

Wethersfield Phasing Scheme

July 2025

Revision History

Version	Author & Job Title	Date of Change	Paragraph No.	Purpose/Change
July 2025	██████████ Deputy Senior Responsible Officer New Sites Oversight & Assurance Team	18 July 2025	All	To: 1. Replace the December 2024 Phasing Scheme; 2. Reflect discharging of SDO Condition 21 (that restricted occupancy to 580 Services Users) that enables the Site to operate up to the Business As Usual (BAU) occupancy limit of 800 Service Users (SUs), and exceptionally up to the 1,245 Service Users when utilising some or all of the 445 contingency bedspaces; 3. Clarify that in the event of the utilisation of some or all of the 445 contingency bedspaces the overall maximum 1,245 occupancy capacity will not be exceeded. 4. Detail how the inflow of Services Users may be uplifted in a controlled and manageable manner in the event of utilisation of some or all of the 445 contingency bedspaces. 5. Update the Management Information to reflect 2025 statistical data. 6. Confirm that the Site was found to adequately meet the needs of SUs in the High Court judgement of <i>R (TG & Ors) v Secretary of State for the Home Department</i> [2025] EWHC 596 (Admin)

The reviewer signoff shall signify the recommendations for acceptance of this document.

Reviewed By	Role/Grade	Date
██████████	Site Operator	21 July 2025

The contents of this document will be kept under periodic review (at least every 6 months) collaboratively by Home Office (HO) and Clear Springs Ready Homes (CRH) representatives and where appropriate it will be updated.

The next scheduled review is **January 2026**.

This Phasing Scheme has been developed in line with Condition 21 of *The Town and Country Planning (Former RAF Airfield Wethersfield) (Accommodation for Asylum-Seekers etc.) Special Development Order 2024* and the Inflow Summary (Annex AA) of the Wethersfield Local Services Plan.

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Phasing Scheme – Wethersfield

1. Introduction

- 1.1 The Site has been operational since 12th July 2023. Planning permission for 12-months was obtained utilising the emergency powers under *Class Q of Part 19 Schedule 2 to the Town and Country Planning (General Permitted Development) (England) Order 2015¹ (as amended)* available to the Crown. The Class Q planning permission was obtained and formally notified to Braintree District Council on 17 April 2023. The Class Q planning permission expired on 16 April 2024.
- 1.2 On 20th March 2024 further planning permission was granted, until 10th April 2027, via *The Town and Country Planning (Former RAF Airfield Wethersfield) (Accommodation for Asylum-Seekers etc.) Special Development Order 2024* (“The Order”) that was laid before Parliament by the Secretary of State for Levelling Up, Housing and Communities now known as the Ministry for Housing, Communities and Local Government.
- 1.3 This Phasing Scheme has been prepared to set out the phases in which the facilities and services are made available to asylum seekers, known as Service Users (SUs), who are accommodated on the Site. The Phasing Scheme has been prepared alongside the Operational Management Plan (OMP) and the Local Services Programme using the baseline that all facilities and services defined in *The Town and Country Planning (Former RAF Airfield Wethersfield) (Accommodation for Asylum-Seekers etc.) Special Development Order 2024* are provided **prior** to SUs being accommodated on Site and are for provided for the duration of The Order.
- 1.4 The Order granted planning permission for up to 1,700 single adult male SUs, between the ages of 18 and 65, to be accommodated on the Site. However, the Home Office has taken the decision to cap regular (Business As Usual – BAU) occupancy at 800 bedspaces (including 28 isolation bedspaces) with an additional 445 contingency bedspaces available that may be filled in the case of an exceptional demand, a “surge” event, on short-term and temporary basis where the wider accommodation estate cannot meet a forecasted demand for bedspaces.
- 1.5 The 445 contingency bedspaces available on the Site give a total combined maximum capacity of 1,245 bedspaces.
- 1.6 The on-site provision of facilities and services for the asylum seekers accommodated on the Site were developed in collaboration with the appointed lead Service Provider, Clearsprings Ready Homes (CRH), and were designed to meet the needs of up to 1,700 single adult male SUs on Site. With the subsequent reduced BAU occupancy limit of 800 SUs and a total BAU and contingency capacity of 1, 245 SUs any anticipated impact to upon local off-site services will be lessened in light of both lower occupancy caps.
- 1.7 Additionally, unless otherwise specified below, there is minimal phasing up required for the Site to increase capacity from the 800 BAU cap up to the 1,245 combined BAU and contingency cap, and the governance processes (which ensure the Site remains safe and compliant with The Order) are detailed in this document.
- 1.8 This Phasing Scheme illustrates how SU numbers are increased to the BAU 800 SU cap, as well as to the combined BAU and contingency cap of 1,245 SUs (as shown on Table 1 and Table 2). This is achieved by providing the facilities and services from Week 1 of full operation² at a maximum inflow of 60 service users in Week 1 and 60 per week and a maximum 30 per day, thereafter until 800 SUs are accommodated on Site, and at a maximum inflow of 100 SUs per week, 50 SUs per day, when utilising the 445 contingency bedspaces for a 1,245 occupancy cap.
- 1.9 Condition 21 of The Order restricted occupancy to 580 SUs until such time as this Condition was discharged by the Secretary of State for Housing, Communities and Local

¹ [The Town and Country Planning \(General Permitted Development\) \(England\) Order 2015](#)

² Full operation – no restriction under the Order on number Service Users to be accommodated.

Government (MHCLG). On 31st January 2025, this Condition was formally discharged. Confirmation came from the Minister for MHCLG, who verified that the capacity-limiting conditions had been satisfied and were subsequently discharged. This discharge enabled the site to operate at its full planned capacity of up to 800 SUs with a contingency capacity of up to 445 SUs.

