

Gatwick IRC/PDA - Use of Force, RFA & TC

Standard Operating Procedure

Document Control

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1	Detention Centre Rules 2001	1.0
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3	PSO 1600 – Use of Force	1.0

Authority Review

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1.0 Introduction

This Standard Operating Procedure (SOP) provides guidance in the management and governance for use of force, removal from association and temporary confinement arrangements at the Gatwick IRCs, PDA and Border Suites. The general principles are derived from [PSO 1600](#) and further guidance can be found within [DSO 02/2017](#) and [Detention Centre Rules](#) 40, 41 and 42.

2.0 Body Worn Video Cameras

All staff working in detainee locations are provided with Body Worn Video Cameras as part of standard uniform. In any instance where a member of staff is responding to an incident or finds it necessary to use force of any kind, the Body Worn Video Camera must be activated without exception. Full instructions in the correct withdrawal, use and return of BWVCs are detailed within the Serco Immigration Security Strategy, which is found on the staff intranet home page.

3.0 Use of Force

Within the duties of a Detention Custody Officer/Family Care Officer there may be a requirement for staff to use Control and Restraint (in the case of adults) or MMPR (in the case of minors).

Any use of force must be compliant with Detention Centre Rule 41:

"(1) A detainee custody officer dealing with a detained person shall not use force unnecessarily and, when the application of force to a detained person is necessary, no more force than is necessary shall be used.

(2) No officer shall act deliberately in a manner calculated to provoke a detained person.

(3) Particulars of every case of use of force shall be recorded by the manager in a manner to be directed by the Secretary of State and shall be reported to the Secretary of State."

Detention Centre Rule 41, Detention Centre Rules 2001

There will be varied reasons as to why an Officer may have to use Control and Restraint within their role which may include:

- Prevention of self-harm
- Prevention of damage to property
- Preservation of life
- Facilitate a lawful order
- Facilitate removal directions
- Prevent escape

Staff should use only approved training techniques as per use of force manual 2015, as outlined in [PSO 1600](#) and only use force if they:

- Honestly perceive that the use of force is **necessary** in the circumstances
- The degree of force is **reasonable** in the circumstances
- **No more force** than is necessary shall be used
- The use of force is **proportionate** to the seriousness of the circumstances

Briefing

An effective briefing is one of the most important elements to the planning process and should be well thought out and regarded with the utmost importance. Supervising Officers should utilise the *Planned Relocation Briefing Checklist*.

Planned Relocation Checklist

	Plan Details	Confirm
Name of Supervisor		
Date		
Time		
Resident Name		
Resident CID Number		
Photographs provided?		
Current situation		
<ul style="list-style-type: none"> What has happened? 		
<ul style="list-style-type: none"> Location 		
<ul style="list-style-type: none"> What attempts have been made to gain compliance? 		
<ul style="list-style-type: none"> Reason for deployment 		
<ul style="list-style-type: none"> Confirm that the resident will be asked if there is “anything else we can reasonably offer in order to gain your compliance?” 		
Known Risk Indicators		
<ul style="list-style-type: none"> Current Behaviour 		
<ul style="list-style-type: none"> Contributing Intelligence (Security, HOIE) 		
<ul style="list-style-type: none"> Any other residents involved? 		
<ul style="list-style-type: none"> Medical risks 		
Authorisation		
<ul style="list-style-type: none"> Have HOIE approved Use of Force? 		
<ul style="list-style-type: none"> Have HOIE approved RFA/TC (if necessary)? 		
<ul style="list-style-type: none"> Has the Duty Director been notified of the authorisation by HOIE? 		
<ul style="list-style-type: none"> Has the Duty Director given any instructions for the relocation plan? 		
Explain staff functions		
<ul style="list-style-type: none"> Who are in the C&R teams? 		
<ul style="list-style-type: none"> Which roles & residents have they been assigned to? 		
<ul style="list-style-type: none"> Who is operating the camera? 		
<ul style="list-style-type: none"> Is the camera fully charged with spare batteries? 		

<ul style="list-style-type: none"> Is the camera person competent in the use of the equipment? 		
<ul style="list-style-type: none"> Confirm that camera needs to be in a position to view the actions of the whole C&R team and resident at all times, do not focus on individuals and do not detract from the C&R team under any circumstance. 		
<ul style="list-style-type: none"> Who is supervising the CSU/Care & Observation Room? Is the unit prepared for use? 		
<ul style="list-style-type: none"> Location, level of search and who will be conducting this? Is the HHMD present and serviceable? 		
<ul style="list-style-type: none"> Will handcuffs be applied? By whom? 		
<ul style="list-style-type: none"> Are support staff required and what are their roles? 		
<ul style="list-style-type: none"> What is the action plan? 		
<ul style="list-style-type: none"> Explain that the plans are subject to change dependant on the situation. 		
Are the team members healthy and competent? <ul style="list-style-type: none"> Ask the team whether they are in ticket with no current injuries. 		
Will PPE be utilised? <ul style="list-style-type: none"> Has the PPE been checked as being complete, appropriately worn and serviceable? 		
Ensure staff have removed items such as Rings, Watches, Keys and Radios. <ul style="list-style-type: none"> Either return items to keypress or secure them in the safe. 		
What type of Force will be used if necessary?		
<ul style="list-style-type: none"> C&R/Guiding Holds/MMPR? 		
<ul style="list-style-type: none"> Will distance of travel impact the relocation? If so, how will this affect the use of restraint? (Opportunities to de-escalate, medical observations, change over of staff, use of handcuffs etc.) 		
<ul style="list-style-type: none"> Use of Handcuffs? If handcuffs are applied, when, where and by who? 		
<ul style="list-style-type: none"> De-escalation techniques. Clarify the lead communicator with the resident. 		

