

GATWICK IMB 2024 - ANNUAL REPORT – ACTION PLAN

Ref	Recommendation	Accepted / Partially Accepted / Not Accepted	Comments	Progress Ongoing or completed
TO THE MINISTER				
1.	Introduce a time limit for immigration detention (repeated from IMB annual reports since 2018).	Not Accepted	<p>There are currently no plans to introduce a time limit for immigration detention.</p> <p>A time limit on immigration detention would significantly impair our ability to remove those who have breached our immigration laws and refused to leave the UK voluntarily. It is likely to encourage and reward abuse, allowing those who wish to guarantee their release to frustrate the removal process until the time limit is reached.</p> <p>It would encourage late and opportunistic claims to be made simply to push a person over the time limit, regardless of the circumstances of their case. This would undermine our ability to maintain effective immigration control and potentially place the public at higher risk, in particular through the release of Foreign National Offenders (FNOs) into the community.</p> <p>The Home Office will seek to minimise detention times to ensure the timely return of those who have failed their claims or for FNOs who are set to be deported.</p> <p>The law does not permit individuals to be detained indefinitely. Our policies make clear that for detention to be lawful, that detention should be reasonable and for a specific statutory purpose, such as for examination or removal.</p>	N/A
TO THE HOME OFFICE IMMIGRATION ENFORCEMENT				
2.	Review how key mechanisms intended to safeguard the detained men operate together to ensure that they provide effective outcomes: Detention Gatekeeper, healthcare arrival screening, Rule 34 assessments, Rule 35 processes, assessment, care and teamwork in detention plans (ACDT, used to monitor detained people who are considered at risk of self-harm), ACDT and vulnerable adult care plan (VACP) processes, and Adults at Risk policies and process.	Partially Accepted	<p>It is accepted that improvements to certain mechanisms regarding safeguarding of those with vulnerabilities will be considered.</p> <p>The review into changes to both Detention Centre Rule 34 and 35, and the Adults at Risk in Immigration Detention policy has now been completed and advice and recommendations have been provided to Ministers.</p> <p>The Home Office will then be able to commence the process of implementing any approved reforms, which will take between 6-9 months to implement.</p> <p>Progress on the training and quality of decisions is already underway.</p> <p>The role of the Detention Gatekeeper (DGK) is to consistently apply the Detention: General Instructions, and Adults at Risk (AaR) in immigration detention policy so that detention only takes place where there is a realistic prospect of return within a reasonable timescale: https://www.gov.uk/government/publications/adults-at-risk-in-immigration-detention</p> <p>Where vulnerabilities are identified, the presumption of liberty is strengthened for that individual, and the appropriateness of detention is balanced against any immigration control and public-protection considerations on a case-by-case basis.</p> <p>The Adults at Risk policy does not exempt vulnerable people from the possibility of detention, however vulnerable individuals will only be detained under immigration powers where those immigration control considerations or public-protection factors outweigh any risk factors in their case.</p> <p>In addition, mental vulnerability and immigration detention non-clinical guidance was published in July 2020 (reissued July 2023). This guidance looks to ensure that appropriate support is offered to: those who lack decision making capacity, those with disability arising from mental impairment and those who have a mental health condition; and that, for those with a disability, adjustments are made to support the individual whilst in immigration detention.</p> <p>All individuals have ready access to healthcare throughout their detention and can make an appointment with the healthcare team at any point - ensuring access to medical professionals and levels of primary care in line with that available in the community. There are also established procedures in place in every IRC to manage vulnerable individuals including those with mental health concerns, with formal risk assessments undertaken on initial detention and additional systems for raising concerns at any subsequent point</p>	Ongoing