- 1.10 BAU inflow currently occurs twice per week, namely Tuesday and Thursday. Scheduling inflow to two days allows for a structured onboarding process including SU induction and medical screening. However, if operationally required inflow could occur on any of the 5-business days subject to both the daily and weekly inflow caps though it is anticipated that when utilising some or all of the 445 contingency bedspaces inflow will continue to occur twice per week i.e., Tuesdays and Thursdays.
- 1.11 As detailed above, when utilising the 445 contingency bedspaces the inflow will be capped at a maximum of 50 SUs per day and 100 SUs per week. The maximum 50 SUs per day, contingency inflow limit matches the daily maximum inflow of 50 SUs per day in the contract between the Home Office and the lead service provider, Clearsprings Ready Homes (CRH).
- 1.12 Decisions to inflow additional SUs, at any time during the operation of the Site, are only taken following an agreed outcome of the weekly Inflow Impact Review meeting held every Friday. This review is led by the HO's Senior Responsible Officer Team with the Site's service partners as part of the Site's governance processes.
- 1.13 The weekly Inflow Impact Review meeting ensures the provision of services and facilities for all those accommodated continue to be sufficient for both the existing occupancy and also the planned inflow and also to manage any short-term increase in capacity through utilising any or all of the 445 contingency bedspaces. The weekly Inflow Impact Reviews provide the Site operator and the Service Providers the necessary information, and opportunity, to discuss and consider any adjustment to arrangements beyond the current level of facilities **before** a decision is made on the following weeks' inflow.
- 1.14 It should be noted that the provisions in place on Site were specifically designed to meet the needs of 1,700 SUs. Additionally, it should be noted that utilisation of the contingency 445 bedspace capacity is also subject to the same robust governance processes to ensure readiness of the Site and the service providers as for BAU inflow.
- 1.15 It is anticipated, based on current experience, that there may be need to temporarily use some or all of the 445 contingency bedspaces during the peak Channel crossing period which is generally mid-June to early November. It is **not** anticipated that some or all of the 445 contingency bed spaces will be occupied during the entirety of this period. The contingency bedspaces, if required, will only be utilised in the short term to help manage exceptional demand, as a "surge" event, for accommodation that cannot be met by the wider existing accommodation estate.
- 1.16 As soon as the demand for bedspaces can again be met by the wider existing accommodation estate the number of SUs accommodated on the Site will be reduced to the BAU 800 cap and maximum inflow of 60 per week (30 per day), and the utilised contingency bedspaces will be run down as soon as is possible.
- 1.17 It should be also noted that the SU population is not static as SUs both leave and arrive each week. Consequently, the inflow model for the Site is now mature and well understood. This stands in good stead for increasing the number of SUs accommodated in a structured, managed and sustainable way. As of the date of this Phasing Scheme the average length of stay for SUs is approximately 81 days.
- 1.18 This document has been prepared to meet the requirements of Condition 21 of the Order. For reference, Condition 21 has been reproduced below.

Phasing Scheme

- 1) *No more than 580 service users may be accommodated on the Order land until a phasing scheme has been submitted by the Home Secretary and approved by the Secretary of State, that sets out—*
- a) *the phases in which the facilities and services that are to be made available to service users under this Schedule will be delivered;*
 - b) *how any arrangements that are required to be made in relation to such facilities or services under any approved document will be adjusted,*
- so as to ensure that the provision made for the needs of resident service users at any given time is such that relevant duties are complied with in carrying out relevant functions, taking account in particular of any material actual or anticipated changes in the number or proportion of resident service users that meet an unsuitability criterion.*
- (2) *Where a scheme approved under sub-paragraph (1) indicates that particular steps are to be taken before the number or proportion of resident service users that meet an unsuitability criterion increases to or by a certain amount, the Home Secretary must, before that increase occurs, provide to the Secretary of State written confirmation that those steps have been taken.*

1.19 This Phasing Scheme document is submitted by the Secretary of State for the Home Department “the Home Secretary” for approval by the Secretary of State for Housing, Communities and Local Government (MHCLG).

Section 2 sets out the facilities and services to be made available, as defined in Schedule 3, Condition 24.

Section 3 sets out the phases in which the facilities and services will be made available. This is presented in Table 1 and Table 2.

This section also provides the narrative on the phasing of the provision of facilities and services.

Section 4 describes the facilities and services to be provided on Site, including medical facilities, transport and security.

Section 5 sets out steps to be taken when an SU meets an unsuitability criterion.

Section 6 sets out the interrelationships of the Phasing Scheme with other conditions and dependencies set out in The Order.

2. Facilities and Services to be Made Available

2.1 The facilities and services to be made available (in accordance with Condition 24) of the Order include the following:

Healthcare

2.2 Condition 24 of the Order sets out the minimum requirements for the composition of the on-site medical team and provision of other services. Parts of the Order are replicated below:

(2) The facility is a medical isolation facility for resident service users, with at least 28 isolation beds and access to sufficient nursing staff to provide care to those who may be accommodated in it.

(3) A medical centre for resident service users on the Order land—

(a) staffed by an on-site medical team comprising at least—

(i) a health care assistant;

(ii) a mental health nurse;

(iii) a general nurse;

(iv) an advanced nurse practitioner;

(v) a general practitioner,

(b) where resident service users may—

(i) register with a general practitioner;

(ii) book and attend appointments with on-site medical staff;

(iii) book appointments to receive other services specified in sub-paragraph (4);

(iv) be treated for minor injuries and illnesses.

2.3 The Services outlined in sub-paragraph 4 of Condition 24 are:

Security

2.4 The Order also notes at Condition 24(5):

(5) The service is that suitably trained security personnel are stationed on the Order land at all times.

Transport

2.5 In regard to transport, the Order provides at Condition 24(6):

(6) The service is the provision of-

(a) a regular free shuttle bus service for resident service users from the Order land to Braintree, Colchester and Chelmsford, with—

(i) buses departing for and arriving from each of these destinations at least three times a day;

(ii) each bus having the capacity to seat at least 16 service users;

(b) such other transport services as are necessary to enable resident service users to access the services specified in sub-paragraph (4), or hospital appointments.

Water Supply

2.6 The potable water supply utilises the existing Site connection and additional reinforcement through the installation of booster tanks to support a Site capacity of 1,245 service users.

- a) medical health screening of service users when they first arrive at the authorised development;*
- (b) immunisation against diseases;*
- (c) a system that enables them to collect medicine that has been lawfully prescribed for them;*
- (d) a low-level trauma-informed mental health support service;*
- (e) confidential health advice;*
- (f) emergency dental care*
- (g) eye tests.*

Catering

2.7 To provide SUs with on-site catering facilities which include the provision of three meals a day, which will be served on Site in a designated dining area.

3. Phases for Services and Facilities

- 3.1** The Order grants permission (subject to the conditions) for up to 1,700 service users (SUs) as per Condition 23(2), to be accommodated on the Site and supported with services and facilities from 11 April 2024. However, a decision has been made by the Home Office to cap regular occupancy at up to 800 SUs (with an additional 445 contingency bedspaces available that may be utilised in the case of an exceptional “surge” event). Accordingly, the provisions for those accommodated on Site were created for 1,700 SUs. Unless otherwise specified below, there is minimal phasing up required for the Site to be fully operational.
- 3.2** Additionally, Home Office’s operational plans mean there will be a phased approach to the numbers of SUs accommodated on Site.
- 3.3** The services and facilities required by Condition 24 must be in place before any SU can be accommodated on Site, as per the condition. Since the Site has been operational, all services and facilities have been available to SUs. These services and facilities will be provided throughout the duration of the Order (expiring April 2027) for up to 800 SUs as BAU occupancy and also for 455 SUs, as contingency occupation in the case of an exceptional “surge” event, up to a maximum total 1,245 SUs.

