



Home Office

Detention Services Order 03/2015

Handling of complaints

June 2026



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Document Details

Process: To provide instructions and guidance on the procedure for handling complaints from detained individuals in immigration removal centres (IRCs), contracted short-term holding facilities (STHFs) (Home Office contracted service provider operated); including holding rooms and residential short-term holding facilities, pre-departure accommodation (PDA) and during escort.

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Contains Mandatory Instructions

For Action: Home Office staff, contracted service provider staff and healthcare staff operating in immigration removal centres, short-term holding facilities, pre-departure accommodation and escorting staff.

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Processes Affected: All processes relating to the handling of complaints relating to the detention and escorting estate.

Assumptions: Staff handling complaints have sufficient knowledge of the business areas to be able to substantively address the issues raised by complainants (including current and formerly detained individuals and legal representatives). Home Office staff are aware of the [Complaints Management Guidance and procedures](#) (UK Visas and Immigration, Immigration Enforcement and Border Force), the statutory duty under section 55 of the Borders, Citizenship and Immigration Act 2009 and have completed appropriate training in safeguarding and promoting children's welfare (Keeping Children Safe Tier 1 and higher). All staff are aware of, and compliant with, UKGDPR and the Data Protection Act (DPA) 2018 in relation to the protection of and handling personal data.

Notes: This is an updated version of the previous instruction and in addition, replaces the provisions for complaints set out in the published Operating Standards Manual for IRCs.

Glossary

Term	Description
Annex	Refers to annexes within this document which can be reviewed at www.gov.uk/government/publications/handling-complaints-in-immigration-removal-centres
CCIU	Counter Corruption and Investigations Unit
CEPR	Compliance and Enforcement Person Reference
DCF9	The form used to outline complaints
DCM	Detainee Custody Manager
DECS	Digital External Correspondence System – the IT system used to track and process complaints.
DS	Detention Services
Escorting	The process of moving residents to/from/between the immigration removal estate.
G6	Grade 6 Civil Service staff
G7	Grade 7 Civil Service staff
IEC	Independent Examiner of Complaints
IMB	Independent Monitoring Board
IRC	Immigration Removal Centre
IRE	Immigration Removal Estate. The generic term used to describe all IRCs, STHFs and escorting services covered by this DSO
IRSC	International Returns Service Command
PSU	Professional Standards Unit
SLA	Service Level Agreement
STHF	Short-Term Holding Facility
VCAT	Vetting and Certification Assurance Team
Visiting Committee	Independent Monitoring Board (IMB)

Instruction

Introduction

1. This Detention Services Order (DSO) provides information for all staff and contracted service providers on the handling procedure for complaints raised by individuals detained within the immigration removal estate, including during escort about issues relating to their time in detention, not wider immigration case decisions. The complaints oversight function for Detention Services (DS) is managed by the DS Complaints Team, part of Home Office Immigration Enforcement. The policy applies to all staff in Home Office immigration removal centres (IRCs), pre-departure accommodation and contracted residential short-term holding facilities (RSTHFs), as well as escorting staff.
2. This instruction does not apply to Residential Holding Rooms (RHRs).
3. Two different Home Office teams operate in IRCs:
 - DS Compliance team (Compliance Team)
 - Detention Engagement Team (DET)
4. The Compliance Team are responsible for all on-site commercial and contract monitoring work. The DETs interact with detained individuals face-to-face on behalf of responsible officers within the IRCs. They focus on communicating and engaging with people detained at IRCs, serving paperwork on behalf of caseworkers, and helping them to understand their cases and detention.
5. There are no DETs at RSTHFs, or the Gatwick PDA. Some of the functions which are the responsibility of the DET in IRCs, are instead carried out by the contracted service provider and overseen by the International and Returns Services (IRS) Escorting Operations (Escorting Ops) in RSTHFs. In the Gatwick PDA, the role of detained individual engagement is covered by the local Compliance Team.
6. Separate guidance covers wider Home Office complaints management procedures (UK Visas and Immigration, Immigration Enforcement and Border Force, including Border Force staff in short-term holding facilities), including complaints made by children. Home Office staff will need to familiarise themselves with that guidance. Where those processes are mirrored within the immigration removal estate, they are not duplicated here but do apply. The guidance can be found at:
<https://www.gov.uk/government/publications/complaints-management-guidanceversion-7>.

Purpose

7. This DSO will ensure that all Home Office, contracted service provider and healthcare staff working within the Home Office immigration removal estate are fully aware of the procedure for handling complaints from individuals who are (and where appropriate, those who have been) detained in the immigration removal estate. It also clarifies the handling, investigation and escalation processes for complaints relating to different agencies or areas of service.

Procedures

8. The Detention Services complaints procedure is illustrated by the flowchart at **Annex B**.

Principles for handling a complaint

Definition of a complaint

9. Rule 38 of Detention Centre Rules 2001 and Rule 34 of Short-Term Holding Facility Rules 2018 provide for detained persons to make requests or complaints to the manager, visiting committee (IMB) or Secretary of State of an establishment and require those requests or complaints to be responded to in accordance with procedures approved by the Secretary of State. The guidance set out in this DSO explains the procedure approved by the Secretary of State for handling complaints made by detained individuals. **Annex A** sets out the definitions of complaint types.
10. The definition of a complaint is 'any expression of dissatisfaction about the service we provide, or about the professional conduct of our staff and contractors'.
11. Centre contracted service providers must provide detained individuals with clear information about the complaints process when inducted into each new site in a language they understand. This should include where to find this DSO and its associated Annexes.
12. In many cases, detained individuals would prefer an immediate response to complaints and, where something has gone wrong, putting the matter right and an apology is a good result. In those instances, local resolution may be the most appropriate approach, although escalation via the formal complaints procedure remains an option for the complainant. All formal complaints made using a DCF9 form (**Annex C**), or those in other language formats, must be processed in accordance with the complaints procedure set out below.
13. Detained individuals must be treated fairly, openly and with respect at all times and must not be penalised for making a complaint. The fact that a complaint has been made and is under investigation will not interfere with the consideration of the immigration aspects of an individual's case or their treatment whilst in the centre.

14. Complaints about the following issues will be allocated internally to the relevant Home Office directorate for consideration as appropriate:

- Immigration status and applications to stay in the UK. This includes complaints about Home Office staff and complaints about immigration case progression;
- Legislation;
- Government policy;
- Matters relating to disclosure of information under the Freedom of Information Act, Data Protection Act 2018 or UK General Data Protection Regulations (GDPR);
- Complaints outside the responsibility of the Home Office or IRC contracted service provider, such as those for other Government Departments;
- Complaints lodged by an MP which will be treated as Ministerial correspondence (other than serious misconduct allegations which will be referred to Home Office Professional Standards Unit (PSU) for investigation));
- Requests for transfers to an alternative place of detention are handled by the Detention Services Detainee Escorting and Population Management Unit (DEPMU). Complaints received in relation to the refusal of a transfer request will be investigated by an appropriate DEPMU manager (or a nominated delegate).

Retention of records

15. All information or records (hard copy or electronic) gathered as part of a complaint investigation, are governed by existing policies concerning the retention of information and are required to be retained for a 7-year period (or a minimum of 6 years for evidential CCTV footage). Contracted service provider contracts include this requirement and are linked to the published guidance, [DSO 04/2017 'Surveillance camera systems'](#).

Incidents of a criminal nature

16. If an incident of a criminal nature occurs, or an incident is suspected to be of a criminal nature, contracted service provider staff at the centre must, without exception, immediately report this incident to the police, secure a crime reference number or CAD reference, which should be recorded, and passed to the victim. This should happen even if the detained individual neither wants it reported to the police nor wishes to make a complaint. Any reporting to police should clearly identify the victim, perpetrator, and any witnesses, if appropriate.

17. All allegations of a criminal nature must be reported to the police as soon as the allegation is made. Any such reports to the police made by staff at the centre following a verbal allegation would constitute a verbal complaint. If a complaint is made verbally, staff must accurately record it on a complaints form. This form should be placed in the

complaints box or given directly to the Home Office Compliance Team, who will forward it to the DS Complaints Team for record and allocation to the appropriate team for investigation. A complaint must be recorded and communicated through this channel to the DS Complaints team, even if the detained individual does not wish to make a complaint. The detained individual must be offered the opportunity to contact their legal representative in these cases.