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			At Gatwick Serco operate both Assessment Care in Detention and Teamwork, and Vulnerable Adult Care Plan processes across Gatwick to support those vulnerable residents within our care. Residents are supported by Multi-Disciplinary Team meetings and the information of who is on these documents is shared with stakeholders to ensure appropriate actions can be taken by all to ensure key mechanisms operate together.	
3.	Operate with a presumption of release in cases of vulnerability, considering not just whether vulnerabilities can be accommodated in detention, but also at what cost to the detained man.	Not Accepted	<p>Detention plays a key role in maintaining effective immigration control and securing the UK's borders, particularly in connection with the removal of people who have no right to remain in the UK but who refuse to leave voluntarily.</p> <p>There is an existing presumption in immigration policy that a person will not be detained. The Home Office recognises that some groups of people can be at particular risk of harm in immigration detention. This is the basis of the Adults at Risk in Immigration Detention policy.</p> <p>In accordance with the policy, individuals considered to be vulnerable, including those suffering from serious physical and mental health conditions, are detained only when the vulnerability considerations in their case are outweighed by the immigration considerations.</p> <p>The Home Office takes the welfare and safety of people in its care very seriously and we are committed to ensuring the proper protection and treatment of vulnerable people in detention.</p> <p>The Home Office is clear that decisions to detain, and subsequent decisions to maintain detention or release must be well-made, with systematic safeguards and support for the vulnerable and that Detention should be for the shortest period necessary.</p>	N/A
4.	<p>Ensure that suitable training and support is provided so that professional interpretation services are used effectively to ensure communication with detained men is clear and transparent.</p> <p>Ensure that a translation into their own language is provided alongside all documents.</p>	Partially Accepted	<p>It is accepted that suitable training and support be provided to those in detention.</p> <p>It is not accepted that all documents will be provided in a resident's own language.</p> <p>Detention Services Order (DSO) 2/2022 Interpretation Services sets out the provisions, including interpretation services and translation devices, available for individuals held in immigration detention and the circumstances in which these should be used.</p> <p>The DSO explains that electronic translation devices should be viewed as an additional support tool and should not replace in-person or telephone interpretation services, which must continue to be used for all essential interactions where accuracy is of significant importance. This includes DET inductions, service of immigration paperwork and medical appointments.</p> <p>At Gatwick specifically, training has been provided to Serco operational staff on use of translation via "toolbox talks". These provide guidance on when to use translation and the varying options available to improve communication with residents and provide appropriate information.</p> <p>Local documents, including house rules, have been translated into various languages and these are provided to residents upon their entry into Gatwick.</p> <p>In line with DSO 02/2022 Serco use translation tablets for some informal conversations. These can be used as a last resort if other services are unavailable and there are checks in place to ensure these tablets are compliant with the DSO.</p> <p>If a resident requires assistance with translation, officers will use Big Word or in specific circumstances ask for the assistance of an officer who can speak the same language as the resident.</p>	Ongoing
5.	Reclassify welfare officer roles as 'red roles' to maintain staffing levels in this important function.	Accepted	Several Welfare roles have been reclassified as "red roles", supported by additional Welfare posts designated as "green roles".	Complete

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			Recruitment in Welfare has taken place during both 2024 and 2025 with the majority of the increased Welfare roles now filled. This means that it is now commonplace for all welfare roles on the daily detail to be filled, with cross deployment rarely required.	
6.	Revise lock-in times to provide the detained men more association time.	Not Accepted	<p>The implementation of night state will be dependent on the physical layout of each centre.</p> <p>Published Home Office guidance, DSO 4/2018 Management and security of night state outlines the standards and general principles of how the night state should be operated across the estate to ensure a consistent approach is taken.</p> <p>Gatwick arrangements are in accordance with this DSO and have been agreed by the Home Office and assessed as balancing the need to maintain safety and security with the dignity and welfare of residents.</p>	N/A
7.	Eliminate unnecessary delays as far as possible in immigration case decision-making and travel booking and work with the Probation Service to improve timeliness in bail accommodation approval.	Accepted	<p>Case owners such as National Returns and Progression Command (NRPC) and Foreign National Offenders Removal Command (FNORC), conduct regular reviews to ensure that detention remains lawful, appropriate and proportionate.</p> <p>Case Progression Panels (CPP) with independent panel members provide additional assurance and challenge on the progress of cases of individuals in detention, reinforcing the consideration of removability, vulnerability and risk factors in decisions to maintain detention.</p> <p>Case decisions are taken as appropriate considering all factors available.</p> <p>A pilot is underway between the Home Office and Ministry of Justice with regards to accessing bail accommodation for those released on probation and is due to end in April 2026.</p>	Ongoing
8.	Conduct an audit to identify how it is possible that men deemed to lack legal capacity have been asked to sign immigration papers in detention and why men are not receiving their monthly report or not receiving it on time.	Not Accepted	<p>Although noted in this report it is not considered that at Gatwick residents were asked to sign immigration papers without the legal capacity to do so.</p> <p>This issue was raised in 2025 by the IMB National Chair but did not relate to Gatwick IRCs. The wider issues were addressed separately by the Home Office in response to the IMB National Chair explaining that revised caseworking processes are in place regarding those held in Secure Mental Facilities.</p> <p>Regarding monthly reviews these are completed (in line with the Detention General Instructions) and served to residents accordingly, with all residents seen every 28 days as a minimum.</p>	N/A
TO THE DIRECTOR/CENTRE MANAGER				
9.	Ensure that professional interpretation is used during the reception process, to ensure that detained men fully understand what they are being told and are able to make properly informed commitments (such as the IT use policy).	Accepted	<p>As set out in DSO 06/2013 - Reception and induction guidance Serco must conduct a basic assessment of the individual's proficiency in spoken English during the reception process. This assessment should take place through a short conversation with the individual, using "open" questions.</p> <p>Staff at Gatwick are fully aware of the processes surrounding the use of translation in the reception area (as explained at recommendation 4 above) and this is documented on local IT systems and is in accordance with DSO 2/2022 interpretation services and use of translation devices.</p> <p>Translation tablets are also used on occasion to ensure that information is provided appropriately to residents upon entry to Gatwick.</p>	Ongoing
10.	Establish suitable mechanisms with relevant other parties to ensure that information regarding men's medical conditions/medication, vulnerabilities or security risks arrives with them or is shared in a timely way.	Accepted	<p>As noted earlier in the response to recommendation 2, proposals to change processes regarding Adults at Risk and DC Rule 35 are underway, with the IMB being provided the opportunity to comment on these as part of external engagement.</p> <p>Case owners receive notifications from Healthcare or Serco of any changes to an individual's medical condition or mental wellbeing and have processes in place that address this. These processes include, where appropriate, links with the appropriate FNO RC Immigration Prison Team.</p>	Ongoing

