

**SERVICE IMPROVEMENT PLAN**

**UNANNOUNCED INSPECTION OF TINSLEY HOUSE IMMIGRATION REMOVAL CENTRE**

**Inspected 3 – 19 APRIL 2018**

Ref	HMCIP Recommendation	Accepted / Partially Accepted / Rejected	Progress	Action Taken / Proposed	Expected Completion Within [6 / 12 / 18 months]
<b>Main Recommendation – To the Home Office and Centre Manager</b>					
5.1	<p>a) The centre should monitor rule 35 reports to ensure they are submitted when necessary.</p> <p>b) Reports should contain sufficient detail to inform a proper assessment of the vulnerability of the detainee.</p> <p>c) Home Office responses should be timely.</p> <p>d) Where evidence of torture is accepted, detention should only be maintained in exceptional circumstances that are documented on file and explained in writing to the detainee, their legal representatives and the doctor. (S36)</p>	Partially Accepted	Completed and ongoing	<p>The Home Office carry out quality assurance to ensure that Rule 35 responses are fully considered and responded to in line with the DSO and Home Office policy.</p> <p>Where evidence of torture is accepted, detention will be considered in line with the Adults at Risk in Immigration Detention (AAR) policy and the decision to maintain detention or release will be reached through the balancing of immigration and public protection factors, with the risk highlighted under the policy. Should further information be required to reach a decision, case work teams will contact the doctor responsible for making the report to ascertain additional details.</p> <p>Once Home Office casework teams receive a rule 35 report they are required to respond within 2 working days of its receipt. This requirement is set out in Detention Services Order (DSO) 09/2016 which was revised and re-issued in July 2018.</p> <p>The detainee and any legal representatives and the reporting doctor will receive the Home Office response to the Rule 35 report.</p> <p>The healthcare provider additionally maintains a log of all Rule 35 reports sent to the Home Office and follows up if responses are not received within 48hours. All response letters are copied to medical records. The healthcare provider has recently undertaken a quality audit of the content of Rule 35 reports to learn lessons and improve quality. Further training for doctors is being arranged.</p> <p>In accordance with the Detention Centre Rules 2001 only a medical practitioner can determine when it is appropriate to make a report under Rule 35.</p>	6 months
<b>Main Recommendation – To the centre manager</b>					
5.2	<p>Security procedures and limitations on detainees' ability to move freely around the centre should remain proportionate to a detainee population. Any restrictions should be focused and based on risks and clear evidence. (S37)</p>	Partially accepted	Ongoing	<p>Any restriction of movement of detainees within IRCs is determined by the physical layout of each centre and an assessment of risk based on the safety and security of detainees and staff considered against the welfare of detainees and the access to facilities and services. The Home Office is developing a Detention Services Order that will establish a uniform policy to regulate how suppliers manage IRCs at night, when most detainees are confined to their rooms or residential areas, including the requirement for local assessments of impact on detainees with protected characteristics. This is expected to undergo consultation shortly.</p>	18 months

