

Derwentside IMB 2025 - Annual Report – Action Plan

Ref	Recommendation	Accepted / Partially Accepted / Not Accepted	Comments	Progress Ongoing or completed
TO THE MINISTER				
1	Reconsider the suitability of Derwentside as an IRC so that difficult journeys and low numbers of visitors can be improved. (Repeat recommendation).	Not accepted	Derwentside is considered a suitable location for an immigration removal centre (IRC). The immigration removal estate is kept under ongoing review to ensure sufficient resilience and capacity for the men and women it is necessary to detain for the purposes of removal. Derwentside IRC continues to provide safe and secure facilities for the women detained there.	N/A
2.	Review the role of the detention gatekeeper to ensure that it acts as an effective mechanism in preventing the detention of those with significant mental health issues.	Not accepted	The Detention Gatekeeper (DGK) operates as an independent safeguard to ensure that detention is used appropriately and only where justified. Decisions are made in line with the Detention: General Instructions and the Adults at Risk in Immigration Detention policy. Where indicators of vulnerability, including mental health conditions, are identified, these are given careful and explicit consideration. The Adults at Risk framework strengthens the presumption of liberty, requiring caseworkers to balance evidence of vulnerability against immigration control and public protection considerations on a case-by-case basis. The framework does not preclude detention in all cases involving vulnerability. However, individuals with significant mental health issues will only be detained where the available evidence and wider factors justify that decision in line with published policy. A range of safeguards are also in place to support individuals with mental health needs, including: • clear published guidance on mental vulnerability in detention • access to healthcare services throughout detention • formal risk assessments at the point of detention, with ongoing review mechanisms The DGK operates as part of a wider safeguarding system, including initial healthcare screening and Rule 35 processes. These measures operate collectively to identify, assess and respond to vulnerability at multiple stages. The Home Office keeps these arrangements under regular review to ensure they remain effective in identifying and protecting vulnerable individuals and, on that basis, considers the current framework effective.	N/A
3	Consider alternative community-based approaches to detention for women that can have lower impact on women's mental health and thus prevent additional harm.	Not accepted	Current policy already emphasises a case-by-case balance between vulnerability and immigration/public protection factors, rather than a blanket approach. The assessment of whether detention is appropriate initially is made by the DGK and reviewed at regular intervals in line with the Detention General Instructions. Bail, and the associated restrictions attached to each individual, act as the alternative, community-based approach. In terms of detention decisions, women are not treated differently to any other group, unless they are pregnant. Any alternative to detention / community-based options would therefore be applied to all detained persons equally. Where a woman is identified as vulnerable under the Adults at Risk policy, then this vulnerability must be considered and balanced against all known immigration factors when a decision is made to detain or continue detention.	N/A
4	Introduce a time limit for immigration detention to help reduce detained women's anxiety. (Repeat recommendation).	Not accepted	There are currently no plans to introduce a time limit for immigration detention. 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. 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.	N/A

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			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. 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.	
TO THE HOME OFFICE IMMIGRATION ENFORCEMENT				
5.	Continue to work with the escorting contractor, Mitie Care & Custody, to reduce the incidence of night-time moves in and out of Derwentside, including the provision of a vehicle base. (Repeat recommendation).	Not accepted	The Home Office and escorting services provider seek to avoid routine night-time transfers where possible. The escorting service operates 24/7 and covers a wide range of activity, including moves between centres (RSTHFs/IRCs). All proposed moves consider the impact on the care and welfare of the detained individual, which includes the time and length of the journey. Although night moves are to be avoided where possible, moves between centres sometimes must be conducted during the night, depending on other priorities or if they are time-specific priority moves e.g. transferring detained individuals to flight. The location of Derwentside IRC and its proximity to other centres / vehicle bases and core in-country escorting activity does present some logistical challenges when it comes to servicing the centre. These will be alleviated once the planned vehicle base becomes operational. Work on this is due to commence later this year, with expected opening in 2027.	N/A
6.	Reduce the number of moves experienced by detained women around the wider detention estate, and to ensure that all women understand where they are being moved to, and why. (Repeat recommendation).	Not accepted	All proposed transfers consider the impact on the care and welfare of detained individuals, including the timing and length of the move and. Moves are kept to a minimum where possible. Detained estate movements however are required to support transfers from R/STHFs to IRCs, to manage risks or special needs (or a request from a detained individual), to support population management co-ordination or to facilitate a detained individual's case progression. At Derwentside Contracted Service Provider (CSP) inform residents of their destination as part of the discharge process. Escorting staff will also explain the destination and the expected journey time.	N/A
7	Increase community-based services so that more case work decisions can be made at an earlier stage in the detention process.	Not accepted	The Home Office is not fully responsible for all community-based services. The assessment of whether detention is appropriate initially is made by the DGK and reviewed at regular intervals in line with the Detention General Instructions. Bail, and the associated restrictions attached to each individual, act as the alternative, community-based approach.	N/A
8.	Enable women who are foreign national offenders (FNOs) to be deported as soon as they complete their prison sentences by increasing prison-based case work services.	Not accepted	Where appropriate caseworkers work with partners (including prison staff, healthcare and community services) to ensure that key barriers to removal such as documentation, risk assessments, and accommodation or care needs are addressed in advance of release. This approach supports more efficient case progression and reduces the likelihood of extended detention post-sentence, particularly for women with identified vulnerabilities.	N/A
9.	Finalise the installation of the planned wi-fi communications infrastructure as soon as possible in order to improve women's communications outside of Derwentside. (Repeat recommendation).	Accepted	Infrastructure work concluded in early 2026 and contractual amendments are being finalised. It is anticipated that the roll out of smartphones at Derwentside will be concluded by the end of summer 2026.	Ongoing

