



Insight Report

Accessing Health and Social Care Services:

Asylum Seekers

November 2023

healthwatch
Leicestershire

Accessing Health and Social Care Services: Asylum Seekers

Our access to Health care project is to listen and explore how people have been accessing their health care and what that experience has been like for them. We have identified groups and we will seek to listen and outline what the specific issues are for those communities.

Our focus for this project was to engage with asylum seekers who have been accommodated in hotels in Leicestershire.

In July and August 2023, we visited five hotels in Leicestershire and spoke to 85 people.

Who is an asylum seeker?

Amnesty International says, “An asylum seeker is a person who has left their country and is seeking protection from persecution and serious human rights violations in another country, but who hasn’t yet been legally recognised as a refugee and is waiting to receive a decision on their asylum claim. Seeking asylum is a human right. This means everyone should be allowed to enter another country to seek asylum”.¹

Background

Central government has a statutory duty to accommodate people who are seeking asylum. The Home Office has placed several people seeking asylum in hotels across Leicestershire, whilst their asylum application is assessed.

In Leicestershire, there are five hotels managed by SERCO2 housing 696 asylum seekers.

Hotel	Number of Asylum Seekers	Residents
Hotel 1	140	Families
Hotel 2	220	Men

¹ <https://www.amnesty.org/en/what-we-do/refugees-asylum-seekers-and-migrants/>

² <https://www.serco.com/uk/sector-expertise/immigration/asylum-accommodation-support-services>

Hotel 3	140	Men
Hotel 4	46	Men
Hotel 5	150	Families

Aim of the visit

We received feedback that asylum seekers placed locally were experiencing problems in accessing health and social care and with their mental health.

There have been reports of a decline in the mental health of the asylum seekers and we wanted to understand the mental health needs and challenges of residents.

The visits aimed to listen to people's experiences of accessing primary care services, mental health support, and their awareness and access to health services. These visits were not intended to provide an in-depth analysis of the situation but to gain people's insight into the pressing issues and common themes.

The visit teams consisted of staff leads from Healthwatch Leicester and Healthwatch Leicestershire, Voluntary Action LeicesterShire and the Neighbourhood Mental Health Leads from Leicestershire Partnership NHS Trust (LPT).

Limitations

Our remit is to capture patient and public voices. One limitation was the language barrier. We did not have access to translators and relied on the people at the hotels to translate information as well as using the technology available. We were aware that having other residents translate for people could mean that some responses could be open to misrepresentation.

We also provided posters with information in other languages, however, we could not provide this in all of the languages spoken.

Only a small proportion of people engaged on the day and we were advised that some people preferred to stay in their rooms than be in the communal areas.

Staff

As well as engaging with the hotel residents, we wanted to speak with the housing officers to get a better insight into each facility and the challenges faced by their residents. The staff are tasked with resolving housing issues, support in arranging medical appointments and transport to them, provision of well-being activities (such as books, board games, etc.), and any other concerns such as interpersonal disputes between residents.

We also spoke to some of the hotel staff who provide the food and drinks, security, grounds keeping and general care of the shared areas of the facilities.

Key findings

Language barriers

Across all of the hotels residents spoke languages including:

Pashto	Urdu	Kumari
Kurdish	Vietnamese	British/ American sign language
Arabic	Tamil	Panjabi, Punjabi
Tigrinya	Hindi	Albanian
Amharic	Persian (Farsi)	Dari
French	Arabic and Sudanese	Turkish
	Arabic	

We found that many of the residents were unable to communicate in English. English for speakers of other languages (ESOL) lessons are being provided in some of the hotels but not all. The language barrier made it more difficult for people to book their appointments, particularly over the telephone.

For all health needs, there needs to be clear and accessible information given to people on arrival at the hotels and local information available within the hotels. This also needs to be shared with hotel staff so they can provide support to people.

Mental health

Mental health was a recurring theme amongst all residents.

Prolonged stays in hotels are having an adverse effect on people's physical and mental health. None of the residents that we spoke to knew when their application would be processed.

