


Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		


Induction Policy

DATE EFFECTIVE FROM:


CONTACT POINT: Head of Safeguarding

RESPONSIBLE MANAGER: Centre Director

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Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

AMENDMENTS TO POLICY			
Amended Section:	Page:	Date	Reason for & Description of update:

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

INDEX

<u>Section</u>	<u>Description</u>	<u>Page</u>
1	Definition of Induction	4
2	Aim of Induction	4
3	“First Night” Procedures	4
4	Induction Programme	5
5	Action for Detainees Arriving Late or at Weekends	6
6	Induction of Disabled Detainees	7
7	Support for Carers	8
8	Facilities and activities available on the wing	8
9	Healthcare Services	8
10	Length of Stay	9
11	Provision of Religious Services	9
12	Induction Policy reviews	10
13	Annex A – Diagram of Induction Model	10
	Annex B – “Basic Information” leaflet	11
	Annex C – Compact	14
	Annex D – Reception & Induction Record / Needs / First 24 Hour Interview / Diversity	
	Annex E – Induction Record / Observations / Checklist	
	Annex F – Room Sharing Risk Assessment explanatory notes	19
	Annex G – RSRA Form	39
	Annex H – Guidance for Staff – Core Induction	45
	Annex I – Personal Evacuation Plan	61

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

1. Definition of Induction

Induction is a process, not an event. Induction begins as soon as the reception process is completed. The purpose of Induction is to inform detainees about detention centre life, the regime and their responsibilities, services and support available to them.

The induction process enables detainees to approach their time in detention constructively. It enables Detainee Custody Officers to begin to explain the standards expected in detention and to establish the culture and ethos of the centre. The decency agenda is established during Reception and Induction. All future behaviour within the centre is governed by the induction process.

All detainees new to the centre must be provided with an appropriate induction process. The aim is to assist and support the detainee's integration into the centre and to continue the assessment process to enable the detainee to remain safe and make the best use of their time in detention.


2. Aim of Induction

Brook House IRC aims to have in place, and effectively deliver, induction policies and procedures for all detainees, regardless of location which:

- Deal with their immediate needs
- Enable detainees to cope in detention
- Provide information
- Ensure the detainee feels confident asking for help
- Continue the assessment process, as outlined in national instructions
- Help to integrate the detainee into the life of the centre
- Aid the transfer from Induction to the Residential Units.
- To set guidelines to be carried on throughout the stay in the centre.
- Can be customised to complement and help deliver the Caremap of any detainees identified as being at risk of self harm.

Beck Wing is designated as the First Night & Induction Unit; new detainees to Brook House will be located on this unit and will remain there until Induction is completed. They will then be allocated to a residential unit.

The Induction policy and procedures will be available to staff, detainees and other supporting agencies such as IMB and Samaritans. A diagram outlining the Induction model is at Annex A.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

3. “First Night” Procedures

Once the initial reception process has been completed a reception officer will notify the Induction wing of a new arrival being ready and will escort the detainee to the induction wing. The initial reception process will involve searching, completion of pages 1, 2, 3 4 5 and 6 of the detainees first 24 hours and induction record, this includes completion of vulnerability screening, exploring needs of the individual (Welfare, Diversity, Safer Community, Chaplaincy), RSRA, screening by medical and property checking.

At this stage the detainee will also be issued a Loan phone (if he does not have a permitted phone of his own) with a 5 minute calling card which is recorded on page 2 of the first 24 hours and induction record. Page 4 of the first 24 hours and Induction record is for reception staff to identify any specific needs, vulnerability or issues raised during the reception process. Any urgent issues such as vulnerability, are to be directed for the attention of the allocated Early Days in Detention Manager, any other smaller issues which do not require immediate rectification are to be recorded, a note of action taken and the Induction wing staff informed on arrival to the Induction wing.

Following completion of the above, the Reception Officer will escort the detainee to Beck Wing. On arriving on the wing the Induction Officer will complete an initial induction interview with the detainee which will involve;


- an explanation of the induction policy including
- an explanation of the decency policy
- explanation of any additional support the individual can expect to receive – ie Supported Living Plan

Following this the detainee will be shown to his room and given a hygiene and bedding and plastics pack. This will be recorded on page 7 of the first 24 hours and induction record.

The initial introduction will explain the basic induction procedure, familiarise the detainee with his new surroundings and answer any questions he may have.

Follow up referrals identified through Reception will also be made to Welfare, Activities, Safer community, Education or Diversity departments.

All detainees WILL receive an initial induction interview, prior to being locked in for the night, *(if due to time of arrival it is not practical then this form will be completed by oncoming officers)*, in

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

order to identify any specific needs or highlight identifiable risks. If any needs or risks are identified the Induction Officer will notify the Early Days IN Detention DCM and must ensure that they are recorded on the First Night & Induction Record along with planned or suggested action to address these issues

For detainees who do not speak English, Induction Officers must ensure that an adequate first night interview takes place to meet the needs of the detainee and keep him safe during the first night. Big Word translation and/or staff/detainee translators are to be used if required. When carrying out the first night interview the Induction Officer is to ensure that any identified needs or concerns are recorded along with planned or suggested action to address them.

All detainees will be given access to a phone (Loan phone or their personal mobile if permitted) and 5 minute card so that they will be able to contact a family member or friend to advise them that they are at Brook House. A record of the card being issued is to be made on the individuals Reception file.

All new arrivals to the Gatwick IRC's will be monitored at least 3 times during lock up unless a risk dictates otherwise during their first night and all records will be recorded on their history sheets, DAT and first 24 hours record.


4. Induction Programme

Following completion of the First Night at Brook House, new detainees will follow the Induction programme outlined at Annex A. The programme consists of 3 stages:

- Stage 1 (First Night)
- Stage 2 AM & PM (Induction Process 24- 72 hours)
- Stage 3 (Discharge Board) – ensure all Induction completed prior to moving.

Following unlock on the morning of Stage 2, staff on Beck Wing are to physically check on the wellbeing of all detainees unless circumstances such as late arrivals dictates otherwise, ensure that they understand they have been unlocked and inform them that Breakfast will commence at 08.15 hrs.

For the remainder of the morning detainees will remain unlocked on Beck Wing, in order to give an opportunity to address initial needs with Induction Officers, however, they can leave the Unit if they wish to but will not move to Arun, Clyde or Dove Wing until they have completed their Induction.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Detainees on Stage 2 of Induction will receive the “Core Induction” session, on Beck Wing. This session will be delivered by an Induction Officers.

The Core Induction session delivers the key information new detainees need to know regarding the centre regime and other factors relating to safety and decency. A copy of the guidance notes for staff delivering the Core Induction session is attached at Annex H.

As part of the Induction, representatives from Chaplaincy, Diversity, Safer Community, Welfare and Paid work will visit the Unit and personally deliver information about their respective areas.

All new arrivals will be offered a tour of the Centre, occurring daily at 09.30 as well as watch an Induction DVD.

6. Action for Detainees Arriving Late or at Weekends


Brook House is a 24 hour a day centre which is open 365 days of the year detainees will arrive at any time throughout the day, this may be after lock up. It is essential that an assessment of all detainees’ needs is carried out regardless of what time they arrive.

Beck Wing is fully staffed until 21.15pm every day. As such detainees received up to 20.30pm will be able to receive the standard First Night procedures from Beck Wing Officers, including first night interview to identify specific needs or issues.

After this time the centre is run by night officers normal procedures should be followed wherever practical, if however it is not practical to complete the full first night induction due to exceptional amounts of arrivals or very late arrival then action should be taken as follows:

- First Night & Induction Record opened and reception process followed
- Room Allocation based on RSRA and reception process
- Explanation given of how to contact the Samaritans

All information obtained, including any specific needs identified, is to be recorded in the First Night & Induction Record. Beck Wing officers coming on duty the next day will make contact with the detainees immediately after unlock and ensure that full First Night procedures take place.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

In the event of detainees arriving at weekends, standard First Night procedures will take place as Beck Wing is fully staffed at weekends.

In exceptional circumstances occur and there is no available space on Beck Wing, above screening and risk factors will still be screened from Reception and the 24 hour observations will occur on the Unit. Early Days in Detention Managers will work with Residential DCMs to ensure new arrivals receive the Core Induction.

Where possible, Departments will visit Arun, Clyde and Dove Wings to complete introductions.

In the event that a representative is not available to visit, Induction Officers will provide the detainee with written guidance of services and support available.

7. Induction of Disabled Detainees

In accordance with the Disability Discrimination Act (DDA), Gatwick IRC's has a statutory obligation to ensure that disabled detainees are able to engage fully with the centre's regime and are able to receive the same level of Induction as non-disabled detainees.

The DDA defines a disabled person as someone who has a physical, sensory or mental impairment, which has a substantial and long-term effect on their ability to carry out normal day-to-day activities.


"Impairment" covers physical or mental impairments and includes sensory impairments, such as those affecting sight or hearing. It includes: Diabetes, Dyslexia, Autism, Deafness, Asthma, Arthritis, and Depression.

"Substantial adverse effect" is not defined other than it is more than a minor or trivial effect. The requirement that an effect must be substantial reflects the general understanding of disability as a limitation going beyond the normal differences in ability which exist among people.

"Long term" means 12 months or over.

As part of the First Night procedure, detainees will be screened by Healthcare to identify any adaptations or if additional support provided.

Through the Supported Living Plan document, Healthcare staff will record support or other facilities he requires to carry out everyday activities (ie sign language, interpreter, large print books, assistance with meal, ground floor room, special eating utensils etc) and any specific obstacles he faces in day to day activities.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

.Through the Supported Living Plan, the Early Days in Detention Manager will ensure that the Induction Programme is adjusted to ensure that detainees declaring a disability are able to engage fully and receive the same level of information and support as other detainees. This adjustment to the Induction Programme should be made in conjunction with the Detainee, Healthcare, Early Days in Detention Manager and Diversity Officer. Full details of the adjustment and reasons for them are to be made in the detainee First Night & Induction Record.

8. Support for Carers

As part of the First Night procedure all detainees will be asked if they are primary carers for children or other dependents. If this is confirmed the following steps will be taken:

- Identify with the detainee who is caring for the dependent now.
- If no known person identified, contact will be made immediately with the Social Services of the area where the dependent is residing.
- All available information will be passed to Social Services to ensure that the dependent is not at risk


In addition to ensuring dependents are not at risk, support will be given to detainees identified as being carers or parents in the following ways:

- Identifying with the detainee if they foresee problems with visits
- Identify any specific issues or concerns with their dependents

9. Facilities and activities available on the Induction Unit

Whilst located on the induction unit detainees will have access to facilities in line with the other wings such as;

- Gym
- Shop access
- Library books
- Fax machine
- Laundry
- Newspapers
- courtyard

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- IT use
- Room cleaning equipment

10. Healthcare Services.

Whilst housed on the Induction unit there will be several ways detainees can contact healthcare. They will be given the opportunity to make an appointment to see the doctor on their initial assessment, then during the initial interview they will be asked if they wish to see a nurse.

