of individual complaint reports.”

### Incident reports

The COMPASS contracts require that where an incident occurs involving a service user the Provider must send an incident report to the Home Office. The ‘Statement of Requirements’ sets out the types of incidents that must be reported and the timescales for doing so.
As with complaints, the data provided to inspectors showed that the 3 Providers each categorised and reported incidents differently, including one which recorded it differently in the 2 regions it managed.

<table>
<thead>
<tr>
<th>Provider</th>
<th>Region(s)</th>
<th>Number of incidents</th>
<th>Provider Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clearsprings</td>
<td>London &amp; South East + Wales &amp; South West</td>
<td>60 Initial Accommodation 1,890 Dispersed Accommodation</td>
<td>1,950</td>
</tr>
<tr>
<td>G4S</td>
<td>Midlands &amp; East of England</td>
<td>2,169</td>
<td>3,870</td>
</tr>
<tr>
<td>G4S</td>
<td>North East &amp; Yorkshire and the Humber</td>
<td>1,701</td>
<td></td>
</tr>
<tr>
<td>Serco</td>
<td>North West</td>
<td>323 Initial Accommodation 2,193 Dispersed Accommodation</td>
<td>4,031</td>
</tr>
<tr>
<td>Serco</td>
<td>Scotland &amp; Northern Ireland</td>
<td>1,515</td>
<td></td>
</tr>
</tbody>
</table>

Some of the categories used were broad, for example 2 of the Providers used the category “Violence or aggressive incident involving a service user”, without identifying the instigator and victim, and much of the information recorded was in free text. The Home Office told inspectors that Home Office and Provider records did not allow it to “readily distinguish those incident reports where violence, anti-social behaviour or harassment has been directed against COMPASS Provider staff without examination of individual incident records”.

Home Office senior managers acknowledged that there needed to be a more standardised approach to the recording and reporting of incidents. At present, the way incidents were recorded made comparisons between the 3 Providers impossible, and any themes or trends hard to identify.
10. Inspection findings: Service user wellbeing

Introduction

10.1 The European Court of Human Rights has held that all asylum seekers are inherently vulnerable, due to their disadvantaged legal position when compared to other groups or nationals. However, within the overall population of asylum seekers there are those who may require additional support or special treatment to ensure their particular needs are met.\(^6\)

10.2 The ability of the Home Office to identify vulnerabilities, and to share appropriate information with relevant partners to ensure that particular needs are met, is key to providing effective safeguarding.

10.3 Home Office staff responsible for asylum intake are trained to ask new claimants questions aimed at identifying vulnerable individuals. However, this had been an acknowledged weak point in the system and, in April 2018, as part of an operational excellence project, changes have been made to the kinds of information collected, how it is recorded, and what is done with it.

Information sharing with asylum accommodation Providers

10.4 Provider Housing Managers and other senior staff told inspectors that the information they receive from the Home Office about service users is sometimes poor. For example, one Provider safeguarding lead stated:

“the quality of information provided by the Home Office is a worry to me. The quality and consistency of the information they provide varies. Sometimes they just may not have the information, at which point it is down to us, but sometimes I feel that it is simply not being reported with sufficient detail”.

10.5 From the Providers’ perspective, this is directly relevant to their housing allocation process. As one told inspectors:

“Information provided by the Home Office is a bone of contention. The process of information sharing is difficult, and the Home Office don’t always share relevant information. Sometimes they don’t have it, and sometimes they do have it, but don’t have easy access to it, so it gets missed. Some of our biggest issues are linked to this, issues like a wheelchair user turning up at an inappropriate DA property, because we have not been told that they are a wheelchair user. It makes life difficult for us, and difficult for the service user. I would say that it is a systematic failure from the Home Office to share information”.

10.6 One Provider Regional Manager told inspectors that the Home Office was failing to provide information where service users were drug users or alcoholics and who may require specialist help. This had an impact on how service users were housed and the levels of support they required.

