

SERVICE IMPROVEMENT PLAN - UNANNOUNCED INSPECTION OF MORTON HALL IRC

Recommendation No	Recommendation Addressed to	Primary Theme	Secondary Theme	HMIP Recommendation	Accepted / Partially Accepted / Not Accepted	Progress Complete / Partially Complete / Not Complete	Action taken / proposed	Expected completion within [6/12 months]
S41 – Key Recommendation (Repeat Recommendation)	Home Office and Escort Contractor	Safety	Arrival and early days in detention	Key concern: Many detainees were transferred to and from the centre during the night for reasons of operational convenience. In our sample, 42% of detainees arriving in the centre arrived between 10pm and 6am, with many arriving between midnight and 3am. Recommendation: Detainees should not be subjected to unnecessary overnight transfers around the detention estate.	Not Accepted		The Home Office and escorting contractor seek to avoid routine night time transfers. Mitie Care and Custody operates a 24/7 escorting service that covers a wide range of activity, including moves between centres. All proposed moves consider the impact on the care and welfare of individual detainees, including the time and length of the move. Although overnight moves are avoided where possible, moves between centres sometimes have to be conducted during the night if they are time-specific priority moves i.e. taking detainees to flight.	
S42 – Key Recommendation	Centre Manager	Safety	Arrival and early days in detention	Key concern: Induction processes were poor. Detainees received an out-of-date induction booklet. One-to-one induction interviews were not tailored to the experiences of the individual. The tour of the centre for new arrivals did not take place during our inspection. Recommendation: Detainees should be provided with key information during their induction. They should be given a tour of the centre and an induction booklet containing up-to-date information.	Accepted	Partially Complete	Morton Hall IRC will refresh induction processes for detainees to deliver an effective and comprehensive programme which is personalised to the individual. <ul style="list-style-type: none"> A stakeholder group has been formed to review and deliver improvements in the induction process. This has produced a focused action plan. The group's membership includes healthcare, the Home Office, Education, Welfare Services and Chaplaincy. Interview questions and check-sheets will be refreshed to ensure they provide an individual approach recognising the core issues and concerns of those new to detention. The interview room used for induction interviews has been cleaned, painted and refurbished. A new service user friendly induction booklet will be introduced which will further support new detainees. The tour of the centre has been reintroduced. This is carried out by an induction officer and recorded daily. The activity is assured at the monthly performance and assurance meeting. 	6 months

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S43 – Key Recommendation	Centre Manager, Head of Healthcare and Home Office	Safety	Safeguarding - Safeguarding of vulnerable adults	<p>Key concern: Many detainees reported mental health problems and 42 detainees had been placed on constant supervision in the previous six months because of concerns about their risk of self-harm. However, no Rule 35 reports had been written outlining detainees' suicidal thoughts or other health concerns.</p> <p>Recommendation: Doctors should submit a Rule 35 report to the Home Office on any detainee they suspect of having suicidal thoughts or if there are other serious health concerns that may require a review of detention.</p>	Accepted	Partially Complete	<p>There is an existing obligation on medical staff within an IRC to submit a Rule 35 Report where a concern is raised or reported on regarding a detainee who they suspect may have suicidal intentions. Such persons should also be placed under special observations within the IRC.</p> <p>The Head of healthcare will remind all GPs of this requirement.</p> <p>The Rule 35 Team already monitor general trends, including numbers raised and this will continue to ascertain if there is then an increase in Morton Hall.</p> <p>Morton Hall IRC will ensure that the care of those detainees' subject to constant supervision robustly supports rule 35 submissions where a need for this is clearly identified.</p> <ul style="list-style-type: none"> All detainees subject to constant supervision arrangements will be seen by a Mental Health nurse daily. Healthcare System 1 templates require a record to be made if the detainee expresses suicidal ideation. This will be a focus and consideration during each visit by the Mental Health nurse. Work is underway to include an additional mandatory question field to the System 1 template making clear if a Rule 35 submission may be required. Where this is deemed necessary a GP will determine the need to complete an assessment and submit the Rule 35 report to the Home Office in accordance with the requirements of Detention Centre Rules 2001. The Home Office will then consider the risks of continued detention. 	6 months