The majority of residents told us that their mental health had deteriorated since they had been in the hotels and there were increased feelings of isolation.

Pathways to mental health support need exploring. People need to have access to one-to-one counselling and group therapies. There needs to be support for different groups of people with differing mental health needs and there needs to be access to local support services.

We noted that there was a lack of meaningful activities available to residents. Residents wanted gym access, activity classes, fitness classes and social activities to support their mental health.

Access to dentists

Access to dental care is extremely difficult for asylum seekers. Staff told us that the emergency dental line is used for everyone as most people are declined when trying to register with a dentist directly.

People shared that they are primarily using emergency lines and hoping they can access an appointment somewhere.

Across all our visits, it was evident that people found it difficult to access a dentist. We ensured that we gave appropriate signposting advice and provided the staff with up-to-date information.

Access to GP Practices

The majority of people are registered at a GP practice. However, people did not necessarily understand the process for making appointments.

Appointments are often missed due to transport issues. Where GP services are being provided at the hotels, the appointments are oversubscribed.

People need better information on managing their health conditions and where they can seek further advice and information including local pharmacies.

People told us they were often prescribed medication from the GP for their mental health. However, there were additional needs not being met, including one-to-one and group counselling sessions.

Activities for residents

The location of some of the hotels was affecting the mental health of residents. Those in the most rural locations cannot easily access support services.

Although the hotels provide transport, this is often at set times. At some of the hotels, people are unable to safely walk to the local town due to the lack of infrastructure i.e. no pathways.

There is a need for literature in a variety of languages, sports activities, ESOL classes, family activities and women's activities.

The men in particular expressed having the opportunity to join in with local sports teams.

Hotel visits

Hotel 1

Thursday 6 July 2023

10 am – 1 pm

Residents spoke to: 15 people


Key Themes: Dental appointments, Mental Health and GP appointments.

Accessing dental appointments

All of the residents that we spoke to were struggling to access dental services. People were unable to access an appointment at a local dental practice and were signposted to contact NHS 111 or the emergency dental service.

Some of the people found this difficult due to language barriers and they were unable to understand the process. One person said, "I am in terrible pain with my teeth. I did not know you could ring the services at the weekend. I waited until Monday to call to try to get to a dentist."

The residents told us that they are struggling and they do not have help when calling the services themselves. People said:



“Dentist, very bad. Need it, I fill in HC1 form, I sent it but no answer. My husband in pain, been two months, he needs emergency.”

“Dentist, need to go dentist, they need to see, not registered. The doctor said they would book an appointment but did not.”

“NHS 111, not good, we ring to get support, they give me a number to call which I find difficult. Dentist really hard to find.”



One person told us that his sister who is 16 years old, needs to see an orthodontist. She has braces on her teeth and needs to have these removed. She has not seen a dentist for over a year.

Many individuals including children need dentist appointments. Information on how to access these services is not being made clear. Some of the children and adults are living with tooth pain because they feel that they have no choice.

One person said, “When calling dentist for appointment for my children, they always say no appointment.”

Accessing GP appointments

People told us that it was difficult to get appointments for themselves and their children.

People are struggling to communicate with their GP Practice over the telephone due to language barriers.

One person said, “I feel that I have been passed on to services but have not received help. My doctor was not very helpful”.

People shared that they feel that they are being treated differently because they are asylum seekers.

We spoke with two pregnant women who were unable to eat the food provided by the hotel. They were advised to get a letter from the GP. They told us that the GP contacted the hotel staff and they said not to approve a letter. They cannot understand why this is the case.

One woman is diabetic and she told us that the food is impacting her baby's health because she is not eating as much as she should do while she is pregnant.

We spoke to the staff about the food and we were told that the food provided is to meet everyone's needs. Food is provided by the hotel e.g. hot breakfast, snack, lunch, dinner and drinks throughout the day.

