

SERVICE IMPROVEMENT PLAN - UNANNOUNCED INSPECTION OF COLNBROOK IRC

Rec No	Recommendation Addressed to	Primary Theme	Secondary Theme	Sub Theme	Repeated Recommendation	HMIP Recommendation	Accepted / Partially Accepted / Not Accepted	Progress	Action taken / proposed	Expected completion within [6/12/18 months]
5.1	Home Office and Centre Manager		Main Recommendation			<p>The centre should monitor Rule 35 reports to ensure they are submitted when necessary.</p> <p>Psychiatrists should be able to submit Rule 35 reports concerning the mental health of detainees.</p> <p>Reports should contain sufficient detail to inform a proper assessment of the vulnerability of the detainee. Home Office responses should be timely. Where evidence of torture is accepted, detention should only be maintained in exceptional circumstances. (S36)</p>	Partially Accepted	Ongoing	<p>Home Office published guidance, Detention Services Order (DSO) 02/2016, provides advice on the preparation and consideration of reports submitted in accordance with rule 35 of the Detention Centre Rules 2001, as amended by the Detention Centre (Amendment) Rules 2018 (SI 411/2018). This guidance sets out who may prepare a report, how a report should be prepared and what steps the Home Office should take in considering the report and a timescale for providing a reply.</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. A medical practitioner is defined by the Rules as someone who is vocationally trained as a general practitioner and a fully registered person within the meaning of the Medical Act 1983. Other healthcare professionals (whether working in the immigration removal centre (IRC) or elsewhere) may assist in the examination or assessment of detainees and in the preparation of reports but the final responsibility for making a report rests with the doctors.</p> <p>Psychiatrists are not currently able to complete rule 35 reports, as the submission of these reports is limited only to GPs through the detention centre rules. However, this is subject to consultation (which began on 27th March) as part of the review of the removal centre rules. In the draft rules we have proposed extending the completion of rule 35 reports to other healthcare professionals including psychiatrists.</p> <p>Home Office responses to Rule 35 reports are reviewed and authorised by a senior officer as a first line assurance measure. In addition, the Home Office carry out second line quality assurance through dip sampling responses and the use of an agreed Quality Assurance Framework. Feedback is provided to casework teams to ensure consistent and continuous improvement in Home Office responses to Rule 35 reports.</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, casework teams will contact the doctor responsible for making the report to ascertain additional details.</p> <p>The detainee, any legal representatives and the reporting doctor will receive the Home Office response to the Rule 35 report.</p>	N/A
5.2	Centre Manager		Main Recommendation			<p>The living environment for all detainees should be more open and security restrictions should be proportionate to the risks presented. Detainees should not be locked in their cells. (S37)</p>	Partially Accepted	Completed and Ongoing	<p>Published Home Office guidance, DSO 4/2018 Management and Security of Night State, outlines the standards and general principles of how the night state should be operated across the estate to ensure a consistent approach is taken. The implementation of night state will be dependent on the physical layout of each centre. Local arrangements at Colnbrook have been agreed by the Home Office and have been assessed as balancing the need to maintain safety and security with the dignity and welfare of detainees.</p>	N/A

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5.3	Centre Manager		Main Recommendation			Residential units should be kept clean, in good repair and well ventilated. Rooms should be sufficiently furnished to allow for storage and security of possessions and all showers and toilets should be properly screened. (S38)	Partially Accepted	Completed and ongoing	<p>The oversight of the fabric and cleanliness of the residential units is now overseen by a Mitie Care and Custody manager who conducts regular inspections to ensure that daily cleaning standards are maintained.</p> <p>A deep clean of all areas has commenced and improvements are underway including; renewal of flooring (where required) and floor polishing, a redecoration programme and the screening of in room toilet facilities which will be completed by June 2019.</p>	6 months
5.4	Home Office	Safety	Legal Rights		Y	There should be a strict time limit on the length of detention and caseworkers should act with diligence and expedition. (1.66, repeated recommendation 1.62)	Partially Accepted	Completed and Ongoing	<p>A time limit on immigration detention is not only unnecessary but would also severely limit the Government's ability to use detention as an effective means of enabling removal from the UK. The imposition of a time limit would serve only to encourage those who seek to frustrate the removal process until the time limit is reached and release guaranteed. This part of the recommendation is therefore not accepted.</p> <p>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>	
