

# The Home Office's troubling approach to data collection on safeguarding people subject to immigration detention

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## Abstract

This paper explores the Home Office's data collection processes which should inform its understanding of the operation of its key safeguarding policy 'adults at risk in immigration detention' and other processes designed to ensure the protection of people held in administrative detention. The focus is analysis of the department's data 1 January 2023 - 31 December 2024.

The Home Office has a data publication scheme addressing its legal powers of administrative detention, but nothing is published that specifically addresses the operation of this safeguarding policy. When the department's data is probed for more detail under Freedom of Information Act 2000 processes, this indicates potentially inconsistent data trends, but most importantly demonstrates that there is a failure to capture data on the outcomes of the policy. The consequence is the presentational effect of an apparently nuanced policy position regarding safeguarding of vulnerable people, but with significant barriers to assessment of its efficacy.

**Key Words:** Immigration detention, safeguarding, adults at risk

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## Introduction

### *The lack of a standard time limit to immigration detention and the risk of harm of incarceration*

The UK is an outlier within Europe as there is no absolute time limit on incarceration for administrative immigration reasons. Instead, decisions regarding the length of detention are made against judicially developed criteria set out in the case of *R (on the application of Hardial Singh) v. Governor of Durham Prison* [1983] EWHC 1 which are applied to individual cases. This sets out four broad public law principles that confine the ability of the Home Office to detain people. They can be summarised that detention powers can only be used for the specific legal purpose identified by the decision-maker (generally to seek the removal of the person from the UK), that the department must act with diligence and expedition, detention may only continue for a period that is reasonable in all the circumstances, and where it becomes clear that the legal purpose cannot be effected within a reasonable period, then detention should cease. This approach allows for potentially long periods of incarceration. For example, Home Office data on the length of detention published in the most recent data set includes 56 people held for a time period categorised as between two to 'more than four years' between 2023 and 2024.<sup>1</sup>

This risk of extended detention needs to be set against the clinical evidence of harm to mental health caused by the nature of immigration detention itself, with the risk of such harm increasing with the length of incarceration (Bosworth 2016, Von Werthen et al., 2018). This is in addition to general evidence of the vulnerability of the detained population, including clinical evidence of the high prevalence of mental illness in the refugee and migration population, particularly post-traumatic stress disorder, depression and anxiety disorders (Blackmore et al., 2020) and that a history of trauma prior to being detained increases the risk of harm from detention (Royal College Psychiatrists, 2021).

### *The present safeguarding policy regime*

When considering the development of safeguarding policy in administrative detention, it is relevant to note that the UK's regime was significantly amended as a consequence of scandals exposed through undercover journalism (Channel 4 News 2 March 2015, BBC Panorama 4 September 2017) rather than as a result of careful incremental design. The current approach to safeguarding was developed in the wake of a series of legal judgments with findings of the most serious infringements of human rights, including repeated breaches of Article 3 of the European Convention on Human Rights (the prohibition of torture), incorporated into UK law via the Human Rights Act 1998. These cases arose from a systemic situation of failings leading to the detention of vulnerable and mentally ill people held under administrative powers of detention, with flaws in safeguarding processes being a key element of the judicial reasoning in such judgments (Shaw, 2016).

The outcome of these series of cases and subsequent independent review commissioned by the Home Office was a commitment to a new approach to safeguarding from 2016. This was developed in a new statutory policy, 'Adults at Risk in Immigration Detention' (Home Office, 2024a) which entailed a more complex approach to safeguarding decisions

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<sup>1</sup> Quarter 2 of 2025, Home Office immigration detailed detention data sets, published 21 August 2025 (accessed 16 October 2025) analysis of table Data\_Det\_D03

concerning the use of detention powers. The new policy contained a wider concept of vulnerability, entailing a balancing exercise when determining administrative detention decisions. This required decisions to be made by assessing the evidence of risk of harm to the individual caused by being detained and weighing this against any 'immigration factors' in favour of their continued detention. A more detailed explanation of the policy is set out below.

### *Controversy concerning the UK's use of administrative detention and approach to safeguarding*

The UK's legal framework itself has been criticised as inadequately striking the balance between liberty and the public interest (Stefanelli, 2020). A further legal analysis of the Home Office's network of policy and individual decision-making leading to widespread harm within immigration detention has been characterised as endemic bureaucratic oppression (Thomas, 2022). Analysis of the working of the adults at risk policy has identified ineffective assessment of the risks of harm (Lindley, 2021) and numerous concerns have been ventilated about safeguarding processes, including access to medical evidence of the risk of harm, the quality of clinical assessments, and the use by decision-makers when reviewing whether detention is appropriate (Shaw, 2016, Neal 2023, Turnbull, 2024).

### *The structure of this paper*

This paper initially discusses the Home Office's approach to its understanding and communication of data addressing safeguarding in immigration detention. This comprises an analysis of the department's data collection, the structure and limitations of the data it chooses to publish, the difficulties with the quality of its data and its response to external scrutiny of the efficacy of its adults at risk safeguarding policy.

The second section of this paper explains the terms of the adults at risk and other safeguarding policies in detail in order to then explore and analyse the available data on their operation and efficacy

## ***Home Office's system of proactive publication of departmental operational information***

Generally, it has been recognised that immigration detention is an under-researched area since it is difficult to access people who are held in such circumstances as the nature of a detention facility precludes admission to the public and also to researchers (Bosworth, 2014). Beyond an academic research perspective there is also international recognition that this type of detention is one of the most 'opaque areas of public administration' (UNHCR, 2014, p.21). This means that analysis of the Home Office's own operational data may be central to understanding the state's decision-making concerning a highly vulnerable population.

