Gatwick IMB 2025 - 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. *(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. 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. 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.	N/A
TO THE HOME OFFICE IMMIGRATION ENFORCEMENT				
2.	Review how key mechanisms intended to safeguard detained men operate together to make any necessary changes to ensure that they provide effective outcomes: detention gatekeeper, healthcare arrival screening, Rule 34 assessments, Rule 35 processes, assessment, care in detention and teamwork (ACDT) plans (used to monitor detained people at risk of self-harm), vulnerable adult care plan (VACP) processes, and adults at risk policies and process. *(repeat recommendation)*	Partially Accepted	There are 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 in place for raising concerns at any subsequent point. The Adults at Risk policy was reviewed in 2025 and this year (2026) will see the roll out of the revised policy, Assessing Detention for Vulnerable People (ADVP), which will provide greater clarity and focus on protecting the most vulnerable people in immigration detention. The aims of the new ADVP policy are to establish more efficient and effective safeguarding mechanisms for identifying vulnerable people in immigration detention and ensuring that their needs are met whilst they remain detained. This new policy will come into operation in early 2027. 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 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. From a wider perspective following a Review of the AAR policy, changes are expected to be made in early 2027. Any changes will be supported with a full training package. A revised ACDT DSO was published in February 2026 Assessment Care in Detention and Teamwork ACDT At Gatwick, Serco operate both Assessment Care in Detention and Teamwork, and Vulnerable Adult Care Plan processes to support those vulnerable residents within our care. Residents are supported by Multi-Disciplinary Team meetings and information regarding these documents is shared with relevant stakeholders to ensure appropriate actions can be taken by all to ensure key mechanisms operate together.	Ongoing
3.	Operate with a presumption of release in cases of vulnerability, considering not just whether vulnerabilities can be accommodated in detention but	Not Accepted	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.	N/A

Gatwick IMB 2025 - Annual Report – Action Plan

Ref	Recommendation	Accepted / Partially Accepted / Not Accepted	Comments	Progress Ongoing or completed
	also at what cost to the detained man. *(repeat recommendation)*		There is an existing presumption in immigration policy that a person will not be detained. 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. 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. 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. 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. As noted above, following a review of the AAR policy, changes are expected to be made by March 2027. Any changes will be supported with appropriate training for those involved in the process.	
4.	Ensure that communication with detained men is clear and transparent, including through provision of adequate and appropriate interpretation, and training and support to staff in working with interpreters. Ensure that documents are provided in a language that detained men understand	Partially Accepted	This recommendation is partially accepted as in the early stages of Operation Hillmore it is acknowledged that not all documentation was available in all languages. It is now the case however that a summary of the Notice of Intent is provided to each individual in a language that they understand. They are available in 27 different languages and interpretation services (Big Word) are utilised in all formal DET [Detention Engagement Team] engagements when required. Individuals are also provided with translated leaflets outlining the Hillmore process and what will happen to them if they are returned to France. DSO 02/2022 Interpretation services and use of translation devices was reviewed and re- published in June 2026 Interpretation Services Serco staff have access to interpretation and translation services, including The Big Word and translation devices, with local guidance available on when and how these should be used to support communication with residents.	
5.	Ensure there is a quality assurance system and accountability mechanism for probation services and the detained duty advice scheme, which ensures men have meaningful access to legal support and do not suffer unreasonable delays in the progression of their cases.	Partially Accepted	The Legal Aid Agency (LAA) is responsible for the management of DDAS and ensuring compliance by the contracted legal services providers who deliver advice at DDAS appointments, against their contract terms. Detention Services oversees the operational aspects of delivery and works closely with its IRC contracted service providers and with the LAA to monitor appointment waiting times and provide additional DDAS surgeries if required. All residents are offered a DDAS appointment on arrival and residents may request further appointments if they are not satisfied with the advice they receive. Any concerns regarding providers' compliance with their contractual obligations are investigated by the LAA and, where appropriate, action up to and including termination of a legal provider's authorisation to participate in DDAS surgeries is taken. Please note that the Home Office is not responsible for the work or processes of HM Probation Services.	
6.	Revise lock-in times to provide detained men with more association time. *(Repeat recommendation)*	Not Accepted	The implementation of night state will be dependent on the physical layout of each centre. 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. Arrangements at Gatwick 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.	N/A