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S44 – Key Recommendation	Centre Manager	Safety	Safeguarding - Self-harm and suicide prevention	<p>Key concern: The number of self-harm incidents was high. In the previous six months, 68 detainees had been involved in 113 self-harm incidents, more than over a similar period before the previous inspection. Managers did not know why these figures had increased.</p> <p>Recommendation: Managers should investigate the increase in the number of self-harm incidents and the number of individuals who self-harm. The investigation should inform an effective action plan that reduces the prevalence of self-harm.</p>	Accepted	Partially Complete	<p>Morton Hall IRC will complement existing methods of analysis of self-harm prevalence at the Centre with new commissions, staff appointments and stakeholder engagement to fully inquire into the reasons for self-harm and develop an action plan to reduce it. The plan will be flexible providing short, medium and long-term actions and respond dynamically to new issues and self-harming activity.</p> <ul style="list-style-type: none"> • Current analysis of self-harm at the Centre will be reviewed to ensure it is focussed on; who self-harms and why, incidents of prolific self-harm activity and better understanding of triggers, volumes and locations. • HMPPS Psychology services will be commissioned to undertake an analysis of the high levels of self-harm at the Centre. The conclusions from this will be used to inform the safer detention action plan. • A Safety Manager will be recruited to further support the safety analysts work and provide greater assurance of systems and inquiry into the causes of self-harming behaviour. • Safety summits involving staff, stakeholders and detainees have been introduced and will continue regularly to review levels and identify hotspots of self-harming behaviour to support the outcomes of the safer detention action plan. • A spider- phone will be provided to ensure Home Office case workers can be invited to contribute fully to weekly Safer Detention meetings. Themes and issues arising from this improved communication will be applied to the action plan and to support individuals to reduce levels of self-harm. 	6 months
S45 – Key Recommendation	Home Office	Safety	Safeguarding Children	<p>Key concern: There were weaknesses in the management of age dispute cases. Three detainees were detained with insufficient evidence to show that they were adults.</p> <p>Recommendation: Where someone claims to be a child, they should only be detained if there is sufficient evidence, assessed to the correct legal test, that they are an adult.</p>	Partially Accepted	Partially Complete	<p>There is already published policy on the treatment of age-dispute cases and Detention Service Order 02/2019 was introduced in August 2019 to reflect changes covering age disputes arising in detention.</p> <p>Where an individual referred for detention claims to be a minor, the Detention Gatekeeper will assess the individual circumstances of that case in line with the relevant policy and the presumption is that they should be treated as a minor unless there is documentary evidence or a robust assessment confirming they are an adult or there is a Merton Compliant age-assessment available which confirms the individual is not.</p> <p>This approach occurs if an individual claims to be a minor prior to detention.</p> <p>Once detained, should an age dispute arise, it should be dealt with in-line DSO 02/2019.</p> <p>As part of this Detention Engagement Teams will lead lessons learned with those involved to understand and review case handling.</p>	6 months

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S46 – Key Recommendation	Centre Manager	Safety	Personal Safety	<p>Key concern: In the previous six months, more than a fifth of incidents referred to the safer detention team had not been followed up. Challenge, support and intervention plans used to manage perpetrators had little impact on detainees' behaviour and officers had little faith in the plans. Objectives and interventions in the plans were vague and did not reflect the positive mediation that officers often used with detainees.</p> <p>Recommendation: Managers should ensure that all safer detention referrals are investigated and, where appropriate, result in perpetrators being effectively challenged and supported.</p>	Accepted	Partially Complete	<p>Morton Hall IRC will undertake changes to staff commitments, governance, training and communication to deliver an effective whole system approach to ensure all incidences of violent and anti-social behaviour are investigated and challenged.</p> <ul style="list-style-type: none"> Staffing within the HMPPS Safer Detention team will be re-organised to provide two staff committed to Challenge Support Intervention Plan (CSIP) report work daily. This work will include a check that referrals and assessments are being completed promptly and that effective objectives, and interventions are being used to challenge perpetrators and victims are well supported. A CSIP training programme with leaflets and guides has been introduced, to develop staff skills in the application and effectiveness of CSIP. 70 staff have been trained to date. Safety and Security department analysts are working collaboratively to ensure all incidents have been identified and are being promptly investigated. The appointment of a HMPPS Safety Hub Manager later in the year will support the current Head of Safer Detention and current support from regional teams is improving the quality and effectiveness of objectives and interventions set in CSIP documents. The weekly HMPPS Order and Control meeting will monitor the number of CSIP referrals, open documents and identify any incident referrals which have not been pursued and direct action to ensure an investigation is carried out. 	12 months