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Asylum seeker reticence

10.7 In some cases, asylum seekers may be reticent about sharing personal information with the Home Office. This is particularly true where they believe it could adversely affect their claim. Some information, such as experiences of sexual violence, trafficking, self-harm or torture, is deeply personal and may come to light only after therapy or once the claimant feels they are in a trusted and safe environment and can tell their story. In such cases, it may be impossible for the Home Office to elicit the relevant information at the point at which it is first needed for asylum accommodation purposes.

Stakeholder perspectives

10.8 However, NGOs who submitted evidence to this inspection believed that the Home Office was not working hard enough to address some of these challenges. One commented that:

“The continued failure of the Home Office to adequately identify, record and share information on vulnerability, and the actions taken based on that information by the Home Office and the housing provider, demonstrate a disregard for the health needs and additional vulnerabilities of torture survivors.”

10.9 Another NGO stated:

“We have examples of Home Office information on pregnancy not being shared with accommodation Providers and of accommodation Providers, even where relevant information has been provided by the Home Office, providing inappropriate housing.”

Providers’ safeguarding policies and processes

10.10 Once the Home Office asylum routing team has made the decision that an asylum seeker claiming support should be provided with accommodation, the Provider must share responsibility for safeguarding, including identifying and responding appropriately to vulnerabilities and needs.

10.11 As one NGO pointed out, vulnerabilities are not static, and an individual may display a range of vulnerabilities over the period they are in asylum accommodation. Since they are in direct contact with service users, Provider staff, particular Housing Managers, need to be trained to identify vulnerabilities and alive to the fact that they may change.

10.12 Although the Home Office has contracted delivery to the Providers, the provision of asylum accommodation is a statutory function for which the Home Secretary remains responsible. On his behalf, the Home Office therefore needs to assure itself that the Providers’ policies and processes in relation to safeguarding are fit for purpose.

10.13 Inspectors therefore requested copies of any evaluations of the Providers’ safeguarding policies and processes. In April 2018, the Home Office responded:

“Following the initial introduction of such policies at the commencement of the contract, the Home Office has not undertaken any dedicated review or evaluation of Provider’s individual policies and procedures, as we have focused on monitoring outcomes through the regular oversight of service delivery provided through existing contract governance arrangements.”
However, introduction of new and updating of existing provider policy documents, including but not limited to changes necessitated by identified needs for operational improvements, is subject to consultation with the Home Office through the established processes.”

10.14 In February 2018, in a consultation exercise with stakeholders on the shape of the new COMPASS contracts, the Home Office subsequently committed to better information sharing with the Providers:

“The Home Office will provide software and training aids as required to enable the Provider to manage, administer and share appropriate data in relation to each Service User and their dependants with the relevant entities.”

Practical application

10.15 From observations, it was clear to inspectors that many of the Provider staff working with service users had received some safeguarding training and felt confident in using it, asking relevant questions and making referrals.

10.16 However, inspectors also observed poor practice. For example, one Provider was routinely publishing all the names of the service users in Houses of Multiple Occupation (HMO) on a notice board in the hallway. In some instances, the front door was not secured, and as well as the turnover in service users many of the properties received frequent visitors. Displaying names in this way could have a significant impact on the safety of service users who had suffered domestic violence or had been trafficked and feared discovery by their abuser.

10.17 Inspectors raised this concern with Home Office senior managers, who were not aware it was happening and undertook to raise it with the Provider. But, they said that where an individual had been trafficked or had been the victim of domestic violence, this would already be known to the Provider. However, this failed to take account of victims who had not disclosed.

Impact on particular groups

10.18 Some groups of vulnerable asylum seekers can be particularly impacted by poor decisions about the suitability and standards of asylum accommodation. This inspection looked at 2 such groups: LGBTQI+ asylum seekers and pregnant/post-partum women.

LGBTQI + asylum seekers

10.19 The inspection team requested information from the Home Office about the number of LGBTQI+ individuals in asylum accommodation. The Home Office responded that this information was “not held in a readily reportable format by the Home Office or its accommodation Providers. All such individuals are managed on a case by case basis in accordance with their individual needs and related information is therefore predominately stored on individual case records in the form of free text notes”.