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<b>Recommendation – To the Home Office</b>					
<b>Legal rights</b>					
5.3	There should be a time limit on the length of detention. (1.65)	Rejected		<p>Detention is an important part of our immigration system. The Government is aware of the arguments that are made in respect of a time limit on immigration detention. However, as Stephen Shaw has stated in his recent review of the welfare of vulnerable people in immigration detention, the debate on time limits currently rests more on slogans than on evidence. That is why, in order to support a properly informed debate on this issue, the Home Secretary has announced that he has asked his officials to review how time limits work in other countries and how they relate to other protections within their detention system. On the basis of this review, the Home Secretary will further consider the issue of time limits.</p> <p>Any decision to detain, or maintain the detention of an individual, requires there to be a realistic prospect of their removal within a reasonable period of time. Published Home Office policy requires that detention is used sparingly and for the shortest period necessary. Regular reviews of an individual's detention are undertaken to ensure that it remains lawful, and in accordance with the Government's adults at risk in immigration detention policy. Individuals can apply to Immigration Judges at any time for release on bail, and the provisions in Schedule 10 to the Immigration Act 2016 ensure that individuals (other than foreign national offenders) are referred automatically for consideration of bail after four months in detention and thereafter at four monthly intervals. Home Office officials will work with any detainee at any time to end their detention if they decide to leave the UK voluntarily.</p>	
5.4	All casework, including substantive decision making, should be progressed promptly. (1.66)	Accepted	Completed and ongoing	<p>All casework decisions are expected to be made within appropriate timeframes and in accordance with published guidance. Case progression is monitored and mandatory reviews are documented within Detention and Case Progression Reviews and authorised by operational managers. The Detained Casework Assurance and Audit Team have been established to drive consistency and efficiency in the management of detained cases.</p> <p>Case Progression Panels (CPPs) have been in operation since February 2017 ensuring an assessment of all cases where detention has reached 3, 6, 9 and 12 months (and every 3 months thereafter). One purpose of the CPPs is to drive case progression and casework diligence and act as an assurance measure in this regard. The CPP can make case progression recommendations to casework teams to attempt to support the casework team to progress the case promptly and without delay.</p> <p>In addition, Criminal Casework Internal Progression Panels were introduced in 2017, to ensure that all detained criminal cases over 12 months are reviewed by business experts and senior casework managers.</p> <p>In 2018, measures were introduced to increase liaison with prisons to facilitate more removals direct from prisons. This work is ongoing.</p>	6 months

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<b>Daily life</b>					
<b>Detainee consultation, applications and redress</b>					
5.5	Complaints requiring investigation by the professional standards unit should be passed immediately to that department for investigation. (2.19)	Accepted	Completed and Ongoing	Serious misconduct complaints are handled in accordance with the requirements set out in DSO 3/2015 Handling Complaints and are passed to the Central Referral Team for the consideration of the Home Office Professional Standards Unit.	6 months
<b>Leaving the centre</b>					
5.6	A formal system of assistance should be introduced to ensure that detainees are able to reach their final destination safely. (4.21, repeated recommendation 4.29)	Accepted	Ongoing	Home Office published guidance, Detention Services Order (DSO) 06/2013 - Reception, Induction and Discharge Checklist and Supplementary Guidance, details the policy and process to be followed regarding assistance payments to individuals who claim to lack the means to reach their final destination upon removal from the UK. Pre Departure Team (PDT) staff will, during the course of their regular engagement, identify any detainee who requires assistance.  For any detainee being removed from the UK whose needs have not been fully identified prior to leaving the IRC, the escorting provider can issue an amount of money to detainees who claim to hold insufficient funds to reach their final destination. Each case is individually assessed to provide the appropriate level of assistance.	12 months
5.7	Detainees being transferred to other places of detention should be given sufficient notice of the move. (4.22, repeated recommendation 4.28)	Partially Accepted	Completed and ongoing	It is normal practice, subject to consideration of safety and security, that IRCs verbally inform all detainees of their transfer in advance. Detainees also receive a briefing from the escorting staff on collection, which will include details of the destination to which they are being transferred.	6 months
<b>Recommendation – To the Home Office and Escorting Contractor</b>					
<b>Arrival and early days in detention</b>					
5.8	Detainees should never be transported at night except for urgent operational reasons. (1.8)	Rejected		While every effort is made not to schedule moves at night, such moves may take place to meet time-critical operational demands such as early arrivals for flights, hospital appointments and court hearings. All proposed moves consider the impact on the care and welfare of individual detainees. Where moves do take place during the night we try to provide detainees with as much advance notice as possible	