There is clearly an epistemological issue arising from the state's approach to proactive publication of statistical data. This may particularly apply in the context of the UK's data concerning the use of powers of detention of a vulnerable minority and in some circumstances where this is contrary to human rights norms; set within an official discourse

of unease in the state's approach to the management of immigration (Huysmans and Buonfino, 2008.) In this context, the concept that policy can also be understood as both ordering reality and constructing identity, includes the political ramifications that flow from this (Dunne, Pryor and Yates, 2005). This points to the notion that the state proactively publishing data about the operation of a controversial policy is likely to be formulated to these ends.

The key public information that the Home Office proactively publishes is a highly complex system of quantitative data provided on a quarterly basis dating back to 2010 to explain aspects of its operational use of immigration powers.<sup>2</sup> This comprises detailed information of the demographic profile of the detained population and financial costs of the system but provides very limited detail on issues related to vulnerability such as levels of illness or family separation. Another key gap in the data is any framework of statistics to explain the basis of decisions to release individuals.<sup>3</sup>

The communicative aspect of quantitative data as "a technology of distance..." (Porter, 2020, p. xxi) may be linked to the state seeking to project an appearance of rationality and objectivity when dealing with the emotive issues involved in the detention of vulnerable migrants. In addition, the concept of rationality as a potential check on government action applies as a key jurisprudential element of public law (Wade, Forsyth and Ghosh, 2023) as well as framing the civil service's own concept of appraising policy (HM Treasury, 2022). The need to demonstrate that the state is adhering to principles of rationality, with the underlying positivist considerations that apply, means that this is likely to frame the information that the Home Office chooses to publish.

A further factor when considering the state's presentation of its use of detention powers is the notion of publication of a policy itself. "Foucault (1984) asks the question, what is an author? He notes that some pieces of writing are not authored and appear to be the product of agency in general, but in the case of policy documents this also serves to give them an objective quality." (Dunne, Pryor and Yates, 2005, p.115). It is a central pillar of public law that individuals are entitled to know the content of any policy that is applied to decision-making concerning them by a public authority. In addition to this jurisprudential requirement, the abstract and apparently rational quality of a policy reinforces the projection of the Home Office as offering a neutral, impartial decision-making process.

This notion of the state projecting an objective approach to decision-making beyond an abstract policy document is heightened when considering the Home Office's Digital Strategy. This sets out a primary strategic shift to "Transform our digital services with AI and more automation." (Home Office, 2025e, p.5). This approach, where human decision-making is restricted by digital systems, may represent a further development of the concept of technology of distance and apparent objectivity. A further consideration of the effect of

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<sup>2</sup> These are set out in two sets of statistics: immigration enforcement data tables <https://www.gov.uk/government/statistical-data-sets/migration-transparency-data#immigration-enforcement> (accessed 16/10/25) and immigration detention tables <https://www.gov.uk/government/statistical-data-sets/immigration-system-statistics-data-tables#detention> (accessed 16/10/25)

<sup>3</sup> Home Office immigration detention tables Det\_DO3 provides information on the type of decision-maker and whether the person was granted bail, a form of leave, returned or 'other' as an outcome but no explanation or categorisation for the basis of these decisions.

the use of IT decision-making is that this may be used to legitimise and project authority onto such a system, deepening apparently positive qualities of objectivity, allied with distance from the vagaries of human reasoning.

The current version of the adults at risk policy (Home Office, 2024a, p.29) contains formal recording requirements within the Home Office's IT system. This includes an obligation to record whether individuals are identified as at risk when they are considered for detention, differentiations of the level of risk and whether they were accepted into administrative detention. A similar requirement applies to identify detained individuals within the IT system who fall within the policy, again differentiated by level of risk, together with recording of the outcome of a detention review as to whether the individual was released or subject to continuing detention.

These requirements allow the Home Office to interrogate its IT systems to understand the number of adults at risk held in detention, as well as to assess the decision-making processes in terms of the numbers of individuals accepted into detention, differentiated by their level of vulnerability as well as to understand the frequency of release of such individuals. This capacity has been required to be available since quarter 3 of 2024 when the current iteration of the policy came into force but is yet to become any aspect of the published scheme of official data. However, these requirements to capture data clearly provide a straightforward framework for the Home Office to assess the operation of key aspects of its safeguarding approach.

A further relevant factor when considering the department's proactive publication of data is that whilst there is clear information on the number of people who are removed from the UK directly from detention, the position is opaque when seeking to understand the basis of decision-making regarding detention decisions. With the exception of publication of the number and type of clinical safeguarding reports (a process known as Rule 35 following the requirements of this Rule set out in the Detention Centre Rules 2001 explained below), as well as statistics on whether they trigger the release of the individual (Home Office, data enforcement tables) no other information is provided concerning the role of safeguarding in maintaining detention or ensuring release of vulnerable detained people.

In summary, the proactively published safeguarding information by the Home Office has as its centre piece a publicly accessible policy, approved on a statutory basis, explaining how concepts and evidence of vulnerability are understood and factored into detention decisions. Conversely, there are very limited means to allow public scrutiny of that policy's operation.