Pregnant mothers told us that they are being asked to purchase their vitamin supplements rather than being given them on prescription. People said:



"My son has been to the doctor. My son has a stutter, (it has) been 5 months, and a letter was given to my room saying not my turn, have to make an appointment with a speech therapist. I called but speak little English, not given an appointment."

"The GP is not listening. My child had a fever for a few days, I was told to ring emergency. They came last night and said why not go to GP. I said why I called you, is because GP does not listen. It is really bad."

"I went to the doctor for vaccination. I asked for appointment and waited 6 months for appointment, I had no check-up."



We asked people what services work well:

- "Doctor was good."
- "50/50 – sometimes work well, sometimes not work well."
- "Doctor and hospital is good."
- "For baby it is good, for me not so good."
- "Doctor was good and helpful, and gave medicine. Also, diabetic, doctor was helpful."

Mental Health

Many people that we spoke to are living with mental health disorders including panic attacks, anxiety and Post-Traumatic Stress Disorder (PTSD). We did not speak to anyone receiving support for their PTSD.

We were told that staff members could enter rooms unannounced and people had no privacy. This was having an impact on women's mental health in particular. The lone women that we spoke to expressed that they were struggling with their mental health.

Language is the biggest barrier to communicating with services because some of the people cannot speak English to express their needs or feelings, they are dependent on other people at the hotel who can speak English. A young girl was translating for older people at the hotel.

People were desperate for help and support. We were inundated with requests for clear information and help with completing forms.

Personal stories



Aarna³ has been living at the hotel for 8 months. Aarna is unable to sleep at night and has been prescribed sleeping tablets and anti-depressants by the doctor. Aarna has trauma and would like one-to-one counselling but has not been given any information. Due to language barriers, Aarna communicates better face-to-face and finds it difficult to have telephone appointments.



³ Names have been changed

Additional findings

School admissions

Parents told us that their children still have not got confirmed school places. Older children are not able to go to school. No games or activities were seen to be available for the children on the day of our visit.

Parents were concerned that the children's education had been hugely disrupted. All the children missed their friends and could not understand why they could not go to school.

Personal stories



Badah has been unable to get school places for her children since moving to the hotel. She has been contacting the council regarding school admissions but has been given no information. Badah said that the children desperately want to go to school and do not understand why they cannot go. This is causing immense stress and anxiety. The children wake up every day hoping to go to school and get upset when they cannot go.



Transport

The hotel is in a rural location and approximately a 3-mile walk into the town centre. There is no footpath and people do not feel safe to walk. Transport to access services is therefore an issue. We noted that there are a limited number of bicycles available for adults. Free events were happening in the town that Sunday – but no transport was available to residents on that day.

One person said, "It is difficult at the hotel as I have two children and can't go out. I only go out when I have an appointment. There is no park here, children can't go out."

ESOL classes

We were told that an English teacher was providing ESOL classes, however, they returned to their studies so one class a week is being delivered by a resident. More resources are required for teaching the adults and children i.e. flash cards, paper and stationery resources.

People told us that they do not know about any social activities that they can attend free of charge in the community.

Internet access

The internet Wi-Fi in the hotel was sporadic which made it difficult to look up services and telephone numbers.

Provider response

All of the operational staff have confirmed that prior to entering any known occupied room, the standard three knock policy is adhered to. The concern was fed back to the team as a reminder based on the experience of an occupant.

Housing officers have access to the translation service 'Big Word' where needed. Staff may try to converse or encourage adults to try to have dialogue in English to promote education and use of the language, but where not possible or there is a topic of a sensitive or urgent nature, a translator is used.

Serco submits school applications through the government portal within the first week of arrival for school placement. We work closely with the council to understand placement issues, we do however acknowledge that there has been a prolonged waiting period for some.

Current activities at the hotel are:

- We are in dialogue about a dads group being offered via Home-Start Horizons
- We have knitting sessions biweekly with mothers delivered by a local church member
- Stay and play sessions weekly by the local authority
- ESOL class 1x per week

Hotel 2

Thursday 13 July 2023

11 am – 1 pm

Residents spoke to: 20 males

Key Themes: GPs, Mental Health and access to services.