10.20 The Home Office told inspectors that it could identify those claims where a “special conditions flag” had been raised on its Case Information Database (CID) to indicate a sexual orientation claim, and could link those cases to people in support accommodation where the National Asylum Support Service (NASS) reference had also been uploaded to CID. But this data was caveated that it “would not necessarily mean that the person is LGBTI. It also would not
represent the total number of LGBTI people in accommodation, as some may not have claimed asylum on that basis, or the Special Condition may not yet have been raised if the asylum case has not been considered”.

10.21 The data provided was further caveated: “Cases are included regardless of whether the Sexual Orientation Condition was raised before, during, or after the accommodated period.”

10.22 The inspection coincided with the development of a new Asylum Policy Instruction (API) on ‘Gender Identity and Expression in Asylum Claims’. As at March 2018, the draft API acknowledged that trans and intersex individuals “may experience challenges and discrimination that could make them vulnerable as a result of their trans or intersex identity. This risk may be heightened in terms of accommodation provision”. 64

10.23 This draft API referenced the 2016 European Court judgment, ‘OM v Hungary’, which (at paragraph 53) stated:

“Lastly, the Court considers that, in the course of placement of asylum claimants who claim to be part of a vulnerable group in the country which they had to leave, the authorities should exercise particular care in order to avoid situations which may reproduce the plight that forced these persons to flee in the first place.” 65

10.24 However, a Home Office senior manager explained that the Home Office’s current position with regard to the allocation of asylum accommodation was that LGBTQI+ asylum seekers should be “mainstreamed” (routed in the normal way), and if problems arose the individual should inform the Provider. This appeared to ignore the fact that the individual may not feel able to complain, and that the strong message from the Home Office was that asylum accommodation was provided on a “no choice basis”:

“All requests [to be accommodated in a specific area] should be considered on a case by case basis, balancing the overarching principle that accommodation is offered on a ‘no choice basis’ against the strength of the exceptional circumstances that might make it appropriate to agree to the request to provide accommodation in a particular location.” 66

10.25 NGOs informed the inspection team that some LGBTQI+ asylum seekers had been subjected to homophobic bullying and violence by other service users in shared asylum accommodation. One NGO criticised the Home Office’s lack of proactivity in protecting LGBTQI+ asylum claimants:

“By not adequately assessing vulnerability before allocating accommodation, the Home Office is extremely limited in its efforts to prevent harassment or abuse of LGBTQI+ asylum claimants by housemates from occurring. In dealing with the safety of LGBTQI+ people in asylum accommodation, the Home Office’s focus is on making complaints and/or relocation requests after someone is abused. However, there is no guarantee that they will receive an appropriate response from the Home Office or accommodation provider.”

10.26 Providers adopted essentially the same position as the Home Office regarding the allocation of asylum accommodation to LGBTQI+ service users. However, one Provider safeguarding lead seemed to understand the need to ensure that they were properly protected and told ICIBI inspectors:

64 As at May 2018, the policy had yet to be published.

61
“LGBT people are dispersed as usual unless identified as at risk. We are aware of some cultural differences in the attitude toward LGBTI people. So, we do ask if they are happy and do they need to move. [Provider] liaises with police force Hate Crime teams and works with police and other safeguarding teams in cases where there is bullying. If we do need to move someone out, we have capacity to do so. [Provider] also signposts to organisations where there might be issues to provide support to LGBT and share information with relevant groups.”

10.27 This did not always translate into policies or practice on the ground. For example, one Provider’s induction packs given to service users in dispersal accommodation included a policy on ‘Reported Racial and Sexual Harassment or Bullying Incidents’ but made no reference to homophobia.

10.28 While Providers recorded incidents of abuse and violence in accommodation and reported them on a monthly basis to the Home Office, the categorisation of these incidents made it difficult to establish if they were motivated by homophobia (or other hate crimes). The Home Office told inspectors that its records did not readily show whether an incident was serious enough to have been reported to the police or whether the police had attended. This could only be established by examining individual incident reports.