11. Length of Stay

It is anticipated that detainees will be housed on the Induction unit for a minimum of 24 hours (unless discharged prior to this). The maximum time will vary dependent upon availability of beds on the other units and all aspects of the induction being completed.

12. Provision of Religious Services


Religious services will be available whilst housed on the induction Unit these will include but not limited too:

- Access to the Mosque for Jummah prayers
- Access to the Sunday church service in the visits hall
- Access to prayer mats and Quran's
- Access to the Bible.
- Daily visits from the chaplaincy team.

13. Induction Policy Reviews

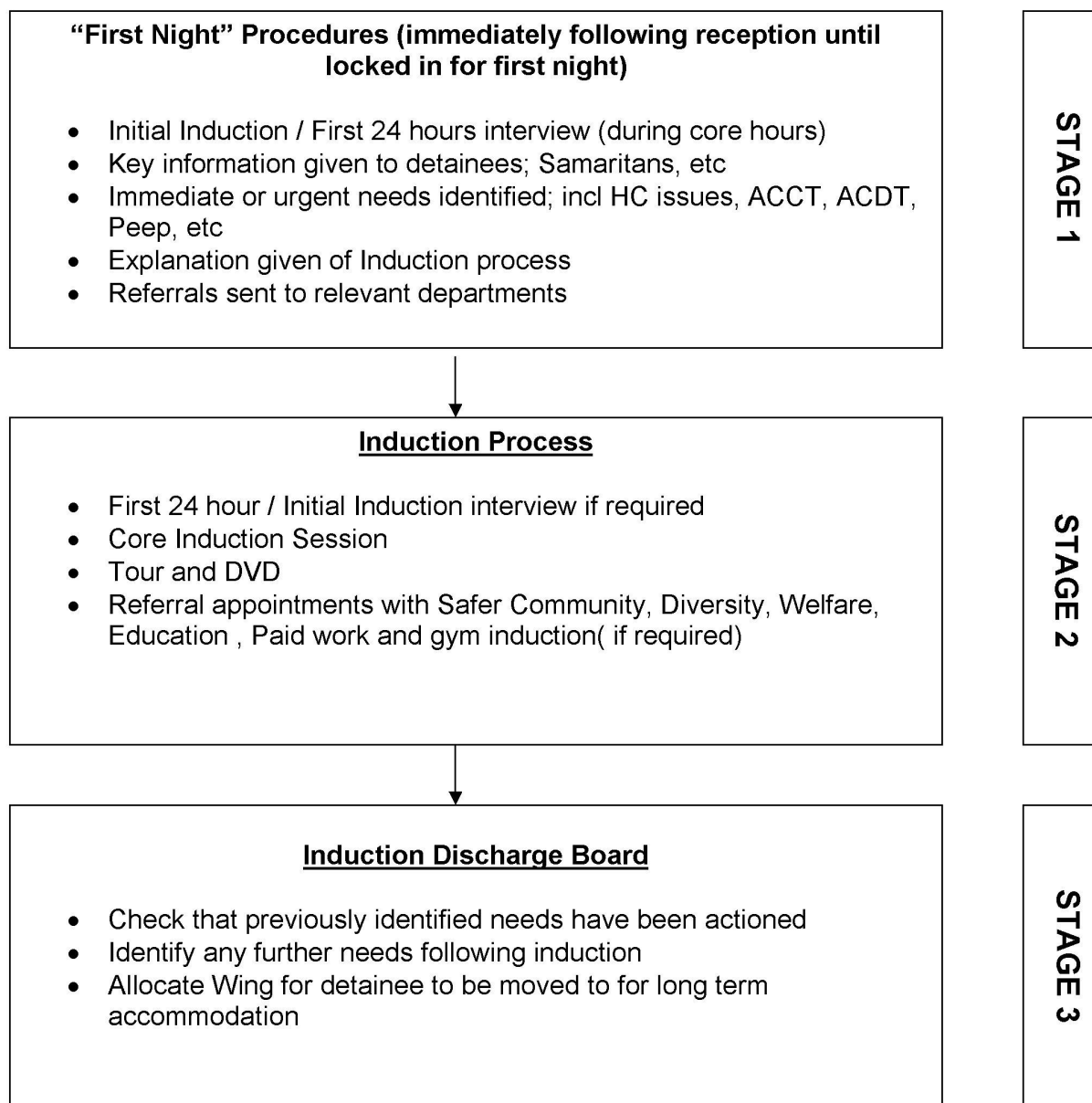
The Induction policy and procedures will be formally reviewed at least once a year by the Head of Safeguarding


The Early Days in Detention Managers will be responsible for completing ongoing review of the Induction Programme. Any emerging issues, trends or needs for change will be discussed between the Early Days in Detention Manager and the Head of Safeguarding.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

ANNEX A

**BROOK HOUSE IMMIGRATION REMOVAL CENTRE
INDUCTION PROCESS**



Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		


BROOK HOUSE IRC

BASIC INFORMATION



BROOK HOUSE IMMIGRATION REMOVAL CENTRE
PERIMETER ROAD SOUTH
GATWICK AIRPORT
WEST SUSSEX
RH6 0PQ

TEL: 01293 566500

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

INTRODUCTION

You will be taken through the Induction process to enable you to make the best use of your time at Brook House IRC. Once you have completed the induction process, you will be allocated to a room on Arun, Clyde or Dove Wing, however, the purpose of this leaflet is to give you a brief overview of the facilities available to you.

REGIME

All wings will be unlocked at 0800 hours and lock up is 2100 hours.

Detainees will be required to return to their respective rooms for 1200 hours for lunch and 1700 hours for Dinner. Mealtimes are as follows:

Breakfast 0815 – 0845 hours
Lunch 1230 – 1330 hours
Tea 1730 – 1830 hours

ACTIVITIES

Detainees are able use Activities including sports and games, education, the library and IT facilities between the following hours:


0830-1200 hours
1330-1700 hours
1830-2045 hours

VISITING

Social visits are allowed between the hours of 14:00 to 17:30 and 18:30 to 21:00 hours daily. Legal visits are facilitated in the mornings between 0900 – 1200 hours.

HEALTHCARE

There is a Healthcare facility on site which is open from 9.30am – 10.30am and 2.30pm – 3.30pm from Monday to Friday. It is also possible to attend the Healthcare facility on a Sunday. Please note that Healthcare can be contacted if there is an emergency at any time during the day.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

USEFUL TELEPHONE NUMBERS

- Legal Services Commission – 0845 345 4345
- Gatwick Detainee Welfare Group (GDWG) 0800 389 4367
- Samaritans – Direct Line (Freephone) 08457 90 90 90

WELFARE OFFICE

A Welfare Officer will visit Beck and Eden Wing daily. The Welfare Office is located on the first floor and you can make an appointment to see the Welfare Officer, who can assist you with a number of queries.

YOU CAN EARN MONEY ! YOU CAN APPLY FOR PAID WORK

There are lots of opportunities for you to earn extra money, subject to satisfactory clearance. You can work in the Kitchen, or as a Cleaner. You will be paid on a daily basis directly into your account because as you know, money can not be taken into the centre.

ANTI BULLYING STRATEGY


Brook House IRC will not tolerate any behaviour which causes distress to another individual. Safer Community Orderlies are on site and you can approach them at any time if you need to talk to someone. The Safer Community Orderlies wear Polo shirts that distinguish them from the rest of the population. There are also pictures on the Wings of the Safer Community Orderlies, should you need assistance.

MEETINGS FOR YOU! – TAKE PART AND MAKE A DIFFERENCE!

DETAINEE CONSULTATIVE MEETING

Once you have settled into the centre, you may wish to become a Wing Representative. A Wing Representative can put forward any concerns that you and fellow residents may have to an Officer and you can also attend the monthly Detainee Consultative meeting to help us make this centre a better place for you.

EDI MEETING

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

You may also wish to attend the Equality, Diversity and Inclusivity meeting which is held on the monthly basis. The purpose of the meeting is to discuss any matters relating to religion, ethnicity and disability which may need to be drawn to the attention of the dedicated team of Orderlies and the Diversity Co-ordinator.

SAFER COMMUNITY MEETING


The Safer Community meeting is held on a monthly basis. The Safer Community team will discuss matters that have arisen within the centre and will both update you and ask you for your feedback and any ideas that will help to make Brook House a safer and more secure centre for everyone.