Access to primary care services

The majority of residents are registered with a GP practice.

The residents at the hotel had been unable to access the local GP practice. This is because of insufficient capacity as the GP practice has been accommodating residents of a nearby village due to a fire at their GP practice. A Medical Centre in Nottingham provides GP services for residents.

Transport to attend GP appointments is provided. However, due to the distance, this has led to some missed appointments. There is now a weekly GP clinic at the hotel, however, the appointments get booked up fast.

Four men shared that they have recently been to the GP and their experiences were not good as they felt that they did not get the treatment they needed.

One person shared that a GP told him that our tax money is paying for his living cost and advised him to keep taking painkillers for his pain but he told us that this is not helping him.

One person shared that he saw a doctor who prescribed paracetamol for his pain. He still had pain so returned to see the doctor. The second doctor prescribed exercises. He is still experiencing severe pain and feels that he needs an x-ray. He felt that the GP had treated him badly as he was an asylum seeker (even though the GP told him he was an asylum seeker himself at one time).

One person has been in the hotel for 4 months. He has pains and injuries on his body but is unable to get a doctor's appointment. He is concerned about communicating with the doctor. He said, "Will the doctor be able to speak my language? I struggle to communicate to be seen."

One person shared that they have multiple health conditions and feels well-supported by his doctor and the staff team. He needed urgent medical attention and the staff was able to get him an ambulance and he had great treatment at the hospital. He said, "I'm very happy with the help given."

Dental appointments

Everyone we spoke to had difficulty accessing a dentist. Many residents spoke about their dental issues as well as the process and access to dentists.

We spoke to the staff who told us that they will support the residents in obtaining an emergency dental appointment if needed.

One person told us, "I have constant toothache. I have tried to get a dentist but there are no appointments."

Lack of advice and support

Several people told us they were waiting for their HC2 certificates⁴ to be processed. Without the certificate, they were unable to access some services without incurring a charge.

Eye tests

One person shared that they had an appointment with a local optician. They were then told that the optician did not accept HC2 certificates for free eye tests and that they would have to pay a fee. The person was confused by this and has not tried another optician due to their experience.

Language barriers

People are finding it difficult to express their health issues and concerns with professionals fully because they cannot speak English. We were told that English lessons are provided three times a week for residents.

⁴ <https://www.nhs.uk/nhs-services/help-with-health-costs/nhs-low-income-scheme-lis/>

People told us that getting a solicitor who can effectively communicate is difficult. One person said, "To access social services, you need a solicitor this can be difficult for people that are 17 and 18 years old."

The staff also highlighted that accessing solicitors has been difficult for residents due to language barriers which causes delays and anxiety for people.

Mental Health

The men that we spoke to were struggling with their mental health. Some people were concerned for family members who were in their home countries or other hotels.

We were told that mental health support is provided every Wednesday. People shared that they would like one-to-one counselling rather than group sessions.

The staff advised that the trauma experienced by many of the residents is such that they are reluctant to speak about it openly – at least not in detail – and that one-to-one counselling is likely the best way to support people.

We noted that there were limited reading materials, especially in other languages. One person told us that he is lonely as there are no other residents whom he can engage with as no one speaks the same language.

There were leaflets available to support services available, however, we did not see people engaging with the leaflets.

The staff highlighted that a common theme for most residents is their love of football. Local volunteers organise community matches in the community. This provides an opportunity to support their mental health and general well-being.

Provider response

Information is available for national mental health and asylum seeker specific mental health support services, both verbally and in writing. The Tomorrow Project had also visited in July 2023 to conduct an engagement session, though the uptake was minimal.

Hotel 3

Thursday 27 July 2023

11 am – 1 pm

Residents spoke to: 10 males

Key Themes: Language barriers, transport and access to services.

Language barriers

We tried to arrange a language line before our visit but did not receive a response in time. We communicated with residents using Google Translate and with the help of other residents and staff where possible.