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10.	Increase the hourly rate for paid work for detained women so as to introduce fairer recognition for the jobs they undertake. (Repeat recommendation).	Not accepted	Paid activity opportunities may be provided under Rule 17 of the Detention Centre Rules 2001. Detention Services Order 1/2013 sets out the process and states that the provision of opportunities should be directly linked to a level of compliance with the service provider and Home Office.	N/A
11.	Raise the detention gatekeeper's threshold for the detention of women with known current or historical mental ill-health. (Repeat recommendation).	Not accepted	The role of the Detention Gatekeeper (DGK) is to consistently apply the Detention: General Instructions, and Adults at Risk in immigration detention policy (https://www.gov.uk/government/publications/adults-at-risk-in-immigration-detention) so that detention only takes place where there is a realistic prospect of return within a reasonable timescale. 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. 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. 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. All individuals have ready access to healthcare throughout their detention period 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. The new 'Assessing Detention for Vulnerable People' policy is expected to replace the existing Adults at Risk policy in November 2026. The new policy does not exempt vulnerable people from detention but aims to strengthen existing safeguards and protections for vulnerable adults. An 'evidence of needs' model will be introduced with an emphasis on identifying and assessing a person's current individual needs and making detention decisions that balance a person's needs against all known immigration factors. The number of evidence risk levels will increase from three to four, to give decision makers greater levels of discretion and to be able to identify those who are most vulnerable and those who have complex needs that must be supported whilst the person is detained.	N/A
12	Finalise the decision on whether Derwentside is to be re-rolled to a male-only detention centre in the near future, to enable a staff-gender balance appropriate for the current female-only population.	Accepted	The decision for Derwentside IRC to remain an all-female centre was relayed to IMB on 18 May 2026. Current staffing comparisons show there are more female Detainee Custody Officers (DCO) than male DCOs and more overall female staff at the centre than male.	Complete
13	Shorten the complaints procedure completion timescale to fit with the majority of women's detention period.	Not accepted	Published guidance already sets clear timescales for complaints handling, and current data shows that complaints at Derwentside are investigated within these timescales in 96% of cases. No concerns have been raised regarding delays or the appropriateness of the existing timeframe. On this basis, the current timescale is considered effective and proportionate, and there is no evidence at present to support shortening it. Any changes to shorten timescales would need to be considered across the wider detained population and estate-wide complaints process. We believe the current timescales are necessary to ensure complaints are thoroughly investigated and that detained individuals receive fair, accurate and informed response to the concerns they raise.	N/A
TO THE DIRECTOR/CENTRE MANAGER				