18. For incidents of a criminal nature, this guidance must be used in conjunction with [DSO 02/2020 Commissioning reviews of serious incidents occurring in the immigration detention estate and during escort](#) and [DSO 05/2015 Reporting and communicating incidents](#).

Healthcare complaints (covering England, Scotland & N Ireland)

19. Complaints relating to healthcare in IRCs will be handled confidentially under separate local NHS complaints procedures and different timescales for investigation and response will apply.
20. A healthcare complaint is classed as any expression of dissatisfaction about healthcare services provided within the immigration detention estate, regardless of how those services are commissioned or delivered, or about the attitude, behaviour or conduct of healthcare staff working in those establishments. This includes services commissioned through the NHS as well as those directly contracted by the Home Office (for example, at Dungavel IRC). Complaints may relate to issues such as access to appointments (including delays, waiting times or cancellations), prescribing and medication (including changes, errors, delays or refusal to prescribe), delays in obtaining referrals, and staff behaviour, attitudes and communication.
21. The definition of a healthcare complaint does not include complaints about medical escorts (as healthcare professionals undertaking medical escorts are not providing a service commissioned by the NHS). Nor does it include complaints about the physical healthcare facilities in a place of immigration detention (e.g., insufficient space in the waiting room or lack of privacy). These complaints should be sent to the DS Complaints Team to be allocated for investigation by the appropriate contracted service provider.
22. Expressions of dissatisfaction about healthcare in IRC/STHFs (whether verbal or written – including on a DCF9 form) should be raised with the onsite healthcare provider directly, who will investigate the complaint in line with the NHS complaints procedure.
23. For healthcare complaints that are placed in Immigration Enforcement complaint boxes, these will in the first instance, be passed for assessment to the on-site healthcare manager for the NHS commissioned service at the IRC/STHF. When emptying the complaints box, the Compliance Team will not scan and send healthcare complaints to the DS Complaints Team. The Compliance Team will keep a record of

the date that the complaint was passed to the local healthcare manager and give each complaint a log number. No other information about the complaint will be recorded or further action taken to track the complaint's progress by the Compliance Team, other than the CEPR reference to enable monitoring of healthcare complaint numbers by the DS Complaints Team.

24. When passed a healthcare complaint by the Compliance Team, the local healthcare manager will determine whether the points raised constitute a matter requiring a formal investigation and response or are minor expressions of dissatisfaction that can be handled locally.
25. Healthcare expressions of dissatisfaction that can be handled locally are characterised as matters where:
 - They can be resolved quickly (by the next working day)
 - The patient is satisfied for the concern to be handled locally
 - They do not meet the criteria for a formal complaint
 - No written response is required
26. If, following local resolution, the patient remains dissatisfied or if local resolution is not appropriate; a formal complaint can be made. The healthcare manager for the NHS commissioned service at the IRC should advise the patient that they can complain formally to either:
 - In England: the NHS commissioned provider at the IRC (a complaint investigated formally by this route can be taken forward using the original written complaint or DCF 9 form); or,
 - The NHS England Commissioner via the NHS England Customer Contact Centre england.contactus@nhs.net, NHS England, PO Box 16738, Redditch, B97 9PT or by phone on 0300 3 11 22 33.
 - In Scotland and Northern Ireland: Individuals who are not satisfied with the response from Healthcare providers can raise a complaint to the Independent Sector Complaints Adjudication Service (ISCAS) (applicable only to Healthcare providers that are subscribed to ISCAS).
 - ISCAS will not consider 'new' issues that have not previously been raised with the Healthcare provider, except for concerns raised about the way the Healthcare provider has handled the complaint, which may not surface until after a response has been received to the initial complaint. There is no appeal to complaints made to ISACS' adjudication and the Independent Adjudicator's decision is final. Information about the complaints process can be found at <https://iscas.cedr.com/patients/complaints-process/>.

- Individuals can also raise a complaint with Health Improvement Scotland (HIS) at any stage of the complaints procedure, though complaints to local Healthcare providers are encouraged in the first instance. Information on making a complaint to HIS can be found at http://www.healthcareimprovementscotland.org/our_work/inspecting_and_regulating_care/independent_healthcare/ihc_complaints_procedure.aspx

27. Where a patient opts to complain formally to the relevant NHS Commissioner, the healthcare manager at the IRC should advise the patient that this must be done in accordance with NHS complaint procedures and sent by the patient to the NHS Customer Contact Centre either by post, email or by telephone (see paragraph 29 for details).
28. Where a complaint makes a serious allegation of misconduct (professional or otherwise) about a member of healthcare staff this will be handled under NHS procedures and the local healthcare manager, professional body and police (where appropriate) will be notified. The healthcare manager at the IRC should notify the Home Office's Compliance Manager of the suspension of any member of healthcare staff, at the point of suspension. In cases where the allegation relates to corruption the healthcare manager should notify the DS Counter Corruption & Investigations Unit (CCIU) exclusively. The outcome must be provided to the appropriate Home Office Team as a follow-up once the investigation has concluded. The local NHS commissioning team will receive updates about the investigation from the NHS and any resulting recommendations which they will share with the DS Complaints Team. A more detailed explanation of the handling of serious allegations is at Annex G. Where cases involve police interest or an active police investigation, Home Office Security must be notified at the earliest opportunity to ensure that any necessary security clearance reviews can be initiated without delay. VCAT will also take responsibility for progressing this action as required.
29. Where the complaint relates to healthcare, it will be forwarded to the centre's healthcare provider who will handle the complaint in line with paragraphs 19-30 of this instruction. A detained individual may also send a confidential healthcare complaint **by post** at the cost of the service provider to:
- NHS England Customer Contact Centre, NHS England, PO Box 16738, Redditch, B97 9PT, **by phone** 0300 3 11 22 339 or **by e-mail** england.contactus@nhs.net.
 - NHS Scotland, using following details; Freepost SPSO, 4 Melville Street, Edinburgh, EH3 7NS. Freephone: 0800 377 7330 Online contact www.spsso.org.uk/contact-us Website: www.spsso.org.uk Mobile site: <http://m.spsso.org.uk>
30. Although the confidentiality of the complainant will be maintained, the content of the complaint will need to be disclosed to enable investigation.

Monitoring and reporting of healthcare complaints

31. Healthcare complaints will not be monitored by the Home Office. NHS will, on a quarterly basis, provide the DS Head of Detention Operations and DS Healthcare and Safer Detention Lead, via the DetentionServicesComplaints@homeoffice.gov.uk inbox, with a report on complaints handled by the NHS England Customer Contact Centre. This will include numbers of complaints received and closed by IRCs, number resolved to the patient's satisfaction and category of complaint made (e.g. medical, dental).
32. Complaints which have been formally investigated by the local IRC healthcare provider will be reported to the Compliance Team via the quarterly Healthcare Partnership Board meetings which take place at each IRC.
33. Healthcare providers must complete the mandated Annex J return, detailing complaints received and closed during the previous quarter and submit the report to the DetentionServicesComplaints@homeoffice.gov.uk, who will subsequently share with the DS Healthcare and Safer Detention Lead and respective Compliance Teams, by the 10th working day of each quarter. Cross-cutting and multi-agency complaints
34. It is important that complaints which cover more than one area or service are properly acknowledged and handled, with each part of the complaint investigated and responded to. Complaints which cover the responsibility of more than one agency or service will be considered on a case-by-case basis in order to determine which agency or service will respond to the differing elements of the complaint.
35. Cross cutting complaints placed in the complaints boxes which include concerns about healthcare (along with concerns about other conditions or treatment in detention) will be copied by the Compliance Team and sent to the on-site healthcare manager. Each individual area (for example the contracted service provider, healthcare) will be responsible for sending an acknowledgement letter (example at Annex D) to the complainant setting out how the aspects of the complaint for which they are responsible will be handled and the anticipated target for a response to be provided. Medical information in cross cutting complaints will be redacted, in line with GDPR regulations.