We were told that staff are unable to take residents to appointments. People told us that optician and dental appointments are particularly challenging. It is often difficult for staff and professionals to explain to residents how long waits can be for some services. We were told that one person needs an Arabic sign language interpreter and this is not made available for appointments.

One person had expressed they had tooth pain and needed an appointment with the dentist, they had told office staff but no luck. However, upon checking with the office staff, we were told this person had an appointment booked for the next day. This further highlighted the need for clear communication among residents.

We were told that a deaf resident has been traumatised through abuse during his refuge-seeking journey. This has left him aggressive to people of certain ethnicities and religions that he perceives represent the abuse he suffered but also presents him with additional difficulty in accessing medical and mental health care.

Another challenge that is made worse due to language barriers is apprehension and lack of understanding from the local population which raises concerns when residents of the hotel go out to local parks or on walks.

Transport

Residents receive approximately £8 a week to spend. This is also to pay for any over-the-counter medications such as paracetamol and ibuprofen as these cannot be provided.

Some people told us that they do use public transport to travel and reported to have visited larger cities regularly. In general, the residents are mostly restricted to the hotels and the areas around them unless transport is organised by the hotel.

Hotel residents have access to bikes although this still restricts access to local villages. The GP practice they are registered to is approximately a 40-minute walk from the hotel on roadside public paths. It is difficult for residents living here to access facilities outside of the hotel due to the rural location.

Mental Health

The staff told us they could see a decline in some of the men and signs of poor mental health.

Staff who were empathetic to the circumstances of the residents also highlighted the extreme trauma evident in the behaviour of some residents. This was particularly poignant as a mental health crisis team was on the premises to see one of the residents on the day of our visit.

One person told us that they could not sleep due to their trauma. They said, "I have accessed the hospital services, they were great in helping and gave me medication which helped with sleeping. There is no one here who speaks Tamil. I have family living in London so will be going there."

Hotel 4

Wednesday 9 August 2023

10 am – 1 pm

Residents spoke to: 20 males

Key Themes: Dentist appointments, Mental Health and GP appointments.

Access to dental appointments

Everyone we spoke to had struggled to obtain a dental appointment. The residents were unsure of the process of making an appointment with the dentist. Many did not understand the difference between calling a dental practice and calling NHS 111.

The residents struggle with communicating their needs when ringing services due to language barriers.

One person said, “I have problems with my tooth and I have rang NHS 111 but I have been given no help with my tooth pain.”

Access to doctors

There was a lack of understanding from the residents about the process of registering with a doctor, not all were sure of whether they were or were not registered with a GP practice.

Most of the men we spoke to told us that they were registered with The Assist Practice, a Leicester city centre-based practice that supports refugees and asylum seekers but were having lengthy waits to speak to staff and were not receiving calls back or referrals to services. People said:

“The doctor is no good. Tried to call and it took one hour for the phone to be answered. I was told I would get a call back the next day. I did not receive a call. I tried again, but could not get through.”

“Every month I have problems as my prescription is not dispensed. I have to keep going to the doctors and pharmacy to get this sorted. This causes me great stress as I need my medication.”



Personal stories



Kamran shared that he had spoken to his doctor about an incident with a suicide bomber in his home country which resulted in bleeding from his ear. He now has worsening hearing problems in this ear. His doctor told him that he would make a referral for this to be assessed at the hospital. One year later he has still not had a letter or heard any more about this issue.



Mental Health

The men expressed concerns about their mental health. Some of the men had been to see their doctor and been offered medication. Others had experience with telephone counselling but did not find this useful and would have preferred face-to-face counselling as there were additional language barriers.

One person said, “I take anti-depressants as I am struggling. I do not have anyone to talk to.”

Additional findings

We were told that there was a 17-year-old living at the hotel. We did not get an opportunity to talk to this person.

One person wanted to donate blood.

Residents expressed that they needed laptops to help them complete training courses and research purposes.

None of the residents raised any concerns with the facilities or food provision. Bicycles were provided to the residents.

