

TITLE	Gatwick Immigration removal centre Use of force and restraint – Healthcare role and responsibilities
Author and Date	Nicola Hunter 26 <sup>th</sup> November 2021
Background and Purpose	Immigration removal centres are responsible for the care and welfare of a vulnerable and marginalised cohort of people and, as such, robust and clear processes are required.  Practice Plus Group believes that every individual has a right to:  • Live their lives free from violence and abuse  • Be protected from harm and exploitation  • Independence, which involves a degree of risk  Such rights are underpinned by the principles identified within Human Rights Act 1998. For the specific purposes of this local process it is important to reference article 3 and 4 of the human rights act specifically.  The purpose of this local process is to ensure that the healthcare team are aware of roles and responsibilities as healthcare professionals when responding to planned or unplanned incidents involving the use of restraint of force and that the processes which are in place and clear and allow staff to meet their duty of care.
Relevant documents for reference e.g. National Guidance, Care UK policies	The Mental Capacity Act 2005 The Human Rights Act 1998  PPG Policy - Safeguarding Adults (2021) Safeguarding Children (2021) Gatwick IRC Local process Safeguarding DSO 07/2016 - Use of restraint(s) for escorted moves – all staff DSO – Management of adults at risk 08/2016 DSO – Safeguarding children 19/2012 ( updated 09/2019) DSO – Mental Vulnerability in immigration 04/2020 DSO - Mental vulnerability and immigration detention 04/2020 DSO - Whistleblowing and the Public Interest Disclosure Act 1998 (c.23) 03/2020  ***DSO refers to Detention Services Orders as set out by the Home Office***
Principles	Home Office guidance around the use of restraint on children is clear – restraint is not to be used on any person under the age of 18.



- a resident assessed to be under 18 years old
- a tetraplegic or paraplegic resident
- a resident who is subject to an order or directive for compulsory detention under the Mental Health Acts must not be placed in restraint equipment, unless the Centre Manager or a healthcare professional directs that they must be used.
- a resident if their medical condition renders restraints inappropriate, as advised by a healthcare professional.
- If a resident is pregnant then restraint should only be used as a means of preventing the resident from hurting herself or others.

The role of the healthcare professional during attendance at any incident involving the use of restraints of force is to:

- Provide an independence presence during any use of restraint ensuring that the resident is not subjected to excessive or unreasonable use of force.
- Observe for any physical health issues and exacerbation of these
- Observe specifically for any airways compromise including positional asphyxia
- Observe for over stimulation and signs of excited delirium and advise centre staff of risk of collapse or deterioration.
- Provide a reasonable overview of a residents health issues prior to planned use of force and to inform subsequent risk assessment.
- Clearly document within the clinical notes the nature of the incident, injuries seen or noted, requests made and treatment given.
- Escalate any concerns around the use of force and follow PPG and local Safeguarding processes.

The site has a designated Safeguarding who is level 4 trained and is able to advise on any concerns raised by staff in respect of use of force or restraints. Head of Healthcare, who is level 4 safeguarding trained.

## Local arrangements

## Planned or unplanned use of restraints / force

It is recognised that, at times, use of restraint or force will be planned as part of wider centre, home office and immigration initiatives. These incidences will require the presence of healthcare staff and this will be facilitated locally via arrangement between healthcare and the centre team, this should include healthcare attendance at any pre-incident planning to ensure healthcare needs of the detainee are factored in to any risk assessments.

The healthcare team will follow the below process:

- Review of SystmOne clinical notes prior to planned incident noting any medical conditions which may be impacted by the use of restraints. This should include physical health, mental health and substance misuse.
- Healthcare will share appropriate information as part of risk planning prior to the incident itself.



- Healthcare staff will observe airway, behaviours, risks and the overall wellbeing of the detainee throughout the incident.
- Healthcare will remain present throughout the entirety of the incident
- If the healthcare team perceive any deterioration in the Detainees health then a request should be made to halt the proceedings and remove the restraints if deemed necessary.
- Should this take place full assessment should be carried out of the detainee to ensure healthcare are satisfied that the detainee is not at immediate risk.
- If the detainee is felt to be at immediate risk urgent discussion between healthcare and centre staff must take place to resolve the incident as soon as possible.
- If the detainee is being moved to a transport with a view to boarding a flight then a full handover of any issues noted during the intervention and appropriate medical risks should be handed over to the air medics.
- The incident should be documented on Systm One fully at the earliest opportunity
- Any concerns around inappropriate use of force should be raised via local Safeguarding processes and incident reported.

## **Incident reporting and Datix**

All incidents involving use of force attendance prompt the completion of a Datix incident from outlining the nature of the incident and healthcare involvement. These incident reports will form part of regular data scrutiny and discussed with NHS England as and Serco as part of the working partnership.

Review Date November 2023