Independent Monitoring Board (IMB) complaints

36. Complaints may be made directly to the Independent Monitoring Board (IMB) using the designated IMB Complaint boxes. If it is clear from the content of a complaint posted in either the Immigration Enforcement complaints box, or the IMB complaints box, that it has been mistakenly posted into that box, the Compliance Team member, or IMB member emptying that box should hand that complaint directly to the respective person in the Compliance Team or IMB or post it into the respective complaints box. Complaints about IMB members should be sent directly to the IMB chair for that centre or the IMB Secretariat, if the complaint is about the IMB chair.

Making a complaint

37. Non-healthcare complaints raised by, or on behalf of detained individuals will normally be made on the DCF9 form, which is made available by the DS Complaints Team, in a range of languages in detention facilities. There will be a minimum of 20 pre-existing language versions produced, based upon the most prevalent languages of residents within the removal estate. Samples will be provided electronically in PDF format. The contracted service provider is responsible for ensuring complaint forms in each of these languages are clearly displayed in racks on the wall around the centre, including next to complaint boxes, if possible and daily checks should be conducted by the service provider, to ensure replenishment of the forms. For those individuals who speak languages not covered by pre-existing translated DCF9 forms, assistance can be provided from staff, who can use telephone translation services to assist them in understanding the form. For further information, please refer to DSO 02 2022 Interpretation Services, using this link [DSO 02 2022 Interpretation Services.docx](#) (sharepoint.com)
38. Completed DCF9 forms should normally be placed in the locked yellow complaints box by the complainant, clearly marked "Immigration Enforcement Complaints". If any forms are handed directly to any member of staff, including members of the IMB, they must be placed in the complaints box without delay, and once the box is opened, handled in accordance with the requirements of this guidance depending on the type of complaint.
39. Complaints will be accepted in formats other than on a DCF9 form, including complaints made verbally, in letter form or on plain paper. These should also be placed in the locked yellow complaints box in IRCs and STHFs (either by complainants or, exceptionally, by staff who receive them in person without delay, including members of the IMB).
40. Complaints will be accepted in languages other than English, but all responses will be provided in English, except for responses to healthcare complaints in England. In the case of these complaints, NHS England will provide a response translated into the appropriate language. Where a resident experiences difficulty understanding the correspondence in relation to their complaint, and local support cannot assist, a request can be made using Annex H (translation request) to have the complaints documentation translated. The Annex H form can be requested from the onsite DS Compliance Team who will forward it to the DS Complaints Team.
41. Complaint boxes in IRCs and pre-departure accommodation may only be accessed and emptied by Compliance Team members of staff (or exceptionally by DET team staff with prior Compliance Team agreement). In residential STHFs, complaint boxes are opened subject to other arrangements as follows; Manchester and Swindon Residential STHF – opened by Home Office IRS Escorting Contract Monitors, Larnie Residential STHF – opened by the contracted service provider; Larnie STHF service

provider must keep a record of all the collected complaints and share with DS Complaints Team and Escorting Operations (Escorting Ops). Escorting Ops staff will undertake random spot-checks to ensure the local Complaints Log aligns with complaints collected. Complaints at non-residential STHFs, at ports and reporting centres are opened by either Border Force or Immigration Enforcement or, if none of these are available on the day, contracted service provider staff and will be managed in line with the corresponding complaints management policy. In all cases of non-healthcare related complaints retrieved from complaint boxes in places of Immigration detention, the complaint should be forwarded for registering and allocation to the DS Complaints Team using the email contact details in this instruction. This excludes complaints raised in STHFs and holding rooms operated by Border Force and UKVI which are managed in line with separate procedures. Arrangements for healthcare complaints are set out in paragraphs 19-30 of this instruction.

42. If a detained individual makes an oral allegation of misconduct by a member of staff, in the hearing of another member of staff or a member of the IMB, the detained individual should be encouraged to put the allegation in writing on a DCF9 form, though they cannot be compelled to do so. For any alleged misconduct and serious allegations, Home Office Compliance/DET staff should escalate through appropriate channels with Senior Management and ensure that an appropriate investigation is carried out. For any other allegations/concerns, detained individuals should be encouraged to put them in writing and, where possible, staff should follow this up with the detained individual at a later time and within 5 working days.
43. The escorting service provider will ensure that DCF9 forms are available on escort vehicles and return flights. Completed forms can be handed to the escorting provider by the complainant for onward transmission to the DS Complaints Team or can be sent by the detained individual directly to the email address at paragraph 29 above. To prevent delay in the consideration of complaints, escorting service providers can send photographs of the submitted complaints, via secure email, to the DS Complaints Team if they are not expected to have immediate access to a scanner device following receipt. Where detained individuals are being taken to an IRC or STHF, they should be advised to post their form in one of the yellow complaint boxes on arrival.
44. Complaints which are sent to another part of the Home Office, but which relate to matters which are the responsibility of Detention Services, will be reallocated to the DS Complaints Team and handled under these procedures, where appropriate. Complaints received by the DS Complaints Team, but which are the responsibility of another part of the Home Office will similarly be reallocated by the IE Complaints or Home Office Complaints Hub or relevant HMP/police station. Complaints which are sent directly to the healthcare provider or to NHS England, but which relate solely to matters which are the responsibility of Detention Services, should be forwarded by the healthcare provider or NHS England to the DS Complaints Team by email to DetentionServicesComplaints@homeoffice.gov.uk.

45. Complaints about matters within the removal estate or whilst on escort should be made within three months of the date on which the incident being alleged took place; complaints outside this period will be considered on a case-by-case basis, taking into account relevant factors such as whether the complainant has provided sufficient information, the severity of the incident, the amount of time that has passed since the alleged incident, and the availability of records. Complaints may be made by people in detention but may also be made by other people or groups on their behalf (e.g., a legal representative, family member, support/voluntary charity or Member of Parliament). To respect and protect the confidentiality of an individual complainant, prior to engaging with a third-party representative a signed letter of authority would be required from the complainant authorising the release of their information.
46. Where a complaint raises a factual error (e.g., an incorrect date of birth or spelling of a name in records about that individual) and requests the error is rectified, the DS Complaints Team will channel the request to the appropriate contracted service provider, or Home Office team to consider. The DS Complaints Team will keep a record to reflect this within the respective resident's bespoke file. UK GDPR (Article 16) requires organisations to correct inaccurate records "without undue delay", and the Information Commissioner's Office (ICO) guidance is that organisations have, at the latest, one calendar month from the time of receipt to respond to a request for correction (see paragraph 87 for details).

Arrangements for complaints

47. Contracted service providers must make arrangements to help people who may find it difficult to submit a complaint in the usual way; this might include non-English speakers, children, or people with learning, literacy or visual difficulties. Such arrangements may include the use of 'welfare buddies' to assist in the completion of the DCF9 form, assistance from members of staff in completing the form, or where the complaint is about a member of staff, the provision for IMBs to assist in making the complaint. This will include the use of telephone translation services for completing the DCF9 form and for translating the response to their complaint, where required. Staff should encourage residents to submit complaints confidentially and reaffirm that making a complaint will not affect the resident's' treatment whilst in detention, negatively impact any decision relating to their immigration status nor will it delay any decision to either grant admission or removal from the United Kingdom.
48. Contracted service providers, when investigating complaints, should attempt to identify the root cause of the complaint during their investigation, to focus on what is really important to the resident with a view to preventing repeat or vexatious complaints.
49. Anonymous complaints and group complaints will be handled under the procedures outlined in this guidance and investigated with appropriate resulting action taken. Where signatories under one group DCF9 submission are identifiable, each individual should receive a personal acknowledgement and Final Response letter using the

single case reference. Where an individual or group complaint is anonymous or unidentifiable, but the relevant residential wing is known, complaint responses should be made available to the persons on the respective wing and the details showing how/where it was shared, including the dates it was displayed, being included on the Final Response where the complainant's address would normally be added. DS Complaints Team will escalate to Senior Management and Counter Corruption & Investigations Unit all examples of group complaints (deemed as more than 3 people) to raise awareness. Centre staff should also be signposted to [DSO 11/2014 Security Information Reports](#) where grievance/frustrations are likely to escalate.