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S47 – Key Recommendation	Centre Manager	Safety	Security and freedom of movement	<p>Key concern: The physical security features continued to make the centre look like a prison. The amount of razor wire was excessive and some detainees were held in cells. Detainees were locked up in the evenings from 8.30pm, which was too early. Staff carried batons and not all strip-searches were adequately justified.</p> <p>Recommendation: The centre should provide a relaxed environment and living conditions that are as near as possible to normal life in the community.</p>	Partially Accepted	Partially Complete	<p>This recommendation is partially accepted as while Morton Hall IRC will continue to aim to deliver a relaxed environment this is balanced against the requirements of policy and the need to maintain safety and security.</p> <ul style="list-style-type: none"> Razor wire has been removed from various areas of the centre since the previous inspection. 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. Morton Hall IRC is managed on behalf of the Home Office by HMPPS. Accordingly, all Detainee Custody Officers at the Centre are Prison Officers. Batons form part of a Prison Officers' uniform Personal Protective Equipment (PPE) and are a Prison Service requirement. The requirement and circumstances under which full- searching (Strip searching) has been reviewed and will only be undertaken when appropriately authorised and where a defined need or risk has been identified. 	12 months

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S48 – Key Recommendation	Home Office and HMPPS Centre Manager	Preparation for removal and release	Leaving the centre	<p>Key concern: Too many detainees were still held for prolonged periods. Inefficiencies in casework prolonged some detention unnecessarily. Systemic delays in the provision of approved accommodation for detainees being released on licence contributed to the problem.</p> <p>Recommendation: There should be a time limit on detention. Casework for detainees should be progressed with due diligence. The Home Office and HM Prison and Probation Service should ensure prompt provision of approved accommodation.</p>	Partially Accepted	Partially Complete	<p>There has been much debate about the introduction of a time limit on immigration detention. But the evidence on all sides of the debate is somewhat limited. An explicit time limit could constrain our ability to maintain the integrity of the immigration system</p> <p>We are however committed to building on recent reforms to the immigration detention system to ensure we continue to have a detention system that is fair to those who may be detained, upholds our immigration policies, and acts as a deterrent to those who might seek to frustrate those policies. This part of the recommendation is therefore not accepted.</p> <p>It is accepted that case-owners should act with diligence and expedition and Case Progression Panels review all cases where a detainee has been in detention for 3 months (and every 3 months thereafter), ensuring an independent assessment of all cases. Panels review the appropriateness of all detained cases to ensure consistency of decision making and case handling, adherence to the Adult at Risk policy, review case progression actions and provide transparent recommendations.</p> <p>The Case Progression Panels provide an opportunity for sharing of best practices and continuous improvement. Case progression actions are audited to ensure implementation.</p> <p>Increased feedback loops have been introduced to add further oversight and improve the consistency of panels, including quarterly observations and feedback from the UNHCR and BRC.</p> <p>A 6-month trial started in November 2019 with 2 independent panel members from the independent family returns panel. A further 3 members have now been identified to support the trial. The Home Office Insight and Analysis team will analysis the results of the trial.</p>	6 months