## Quality and impact of Home Office data and IT systems

Historically the Home Office has operated with a casework system, Caseworker Information Database, and has updated to a new IT system, Atlas. As of April 2025, the former database was decommissioned (Home Office, 2025d). This systems change has happened in the context of longstanding information as to the general deficiencies of Home Office data quality and IT systems. The Public Accounts Committee in 2014 concluded "The Department lacks good quality data on cases, preventing it from efficiently managing the backlogs and the overall workload, and hindering effective accountability." The

recommendations included immediate “steps to improve the quality of the data it collects and holds through cleansing and regular sample checks and improve the presentation and clarity of data”. “As a matter of priority, the Department should identify the future IT capabilities it requires, so it can develop a comprehensive, system-wide IT strategy that will deliver the required capabilities” (Public Accounts Committee, 2014 p.5).

These concerns were subsequently compounded by the Committee’s report on the Windrush Generation 2017-2019 “The Department is making life-changing decisions on people’s rights based on incorrect data from systems that are not fit for purpose” and recommended “In its design and roll-out of Atlas, the Department should prioritise improving the quality of its data. Alongside its Treasury Minute response, the Department should write to us setting out specific plans for data cleansing, migration of the existing case files and controls around the input of new data.” (Public Accounts Committee, 2019 p.6). The government accepted the substance of these concerns in responses to the Committee’s reports.

In addition to general concerns about the quality of Home Office data systems, the impact of these deficiencies on the department’s ability to understand the operation of the adults at risk process was highlighted in the first annual review of the policy completed by the Independent Chief Inspector of Borders and Immigration completed in 2019, together with the conclusion that there was a lack of departmental commitment to resolve this issue (Bolt, 2020) . Further concerns about safeguarding data quality were subsequently repeated in the second and third reports of that body (Neal, 2022 Neal, 2023). The Home Office in its response to the first report provided a commitment to improving data quality on its IT systems but also stated this was predicated on the implementation of Atlas.

In the context of concerns about data quality and the move to Atlas, the department’s change in IT systems has been characterised by delay and limited priority (Markson, 2024) with the commitment to respond to the Public Accounts Committee on data quality being deferred seven times as a result of other departmental priorities. Systemic data concerns have been compounded by confirmation that the regulator, the Information Commissioner, has commenced an investigation of Home Office data errors following a self-referral by the department following public awareness of IT processes leading errors in personal data (Trendall, 2024). Although Atlas was initially implemented alongside the previous casework system, it has been populated with the earlier system’s data and therefore likely to have also imported any such defects. Clearly an IT system predicated on flawed data reduces the ability to generally understand the operation of immigration and asylum system.

On a conceptual basis the new Atlas system may therefore simply continue with reproducing the hierarchy of knowledge construction and limitations of protection of the vulnerable from the previous incarnation of Home Office technology. Moreover, if digital systems are understood raising existential and political questions, these can include an inability to identify the aspects of decision-making that apply to individual’s legal status that are governed by the technology itself rather than human judgments (Dijstelbloem, 2021). Narita (2023) has recognised that as technologies frame reality and facilitate decisions, this can become a circular process. IT systems are simultaneously problematic in the framing of data development and quality, but the systems also necessarily become the solution as errors are only resolved by the development of further processes or technology structures.

## Home Office changing responses to commissioned external scrutiny of its approach to safeguarding

The adverse legal findings and journalistic exposure have caused the Home Office, or the private companies contracted to run individual detention sites, to commission various reviews of these concerns to analyse systems of safeguarding and various developments of such processes (Shaw, 2016, Lampard and Marsden, 2016, Shaw, 2018, Shaw, 2025). However, the Home Office has become less open to access and scrutiny in relation to the adults at risk policy over time as the policy has become embedded, demonstrating the contested nature of detention policies and the data that underlies them.

The first thematic independent review of the department's safeguarding policies was undertaken by Sir Stephen Shaw in response to a series of legal judgments against the Home Office for breaches of human rights following safeguarding failures. This legal background required the Home Office to accept there were deficiencies in decision-making and so the report (Shaw, 2016) was accepted by the government and underpinned by a written response and ministerial statement at the time of publication, including a commitment to developing the present adults at risk safeguarding policy.

A second thematic report again commissioned by the Home Office and undertaken by Sir Stephen Shaw assessed the operation of that policy (Shaw, 2018). This comprised a mixture of acceptance that the policy was new and so was a 'work in progress' with recommendations for improvement. Again this was accepted by the Home Office with an accompanying ministerial statement agreeing to the need for more transparency around immigration detention and undertaking to commission annual reports from the Independent Chief Inspector of Borders and Immigration on "*whether and how the adults-at-risk policy is making a difference.*"

The UK courts have also intervened to address the department's pattern of commissioning one-off reports in the wake of safeguarding concerns about the use of immigration detention and instead ordered the establishment of a public inquiry on a statutory basis to ensure more detailed scrutiny of Home Office failures to protect the human rights of detained people in *R on the application of MA and BB v. SSHD for the Home Department* [2019] EWHC 1523 (Admin). These were contested legal proceedings, opposed by the Home Office, despite the fact a statutory public inquiry would allow for a more comprehensive access to data about events at that detention site than the previous ad hoc reviews. The Brook House Public Inquiry published its report on 19 September 2023 and provided detailed evidence of the mistreatment of detained people and the inadequacies of safeguarding policies that contributed to this situation (Eves, 2023).