5.5	Home Office	Safety	Safeguarding	Safeguarding of vulnerable adults		The Home Office should ensure that the centre has an up-to-date record of adults at risk, so that targeted support can be provided. (1.22)	Accepted	Completed and Ongoing	<p>The Home Office provides a weekly list of detained individuals recognised as Adults at Risk to each IRC. The information highlights each person's level of risk and provides an opportunity for IRC Healthcare, contractor staff and Home Office staff to comment and add any additional relevant detail. This feedback is shared with case-owners who will consider any updates and review detention of individuals, where appropriate.</p> <p>Material or urgent changes to the vulnerability of individuals are communicated through other established reported mechanisms, such as Rule 35 of the Detention Centre Rules 2001 and IS.91R Part Cs. All "live" changes on individual cases can be obtained through access to the Home Office Case Information Database, pending the updates being made to the weekly list.</p>	N/A
5.6	Home Office	Safety	Legal Rights		Y	All detainees at the detention advice surgeries should be given enough time to explain their circumstances and receive advice over the full allocated half-hour interview. (1.65, repeated recommendation 1.56)	Accepted	Completed and Ongoing	<p>The Legal Aid Agency (LAA) operates legal advice surgeries across the immigration removal centre estate in England, through facilitated services.</p> <p>Advice Surgeries at Colnbrook IRC are held three times per week with 10 appointments available each day. There is no limit to the number of times a detainee can access this service and detainees are entitled to receive up to 30 minutes of advice regardless of their financial eligibility or the merits of the case.</p> <p>The LAA works closely with each IRC to monitor capacity and will address any issues with provision when the need arises.</p>	N/A

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5.7	Home Office	Respect	Mental Health			Detainees who are experiencing severe and acute mental illness should not be in immigration detention. (2.65)	Accepted	Ongoing	Individuals with mental health conditions fall within the scope of the adults at risk in immigration detention policy. This means that such individuals will be detained, or their detention continued, only when the evidence of vulnerability in their particular case is outweighed by the immigration consideration that apply in their particular case.	N/A
5.8	Home Office	Activities	Access to Activities		Y	The Home Office should not prevent detainees from working. (3.11, repeated recommendation 3.16)	Not Accepted		<p>Paid activities in detention are provided to occupy detainees' time, to offer training and certification which detainees can use in the future and, for those with limited funds, to earn money to make purchases of items not provided while in detention.</p> <p>DSO 01/2013 sets out the Home Office policy for eligibility to engage in voluntary paid activities. Those detainees who are not actively engaging with the resolution of their immigration case may be prevented from participating in paid activities in accordance with this guidance.</p>	
5.9	Home Office	Preparation for Removal and Release	Communications		Y	Detainees should have access to Skype and social networking sites unless an individual risk assessment determines that this is inappropriate. (4.25, repeated recommendation 4.18)	Partially Accepted	Ongoing	<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 or Skype.</p> <p>The Home Office is undertaking a pilot at selected immigration removal centres on the use of Skype and similar platforms. The outcome of this pilot will be used to inform future operational policy for the removal estate.</p>	
5.10	Home Office	Preparation for Removal and Release	Leaving the Centre			The process of having involuntary 'reserves' for chartered flights should cease. (4.35)	Not Accepted		<p>The Home Office has a responsibility to deliver value for money to the taxpayer. Maximising the use of charter flights is an important part of this.</p> <p>The Home Office can receive legal challenges until the point of removal that may result in removal action being suspended. Likely attrition rates are forecasted, and the number of bookings capped when required, meaning it is unusual for flights to have "unused reserves". If this were to happen, we would seek to return such individuals as quickly as possible on the next charter or a scheduled flight.</p>	
5.11	Home Office and Centre Manager	Preparation for Removal and Release	Leaving the Centre			Complex removal meetings should focus on detainees with vulnerabilities and their resettlement needs, as well as detainees who might prove refractory. (4.34)	Accepted	Ongoing	<p>As part of the response to the second independent review by Stephen Shaw into immigration detention the Home Office reviewed all meetings held in IRCs to ensure they were being conducted with consistency and were effective. Complex removal meetings formed part of this review and look at the needs of any potentially vulnerable detainee and how these needs can be managed to support and ensure their return or resettlement.</p> <p>The Home Office plans to pilot an incentivised reintegration scheme for enforced returns in April. If successful, this model will be rolled out nationally.</p>	6 months