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S49 – Key Recommendation	Centre Manager	Respect	Equality, diversity and faith – Strategic management	<p>Key concern: Equality and diversity work lacked strategic oversight and direction. The diversity and equality action plan consisted mainly of low-level action points and DEAT meetings had not taken place for four months, leading to delays in responding to the concerns identified through data analysis.</p> <p>Recommendation: Managers should ensure that equality and diversity work is strategic and proactive, and that potential concerns emerging from data analysis are investigated promptly.</p>	Accepted	Partially Complete	<p>Morton Hall IRC will deliver a more strategic and progressive approach to equality and diversity to provide a long-term vision for the centre.</p> <ul style="list-style-type: none"> The HMPPS diversity equality action plan will be refreshed and include a strategy to support an effective and flexible action plan with short, medium and long-term actions which focuses on a celebration of diversity and how this will be delivered throughout the Centre. Diversity Equality Action Team (DEAT) meetings are be consistently timetabled, with a deputy chair also in post and will take place every two months. Equalities Monitoring Tool (EMT) data will be thoroughly reviewed at DEAT meetings with effective actions added to the Diversity and Equality action plan. The DEAT will track the outcomes of investigations it commissions as a result of disproportionality of treatment identified through data analysis. Consultation and engagement with detainees with protected characteristics will be integrated into the DEAT meeting with support and improvement for these groups embedded into the strategic action plan. The current Peer Support role will be further enhanced to include an equalities representative element. This will be supported through training, and supervision by the Equalities staff team. The refreshed Equality and Diversity policy, action plan and strategic vision for Morton Hall will be communicated to all staff and detainees. 	12 months
S50 – Key Recommendation	Centre Manager	Respect	Activities – Access to activities	<p>Key concern: Few detainees were attending education. Not enough was done to encourage detainees to use the education department’s facilities. As a result, few detainees participated in the courses and activities offered, and many classes were underused.</p> <p>Recommendation: Managers should set targets to improve the use of the education provision and take steps to achieve them.</p>	Accepted	Partially Complete	<p>Morton Hall IRC will identify key targets of enrolment and engagement in education and deliver activity to encourage improved use of the education facilities at the Centre. Improvements will be monitored through education contract governance frameworks. Further activity will be taken to generate greater engagement and interest in education services;</p> <ul style="list-style-type: none"> The recently re-introduced induction tour of the centre now also includes a visit to the Education Department to see the opportunities and facilities available first hand. Leaflets about courses and what is offered in the department will be translated into a variety of languages and distributed to detainees. Consultation with detainees across the centre will take place to identify any issues impacting on low uptake in the department. This will include surveys and focus groups and the results will be used to review and improve the education curriculum. 	6 months

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1.18 – General Recommendation	Centre Manager	Safety	Safeguarding – Safeguarding of Vulnerable Adults	All staff working in the centre should understand the risks faced by detainees assessed at level 3 of the Home Office’s adults at risk policy.	Accepted	Partially Complete	<p>Morton Hall will enhance staff training and clarify local policy to better support staff comprehension of the unique risks posed by Level 3.</p> <ul style="list-style-type: none"> The current training package for the Adults at Risk policy will be enhanced to include specific information about the potential increase of risks to some detainees when level 3 is used. The local Adults at Risk policy will be reviewed to include information particular to the potential for increased risks or harming factors around the use of level 3. The recruitment of a Safety Hub manager will provide for greater monitoring of staff training in the Adult at Risk policy and check staff understanding of increased risk indicators. This will also be reflected in the monthly performance and assurance meeting. Cases of concern can be raised at the weekly safer detention meeting Vulnerability training for IE staff is currently being undertaken and IE staff within IRCs are made aware of the Adults at Risk Policy and the importance of Safeguarding those with vulnerabilities. 	6 months
1.19 – General Recommendation	Centre Manager	Safety	Safeguarding – Safeguarding of Vulnerable Adults	Vulnerable adult care plans should be completed to a good standard and, where appropriate, case reviews should be multidisciplinary.	Accepted	Partially Complete	<p>Morton Hall IRC will embed assurance and support processes and focused information for staff to improve the quality of Vulnerable Adult Care Plans and associated processes.</p> <ul style="list-style-type: none"> The development, quality and importance of Vulnerable Adult Care Plans will be included in the refreshed Adults at Risk policy and further supported through testing as part of the staff training package. Care Maps will be required for all Vulnerable Adult Care Plans. Staff training will re-enforce this with daily Supervisory Officer checks in place to raise the quality of Care Plans and Maps. The appointment of the Safety Hub manager to support the Safer Detention Manager later this year will further strengthen this. The importance and identification of the need for multi- disciplinary involvement and decision making at case reviews will be focused upon in the staff training package. Current assurance will be provided by daily Supervisory Officer checks. Cases of concern can be raised at the weekly safer detention meeting The importance of attendance at case reviews will be re-iterated to relevant parties such as Healthcare, Welfare, HOIE and Chaplaincy. 	6 months