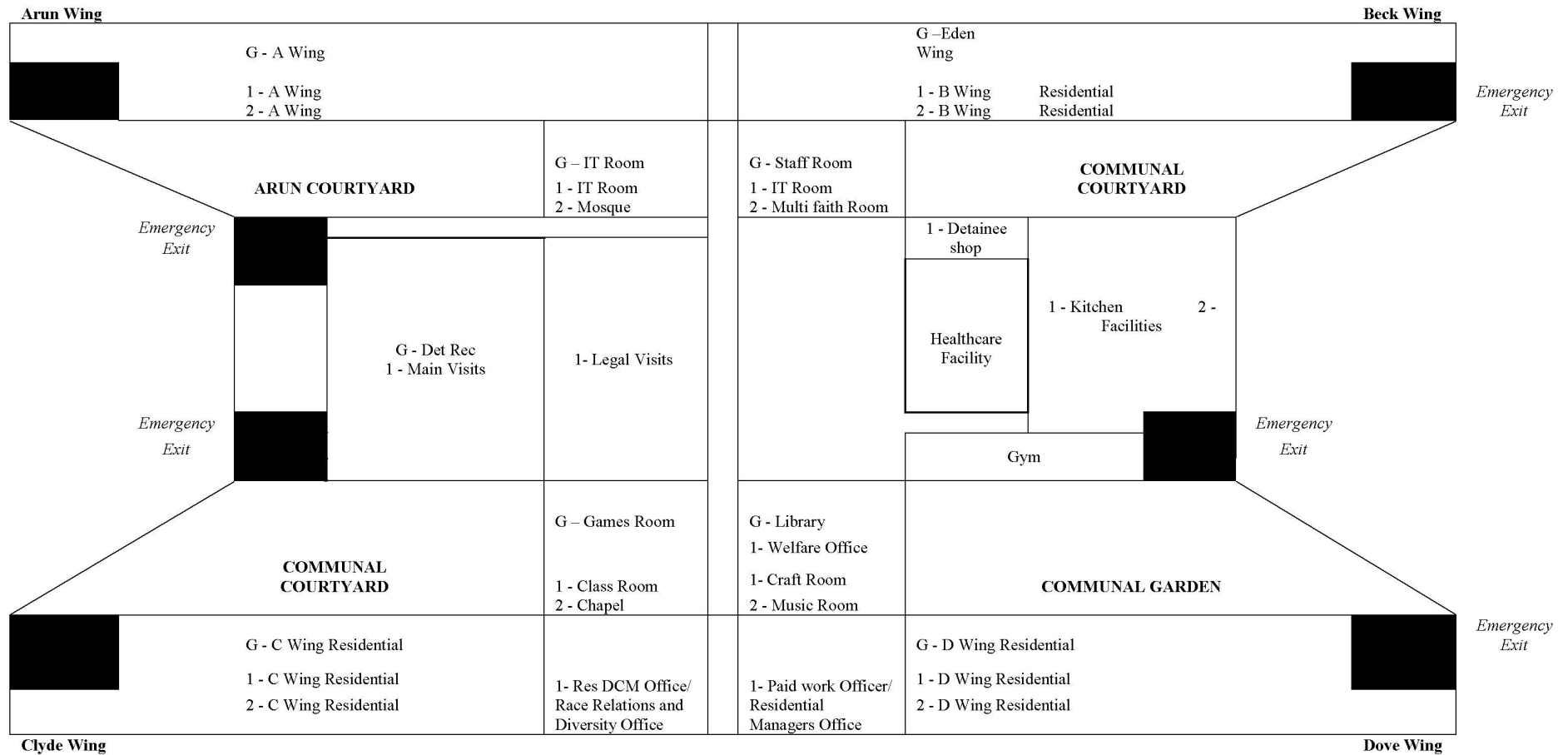
NO SMOKING POLICY


Whilst at Brook House you may only smoke in the exercise yard and some of the rooms. Smoking is not permitted in any other part of the centre.

If you are feeling unwell, a bit down, anxious, or just want information or some help with something - Please speak to an Officer. Officers are here to help you!

**A SET OF THE HOUSE RULES FOR BROOK HOUSE IS AVAILABLE FOR REFERENCE IN THE WING
OFFICE AND THE LIBRARY**

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		




Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

ANNEX C

DETENTION CENTRE COMPACT

This compact is not legally binding. This is a voluntary agreement which you are encouraged to sign. If you do not wish to sign it will not affect your rights and responsibilities or the way you are treated in the Detention Centre or have an effect on any application or appeal that you may have made about your stay in the United Kingdom.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

INTRODUCTION

The Law

The Detention centre is managed under powers contained in the Immigration and Asylum Act 1999 and the Detention Centre Rules. We are obliged by law to provide you, as soon as possible after your reception so far as possible in a language which you understand, with a copy of this compact together with necessary information about the Rules and other matters about life in the Detention Centre, including how to make requests and complaints. A full description of your rights and responsibilities are contained in the Detention Centre Rules 2001.

What you can expect from us

To be treated with respect and dignity at all times.

To be given information regularly about the Detention Centre Rules that apply to all centre's and information about your particular centre.

To be given information regularly about why you are being Detained and the progress of any application or appeal that you have made affecting your stay in the United Kingdom.

To have decent accommodation, food and the necessary facilities to care for your own personal hygiene.


To be provided with Healthcare to at least the standard expected within the community in the United Kingdom.

To be offered activity and recreation to help use your time in Detention constructively.

To be able to communicate with your family, friends and legal representatives.

To be able to practice your religion if you so wish.

To be able to make a request or complaint, including any to do with compliance with this compact, and receive a properly considered answer quickly. Any request or complaint can be confidential if you wish so.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

What we expect from you

To treat other Detainees, staff and all other people with respect whatever their race, religion beliefs, sexual orientation or social circumstances. Never to behave in any way which might endanger the health or personal safety of others

To have respect for and never interfere with other people's property. To treat the Detention Centre property with care and respect and keep your room neat and free from offensive materials. To maintain your personal hygiene.

To co-operate fully with the Detention Centre staff, Immigration service, and others assisting in the operation of the centre in the performance of their duties. To abide by the Centre's Local Rules and Routines for the smooth and safe running of the Centre.


Never use alcohol or drugs within the Centre unless authorized for Medical or Religious purposes.

To submit to a medical examination if it is believed that you may be suffering from a specified disease that could affect your own health or that of others.

Never to send a communication whose contents may endanger the security of the Detention Centre or the safety of others or are otherwise of a criminal nature.

Never to ask any Officer to take part in any business or to bring in or take out any article on your behalf.

To express your views, request and complaints in a reasonable and constructive manner.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

USE OF FORCE

The following information is to advise you of the action that may be used against you should your behaviour fall below what is considered reasonable for the safety of other Detainees and the Centre. Force will only be used as a last resort and strictly within the terms of Rule 41 of the Detention Centre Rules 2001.


We will ensure that force is used only when necessary as follows:

- ❖ To keep a Detainee in custody.
- ❖ To prevent violence.
- ❖ To prevent the destruction of the property of the Detention Centre.
- ❖ To prevent the destruction of the property of others.
- ❖ To prevent a Detainee from physically seeking to stop their own lawful removal.
- ❖ To prevent a Detainee from physically seeking to stop the lawful removal of other Detainees.

As a result of any of the above you may be removed from associating with other Detainees until your behaviour is considered reasonable again.

In the event of force being used against you, we will ensure that you are seen by a member of the Healthcare team as soon as possible.

All incidents of the use of force will be recorded and you have the right to complain against the use of force should you wish to.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

AGREEMENT

I have read and I understand the contents of the compact. I also understand that any attempt to engage in any unlawful activity will be reported to the police and may result in criminal prosecution.

WE AGREE TO THE TERMS AND CONDITIONS OF THIS COMPACT


Signed by Officer (On behalf of the Centre)

Print Name

Signed by Detainee

Detainee print name


____/____/____
Date

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

ANNEX F

Room – Sharing Risk Assessment (RSRA)


GATWICK IMMIGRATION REMOVAL CENTRE
ROOM SHARING RISK ASSESSMENT (RSRA)
<p>The RSRA is an essential tool in the identification of detainees at risk of seriously assaulting or killing another detainee in a locked room.</p> <p>The Director is ultimately responsible for ensuring that staff are aware of the RSRA process, and that it is being followed, including:</p> <ul style="list-style-type: none"> • the RSRA Form and RSRA Review Form are being used and completed properly; • all evidence sources are checked on reception or the next day; • risk indicators from the evidence sources are taken into account in the risk decision; • a manager oversees the risk management process as part of the Violence Reduction Strategy • a register of detainees designated as high risk is held

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

CHAPTER 1: THE ROOM SHARING RISK ASSESSMENT (RSRA)


Purpose

- 1.1 Gatwick IRC and Home Office expect that every detainee must have an up to date Room Sharing Risk Assessment even when they are not in shared accommodation. The RSRA will provide a risk assessment for room sharing and other occasions when space may be shared, such as unsupervised holding areas. The assessment will always be completed on the RSRA Form.
- 1.2 A ruling by the European Court makes it a legal requirement to carry out a risk assessment before any detainee can share a room.
- 1.3 An up to date risk assessment is one which is based on the latest information about a detainee. Most detainees risk will not change but when it does, a review must be carried out. The RSRA, once completed, is a live document. It is therefore vitally important that staff report changes in a detainee's behaviour which affects one of the RSRA risk issues.
- 1.4 The possibility that a detainee will be in shared accommodation is high at Gatwick; therefore every detainee will be assessed for their suitability to share a room. The RSRA process is only used to assess the risk a detainee poses to another detainee in a locked room or unsupervised enclosed space, such as a holding room.
- 1.5 The purpose of the risk assessment tool is to:
 - help staff identify detainees at risk of murdering or very seriously assaulting another detainee in a closed space, most importantly an accommodation room,
 - draw together information and knowledge about the predictive risk factors surrounding this type of violence,
 - make best use of documentary evidence,
 - support staff judgement about allocation to rooms and risk management,
 - record additional operational precautionary measures for a detainee identified as a potential risk, where room sharing is unavoidable.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

1.6 The Room Sharing Risk Assessment process does **not**:

- replace staff judgement, but allows staff judgement to be recorded effectively, to be made available to others and to be acted on,
- provide an actuarial risk score, but is based only on the information available,
- rule out room sharing by detainees who pose a risk, but guides risk management. High risk detainees can share rooms in some circumstances, subject to satisfactory risk assessment.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Risk Categories

1.7 There are two risk categories, HIGH RISK and STANDARD RISK.

- HIGH RISK detainee is one for whom there is a clear indication, from evidence, of a high level of risk that they may be severely violent to a room mate, or that a room mate may be severely violent to them.
- STANDARD RISK detainee is one for whom, based on the best evidence available; there is no immediate risk of severe violence in an accommodation room.

Mandatory HIGH RISK detainees

1.8 A small number of detainees may have committed offences in the past which are so significant in room sharing risk terms that they should always initially be categorised as HIGH RISK. These detainees will have long term, static risk, previous offences are;

- Murder or manslaughter of another prisoner/detainee
- Assisting in the suicide of another prisoner/detainee
- Committing a life threatening assault on another prisoner/detainee
- Raping or committing a serious sexual assault on an adult victim of the same sex.


Police National Computer (PNC) records

1.9 Gatwick IRC does not have the facility to search the PNC for previous criminal records. Staff will however be robust in the checking of any PNC printout which many accompany any detainee arriving into Gatwick.

Timing for completion of the RSRA Form and use of evidence

1.10 Risk Assessments will be completed as part of the reception process when detainees are first received into detention. They must be based on evidence of risk and completed before allocation to any accommodation, especially a shared room.

1.11 Detainees must not be allocated to a shared room until the RSRA for all occupants have been checked. It can be the paper form or NOMIS record. If a RSRA is not available, detainees should be placed in a single room until the risk rating has been confirmed.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Transferred prisoners/detainees

1.12 Every time a prisoner/detainee is transferred to another establishment, the sending prison/Detention Centre must ensure an up to date CSRA/RSRA form accompanies the detainee as part of the transfer documentation. The CSRA/RSRA will be up to date unless it has been superseded by a further CSRA/RSRA form or as a CSRA/RSRA review. These must be read before decisions are made as to where a detainee is located.

1.13 Gatwick IRC reception will ensure every detainee who transfers to another Centre or prison has an up to date RSRA which will be handed to the escorting contractor.

The RSRA Review

1.14 Reviews on HIGH RISK assessments must always happen when risk factors change.

1.15 Reviews will be carried out by a multi-disciplinary team to ensure a balanced and reasonable decision is taken. Duty Directors can authorise urgent reviews pending confirmation by multi-disciplinary team.