Mechanisms for Adjusting Provision of Facilities and Services

- 3.4** The phasing of services and facilities is governed by two overarching processes:
 - the commercial governance process and
 - an operational governance process via weekly Inflow Impact Review meetings.
- 3.5** It is through these established practices, in collaboration with the Service Partners, that the Site remains stable, safe, compliant and continues to meet both the needs of SUs and the requirements of The Order. The Site is a dynamic operational environment where contextual matters and immediate experience inform practice. Rather than applying strict metrics or parameters, the governance processes serve to ensure the adequate phasing of facilities and services. Stakeholders attend the weekly Inflow Impact Review meetings to raise any known or potential issues so that inflow and occupancy numbers and appropriate mitigations can be discussed and implemented. If as a result of these process appropriate mitigations cannot be put into place **inflow will be paused** until such time as all appropriate mitigations and measures are in place and that the issue(s) of concern are agreed as satisfactorily addressed.

Commercial Governance Process

- 3.6** The Home Office has a contract with Clearsprings Ready Homes Limited, as the lead Service Provider, to provide services on Site. This contract includes provisions and clauses for increases to the quantity and range of services provided should the headcount of SUs on Site increase. Throughout the contract the adequacy of services for the headcount of SUs on Site will be monitored via the weekly Inflow Impact Review meetings as indicated in Table 1 and Table 2.
- 3.7** The Home Office holds weekly Inflow Impact Review meetings which are used to monitor and assess the onboarding of SUs and assess any impact to the on-site service provision. Representatives at this meeting include Home Office staff, the contracted accommodation service provider (Clearsprings Ready Homes), the on-site Medical Team (Commisceo), welfare and support (Migrant Help), facilities management (Kier) and Essex Police.
- 3.8** The contractual arrangement with CRH allows for the Home Office to adjust the services provided depending on the numbers of SUs to be accommodated. If the Home Office wishes to increase the number of SUs i.e., utilising the 445 contingency bedspaces, it shall give no less than 15 business days' written notice to CRH **unless** a shorter notice period is agreed by both parties with a maximum of inflow of 50 SUs per day (with no weekly maximum)
- 3.9** Using a phased approach allows the Home Office to review the impact of inflow on the services and facilities provided on Site to ensure the Site remains stable and compliant with The Order.
- 3.10** As noted previously, although the Order grants permission for up to 1,700 SUs to be accommodated and the Home Office has limited the number of SUs regularly accommodated on Site to up to a maximum of 800. The Phasing Scheme includes an indicative projection of the phasing of services and facilities for up to 800 SUs (Table 1) which at the date of this Phasing Scheme is the current BAU capacity of the Site. Bedspaces will be filled organically when they become available, following an SU vacating their allocated bedspace.
- 3.11** Table 1 also shows the maximum constructed capacity of 1,245 SUs on Site which allows for the 445 contingency bedspaces which may be occupied in the case of an exceptional "surge" event. As detailed above implementation of the contingency capacity will take up to 15 business days' (unless a shorter time is agreed between the Home Office and CRH) to enact, and occupancy will be phased up from a maximum of 60 SUs per week, 30 SUs per day to a maximum of 100 SUs per week, 50 per day which is anticipated to also utilise the current twice weekly (Tuesday and Thursday) BAU inflow model.
- 3.12** Additionally, each week's inflow is already subject to a robust governance review, to assure the readiness of the Site and service providers, led by the HO Senior Responsible Officer team each Friday **before** the following week's inflow numbers are agreed. This process is the same for BAU and "surge" inflow.
- 3.13** Table 1 sets out the phases, inflow rate of service users and facilities to be provided for up to 800 SUs. This is followed by an explanation of the rationale for the phasing of the provision.

Operational Governance Process - weekly Inflow Impact Review Meetings

- 3.14** As noted above, a weekly Inflow Impact Review meeting is held every Friday to discuss Site operations, raise and consider issues and talk through the level of provision of facilities and services on Site in relation to agreeing the proposed inflow of SUs for the following week.
- 3.15** Representatives from the service providers, as key stakeholders, attend these meetings to ensure that any impacts of incoming SUs on the services provided on Site are known and mitigated. The attendees at the weekly Friday impact review meetings are as follows:
- Senior Responsible Officer Team (G6 and/or G7)
 - Home Office Service Delivery Managers (G7)

- Commisceo
- Integrated Care Board
- Clearsprings Ready Homes Site Manager
- Migrant Help
- Essex Police
- Kier

Agenda Item	Framework Questions
1. Security Provision and number of incidents recorded on Site (CRH)	<u>Security Provision</u> • With regards to any incidents that have occurred since the last intake and thinking about the resources required, are there any concerns with the proposed intake for the next week?
2. Discretionary Activities (CRH)	<u>Activities</u> • With regards to the available number of slots for the recreational and enrichment activities currently organised on Site, is there any concern with the proposed intake for the next week?
3. Transport Capacity (CRH)	<u>Shuttlebus Service</u> • Bearing in mind the number of seats available on the shuttle buses and experience over the number of journeys required to meet demand, is there any concern with the proposed intake for the next week?
4. Medical Centre Provision (Commisceo/ICB) and Isolation Facility (CRH)	<u>Screening of New Service Users</u> • With regards to appointment capacity and resources to undertake the Full Health Assessments, are there any concerns with the proposed intake for the next week? • Have any medical incidents occurred on Site since the last meeting that need consideration for intake? <u>Infectious Disease Management</u> • Are there any infectious diseases currently being treated on-site that need consideration for intake? <u>Isolation Facility</u> • How many beds are currently occupied, and what is the current available capacity? • Is the current capacity sufficient for prospective SU numbers?
5. Dining Hall Provision (CRH)	<u>Mealtimes</u> • Bearing in mind the maximum capacity of the dining facility (665) and the current mealtimes, is there any concern with the proposed intake for next week?
6. Daily Site Stability Assessment	<u>Service Delivery Team</u> From a Service Delivery perspective, are there any concerns that would impact new arrivals coming on to Site? (Considerations include Home Office assurance procedures, safeguarding processes)
7. AOB	<u>Appointments and Client Advisers</u> • With regards to the resource available to complete ASF1s and Drop-In Question & Answer sessions, are there any concerns with the proposed intake for the next week?

3.16 An agenda is followed during these meetings to give structure and ensure all the necessary facilities and services are discussed. The weekly meeting agenda can be found below. *To note: the questions provided are illustrative of conversations and may vary; nor are they*

exhaustive of the extent of discussions during these meetings but provide a framework to support those discussions.