The Home Office's commitment to annual reviews of the adults at risk policy led to a series of three increasingly critical thematic reports (Bolt, 2020, Neal, 2021 and Neal, 2023) with each report entailing an accompanying response by the Home Office to the Inspector's recommendations. However, following delivery of the last thematic report in 2023 the Home Office took a decision to cancel the regime of yearly inspections addressing the

adults at risk policy (Neal, 2023). The last report received a written response by the Home Office (Home Office, 2023) which engaged with the substance of the recommendations but did not include reference to the decision to cancel future reports or provide an explanation for this.

In addition to the cancelation of the annual thematic reports, this seems to have been accompanied by a delayed approach by the Home Office to publication of data concerning the operation of the adults at risk policy. This can be seen in the most recent report commissioned by the department from Sir Stephen Shaw (Shaw, 2025). This concerned quantitative Home Office data for a period January 2016 - June 2020, analysed in a report completed in March 2024. However, the report itself was subject to a further delay of 9 months to publication, leading to a substantive delay in public access to this information of 3 years and 9 months from the end of the period of the data analysed. In addition, the report was published without any commentary or formal response from the department to its findings. Although such a lack of reply may simply have been as a consequence of the report lacking formal recommendations.

Overall, as the adults at risk policy has moved from a new safeguarding approach and so being judged simply on the face of the written document, to assessment over the longer term of its efficacy and application, this appears to have been accompanied by increasingly reduced engagement by the Home Office with systems of external scrutiny. In turn this has led to a reduction in public access to current data concerning the operation of the policy.

## The terms of the Home Office safeguarding policies

### *Summary of the safeguarding policies*

The Home Office's safeguarding approach is set out in two key statutory documents: the Detention Centre Rules 2001 (SI 2001/238) and the 'adults at risk in immigration detention' policy (SI 2026/847, Home Office, 2025a). Both are underpinned by a series of further guidance and policy material published by the Home Office, with additional training and operational documents for frontline staff that may not always be publicly available.

The Detention Centre Rules 2001 (DCR 2001) are modelled on the UN Standard Minimum Rules for the Treatment of Prisoners and do not have any particular focus on issues concerning indefinite administrative detention. However, the safeguarding element of the international rules was premised on the key role of health-care professionals to identify "any signs of torture or other cruel, inhuman or degrading treatment or punishment, they shall document and report such cases to the competent medical, administrative or judicial authority. Proper procedural safeguards shall be followed in order not to expose the prisoner or associated persons to foreseeable risk of harm." This safeguarding position was further developed as "The physician shall report to the prison director whenever he or she considers that a prisoner's physical or mental health has been or will be injuriously affected by continued imprisonment or by any condition of imprisonment." (United Nations, 1977).

This central safeguarding role of healthcare staff was imported into the DCR 2001 with a requirement on immigration removal centres to employ a general practitioner. This clinician

would offer an appointment to all detained people within 24 hours of arrival into the centre and would be obliged to complete a safeguarding medical report at that time, or later if concerned at a subsequent appointment. The criteria for completing such a report are set out in Rule 35 of the DCR 2001 and so those documents are known as 'Rule 35 reports.' They are completed by GPs under subsections of the Rule. Firstly, Rule 35(1) reports are necessary where the doctor has concerns that the patient's health is likely to be "injurious affected" by the fact or conditions of detention. Secondly, Rule 35(2) reports are required where the person is suspected to have suicidal intentions. Thirdly, Rule 35(3) reports should be compiled where the patient may have been a victim of torture. Guidance (DSO 09/2016, June 2025) issued by the Home Office to support this policy includes standard report pro forma, and a commitment that the department's caseworkers will review the need for detention and respond to the doctor in writing within two working days. The process for healthcare screening for people arriving at an immigration removal centre is not published and is the responsibility of the NHS. However, the Home Office guidance concerning Rule 35 states that such a process provides an opportunity to identify concerns that relate to that Rule.

The adults at risk policy introduced in 2016 adopts a wider approach to safeguarding compared to the restricted categories of Rule 35 DCR 2001, with an explanation that a detained person will be regarded as "at risk" if "they are suffering from a condition or have experienced a traumatic event (such as trafficking, torture or sexual violence) that would be likely to render them particularly vulnerable to harm if they are placed in detention or remain in detention" (Home Office, 2025a). This is supplemented by other indicators of risk, with recognition that the categories are not exhaustive and that evidence of vulnerability can change over time.

The policy provides for three levels of evidence of risk. This ranges from a self-declaration by the individual of information that indicates they fit within the policy (Level 1), to professional evidence that the individual fits within the definition of a person at risk (Level 2), to professional evidence of risk, combined with the opinion that the individual is likely to be harmed by detention (Level 3). The key role of medical evidence is clear since the policy provides that Home Office caseworkers taking detention decisions are not to put decisive weight on the risk of harm unless this is supported by 'professional' opinion. There is also detailed information provided to caseworkers about how to assess external medical evidence addressing the risk of detention.

The policy recognises that those at the lowest level of self-declared risk are unlikely to be released, but recognition of this status should act as a flag for those managing the immigration process. Individuals at level 2 and 3 are considered for release against countervailing factors such as imminence of removal, the person's history of compliance with the immigration process and public protection factors. People with level 3 evidence that detention is likely to cause them harm require strong countervailing factors in order to be detained.