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1.20 – General Recommendation	Centre Manager and Home Office	Safety	Safeguarding – Safeguarding of Vulnerable Adults	The centre and the Home Office should monitor Rule 35 reports to ensure that they are submitted, provide clear and detailed assessments, including on potential PTSD, and receive a prompt response.	Accepted	Partially Complete	<p>The HOIE Rule 35 Team will be sent the Rule 35 notification from the IRC by the Detention Engagement Team (DET), who will ensure it is 'legible, clear, signed by a named doctor and complies with the overall reporting requirements.</p> <p>The Rule 35 Team will also ensure the report is clear and contains the appropriate detail in order for it to be properly considered and responded to (if it is not, it must immediately be returned to the IRC Medical Practitioner via the DET for amendments to be made and re-submission to the Home Office).</p> <p>A response including a decision on ongoing detention or release should be made within 2 working days and that decision conveyed to the individual.</p> <p>On occasion a decision will take longer than 2 days, where the decision is taken to release the individual on the strength of the Rule 35 notification but where suitable accommodation (especially important for high-harm foreign national offenders) cannot be obtained.</p> <p>Further assurance is provided by Detained Casework Oversight and Improvement Team (DCOIT) who monitor response timescales for all Rule 35 Reports from across the IRC estate.</p>	6 months
1.21 – General Recommendation	Home Office	Safety	Safeguarding – Safeguarding of Vulnerable Adults	Where evidence of torture is accepted, detention should only be maintained in exceptional circumstances, which should be documented on file.	Accepted	Partially complete	<p>Where evidence of torture is accepted, further detention will only be maintained where it is appropriate to do so, following a careful consideration in line with general detention policy and the Adults at Risk Policy.</p> <p>The reasoning underpinning every decision made following receipt and consideration of a Rule 35 Report is already clearly documented on Home Office systems and in a formal written decision letter to the detainee which should be saved and stored electronically again on Home Office systems.</p> <p>Case Progression Panels review the appropriateness of all detained cases and this includes adherence to the Adult at Risk policy.</p> <p>The Rule 35 Team will continue to monitor the quality of assessments to ensure where evidence of torture is accepted, detention is only maintained in-line with the Adults at Risk Policy</p>	6 months
1.33 – General Recommendation	Centre Manager	Safety	Safeguarding Children	Where a detainee is awaiting an age assessment, the centre should conduct an immediate, thorough risk assessment and put in place all reasonable measures to safeguard the detainee.	Accepted	Partially Complete	<p>Ages disputes are managed in line with DSO - 02/2019 Age dispute cases in immigration detention centres</p> <p>Morton Hall IRC will put in place a robust system to assess risk, safeguard and support detainees at the Centre awaiting the outcome of a Home Office age assessment.</p> <ul style="list-style-type: none"> A mandatory field will be added to the Duty Manager log which requires a daily check with the Home Office to confirm the outcome of any outstanding age assessments. All age dispute cases will be managed and recorded through a Vulnerable Adult Care Plan which identifies risk and puts in place individual support and care arrangements until the age assessment has been resolved. 	6 months

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1.47 – General Recommendation	Centre Manager	Safety	Use of Force and Single Separation	The use of separation should be monitored and discussed in a formal meeting, where a response to emerging trends or concerns can be considered.	Accepted	Not Complete	<p>Morton Hall IRC will introduce a new reference and governance forum to identify and respond to trends in the use of separation at the centre.</p> <ul style="list-style-type: none"> A multi-disciplinary Separation Management Review Group will be formed and meet quarterly. The meeting will focus on the use of separation at the Centre, reasons, trends and issues which impact on the unit or Centre more widely. Where the review of this information identifies specific causative issues, actions will be suggested to respond to these. 	6 months
2.5 – General Recommendation	Centre Manager	Respect	Staff-detainee Relationships	Staff should consistently challenge low-level antisocial behaviour, such as smoking and playing loud music.	Accepted	Not Complete	<p>Morton Hall IRC will support staff to consistently challenge poor behaviour at the Centre and encourage detainees to be more considerate of others.</p> <ul style="list-style-type: none"> Staff and managers will become more visible on accommodation units throughout the day and strive to apply standards more consistently across the Centre and openly challenge poor behaviour by detainees. Detainees will be encouraged to engage in purposeful activity and education classes at the Centre reducing periods of inactivity on units where anti-social behaviour can take place. 	6 months
2.11 – General Recommendation	Centre Manager	Respect	Daily Life – Living Conditions	All showers should be in working order and kept clean.	Accepted	Partially Complete	<p>Morton Hall IRC will complete work to ensure showers throughout the Centre are cleaned and prioritise necessary repairs and refurbishment when these are identified.</p> <ul style="list-style-type: none"> All communal showers at the Centre are currently undergoing a refresh programme. Showers beyond serviceable use will be replaced as part of this work. The programme is due for completion by the end of spring 2020. A review and re-launch of cleaning schedules pertaining to all areas, but specifically showers at the Centre will be completed and communicated to staff and cleaners. Daily staff cleaning checks will be completed to support an improvement in cleaning standards. 	6 months