1.16 All reviews are to be completed on RSRA Review Form.

Authorisation

1.17 STANDARD RISK assessments are signed by a Reception Custody Officer.


1.18 HIGH RISK assessments are signed by a Reception Manager and countersigned by Duty Director.

Recording RSRA and review decisions

1.19 All HIGH RSRA and review decisions must be recorded in the detainees DAT Observation Record in addition to completing the paper form.

1.20 Completed RSRA and reviews (originals) will be held in the detainee's transferable document. Copies will be held in the Detainees file.

1.21 The Register for HIGH RISK will be maintained by the Oscar One office

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Use of information to assist the RSRA process

- 1.22 All information relevant to room sharing risk must be used to carry out initial assessments and reviews. For ex foreign national prisoners previous CSRA, adjudications and case notes must be scrutinized.

Detainees at risk of harming themselves

- 1.23 Where a detainee is identified as being at risk of self-harm or suicide, an ACDT Plan must be opened.
- 1.24 Detainees at risk of self harm are not at heightened risk of harm to other detainees.

Healthcare reasons for single accommodation


- 1.25 Healthcare staff may determine that a detainee should be accommodated in a single room for medical reasons which do not cover RSRA risk issues; the RSRA process is not to be used to achieve this.
- 1.26 Healthcare should note any requirement for 'Medical Single' in the detainee's medical notes and inform residential staff appropriately.

Forms

- 1.27 RSRA and RSRA Review Forms will be supplied to the appropriate areas.
- 1.29 There should be no editing of the forms to facilitate local use

Advice


- 1.30 Queries about the RSRA process should be directed to the Deputy Director or the Safer Detention Manager.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

CHAPTER 2: PROCESS

The RSRA Process

- 2.1 The Room Sharing Risk Assessment process is designed to risk assess detainees for their potential to murder or violently assault a room mate when they share with one other detainee. Historically within the Home Office detention estate the chance of a life threatening assault or homicide is low.
- 2.2 The primary purpose of this guidance is to help staff involved in taking decisions to understand the nature of the risk they are trying to identify. Assessments for detainees first received into detention must only be completed on RSRA Form.
- 2.3 There are two risk categories, HIGH RISK and STANDARD RISK.
- A HIGH RISK detainee is one for whom there is a clear indication (from the evidence) of a high level of risk that they may be severely violent to a room mate or that a room mate may be severely violent to them. In this case, restrictions on room sharing must be applied. This includes where the reason for the high risk rating may be short term. High risk detainees can share rooms, subject to appropriate risk assessment and sharing considerations.
 - A STANDARD RISK detainee is one for whom, based on the evidence available, there is no immediate risk of severe room violence. This is not an unchangeable risk and the situation will need to be monitored using the review process. Residential staff will continue to decide detainee room location and the most appropriate sharing options.
- 2.4 Indicators of heightened risk can be checked quickly from evidence sources. The indicators are;
- Life threatening assault on, or murder or manslaughter of another prisoner/detainee or assisting a suicide whilst in custody/detention.
 - A serious sexual assault with an adult victim of the same sex
 - Healthcare assessment of increased risk.
 - Repeated violence in custody/detention.
 - Racially or homophobic motivated offence, either in the community or in custody/detention.
 - Arson, fire setting, either in the community or in custody/detention.
 - Kidnap / False imprisonment / Stalking/Hostage taking, either in the community or in custody/detention.
 - Detainee statement of heightened risk.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- Detainee significantly vulnerable to assault.
- Officer's observation.
- Documentation interviews and other case reviews
- Further charges or police interview
- Recent conflict between countries/nationalities/ethnicities

2.5 A RSRA can only be properly completed when these indicators have been looked for in available evidence sources.

The sources are;

- Police National Computer records will provide details of previous convictions.
- Old prison records.
- Warrants which will provide information on previous charges or offences.
- PER will provide information on violent behaviour in police, Court and Escorting Agency custody.
- DMR will provide healthcare staff with details of a detainee's medical history in relation to their risk of harming a room mate.
- Security files.
- IS91 and IS276 will provide risk information from Home Office.
- Detainee Transferrable Document will provide details on a detainee's behaviour in other Detention Centres.


2.6 Where Police National Computer printouts are available they should be scrutinised by the Reception Manager and the Security department during the security search. The RSRA Review Team will also interrogate PNC printouts for all reviews.

2.7 If a strong indicator is found during the evidence search then the detainee should be HIGH RISK. If sources are checked and there are no indicators, the detainee should be STANDARD RISK.

2.8 Detainee's who have severely assaulted room mates, and those who have committed sexual assaults against same-sex victims, must be categorised as mandatory high risk, because of the on-going, static nature of the risk they pose.

2.9 Reception Officers are responsible for the checking of all evidence for new arrivals at Gatwick and signing all RSRA for STANDARD RISK should no evidence be found.

2.10 When evidence is found which would warrant HIGH RISK then the forms must be signed by the Reception Manager and countersigned by the Duty Director.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

CHAPTER 3: GUIDANCE ON COMPLETING THE RSRA FORM

- 3.1 This chapter is designed to offer advice on completing the assessment.
- 3.2 The section at the top of the front page and shows the result of the risk assessment. It is on the front for clarity but should be the last section to be completed when a decision on risk has been made.

Risk categories


- 3.3 There are only two possible decision options from the assessment, high risk and standard risk.
- **High Risk.** A HIGH RISK detainee is one for whom there is a clear indication (from the evidence) of a high level of risk that they may be severely violent to a room mate or that a room mate may be severely violent to them. In this case, restrictions on room sharing will be applied. This includes where the reason for the high risk rating may be short term. High risk detainees can share rooms, subject to appropriate risk assessment and sharing considerations.
 - **Standard Risk.** A STANDARD RISK detainee is one for whom, based on the evidence available, there is no immediate risk of severe room violence. This is not an unchangeable risk and the situation will be monitored using the review process. Residential staff will continue to decide detainee room location and the most appropriate sharing options.

Detainee Details

- 3.4 The detainee details section is self explanatory but must be completed in full.

Part 1 Operational Assessment


- 3.5 In Part 1 the risk indicators and sources of evidence are shown.
- 3.6 Staff completing the form in reception should read PNC printouts where available, an adjudication history and historical adjudication record, the Warrant and the other records.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- 3.7 For the reception assessment staff should;
- look in all available sources of evidence
 - identify any risk indicators
 - circle Y or N on the form to show which sources were looked at and whether any evidence was found
 - enter comments if necessary
 - sign and date at the bottom of the "Reception Assessment" column

Explanation of Risk Indicators

- 3.8 Life threatening assault on, or murder or manslaughter of another prisoner/detainee or assisting a suicide whilst in custody/detention. A life threatening assault would be one in which the victim suffered very severe injuries. This would typically result in a lengthy stay in hospital, resuscitation, or perhaps time on a ventilator. In police terms these would be the most serious form of Grievous Bodily Harm, or attempted murder. Assisting a suicide is a charge used where the police believe a prisoner/detainee was involved in the death of a cell/room mate but there is insufficient evidence for a murder or manslaughter charge. Evidence; would be found in the prison records and/or Movement Order.
- 3.9 Sexual assault with same sex adult victim either in the community or in prison/detention. Convictions for sexual assault need to be considered very carefully. An adult convicted of rape of a female or a child would not be at increased risk of harming a cell/room mate; they would be more likely to be harmed themselves. However, an adult convicted of raping a same-sex adult would present a high risk. Evidence; would be found in the prison records and/or Movement Order.
- 3.10 If there is evidence, or strong suspicion, that these two risk factors above exist, the detainee must be assessed as mandatory high risk and located in a single room.
- 3.11 Healthcare assessment of increased risk.
See PART 2 HEALTHCARE ASSESSMENT
- 3.12 Racially or homophobic motivated offence or reports in the community or in custody/detention. Many detainees are aware that in a busy reception a claim to have violent racist or homophobic thoughts can lead to gaining a single room. Detainees should always be challenged because such claims are against the Law and Detention Rules. Where there is evidence that they do hold racist or homophobic views, they can still be accommodated in a shared room if there are other detainees who would not be at risk. For

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

instance, a detainee with evidenced racist views may still be suitable to share with another detainee from the same ethnic background. In this case the detainee should be assessed as high risk and sharing considerations are to be recorded. Subsequent observation of the detainee during association or when at work or education will highlight whether they freely associate with members of their target group, or if they avoid such people. Such observation may trigger a RSRA review and could also result in the detainee being further challenged.

Evidence; it is possible to identify racist and homophobic detainees from their past behaviour (PNC or Prison adjudication history check if they have previously been in custody and IS91 and Detainee Transferrable Record whilst in detention).

- 3.13 Repeated violence in custody/detention. Violence in the community is not a good predictor of custodial violence. Violence in prison/detention, and in particular repeat violence, indicates the person is likely to continue to be violent. For guidance, involvement in more than two violent incidents would definitely demonstrate increased risk.

Evidence; the behaviour being considered is violence in custody/detention so the best source of evidence is Prison adjudication record or IS91, IS276 and Detainee Transferrable Record. If violence is exclusively directed at inanimate objects, such as room furniture or property, this does not necessarily indicate a detainee will be violent to a room mate. The RSRA is primarily concerned with inter-personal violence, that between people.


- 3.14 Arson, fire setting in the community or in custody/detention. It is known that previous convictions for arson are a very strong indicator that a prisoner/detainee may be violent towards a room mate. The risk from those who set fires in their cell/room is obvious, but any history of arson indicates increased risk.

Evidence; arson and fire setting behaviour will be recorded in PNC, Prison adjudication record, IS91, IS276 and Detainee Transferrable Record

- 3.15 Kidnap / False imprisonment / Stalking / Hostage taking in the community or in custody/detention; People who develop a fixation or abnormal attachment to others in any environment will have increased risk.

Evidence; previous convictions for this offending which took place in the community, will be found in PNC. Prison adjudication record, IS91, IS276 and Detainee Transferrable Record will evidence if this activity took place in prison/detention.


- 3.16 Detainee statement of heightened risk. The decision process for room sharing should be evidence based wherever possible. However, when a detainee raises a genuine issue of concern which has not been evidenced elsewhere, this is to be taken into account.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- 3.17 Significant detainee vulnerability. The primary purpose of the RSRA is to identify a detainee's risk of harm to a room mate, but there can be circumstances where a detainee is vulnerable to attack. This could be because of a previous offence or appearance but any vulnerability issue or discriminatory factor is important. Staff should be particularly alert for circumstances where a detainee is being "controlled" or inappropriately influenced by other detainees. Detainees with significant vulnerability can be accommodated in a shared room but great care needs to be taken to ensure neither detainee presents a risk to the other.
- 3.18 Officer's observation. There will be circumstances when an officer suspects that, even though there is no documentary evidence, there may be cause for concern. It may be something like the detainee's body language or demeanour but this option provides an opportunity for staff to express any concerns.
- 3.19 Other. The last category provides an opportunity for any other evidence to be recorded.