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14	Continue to develop the current, more personalised, positive and supportive culture at Derwentside.	Accepted	CSP, will continue to strengthen the more personalised, positive and supportive culture at the IRC. This culture has been intentionally developed through a strategic, collaborative partnership between the Home Office, Serco, and partner agencies, supported by independent custodial culture specialists, The Appreciative Partnership. Their ongoing expertise enables the CSP to measure, monitor and continuously improve culture throughout the year. The CSP's approach is structured through the Strategic Culture Plan, which is reviewed and refreshed following each annual Cultural Health check. This process generates a clear cultural health dashboard, identifying targeted improvement actions. Progress against these actions is tracked dynamically on a monthly basis and formally reviewed at the Monthly Operational Review Meeting (MORM), ensuring accountability and sustained momentum. Importantly, this work is underpinned by Section 14.4 of the contract, securing dedicated funding from the CSP to embed and sustain cultural development across the lifetime of the contract, ensuring long-term impact.	Ongoing
15.	Improve the consistency of the quantity and quality of meals served.	Accepted	Food quality and quantity is something the CSP continues to focus on improving. Feedback recorded in the food comment books has shown a reduction in reported issues, alongside an increase in compliments from residents. In addition, the number of formal food-related complaints has decreased, which would also suggest an overall improvement. The matter is also discussed weekly in the RCC with a member of the Senior Management Team from the CSP and the Catering manager present. Over the coming year, the CSP plans to build on this progress by introducing resident tasting sessions as part of a quarterly consultative forum. Ahead of any scheduled menu cycle changes, residents will be invited into the Cultural Kitchen to sample proposed meals. Their feedback will directly inform menu selection, based on popularity, and will also provide an opportunity for residents to share insight into how the CSP can enhance flavours using their own knowledge of the cuisine. The CSP is also exploring - with the Home Office - the introduction of a paid activity role within the kitchen. This initiative is intended to further strengthen relationships between CSP and residents, while also supporting a more professional and engaging kitchen environment.	Ongoing
16.	Increase the day-to-day use of translation tablets for routine interactions with women whose first language is not English. <i>(Repeat recommendation)</i>	Accepted	Detention Services Order 02/2022: interpretation services and use of translation devices CSP continue to provide translation services via handheld tablets and telephone interpretation services. An additional 4 translation tablets are now operational, bringing the total in use to 15. In addition to existing translation processes, CSP have installed several multi-lingual information kiosks covering 21 different languages. The kiosks can be used by residents to order meals, book social visits, order shop items and view information such as account balances and FAQs.	Ongoing
17	Continue to ensure key information is available in a range of languages (including on the electronic kiosk, a self-service computer terminal that allows detained women to manage their daily affairs).	Accepted	Residents currently receive all induction material and the compact in their own language. With regards to the kiosks, some information/elements are already available in languages other than English. As the technology does not allow for menu translation, the CSP will shortly be adding pictures of meal options. The WIFI phones will assist with this understanding as the majority of information from the kiosk will also be on their SMART phones and in their own language.	Ongoing
18	Ensure that catering for women with food allergies is as robust as possible. <i>(Repeat recommendation)</i>	Accepted	The CSP continues to follow industry best practice and local established processes in conjunction with healthcare for identifying and catering for those with food allergies. Once healthcare has learnt of any allergies a resident has as part of their induction, the information is sent to the kitchen and recorded on their allergen board. The Catering Manager meets with any resident with declared food allergies to ensure the menu is understood and appropriate. For those with severe allergies the resident will be provided with a separate menu.	Ongoing

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19	Conduct all reception interviews in a private space, without exception.	Partially Accepted	All residents are already offered the use of a private room during admission - where others are present in the area - to support privacy and confidentiality during the reception process. The CSP recognises that some residents may prefer to remain within sight of others during admission and this preference is accommodated where it is safe and appropriate to do so. Staff will continue to promote the availability of private interview rooms and intervene to use one where appropriate.	Completed
To PRACTICE PLUS GROUP				
20	Continue to develop the current, more personalised, positive and supportive culture at Derwentside.	Accepted	The healthcare team continue to innovate and engage with internal and external stakeholders. Current initiatives include but are not limited to; psychological drop-in sessions, self-help workbooks, sleep support to reduce medical dependence and 'Get Well, Stay Well' which combines physical health with psychological wellbeing. These are well attended and held in the gym. Proposals going forward are for a dental drop-in and a cafe for health promotion.	Ongoing
21	Continue to reduce the waiting times for Rule 35(3) assessments.	Accepted	All R35 assessment appointment waiting times are fluid and can change on a daily basis. Both the Healthcare Provider and the Home Office constantly monitor all clinic wait times and strive to keep these at a minimum. Changes to the AAR policy and Rule 35 process are underway and proposed for later this year. The Home Office sought external comment on the proposed changes, including engagement with the IMB via the IMB Secretariat. Multi-Stakeholder approach to 'did not attend' (DNA) appointments is starting to show results in maintaining minimum wait times.	Ongoing
22	Ensure that the percentage of women released after a GP Rule 35(3) recommendation is comparable with data for women.	Not accepted	Each case will be assessed individually, and release will be dependent on the circumstances of that case.	N/A