

## **Asylum Support - Assurance Action Plan**

This plan captures objectives and actions arising from:

- a detailed and careful analysis of the Independent Chief Inspector of Borders and Immigration's (ICIBI) report into asylum accommodation produced in July 2018;
  - revisiting the findings of previous reports, in particular the Home Affairs Committee's report published in January 2017, and the Internal Audit report of January 2018 into the COMPASS contracts;
  - consultation with stakeholders, including local authorities and other local and regional stakeholders through the regional Strategic Migration Partnerships (SMPs), and national non-governmental organisations through the National Asylum Seeker Forum (NASF) structures, and with our Providers; and
  - internal assurance work to test and validate potential areas for improvement. This work was commenced by the Asylum Support Assurance Team in 2017 but was paused to facilitate the inspection and has now been combined with the work needed subsequently.
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- The Home Office Commercial Directorate has also revisited previous commercial reports and validated that their findings have been acted on fully.
  - The ICIBI recommended that the Home Office should produce a consolidated action plan by 1<sup>st</sup> October 2018. Whilst most of the projects in the plan commenced prior to that date, it was also important to be rigorous in developing and testing the plan to ensure that its objectives adequately covered the improvements that were desired in the system and that the actions would effectively deliver those objectives. Having developed the plan internally, the Home Office consulted stakeholders in September in order to be able to validate and formally launch the plan on 1<sup>st</sup> October.
  - Whilst the ICIBI made 9 recommendations, the assurance plan developed for 1<sup>st</sup> October captured objectives and actions of 25 different projects to improve services and processes. These have since been augmented to 27 projects following further consultation. Feedback to date has also provided considerable assurance that stakeholders are supportive of the plan, that they believe it is focused on the right things, and that the actions in the plan will effectively deliver the objectives. The plan will be further refined, augmented and informed in consultation with stakeholders as it proceeds.
  - A Senior Civil Servant is overseeing the action plan and has implemented a robust project management structure for its delivery, monitoring progress weekly with project owners and with a dedicated Assistant Director providing central co-ordination. Further validation is provided by the Asylum Support Assurance Board and by ongoing engagement with stakeholders.

Theme	Objectives	Progress	Key Deliverables	Due Completion Date
A. Customer expectations, resolution and insight	1. To ensure that customers are given clear, consistent and appropriate expectations about the service they should receive, and to whom they should come if they do not, from the start of the process and in a language they can understand.	We have completed a call for evidence and induction material has been collated from Providers, the NHS, Migrant Help, Police and best practice from Syrian Resettlement Scheme. The scope has broadened to look at orientation and life in the UK as well as customer expectations. Next step: UKVI internal working group to agree content for a standardised induction pack running in tandem with a consultation with stakeholders to begin in January.	Core induction pack produced, consulted on and signed off	January 2019
	2. To ensure that complaints procedures across UKVI and providers are clearly accessible without fear of disadvantage, provide effective resolution for legitimate complaints, and their results are meaningfully used to assist understanding of the health of the service.	The UKVI Customer & Process Improvement Team has conducted a thorough review of complaints procedures and has made six recommendations which are currently being implemented.	Revised UKVI and provider complaints processes in place	Review completed. Processes in place December 2018. Monitoring and data complete by March 2019.
	3. To ensure that incident reporting procedures across UKVI and providers provide effective visibility, escalation and monitoring of incidents involving service users.	The COMPASS Secretariat has reviewed incident reporting processes with relevant parties. Further analysis of information held will take place by 30 <sup>th</sup> November, followed by a two-month monitoring period and continual improvement thereafter.	Revised UKVI and provider reporting processes in place	Revised processes in place November 2018. Monitoring/ further improvement to complete by January 2019.
	4. To ensure that customer insight is captured, analysed and fed back into continuous improvement.	We have consulted NGOs and developed a proposition to conduct customer insight research with recently granted asylum seekers. In addition, we are currently recruiting a post to specifically lead on	Robust customer insight solution in place and informing continuous improvement	TBC dependent on the solution that is approved