10.29 Inspectors were told about a “pilot” run by the Micro Rainbow International project (MRI), where LGBTQI+ asylum seekers could be housed on referral from the Home Office. Nationally, 16 bed spaces were available. According to the Home Office, this pilot was agreed on the understanding that it would not affect the asylum decision, particularly where the basis of the claim was the individual’s sexual orientation.

10.30 In December 2017, MRI engaged Clearsprings in discussions and signed a formal agreement to become a COMPASS sub-contractor and provide asylum accommodation. At the time of this inspection, MRI had begun similar discussions with G4S and Serco. However, the Home Office and other NGOs had concerns about shared specialist housing, both around the safety of the residents and the effect being offered a place in such accommodation may have on the asylum claim.

Pregnant and post-partum women

10.31 Pregnant asylum seekers are another group for whom the asylum accommodation system can pose particular challenges, not least the health risks to mother and baby. According to one expert stakeholder:

“Asylum seeking, pregnant women are seven times more likely to develop complications during childbirth and three times more likely to die than the general population.”

10.32 The Home Affairs Committee report into asylum accommodation, published in January 2017, paid particular attention to the needs of pregnant women in asylum accommodation:

“It is vital that pregnant women and young mothers in Initial Accommodation receive the support they need. Women in the late stages of pregnancy should generally be provided with their own room; pregnant women and young mothers need access to transport for all medical appointments and related matters such as baby banks and antenatal education; and safe areas should be provided for young children to play.”

10.33 Pregnant women are protected by the Home Office’s ‘Healthcare Needs and Pregnancy Dispersal Policy’. This sets out how pregnant women should be treated. It also covers the

fact that healthcare information in respect of pregnant women may be obtained from CID and communicated to the Provider of Initial Accommodation (IA), via a Service Commissioning Form. The same principles and process applies for asylum seekers with other particular medical needs.

10.34 At the point of dispersal, Home Office “caseworkers who are responsible for dispersing pregnant applicants” must consider the needs of pregnant women (and those of mother and baby after she has given birth). The policy also refers to the 2010 National Institute of Clinical Excellence (NICE) guidelines ‘Pregnancy and complex social factors’, which outline the particular challenges for asylum-seeking mothers. It advocates:

- early booking into maternity services, ideally by 10 weeks gestation
- continuity of care
- family and social support
- planning labour
- post-natal care for 6-8 weeks

10.35 One stakeholder, providing specialist care to pregnant migrant women, had conducted an audit of its caseload. This illustrated the challenges. Of 65 women:

- 72% required an interpreter
- 57% required a mental health referral, comprising
  - 38% with a mild to moderate condition requiring referral to a GP/IAPT or a migrant NGO
  - 9% with a severe mental health illness requiring a perinatal psychiatric referral
  - 9% “unknown”
- 46% of women had not accessed ante-natal care previously

10.36 The ‘Healthcare Needs and Pregnancy Dispersal Policy’ included the requirement to acknowledge:

“No single solution is likely to be in the interests of all pregnant women and each case should be sympathetically considered on its own merits and solutions sought in consultation with the woman.”

10.37 However, NGOs questioned whether cases received sympathetic consideration. Alongside examples of women being moved very late in pregnancy, leading to disruption and hardship, there were other cases where the policy of not moving women in the 6-week protected period either side of their Estimated Delivery Date (EDD) was rigidly applied. This meant that where pregnant women who were close to their EDD were placed into IA they often remained in it for much longer than other IA service users, and well in excess of the 19-day limit to which the Home Office subscribed.

10.38 In fact, the policy attempts to steer a course between the desirability of speedy dispersal from IA and the importance of continuity of maternity care. It states:

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68 https://www.nice.org.uk/guidance/cg110
69 IAPT refers to psychological therapies.
70 All percentages are rounded to the nearest whole number.
“Pregnant asylum seeking women who have recently arrived in the UK are unlikely to be registered with maternity services. As a result, it should be possible to disperse the women from Initial Accommodation (IA) to suitable accommodation as soon as possible.”

and

“If an applicant is in the late stages of pregnancy [defined as within 6 weeks of EDD] priority should be given to finding appropriate dispersal accommodation nearby so that she can continue to access the local maternity unit. If accommodation is not available within the area where the woman has booked into maternity services, then the options of either dispersal to another location or the deferral of dispersal should be considered in consultation with the applicant.”