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<b>Recommendations – To the centre manager</b>					
<b>Arrival and early days in detention</b>					
5.9	Reception processes should be prompt and efficient, ensuring that detainees' immediate vulnerabilities, needs and risks are assessed during a private interview. Key information should be conveyed to residential staff and other departments. (1.9)	Partially accepted	Ongoing	A review will be conducted to assess the feasibility of creating a private space for detainee interviews within the physical constraints of the small reception area.  Detainees will be triaged on arrival and those with particular vulnerability indicators will be assessed in private accordingly.  Staff will be reminded of the importance of handing over key information when detainees leave reception.	12 months
<b>Safeguarding</b>					
<b>Safeguarding of vulnerable adults</b>					
5.10	Managers should ensure that centre staff understand and feel comfortable using whistle blowing procedures. Reporting lines should allow staff to provide information quickly. (1.19)	Accepted	Ongoing	Further promotion of the established whistle-blowing procedure will take place during monthly staff forums.  Staff can also access the confidential Security Information Report process which can be used to anonymously highlight concerns which may compromise the safety and security of the centre, including where this involves staff behaviour and/or misconduct.	6 months
5.11	All staff in contact with detainees should be familiar with adult safeguarding, modern slavery and adults at risk practice. (1.20)	Accepted	Ongoing	The Home Office is currently delivering mandatory training on the policy on Adults at Risk in Immigration detention to all relevant staff in casework teams and pre-departure teams. This training is also being offered to other Home Office staff located in IRCs.  Communications regarding recent changes to the Adults at Risk policy have been disseminated to all Home Office IRC staff and Healthcare staff.  All relevant staff have received Level 2 adult safeguarding training from G4S medical services and have signed to confirm that they have read and understood the Home Office Adults At Risk Policy. Modern Slavery training for healthcare staff is being sourced by the healthcare supplier and will be delivered when identified.	6 months
5.12	There should be effective multidisciplinary care planning for adults at risk. (1.21)	Accepted	Ongoing	Weekly care planning meetings are held for all adults at risk identified at the centre. These meetings are minuted and are attended by representatives from the Home Office (pre-departure and compliance team members), G4S Healthcare, the G4S Head of Safeguarding and safer community managers.  Care plans are put in place for all detainees assessed as level 3 adults at risk who are released from the centre. Consideration is being given to extending this to level 2 adult at risk detainees.  Plans are being drawn up to initiate weekly meetings with all level 2 and 3 adults at risk to provide ongoing support and address any vulnerabilities at the earliest opportunity.	6 months

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<b>Self-Harm and Suicide Prevention</b>					
5.13	The centre should have an up-to-date local policy on the care and management of detainees refusing food or fluid. (1.31)	Reject		The management of food and fluid refusal in the detention estate should be undertaken in line with Detention Services Order 03/2013 'food and fluid refusal in IRCs'. It is not considered necessary to produce a local policy.	
5.14	Messages left through the confidential safer community helpline and email services should receive a prompt response. (1.32)	Accept	Ongoing	The effectiveness of the existing provision will be reviewed and mechanisms put in place to ensure that swift action is taken as a result of issues raised through these channels.	12 months
5.15	ACDT case reviews and meetings between staff from the Samaritans and detainees should take place in private and should not be disturbed. (1.33)	Partially accept	Completed and ongoing	Managers have been reminded of the need to carry out ACDT reviews in a private space, and where possible, without interruption.  Visitors from The Samaritans have been advised that arrangements can be made with the duty manager to have a private discussion with detainees where this is requested or considered appropriate.	6 months
<b>Personal safety</b>					
5.16	Sustained efforts should be made to investigate negative perceptions of safety held by some detainees and appropriate action should be taken. (1.40, repeated recommendation 1.20)	Accepted	Ongoing	A Safer Community survey is conducted every 6 months; the most recent survey took place in August. This survey includes questions about safety within Tinsley House. Feedback from this survey will be provided to detainees and follow up actions will be taken where there is an indication that detainees do not feel safe.  Detainee consultative forums are held monthly and detainees are invited to raise any concerns or issues they have with life at the centre.  Detainees also participate in the centre's monthly Safer Community meetings.  Regular visitors to the centre (Bail for Immigration Detainees and the Gatwick Detainee Welfare Group) will be reminded that they can raise concerns about or on behalf of any detainee at the centre.	12 months
<b>Use of Force and Single Separation</b>					
5.17	Use of force meetings should take place regularly. They should analyse use of force data specifically for Tinsley House as well as monitor trends and set appropriate action. (1.52)	Accepted	Completed and ongoing	Meetings to discuss incidents involving use of force are now held every two weeks, chaired by the Head of Safeguarding. The meetings review the appropriateness of the use of force and identify any trends. Tinsley House data is provided and analysed separately to data relating to Brook House.	6 months
<b>Legal rights</b>					
5.18	Professional interpretation should be used for all immigration interviews. (1.62)	Accepted	Completed and Ongoing	Arrangements for the use of professional telephone interpretation are already in place for all immigration engagement activity undertaken with detainees by staff in the pre departure team.  Staff have been reminded to use the service wherever necessary to ensure that the content of any message being conveyed is understood, even in circumstances where the detainee has confirmed that they are content to proceed in English.	12 months