50. Third party complaints, those that are raised on behalf of the resident, will be acknowledged and investigated but will require the written consent of the detained individual concerned if the outcome is to be shared with the third party. Where this consent is not available, the response to the complaint will be sent to the detained individual on whose behalf the complaint has been made or, in the absence of current contact details, will be placed on file.
51. Given complaint boxes must be opened daily, the date of a complaint being made will be considered as the day it was retrieved from the relevant complaint box. This makes allowances for incorrect dates being recorded in error on complaint forms or where a complainant does not, for whatever reason, place their complaint in a complaint box on the day it was completed.
52. Any complaint in a sealed envelope and marked confidential should not be opened by IRC service provider staff but should be handed to the Compliance Team member who must check for and escalate, as appropriate, any urgent matters requiring immediate attention. The complaint should then be sent to the DS Complaints Team.
53. Every effort should be made to respond to a complaint, even if the complainant has moved to a different centre, left the removal estate, or has been removed from the UK. Where no forwarding address or contact details for the complainant are contained in records accessible to the service provider or DS Compliance staff, the complaint response should be held on file, in case of future contact, with an annotation showing for audit clarity "No Forwarding Address Provided" and handled in line with Home Office retention and destruction policies. Similarly, should a complaint be received which is illegible (either name of the individual or contents of the complaint), and attempts to identify the individual are unsuccessful the complaint should be investigated where possible and held on file for reference.

Complaints Log requirements

54. All complaints must be recorded in a Complaints Log, which is held and maintained by the local Home Office Compliance Team and shared with contracted service suppliers. The log must include a minimum number of data collection fields, as defined by the DS Complaints Team. This standardisation enables the consistent compilation of data

across the immigration removal estate and supports trend analysis and second-line quality assurance checks.

55. The Complaints Log must include, as a minimum, the following information:

- Complainant's name, Atlas CEPR reference number, nationality, date of birth
- Date, time and location where the complaint was collected
- Date sent to DS Complaints Team
- Name of staff member who sent complaint to DS Complaints team
- Date received back from the Complaints Team (allocation date – see paragraph 58)
- IEDET reference number (once received from DS Complaints Team)
- Complaint category (as designated by DS Complaints Team Service or Minor Misconduct)
- Target date for a response
- Date of Acknowledgement letter (2-day requirement)
- Indicate whether the DSO mandated deadline for 2-Working Day Acknowledgements was met (ON-TIME/LATE)
- Date of Interim response (if extension is sought)
- Complaint outcome (e.g., substantiated, partially substantiated, unsubstantiated, withdrawn)
- Complaint withdrawal form completed (Yes/No/N/A)
- Days to contractual response deadlines
- Date of Final Response (the day the letter is handed to the complainant).
- Indicate whether the DSO mandated deadline for 20- Working Day Final Response was met (ON-TIME/LATE)
- Feedback form provided (Y/N)
- IEC escalations? (Y/N)
- IEC case reference number

56. To facilitate monitoring and auditing, the Complaints Log should be maintained in a secure format that prevents unauthorised changes. Dropdown menus should be used where possible to standardise entries and reduce errors.

Responding to a complaint

57. The team or contact responding to a complaint will depend on the nature of the complaint, but all complaints from current (and where appropriate, former) detained individuals must be logged and allocated by the responder responsible for its investigation in the Complaints Log. Every IRC service provider is required to appoint a manager with responsibility for ensuring effective systems and processes are in place for managing and investigating complaints relating to service provision or the minor misconduct of their staff. The escorting provider will appoint a nominated person to respond to complaints relating to STHFs and escorting. Healthcare providers in England will also be required to appoint a person, referred to as a complaints manager, to be responsible for managing the procedures for handling and considering complaints in accordance with arrangements made under the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.
58. Once a complaint has been allocated to the relevant responder for investigation, the complainant should receive a response within a set timescale. Complaints received by the DS Complaints Team will be logged within one working day (Monday to Friday) or on the next working day (if received on a weekend or public holiday) on the Digital External Correspondence System (DECS). This process generates the unique reference number and target date for response. As soon as the complaint is logged on DECS, the DS Complaints Team will forward the complaint to the contracted service provider or relevant Home Office team responsible for undertaking the investigation and providing the response. The timescales in the chart below then apply.
59. A complaint acknowledgement letter (examples at Annex D) (to include the reference and target date) must be sent to the complainant by the person investigating the allegation, or a deputy in their absence, copying in the DS Complaints Team and on-site Compliance Teams, within two working days of allocation. In relation to complaints which require translation, the date of a complaint being made will be considered as the day it was returned to DS Complaints Team by the translation service (target within 4 working days). This makes allowances for the DS Complaints Team to be able to review the complaint once it is returned in English and allocate as appropriate.
60. When drafting and issuing complaint responses, the assigned investigator or responder must consider whether the individual raising the complaint has any vulnerabilities or additional needs that may affect their ability to understand or engage with the response. This includes, but is not limited to, learning difficulties, cognitive impairments, language barriers, or other support needs. Where such factors are identified, the investigator or responder must take reasonable steps to ensure the response is accessible and understood. This may include providing a simplified summary, offering to explain the response verbally, arranging support from a member of staff, welfare buddy or interpreter, or providing the response in an alternative format. Where appropriate, responses may also be delivered in person. This requirement applies to all complainants, whether they remain in detention or have since left the

detention estate. Records must be kept of any additional support provided, and individuals must be given the opportunity to seek clarification or ask questions about the outcome of their complaint.

Type Of Complaint	Investigated By	Time Limit
Service Delivery	IRC / Escorting contracted service provider or Compliance Manager (for HOIE related complaints)	Within 20 working days of allocation of the complaint.
Minor Misconduct	IRC contracted service provider or Compliance Manager (for HOIE staff related complaints)	Within 20 working days of allocation of the complaint
Serious Misconduct	Professional Standards Unit	Within 12 weeks of receipt within the Home Office (this includes the investigation) subject to degree of investigation required.
Any complaint for the Home Office about issues outside the responsibility of Detention Services or its contracted service providers.	As appropriate: Immigration Enforcement, Border Force, or UKVI CSUs	Within 20 working days of allocation of the complaint.
Healthcare complaints	Healthcare provider	Healthcare provider timescales apply.

Content of complaint responses

61. As a minimum, all complaint responses should include each element set out in Annex E. This includes the complaint reference number and subject matter of the complaint. All complaint responses must include details about whether each complaint element been substantiated, unsubstantiated or partially substantiated and the reason for this decision, as well as the overall outcome of the complaint. Information to explain what the complainant can do if unsatisfied with the response should be included. Final Response letters should also include a Feedback Form (Annex F).

Dealing with a complaint escalation

62. The contracted service provider's (CSP) Final Response must provide information on how to escalate the complaint for an independent review. For service delivery or minor misconduct complaint responses this will be undertaken by escalation to the Independent Examiner of Complaints (IEC). CSP's Final Response letters should therefore include the following wording as a mandated uniform standard:

"If you are dissatisfied with our response, you can escalate your complaint to the Independent Examiner of Complaints (IEC) within three months of the date of this letter. Details of how to raise a complaint can be found at <https://www.gov.uk/guidance/make-a-complaint-to-the-independent-examiner-of-complaints>. You can also request information via the post, by writing to the IEC at PO BOX 6147, Sheffield, S2 9JD. Please note, if you decide to escalate your complaint to the IEC, you will need to provide them with a copy of this response."

63. Should the complainant remain dissatisfied with the IEC's findings the IEC will, in their response, explain that a further escalation to the Prisons & Probation Ombudsman (PPO) is possible. The PPO can be contacted at <http://www.ppo.gov.uk>. A copy of the PPO's leaflet "How to complain to the Ombudsman" will be supplied with the IEC's Final Response.

64. In addition, for Serious Misconduct cases, investigated by the Professional Standards Unit (PSU), should the complainant remain dissatisfied with the PSU's findings they can also escalate to the Prisons and Probation Ombudsman (PPO); again, details will be provided in the PSU's Final Response.