10.39 At the same time, the policy allows a 10-day period between notice of dispersal and the dispersal itself so that the relevant communications can take place and care can be effectively handed over. The inspection was not able to test whether, in practice, this is long enough.

10.40 In some locations, the general housing stock was not well-suited to pregnant and post-partum women. Terraced houses in some dispersal areas often had very steep staircases, for example, which was a problem for women with pregnancy related mobility issues or post C-section women.

10.41 Single pregnant women posed a particular difficulty for the Providers. Separate accommodation for single service users was at a premium across the asylum accommodation estate, and single women were often accommodated together in Houses in Multiple Occupancy (HMO). Once the child is born this accommodation is unlikely to be suitable for a mother and new baby.

10.42 In some regions, the Providers had created dedicated “mother and baby homes”, HMOs for women with children. These ranged in size from 2 or 3 bedroom properties, to a converted nursing home with 21 bedrooms. NGOs reported that these homes offered important support networks to women at a particularly vulnerable time in their lives. But, they could also be claustrophobic, with too many women and children in too little space, which created tension and led to arguments.

10.43 NGOs raised a number of other issues not directly connected with the asylum accommodation itself. The most common was the impact of accommodation allocations on continuity of maternity care. One NGO drew attention to poor communication about dispersal and continuity of care; poor responses from the Providers to queries from midwives; and a lack of understanding of broader access to statutory and voluntary local services. Consequently, some midwives were “picking up the slack” in signposting women to other agencies, and felt that they were “acting as gatekeepers”.

10.44 Stakeholders told ICIBI inspectors that poor information-sharing made it more difficult to connect women to NHS maternity services. This was summarised by one organisation, which said:

“We have established a route of communication via emails with the Home Office safeguarding team; they send emails to our referral NHS net inbox. The information provided by the Home Office is very limited in details and often only says what the client’s diagnosis is. They often do not have the client’s name but only their port reference. They do not have any reports or further information attached. We are not informed formally of pregnant women, sometimes we get a safeguarding email identifying that a women is pregnant. The midwifery services are not informed of who is pregnant and relies on getting bed lists and information from Migrant Help and the health team.”

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72 Allocated where the asylum claim is made at a port of entry to the UK.
In response to a request for information about the numbers of pregnant women in asylum accommodation, the Home Office responded:

“...information is not held in a readily reportable format by the Home Office or its accommodation Providers. All such individuals are managed on a case by case basis in accordance with their individual needs and related information is therefore predominately stored on individual case records in the form of free text notes.”

However, to assist the inspection, the Home Office used an “experimental methodology to retrospectively identify individuals”. Based on this heavily caveated information, it appeared that “during the period 1 January 2016 to 31 December 2017 there had been 1,511 pregnant asylum seekers receiving Section 98 support (Initial Accommodation), and a further 2,228 receiving Section 95 support (Dispersal Accommodation)”. The Home Office could not say how long the women had been staying in each type of accommodation.

The lack of reliable information about who is in asylum accommodation makes it difficult to hold the Providers to account. Similarly, without reliable information, engagement with the NHS about whether commissioned services were adequate was difficult.

According to the COMPASS contract ‘Statement of Requirements’, pregnant women are supposed to receive a cot, highchair and sterilizing equipment. The inspection team found that these essentials were not always provided. One NGO drew attention to the impact of broken equipment on safe infant feeding practices, and commented in relation to IA that:

“...women don’t have access to sinks, sterilisation equipment or facilities to boil water. Basics, like washing-up liquid to clean equipment, are missing. Kettles are not allowed in rooms so formula feeding mothers are expected to visit reception (day or night) to collect hot water to make up feeds.”