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5.19	The library should stock up-to-date immigration law text books and country of origin information reports. Legal support websites should not be blocked. (1.63)	Accepted	Ongoing	Up to date immigration law texts and country of origin reports are available online and detainees will be advised how to access them to ensure that they are able to consult the most recent versions.  A process is in place for unblocking any website that detainees can legitimately access as set out in Detention Services Order 04/2016.	6 months
5.20	Detainees should receive a copy of their bail summary by 2pm the day before the bail hearing. (1.64, repeated recommendation 1.66)	Accepted	Completed and ongoing	New bail guidance was published in January 2018 when the single power to grant immigration bail came into force. The new guidance makes it clear that all relevant information must be included in bail summaries. Bail summaries are sent to the Presenting Officers Unit (POU) by the detained casework commands no later than 12pm the working day prior to any hearing. This is set out in the relevant guidance. The POU is then required to serve copies of the bail summaries to legal representatives by 2pm the same day, to ensure they have adequate time to prepare before the hearing.  Instructions have been sent to all casework areas dealing with detained cases to ensure the timely provision of bail summaries to pre departure teams in IRCs.	6 months
<b>Staff-detainee relationships</b>					
5.21	Staff should knock and wait for a response before entering rooms, except in emergencies. (2.5 repeated recommendation 2.16)	Accepted	Completed and ongoing	All staff are trained to follow the requirement to knock and wait before entering a room. A quarterly reminder will be issued via a Notice to Staff and via the daily operational briefings.  In the interests of safety and security it is not always possible or appropriate to wait for a response before entering and staff will use their training to determine when this is the case.	6 months
5.22	Managers should monitor and assess the impact of regular redeployment on relationships in the centre. (2.6)	Accepted	Ongoing	G4S custodial staff employed on Gatwick IRC contracts are required to work flexibly and may be deployed at either site.  In practice the same staff group is deployed consistently to each site unless operational requirements require cross deployment. Where cross deployment does take place with this would be, on average, once in every two months. Cross deployment and its frequency is kept under review.  A number of G4S healthcare staff work across both Gatwick sites however their working rotas are allocated at one site for a block period to ensure continuity of care. All rotas are reviewed regularly by the head of healthcare to ensure that they continue to best meet operational and patient needs.	12 months