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5.12	Centre Manager	Safety	Arrival and early days in detention			Newly arrived detainees should have a private interview with a member of the centre staff, who should give them adequate information in their own language about services and support available. (1.6)	Accepted	Ongoing	<p>Mitie Care and Custody are putting in place arrangements to ensure that all detainees are offered a private interview to take place within 24 hours of their admission. Detainees will be made aware of this provision through prominent multi lingual posters displayed throughout the centre.</p> <p>Options are being explored to increase privacy at the reception desk by introducing booths. Consideration is being given to introducing welfare staff in the reception area. In the future, all induction documentation provided to detainees will be made available in translation and accessible through personal digital assistant (PDA) technology.</p>	6 months
5.13	Centre Manager	Safety	Arrival and early days in detention			Every detainee should spend their first night in a cell which is in a decent condition. (1.7)	Accepted	Ongoing	<p>Mitie Care and Custody are increasing the focus on checks made on rooms pre-occupation. This will include checking for graffiti and ensuring that the cleanliness and fabric of the room and its fittings is appropriate. Management spot checks will increase in frequency and the repair of faults will be prioritised in these areas.</p> <p>A deep clean of all toilets and showers on the induction unit will be conducted. A programme to replace bedding has been put in place and stocks of replacement items have been increased.</p>	6 months
5.14	Centre Manager	Safety	Arrival and early days in detention			Every detainee should gain an understanding during induction of how to feel safe and how to access all key activities and services in the centre, supported by written information which they can understand. (1.8)	Accepted	Completed and Ongoing	<p>Mitie Care and Custody have conducted a full review of the induction package and processes. An analysis is underway of the most frequent languages spoken by detainees to inform the translation of centre documentation. Electronic PDA devices will be introduced to assist staff with the multi lingual delivery of the induction programme. The induction programme will be expanded to include the participation of world faith staff.</p> <p>Revised training will be given to all staff employed in the welfare department and those conducting inductions to embed the new arrangements; this will include refresher training where required.</p>	6 months
5.15	Centre Manager	Safety	Safeguarding Children			All detainees whose age is in dispute should have a multidisciplinary care plan and prompt, thorough assessments, which ensure that children are identified and released from detention. (1.32)	Accepted	Completed and Ongoing	<p>The Home Office is bound by section 55 of the Borders, Citizenship and Immigration Act 2009 which places the Secretary of State under a statutory duty to make arrangements to safeguard and promote the best interests of children and it is Home Office policy to not detain children or those whose age is disputed.</p> <p>Age dispute cases are managed in line with Detention Services Order 14/2012 'Care and Management of Age Dispute Cases'.</p> <p>Detention Engagement Team staff in all IRCs are required to identify and flag any concerns or potential vulnerabilities including age concerns and flag these to the relevant case owner for consideration and action.</p> <p>Multidisciplinary care plans are initiated for all detainees whose age is in dispute. Systems are in place to ensure these plans accompany individuals on discharge / transfer from the centre.</p> <p>Mitie Care and Custody will re-issue a reminder of age dispute guidance and published processes to all staff.</p>	6 months

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5.16	Centre Manager	Safety	Personal safety			All allegations of antisocial behaviour or violence should be fully investigated and acted on accordingly. Detainee custody officers should understand and apply the centre's violence reduction and anti-bullying policies. (1.37)	Accepted	Ongoing	A review is underway of the centre's violence reduction and anti-bullying strategy. This will include a review of staff training on anti-bullying processes and development of a training package for managers. Learning bulletins will be issued to all staff. Restorative justice processes are being investigated for feasibility and best practice. Detainees who perpetrate or are victims of antisocial behaviour or violence will be monitored and appropriate action taken.	6 months