Sources of Evidence

- 3.20 The sources of evidence provide the following information;
- Police National Computer (PNC) records The PNC print out shows all previous convictions, both in summary form and in detail.
 - Prison Records Where a detainee is recognised as having been in prison/detention previously, records of adjudication history, previous RSRA history and behaviour can be accessed. If a detainee has previously been violent in prison/detention, there is an increased likelihood of them being violent again.
 - Warrant For ex-prisoners previous offences or charges will be shown.
 - PER The form should accompany every prisoner/detainee on arrival and will indicate any warnings as well as general behaviour in police custody, at Court and in transit.
 - Detainee Transferrable Record Will be a record of a detainee's behaviour in other Detention Centres.
 - IS91 and IS276 (Movement Notification) Will indicate any risk factors.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		


- Other If access to other sources of evidence is available, they can be used.

Part 2 Healthcare Assessment

- 3.21 The Healthcare section of the form no longer requires an absolute risk rating. Instead, it identifies whether there is increased risk due to healthcare factors, or no increased risk. Experts have determined the range of medical factors which could indicate increased risk of harm to a room mate, but these factors individually or collectively, do not necessarily mean a detainee can not share a room. When the Healthcare reception screener completes the form they will indicate where there is evidence of increased risk. Where this exists, the Healthcare screener should raise their concerns with the reception manager. For example, the first consideration for Healthcare staff is whether there is evidence of psychosis, but a high number of detainees may fall in this category. It is possible that if no other evidence of heightened risk, either Healthcare or operational, is present, the detainee might be safe to locate in a shared room, but sharing would imply careful choice and supervision. Healthcare and the reception manager should discuss the evidence before reaching a decision.
Evidence; would be found in medical records or from their assessment of the detainee during the reception health screen.

Part 3 Authorisation


- 3.22 When the assessment is complete it must be signed by the Reception Manager.
- 3.23 All HIGH RISK assessments must be countersigned by the Duty Director or a Senior Manager.
- 3.24 The final action is to enter the risk rating on the front page.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

CHAPTER 4: THE ROOM SHARING RISK ASSESSMENT REVIEW


The RSRA Review Process

- 4.1 In the RSRA review process risk factors are described as static and dynamic.
- Static: this risk is unlikely to change over very long periods of time. Examples would be a previous offence of in cell/room homicide or arson.
 - Dynamic: this risk can change; they are not fixed and are more likely to require review over shorter periods. An example would be a detainee becomes extremely volatile after being given bad news.
- 4.2 RSRA reviews should only be conducted when there is a realistic chance of the risk factors having changed.
- 4.3 The objective with any high risk detainee is to identify whether the risk has reduced sufficiently to allow safe allocation of the detainee into a shared room.
- 4.4 Reviews of standard risk detainees are more complex and are designed to identify increased risk which could indicate that the detainee should be located into a single room. It is important that changes in the detainee are identified early to prevent harm to other room mates.
- 4.5 Where it is known or believed that information about a detainee is held, this must be accessed as soon as possible. For example, detention records on a detainee who returns to Gatwick should be checked at the earliest opportunity after reception.
- 4.6 Reviews should be completed on the RSRA Review Form.
- 4.7 All RSRA reviews will be multi-disciplinary and will be chaired by a member of the Senior Management Team. Reviews will be the responsibility of the Violence Reduction Review Team.
- 4.8 Because risk factors can be identified at any time there will be occasions where a detainees risk will change and will require an immediate decision. Where urgent concerns are raised that a standard risk detainee should be increased to HIGH, a decision can be made by the Duty Director. The case will then be reviewed at the next RSRA Review meeting. The

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		


procedure will be the same for a HIGH RISK detainee who is assessed as no longer posing a risk and a reduction to STANDARD RISK is required.

- 4.9 All RSRA Review meetings will be minuted. Contributions will be acceptable by e-mail when staff cannot physically attend.
- 4.10 All RSRA review forms should be signed by a Director in the case of urgent reviews or the chair of the RSRA Review meeting.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Reasons to conduct a review

Type of review	Reason for review	Timing for review	Who might take part
Long term High Risk (Static risk)	To ensure potential changes to risk are assessed routinely	Annual	Violence Reduction Review Team which will include security/public protection, healthcare, residential, workshop staff.
Short term High Risk (Dynamic risk)	When a detainee's character or behaviour has changed	There will be no fixed time for these reviews. A date will be agreed when the high risk decision is taken	Violence Reduction Review team which will include security/public protection, healthcare, residential, workshop staff.
Standard Risk following new or additional information	When new information which was not available on reception becomes available later	Reviews will take place as soon as possible after receipt of the new information	An immediate decision can be taken by the duty manager, but will be reviewed by the Violence Reduction Review Team when it next meets
Standard Risk review prompted by changes in detainee's behaviour or thinking – The intelligence driven review	These reviews are very important. They must be completed where a harmful change in a detainee's behaviour or thinking becomes known. Their mental state may be deteriorating, they may have become aggressive or any of the risk factors may be triggered. These changes may put a room mate at risk	These reviews will be carried out immediately and before the detainee is returned to a shared room	An immediate decision can be taken by the duty manager, but will be reviewed by the Violence Reduction Review Team when it next meets

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

CHAPTER 5: GUIDANCE ON COMPLETING THE RSRA REVIEW FORM

- 5.1 This chapter is designed to offer advice to staff carrying out RSRA reviews.
- 5.2 The section at the top of the front page and shows the outcome of the review. It is on the front for clarity but should be the last section to be completed when a review on the risk has been made. The appropriate box should be ticked and other wording crossed out allowing clarity on what decision has been made.
- 5.3 There are four possible grounds for a review;
- Remain HIGH RISK
 - Increase to HIGH RISK
 - Remain STANDARD RISK
 - Reduce to STANDARD RISK

Detainee Details

- 5.3 All basic details of the detainee are required to ensure the correct individual is being assessed.

Sources of Evidence


- 5.4 Boxes in this section should be ticked to indicate which sources of evidence have been assessed. The box 'OTHER' is ticked, the source should be described.

Type 1 Review of Long Term High Risk Detainees


- 5.5 The risk factors in this category are static and therefore unlikely to change for a long time. In these cases, risk of harm to room mates should be directly linked to other risk of harm information. Therefore RSRA reviews will be undertaken by the RSRA Review meeting which must include Security. In the absence of any other risk review within a twelve month period the RSRA Review meeting will carry out a basic review of HIGH RISK detainees to ensure that any change is recognised or confirm that there is none.

Type 2 Review of Short Term High Risk Detainees

- 5.6 Some detainees assessed as high risk will have short term or dynamic risk factors, which means there is a possibility of change from high risk to standard risk.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- 5.7 Where the risk is recognised to be of a short duration staff will be required to monitor the detainee and report to the RSRA Review meeting. The Team will decide if the detainee can be reduced to standard risk.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

5.8 Examples of short term risk factors;

- When a detainee is received at Gatwick who is detoxing they may exhibit aggressive behaviour. Once their treatment has been agreed and they have stabilised their risk of harm to others will usually recede.
- A detainee who is agitated and disturbed on reception may have stabilised after a period of appropriate medication, example: for mental health problems.
- A detainee may become better adjusted to detention life and therefore less vulnerable. This will be difficult to evidence, but good interactions by staff will provide the best evidence.

Type 3 Review of Standard Risk Detainees following new or additional information

5.9 Where information which would clearly indicate a detainee should be HIGH RISK is not available on reception but is subsequently identified, this must be referred to the Duty Director and RSRA Review meeting immediately.

Examples are;


- Previous cell/room assaults in other establishments or in previous custody/detention
- Offence Information such as rape of same sex adult, racial or homophobic offences. The offences of concern are shown in the box on the form
- Previous in-patient at a Special Hospital or Secure Unit
- A diagnosis of Personality Disorder (Conduct Disorder in the case of young people)
- Information from Healthcare assessments

5.10 The new information could come from;


- Core records from previous sentences
- Documentation delayed on transfer
- Discovery that a detainee was in custody previously and has a NOMIS number
- Information from the police, probation, Home Office or other organisations

Type 4 Review of Standard Risk Detainees prompted by changes in detainee's current behaviour or thinking – The intelligence driven review

5.11 The majority of detainees assessed as STANDARD RISK will not need to be re-assessed. However, as these detainees will normally share a room, it is essential that any change in the detainee's behaviour which could indicate increased risk must be referred for further consideration.


Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- 5.12 Should any risk factors be identified at any time, the Duty Director must be informed for an immediate decision.
- 5.13 It is the duty of all staff who become aware of changes relevant to increased risk of harm between room mates (from observation, discussion or other information) to advise the Duty Manager immediately and record this on DAT case notes.
- 5.14 As part of the decision and review process, referral to Healthcare for an assessment should be considered. The review, and the outcome, must be recorded. Such a decision would need to be confirmed at the next RSRA Review meeting.
- 5.15 It is also highly likely that indicators may not immediately be identified as such. One erratic episode, even though recorded, may not trigger thoughts of a need for a RSRA review. Knowledge of all such incidents is, however, essential when building a picture of changed characteristics in a detainee. Ad hoc and general comments are likely to be recorded in a variety of places, such as;
- DAT
 - SIR's
 - Observation Books
 - Healthcare reviews
 - Psychology reports
 - Receipt of further information about past behaviour
 - IEP reviews
 - Previous Adjudications in prison
 - Discussion at Safer Detention meetings
 - Information received in any other form from any source (such as staff, visitors, IMB, other detainees, education staff, the detainee's family)
 - MAPPA
 - PPO
 - Separation Reviews
- 5.16 This list is not exhaustive but staff involved in reviews should be alert to refer any issues to the RSRA Review meeting.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Key examples of the sort of indicator to be considered are;

- Homicidal Impulse/Ideation. In other words, when it becomes known that the detainee has urges to kill, thinks and fantasises about killing. The initial signs may not be clear, but any belief that the detainee has serious homicidal thoughts must be reported to the Duty Director.
- Violence. Fighting or assaulting other detainees or staff, especially when more than two incidents are recorded. Only violence in detention is relevant but this includes secure homes, mental hospitals and secure training centres as well as previous prison custody.
- Bizarre behaviour observed. The issue is that the detainee's mental state may be impaired and should not be ignored. Healthcare staff must be proactive in these cases to ensure relevant risk information is passed on.
- Frequent room changes. If a detainee displays behaviour or attitudes which are seriously objectionable to other detainees sharing with them, this could lead to severe violence. When detainee's report that they can't share with another detainee, and several other detainees who have been located with them say the same, staff should consider whether the reasons for being unable to share are so significant that a review of the RSRA is needed. The issues should be so significant that severe violence could result, so staff judgement is called for.
- Paranoia. This is a condition where a person has frequent, strange fears that other people are planning to hurt them or thinking bad things. Paranoia causes intense feelings of distrust, being persecuted or threatened by others. As it is a difficult for many staff to assess Paranoia, but the following guidance is offered;
 - If it becomes known that the detainee believes that all those around them are enemies, ready to harm or even take his life. In this delusion people of an aggressive temperament can become homicidal.
 - Strange requests without a rational explanation.
 - Feeling that every member of staff is against them.
 - Concern which leads to a referral to Healthcare.


Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- Fire-setting behaviour. This behaviour is symptomatic of disturbed individuals. If arson is a frequent response by the detainee to general frustration then they are clearly a danger to others. But a detainee who sets fire to objects just once is also dangerous. Arsonists sometimes want to watch others responding to a fire they have set, which means they enjoy putting others in danger and watching them react. Room mates are clearly at risk but so are officers who have to provide first response to fires.
- Detainee vulnerability. Any vulnerability issue is important but where a detainee is being “controlled” or inappropriately influenced by other detainees, or is at serious risk from other detainees, this can lead to severe violence.
- New Receptions at Gatwick. Factors may have been identified at the previous establishment, and detainees may reveal a change in nature following a transfer. The new environment may also exacerbate underlying conditions, leading to aggression.

5.17 Where any indicator or cause for concern is recognised, this must be referred to the Duty Director and a review of the RSRA undertaken. The Manager should authorise continued management of the detainee as STANDARD RISK, or change the risk assessment to HIGH RISK. As part of the decision and review process, referral to Healthcare for an assessment should be considered where appropriate. The review, and the outcome, must be recorded on DAT and referred to the RSRA Review meeting for approval.

Authorisation


- 5.18 The authorisation section is to be signed by the chair of the RSRA Review meeting or the Duty Director.
- 5.19 The final action is to enter the risk rating on the front page.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

CHAPTER 6: GUIDANCE FOR MANAGERS

Guidance for Managers on how to reach a decision

- 6.1 Where a risk indicator has been identified, a full assessment of the risk needs to be undertaken to determine two things; whether the detainee should be categorised as HIGH RISK or STANDARD RISK, and when they are HIGH RISK, whether they can share a room.
- 6.2 Managers must assess and decide upon a detainee's risk to a room mate. The assessment needs to take account of all the evidence and intelligence available, and any local knowledge of the detainee, and ensure this meets the needs of the detainee being assessed and other detainees who may be co-located with them.
- 6.3 Managers should consider a range of issues including;
 - What is the evidence?
 - How recent is it?
 - Is there more than one piece of evidence?
 - Is the detainee a risk to any other detainee, or only some?
 - Can the risk be mitigated?
 - Is the nature of the risk long term?
- 6.4 The decision which has to be taken is; does this detainee present a risk so great that they may kill or attempt to kill a room mate. Vulnerable detainees should be considered for the risk to them.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Annex G

ROOM SHARING RISK ASSESSMENT


EACH DETAINEE MUST BE SPOKEN TO IN ORDER TO OBTAIN ANY ADDITIONAL INFORMATION (Language Line must be used where necessary to ensure detainee understands what they are being asked)

Risk status resulting from this assessment	
HIGH RISK <input type="checkbox"/>	STANDARD RISK <input type="checkbox"/>
High level of risk of severe room violence including temporary state – Restrictions must be applied	No immediate risk, but situation will need to be monitored.

Detainee Details:		IRC	
First Name		Reception Date	
Surname			
Date of Birth			
CID Number			
Ex-FNP	Y/N		

PART 1. OPERATIONAL ASSESSMENT

A. IF ANY OF THESE FACTORS ARE IDENTIFIED, A MANAGER MUST BE CONSULTED	
<i>Current or previous conviction, proven adjudication or knowledge of;</i>	
Healthcare assessment of increased risk (from Part 2)	Y / N
Racially or homophobic motivated offence or reports	Y / N
Repeated violence in custody	Y / N
Arson, fire setting	Y / N
False imprisonment / Hostage taking	Y / N
Detainee statement of heightened risk	Y / N
Significant detainee vulnerability	Y / N
DCO's observation	Y / N
Other	Y / N
Reason for decision and comments.	
<i>If any evidence is found, a manager must decide on the risk rating. Otherwise, a DCO can authorise standard risk.</i>	
Appointment: <input type="text"/>	Detainee is HIGH RISK <input type="checkbox"/> Detainee is STANDARD RISK <input type="checkbox"/>
Name: <input type="text"/>	Signature: <input type="text"/> Date: <input type="text"/>

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Source of evidence	DTD	IS91	Prison Licence	MAPPa Level	ACDT	Previous Assessment	Other

ROOM SHARING RISK ASSESSMENT

PART 2. HEALTHCARE ASSESSMENT (To be completed by a member of the Healthcare Team)

Following the reception health screen process, do you have any information [from your observations and if available the clinical records, DTD, IS91 form etc.] that indicates this detainee may be **atrisk of severely harming another detainee in a locked room** due to:

- ☐ Psychosis
- ☐ Extremely disturbed behaviour
- ☐ Failure or inability to engage with the reception health process
- ☐ Agitation or aggression
- ☐ Other reasons (e.g. attitudes and/or behaviour) described below*

If any of the above factors are present this indicates increased risk.

INCREASED RISK

☐

Clear indication of increased level of risk that the detainee might assault a room mate. **Discuss with Reception Officer**

If none of the factors above are present this indicates there are no immediate healthcare risks.

NO INCREASED RISK

☐

*Other reasons and comments including sharing considerations;

Any relevant information, including any of the above, must be recorded in the clinical record including any plans for further assessment if required.

Role / Position:

Name:

Signature:

Date:




Gatwick IRCs

11

Reason for decisionREVIEW NUMBER:

Signature:

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		


Date:	<input type="text"/>	Date:	<input type="text"/>
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POTENTIAL REDUCTION TO STANDARD RISK	
Reduction from HIGH RISK to STANDARD RISK must be clearly evidenced and agreed by a multi-disciplinary committee	Y / N

POTENTIAL HIGH RISK FOLLOWING NEW INFORMATION		
<i>Receipt of new or additional information which may increase the risk rating</i>		
Previous cell assaults in prison or room assault in previous IRC		Y / N
New or additional offence information such as:	racial or homophobic offences	Y / N
	False imprisonment	Y / N
	Hostage taking	Y / N
	Arson, fire setting	Y / N
Information from healthcare assessments, healthcare assessment of increased risk		Y / N
Previous in-patient at a Special Hospital or Secure Unit		Y / N
A diagnosis of Personality Disorder		Y / N

POTENTIAL HIGH RISK PROMPTED BY CHANGES IN DETAINEE'S CURRENT BEHAVIOUR OR THINKING	
<i>Receipt of new or additional information which may increase the risk rating</i>	
Homicidal Impulse/Ideation. In other words, when it becomes known that the detainee has urges to kill, thinks and fantasises about killing. The initial signs may not be clear, but any belief that the detainee has serious homicidal thoughts must be considered	Y / N
Strange or unusual behaviour observed. The issue is that the detainee's mental state may be impaired and should not be ignored.	Y / N
Paranoia. Concern which leads to a referral to Healthcare. Examples would be: a) the detainee believes that all those around them are enemies, ready to harm or even take their life. B) strange requests (eg asking staff to remove TV / radio without a rational explanation). C) detainee saying that all staff are against them	Y / N
Detainee statement of heightened risk or significant detainee vulnerability	Y / N
Violence to other detainees or staff, especially when more than two incidents are recorded	Y / N
Frequent room changes requested by the detainee or their room mates	Y / N
Other	Y / N

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		


ROOM SHARING REVIEW RECORD

Detainee details			
First Name		Surname	
CID Number			


FIRST REVIEW	
RSRA RATING FOLLOWING THIS REVIEW:	HIGH / STANDARD
REVIEW CARRIED OUT AT IRC:	
DATE OF THIS REVIEW:	
NAME OF PERSON APPROVING THE REVIEW:	

SECOND REVIEW	
RSRA RATING FOLLOWING THIS REVIEW:	HIGH / STANDARD
REVIEW CARRIED OUT AT IRC:	
DATE OF THIS REVIEW:	
NAME OF PERSON APPROVING THE REVIEW:	

THIRD REVIEW	
RSRA RATING FOLLOWING THIS REVIEW:	HIGH / STANDARD
REVIEW CARRIED OUT AT IRC:	
DATE OF THIS REVIEW:	
NAME OF PERSON APPROVING THE REVIEW:	

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

FOURTH REVIEW	
NAME OF PERSON APPROVING THE REVIEW:	HIGH / STANDARD
REVIEW CARRIED OUT AT IRC:	
DATE OF THIS REVIEW:	
NAME OF PERSON APPROVING THE REVIEW:	

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		


ANNEX H

CORE INDUCTION SESSION STAFF GUIDANCE NOTES

This booklet is NOT a “script”, it is intended to be used as guidance for Wing Officers, to ensure that consistent information is delivered as part of the Induction process.

Officers should follow the format, ensure the key information contained is delivered but also expand and explain to their detainees in their own way, ensuring that ALL detainees fully understand; consider use of Language Line or interpreters (Detention Centre staff or external) as necessary

Good morning my name is DCO....., I am here to explain the induction programme to you.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

1. What is “Induction”?

Induction is the term we use to describe the introduction you are given to Brook House and the procedures that will affect you whilst you are here. Staff from different parts of the detention centre will meet you over the next week and give you information to help you make the most of your time here. The Induction programme will explain how this detention centre works, what services are available and how to access them.

You must make sure that if there is anything you do not understand fully you ask me to explain to you again. Remember...this Induction is for you!

2. Detention Centre Life


In Detention lots of people have to live together that might not mix normally.

Explain importance of mutual respect. Explain:

- Don't have to be friends with everybody but show tolerance to others
- Treat people as you want to be treated
- Remember people are different. What you like maybe isn't the same as the man next door ie music, religion etc
- For most of you the only thing you have in common is being in detention

Explain importance of:

- Talking to staff
- Talking to Samaritans
- Talking to Chaplaincy

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

PERSONAL HYGIENE

A sensitive subject, some things might not apply to you, but:

- Not everyone has the same standards
- In a closed environment like detention it is very important

Explain importance of:


- Showering regularly
- Soap/deodorant/shampoo available from staff during office hours
- Changing sheets & towels weekly
- Cleaning rooms daily. Staff will check your room every day!