- 3.17** The questions posed frame discussions around current operational issues and act as a “*health check*” for the on-site facilities and services. They are designed to take account of the many variables that may impact on-site demand and projected inflow. For example, in regard to point 4 - the isolation facility, factors such as the number of SUs accommodated in isolation bedspaces, the nature of their ailments and the anticipated length of their stay in isolation will all be considered when deciding the rate of inflow of additional SUs to Site. As an example of an actual operational consideration was the temporary closure of the laboratory responsible for testing SU blood samples which required alternative provision to be put in place. Inflow over this period would have been paused if an alternative laboratory, that could process the testing of samples, had not been identified.
- 3.18** As a result of the Inflow Impact Review, the level of services provided on Site are actively reviewed on a weekly basis **before** any decision is made regarding the number of SUs to be inflowed the following week. Meetings and decisions are recorded in the Go/No-go tracker. This enables the on-site team to operationally manage intake, making informed decisions around the onboarding of new SUs which can be reduced or paused should there be a risk of the Site being unable to adequately support the onboarding of new SUs. Moreover, by addressing the on-site capacity and demand in this way, the Home Office and its commercial partners are able to make real-time adjustments to ensure the needs of the SUs accommodated continue to be met.
- 3.19** If it is noted at the impact review meeting that adjustments need to be made then intake will be paused and an additional impact review meeting will be arranged allowing time for the required adjustments to be explored, implemented and tested.
- 3.20** If it is determined that the level of service provision for non-medical services on Site is inadequate, and there is a significant change to scope required (agreed by HO and CRH) a Commercial Contract Change Notice would be required. The requirement for additional staff on Site would be escalated via the Commercial Governance Process.
- 3.21** For changes to the provision of medical centre facilities or services (concerning the operational hours/number of appointments rather than number of staff), these are identified through the weekly Inflow Impact Review meetings, and a separate commercial process is followed between Commisceo and the ICB/NHSE.
- 3.22** Reviews of provisions in place form part of the weekly Friday Inflow Impact Review meetings. These impact review meetings serve as a forum to discuss, in part, phasing and the impact on-site. This review process will continue to be ongoing throughout the operation of the Site.
- 3.23** For clarity, the Home Office will pause inflow if a concern or issue identified or raised at the weekly Inflow Impact Review meeting cannot be adequately and satisfactorily mitigated.

“Surge” Events

- 3.24** *The Town and Country Planning (Former RAF Airfield Wethersfield) (Accommodation for Asylum-Seekers etc.) Special Development Order 2024* gives permission for 1,700 single adult male SUs to be accommodated on Site. The current combined BAU and contingency bedspace capacity at the Site is 1,245 SUs. In January 2024 the Home Office announced that it would limit the regular BAU occupancy to 800 SUs. This means, subject to the 800 SU cap remaining in place, there are a maximum of 445 bedspaces available as contingency bedspaces which may be temporarily utilised in the case of an exceptional “surge” event.
- 3.25** The additional inflow contingency capacity is needed to deal with any higher than forecast asylum support demand as a result of a “surge” in migrants crossing the English Channel/entering the UK illegally. In such exceptional circumstances an operational decision may be taken to utilise some or all of the additional 445 contingency bedspaces for short, temporary periods of time until such time as the wider accommodation estate has sufficient bedspace capacity to provide for all new arrival migrants requiring accommodation.

- 3.26** It should be noted that the 445 contingency bedspaces are **not** suitable and were specifically not designed to support a rapid emergency response (e.g., fire in a hotel requiring rapid decant of SUs to alternative accommodation) due to the contractual mobilisation notice time to the lead Service Provider of up to 15 business days' (unless a shorter period is agreed between both parties).
- 3.27** Furthermore, the 445 contingency bedspaces do not support rapid and repeated stand-up and stand-down. The Contingency bedspaces is held for stand-by use where forecasts predict that the Home Office will receive a large spike, a "surge" in new arrivals which is anticipated will place significant strain on the wider accommodation estate to meet the demand for accommodation in the short term.
- 3.28** Where a "surge" event is forecast, a decision to mobilise contingency capacity would only be taken following a "*health check*" of Site facilities and services via the weekly Inflow Impact Review meeting. This health check will inform decision-making as to whether the Site can support the Departmental response to a forecasted "surge" event. Furthermore, it should be noted that utilisation of the contingency capacity will only continue until alternative accommodation capacity is built or becomes available in the wider accommodation estate.
- 3.29** As well as the procedure referred to above, the decision to use the contingency capacity will be taken depending on two other conditions:
- Where intake forecasting indicates a potential risk of derogation of statutory duty to the Home Office to provide adequate accommodation as enshrined in the Immigration and Asylum Act 1999 (Part VI) to prevent destitution.
 - Where alternative contingency accommodation is not available (in accordance with Wethersfield & Scampton – Use of Contingency Bedspaces Guidance (Home Office, May 2024)).
- 3.30** The Site at Wethersfield has been purposely designed to be self-sufficient, with security, health, welfare, recreational and enrichment provisions included as an integral part of the design of the Site for up to 1,700 SUs. In the event that contingency capacity is required, the up to 15 business days' lead-in time allows the management of suppliers and of operations to plan their resources accordingly, though it is expected they will not need to recruit additional staff beyond their existing planned and agreed staffing headcount and will utilise, where appropriate, overtime to manage their resourcing capacity and capability. Therefore, any impact on the provision of both on and offsite services including impact on the local community, from utilising contingency bedspace capacity, is deemed to be limited.
- 3.31** In assessing the "surge" capacity and impact, the weekly Inflow Impact Review meetings will consider provisions on Site relating to increasing SU numbers above the 800 BAU Cap. Engagement with local stakeholders through the Multi-Agency Forums, will also provide local partners with an opportunity to raise concerns in relation to any potential increase in SU numbers above the 800 BAU cap.
- 3.32** Table 2 sets out the phases, inflow rate of service users and facilities to be provided in the event that the 445 contingency bedspaces are utilised taking the total headcount of SUs on Site to up from a maximum of 800 SUs to a maximum of 1,245 SUs. As shown by Table 2, the maximum inflow rate of SUs at Wethersfield during times of "surge" will not exceed the current contractual inflow limit with CRH of 50 SUs per day.

Table 1: Phasing of Facilities and Services User on Site in line with Inflow Rates for Regular Capacity

Week 1 commences from the full operation of the Site, where there are no restrictions on the number of SUs accommodated at Wethersfield.

The weekly Inflow Impact Review meetings of existing Site facilities and services will continue to assess on-site demand and whether additional facilities and services should be brought online.

The inflow of Service Users to the Site reflects the Inflow Summary (Annex AA) of the Operational Management Plan

Weeks from start of full operation		1	2	3	4	5	6	7	8	9	10	11	12
Constructed Capacity		1245	1245	1245	1245	1245	1245	1245	1245	1245	1245	1245	1245
General and Isolation Bedspaces Available		580	640	700	760	800	800	800	800	800	800	800	800
General Bedspaces Occupied		552	612	672	732	772	772	772	772	772	772	772	772
Isolation Beds Available³ (at any one time)		28	28	28	28	28	28	28	28	28	28	28	28
General Bedspaces Unoccupied		220	160	100	40	0	0	0	0	0	0	0	0
Contingency Bed Spaces (to be used in the event of surge)		445	445	445	445	445	445	445	445	445	445	445	445
Inflow Rate		BAU 60 service users per week maximum (30 service users per day maximum). Contingency 100 service users per week maximum (50 service users per day maximum).											
Medical Services and Facilities	Number of staff in the on-site medical centre	19 ⁴											
	Constructed capacity of the medical centre	19 rooms ⁵											
Security		As per Condition 24 Core Services and Facilities to be provided ⁶											
Transport		As per Condition 24 Core Services and Facilities to be provided ⁷											
Facilities and Services Review		Weekly Impact Review Meeting (every Friday) with Service Providers											

³ The number of isolation bedspaces has been specified in Condition 24(2) of the Order. In light of operational experience, this is not expected to change as numbers increase on Site (see paragraphs 4.8 to 4.12 and Section 5 Unsuitability Criterion). The utilisation rate of the isolation facility will continue to be monitored as part of the weekly Inflow Impact Review meetings.