		customer insight work across Asylum Support.		
B. Vulnerable customers and safeguarding (these items are being further validated and supplemented by the monthly Safeguarding Working Group (SWG) we have set up across the providers, and by the NASF Equalities Sub-group)	1. To ensure that relevant customer vulnerabilities are identified as far as possible from the start of the customer journey.	The pilot we were undertaking at the time of the inspection, to ensure that customer vulnerabilities were identified and communicated more reliably from the start of the process, has been concluded and brought into regular business as usual. Providers report that they are receiving the information they need much more reliably than before. Monitoring to continue with further improvement if needed.	Pilot fully brought into normal business, monitored and any further improvements made.	Brought into BAU September 2018. Monitoring/ further improvement to complete by December 2018.
	2. To ensure that our providers' safeguarding activities fit effectively with UKVI policies and processes and with best practice.	A Safeguarding Working Group (SWG) has been convened with senior staff from UKVI and all Providers, meeting regularly from September. The SWG is reviewing all areas of provision to customers in vulnerable groups and is charged with ensuring that best practice flows right across the system.	Fully aligned processes in place across UKVI and providers.	Pursue in tandem and thematically through SWG. Full reviews on pregnant/post-partum women, LGBTQI+, care needs and domestic violence to complete by January 2019.
	3. To ensure that UKVI and our providers consistently keep each other appropriately informed on customer vulnerabilities so that each can take them into account effectively.	Data protection position validated in line with GDPR. This is being taken forward in tandem with B2, so that in looking at best practice provision for vulnerable groups the SWG will ensure that the information flow fully supports that.	Procedures and guidance on sharing of vulnerability and other relevant data	
	4. To ensure that developing IT systems provide for effective capture, visibility and monitoring of vulnerability factors.	An initial pilot of vulnerability matrix to agree indicators completed. Cross BICS discussions ongoing regarding use of ATLAS. Cross-BICS discussions being concluded to agree vulnerability	New system in place and quality assured	June 2019

		indicators, severity levels and other business requirements.		
	5. To ensure that customers with care needs are effectively assessed and accommodated and their care needs are met.	Research conducted, and way forward agreed with National Asylum Stakeholder Forum (NASF) Equalities Group. Revised policy guidance 'Asylum Seekers with Care Needs' developed, published and distributed to key stakeholders. Discussed further at SWG to ensure effective implementation across the system and with LAs through the NRPF network. Feedback to date suggests the new policy is working well.	Revised guidance in place and operating effectively	New guidance in place August 2018. To complete monitoring November 2018
	6. To ensure that victims of domestic violence receive appropriate specialist advice which is acted on and are able to access refuge accommodation where desirable	Engaged with Refugee Council/ASAP to understand their research findings. Developed new policy guidance, devised processes and proposed funding model and secured SWG readiness for implementation. Next steps are to reach agreement with the refuge providers and implement across the system and with NGOs.	Refuge arrangements agreed, new guidance and procedures in place and operating effectively	Dependent on external agreement. Target January 2019
C. Property standards and contract compliance	1. To ensure effective overall scrutiny of provider activities through a sufficient and balanced portfolio of property inspections and audit work	A performance management framework tool has been developed and implemented to better monitor inspection and audit activity. Roles and revised job descriptions have been confirmed and additional staff recruited. Review of resource to be completed by end of December in conjunction with Next Generation Asylum Accommodation contracts transition. Accredited training for all staff completed. Training to be reviewed further by end of 2018. The inspection team will be augmented with additional resource during	Review completed, and findings implemented	December 2018 to complete review. Implement fully by April 2019

		transition to the new contracts. Fully resourced and restructured team to be implemented by April 2019.		
	2. To ensure that UKVI's property inspections are conducted consistently and effectively	Planning and process agreed at an awayday 20 September. All aspects of Standard Operating Procedures are being reviewed and consistent processes to be signed off by January, with revised SOPs to be in place by end of reporting year.	Detailed Standard Operating Procedures and associated training in place	December 2018 for training/ processes. March 19 for SOPs
	3. To seek more alignment and co-operation between UKVI's and local authorities' compliance regimes	Pilot propositions for joint inspections and data sharing have been formulated and agreed with three local authorities. Pilots will commence 3 <sup>rd</sup> December. Benefits of pilots will be monitored and evaluated and a wider approach across LAs implemented.	Pilots agreed and in place with LAs.	Dependent on external agreement. Target December 2018 for pilot implementation, May 2019 for completion
	4. To ensure that contractual requirements on rectifying property defects are enforced consistently and transparently.	This project has now been scoped to include reviewing the KPI regime, including processes, roles and data, and document and implement a consistent methodology which provides clarity and validation to senior managers on all non-conformances, ensures decisions are made in accordance with guidance and with reference to delegated budgetary authority, and that the formal accounting rules are properly applied to all decisions.	Revised UKVI and provider procedures in place	December 2018 for documentation, for agreement in early 2019
	5. To ensure that professional advice is available on maintenance of property standards.	We are in the process of procuring independent professional advice from an industry expert in relation to management of maintenance of property standards.	Property oversight informed by effective professional advice.	TBC depending on the progress of the procurement