5.17	Centre Manager	Safety	Security and freedom of movement			Detainees should not be routinely handcuffed during escorts or hospital appointments. Restraints should be applied only if a risk assessment indicates a specific risk of escape or to the safety of the public, staff or other detainees. (1.45)	Accepted	Completed and Ongoing	In accordance with Detention Service Order (07/2016) Use of Restraints, the decision to use handcuffs is made on the basis of a dynamic risk assessment, taking into account circumstances and safety of all individuals concerned. The use of restraint by custody officers is closely monitored to ensure that the use of restraint is reasonable, necessary and proportionate. Mitie Care and Custody have provided risk assessment training to all senior managers which is now being expanded to all middle managers. The training ensures that risk assessments are thorough and that where handcuffs are deemed appropriate, the reasons for this are highlighted.	6 months
5.18	Centre Manager	Safety	Security and freedom of movement			There should be a coordinated, centre-wide approach to substance supply and reduction, including a detailed strategy, regularly monitored action plans, and forums for systematic discussion of substance use. (1.46)	Accepted	Ongoing	A multi-agency review of the centre's drugs strategy has been arranged which will lead to the development of a drugs and wellbeing programme. Drug detection equipment has been purchased and processes for its use will be put in place and integrated into the drugs strategy. Drug find statistics will be used to identify emerging trends and concerns, which are reported monthly to the Home Office and reviewed in the security meetings.	6 months
5.19	Centre Manager	Safety	Use of force and single separation			All planned use of force incidents should be video recorded and body-worn cameras routinely turned on during spontaneous incidents. (1.53)	Accepted	Ongoing	New body worn cameras (BWC) have been purchased enabling the recording of any spontaneous incident that should occur. Final installation and training on use is to be arranged. BWC devices will be assigned daily to the Duty Shift Manager and a DCO within the Response Team, Healthcare Medication (Day Shift Only), Care and Separation Unit, and the external escort teams. Mitie Care and Custody are developing appropriate training packages which will be provided as part of the Initial Training Course and refreshed annually. Processes for downloading and retaining video footage are being developed in accordance with Detention Services Order (04/2017) Surveillance Camera Systems.	6 months
5.20	Centre Manager	Respect	Staff-detainee relationships		Y	Officers should be visible in units and interact regularly and positively with individual detainees to help support them during their detention. (2.4, repeated recommendation 2.14)	Accepted	Completed and Ongoing	Mitie Care and Custody have conducted an organisational structure review to ensure closer and more effective frontline management of Residential Units. Managers will be encouraged to promote on-unit activities, increase engagement with detainees and challenge inappropriate behaviours. Daily tasks will be allocated to give specific officers responsibility for patrols and engagement during shifts. Interpersonal training will be refreshed.	6 months

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5.21	Centre Manager	Respect	Daily Life	Living conditions	Y	The centre should ensure that exercise yards offer a welcoming environment. (2.9, repeated recommendation 2.6)	Partially Accepted	Completed and Ongoing	<p>There are limitations to the extent of improvements that can be made to the courtyard areas due to the centre's design.</p> <p>Mitie Care and Custody have improved the courtyard areas with sporting murals, paintings, external gym equipment, and picnic benches to soften the areas and make the courtyards more functional and accessible to detainees.</p> <p>A review will be undertaken of staff scheduling of the activities team to enable delivery of more exercise yard-based activities and events.</p>	6 months
5.22	Centre Manager	Respect	Daily Life	Living conditions		Women should have access to sufficient suitable activities both on and off the unit. (2.10)	Partially Accepted	Completed and Ongoing	<p>Mitie Care and Custody will review opportunities to maximise access to activities for women on and off their accommodation unit.</p> <p>Areas within the women's accommodation will be made suitable to hold exercise classes and sessions delivering calming / mediation techniques. Daily access to the centre's gym will continue to be promoted.</p> <p>Targeted promotion of existing activities (e.g. yoga classes) will be undertaken to encourage women to attend.</p> <p>Art classes are now delivered on unit by a tutor 3 times a week.</p>	6 months
5.23	Centre Manager	Respect	Daily Life	Detainee consultations, applications and redress		Food should provide a healthy, balanced diet and all diets should be catered for. (2.17)	Accepted	Completed and Ongoing	<p>The centre's menu is designed in consultation with detainees and is reviewed regularly through Catering Consultation meetings. A new initiative of seasonal menus will be introduced. All specialist diets are catered for, including for detainees with medical needs. Enhanced allergy awareness will be promoted to staff and detainees.</p> <p>The monitoring of portion sizes will be reiterated to servery staff.</p>	12 months