65. All detained individuals should be made aware of the procedure by the contracted service provider for escalating a complaint to the IEC and/or PPO during the initial days of their detention. The IEC will provide signposting information to the gov.uk webpage, including both the email and postage address for making complaints. The PPO will provide detention facilities with publicity material that explains how to complain to the Ombudsman, IRC and STHF service providers are required to share this material by providing leaflets to detained individuals and displaying PPO posters in visible locations throughout the removal estate. The IEC will not accept a complaint for investigation until it has been thoroughly investigated under the complaints process set out in this guidance. The PPO will in most instances not normally review a complaint until it has been thoroughly investigated by the Professional Standards Unit (if serious misconduct) or IEC if it concerns service delivery or minor misconduct.

66. For immigration complaints not relating to detention or escorting, escalation will be to the Parliamentary and Health Services Ombudsman (PHSO), either via a Member of Parliament (MP) or by the complainant themselves. For healthcare complaints in England (including complaints about external medical treatment e.g., at a local hospital) escalation will be direct to PHSO. For complaints about healthcare delivered in detention facilities in Scotland and Northern Ireland, escalation can be made to the

Scottish Public Services Ombudsman/ NI Public Services Ombudsman by the DS Complaints Team. The escalation procedure for complaints about medical treatment external to the removal estate in Scotland and Northern Ireland will be to either the Scottish Public Services Ombudsman or the Northern Ireland Public Services Ombudsman directly.

Quality assurance of complaint responses

67. IRC, STHF and escorting providers investigating and responding to complaints will ensure that the written response is subject to second-line quality assurance (“QA”) by a more senior person before being sent to the complainant. This assurance should be undertaken with reference to Annex E of this instruction. Complaints responded to by Home Office Compliance Team will be quality assured by the Area Manager or Delivery Manager.
68. IRC, RSTHF and escorting providers investigating and responding to complaints will ensure that, for each location, a nominated single point of contact/dedicated complaints lead or co-ordinator for complaint escalations will be identified (with deputies as appropriate to cover absences). The identified individual will be of appropriate seniority (DCM or similar) and have delegated responsibility to oversee the management of the complaints process, including receiving requests for information and co-ordinating prompt and appropriate responses.
69. Home Office DS Delivery Managers (or a nominated delegate) will carry out a retrospective monthly dip sample of both minor misconduct (and the related investigation report/ information) and service delivery complaints closed in the previous month (e.g., in February, quality assurance will be carried out on complaints closed in January). This will allow Home Office Compliance Teams to monitor the quality of responses and work with IRC, STHF and escorting service providers in situations where responses are deemed to be unsatisfactory. Home Office Delivery Managers (or their nominated delegate) will quality assure the documents in relation to a minimum of 5 responses for each IRC or 20% of all Service and Minor Misconduct complaints closed in the previous month, whichever is the greater. Escorting Operations (Escorting Ops) will complete an equivalent dip sample of complaints relating to STHF or on escort. Where this dip sampling is undertaken by a nominated delegate, the DS Delivery Manager must satisfy themselves that the process has been undertaken appropriately in accordance with this guidance and that the findings are sound.
70. The DS Complaints Team will receive a monthly QA report from each Delivery Manager (or delegate) with the results of the dip sampling, the matters being raised with the service provider and any other information deemed relevant by the DS Delivery Manager. The return should be provided within 5 calendar days of being requested by the DS Complaints Team. Any concerns about the quality of responses which cannot be resolved locally by the DS Delivery Manager (or their delegate) will be

escalated to the DS Head of Detention Operations who will be responsible for taking action with the IRC, STHF or escorting provider. The DS Complaints Team should be copied into any matters escalated in this manner.

71. On receipt of the Home Office DS Delivery Manager's QA report referred to above, a member of the DS Complaints Team will incorporate the results for each area onto a master QA spreadsheet and carry out second line assurance in relation to a further (and different) dip sample of complaint responses which have been closed during that month. The DS Complaints Team will complete an additional sample of 20% of the remaining closed Service and Minor Misconduct complaints in the previous month for all IRCs, STHF and escorting cases incorporating their findings into the master record. Any concerns about the quality of responses should be raised with the relevant DS Delivery Manager responsible for the area highlighted. The Delivery Manager should raise with the appropriate service provider and, where appropriate, provide updated feedback to the DS Complaints Team for the QA master record.
72. On a quarterly basis the DS Complaints Team Manager will quality assure 100% of Service and Minor Misconduct complaint records closed in a designated week selected by the DS Complaints Team Manager at random, to ensure that the DSO requirements and time frames have been adhered to (such as translating documents and allocating/closing the complaint) and that all required documents (such as DCF9, acknowledgement letter, interim response and substantive responses) have been uploaded correctly onto DECS by the DS Complaints Team.

Repeat complaints

73. A detained individual's right to make a complaint must in no case be withdrawn. Where an individual whose complaint has been concluded, persists in communicating with the Home Office about the same matter, a decision may be taken to reduce responses with him or her about the issue. The complainant should be notified that further complaints about the same issue, in the absence of new information or evidence, will be acknowledged but not substantively responded to. In such cases the DS Complaints Team will read all new correspondence from the detained individual but unless there is fresh evidence which affects the decision that has been reached regarding the complaint is received, the correspondence will simply be acknowledged by the contracted supplier noting no further investigation on the previously raised aspects will be undertaken but highlighting the potential routes of escalation to the IEC and PPO.

Withdrawn complaints

74. When a complainant indicates they no longer wish to pursue their complaint, they should be asked to sign a Withdrawal Declaration Form (Annex I). The person allocated to investigate the complaint will then approach the relevant IRC Compliance Team Manager (or DS Escorting Operations for complaints at STHF/ on escorting)

who will review and assess the withdrawals to ensure it has followed the correct procedure.

75. A brief response letter should be sent to the complainant by the team allocated to investigate the complaint including:

- the date the complaint was made
- the reference,
- the date of the complaint withdrawal,
- the reason given on the Annex I form for the withdrawal of the complaint,
- details of the investigation that have happened up to the point of withdrawal and, noting the date of the Annex I withdrawal, also provide an Outcome status on that basis, which could simply be 'Withdrawn' if no investigation had been undertaken up to that point.
- and confirmation that no further action will be taken in relation to the complaint.

76. A copy of the signed withdrawal form and response letter should be sent to the DS Complaints Team who will update the relevant complaint records, and the IMB chair, if consent has been provided. Following receipt of the Annex I form the closure date on DECS will be shown as the date of the brief Final Response (i.e. when the resident is updated).

Local Resolution

77. There are some instances where detained individuals would prefer and benefit from a faster response to their concerns rather than engaging the more protracted formal complaints procedure. Where something has gone wrong, putting the matter right quickly is important. In those instances, Local Resolution ("LR") may be the most appropriate approach. The intention of LR is not to circumvent the investigation process, disregard complaints from residents or involve IRC Compliance Managers in protracted negotiations, but rather to seek a faster settlement of complaints (within 14 calendar days) at an earlier stage, whilst still being thoroughly investigated and internally quality assured following the full complaints handling procedures outlined in this DSO. For example, where a resolution involves reaching financial settlement with the detained individual over property loss, the contracted service provider will submit to the DS Compliance Manager a proposed figure and supporting argument.

78. Complaint types which are suitable for local resolution are those classed under the Service delivery complaint category. These types of complaints are more easily addressed and require less detailed/involved investigations (see 'Annex A' for Complaint Types and 'Annex B' for a summary of the complaint handling process for

each type) but should still be investigated following the process set out at paragraph 37.