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			<p>The mechanism for healthcare to ensure available information regarding men's medical conditions/medication, vulnerabilities and security risks arrives with them is via the Person Escort Record (PER). Where additional information is required, healthcare will contact the sending establishment.</p> <p>In addition Multi-Disciplinary team (MDT) meetings are held with all relevant parties to ensure the appropriate actions are taken on individuals of particular concern.</p> <p>Should any change in circumstances be noted by the casework team that leads to a change in AaR level they will inform the IRC.</p>	
11.	Provide appropriate training and support to ensure effective use by officers of the Monitor, Challenge, Support documents/process.	Accepted	<p>The Monitor, Challenge, Support (MCS) process was started in June 2025.</p> <p>Residential managers have already received this training with “upskill” training provided to other staff when the scheme was introduced.</p> <p>MCS also forms part of the yearly staff refresher programme which every Detainee Custody Officer (DCO) undertakes.</p>	Complete
12.	Review (in conjunction with Practice Plus Group) the appropriateness of risk assessments undertaken before undertaking planned uses of force with kitted teams and establish protocols and guidance that adequately balance (physical and mental) risk to staff against (physical and mental) risk to the detained man.	Not Accepted	<p>In 2024 the use of personal protective equipment as part of a planned use of force was managed in line with the MOJ Use of Force Policy framework and the Health and Safety at Work Act 1974.</p> <p>In November 2025 a Use of Force for Adults in Detention DSO was published. This is national guidance that IRC staff including healthcare providers are expected to follow. In addition, PPG staff have their own training package to enable a good understanding of their role in this process.</p> <p>Serco also have a risk assessment process in place and briefing scripts are completed to ensure that all details of the planned removal are captured with healthcare in attendance. Mental and physical wellbeing are discussed during the briefings to staff carrying out the planned interventions.</p>	N/A
13.	Implement the provision of travel plans (in a suitable language and with suitable explanations) to men being released from Gatwick who will be travelling on their own by public transport.	Partially Accepted	<p>Although travel plans are not required as per the DSO 01/2018 Release of Detainees efforts will be made especially with those residents with vulnerabilities as per Annex G on DSO 06/2013 Reception and induction checklist.</p> <p>The need for travel plans to be translated also does not form part of the DSO, however staff will engage with residents and ensure that they are aware of their destination and where they are going for onward travel, including via the use of public transport (in which cases a travel pass will be provided and be explained to the resident.)</p>	Ongoing
14.	Ensure that suitable training and support is provided so that professional interpretation services are used effectively in communications with the detained men, particularly in sensitive contexts such as ACDT, VACP and Rule 40 reviews.	Partially Accepted	<p>As noted in response to recommendations 4 and 9 above, DSO 02/2022 Interpretation Services is adhered to, to improve communication with residents and provide information whilst situated at Gatwick.</p>	Ongoing
15.	Consider adapting the appointments system in Welfare to allow men to access the service soon after they have been at a Home Office surgery meeting, if they wish to do this.	Not Accepted	<p>The Welfare office provides a drop-in service enabling a responsive approach to managing resident needs, including support post interaction with the Home Office as required.</p>	N/A
16.	Create a set of educational and training opportunities that are more appealing to a wider cohort of men and are more effective as preparation for return or release.	Accepted	<p>Engagement with residents is ongoing as part of wing forums and resident consultative meetings which take place to gain the views of residents on all the services provided at the centre, including education and training.</p> <p>A review of the curriculum is offered by the teaching staff with individual learning plans created and utilised, especially with access to the new “iHasco” online courses that are now available to all residents. These include Microsoft Office, Health & Safety and Business/HR courses that can be continued and completed after a resident leaves the centre.</p>	Ongoing