5.24	Centre Manager	Respect	Equality, diversity and faith	Strategic management		A regular cycle of equality meetings, with data analysis and progress reports relating to all protected characteristics, should lead to measurable improvements in outcomes for detainees. (2.20)	Accepted	Completed and Ongoing	<p>Monthly equality meetings have been established and are taking place; meetings are minuted and are available to staff and detainees.</p> <p>A dedicated equality, diversity and inclusion officer will be appointed to undertake increased analysis of the data gathered. This information will be used to improve and inform centre processes such as the extent of translated material, the range of activities provided and the composition of menus.</p>	6 months
5.25	Centre Manager	Respect	Equality, diversity and faith	Protected characteristics		All detainees' protected characteristics should be systematically identified on arrival and support offered where necessary. (2.26)	Partially Accepted	Completed and Ongoing	<p>Where detainees make their protected characteristics known to staff, referrals will be made to staff who lead on equality, diversity and inclusion. Where necessary care plans will be initiated including personal emergency evacuation plans (PEEP). The centre provides large print books, audio books, and braille keyboards for detainees with sensory disabilities; and obtains aids for physical disabilities when required.</p> <p>Mitie Care and Custody work collaboratively with Central and North West London NHS Foundation Trust (CNWL) to determine how detainees with social care needs can be more appropriately supported whilst at the centre.</p>	6 months

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5.26	Centre Manager	Respect	Equality, diversity and faith	Protected characteristics		Interpreting should be used on all occasions where confidentiality is required, or where no alternative is available, to ensure that detainees understand information they are being given and can express themselves. (2.27)	Accepted	Completed and Ongoing	<p>Arrangements for staff to use professional telephone interpretation are already in place for all confidential interactions with detainees. Staff will be reminded to use the interpretation service wherever necessary to ensure that the content of any message being conveyed is understood, and to record this action appropriately.</p> <p>If a detainee prefers to utilise peer interpretation or a member of staff, then this will be facilitated. However, in all other cases telephone interpretation is utilised. A record of this is logged on the detainee management system.</p>	
5.27	Centre Manager	Respect	Health Services	Governance arrangements		Health care staff should have regular recorded clinical and managerial supervision. (2.45)	Accepted	Completed and Ongoing	<p>Central and North West London (CNWL) NHS Foundation Trust have reviewed systems and processes and strengthened the existing arrangement for staff supervision in line with Trust policy. This has resulted in a strengthened plan that is delivering both individual and group supervision.</p> <p>A robust action plan has been implemented by the Senior Management Team, with all actions completed. This includes but is not limited to updated supervision logs, supervision expectation reminders sent to staff and discussed at staff meetings, use of supervision contracts and a standardised template for recording supervision. Supervision training and Governance of supervision arrangements has also been implemented. Completion figures are now monitored through a monthly KPI (supervision completed within last 4-6 weeks) and are reported to the monthly Offender Care Business and Performance SMT meeting for oversight and scrutiny.</p>	
5.28	Centre Manager	Respect	Health Services	Governance arrangements		Health information, including health promotion material, should be available in a range of languages and visible signs should promote the availability of translated material. (2.46)	Accepted	Completed and Ongoing	<p>A range of posters are now on display advising detainees of healthcare services available at the IRC which have been translated into 8 languages and in an easy read format. Posters advising detainees that health information can be translated are also on display along with information in reception, waiting areas and in the healthcare department and leaflets available in these areas and on request. Health promotion information is available in a number of languages including diabetes, cancer awareness and heart disease.</p> <p>A process has been established to ensure posters and health information is in place and updated monthly. The patient engagement lead continues to hold regular detainee forums to gather feedback from detainees and address any gaps in healthcare information needed.</p>	
5.29	Centre Manager	Respect	Health Services	Governance arrangements		The use of professional telephone interpretation should be used more consistently, and detainees should not be used as interpreters in confidential health appointments. (2.47)	Accepted	Completed and Ongoing	<p>Information on detainees who require an interpreter can be recorded on the electronic healthcare records system, SystemOne.</p> <p>A monthly report detailing the use of translator services is now received by the service and will ensure we are able to provide this information in future. Evidence of usage during the time of this inspection was subsequently provided to the inspection team.</p> <p>All staff were advised immediately that detainee peers must not be used as interpreters for other detainees during confidential health appointments and this practice has ceased. Written confirmation of this requirement has also been sent to all staff.</p>	N/A