Provider response

The 17-year-old male was age-assessed as an adult at the border but claimed to be a minor whilst at the hotel. Referrals are completed by Serco’s safeguarding team to social services where there are concerns about a potential minor in an

adult setting. Should the person be assessed as a minor, Serco's responsibility to accommodate moves to social services as we do not provide accommodation to unaccompanied minors.

Hotel 5

Thursday 10 August 2023

10 am – 1 pm

Residents spoke to: 20 people

Key Themes: Dentist appointments, mental health, nutrition and women's health.

Access to primary care services

The residents are struggling to obtain dental appointments for themselves and their children. There were concerns that children needed to be seen by a dentist but people could not get an appointment with a dentist.

One woman shared that her 8-year-old daughter's gums were bleeding. She shared photos of her bedding as when she wakes in the morning they are always blood stained.

Some of the mothers had told us that they were not able to access dental care for their children because they didn't have a HC1 form and would have to pay to access dental care.

One person said, "My 12-year-old son is crying due to tooth pain and I cannot get any help".

One person told us that they needed emergency dental care. They were told that this was not free and they needed to pay £50. They will not accept the HC2 certificate.

All of the residents we spoke to were registered with a GP Practice.

Dietary needs

One of the emerging themes was the issue with the food being provided. People told us that they were not getting enough to eat, toddlers were not being catered

for, people who were fasting were unable to get food at appropriate times and people with medical conditions were not being catered for.

People told us that cultural considerations have not been taken into account when they are fasting. People told us that they were unable to access food during Ramadan and therefore unable to eat during Iftar.

People told us that if a breakfast, lunch or dinner serving is missed they are denied access to food.

One person said, "Everyone here has lost 5-6kg in weight due to the poor food".

One woman who is managing a thyroid issue with medication needs to eat with her medication but does not have access to foods at the times necessary to allow her to properly manage her condition.

Parents were concerned that their babies and children were underweight and not reaching growth milestones.



There appears to be no access to healthy snacks for children throughout the day at the hotel outside of set meal times. People said:

"If my children are asleep during meal times I cannot wake them for food. I am unable to take food from the canteen for them to eat when they wake up."

"I asked for food for my toddler. I was told that they could eat the food provided. They gave me chips, fish fingers and peas. This is not food for a toddler."

"I am vegan. The food options are limited. I was told I could eat white rice or potatoes. But not both."

"I wanted the vegetarian lunchtime option. As I also eat meat, I was told that I could not have this option and I had to have the meat option. I decided not to eat."



Maternity Care

People said that the midwives are very good and come into the hotel to care for expectant mothers. One expectant mother said that she was having midwife visits,

but it wasn't clear if she had access to pregnancy supplements. Due to language barriers, maternity care provision needs to be clearly understood.

A mother who gave birth to twins since being a resident in the hotel told us that when the twins were born, her body was not producing the milk to breastfeed them for the first few weeks of their lives as she was not getting the nourishment she needed to produce milk.

Women told us that they have support from the health visiting team. However, it can be difficult to communicate due to language barriers. It is unclear how much additional support and advice the women are being given to support them.

Medicine management

Families told us that they have been refused the use of mini fridges within their hotel rooms, even where residents have offered to buy their own. Some residents told us this was to aid them in eating through the night when they are fasting, keeping medicines refrigerated, keeping snacks or food that they buy cool and edible. People said:



"My daughter was prescribed liquid antibiotics for an infection. I needed to keep the medicine in the refrigerator. I was told I could not have one in my rooms, so I kept the medicine on the windowsill outside."

"My husband has recently been diagnosed with Crohn's disease. We have told the staff and they will not provide food specifically for my husband to help him manage his condition. I am no longer eating the food at the hotel. I buy noodles to eat."



Personal stories



Durga has diabetes and high cholesterol. Durga has a letter from the GP to the hotel requesting that the staff support Durga in managing their condition through food provision at the hotel. The letter has been shared with the hotel manager and chefs but no changes have been made. Durga said that the staff believed that the food available was okay and therefore will not make any individual adjustments.