Two NGOs highlighted that mothers often had to wait too long before their newborns began to receive asylum support payments. This meant the women had to find the money to buy nappies and other essentials from the £37.75 per week they received as asylum support. The additional amount, when it was paid, was not backdated to when the child was born.

Several NGOs referred to the HAC report in discussions with inspectors. The general view was that they had seen some positive developments as a result of the report, but that many of their original concerns remained.

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73 The rules are not explicit with regard to when payment should start or whether they can be backdated. They state “Pregnant women who are supported under Section 95 should make an application for additional payment in writing, signed by the applicant and include original, credible written confirmation of pregnancy such as form MAT B1, a letter from a Community Midwife or a letter from a GP … Once a pregnant woman gives birth she or her representative should forward an original, full birth certificate to their support caseworker. When this information is received the child will be added as a dependant on the support application. The mother’s additional support stops and additional support of £5 per week for the baby begins”.

74 At the factual accuracy stage, the Home Office commented: “It is not factually correct either to say that £37.75/week is the total a new mother will be receiving or that she should have to buy essentials for the baby from this money. Expectant mothers are entitled to receive a maternity grant of £300 with which to buy essentials in advance of the baby’s birth and also an additional £3/week on top of the £37.75. Once the baby is born £5/week additional payments are available in addition to the personal allowance for the baby. Please note that our report (https://www.gov.uk/government/publications/report-on-review-of-cash-allowance-paid-to-asylum-seekers) includes extensive consideration of ensuring that babies’ and childrens’ needs are met.”
Annex A: Role and remit of the Chief Inspector

The role of the Independent Chief Inspector of Borders and Immigration (until 2012, the Chief Inspector of the UK Border Agency) was established by the UK Borders Act 2007. Sections 48-56 of the UK Borders Act 2007 (as amended) provide the legislative framework for the inspection of the efficiency and effectiveness of the performance of functions relating to immigration, asylum, nationality and customs by the Home Secretary and by any person exercising such functions on his behalf.

The legislation empowers the Independent Chief Inspector to monitor, report on and make recommendations about all such functions. However, functions exercised at removal centres, short-term holding facilities and under escort arrangements are excepted insofar as these are subject to inspection by Her Majesty’s Chief Inspector of Prisons or Her Majesty’s Inspectors of Constabulary (and equivalents in Scotland and Northern Ireland).

The legislation directs the Independent Chief Inspector to consider and make recommendations about, in particular:

- consistency of approach
- the practice and performance of listed persons compared to other persons doing similar activities
- the procedure in making decisions
- the treatment of claimants and applicants
- certification under section 94 of the Nationality, Immigration and Asylum act 2002 (c. 41) (unfounded claim)
- the law about discrimination in the exercise of functions, including reliance on section 19D of the Race Relations Act 1976 (c. 74) (exception for immigration functions)
- the procedure in relation to the exercise of enforcement powers (including powers of arrest, entry, search and seizure)
- practice and procedure in relation to the prevention, detection and investigation of offences
- the procedure in relation to the conduct of criminal proceedings
- whether customs functions have been appropriately exercised by the Secretary of State and the Director of Border Revenue
- the provision of information
- the handling of complaints; and
- the content of information about conditions in countries outside the United Kingdom, which the Secretary of State compiles and makes available, for purposes connected with immigration and asylum, to immigration officers and other officials.
In addition, the legislation enables the Secretary of State to request the Independent Chief Inspector to report to him in writing in relation to specified matters.

The legislation requires the Independent Chief Inspector to report in writing to the Secretary of State. The Secretary of State lays all reports before Parliament, which he has committed to do within eight weeks of receipt, subject to both Houses of Parliament being in session. Reports are published in full except for any material that the Secretary of State determines it is undesirable to publish for reasons of national security or where publication might jeopardise an individual’s safety, in which case the legislation permits the Secretary of State to omit the relevant passages from the published report.

As soon as a report has been laid in Parliament, it is published on the Inspectorate’s website, together with the Home Office’s response to the report and recommendations.
Acknowledgements

The inspection team is grateful to the Home Office for their cooperation and assistance during the course of this inspection, and appreciate the contributions from staff who participated.

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