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5.23	Detainees should be consulted to understand any concerns about the behaviour of staff and action should be taken to address those concerns. (2.7, repeated recommendation 2.15)	Accepted	Ongoing	<p>A Safer Community survey is conducted every 6 months; the most recent survey took place in August. This survey includes questions about safety within Tinsley House. Feedback from this survey will be provided to detainees and follow up actions will be taken where there is an indication that detainees do not feel safe.</p> <p>Detainee consultative forums are held monthly and detainees are invited to raise any concerns or issues they have with life at the centre.</p> <p>Detainees also participate in the centre's monthly Safer Community meetings.</p> <p>Regular visitors to the centre (Bail for Immigration Detainees and the Gatwick Detainee Welfare Group) will be reminded that they can raise concerns about or on behalf of any detainee at the centre.</p> <p>Healthcare staff attitudes/behaviours are raised on the standard agenda item of the monthly staff meeting. G4S values have been re-launched and all staff are encouraged to Speak Out using the whistle-blowing policy if they see or hear behaviour or comments which do not meet G4S standards of behaviour.</p>	12 months
<b>Daily life</b>					
<b>Living conditions</b>					
5.24	Detainees should have well ventilated rooms where they can rest and sleep in reasonable comfort. (2.14)	Accepted	Completed and ongoing	<p>All rooms have appropriate ventilation designed to work effectively.</p> <p>Regular checks will be made to ensure that vents are not being obstructed or closed and that room doors (which are also fire doors) are not being propped open by occupants as this compromises the efficiency of the air supply system.</p> <p>A mattress audit has been carried out and deficient mattresses have been replaced. Subsequent audits will be carried out at regular intervals to ensure a rolling programme of assessment and replacement.</p>	12 months
<b>Detainee consultation, applications and redress</b>					
5.25	Complaints should receive a response within published timescales. (2.18)	Accepted	Completed and ongoing	<p>Every effort is made to ensure that the timescales set out in Detention Services Order 3/2015 (Handling Complaints) are adhered to. Complaints are allocated for investigation to the most relevant manager with knowledge of the area of complaint and with sufficient availability to conclude the matter swiftly.</p> <p>The Home Office monitors supplier performance in responding to complaints through a range of measures and will continue to do so robustly to drive improvement and maintain adherence to published timescales.</p>	6 months

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<b>Residential services</b>					
5.26	Special and religious diets should be effectively catered for, and food should be correctly stored. (2.25)	Accepted	Completed and ongoing	The storage of Halal food items has been addressed to ensure that there is no cross contamination with non Halal foods.  The catering manager will ensure that kitchen staff and detainee engaged in paid activity receive instructions to ensure that they are fully conversant with the requirements of special and religious diets and that they do not deviate from standard recipes.	6 months
5.27	Consultation should lead to action that addresses detainees' dissatisfaction with the food. (2.26)	Accepted	Ongoing	The senior catering manager will attend the centre's regularly scheduled food forums to consider the issues raised by detainees.  Where detainee requests or complaints are not sufficiently responded to, this will be addressed via the contractual review meetings held by G4S with the catering supplier.	6 months
5.28	Detainees should have significantly more access to the cultural kitchen. (2.27)	Accepted	Ongoing	Demand for the use of the cultural kitchen will be kept under regular review and additional sessions will be arranged as necessary to meet any increase in demand.	12 months
<b>Equality, diversity and faith</b>					
<b>Strategic management</b>					
5.29	The under-reporting of detainees' protected characteristics should be investigated and addressed. (2.30)	Accepted	Ongoing	A tool box talk for staff will be developed and delivered to raise staff awareness of the protected characteristics.  An agenda item on protected characteristics will be added to the monthly detainee consultative meeting to invite feedback and assess detainees' understanding of the subject and the importance of disclosing this information to ensure that their needs can be fully met by the centre.	6 months
5.30	Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes. (2.31, repeated recommendation 2.24)	Accepted	Ongoing	A confidential equality questionnaire will be introduced and the results analysed monthly by the Diversity Manager. Where issues / trends are identified these will be escalated to the senior management team to discuss and initiate action where appropriate. Trends identified through the confidential equality questionnaire will be analysed and appropriate action taken where required.	12 months
5.31	Specific forums should be established for detainees with protected characteristics. (2.32, repeated recommendation 2.26)	Accepted	Ongoing	G4S will make contact with community support groups to discuss and explore the most effective way to support detainees who declare that they have a protected characteristic.  Action will be implemented subject to the outcome of this consultation.	12 months
<b>Faith and religion</b>					
5.32	Detainees of all faiths should be able to pray in the multi-faith room without being unduly disturbed. (2.36)	Accepted	Completed and ongoing	Privacy screens have been placed in the multi-faith room for detainees' use to enable the separation of the room into separate, designated prayer areas for different faiths.	6 months