⁴ Medical services and facilities have been in place since the accommodation of service users commenced at the Wethersfield Site. The number of medical staff has been set in partnership with health partners and has been designed to cater for up to 1,700 service users. The staffing level of medical facilities is noted at paragraph 4.3 below and will not change as the numbers of SUs accommodated on Site increase. This has been confirmed in correspondence from the ICB. The on-site medical provision will continue to be monitored through weekly Inflow Impact Review meetings.

⁵ Detail of the composition of the on-site medical centre is at paragraph 4.7, which further notes that the size of the facility, in comparison to any other primary care setting is adequate for 1,245 men.

⁶ There is 24/7, 365 days security presence on Site. The number of security personnel on-site is determined by the formula at paragraph 4.21. Due to the operational nature of the Site noted at paragraph 4.22, there is no exact correlation between the number of SUs on Site and the size of the security team. This is due to SUs (at times) being accommodated across accommodation blocks. The on-site security provision will continue to be monitored through weekly Inflow Impact Review meetings.

⁷ The provision of transportation to and from the Wethersfield Site for SUs has been implemented in accordance with Condition 24(6) of the Order. The destinations and minimum bus capacity have been set in the Order. As noted at paragraphs 4.30 to 4.35, there have been and will continue to be occasions where additional trips above the minimum 27 are needed and the HO expects this to happen more often as the number of SUs approaches the 800 BAU cap. The shuttlebus service is driven by demand and buses will continue to take SUs to these locations until all those wishing to travel have travelled. There is currently a BAU fleet of 20 (16 seat) shuttlebuses which service these routes with the capacity to make multiple trips each day. Additional shuttlebuses can be made available if required e.g. when the contingency bedspaces are utilised. Transportation, along with other on-site services and facilities, will be monitored through weekly Inflow Impact Review meetings.

Table 2: Phasing of Facilities and Services User on Site in line with Inflow Rates in the event of (Surge) Contingency Capacity

Any decision to mobilise the Site for surge capacity will be by Ministerial decision. A lead in period of up to 15 business days' will precede any use of the Site for surge capacity. Week 1 of this timeline commences after that lead in period.

Review and oversight of Site facilities and services will be the same as for regular occupancy, through weekly Inflow Impact Review meetings.

The inflow of Service Users to the Site reflects Inflow Summary (Annex AA) of the Operational Management Plan.

Weeks from start of surge capacity		1	2	3	4	5	6	7	8	9	10	11	12
Constructed Capacity		1245	1245	1245	1245	1245	1245	1245	1245	1245	1245	1245	1245
General and Isolation Bedspaces Available		800	800	800	800	800	800	800	800	800	800	800	800
General and Contingency Bedspaces Occupied		772	872	972	1072	1172	1245	1245	1245	1245	1245	1245	1245
Isolation Beds Available⁸ (at any one time)		28	28	28	28	28	28	28	28	28	28	28	28
General Bedspaces Unoccupied		0	0	0	0	0	0	0	0	0	0	0	0
Contingency Bedspaces Unoccupied		445	385	325	265	205	145	85	25	0	0	0	0
Contingency Bedspaces Occupied		0	100	200	300	400	445	445	445	445	445	445	445
Inflow Rate		BAU 60 service users per week maximum (30 service users per day maximum). Contingency 100 service users per week maximum (50 service users per day maximum).											
Medical Services and Facilities	Number of staff in the on-site medical centre	19 ⁹											
	Constructed capacity of the medical centre	19 rooms ¹⁰											
Security		As per Condition 24 Core Services and Facilities to be provided ¹¹											
Transport		As per Condition 24 Core Services and Facilities to be provided ¹²											
Facilities and Services Review		Weekly impact review meeting (every Friday) with Service Providers											

⁸ The number of isolation bed spaces has been specified in Condition 24(2) of the Order. In light of operational experience, this is not expected to change as numbers increase on Site (see paragraphs 4.8 to 4.12 and Section 5 Unsuitability Criterion). The utilisation rate of the isolation facility will continue to be monitored as part of the weekly Inflow Impact Review meetings.

⁹ Medical services and facilities have been in place since the accommodation of service users commenced at the Wethersfield Site. The number of medical staff has been set in partnership with health partners and has been designed to cater for up to 1,700 service users. The staffing level of the medical facilities is noted at paragraph 4.3 below and will not change as the numbers of SUs accommodated on Site increase. This has been confirmed in correspondence from the ICB. The on-site medical provision will continue to be monitored through weekly Inflow Impact Review meetings.

¹⁰ Detail of the composition of the on-site medical centre is at paragraph 4.7 below, which further notes that the size of the facility, in comparison to any other primary care setting, is adequate for 1,245 men.

¹¹ There is 24/7, 365 days Security presence on Site. The number of security personnel on Site is determined by the formula at paragraph 4.21. Due to the operational nature of the Site noted at paragraph 4.22, there is no exact correlation between the number of SUs on Site and the size of the security team. This is due to SUs (at times) being accommodated across accommodation blocks. The on-site security provision will continue to be monitored through weekly Inflow Impact Review meetings.

¹² The provision of transportation to and from the Wethersfield Site for SUs has been implemented in accordance with Condition 24(6) of the Order. The destinations and minimum bus capacity have been set in the Order. As noted at paragraphs 4.30 to 4.35, there have been and will continue to be occasions where additional trips above the minimum 27 are needed and the HO expects this to happen more often as the number of SUs approaches the 800 BAU cap. The shuttlebus service is driven by demand and buses will continue to take SUs to these locations until all those wishing to travel have travelled. There is currently a BAU fleet of 20 (16 seat) shuttlebuses which service these routes with the capacity to make multiple trips each day. Additional shuttlebuses can be made available if required e.g. when the contingency bedspaces are utilised. Transportation, along with other on-site services and facilities, will be monitored through weekly Inflow Impact Review meetings.