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2.16 – General Recommendation	Centre Manager	Respect	Daily Life – Detainee Consultation, application and redress	The reasons for the large number of withdrawn complaints should be investigated in consultation with detainees, and action taken to address any concerns that are identified.	Accepted	Not Complete	<p>Morton Hall IRC will inquire into the reasons for the large number of complaint withdrawals and analyse and review these with stakeholders and detainees.</p> <ul style="list-style-type: none"> The volume of withdrawn complaints, reasons and issues arising will be included in the analysis of complaints data at the Performance and Assurance meeting. Where necessary further action will be taken to address any issues. Consultation will be held with detainees to discuss why many complaints are withdrawn and determine if earlier action would have prevented the need for a complaint to have been made. Home Office (DES) will also conduct improved analysis of withdrawn complaints as part of assurance processes used to improve the complaints system. 	6 months
2.28 – General Recommendation	Centre Manager	Respect	Equality, Diversity and Faith – Strategic Management	Staff and detainees should be briefed in full and given clear written guidance on how detainees can report incidents of alleged discrimination.	Accepted	Not Complete	<p>Morton Hall IRC will ensure there is clarity on how, when and through what process staff and detainees can report any incident of alleged discrimination.</p> <ul style="list-style-type: none"> The Equalities manager will develop and provide training for staff and awareness materials for detainees on the introduction of the Discrimination Incident Report form (DIRf) process. Written guidance on the DIRf process to support awareness activity will be made available to staff and detainees in a range of languages. The DIRf process will be introduced as the single reporting system for raising diversity and equalities complaints for both staff and detainees at the Centre. Governance and analysis of DIRf's will be considered at the DEAT meeting. 	12 months

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2.34 – General Recommendation	Centre Manager	Respect	Equality, Diversity and Faith – Protected Characteristics	The centre should investigate and address the reasons for the under-disclosure and/or under-recording of protected characteristics.	Accepted	Partially Complete	<p>Morton Hall IRC will introduce measures to address gaps in recorded data and investigate under disclosure of protected characteristics and take action where possible to improve this.</p> <ul style="list-style-type: none"> • A confidential email and telephone number are available to detainees to contact the Equalities Manager about any diversity issues. This will be further promoted as a route by which detainees can disclose protected characteristics less publicly. • A range of methods will be used by the Equalities Manager to connect and consult with detainees to identify the reasons for under representation of protected characteristics. These may include; individual interviews, focus groups and anonymous testing to identify why there is a reluctance to declare these. • Identified reasons or themes for under reporting of protected characteristics as a result of consultation activity will be referred to the DEAT. The DEAT will consider appropriate activity to address poor disclosure, this will be added to the equalities action plan and tracked through the DEAT. • A process to facilitate read across to other departments systems such as healthcare will be put in place to ensure all data is captured, recorded and referred to the equalities manager. 	12 months
2.55 – General Recommendation	Centre Manager & Head of Healthcare	Respect	Health Services – Governance Arrangements	The confidential health care complaints process should be well advertised and forms should be available in various languages.	Accepted	Partially Complete	<p>The confidential health care complaints process will be enhanced to improve its accessibility to detainees.</p> <ul style="list-style-type: none"> • The Trust’s service liaison team have been approached to provide translated complaints forms in the top five languages which will be available on site. • This change and information about the confidential health care complaints process will be advertised clearly in the Healthcare Department and on the residential units. 	6 months