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To NHS ENGLAND				
17.	Review the mechanisms for informing and encouraging detained men to take up the offer of a Rule 34 appointment, as these are a vital safeguard, greatly increasing the likelihood of detection of vulnerabilities.	Accepted	<p>To improve take up of Rule 34 appointments, PPG are reviewing internal processes regarding encouraging residents to take up the offer/attend these appointments.</p> <p>As part of this Practice Plus Group (PPG) will regularly review attendance rates to evidence their compliance.</p>	Ongoing
18.	Provide suitable training and support to ensure that all healthcare staff, including General Practitioners, are clear about their obligations under Detention Centre Rule 35, and understand how these are to operate.	Accepted	<p>All PPG and sub-contracted staff working at Gatwick IRC receive a comprehensive induction package which includes information on their obligations under Detention Centre Rule 35.</p> <p>A training package has been developed by the Home Office Rule 35 Team and is being delivered to medical practitioners and other relevant healthcare staff, including those based in short-term holding facilities. The package focusses on the process for preparing and considering reports and aims to improve the reporting of vulnerabilities.</p> <p>All GPs contracted by PPG to carry out Rule 35 Assessments have received the appropriate Rule 35 assessment training.</p>	Ongoing
19.	Ensure that suitable training and support is provided so that professional interpretation services are used effectively in communications with the detained men, particularly during critical safeguards such as initial screening, and Rule 34 and 35 appointments.	Not Accepted	<p>In addition to the responses provided at recommendations 4, 9 and 14 above referencing DSO 02/2022 Interpretation Services the PPG policy is clear about the use of interpretation services and staff are trained in its use.</p> <p>Use and offer of an interpreter is well documented and there is regular management oversight to ensure compliance by PPG staff.</p>	N/A
20.	Provide more transparency about healthcare complaints and shorter timeframes for response. Provide adequate information to allow the IMB to assess the nature of the complaints and the effectiveness and efficiency of this complaints process.	Not Accepted	<p>In accordance with paragraph 18 of the Detention Services Order (DSO) 03/2015 Handling complaints, complaints relating to healthcare are handled confidentially - due to “medical in confidence” issues - under separate local NHS complaints procedures and different timescales for investigation and response apply (from those relating to non-healthcare complaints).</p> <p>These procedures are designed to ensure that detained individuals can raise concerns about any aspect of NHS-commissioned healthcare services, including the conduct of healthcare staff, delays in treatment, or access to medication, in a manner that is both confidential and independent of the Home Office.</p> <p>Healthcare providers are required to make information about these procedures readily available to detained individuals, including through translated materials and support from interpreters where necessary. Detained individuals can submit complaints directly to the healthcare provider or through the Detention Services Complaints Team, who will ensure that the complaint is passed to the appropriate NHS body for investigation.</p> <p>IRC Compliance and DS Complaints Teams redirect healthcare complaints to the relevant on-site healthcare manager. Details about the complaint will not be retained and only summary details of the number of complaints will be retained. [in accordance with paragraph 22 of the DSO]</p> <p>As per PPG policy the response time for a formal complaint is now 30 days. This policy was changed in June 2024. Healthcare complaints processes, procedures and outcomes have been thoroughly examined by CQC & HMIP inspectorate and deemed to be effective. PPG regularly provide reports on complaints to NHSE Commissioning Teams and stakeholder partners in Local Delivery and Partnership Boards and are always open and transparent with IMB members investigating complaints. In accordance with GDPR legislation and data protection requirements, detailed personal or clinical information cannot be shared externally.</p>	N/A

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			The importance of ensuring that all detained individuals have access to an accessible clearly promoted, independent, and confidential system for raising concerns about healthcare is however noted.	