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5.30	Centre Manager	Respect	Health Services	Governance arrangements		The automated external defibrillators (AEDs) available to centre staff should be regularly checked via a robust monitoring system and all staff on duty should know the location of the nearest AED. (2.48)	Accepted	Completed and Ongoing	All healthcare staff have been made aware of the location of AEDs in the centre and will receive regular reminders to this effect. Posters signposting the location of AEDs are on display and daily checks of the machines are in place.	N/A
5.31	Centre Manager	Respect	Health Services	Mental Health		The range and frequency of interventions for detainees with mild to moderate needs should be increased. (2.64)	Accepted	Completed	Current service provision of healthcare is determined by NHS England and CNWL works to provide a robust service within the healthcare commissioning structure. There is an established mental health and wellbeing pathway which works as a stepped care model responding to the nature of a detainee's medical presentation and in the context of their length of stay.	N/A
5.32	Centre Manager	Activities	Access to activities			Activities inductions should ensure that all detainees are aware of the activities available and how they might help them. (3.10)	Accepted	Ongoing	The centre will introduce skills and educational needs assessments to detainees as part of the revised induction programme. This may include referrals to education staff. Promotion of activities within the centre will seek to categorise them to make their purpose clearer to detainees.	6 months
5.33	Centre Manager	Activities	Access to activities			Managers should effectively monitor the quality of provision and undertake a self-assessment to inform future improvement plans. (3.12)	Accepted	Ongoing	An analysis of activities attendance statistics is being undertaken which will lead to the implementation of new measures to ensure better communication and promotion of activities to underrepresented groups. This work will be continued through a newly established monthly regimes meeting which will monitor all aspects of regime and activity provision and develop future improvements. An equipment review will be undertaken to establish condition, availability and repair / replacement needs. Systems will be reviewed to ensure detainees are accountable for items and their safe return.	6 months
5.34	Centre Manager	Preparation for Removal and Release	Welfare			There should be sufficient staff oversight of the tasks undertaken by detainees employed in the welfare office, particularly regarding the completion of forms for other detainees. (4.9)	Partially Accepted	Completed and Ongoing	The layout of the welfare office has been redesigned and processes reviewed to support confidentiality, better control of detainee flow and encourage peer support. The buddy system of fellow detainees operates using detainees who are specially selected for the role. Changes to the layout of the welfare office have ensured that supplier staff are better able to offer oversight and supervision of the work undertaken by buddies. Quality assurance processes will be developed to ensure forms are completed appropriately.	6 months
5.35	Centre Manager	Preparation for Removal and Release	Visits and family contact			The centre should identify detainees who do not receive a visit. They should be supported to ensure they are not at an increased risk of isolation and heightened vulnerability, and referrals made to support organisations as necessary. (4.19)	Partially Accepted	Ongoing	The centre will investigate the production of a report from the electronic detainee management system, to indicate detainees who have not received a visit over a determined period. Detainees who have been identified through this report will be signposted to visiting and befriending groups for support to be provided. Details of these groups will be included in detainee induction packs and establishing visiting needs will form part of the admission process for detainees.	6 months

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5.36	Centre Manager	Preparation for Removal and Release	Leaving the centre			Detainees should be routinely seen on arrival and before discharge to ensure that welfare matters are identified and addressed. (4.33)	Accepted	Ongoing	<p>Mitie Care and Custody are conducting a full review of induction processes to include 1 to 1 meetings within 24hrs of the detainee's arrival at the centre.</p> <p>Processes will be put in place to ensure all detainees are seen by the Welfare Team prior to being released. To assist with smooth transition releases the centre will undertake further development of their community outreach capacity.</p>	6 months