The overall issue for the operation of the policy is identification of people who are vulnerable and assessing the risk of harm to them of detention, with medical evidence playing a central role in this. The adults at risk policy is supplemented by other Home Office guidance relating to the monitoring of people in detention who are identified as at risk with

a vulnerable adult care plan (VACP) (Home Office, 2025f) or suicide and self-harm risk assessment procedures undertaken under the assessment care in detention and teamwork policy (ACDT) (Home Office, 2022). Both policies allow for processes to gather further data concerning an individual's vulnerability. However, aside from the offer of a GP appointment within 24 hours of arrival at an immigration removal centre, there is no subsequent structured system of screening or assessing all detained people to understand their risk of harm in detention. Both the VACP and ACDT processes make brief reference to the adults at risk policy. Yet there is no formal requirement if either management process is commenced that this will require specific information to be provided to detention decision-makers or will trigger review of the person's suitability for detention.

## Data

### *Data Parameters*

The tables below are delineated by that data which is publicly available within the Home Office's official scheme<sup>4</sup> and information obtained following specific requests made under the Freedom of Information Act 2000. The former data is assured to the standards of the Office of National Statistics, whereas the latter are the result of information extracted from the Home Office systems by the individual responding to the request without further review.

The Home Office holds people under administrative detention powers in detention sites that are specifically commissioned for that purpose. These comprise immigration removal centres where there is no formal time limit for the period of incarceration and short-term holding facilities where detention is limited to a period of seven days. The ACDT and VACP processes apply to both types of detention sites. The Home Office collects data on the number of VACPs across both sites but only collates data for people under ACDT processes for people held in immigration removal centres and so short-term holding facilities are excluded from that data set. The Home Office also holds people under immigration powers in prison pending deportation proceedings, but differing monitoring processes apply in those circumstances. The figures for the number of people entering detention are taken from table Det\_D01 of the published immigration detention tables and so exclude people held in prisons.

There are particular limitations to data collection as a result of the way that Home Office IT systems operate. Data is generally captured as a 'snapshot' of a particular time when the database is interrogated rather than having the capacity to provide any longitudinal data for individuals throughout their period of detention. This therefore means there is a risk of double counting the same individuals within different quarters when seeking to aggregate numbers across other time periods. A further factor is that the various categories set out in the tables below are not exclusive.

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<sup>4</sup> Home Office data tables referenced above

## Data Tables

**Table 1: 2023 - 2024 Individuals held in detention and those held for a period longer than 28 days**

	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024
No of people entering detention <sup>5</sup>	4161	4974	4619	4644	4802	4853	5036	5913
No of people leaving detention after a period in excess of 28 days <sup>6</sup>	1093	1651	1777	1778	1704	1802	1656	1823
Indicative percentage of the detained population held for a period in excess of 28 days	26.3%	33.2%	38.4%	38.3%	35.4%	37.1%	32.9%	30.9%

These figures demonstrate a slight increase in the number of people subject to immigration detention in 2024 when compared with the previous year. Across both years there remains a relatively high proportion of people subject to detention in excess of 28 days which is relevant to safeguarding issues as risk to mental health increases with the length of detention.<sup>7</sup>

<sup>5</sup> Immigration systems statistics, published 21/08/25 accessed 16/10/25, detailed detention data sets, table Data-Det-D01

<sup>6</sup> Immigration system statistics published 21/08/25 accessed 16/08/25, detailed detention data sets data, table Det-03 for data at the end of each quarter, filtered for detention periods of 29 days and longer.

<sup>7</sup> Given the limitations of Home Office data explained above this is an indicative figure only.

**Table 2: 2023 - 2024 People identified as falling within the adults at risk policy differentiated by level of risk and as a proportion of people entering immigration detention**

	Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024
Adults at risk, level 1								
No of people identified as at level 1 <sup>8</sup>	8	124	481	467	555	543	523	
Percentage of people identified as at level 1 compared with the figures of those entering detention as set out in table 1	0.19%	2.49%	10.41%	10.1%	11.56%	11.0%	10.39%	10.47%
Adults at risk, level 2								
No of people identified as at level 2 <sup>9</sup>	35	168	339	435	454	605	728	769
Percentage of people identified as at level 2 compared with the figures of those entering detention as set out in table 1	0.84%	3.38%	7.34%	9.37%	9.45%	12.47%	14.46%	13.0%
Adults at risk, level 3								
No of people identified as at level 3 <sup>10</sup>	10	31	25	26	25	47	71	74
Percentage of people identified as at level 3 compared with the figures of those entering detention as set out in table 1	0.24%	0.006%	0.54%	0.56%	0.005%	0.01%	0.014%	0.013%
Adults at risk, all levels								
No of people identified as falling within the adults at risk policy	53	323	845	928	1034	1195	1322	1462
Percentage of people identified as falling within the adults at risk policy compared with the figures of those entering detention as set out in table 1	1.27%	6.49%	18.29%	19.28%	21.53%	24.62%	26.25%	24.73%

This dataset shows a surprisingly low level of people recorded as identified as an adult at risk for the first two quarters of 2023, with a more consistent proportion of people within the detention population thereafter. This data also indicates a very low proportion of people recorded at the highest level of risk, ie where there is professional evidence of the

<sup>8</sup> Home Office, freedom of information request no 6545

<sup>9</sup> Ibid

<sup>10</sup> Ibid

risk of harm of detention, across the entire dataset. This is striking given the research that indicates a risk to mental health caused by the fact of detention as well as the increase in symptom severity for a people with a history of trauma exposure (Royal College Psychiatrists, 2021).