Hotel facilities

All of the people we spoke to expressed concerns about bed bugs in the hotel. Women showed us bites on themselves, their children and also showed photographic evidence⁵ of bugs and bites. Residents told us that not all the families had been moved out of rooms where concerns had been raised.

We spoke with the management on the day, who informed us that more than three weeks ago, they were aware of a problem with bed bugs and the infected rooms had been cleaned with new mattresses and bed bases. The management therefore felt the problem had been resolved but this does not match with what we were told by the residents.

The hotel has two communal areas; the reception and the courtyard. The car park is for public use so cannot be used. We were told that one of the rooms in the hotel is going to be used for ESOL classes. There are two public parks near the hotel.

We noted that there is no social space dedicated to children and babies.

We were told that families can use the reception area for play, but this is the main walkway in the hotel which is used by all residents.

One person told us that they do not have space in their hotel room for her babies to begin to learn to roll or crawl. She had been told by hotel staff to let them roll

⁵ We did not see the date stamps on the photos.

around in the reception foyer on the floor. She does not think this is suitable as the floor is dirty and constantly in use by the residents.

We were told that rooms are cleaned once a week, but if you missed the cleaners knocking on the door then your room would not be cleaned.

Women's Health

Not all of the women at the hotel spoke English. We were able to speak to the women at the hotel as a resident was able to translate for them.

All the women spoke about breaking teeth, losing hair, dizziness, irregular periods, inability to sleep as a result of their diet and the stress of the situation.

The women shared that the sanitary products provided by the hotel are not suitable. They are very thin which is not suitable for all women – as they all have variant needs.

People told us that due to their situation, they are getting psychological and mental health problems.

One woman had very limited English and wanted to show us the antidepressants she had been offered. It was unclear as to whether she had been offered any alternatives to this i.e. talking therapy or counselling. It was equally unclear as to whether she would have been able to fully understand the medication she was taking and its side effects.

A few of the residents had shared that they had letters from their doctor advising that they were to be relocated to a new hotel to protect their health. They told us that this has not been actioned. In particular, one woman has had an operation on her eye which is not improving.

Children

We were told that 90% of the school-aged children have school places. The local Community Centre provided summer activities for the children.

The hotel manager did note to us that some of the children were told that they could not access free school meals as they did not have the right documentation

in place. It is not clear how many children or which were facing this problem. The hotel does provide packed lunches for children.

Another mother also shared that her child will not eat at school, it was unclear as to whether this was because of the food on offer, or because of her emotional state at school, but she has no facilities to make or provide her child with a packed lunch and so her child is not eating throughout the day.

Additional findings

People told us that their clothes are washed once a week. They were reluctant to send their clothes to be washed as their clothes were washed together with their shoes. This had led to their clothes being ruined. Some people are having to wash baby clothes by hand as they do not have access to a washing machine.

Following this visit, we did raise concerns directly with Serco and some of the concerns were actioned straightaway including the concerns with sanitary products.

Safeguarding and environmental health concerns were also raised with the relevant local authorities. The local authorities have conducted visits to investigate the concerns reported by residents.

Provider response

On arrival to the hotel, and throughout the duration of their stay, the housing officers take any information in relation to dietary, cultural, medical or allergies. This detail is passed on to the catering team and requests are submitted for the necessary adaptations to be made. Where this information is shared, the needs of the residents are met. If for any reason the catering company are unable to meet their needs, Serco holds a duty of care to relocate them to an alternative accommodation where the food provision can meet the health or cultural needs of the individual. Based on numerous investigations made following complaints at the accommodation, there has been no evidence to suggest that these needs are not being catered to.

Serco also work closely with the Integrated Care Board who are in regular contact with local GPs. There has been no medical evidence to suggest that people's health has deteriorated, nor has there been any concerns raised that children's growth has been impacted by the food made available at the accommodation.

Snack bags are provided to children daily with 24/7 access to fruits upon request.

Separate meal plans are developed specifically for children and feedback is taken directly by the catering manager in collaboration with residents.