79. Complaints concerning misconduct of any type are unsuitable for LR and should always be considered in accordance with the procedures set out in this instruction at paragraph 37.
80. Where the Home Office IRC/DS Compliance Team member considers that a complaint may be suitable for Local Resolution, they should pass it as soon as possible to the service provider for immediate investigation. The service provider will confirm to the resident within 2 calendar days that the complaint has been received, that it will be handled via the LR approach and provide a proposed response date (within 14 calendar days of receipt). The service provider will approach the DS Compliance Manager for the centre with the proposed Final Response for their approval and quality assurance checks. This ensures that despite using the faster and less involved LR approach, residents receive a quality service in relation to their concern. The Final Response letter should contain all of the requirements outlined in paragraph 61 and Annex E (checklist for responses) to maintain a consistent standard of response across the removal estate.
81. All complaints that are appropriately selected for LR must be recorded in a local LR Log, held and maintained by the local Home Office Compliance team, which includes a minimum number of data collection fields, which will be defined by the DS Complaints Team. This will ensure the subsequent compilation of data across sites is possible and trend analysis/second line QA checks can be undertaken to assure the delivery of this approach. LR Logs should be reviewed monthly by the Home Office DS Compliance Team to review the types, trends and number of complaints being resolved in this manner. LR Logs showing closed LR cases should be sent to the DS Complaints Team on a monthly basis. The return should be provided within one week of being requested by the DS Complaints Team.
82. The DS Complaints Team will compile monthly high-level data reports showing the overall numbers, types of complaints using the LR approach and trends. On a 6-monthly basis (January and July) the DS Complaints Team will request a 10% dip sample of previously closed LR cases from across the whole of the removal estate. The DS Complaints Team will undertake a third line QA check of the requested initial complaint, acknowledgement letter and final response for LR appropriateness, data accuracy, presentation and completeness of investigation. Should the third line QA review identify any concerns regarding the selected LR responses reviewed they will be raised with the relevant DS Delivery Manager.

Roles and responsibilities in handling complaints about Detention Services

83. Home Office DS Compliance staff will ensure that IRC, STHF and escorting providers have processes in place for managing complaints and that detained individuals know about those processes. Home Office DS Compliance staff will:
- Ensure that supplies of DCF9 forms, in English and in translation, are available at or near the place where a complaints box is located;
 - Empty complaints box(es) at least once a day, seven days a week, (if there are no Compliance staff available, appropriate arrangements will be in place to ensure the box is regularly emptied); and
 - Update local Complaints Log
84. For any complaint that raises concerns about or could potentially affect someone's health or wellbeing, the IRC/STHF Compliance Team must:
- ensure as soon as reasonably possible a check on that individual's welfare is undertaken, and record the date and outcome of the check, to ensure duty of care obligations are met;
 - Scan all complaints, including cross cutting complaints and those made in other languages, and email them to the DS Complaints Team (DetentionServicesComplaints@homeoffice.gov.uk) on the day of collection, copying in the local IMB and ensure original copies are electronically filed. Where applicable confirmation that a Welfare Check has already been initiated should be included in the covering email. Where it is not clear, in the email, the Compliance Team will confirm the complainant's name, date of birth, nationality, Home Office and/or Port reference and the language spoken (where translation is required);
 - Refer any healthcare complaints from IRCs and RSTHF in England (written in English), including those which are cross cutting, to the on-site healthcare manager (paragraphs 22-26) A record will be kept of the date each complaint was referred and the complaint reference number. Copies or details of the complaint will not be recorded or retained;
 - Refer healthcare complaints (Scotland and Northern Ireland) to the relevant contracted service provider healthcare manager; and
 - Refer complaints against escorts, including medical escorts, to the DS Complaints Team for allocation to the escorting provider for investigation.

DS Complaints team responsibilities

85. On receipt of a complaint, the DS Complaints Team will:

- Monitor complaints which require translation to ensure they are translated into English (within a target of 4 working days). Once translated, complaints will be allocated as per paragraph 58 of this document.
- Any complaints relating to healthcare (England, Scotland, and Northern Ireland) will be sent to the on-site healthcare manager. In these cases, the complaint received date for the NHS/healthcare provider will be on receipt of the translated complaint. For healthcare complaints, a local record will be maintained at the detention facility of the date the complaint was passed to the healthcare manager and the complaint reference number. No further details will be recorded and once passed to the healthcare manager, no further action by the Home Office is required.
- Check that complaints are “in time” (i.e., within three months of the date on which the matters under investigation took place) and whether the circumstances of “out of time” service delivery/minor misconduct complaints warrant acceptance. All serious misconduct complaints, including those that are out of time, will be considered by PSU to determine if investigation is appropriate. Generally, efforts should be made to ensure out of time complaints are investigated, where there is sufficient information provided about the circumstances of the complaint and records held. If it is decided that the out of time complaint will not be investigated, the DS Complaints Team will notify the complainant of this in writing. The DS Complaints Team will hold a record of all out of time complaints.
- Send potential PSU cases via email to the DS Complaints Team Lead to confirm that Serious classification is the most appropriate route or whether the case should be deemed Minor Misconduct.
- Check that any urgent matters have been escalated for action in accordance with the correct guidance (e.g., where a complaint relates to a detained individual alleging self-harm, see paragraph 84.) Urgent matters not relating to an individual in detention should be referred to the appropriate body for action as appropriate.
- Refer complaints alleging an arguable breach of Articles 2 or 3 of the European Convention on Human Rights to the Duty Director of Detention Services during working hours and on-call Senior outside the working hours, and ensure guidance in [DSO 02/2020 Commissioning of investigations](#), is followed.
- Refer correspondence referenced by the detained individual or legal representative as a pre-action protocol letter or which states that litigation proceedings have begun or are about to begin immediately to the DS Litigation Team, for advice.
- Refer issues outside the scope of the detained complaints process but within the remit of the Home Office to the IE Complaints Team for response as appropriate.
- Refer complaints outside the responsibility of the Home Office (for example property belonging to a detained person left at a prison or police station) back to the

contracted service provider at the originating centre for allocation to the most appropriate member of staff to handle the complaint (e.g., local Welfare Team). Notify the complainant that no reply will be provided centrally.

- Send complaints that relate to Home Office Detention Engagement Team (DET) to the IE Complaints Team (iecomplaints@homeoffice.gov.uk). Where the complaint relates to a DET staff member working within an IRC, to ensure oversight and separation the DET G7 will be informed, by the IE Complaints Team and will nominate a DET manager to investigate the complaint and provide a contribution, which will form the response to the complainant. IE will coordinate with investigating staff and provide the reply to the complainant. Any complaints received that relate to serious misconduct allegations will be referred to PSU, in line with paragraph 90 of this instruction.

86. For PSU escorting investigations only, the DS complaint team will record all allegations of serious misconduct onto DECS for consideration by PSU. If accepted for investigation by PSU, a copy of the complaint along with the DECS reference number will be sent where appropriate to the relevant:

- Contracted service provider complaint clerk
- IRC Compliance Team
- Escorting Operations (Escorting Ops) (including nominated staff)
- IMB chair or nominated member (only where the complainant has provided opt-in consent for it to be shared)
- DS Head of Detention Operations (G6)
- DS Head of Risk and Assurance (G7)
- DS Corporate Operations Lead (G7)
- DS Audit and Assurance Team (DSAAT)
- DS Litigation Team
- Home Office Counter Corruption and Investigations Unit (CCIU)
- Detention Engagement Team (DET) Manager (G7) relevant to the area being investigated.

87. For all complaints accepted by the DS Complaints Team for investigation, including non-healthcare aspects of cross-cutting complaints, the DS Complaints Team will:

- Allocate the complaint on DECS by the next working day of receipt;

- Send (by email) the complaint along with the reference number and target response date for acknowledgement, investigation and response to;

IRC contracted service provider/escort provider/relevant Compliance Team inbox/Escorting Operations (Escorting Ops)/IE Complaints Team as appropriate for investigation of service delivery/minor misconduct complaints

- Chair of IMB or nominated member with the reference number and target date for all complaints (except healthcare complaints), only if the complainant has given consent to do so. In relation to escorting complaints (only if consent given by the complainant) share the complaint with the IMB member at the discharging IRC and the IMB member at the STHF which covers the airport from where the removal (if relevant) took place. In relation to complaints which relate to STHF (only if consent given by the complainant) share the complaint with the IMB member at that STHF;
- Reallocate the complaint if it transpires upon initial investigation, it is incorrectly allocated. If a data breach is identified the incident should be raised by the relevant Home Office personnel person identifying said breach through the data incident reporting form on the Home Office's ITNow platform to ensure compliance with the Data Protection Act 2018;
- If someone wishes to file a complaint about how their data has been processed, they can send an email to the HO DPO inbox (dpo@homeoffice.gov.uk). They may also wish to contact Information Commissioner's Office [Make a complaint | ICO](#) or use the following email address (icocasework@ico.org.uk).
- Reallocate complaints which PSU downgrade. When reallocating for consideration at the relevant location, the DS Complaints Team will re-categorise in DECS, allocate to the relevant centre and notify CCIU;
- When PSU accept a complaint, the DS Complaints Team will allocate any service and minor aspects to the contracted service provider to be resolved locally. They will respond to the complainant as normal;
- Receive and upload complaint acknowledgement and interim response letters onto DECS;
- Monitor the progress of complaints, consider requests for extension to target dates prior to the target date being exceeded and chase complaints that have exceeded the target dates; and
- Receive and upload complaint response letters onto DECS.