In addition, the numbers of individuals assessed as at level 2 of evidence of their risk remains high compared with those assessed as at level 3. This is an interesting trend since the policy itself recognises that falling within the indicators or categories of vulnerability means the individual may be “particularly vulnerable to harm” and yet this population is rarely recorded as obtaining professional evidence that detention was “likely to cause harm.” This suggests the need for research to understand reasons for the limited evidence of this type of professional opinion and the efficacy of the policy’s approach of seeking to avoid harm by asking professionals to predict this.

Unfortunately, the limitations of the data collection within the Home Office’s IT processes mean it is difficult to understand the operation of the policy. There is no information as to whether individuals’ risk changes after a decision has been taken to detain, or when within their time in detention their indicators of risk are identified. This is a significant deficiency as this means there is no information as to whether risk is identified within arrival assessment processes, subsequent clinical contact or information sharing by members of detention staff.

Moreover, the adults at risk policy explicitly recognises that vulnerability fluctuates and this is, again, underpinned by research that indicates that risk to mental health increases with length of detention (Royal College Psychiatrists, 2021). Here the Home Office’s data systems do not allow the policy’s underpinning rationale of fluctuation in vulnerability to be analysed in more detail to understand whether and how often an individual’s level of risk changes within their period of detention. This limitation also precludes understanding how often individuals who disclose an aspect of vulnerability are then able to access the professional assessment that would entitle them to greater protections under the policy.

**Table 3: 2023 - 2024 Number of people with professional evidence of vulnerability in detention**

Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024
People in receipt of a Rule 35(1) report <sup>11</sup>							
8	17	15	18	18	13	18	25
People in receipt of a Rule 35(2) report <sup>12</sup>							
6	6	3	5	6	7	10	22
People in receipt of a Rule 35(3) report <sup>13</sup>							
463	609	576	586	688	693	512	654

<sup>11</sup> Immigration enforcement data, table DT\_03 published 21/08/25, accessed 16/10/25

<sup>12</sup> Ibid

<sup>13</sup> Ibid.

The data demonstrates disproportionate numbers of Rule 35(3) reports that identify a history of torture when compared to the infrequency of Rule 35(1) reports which set out a clinical opinion that the patient is at risk of harm to their health due to detention.

Current policy requires GPs to complete a separate report under each of the three aspects of Rule 35 where they have concerns for the individual, (Home Office, 2025). Given the link between a history of trauma and mental illness, coupled with the understanding that such trauma is associated with increased symptoms of mental illness in detention, (Royal College Psychiatrists, 2021) these figures demonstrate an unusual disparity in that clinical recognition of a history of torture often does not lead to concurrent medical opinion that detention is likely to cause harm to the patient.

**Table 4: 2023 - 2024 Comparison number of people with professional evidence of vulnerability in detention with numbers identified as falling within the adults at risk policy level 2 and level 3**

Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024
People in receipt of a Rule 35 report all types <sup>14</sup>							
471	626	591	604	688	693	512	654
People recorded as at an adult at risk, level 2							
35	168	339	435	454	605	728	769
People recorded as at an adult at risk, level 3							
10	31	25	26	25	47	71	74
People with professional evidence that the person is an adult at risk (aggregate levels 2 and 3)							
45	199	364	461	479	652	799	843
Difference between people in receipt of a Rule 35 report and those identified as an adult at risk with professional evidence to support this							
>426	>427	>227	>143	>209	>41	<280	<189

Here, in terms of understanding the Home Office's approach to data collection, these figures are clearly affected by the increase in recording whether detained people fall within the adults at risk policy between the beginning of 2023 and the end of 2024. This increase is reflected in the very significant disparity between the number of people with a clinical safeguarding report who are not subsequently recorded as an adult at risk from a very low level in the first quarter of 2023 to the end of the second quarter of 2024. Thereafter the trend is reversed with more individuals are recorded as falling within the policy than the number of GP safeguarding reports that are completed. This later data seems more in keeping with a process where there may be numerous methods of identifying vulnerability that are not dependent on access to a GP safeguarding assessment process within detention.

The disproportionate numbers of Rule 35(3) reports that identify a history of torture when compared to the infrequency of Rule 35(1) reports, set out in table 3, seems to then translate into the numbers of people assessed as at level 2 risk of harm rather than level 3. This seems likely as provision of a Rule 35(1) report is easily transposed into recognition that an

<sup>14</sup> Ibid.

individual is at the highest level of risk of harm within the adults at risk policy given the similarity between the basis for a GP completing such a report and the wording of level 3 of evidence of risk. In contrast receipt of a Rule 35(3) report requires caseworker discretion when understanding the evidence of the risk posed by detention, by considering the information contained in that document to judge whether the detained person is at risk of harm due to detention or that the person simply falls within the terms of the policy on the basis of their categorisation as a person with a history of torture and so is at a lower level of risk. This in turn may directly feed into safeguarding decision-making regarding release since the policy requires less justification for detaining people at a level 2 of risk.