D. Accommodation system management	1. To ensure that customers spend no longer than necessary in Initial Accommodation before moving to regular dispersal accommodation	Working group established including managers of relevant functions and analysis undertaken on reasons for delays. Data sets for future more systematic approach are currently being agreed and associated processes being established. Data set outputs will be tested and confirmed as accurate before full implementation.	Enhanced data on IA turnaround and reasons for delays, with more effective procedures in place to ensure timely placements.	March 2019
	2. To ensure that all customer moves are appropriate	UKVI Customer & Process Improvement Team has been commissioned to undertake a full review which is currently at the 'measure' stage. Next steps to include mapping of existing procedures across all teams and baselining of workflow volumes and timings.	Enhanced procedures and data in place to regulate accommodation proposals	March 2019
	3. To ensure that vulnerable customers' specific needs are met when accommodation is allocated	Completion of this project is dependent on the preceding project (D2) to as it is beneficial to first to enhance the wider approach to validating accommodation moves. In the interim we are consulting the NASF Equalities Group and working with Providers through the SWG (B2) to deliver thematic improvements using feedback and targeted audit work to make progress notwithstanding short term data constraints.	To be scoped fully as part of D2	To be planned fully as part of D2
	4. To ensure data management operates sufficiently consistently across providers, and/or that differences are sufficiently understood, to enable fully effective monitoring and comparison of the service in operation across the providers.	This project is being managed across COMPASS and Next Generation Contract domains as key parts need to be managed with incumbent suppliers as part of exit/transition activity to the new contracts. Templates are being developed for standardised data which will be reviewed by end November before	Consistent data package to manage current contract, and support transition to new contracts with defined MI Templates.	Finalised customer & property condition data December 2018. Templates finalised March 2019 and refreshed data available during mobilisation &

		sharing with incumbent suppliers. A dedicated data lead for asylum support has been recruited.		transition to new contracts by September 2019.
	5. To ensure that risk and issue management operate consistently and effectively across UKVI and its providers	An enhanced risk and issue management process has been devised for the COMPASS contracts, allowing for better oversight and challenge of risks and issues sitting with UKVI and/or different providers. This has been fully documented for implementation.	Revised risk and issue management procedures in place	November 2018
E. Dispersal and consultation	1. To ensure we are broadening as far as appropriate the scope of local authority areas to which asylum dispersal operates	We have reviewed and enhanced the way the Widening Dispersal Matrix captures data, in order to provide a more accurate picture of local authority participation in dispersal. A regular monthly Widening Dispersal Working Group in place with Service Delivery Managers. Progress and new initiatives for widening dispersal to be discussed monthly, including formal identification of risks, opportunities and sharing of best practice. Further steps on the asylum dispersal system are under consideration.	Refined data and reappraised position in place	Data completed September 2018. Next steps subject to wider governance and sign-off
	2. To ensure that local authority objections to property use are considered and responded to consistently and effectively.	A draft process document has been circulated, feedback has been received and is under review. This will then be shared with relevant stakeholders for comment.	Standard operating procedure in place	November 2018

	3. To ensure the role of Strategic Migration Partnerships going forward is fully effective	Scoping meeting held in September to discuss review of SMP's/Regional Engagement post-2020 (when current funding ends). Advisory Group established following scoping meeting to meet in November to establish a ToR and commence a formal review. In tandem a review of the current structure of SMP engagement, including relationship with NASF due to commence in January.	Findings of review implemented	Comprehensive call for evidence December 2018. Decisions made March 2019 and implemented in new funding round.
	4. To finalise review of the SEG/NASF structure	Consultation held with key stakeholders on the ToRs, structure and arrangements for Asylum SEG. Currently in the process of agreeing revised ToRs.	Terms of reference (including cascade and membership) to be signed off.	Dependent on external agreement. Target December 2018.
F. Move on and integration	1. To provide evidence-based recommendations to improve the support available during the 'move on' period and the coordination of handoffs between services	Post-grant appointment service evaluated and discussed with stakeholders. Further consultation on going. Move-on board has been established at Director level to drive further work. In addition, joint working group with DWP to meet in November to look at how we prepare people for work.	Pilots evaluated, stakeholder input considered, and further actions implemented.	TBC
	2. To implement any further steps agreed as a result of the Casey review into integration	The Government published the Integrated Communities Strategy Green Paper on 14th March, which took into consideration the evidence from Dame Louise Casey's independent review. The consultation closed on 5th June and the Government is currently considering responses to the consultation.		Dependent on Government Response
G. Asylum support casework	An assurance plan on aspects of asylum support casework will be developed as a further stage of the assurance programme. This will also involve revisiting the recommendations of the ICIBI's previous inspections.			