4. Description of Phasing of Facilities

Service Users Accommodated

- 4.1** Notwithstanding The Order granted planning permission for up to 1,700 SUs to be accommodated on the Site, the Home Office has voluntarily chosen to limit the number of SUs accommodated to a maximum 800 for BAU occupancy, whilst maintaining a constructed capacity of 1,245 (an additional 445 contingency bedspaces to be temporarily used in a “surge” event). The number of SUs that will be accommodated is determined by the inflow to the Site which will be up to 60 SUs per week (30 per day) for BAU occupancy and 100 per week (50 per day), for “surge” events, when occupying the 445 contingency bedspaces. From Week 1 of Full Operation there was a constructed capacity of 1,245 (including 445 contingency) bedspaces.
- 4.2** Inflow of new SUs to the Site normally occurs twice per week, typically on Tuesdays and Thursdays. However, the number of, and which, days used for inflow may change in response to wider operational demands and availability of SUs assessed as suitable to be accommodated on the Site. A review of the following week’s potential inflow headcount is conducted by the Home Office each and every Friday, via the Inflow Impact Review meeting, with the principal Service Providers to assess their capacity, including any sub-contracted providers, to provide and meet the needs of the current SUs on Site **and** all new SUs that could be brought onto the Site taking into account any planned dispersals and the stability of the Site. At the conclusion of each Inflow Impact Review a decision is made and agreed on the number of new SUs to be requested as inflow, and how many will arrive on each of the agreed inflow days.
- 4.3** This weekly Inflow Impact Review process will also apply if a request is made to utilise all or part of the 445 contingency bedspace capacity.

Healthcare

- 4.4** The medical facilities provided on the Site are listed in the Wethersfield Operational Management Plan (OMP). The provision of NHS services is overseen by the local Integrated Care Board (ICB) which has contracted delivery to Commisceo. The Home Office engages with the ICB regarding suitability and capability of on-site medical facilities on a weekly basis, through the impact review meetings. The Home Office has worked with the ICB and UKHSA to establish the level of medical facilities and isolation beds required to meet the capacity of the Site. The number of isolation beds at Go-Live has been established as 28 beds, in line with Condition 24.

Medical Staffing Numbers

- 4.5** The number of medical staff on Site at Wethersfield has been determined in collaboration with NHSE, DHSE and the Mid and South Essex ICB. The current rate of medical staff is 19 and this will remain the same for both 800 SUs and 1,245 SUs (as shown on **Tables 1 and 2**). This has been confirmed in correspondence from the Mid and South Essex ICB. Staffing levels have been determined based on need by NHS England as an independent healthcare provider and are continuously reviewed. The ICB have also confirmed in their letter of 05 April 2024, that the on-site medical team meet the minimum composition requirements of the SDO, as stipulated in Condition 24(4).
- 4.6** The medical provision on Site has been designed for 1,700 SUs and is comparable to a practice which serves a community of that size. Using statistical insight for GP practices across England as a benchmark¹³, figures from April 2024 show that the average general practitioner has up to 2,294 patients. Furthermore, statistics show that 82% of patients across England were seen within two weeks of making an appointment with a GP practice.
- 4.7** The Wethersfield Medical Centre Appointment Capacity table below provides detail of the rate of uptake and capacity for appointments at the on-site medical centre in June 2025, with a current occupancy of up to 800 SUs.

¹³ [Key general practice statistics and insights](#)

Wethersfield Medical Centre Appointment Capacity June 2025				
Week Ending	06 June	13 June	20 June	27 June
Service User Headcount	657	696	719	742
Number of Available Appointments	825	795	780	785
Number of Appointments Attended	755	765	714	761
Utilisation Rate	91.5%	96.2%	91.5%	96.9%

4.8 The data above shows that the on-site medical centre has unutilised appointment capacity each week. This unutilised capacity would cater for any increase in SU headcount in the event of utilising the 445 contingency bedspace. As noted in Section 3.3 of the Impact Summary (annexed to the LSP), there is scope to increase the number of appointments and operating hours of the medical centre, but staff numbers are not expected to change. Furthermore, any changes will be determined in collaboration with health partners and forms part of the weekly Inflow Impact Review meetings.

4.9 The medical service provider Commisceo, on 18th July 2025, confirmed they can manage an inflow of up to 50 SUs per day, maximum of 100 per week, when the Site is utilising some or all of the contingency bedspaces.

4.10 In addition to the general medical staff on-site, there is also sufficient medical staff to provide care to those accommodated in the isolation block. This has been confirmed by the ICB in the correspondence of 18 December 2024.

On-site Medical Facilities

4.11 The on-site medical centre comprises of 19 rooms in total which includes two Advanced Nurse Practitioner/Doctor consultation rooms, a phlebotomy room, and a space for mental health/talking therapies. The size and scale of these facilities have been determined by NHSE and the ICB have confirmed that the size of the on-site medical centre, in comparison to any other primary care setting, is adequate for up to 1,245 single adult males between 18 and 65 years of age.

Isolation Bedspaces

4.12 There are 28 isolation bedspaces on-site at Wethersfield, as required by The Order. These bedspaces are used to isolate those for medical purposes, in addition to those who are deemed unsuitable to be accommodated on the Site. The occupancy rate of the isolation bedspaces has been detailed in the Isolation Bedspace Occupancy Rate table below details the highest number of bedspaces utilised at any one time/day across the preceding 6-month period January to June 2025.

Isolation Bedspace Occupancy Rate January to June 2025						
Month	Jan	Feb	Mar	Apr	May	Jun
Highest number of isolation bedspaces occupied (at any one time) ¹⁴	7	5	7	14	9	7
Highest rate of occupation of isolation bedspaces (at any one time)	25%	18%	25%	50%	32%	25%

4.13 Drawing on the operational experience of the Site since it opened in July 2023, the figures in the table Isolation Bedspace Occupancy Rate January to June 2025 shows that there has been a utilisation rate of the isolation bedspaces consistently at or below 50% of the isolation unit capacity.

¹⁴ These figures show the highest number of isolation bedspaces occupied for any particular day across the month.

4.14 In addition, the number of SUs moved into the isolation unit across the each of the past 6 months was:

- January = 17
- February = 9
- March = 16
- April = 21
- May = 24
- June = 20.

4.15 It is important to recognise that the predominant stage at which SUs are isolated is during inflow, when upon arrival **all** SUs undergo a health assessment which is where infection detection is highest. The weekly Friday Inflow Impact Review meetings, therefore, offer an effective mechanism to manage isolation bedspace capacity in addition to wider Site services and facilities.

4.16 Therefore, the Home Office does not anticipate a need to go beyond the 28 isolation bedspaces which are deemed to be sufficient for the projected increase in SUs on Site (800 regular occupancy and 1,245 “surge” capacity).

4.17 In the event that isolation bedspaces were nearing capacity a decision would be taken at the weekly Inflow Impact Review meetings to reduce or pause the inflow of new SUs to the Site. As noted above (at paragraph 4.11), this is particularly important as the greatest proportion of isolated SUs are identified as part of the onboarding process.

Further Health Care Considerations

4.18 The medical services to be provided are listed in the Wethersfield Full Operational Management Plan.

4.19 Medical and healthcare services are currently on Site and available to SUs. These services are free of charge at the point of use. These services have been developed with health partners (DHSC, NHS England, UKHSA, and the Integrated Care Board).

4.20 Emergency dental care is provided off Site via existing pathways in line with the general population. Optometry care (both routine and emergency) will be off Site and via existing pathways. Periodically, an optometry charity provides an additional drop-in service for SUs on-site.

4.21 The processes for SUs accessing emergency dental care and optometry care are detailed in the Wethersfield Operational Management Plan Section 44: Health Care.