**Table 5: 2023 - 2024 numbers of people held in detention and under systems of monitoring related to their level of vulnerability, under ACDT or VACP<sup>15</sup>**

Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024
Number of people under the system of ACDT monitoring <sup>16</sup>							
247	405	315	303	355	324	280	339
Number of people under the system of VACP monitoring <sup>17</sup>							
355	319	313	234	338	422	353	422
Aggregate FOIA data number of VACP and ACDT processes opened or underway							
602	724	628	537	693	746	633	761
Percentage of people under VACP and ACDT processes as a percentage of the data for the number of individuals entering detention for the quarter							
14.47%	14.55%	13.6%	11.56%	14.43%	15.37%	12.57%	12.87%
People with professional evidence that the person is an adult at risk (aggregate levels 2 and 3)							
45	199	364	461	479	652	799	843
Aggregate: All people identified as an adult at risk, all levels of evidence							
1034	1195	1322	1462	1034	1195	1322	1462

The data set for the entire period broadly demonstrates similar numbers of people were placed under either type of monitoring processes under the VACP or ACDT policies across the time period of 2023 - 2024 and also a broadly consistent relationship with the number of people recorded as entering detention as set out in table 1. This suggests these processes were commenced with limited variation across the detained population, in contrast to the significant increase in the numbers recorded as adults at risk within this dataset.

The figures show significant difference between the number of these monitoring processes opened, and the total number of people identified as at risk at minimum level 2 within the adults at risk policy for the period of 2023 to the end of the second quarter of 2024. This

<sup>15</sup> The Home Office do not differentiate between people held in immigration removal centres and short-term holding facilities for calculations of the number of people with VACPs, but only collate data for people under ACDT processes for people held in immigration removal centres only and so short-term holding facilities are excluded from this data set.

<sup>16</sup> Home Office, freedom of information request nos 72966, 75319, 76239, 00893, 2122, 6794

<sup>17</sup> Home Office, freedom of information request nos 00757, 2025/01425.

indicates the need for further exploration since both monitoring processes and identification of people as an adult at risk have overlapping features and so it would be expected that both sets of figures would be broadly similar. It is difficult to understand how ACDT policies which place people under additional observation or support following identification of their risk of self-harm or suicide would not also be very likely to place that individual within the adults at risk framework. Such an overlap is particularly difficult to explain given the comorbidity of mental and physical illness with these symptoms (Sadath et. al, 2023, Hawton, 2013). Clearly the people placed on VACP processes are necessarily recognised as vulnerable and the policy itself requires those working with such individuals to be alert to changes in the nature or severity of the person's vulnerability. This again would indicate the person should be recorded as falling within the adults at risk framework.

The disparity between recognition of an individual as vulnerable within internal immigration detention centre management policies and the wider adults at risk policy that relates to the justification for detention could suggest that there was possibly under reporting or communication of evidence of vulnerability within the Home Office. This in turn might also suggest that safeguarding processes relating to decisions concerning release were flawed. This disparity clearly represents a further basis for research. Here the focus would be to explore whether there is appropriate information sharing concerning risk. Information from detention monitoring systems is recorded by members of staff working directly with individuals, administering monitoring systems and recording risk information on databases. This information is then factored into safeguarding decisions concerning release made by casework staff that have no such direct contact with the detained person and so can only consider the details available in IT systems.

Comparatively a separate trend for the latter part of 2024 shows a significantly higher level of people recorded as falling within the framework of the adults at risk policy compared with those placed on VACP or ACDT monitoring policies. This markedly different relationship between monitoring processes and people identified as an adult at risk merits more detailed exploration and would be a potential audit consideration for the Home Office when seeking to understand the overall operation of safeguarding processes in detention.

**Table 6: 2023 - 2024 numbers of people released from detention as a consequence of their vulnerability**

Q1 2023	Q2 2023	Q3 2023	Q4 2023	Q1 2024	Q2 2024	Q3 2024	Q4 2024
Number of people released as a consequence of being identified as an adult at risk, level 1 <sup>18</sup>							
1	3	3	11	6	9	4	5
Number of people released as a consequence of being identified as an adult at risk, level 2 <sup>19</sup>							
10	9	8	12	11	16	9	16
Number of people released as a consequence of being identified as an adult at risk, level 3 <sup>20</sup>							
6	22	12	4	4	7	13	20
Number of people released as a consequence of being identified as an adult at risk (all levels of evidence)							
17	34	23	27	21	32	26	41

<sup>18</sup> Home Office, freedom of information request nos 2024/06503, 2025/05262

<sup>19</sup> Home Office, freedom of information request nos 2024/06503, 2025/05262

<sup>20</sup> Home Office, freedom of information request nos 2024/06503, 2025/05262

Number of people released under all 3 aspects of the Rule 35 process <sup>21</sup>							
187	233	225	203	166	202	107	156

Table 6 clearly shows that the Home Office is not correctly capturing statistics on the effect of the adults at risk policy. There is an overwhelming disparity throughout 2023 and 2024 between the numbers of individuals recorded as released as a consequence of the Rule 35 reporting process and those released as a result of the adults at risk process. This is difficult to understand since the operation of the Rule 35 reporting process requires the application of the adults at risk policy to their situation.

At minimum individuals released following a clinical Rule 35 report should also have been identified within the overarching adults at risk policy. The Rule 35 process operates to gather information relevant to some aspects of the adults at risk policy and to trigger a review of detention and this then requires decision-making in accordance with that overarching policy. Indeed, since the definition of vulnerability within the adults at risk policy is wider than the terms of the Rule 35 process, then an effective safeguarding system would be likely to show higher numbers of people released under that overarching policy rather than as a consequence of the narrower criteria set out within the Rule 35 process.