88. Once the DS Complaints Team receive the complaint response they will:

- Update the relevant database within two working days of receipt, with date of response and outcome (Unsubstantiated, Partially Substantiated, Substantiated or Withdrawn).
- Where a request has been made for complaint processing communications to be translated into another language than English, using form Annex H, the DS Complaints Team will submit the specified complaints communications for translation and return the translated response as soon as it is available. For reporting purposes, the date of the original English versions will be deemed the produced versions.
- Check the quality of responses and highlight any which do not meet the required standard, to the relevant Home Office DS Delivery Manager for local action and discussion with the contracted service provider(s), as appropriate.
- Submit a monthly summary of all complaints raised at each IRC, STHF or on escort to the relevant Home Office Compliance Manager and Delivery Manager, the contracted service provider Centre Manager and complaint clerk and the IMB chair or nominated member.
- Complete a monthly trend analysis of complaints received and responded to and share with relevant Immigration Enforcement senior management. The report may include the following information: number of complaints received, number of complaints closed, outcome, complaints escalated to PSU.

89. The person responding to a service delivery or minor misconduct complaint, or an appointed deputy in their absence, will:

- Within two working days of receipt, acknowledge receipt of complaint to complainant and include the target date for response. A copy of the acknowledgement should be emailed to the DS Complaints Team.
- Maintain a Complaints Log along with a confirmed Outcome (Unsubstantiated, Partially Substantiated, Substantiated or Withdrawn) in line with Annex E requirements.
- Investigate complaint by means such as interviewing all involved parties (specifically complainant and alleged perpetrator) and witnesses plus securing any additional evidence (e.g. CCTV) where possible /necessary, to ensure a comprehensive and professional investigation of the complainant's concerns is undertaken.
- Maintain a password protected electronic record / folder of the investigation and any associated documents used or produced e.g., interview records, documents examined, CCTV viewed, processes reviewed; which will be stored securely on

SharePoint with restricted permission settings to ensure that only staff who need to see the information have access

- Provide a written response to the complainant by the target date (covering all points in the checklist at Annex E). Responses must include:
 - detail of investigation and findings;
 - for each aspect of the complaint identify whether the investigation found the relevant issue/s to be Unsubstantiated, Partially Substantiated or Substantiated;
 - provide an overall assessment as to whether the entire complaint was found to be Unsubstantiated, Partially Substantiated, Substantiated or Withdrawn (subject to Compliant Withdrawal Declaration having been signed/dated);
 - action that will be taken following the investigation;
 - details of the relevant escalation process include the following wording:

“If you are dissatisfied with our response, you can escalate your complaint to the Independent Examiner of Complaints (IEC) within three months of the date of this letter. Details of how to raise a complaint can be found at <https://www.gov.uk/guidance/make-a-complaint-to-the-independent-examiner-of-complaints>. You can also request information via the post, by writing to the IEC at PO BOX 6147, Sheffield, S2 9JD. Please note, if you decide to escalate your complaint to the IEC, you will need to provide them with a copy of this response; and
 - A copy of the complaints handling Feedback Form (Annex F) and request for it to be completed and placed in the complaints box.
- Ensure written responses are subject to quality assurance by a second, more senior, person to the investigating officer.
 - For service delivery and minor misconduct complaints, copy the quality assured Final Response to the DS Complaints Team, DS Compliance Manager and the IMB, where consent has been given. Responses that contain personal details relating to staff members should be redacted prior to being shared with the IMB. Where consent to share with the IMB has not been provided, only the date of response and the outcome may be shared (substantiated, unsubstantiated etc). In respect of healthcare complaints in Scotland and Northern Ireland, only the date of response (and not the response itself) and the outcome (e.g., substantiated or otherwise) should be sent to the DS Compliance Team.
 - If, exceptionally, the deadline cannot be met, seek prior agreement from the DS Complaints Team to issue an interim response explaining the reason for the delay

and indicate the date by which a substantive response will be provided. Once agreed send a copy of the interim response to the DS Complaints Team, which will also be provided to the resident to update them on the delayed investigation including a reason for the delay, to manage their expectations. For cases involving Local Resolutions the approval should be sought from the relevant Home Office Compliance teams. The issuing of an interim response will not pause or amend the original timescale for responding to a complaint as set out in paragraph 60 of this instruction. If the subsequent substantive response exceeds the original timescale for response, it will be considered not to have met the response deadline.

Professional Standards Unit (PSU)

90. When dealing with allegations of serious misconduct about a member of Home Office or contracted service provider staff, PSU will investigate a complaint that is likely to involve interviewing involved parties. Home Office and contracted service provider staff are required to cooperate with investigations, including attendance at interviews, retaining/providing notes taken from interviews and from room fabric checks, and securing evidence (e.g. CCTV) where possible. PSU will also:
- Provide a substantive response within 12 weeks of allocation, which will be shared with the complainant and any designated third-party representatives.
 - Send an acknowledgement letter to the complainant, requesting any further relevant evidence within 7 days, where possible.
 - Maintain a log/database of complaints.
 - Refer criminal allegations to the police (if the allegations haven't already been referred) and, if appropriate, obtain a crime number and pass the number to the complainant or legal representative on request.
 - Refer allegations concerning serious matters of security or corruption to the Counter Corruption and Investigations Unit (CCIU) and Central Referral Team (for onward referral to appropriate crime and financial investigation teams in Home Office Corporate Security).
 - Where the complainant's treatment can be explained by factors other than race or discrimination, return the complaint to the DS Complaints Team for re-categorisation and re-allocation as a service delivery/minor misconduct matter.
 - If the 12-week period elapses before investigation is concluded, provide an update to the complainant at least once every four weeks.
 - Respond to the complainant and copy the response to the Detention Services Audit and Assurance Team (DSAAT) - who are responsible for monitoring all recommendations made by PSU. DSAAT will then copy the response more widely as requested by PSU. This will include the IMB, who should be provided with the

PSU letter, plus any recommendations from the report. Personal details relating to staff members, contained within the letter and recommendations, should be redacted prior to being shared with the IMB.

- Submit the full report to the DS Head of Detention Operations on conclusion of the investigation setting out whether the complaint has been found to be substantiated, partially substantiated or unsubstantiated. For Escorting Service provider, the IRS Head of Escorting Services.
- PSU staff will be fully trained in all these aspects to ensure they can deliver all of these DSO requirements.

91. The PSU substantive response to the complainant, and representatives where appropriate, will be the same and sent at the same time as the complete version of the full report submitted to the DS Head of Detention Operations. For Escorting Service provider, IRS Escorting Services G6.

92. If a complaint sent to PSU is determined to be more appropriate for local investigation, it should be returned to the DS Complaints Team for reallocation and the category will be downgraded from Serious.

93. Allegations of serious misconduct carried out by the Home Office or service provider staff will always be referred to the Home Office Professional Standards Unit (PSU), in line with [DSO 02/2020 Commissioning Investigations](#).