WING HYGIENE

Although we have cleaners, you are expected to help out with wing cleaning

Explain:

- Use bins provided
- Leave areas tidy and as you would want to find them
- Clean away your own mess
- Don't leave it for someone else, remember, this is your house!

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

3. Health & Safety


This is everybody's responsibility!

Explain:

- You must not interfere with or damage anything that could result in injury to yourself or others
- You must report anything faulty or damaged to an Officer or other member of staff
- If you have an accident you must report it to an Officer or other member of staff, even if you are not injured
- You must take notice of any COSHH (Control Of Substances Hazardous to Health) information you are shown or told about
- Do not store food in your room that should be kept in a fridge as this can cause food poisoning

4. Fire Safety

- **If you Discover a Fire.** Raise the alarm either by activating the alarm system, or by telling a member of staff. **DO NOT** attempt to fight the fire, evacuate the area.
- **In the Event of a Fire.** Obey **ALL** instructions from staff members. If evacuation is necessary move quickly and quietly to the evacuation point (explain where evacuation points are). Once at the evacuation point be patient and remain quiet to help staff account for all detainees on the roll. Your cooperation could save lives.
- **Fire Fighting Equipment.** Equipment such as the alarm system and the extinguishers and hoses are provided to protect **you** in event of a fire. It is a criminal offence to tamper with, or abuse it and you are warned against such activities. Your life and the lives of others depend upon this equipment being in good working order.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- **Fire Exercises.** Monthly Fire Evacuations are carried out at Brook House. Please treat these exercises as the real thing. They are necessary to ensure that we are able to carry out the correct procedures in the event of a real fire.
- **Fire Notices.** Please ensure that you read the fire notices/instructions that are situated by the main entrance to the wing and in your room. Please familiarize yourself with fire instructions and location of fire exits elsewhere within the centre

In all fires, your co-operation is essential

5. Diversity – Race Relations & Equal Opportunities

At Brook House we are committed to supporting the Immigration Removal Centres' policies on Race Relations & Single Equality Policy


We expect and insist that all people within Brook House, whether staff, detainees or visitors, are treated with respect whatever their ethnic origin, religious beliefs, gender, sexual orientation or social circumstances.

There is a single Immigration Removal Centre policy regarding this which incorporates both:

- **Race Relations:** is committed to racial equality. Improper discrimination on the basis of colour, race, nationality, ethnic or national origins, or religion is unacceptable, as is any racially abusive or insulting language or behaviour on the part of any member of staff, detainee or visitor, and neither will be tolerated(**ask if understood; explain if necessary**)
- **Equal Opportunities:** The detention service is opposed to any form of discrimination or harassment, whether direct or indirect, conscious or unconscious, on the grounds of ethnic origin, religious belief, sexual orientation, disability or other factor. Insulting, abusive or derogatory language will not be tolerated. Any form of harassment or unfair discrimination will be regarded as a serious disciplinary offence(**ask if understood; explain if necessary**)

We have Diversity Detainee Custody Manager who is responsible for co-ordinating Race Relations issues but all staff are responsible for upholding these policies.

What this means in practice is as follows overleaf.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- It is the policy of Brook House to treat all its staff and detainees fairly, regardless of race, colour, ethnic or national origin. We will work to eliminate unfair discrimination on these grounds in the work that we do and in the service that we provide.
- In carrying out our duties we will treat everyone fairly. And we expect this in return
- We will treat people as individuals. Staff have clear instructions to behave towards everyone in a way which is courteous, impartial and free of racial bias. Again, we expect detainees to act in this way too.
- We will not tolerate racial prejudice or discrimination by word or conduct on the part of any member of our staff, detainee or visitor.

You can report a Racist Incident at any time

Definition of a Racist Incident

“Any incident which is perceived to be racist by the victim or any other person.”

To report an Incident


- You can report a racist incident directly to a member of staff,
- Directly to a Diversity Orderly
- Through the Complaints system (more about that later),
- or directly to the Commission for Racial Equality.

All Racist Incidents will be reported to the Race Relations Liaison Officer and the centre Director.

All Racist Incidents reported, from all sources, are investigated and outcomes of investigations are made known to those involved.

All parties involved with a racist incident are safeguarded, including the victim and the person reporting the incident.

Any Racist incident will be treated with the utmost seriousness

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

6. Suicide & Self Harm

Many people find detention life a difficult experience for many reasons.

Sometimes people feel that the only way to deal with their problems is to harm themselves or sometimes to take their own life.

All of the staff here understand that people feel this way sometimes and are able to help. We take all cases of self harm seriously regardless of the reason. We can offer support or try and help remove the reasons why people feel this way.

If you feel unable to talk to a member of staff initially you may speak to a diversity orderly

If you would rather not talk to a member of staff or Diversity Orderly you can speak to The Samaritans.


The Samaritans are a charity that is available 24 hours a day to provide confidential emotional support for people who are experiencing feelings of distress or despair, including those which may lead to suicide.

7. Bullying & Anti Social Behaviour

Detention centres are small communities. Unfortunately like all communities we have people who act anti socially, aggressively or bully other people.

This behaviour will not be tolerated

We have a policy which aims to challenge & prevent bullies whilst supporting their victims. This is our Challenging Antisocial Behaviour Strategy (**ABS**). When we identify someone as a bully they will be subject to various levels which may include limiting their movement, restricting places they

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

can go or removing them from association for the more serious bullies. At the same time we will offer support and ways to help those who have been subjected to bullying.

Bullying can take many forms such as: Punching, Slapping, Name Calling, Threats, Queue Jumping, Assaults, and **will not be tolerated**.

Don't accept it - **tell a member of staff**.

If you feel that you are being bullied or picked on - **tell a member of staff**.

If you think somebody else is being bullied or picked on - **tell a member of staff**.

8. Decency

Staff at Brook House have a duty of care for all detainees who are held at Brook House. Those cares include their emotional and physical well being. It is with this in mind that this policy has been written.

Showing affection: Detention Centres are public places; as such the behaviour that detainees demonstrate should mirror what is acceptable within the community. For example, it would be acceptable to offer a comforting embrace to someone who is upset.


It is not acceptable to display behaviour that may be seen as offensive by a third party, this includes anyone working within the detention centre, anyone visiting the detention centre or another detainee. **For example fondling each other anywhere in the detention centre, this includes the rooms.** If caught doing this you will be told to stop and a warning will be given, how these warnings affect you will be explained later.

In Room Association: During association periods, room association (i.e. more than one person in a room) is permitted.

Dress Code: The decency policy also applies to the standards of suitable clothing which are expected of every detainee whilst moving around the detention centre, associating or working on the wing and whilst in your room.

On the Wing:

- Detainees will not wear nightclothes in association areas.
- Detainees may wear slippers.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

- Detainees may wear vest tops and shorts should they wish.
- Detainees may wear Flip Flops to and from the shower.

On General Association off the Wing

- Detainees will not wear nightclothes.

On Exercise

- Detainees must wear a minimum of vest top, shorts (not underwear) and trainers.
- Tops may be removed on the exercise yard but must be worn to and from exercise. Detainees should be aware of the sun's harmful rays when doing so.

At Work / Education.

- When attending work detainees must wear a minimum of tracksuit bottoms and T shirt or the correct supplied clothing if working in the serveries. However, if attending gym detainees may wear Vest Top and shorts.

Chapel

- No shorts or vest tops to be worn.

Attending appointments eg, Healthcare, Home Office.

- Detainees will not wear shorts / vest tops to appointments.


Staff will monitor that you are appropriately dressed at all times. Failure to comply with this will result in a warning being issued.

Pictures & Photos: Noticeboards will not display offensive material, it is acceptable for topless photographs/material to be displayed, however more explicit materials will not be allowed. Failure to comply with this will result in such material being taken down by staff and a warning being issued, further failure to comply may result in a change of your privilege status.

9. Wing Rules

In order to maintain a safe and secure environment for all, and for your own comfort you will be expected to sign up to the following rules:

- To be dressed appropriately at all times when you leave your room, as per the decency policy. Footwear must be worn at all times when you leave your room.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		


- When leaving the wing you must have your ID card, and you must produce this if asked by any member of staff.
- You and your room will be searched regularly and without prior notice.
- Keep your room clean and tidy at all times. Wing staff will inspect your room each morning. Pictures and/or posters are to be on your pin board only. Nothing is to be stuck to the walls or room furniture.
- The property you are allowed to have in your possession is your responsibility, so make sure it is secure. Do not lend or borrow items.
- If you want to speak to an officer in the wing office, you must knock on the door and only enter when told to do so.
- You are only allowed to smoke in your designated room or on the exercise yard.
- When officers call “lock in” you must go to your room immediately.
- Do not leave litter lying around, always use the bins provided. Please leave things clean and tidy.
- Abusive shouting will not be tolerated. TV or music must be at reasonable level all times.
- Comply with all lawful instructions and reasonable requests.
- Behave decently towards others and respect the property of others.
- Maintain a good standard of personal hygiene.
- Treat the fabric, fixtures, fittings, and equipment of the detention centre with care and refrain from acts of Vandalism
- No bullying or aggressive acts toward others
- Ensure your conduct complies with Brook House’s policy on Race Relations, which is displayed on notice boards throughout the detention centre.
- Do not enter the room of another detainee without their express permission and their presence.
- Remember your behaviour and compliance with these rules will determine the privileges you enjoy under the Rewards and Incentives Scheme.

10. Home Office

The Home Office controls everything that happens to you whilst in detention. They will advise you of what is happening with your immigration case and your detention.

The wing officers do not have any dealings with your Immigration case.

During induction, if you have not previously seen a Home Office representative, you will be interviewed by the Home Office and any questions you have can be directed to them at this interview.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

If you wish to see the Home Office to discuss your case after you have left Beck Wing there are application forms in the offices and in the library. If you complete these and put them in the box in the library (the box is emptied each morning before association) your request will be dealt with as soon as possible.

12. Independent Monitoring Board (IMB)

As their name suggests the IMB are completely independent and not part of the Detention Centre Service. They consist of a cross section of the community, appointed by the government, who volunteer their services to:

- Check on the state of the Detention Centre premises, the way the centre is run and the treatment & welfare of detainees
- Identify to the Director matters that require attention
- Inform the Home Secretary of any matters regarding the detention centre that they feel needs to be reported
- They are not able to advise on your Immigration status.

The IMB monitor the welfare of the whole detention centre; detainees, staff and the premises, to ensure proper standards of care and decency are maintained

Members of the IMB visit regularly on a rota basis. If you wish to speak to a member of the IMB speak to them directly when they visit or make a written application to speak to them by asking any member of staff.