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<b>Health services</b>					
<b>Strategy, clinical governance and partnerships</b>					
5.33	There should be enough health care staff to meet detainees' needs. (2.48)	Accepted	Ongoing	A healthcare staffing profile review is underway; future staffing requirements will be implemented in line with its findings. Existing Health and Justice Indicators of Performance provide a system of assessment to measure and provide evidence of the level of care being delivered.	6 months
5.34	A formal memorandum of understanding should be agreed with the Home Office and local authority, describing how detainees with social care needs will be supported. (2.49)	Partially accepted	Ongoing	Under current arrangements, persons arriving in the centre and subsequently identified as requiring social care would, in the first instance, be raised as a level 3 adult at risk.  A multi-disciplinary supported living plan would be drawn up to identify care needs pending their transfer to a more suitable environment or until arrangements of supplementary care to support their stay could be made.  The Home Office will engage with the local authority to explore what support can be provided and to explore the feasibility of developing a memorandum of understand for the management of detainees with social care needs.	18 months
5.35	Detainees making a complaint should initially be addressed face-to-face whenever their language of choice is not English and written responses should be in an accessible format. (2.50)	Accepted	Ongoing	Procedures are being put in place to meet all complainants to discuss the nature of their complaint. All complainants receive a written response to their complaint. For those individuals who are unable to understand or read English the response will be explained to them by staff with the aid of telephone interpreters.  All complaints and responses are logged and reviewed by G4S health governance team and also NHS England Quality Lead.	6 months
5.36	A 'whole centre' approach to health promotion should be introduced. It should cover screening and immunisation and offer readily available appropriate information in accessible formats, including in the main written languages of the detainee population. (2.51)	Accepted	Ongoing	Health information leaflets are currently available in a large range of languages and subjects via NHS Choices. Where a detainee is identified as requiring information copies can be printed and provided. A selection of the most common / popular leaflets have been placed in the centres' library to allow detainees ready access to information.	6 months
<b>Primary Care and inpatient services</b>					
5.37	The centre should introduce an effective booking system that allows detainees to make an appointment easily. (2.56)	Accepted	Ongoing	A daily appointments schedule is in operation and in the first instance detainees are triaged by nurses. Notices have been placed around the centre explaining the triage clinic opening times and how to contact healthcare outside of these times in an emergency.  Waiting times are regularly reviewed in line with Health and Justice Indicators of Performance.	6 months