Health Funding

4.22 Health partners have agreed a health funding package to cover initial set-up costs against defined parameters and financial year-end forecast. Details of the funding arrangements are included in the Local Services Programme.

4.23 The Home Office and DHSC have committed to carry out an annual review on the use of health services and bring together partners (DHSC, NHS England, UKHSA, and Integrated Care Boards) to take stock on funding arrangements and healthcare provisions that will be required for future years during the Site’s operational period.

Security

4.24 The operational Site contractors, Clear Springs Readyhomes (CRH), are contracted to provide security services on behalf of the Home Office. Lead Element Security (LES) are sub-contracted by CRH to deliver security services at Wethersfield. Site security is the sole responsibility of the Site Security Team comprising accredited Security Officers under the supervision of an accredited Security Supervisor who will report to the Site Manager.

4.25 All security personnel are licensed by the Security Industry Authority (SIA) and are vetted by the Disclosure and Barring Service (DBS).

- 4.26** The Security Team will consist of Security Officers and a Security Supervisor. Security Officers are present during the day and night. CRH has a contractual responsibility to manage safety and security on the Site and will determine at what occupancy level the number of security officers will need to increase. The weekly Inflow Impact Review meeting and the contractual arrangements for increasing services will be the mechanisms for delivering any changes in security provision.
- 4.27** The current security provision on Site has been determined by the Site provider. [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- 4.28** The security provision on-site is constantly maintained by the Service Provider in line with their on-site operational experience, which may be subject to change.
- 4.29** Due to the operational nature of the Site, there is no direct correlation between the number of SUs accommodated and size of the security team. SUs may be accommodated across all of the accommodation blocks and some blocks may not be at capacity. The provision of security personnel currently maintained on-site is in accordance with the formula outlined above in paragraph 4.26 above.
- 4.30** Since the Site became operational, there have been two incidents which required additional security presence on Site. CRH through Lead Element Security (LES) have an additional dedicated resource that can be deployed on-site within two hours. Once deployed on Site, there is a schedule of daily calls to discuss that additional presence, including consideration of when that additional resource can be stood down. There is also a Quick Response Force which consists of two to three members from LES who remain on Site, unassigned to a specific area, and able to respond immediately should an incident arise.

Transport

- 4.31** A free shuttlebus service is provided from the Site to the urban centres of Braintree, Colchester and Chelmsford. Buses will depart from and arrive at each destination at least three times each day of the week, 7 days a week. There are a minimum of three round trips to each of these locations per day (nine round trips per location, 27 round trips in total).
- 4.32** There have been and will continue to be occasions where additional trips above the minimum 27 are needed and the HO expects this to happen more frequently as the number of SUs on Site increases up to the 800 BAU cap. The shuttlebus service is driven by demand and buses will continue to take SUs to these locations until all those wishing to travel have travelled. There is currently a fleet of 32 (16 seat) shuttlebuses available. A minimum of 20 vehicles are available during the scheduled service periods to fulfil these routes with the capacity to make multiple trips each day with reserve capacity when needed. The overall available transport capacity is 480 seats (30 x 16) with a BAU operating capacity of 320 (20 x 16) seats.
- 4.33** The use of and demand for the shuttlebus service is recorded by the designated provider who maintains records of the number of people travelling and the number of journeys undertaken. The transportation of SUs forms a regular discussion point at the weekly Inflow Impact Review meetings which includes a review of current data and trends. Currently, the data shows that there is a consistent level of demand for the shuttlebus service.
- 4.34** The average number of SUs, transported to the three locations of Braintree, Colchester and Chelmsford each day (over 7 days; Mon to Sun), was for the week commencing:
- 2 June = 162
 - 9 June = 134

- 15 June = 204
- 22 June = 200

It should be noted that the above figures do not include journeys to hospital and other off-site medical appointments, dental, police station appointments, asylum support tribunals, or other individual SU “demand led” journeys. These journeys relate solely to the scheduled three times per day to each of Braintree, Chelmsford and Colchester locations

4.35 This level of transport provision is currently in place and will be maintained throughout the duration of The Order. Weekly Inflow Impact Review meetings discuss the transport provision at Wethersfield and determine whether the current provision is appropriate for the number of SUs accommodated on The Order land. It is through the weekly Friday Inflow Impact Review meetings that discussions are had with CRH on transport capacity and demand. Subsequently CRH will then discuss any increases/changes needed with their transport provider. The metrics of this form part of the contractual agreement between CRH and their transport provider(s).

Other Facilities

4.36 All of the available recreational and enrichment facilities on Site are made available to the SUs. As part of the weekly Inflow Impact Review meeting recreation facilities are reviewed to ensure that sufficient recreation space and facilities and enrichment activities are available to meet the requirements of the number of SUs accommodated on Site at any point.

4.37 Additionally, CRH hold regular monthly SU engagement and feedback forums. The forums provide SUs with the opportunity to engage with CRH regarding any concerns or suggestions about the operation of the Site including transport.

4.38 Three meals a day are served on Site in a dining area. The capacity of the dining area is currently available for up to 665 people at any one time (shown in orange in Figure 1 in Section 7). The dining area is able to accommodate up to 1,245 SUs on a rotating basis during mealtimes. The timings noted in the Operational Management Plan reflect the current reality on Site with a maximum capacity of 800 SUs.

4.39 As part of the Inflow Impact Review Meetings, the dining hall provision and timings/duration of mealtimes will be reviewed and flexed accordingly. Sitting times can be extended to ensure all service users on Site have sufficient access to dining facilities. Additionally, catering facilities reviews are also undertaken outside of the weekly Inflow Impact Review meetings with potential to increase the provision for up to 1,245 SUs if the contingency capacity is utilised.

4.40 CRH’s “surge” mobilisation plan when contingency bedspaces are being utilised has catering provision continually operating between 09:00 and 19:15 with defined breakfast, lunch and evening mealtimes that will enable SUs to obtain food at any time during these hours. Additionally snacks and refreshments are available free of charge 24 hours per day, every day to all SUs.

4.41 In regard to water services, it has been confirmed by Anglian Water Services that the supply in its original form can support the Site occupancy of up to 780 SUs. However, in order to go beyond 780 SUs i.e., to 800 or 1,245, reinforcement of the water supply has been implemented with booster tanks installed across the accommodation blocks to store a volume of potable water to cope with demand at peak times. This approach has been implemented in accordance with the Water Supply Regulations and has been reviewed by Anglian Water Services.

5. Unsuitability Criterion

5.1 Each SU’s suitability will be assessed at regular intervals or if concerns are raised by on-site staff and if they are no longer suitable for any reason, they will be moved to alternative accommodation that is more appropriate for their individually assessed needs. Further detail is provided in the Operational Management Plan, as per Condition 20.