Vegan, Vegetarian and Meat options are available at all meals.

Personalised meal plans are provided by the catering team.

Where families evidence medication that requires a mini-fridge, Serco provide them with one. If they do not provide evidence, a fridge will not be provided due to health and safety concerns caused by composing foods causing infestation risks.

Environmental Health attended the accommodation following this inspection and checked numerous rooms that had been reported. No evidence of bed bugs were found following treatment by pest control.

Residents can access bedding and towels at any time throughout the week, as well as a Hoover from the office. Bathrooms are cleaned weekly by the hotel and a log sheet is kept to ensure all rooms are completed in a 7 day window.

Residents need to report their needs to the housing officer to ensure that the relevant products including sanitary products are purchased. Should residents feel as though these needs are not being met, all occupants are aware of the complaints and request for assistance procedure through Migrant Help.

Recommendations

The recommendations relate to what we have heard during our visits. In discussions with service providers and local authorities, it is clear there is a wider context that many are acutely aware of, particularly the impact national policy can have on local areas.

1. Better and more informed communication of how our health systems and other available services work. Consider regular information sessions from health care service providers to provide up-to-date information on local services. Consider the introduction of mobile community-based services, including those with health information, to regularly visit the hotels.
2. The local authorities to understand to what extent asylum seekers' needs could be met by involving local voluntary sector organisations. Asylum seekers are to be made aware of local opportunities and encouraged to get involved with the local community.
3. That all residents are provided with an information pack explaining what local support services are available and where they are located. Explore the use of phone apps such as Joy Marketplace to provide relevant local information.
4. Voluntary sector organisations are invited to join collaborative discussions about how they could potentially extend services and activities to support the needs of asylum seekers.
5. There is a need for wider use of interpreting services with those trained in medical and social care areas. Ensure that the residents who need translation services for appointments are aware that interpreting services are available.
6. Hotel staff to use language translation services to support residents in contacting health services, particularly if residents are struggling with follow-up appointments or accessing hospital services.

7. Ensure all accommodation is decent and clean. Ensure accommodation meets required standards by national guidelines on cleanliness, being safe and free from hazards and equipped with reasonably modern facilities.
8. Ensure that the health needs of pregnant women and those with young children are being met. Ensure that people are aware of local maternity groups and support available.
9. Consideration is given to providing culturally appropriate food choices and having food available during religious holidays.
10. Ensure that snacks are available for children throughout the day and food for toddlers is available. Ensure that families who need a fridge have access when needed.
11. That effective complaint and safeguarding mechanisms and processes are put into place for residents' safety. Ensure residents can raise concerns without fear of repercussion.
12. Listen to the experiences of women. Explore the options for having female-only and family-only accommodation. Lone women are vulnerable in all current settings.
13. Joint approach from the local authorities and the Voluntary and Community Sector to assist in providing support services at the hotels for residents, including ESOL lessons and culturally appropriate mental health support services. Involve Leicestershire Partnership NHS Trust in exploring how this can be implemented.
14. Work with the local authorities to explore options for providing ongoing access to leisure centres and gyms for all residents to help people with their physical and mental health.

15. Consider the transport options for residents in rural hotels to enable people to travel easily into the towns. Explore providing more bicycles for all residents to use.
16. Explore options for using community spaces in the areas surrounding the hotels for organised joint activities.
17. Ensure that people are aware of local volunteering opportunities that are available to help people improve their English and develop skills and knowledge.

Next steps

We will be sharing our findings with the relevant organisations, the local authorities and partner agencies.

We will continue to reach out and listen to the views of asylum seekers and support the ongoing multiagency approach to providing service and facilities for asylum seekers in Leicestershire. Working together to improve the experiences of all people accessing health and care services in Leicestershire.



Healthwatch Leicestershire

9 Newarke Street
Leicester
LE1 5SN

www.healthwatchll.com

0116 257 4999

enquiries@healthwatchll.com

Social media: @HealthwatchLeic