In any event this disparity between the number of individuals recorded and released under the adults at risk policy and those identified as released following the operation of the Rule 35 processes demonstrates that the policy requirement since May 2024 to capture data on the number of people identified as an adult at risk and who are then released has simply not been observed.

## Conclusion

Given the problems of research access to detention sites and safeguarding decisions, thematic independent reviews or public inquiries have to date represented the most comprehensive and holistic means of assessing Home Office's safeguarding practices. However, these processes do not provide current information. The Brook House Inquiry reported in September 2023 (Eves, 2023), with the last date of live evidence on 4 April 2022. The last report by the Independent Chief Inspector of Borders and Immigration was published in January 2023 (Neal, 2023), based on evidence collated to September 2022. The most recent thematic report published by the Home Office in 2025 is the evaluation report authored by Sir Stephen Shaw (Shaw, 2023) which analysed data for a period that ended in June 2020. Given this lack of up to date information, analysis of the Home Office's own data represents the best means of assessing its safeguarding approach. Here the data clearly demonstrates a lack of data collection on the key outcome of the application of the adults at risk policy: the frequency that this policy effects the release of vulnerable adults.

In addition, where safeguarding data is collected this suggests a lack of a logical and integrated approach. Systems of monitoring may not lead to sharing of information relevant

<sup>21</sup> Aggregate of figures included in immigration enforcement data, table DT\_03 published 21/08/25, accessed 16/10/25

to decisions concerning whether detention itself is in accordance with the adults at risk policy. Where statistics are collated on the types of medical assessment and reporting, this shows a degree of illogicality, given the regular identification of people with a history of torture but very little clinical opinion addressing the risk of harm caused by detention. This lack of clear medical opinion could in turn undermine the operation of the adults at risk policy since this places more of a burden on non-clinical casework staff to interpret the content of reports. Where there are few reports directly addressing clinical evidence of the risk of harm of detention, those individuals may not be easily identified as at the highest level of risk and so will not benefit from the policy's increased protection for people within that class of evidence of vulnerability.

Overall, the Home Office's incomplete and poor-quality approach to safeguarding data collection clearly has the effect of reducing any analysis of its decision-making regarding the most vulnerable detained people. State data collection and the publication of such material has a varied risk profile for the executive. On the one hand this can be a means of externally framing a political debate or internally assessing whether there is competent policy delivery. At the same time such data can also represent a risk. Where such information suggests policy failure this can lead to public criticism and provide a basis for political interrogation, as well as potentially review by the courts. These risks are heightened in a controversial policy and legal area such as immigration detention where there are competing departmental demands and also high political and media engagement.

Working within such a contested arena, the response of the state may be to adopt a position of zones of strategic unknowing (McGoey, 2019). In this example it means the Home Office presenting an apparently highly developed long term quantitative data publication regime focussed on uncontroversial empirical information such as detailed demographic data. However, more contentious safeguarding data is limited, hard to access, or non-existent, and so the effectiveness of safeguarding a highly vulnerable population is consigned to an area of unknowing.

Analysis of the Home Office's approach to data collection can be further explored by considering the notion of its agency in this process. Boswell and Badenhoop (2021) have defined the concept of state ignorance as a deliberate choice in framing the questions about the state's prioritisation of problems it chooses to 'see' and so produce knowledge on that area, conceptualising state ignorance as on a spectrum between "strategic ignorance" and "ignorance by omission" (p.337). With their definition of state ignorance, drawing on the work of Daft & Weick (1984) and Jones & Baumgartner (2005), this is summarised as an acknowledged discrepancy between what is known by public authorities and that which they might reasonably have been expected to know. This conceptualisation of strategic ignorance is highly applicable to the expectation that, as a rational bureaucracy, the Home Office should be able to show the impact of a central safeguarding policy by measuring its effect on the number of vulnerable individuals released from immigration detention. Where such data is unavailable this then leads to a lack of challenge to the legitimacy of the policy or the department responsible for its operation, an example of Boswell and Chahal's analysis (2024) that the state's value of its own data or knowledge may be conditional on whether this contributes to the wider project of sustaining political power.

In this context it is noteworthy that the Home Office has moved from a position where data on the operation of the adults at risk policy was not part of its systems of data collection and so a potentially strategic choice to limit its knowledge acquisition, to a public policy that requires such data to be obtained, whilst apparently simultaneously tolerating a situation where this information collation does not happen in practice. In this context the department will be cognisant that its internal data potentially represents the highest value information as it difficult for the state to criticise its own information collection choices and its own data on policy outcomes.

One means to reconcile this tension in a highly controversial area, is a publicly accessible safeguarding policy that is framed as liberal and compatible with human rights, also underpinned by data collection requirements. Yet at the same time to mitigate the risks of scrutiny and evaluation by limited internal data collation in practice, restricted schemes of publication about the policy's operation and reduced regulatory assessment by inspectorates. This may represent the state offering a rights respecting policy as a presentational response to criticism, rather than a means to achieve change. This perspective may have some additional weight in circumstances where the operation of such a policy requiring the release of detained people may stand in contradiction to other political objectives such as seeking to increase the numbers of migrants removed from the UK (Home Office, 2025f).

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