- 5.2** Any SU who arrives at Wethersfield and subsequently declares a previously undisclosed issue that might affect their suitability will have their suitability for the Site reviewed and if appropriate following the assessment they will be moved to alternative accommodation that is more appropriate for their newly assessed needs.
- 5.3** If the Home Secretary concludes that an SU meets an unsuitability criterion, or for another reason referred to in Condition 22 sub-paragraph (2), then the following general principles will apply:
- Once a decision is made by the Home Secretary the SU will not be accommodated on the Site for more than 48 hours after the decision, except as a means to avoid or mitigate a risk that may otherwise be expected to arise to any person's welfare or if the 48 hours falls over a weekend or a public holiday.
 - The SU will be accommodated separately from other residents.
 - The SU will be treated in a way that takes due account of any matter that makes accommodation on the Order land unsuitable for that SU.
 - The Home Secretary will keep a record of the decision as part of reporting to the Secretary of State for MHCLG (as per Condition 22).
- 5.4** As demonstrated in **Table 1** above, there are 28 designated isolation bedspaces. These bedspaces are contained in their own block and completely separated from general accommodation bedspaces.
- 5.5** In the case that a SU is deemed unsuitable and is to be removed from the Order land, the isolation block (28 beds) will be utilised to accommodate SUs for no more than 48 hours (subject to the exceptions noted above).
- 5.6** The utilisation rate of the isolation block, as shown at paragraph 4.9 above, has been consistently below capacity. The Condition 22 Report (submitted to MHCLG in May 2025) notes that during the preceding 6-month period there were a total of 49 SUs relocated from the Site due to unsuitability. This is an average of 8.2 SUs per month which is equivalent to 1.2% of the maximum BAU capacity of the Site. If capacity were to reach 1,245 SUs in the event utilising the 445 contingency bedspaces, this would correlate to approximately 12.8 SUs per month meeting an unsuitability criterion each month and requiring temporary use of the isolation facility.
- 5.7** As per The Order, SUs who are found to be unsuitable for accommodation at Wethersfield are to be removed from Site within 48 hours (noting exceptions). Therefore, the use of the isolation unit for those unsuitable is typically only for short and limited periods of time and unlikely to pose any significant demand on isolation capacity. This is reflected in the operational experience of the Site, which is shown at Table 4.8 above.
- 5.8** As noted previously, should the occupation rate of the isolation unit be of concern, inflow to Wethersfield will be reduced or paused until the concern is addressed. Isolation bedspace capacity is discussed at every Inflow Impact Review meeting and forms one of the criteria which determines whether additional SUs can be inflowed to the Site. Arrangements and capacity are kept under review.

6. Interrelationship of Phasing Plan to Other Conditions and Dependencies

- 6.1** The phasing plan has been developed to comply with other conditions set out in the Special Development Order (SDO) that granted planning permission to operate the site as asylum accommodation until April 2027.
- 6.2** Condition 21, which specifically related to lifting the cap on SUs accommodated on the Site from 580 to 800, was discharged on 31st January 2025 as the Secretary Of State was satisfied that all of the Conditions stipulated in the SDO, that needed to be met before Condition 21 could be discharged, had been met.

7. Facilities Plan

- 7.1 The below plan (Figure 1) demonstrates the facilities available from day 1 and how they developed as SU numbers on Site change and increase.
- 7.2 Phasing of Bedspaces, shown in green on Figure 1, will be filled organically as they become available across general accommodation, following an SU vacating their allocated bedspace. Regular occupancy of the Site is for up to 800 SUs, whilst maintaining a constructed capacity of 1,245 (the additional 445 contingency bedspaces to be used in an exceptional surge event). The number of SUs to be accommodated is determined by the inflow to the Site which is expected to be up to 60 per week (30 per day) as BAU and up to 100 per week (50 per day) when occupying the 445 contingency bedspaces. From Week 1 of Full Operation there was a constructed capacity of 1,245 (including 445 contingency) bedspaces.
- 7.3 The isolation block, shown in pink on Figure 1, houses the 28 allocated isolation bedspaces. The 28 isolation beds will not change as Site numbers increase including when utilising the 445 contingency bedspaces
- 7.4 Catering facilities for SUs were available from day 1. The capacity of the dining area is currently available for up to 665 people at any one time and is shown in orange on Figure 1. The lead Service Provider CRH has a mobilisation plan, that has been shared and agreed with the Home Office, that details how catering provision and the catering facilities will provide for up to 800 SUs and up to 1,245 SUs if the contingency bedspaces are being utilised.
- 7.5 The Primary Healthcare Provision was available from day 1, shown in blue on Figure 1.



8. Summary

- 8.1 The Phasing Scheme for Wethersfield serves to satisfy Condition 21 of The Order. This document sets out at **Tables 1 and 2** the phases in which the facilities and services that are to be made available to service users will be provided. These locations of these service are shown on the map (Figure 1) above.
- 8.2 Wethersfield is an operational Site which requires flexibility in the delivery of on-site facilities and services. The needs of SUs and the requirements of The Order are fulfilled through the governance mechanisms: weekly Inflow Impact Review meetings and commercial processes. Together these ensure that services are adjusted, and facilities continue to be made available, as appropriate and required. These mechanisms also provide scope to pause or reduce the onboarding of SUs should the Site not be in a position to adequately accommodate SUs at that time. Furthermore, the Home Office and our suppliers operate an estate and allocation system of approximately 100,000 bedspaces across the UK. If for any reason we have cause to consider that services provided on the Wethersfield Site are not sufficient to adequately meet the needs of SUs, in line with the legal requirements under section 96 of the Immigration and Asylum Act 1999, we have the capability and capacity to move SUs from the Site and accommodate them elsewhere across the wider estate.
- 8.3 It should also be noted that the High Court Judgment in *R (TG & Ors) v Secretary of State for the Home Department* [2025] EWHC 596 (Admin) found that the Home Secretary was not in breach of her statutory duty to provide adequate accommodation arising under section 95 and 96 of Immigration and Asylum Act 1999 and regulation 5 of the 2005 Regulations when providing accommodation for asylum seekers at Wethersfield.
- 8.4 The original design of the facilities and services on Site were for 1,700 service users, which has since been reduced to 800 BAU occupancy and to 1,245 with the 445 contingency bedspace capacity. In light of this there is limited phasing to services and facilities at Wethersfield.
- 8.5 This document further demonstrates how arrangements that are required to be made in relation to such facilities or services will be adjusted in light of on-site demand, including in the event that the contingency bedspaces available may be temporarily utilised, in full or part, in the case of an exceptional “surge” that cannot be met by the wider accommodation estate. The provisions on the site will be monitored through the on-going weekly Inflow Impact Review meetings.
- 8.6 Section 5 of this document further details provisions in place to take into account in particular any material actual or anticipated changes in the number or proportion of resident SUs that meet an unsuitability criterion.
- 8.7 Therefore, the Home Office is satisfied that the above report outlines that the full needs of Service Users as the capacity of the Site increases to the 800 BAU occupancy operating cap and exceptionally up to the 1,245 combined BAU and contingency occupancy cap, if there is a surge to be accommodated, as per the requirements of Condition of the Special Development Order.