Action to be taken in relation to a minor or serious misconduct complaint

94. Home Office DS Compliance Managers (or in the case of escorts, Escorting Operations (Escorting Ops) monitoring staff) will:

- consider, and where appropriate, suspend detainee custody officers' (DCO) certification pending investigation of a serious misconduct complaint;
- notify the Certification Team and CCIU;
- liaise with the contracted service provider centre manager in responding to serious misconduct complaints;
- make recommendations to the Home Office certification team on revocation or reinstatement of an individual DCO's certification on conclusion of an investigation. Determine whether (in the case of a substantiated complaint) an officer's certification should be revoked and, if so, to formally make such a recommendation to the Home Office certification team manager;
- consider – with the certification team – whether the reinstatement letter sent by the team (in the case of a substantiated complaint but where certification is not revoked) should mention the impact of further complaints; for example, this might

state that while no further action will be taken by Immigration Enforcement, a further substantiated complaint may lead to certification being revoked. Any such letter will make clear that this is without prejudice to any disciplinary action taken by the employer and will be copied to the Home Office certification team; and

- consider whether additional training is required, this should be considered in the case of three or more substantiated complaints against an individual officer in a year but may also be considered after one substantiated complaint against an individual officer, depending on the circumstances.

95. As employers, both the Home Office and the contracted service provider will:

- give guidance or training to staff against whom a minor misconduct complaint is substantiated, about how to improve the standard of their personal conduct and in cases of repeated misconduct, consider whether disciplinary action is required; and
- in cases of a substantiated serious misconduct complaint, determine whether disciplinary action and possible dismissal should be taken and whether performance points should be imposed.

Management Reviews

96. In instances where staff feel a serious incident has occurred in the immigration removal estate and/or under escort, involving a potential violation of Articles 2 and/or 3 of the European Convention on Human Rights (ECHR), a management review by PSU, commissioned by a senior manager within Detention Services and signed off by the SCS or G6 should be considered. For Escorting Service provider, IRS Escorting Services G6.

97. When considering the commission of a management review, the Home Office DS Delivery Manager (or Escorting Operations (Escorting Ops) manager for escorting services) responsible for the centre concerned must escalate to the Head of Detention Operations, or to the Head of Escorting Operations for escorting matters, any incident found to potentially involve gross or serious misconduct of staff, criminal action or a serious breach of security or safeguarding measures. Further information can be found in DSO 02/2020 Commissioning Reviews.

Lessons Learned

98. Complaints are an important source of information for improving customer service and business performance. Lessons can be learned from individual cases and from regional, national and business area trends. Learning lessons may prevent repeated complaints about the same issue. It is particularly important that action is taken in relation to substantiated complaints, that local action plans are produced and monitored and ongoing quality assurance is in place with feedback to staff to support improvement.

99. Action points arising out of serious misconduct investigations by PSU and the PPO are collated in a dedicated action log and progress towards implementation is monitored on behalf of the DS Complaints Team by Detention Services Audit & Assurance Team (DSAAT), IRSC and the Compliance Teams.
100. Staff and contracted service providers with responsibility for answering complaints should ensure that detained individuals can give feedback on the handling of their complaint (using the Feedback Form (Annex F) provided with complaint responses) and that completed questionnaires are reviewed and acted upon, as appropriate.
101. Contracted service provider must ensure they undertake at least quarterly analysis of complaints and record any trends in data. The information should be provided to the Home Office DS Compliance Teams, who must review and action any future preventative measures that are identified.

Feedback

102. Following all complaints residents will be invited in the Final Response letter to provide feedback on the process involved in the handling of their complaint. The Feedback Form (Annex F) will have been included with all Final Response letters and residents are invited to post the forms in the yellow Home Office Complaints post boxes.
103. The aim of the Annex F Feedback Forms is not to provide a route to reopen the complaint, as this is provided via the escalation routes described in paragraphs 62 onwards but to provide a route to identify procedural issues with this Complaints Handling process. Should **new** complaints be raised via the submission of a Feedback Form, these will be treated as new complaints and follow the above process.

Upon discharge

104. Yellow complaints boxes should be easily accessible to detained individuals in the discharge area. If no complaints boxes are available in this area, detained individuals should be given the opportunity to raise their concerns with staff prior to being discharged and express any dissatisfaction verbally or in writing. Staff should ensure up to date email or postal contact details are recorded to ensure the individual can receive a response post departure/transfer. See [DSO 03/2016 Reception, induction and discharge checklist and supplementary guidance.](#)

Ex-gratia payments

105. Where a complaint investigation results in an ex-gratia payment being made by the Home Office (rather than the contracted service provider), the DS Complaints Team will retain a record of payments made by the Home Office teams. Details will include the complaint reference, location, payment offer date, payment date and amount.

106. Where an investigation finds evidence that a detained individual has suffered actual financial or material loss because of the actions or negligence of a member of service provider staff (e.g. lost, or damaged property), the contracted service provider should be expected to make an ex-gratia payment on an extra-statutory basis. The rationale behind any decision whether to make a payment, and the amount to be offered must be clearly documented to show the information and factors considered when reaching a decision. Records must be kept of any such payments, including obtaining a receipt signed by the individual.
107. The relevant DS Compliance Team must be advised when an offer of ex-gratia payment for financial loss has been made, by the contracted service provider and once accepted, paid. A copy of the relevant correspondence should be forwarded to the relevant DS Compliance Team who will retain a record of each such payment made. Local IRC logs will be consolidated on a quarterly basis by the DS Complaints Team.
108. In all cases, consideration should also be given to providing an ex-gratia payment for items which had no monetary value, but which held sentimental value for the complainant. Contracted service providers should not offer any ex-gratia payment for non-financial loss without first discussing with the DS Compliance Teams.

Complaints and whistleblowing

109. Where a complaint raises a concern about wrongdoing, or a potential cover-up, and is in the public interest, it may constitute a whistleblowing disclosure. Complaint handlers must be alert to complaints that go beyond individual dissatisfaction and indicate systemic failings, serious misconduct, safeguarding concerns, or risks to health, safety, or welfare. Where identified, the complaint must be promptly transferred into the appropriate whistleblowing process in line with [DSO 03/2020 Whistleblowing and the public interest disclosure act](#), and statutory protections will apply even if the concern was initially raised through the complaints process. Complaints that relate solely to personal grievances or individual service issues should continue to be managed under the complaints procedure. Once accepted as a matter under the Whistleblowing DSO then no further action will be taken by the DS Complaints Team.

Self-audit

110. An annual self-audit of this DSO is required by contracted service providers to ensure that their designated obligations are being followed. This audit should be made available to the respective Home Office Compliance Teams on production for review.
111. Home Office Compliance Teams must also conduct annual self-audits against their respective responsibilities stated within this DSO for the same purpose. The IRC Compliance Teams annual audits will be sent to the DS OPPT Assurance Oversight Team on production for review.

112. For the purposes of paragraphs 110 and 111 the annual year shall cover the period January to December and the respective reports should be produced and distributed by 31 March of the following year.

Revision History

Review Date	Reviewed By	Review Outcome	Next Review
August 2015	S. Edmunds	<ul style="list-style-type: none"> Rebrand of previous DSO 03/2011, new guidance on healthcare complaints. 	August 2017
February 2017	G. Foley	<ul style="list-style-type: none"> Update to handling procedures for healthcare complaints and terminology updated. 	February 2019
June 2022	E. Jarvis	<ul style="list-style-type: none"> Updated to include further guidance on local resolution 	June 2024
February 2023	T. Amisu	<ul style="list-style-type: none"> Updated to reflect the change in team name from Detention Escorting Services (DES) to Detention Services (DS) 	February 2025
April 2023	A. Murrell	<ul style="list-style-type: none"> Updated to reflect the removal of Annex C and changes to Annex titles 	April 2025
January 2025	Z. Kalic	<ul style="list-style-type: none"> Standard terminology changes Local resolutions process updates Withdrawn complaints process and Annex improvements Quality assurance of complaint responses Healthcare complaints processes PSU process changes Anonymous complaints processes 	January 2027
February 2025	Z. Kalic	<ul style="list-style-type: none"> Further clarification updates mostly following Home Office team changes 	February 2027

June 2026	Z. Kalic	<ul style="list-style-type: none">• Updates to the complaints handling framework, record retention, Complaints Log requirements, escalation and quality assurance routes and links to the Whistleblowing policy.	June 2028
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