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2.56 – General Recommendation	Centre Manager & Head of Healthcare	Respect	Health Services – Governance Arrangements	Responses to concerns should include information on how a detainee can escalate their concern if they are dissatisfied with the response.	Accepted	Partially Complete	<p>Information provided to detainees in written responses from healthcare staff in relation to concerns they have raised will be amended to include details about methods of appeal.</p> <ul style="list-style-type: none"> Healthcare Staff who manage responses to concerns have been reminded of the information they must include in their written responses to concerns and advice informing the detainee of how to pursue the matter if they remain dissatisfied. Clinical Matrons will also provide more detailed support and instruction to senior practice nurses during management supervision sessions on how these matters should be addressed. 	6 months
2.65 – General Recommendation	Centre Manager & Head of Healthcare	Respect	Health Services – Primary Care and Inpatient Services	Detainees requiring assessments under Rule 35 should be seen promptly by GPs who have received relevant training.	Accepted	Partially Complete	<p>Whilst every effort is made for detainees requiring assessment under rule 35 to see a GP promptly this is currently restricted by the volume of appropriately trained GP's available.</p> <ul style="list-style-type: none"> The Rule 35 waiting list is monitored on a weekly basis and additional clinics will be facilitated when possible to reduce waiting times. Two GP's are now available to complete Rule 35 assessments following peer training. Further Home Office training has been requested for more GPs to complete the training to deliver the assessments and this is being progressed. The subject of GP training, and rule 35 assessment waiting time improvements will be kept under review through the quarterly Partnership/CRM meetings with NHS commissioners. 	6 months
2.72 – General Recommendation (Repeat Recommendation)	Healthcare Provider	Respect	Health Services – Mental Health	Detainees should be transferred to external mental health facilities within Department of Health target timescales.	Accepted	Partially Complete	<p>The Mental Health team robustly manages transfers to external mental health facilities to ensure a successful transfer within Department of Health timescales which includes daily contact with the external provider and escalation to NHSE Commissioners if delays are experienced.</p> <p>Once a place in a secure hospital is secured, the transfer is usually expedited within 24hrs.</p> <p>The above is subject to community health providers assessing and allocating places in a timely manner.</p>	6 months

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3.18 – General Recommendation	Centre Manager	Activities	Education and Work	Peer supporters should receive training, supervision and support.	Accepted	Partially Complete	<p>Morton Hall IRC will ensure better supervision and management of detainee Peer Supporters is provided.</p> <ul style="list-style-type: none"> The role of Peer Supporters and the scope of their work will be defined through the job specification document and include new proposed work such as equalities support. Appropriate training and awareness of the role will be developed and delivered to new and existing Peer Supporters. A Custodial Manager will provide a prescribed method of supervision which oversees their activity, provides guidance and resolves issues. 	6 months
4.17 – General Recommendation	Home Office	Preparation for Removal and Release	Communications	Detainees should have access to social networking sites to support contact with family and friends.	Partially Accepted	Partially Complete	<p>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.</p> <p>Detention Services Order (04/2016) on access to the internet was published in May 2016 and does not currently permit access to social networks.</p> <p>The Home Office recently undertook a pilot at selected immigration removal centres on the use of Skype and similar platforms. Following this pilot, video calling has been rolled out to immigration removal centres across the detention estate.</p> <p>Access to Skype was introduced at Morton Hall in November 2019.</p>	6 months
4.18 – General Recommendation	Centre Manager	Preparation for Removal and Release	Communications	The centre should ensure that detainees can receive a good mobile phone signal in all parts of the centre.	Partially Accepted	Not Complete	<p>This recommendation is partially accepted as whilst every effort is made to provide a good mobile phone signal this is limited by technology, the structure of the building and geographical factors outside the control of Morton Hall IRC.</p> <ul style="list-style-type: none"> There has been extensive exploration to improving the signal and boosters have been added. To minimise disruption to calls, and frustration signs will be placed around the Centre to inform detainees where a better signal can be found. HOIE are exploring further additional options for improving mobile phone reception on the site. 	12 months
4.25 – General Recommendation	Centre Manager and Home Office	Preparation for Removal and Release	Leaving the Centre	The Centre Manager and the Home Office should monitor the number of detainees being released to no fixed address.	Accepted	Complete	<p>A HOIE (DET) local spreadsheet has already been put in place in each IRC to record the reference and date (of release) of every person released without an address.</p>	6 months

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4.26 – General Recommendation	Home Office	Preparation for Removal and Release	Leaving the Centre	The Home Office should take action to ensure that all detainees released without means have access to settled accommodation.	Not Accepted		<p>The Home Office does not provide accommodation, at taxpayers' expense, as a matter of course to migrants in the UK unlawfully who could leave but do not choose to do so.</p> <p>Accommodation is provided to the following: asylum seekers who would otherwise be destitute; failed asylum seekers who would otherwise be destitute; and foreign national offenders who meet the harm criteria set out in published guidance.</p> <p>Accommodation is also provided where such provision is necessary to avoid a breach of a person's rights under Article 3 of the European Convention on Human Rights.</p>	