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<b>Mental health</b>					
5.38	There should be sufficient staffing capacity to meet the health needs of the population and counselling services should be provided. (2.61)	Accepted	Ongoing	Mental health nurses continue to attend daily and manage the case load. Talking therapies are offered by mental health team.  Group sessions (Coffee and Chat) were piloted but were in very low demand. Although not taking place according to a fixed schedule, these facilities remain available and are arranged in line with demand and continue to be advertised throughout the centre.	6 months
<b>Medicines optimisation and pharmacy services</b>					
5.39	Detainees should have access to pharmacy-led clinics. (2.70, repeated recommendation 2.79)	Accepted	Ongoing	A new service is being contracted and has been in place since August 2018. This will include visits by a pharmacist who will provide 4 hours on site service.	6 months
5.40	Protocols for authorising non-prescribed medicines should be comprehensive to ensure compliance with legislation, and prescribing audits should be undertaken. (2.71)	Accepted	Ongoing	Medication management meetings are undertaken monthly where all protocols for non-prescribed medications are discussed.  A programme of prescribing audits are in development and will be introduced within 6 months.	6 months
<b>Activities</b>					
<b>Access to activities</b>					
5.41	Cover arrangements for staff absences should be in place to ensure the consistent and safe delivery of a range of activities. (3.8)	Accepted	Completed and ongoing	An additional teacher has been recruited and there is now sufficient resource in place to ensure that the activities programme can be fully met.	6 months
5.42	Data on activities should be collected and analysed to identify trends in the use of all facilities and participation by different groups of detainees. The information should be used to improve participation, planning and promotion to attract higher interest and attendance. (3.9)	Accepted	Ongoing	Enhanced monitoring of attendance at education classes, the gym and the library will be introduced and fed into a monthly review of the centre's regime and activities programme.	12 months
<b>Education and work</b>					
5.43	The centre should establish effective quality improvement systems. (3.18)	Accepted	Ongoing	Lesson plans will be routinely reviewed by peers and line managers to ensure that they meet the needs of the centre's population.  A system of regular observation of the delivery of lessons is being considered to ensure that teaching standards are appropriate.	12 months
5.44	Rates of pay should be raised to encourage more detainees to apply for paid work at the centre and compliance with the Home Office should not be a pre-requisite for obtaining work. (3.19, repeated recommendation 3.19)	Rejected		Paid activity opportunities may be provided under Rule 17 of the Detention Centre Rules. Detention Services Order 1/2013 sets out that the provision of opportunities should be directly linked to a level of compliance with the service provider and Home Office.	

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<b>Library provision</b>					
5.45	Effective systems should be in place for borrowing books and checking and renewing stock. (3.22)	Partially accepted	Ongoing	A quarterly stock check will be carried out and additional books ordered to maintain sufficient stock. An effective system for borrowing books will be explored through cross estate consultation and implementation considered if appropriate.	12 months
<b>Fitness provision</b>					
5.46	Sports and activities staff should have instructor or coaching qualifications. They should supervise the gym more closely to ensure detainees are safe and complete a gym induction before they use equipment. (3.26)	Partially accepted	Ongoing	Fitness instructor training has been arranged for the activities team to ensure that inductions are consistently delivered by appropriately qualified staff. The gym will be supervised on a regular basis during opening hours.	12 months
<b>Visits and family contact</b>					
5.47	Rules in the visits hall should be proportionate to the detainee population. Appropriate physical contact between detainees and their visitors should be allowed, and young children should not be required to wear wristbands or lanyards. (4.11)	Accepted	Ongoing	The seating configuration and permitted interactions between detainees in their visitors will be reviewed in conjunction with the security department to ensure that the rules in place are safe, secure and proportionate for all detainees, visitors and staff. Lanyards and wristbands will not be issued to children under 12 years of age.	6 months
5.48	Visitors should be given information about what to expect at the centre before they arrive. (4.12)	Accepted	Ongoing	A list of visiting requirements will be made available to all staff that are given the task of booking visits. Consideration is also being given to providing this information on line.	6 months
<b>Communications</b>					
5.49	Detainees should have access to social networks, Skype and all other legitimate websites. (4.16)	Partially accepted	Ongoing	The provision of internet access is an important means of helping detainees to remain in contact with family, friends and legal representatives and to prepare for removal. Detention Services Order (04/2016) on access to the internet was published in May 2016 and does not currently permit access to social networks or Skype. As announced by the Home Secretary in Parliament on 24 July, the use of Skype will be piloted so that detainees may contact their families overseas more easily.	12 months
<b>Leaving the centre</b>					
5.50	Detainees' needs should be assessed systematically, and as far as possible addressed, before they leave the centre. (4.20)	Accepted	Ongoing	Work to develop a standard operating procedure for pre departure teams for releasing vulnerable or at risk adults is underway. This will seek to ensure that detainees' needs are considered and where possible, addressed, ensuring their safe release. The new procedure will complement Detention Services Order "Release of detainees from immigration detention" which was introduced in February 2018.	6 months