Gatwick IMB 2025 - Annual Report – Action Plan

Ref	Recommendation	Accepted / Partially Accepted / Not Accepted	Comments	Progress Ongoing or completed
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. *(Repeat recommendation)*	Partially accepted	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. 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. Case decisions are taken as appropriate considering all factors available. FNORC recently completed an Accommodation Pilot with close input from HMPPS, which identified opportunities to improve the early identification of accommodation barriers and strengthen partnership working. The lessons learned from the pilot are now being taken forward through a dedicated Home Office and HMPPS working group, which will focus on improving information sharing, strengthening governance and oversight, and resolving accommodation related barriers that may delay release. This will support more effective release planning, improve cross-organisational collaboration, and help ensure that appropriate accommodation issues are identified and addressed at the earliest opportunity.	Ongoing
@8	Establish reliable systems to ensure that men receive their monthly reports on time and can raise any issues or rectify errors quickly and easily	Partially Accepted	The Home Office will review current processes in this area to look at improving the current arrangements. Rule 9 of the Detention Centre Rules 2001 sets out the statutory requirement for people to be provided with written reasons for detention at the time of their initial detention and thereafter monthly, and that individuals in an IRC are informed of the outcome of their monthly detention reviews via the service of the IS151F. On receipt of monthly reports individuals can raise any issues with the local DET team who will forward to case owners were appropriate	N/A
TO THE DIRECTOR/CENTRE MANAGER				
9.	Review, in conjunction with Practice Plus Group, the appropriateness of risk assessments carried out prior to planned use of force by kitted teams and establish clear protocols and guidance that appropriately balance the physical and psychological risks to staff and to detained men. *(Repeat recommendation)*	Not Accepted	In November 2025 a Use of Force for Adults in Detention DSO 11/2025 was published Use of Force for Adults in Detention. 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. 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. Both first- and second-line assurance is conducted in this area by the Home Office.	N/A
10.	Record all hospital escorts involving handcuffs as use of force incidents, even where they are presented as consensual.	Not Accepted	Detention Services Order (DSO) 07/2016, *Use of Restraint(s) for Escorted Moves – All Staff* is the primary guidance for IRC staff on conducting risk assessments and managing escorted moves. The DSO is currently being revised following a Detention Services Security Team (DSST) review completed in 2025 and was published in August 2026 DSO 07 2016 Restraints The DSO makes clear that any use of handcuffs/restraints must be considered on a case-by-case basis, with the risk of escape balanced against the individual's welfare, dignity, medical needs, and safety. Risk assessments must also be kept under review if circumstances change. Assurance measures will continue to take place by various Home Office and Contracted Service Provider teams at both a local and wider level.	N/A

Gatwick IMB 2025 - Annual Report – Action Plan

Ref	Recommendation	Accepted / Partially Accepted / Not Accepted	Comments	Progress Ongoing or completed
To NHS England				
11.	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 the detection of vulnerabilities. *(Repeat recommendation)*	Accepted	Revised processes to improve the way in which Rule 34 appointments are managed to encourage greater attendance are underway lead by the Healthcare provider. Discussions are taking place with other stakeholders within the centre around this, and a revised process is expected to be in place by 31 October 2026.	Ongoing
12.	Provide suitable training and support to ensure that all healthcare staff, including GPs, are clear about their obligations under Detention Centre Rule 35, and understand how these are to operate. *(Repeat recommendation)*	Accepted	A training package has been developed by the Home Office Rule 35 Team and is available to, and delivered to, medical practitioners and other relevant healthcare staff, including those based in short-term holding facilities. The package focuses on the process for preparing and considering reports and aims to improve the identification and reporting of vulnerabilities. The training package is also routinely offered to healthcare teams across IRCs and residential STHFs for ad hoc training sessions where required, enabling providers to support both permanent and temporary clinical staff involved in the Rule 35 process. Healthcare providers are responsible for ensuring that clinicians undertaking Rule 35 assessments are appropriately trained and supported to fulfil their responsibilities under Detention Centre Rule 35. Home Office Rule 35 training has been, and continues to be, made available to healthcare staff involved in the Rule 35 process, including GPs undertaking Rule 35 assessments." GPs contracted by PPG to carry out Rule 35 Assessments have received the appropriate Rule 35 assessment training.	Ongoing
13.	Ensure that suitable training and support is provided so that professional interpretation services are used effectively in communications with detained men, particularly during critical safeguards such as initial screening and Rule 34 and 35 appointments. *(Repeat recommendation)*	Accepted	Interpretation DSO 02/2022 was updated in June 2026 DSO 02 2022 Interpretation Services – paragraphs 38-40 specifically refer to arrangements at healthcare screening. PPG policy is clear about the use of interpretation services and staff are trained in its use. Use and offer of an interpreter is well documented and there is regular management oversight to ensure compliance by PPG staff.	Ongoing
14.	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. *(Repeat recommendation)*	Not Accepted	The complaints DSO 03/2015 was updated in June 2026 DSO - 03-2015 Handling complaints - Paragraphs 19-35 provide detailed guidance on the processes that should be followed for healthcare complaints. 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. 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. 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]	N/A

Gatwick IMB 2025 - Annual Report – Action Plan

Ref	Recommendation	Accepted / Partially Accepted / Not Accepted	Comments	Progress Ongoing or completed
			As per PPG policy the response time for a formal complaint is now 30 days. 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. 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.	