13. Detainee's Complaints


In the first instance, speak to a member of wing staff about any complaint you have – they can normally sort out the majority of complaints.

If you have a problem you are unable to resolve with wing staff, you can use the Complaints procedure.

The forms are located at the end of the wing outside the office.

Completed forms should be put in the big yellow box marked Home Office (**show where they are**).

A member of staff from the Home Office empties the box each day.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

You will receive an answer back normally within 3 weeks; if you are not satisfied with the answer you may appeal **(explain)**

Remember the IMB are available to talk to if you have problems.

The Prison and Probation service Ombudsman's office, are also able to help solve problems but they will only become involved if all other detention centre methods of complaint have been used. Wing Staff will explain how to contact the Ombudsman if you need to do so.

14. Visits

Social Visits take place every day of the week from 1400 – 1730 hours and from 1830 – 2100 hours.

All detainees and their visitors must be appropriately dressed.

Legal Visits take place every day from 0830 – 2100 hours.

To book a visit, your visitor will need to phone the visitors centre (01293 566599) and arrange an available time. Visit slots are allocated on a first come first served basis. Visits outside of these times can be accommodated if you are due to leave the Centre imminently.


When visited your visitors may hand in some of your property this will go on your personal items and on your return to the wing during office hours you will be able to book a time slot to go to reception to collect any property that you are allowed.

15. Exercise & Association

You will have access to the courtyards. Organised sports events will take place daily.

A fitness room is available for your use but you will need to have an induction completed by one of the activities staff before you may use the equipment. This may be carried out before you can use the facility.

Once your induction is complete and you are situated on Arun, Clyde or Dove wing you will have use of the general association areas (library, shop, IT suite etc) where you will be able to meet with your friends from other wings.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

You are not allowed to enter any wing other than your own. However, if you wish to use the other facilities open to you, your ID card must be shown to an Officer, on request.

16. Letters & Phonecalls

Letters

You are allowed to send one letter per week at the centres expense. Any other letters you wish to post are at your own expense (you may buy stamps from the shop or you may have them posted in to you).

All letters you send must be placed in the wing post box with your name and room number written on the back of the letter.

All outgoing post must be placed in the post box on the landing **before 15.30pm** for it to go out that day.

All letters sent to you must be opened in front of staff and checked for anything inside. Any recorded or registered letters will be kept in reception and you will be escorted there in the afternoon usually after 13.30 to open the letter. All parcels will also be kept in reception.

If your family or friends want to send money or postal orders to you they are advised to send them by recorded or registered post. They should not send cheques as these can not be cashed for you or paid into your account.


Postal Orders should be made payable to "G4S or left blank" and have your name and room number written on the back.

Phone Calls

You will be issued with a Loan phone and sim card for your use if you do not have your own permitted phone. You have to buy credit for your phone, which you can do at the shop. If this phone is damaged or lost you will be liable for the costs and this will be taken from your account.

You are also allowed your own mobile (show allowed list) as long as it has no internet access or a camera.

Any call made from an official (office) phone **must be approved by a Detainee Custody Manager**. This will normally only be allowed for legal calls.

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

17. Meals

Breakfast is served daily from 0800 – 0845 hours

Lunch is served daily from 1230 – 1330 hours

Dinner is served daily from 1730 – 1830 hours

You may take your meals at the tables provided or take them back to your room you are responsible for clearing up after you have eaten and you will be responsible for washing your own.

A wide variety of meals are available including meals suitable for vegetarian, vegan, halal diets. You will be informed of what is on the menu for the following day and you will need to place your order, if you fail to do this you will be allocated the main menu which you will not be able to change.

If food suited for your religious beliefs is not included please speak to wing staff, kitchen staff or the Diversity Officer.

18. Property


You are allowed to bring your own personal items of property into the centre as long as they are not on the prohibited list (point out some from list). You are advised that you are responsible for everything you retain in your own possession and you will have signed a form to this effect. Detainees may have a personal allowance of:

- Two pieces of luggage
- Dimensions of both items must not exceed 158cm (height+width+depth)
- A combined weight of no more than 20kg

G4S can not accept responsibility for these items.

When you arrive on Arun wing you will have been allowed to bring with you property you need for 2/ 3 days. The rest of your property will remain in reception when you are allocated a wing you will be able to book an appointment in the wing office to go to reception and collect other personal items you require.

19. Chaplaincy, Faith & Religion

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

We have a Chaplaincy team that ensures the religious or faith requirements of all detainees are met. A member of the Chaplaincy will meet with you during your Induction programme.

We have a full time co-ordinating Chaplain and part-time or visiting ministers of all religions and faiths.

The Chapel is situated on the second floor at Clyde & Dove Wing end of the building and serves all Christian denominations. A service takes place on Sunday morning in the visit hall which is open for all to attend.

The Chaplaincy team are available to any detainee regardless of religion for any support & help (pastoral care)

The mosque is situated on the second floor at A & B wing end of the building. A multi faith room is also situated at this end of the building and is available for all other faiths or beliefs.

If at any time you need to speak to a member of the Chaplaincy team ask a member of wing staff and we will ensure they come to see you as soon as possible.

20. Care Officer Scheme


Whilst you are at Brook House you will have a Care Officer allocated to you. This Officer will get to know you whilst you are with us and should be the first person you contact for anything other than routine day to day requests.

As staff work different shifts and have holiday there will be times when your care officer is not on duty. They have a nominated “back up” officer for when they are not on duty. If neither officer is available then speak to any officer on duty.

Your care officer is here to help you and will make an effort to get to know you; make sure you help your care officer to help you.

21. Education

“Education is available from Monday to Friday in the classrooms in the Activities corridor. Timetables are displayed around the centre and will be available in printed format for all detainees. English classes are offered for beginners and more advanced students, Word Processing for beginners and Arts & Crafts for everyone. Other subjects are available – enquiries should be made with the Education Department”.

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

22. Healthcare

A member of Healthcare would have completed an assessment with you in reception. They will inform you through wing staff of any further appointments.

We do not have 'in patients' facilities but do have a comprehensive Healthcare Department.

If you need to see a member of Healthcare or wish an appointment with the Doctor, you can attend the surgery 0930 – 1030 hours and 1430 – 1530 hours daily.

23. Identity Cards

You should have been issued an ID card by now **(check all have been issued one)**

You must carry this at **ALL** times when you leave the wing so that it can be seen and shown to **ANY** member of staff if asked to do so.

Warnings will be issued to any one off of the wing without their ID card.

The ID card also allows access to your shop account so you must keep it safe at all times. It is your responsibility to look after it at all times.


If you require to, borrow items from the wing office or in the library you will be required to hand over your ID card and this will be returned to you when you return those items borrowed. e.g. sports equipment, cleaning materials

24. Shop

You will have money placed onto your account on a daily basis, 74p on day one followed by 71p per day, which equals £5.00 per week to allow you to purchase essentials from the shop. You can also add your own personal money to this account either from money you had in your possession on arrival at Brook House or from money sent to you by friends or family.

Following Induction, you will be able to attend the shop during the opening hours which are 10.00 – 12.00 and 14.30 – 17.00.

Whilst on Beck Wing during your induction you will be allowed to purchase items from the shop during your first 24 hours

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

25. Paid Work

Once you have been in the centre 28 days you will have the opportunity to apply for paid work to top up your account, this is only available if you comply with centre rules and are on enhanced status. Work is available as server workers, wing cleaners, and orderlies etc.

26. Wing Facilities

On the wing we have for your use:

- Iron & Ironing board
- Pool Table
- Table football
- Gym
- Table Tennis Table
- Hair Clippers (a barber is employed who will attend the wing to cut hair)
- Various board games

A full facility list is displayed outside the wing office, which shows everything you're allowed to have and how you can get it.


27. Legal Services

If you feel that you wish to appeal against your detention or removal and do not currently have a solicitor.

We have a Welfare Officer that can help you make contact with a solicitor to represent and advise you.

The Welfare officer will visit you on the wing during your induction to explain exactly what he can and can't help you with.

28. E Wing

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Brook House will have a dedicated Discharge Unit called Eden Wing. Detainees who are located in Eden Wing will normally be allowed freedom of movement and association within the unit, subject to operational needs. The primary function of Eden Wing is to provide safe and secure last night accommodation for detainees, who will be leaving Brook House the following day. Detainees arriving on Eden Wing will remain there until they are ready to leave the centre.

Detainees due for departure will ordinarily be located to Eden Wing for the listed circumstances below (list is not exhaustive):

- Escorted removal directions
- Unescorted removal directions
- Transfer to another IRC
- Transfer to a prison or police station

All detainees being moved to Eden Wing will take their own bedding and plastics (sheet, duvet cover, pillow case, knife, fork, spoon, bowl and plate); this will be collected by Eden Wing staff when detainees are departing Eden Wing.

29. COSHH

Explain to detainees that cleaning fluids are kept on the wing and the dangers involved with these (do not ingest etc). Also explain that these will only be issued in controlled measures and that this is for their safety.


28. Compact

In order to outline our commitments to you and understand what is expected from you, we require all detainees at Brook House to sign a compact which sets out what you can expect from us and what we expect from you:

(Explain compact, read through, and pass to all detainees to sign, Officer to sign as witness, issues individual copy of compact)

End of “Core Induction Session”

Ensure all detainees understood, are there any more questions?

Division	Operational	
Document No.	GAT-012	
Document	Induction Policy	
Issue		


ANNEX K

Gatwick IRC Personal Emergency Evacuation Plans (PEEP) Detainee.

Personal Emergency Evacuation Plan (PEEP)

Part 1 General Information- to be completed by (Welfare at Tinsley/Wing staff at Brook)

Name of Detainee PEEP is for:		
Wing location		
Room Number:		
Daily Timetable	Give details of times	
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Areas in use out of normal hours	None	
Location and floor levels of activities area's		
Use and location of Catering Facilities		
Location of toilet facilities		

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

Part 2 Personal Information- to be completed by person requiring PEEP

Can you see visual alarm signals?		
Can you hear audible alarm signals?		
Can you use stairs safely in an emergency?		
Would you use the stairs without assistance?		
Can you follow exit signage without assistance?		
Do you use a wheelchair/or any other device to aid your mobility? If yes please describe:-		


Is there any further information we are required to know , i.e. other medical conditions or specialised training requirements		

Part 3 Fire Safety Management – (To be completed by fire or safety Manager)

Name	
Position	Health and Safety Advisor/ Manager
Contact No.	

Agreed completion and approval of Personal Emergency Evacuation Plan

	Signature	Date
Individual		

Division	Operational	 Gatwick IRCs
Document No.	GAT-012	
Document	Induction Policy	
Issue		

DCO		
Fire/Safety Management Signature		