Healthcare		
<ul style="list-style-type: none"> Are there any known medical conditions that may lead to a slowing, dysfunction or failure of the cardio-pulmonary or circulatory systems? 		
<ul style="list-style-type: none"> Is the resident pregnant? 		
<ul style="list-style-type: none"> Does the resident have a known mental health condition? 		
Route		
<ul style="list-style-type: none"> What route will be taken to the relocation site? 		
<ul style="list-style-type: none"> Who will be clearing the area of residents and excess staff? (delegate to support staff) 		
Ensure understanding		
<ul style="list-style-type: none"> ASK IF ANYBODY HAS ANY QUESTIONS? 		
<ul style="list-style-type: none"> DOES ANYBODY WANT TO CLARIFY ANY C&R TECHNIQUES PRIOR? 		

Duty Manager Name:

Duty Manager Signature:

Duty Director Name:.....

Duty Director Signature:.....

The delivery of a briefing should be:

- *Simple – Keep language simple; do not over complicate the information. Never assume that people understand what abbreviations are and remember that you are speaking to a camera. Those viewing the footage may not understand detention centre vocabulary and abbreviations.*
- *Clear – The team need to be given clear instructions on what their specific role will be during the incident and the route that will be taken for relocation.*
- *Relevant – Focus on the situation and only pass on instructions and information relevant to the incident. Ensure that all relevant personnel are in attendance including staff identified to use force if necessary and medical staff. Staff that are not relevant to the incident will not be in attendance throughout.*
- *Agreed – Ensure that there is an agreed understanding with the team.*
- *Planned – Be clear on the incident plan and ensure the briefing is structured in a simple and logical manner. This does not have to be a long drawn out process, just a moment to allow thoughts to be gathered.*

By achieving these key markers, a briefing can be delivered in such a way as to not allow any ambiguity and reduces the opportunity for misunderstanding amongst the team. Further to this, there is a format that managers should follow when briefing staff for the purpose of managing a planned incident:

- Ensure the camera has sufficient memory space and battery power to cover the length of the briefing and incident.
- Allocate the task of operating the video camera only to staff known to be competent in its use.
- The manager must commence the briefing by introducing themselves, giving name, position/rank, time and date
- The manager is to give a quick introduction as to the nature of the briefing including a summary of the antecedents.
- Medical staff should arrive prepared and state any relevant concerns that the team may need to consider as part of the relocation, notably if using force.
- The manager should then indicate to the camera; *this briefing is being given to the following team*. At this stage the camera must be pointed at every person present for the briefing who must state their name, position/rank, confirm that they are in ticket for control and restraint and if they have any injury. If there are no injuries then the team member must state, *no injuries*.
- The camera operator will also introduce themselves to the camera by speaking into the camera and giving the same information as the rest of the team.
- The camera will then be refocused on the manager of the incident who will give a full and detailed briefing ensuring the following is outlined:
 1. The location of the resident(s)/detainee(s).
 2. The planned method of approach. (Are the team going to enter first or will the manager attempt further negotiation. Do the team use force on the manager's instruction or only react if the resident is violent)
 3. If the incident involves a removal to another location, which route is the team to take to the (identified) alternative location.

4. The actions to be taken once arrived in the new location.
5. A reminder of key tasks, such as the responsibility of the person controlling the head. They are in control of a three-person team and should exercise that control through
6. Clear orders and instructions. The manager is to oversee the incident, not the application of control and restraint.
7. Reporting responsibilities.
8. Care and Welfare issues (where applicable) for both staff and residents.

These are general points that are likely to be included in most briefings, however this list should not be considered to be exhaustive. Different situations may bring with them specific issues that should also be included into the briefing.

Video Recording of Use of Force Incidents

It is the policy of Gatwick IRCs & PDA that all planned incidents involving residents and a potential or actual use of force will be recorded using a handheld video recorder. All spontaneous use of force incidents will be recorded on personal issue Body Worn Video Cameras in combination with establishment CCTV.

It is possible that any incidents may be subject to review or investigation by both internal and external organisations, and as such, all incidents must be managed and recorded with complete transparency. The recording will include the staff briefing, negotiations with the resident, the use of force, the (post incident) dynamic assessment carried out by a healthcare professional and a post incident debrief.

Negotiations and Use of Force

On completion of the briefing, the camera operator will accompany the lead person to the location of the resident. The manager will advise the camera operator to start recording upon the commencement of discussions with the resident. The operator must:

- Take as wide a focus as possible and attempt to ensure that the manager and the resident are in shot.
- Ensure that the microphone is clear to promote good sound quality.
- Listen to the instructions of the manager and make sure they do not obstruct the discussions by keeping a position that is as less invasive where possible.

Where discussions cease and use of force is applied, the same principles must be adopted and in addition:

- Maintain a safe distance and do not obstruct the use of force team.
- Ensure a wide focus is kept that will keep the team and the resident in shot at all times.

The recording must follow the team and the resident to the point of relocation.

Note: DCMs should ensure that in cases where force is used that medical staff in attendance are given opportunities to assess the medical condition of residents where safe to do so. Any assessments should be clearly visible and audible on camera.

Post Incident

Post incident the camera operator will accompany the healthcare professional as they carry out a post incident review of health, wellbeing and any injuries. It is important that the operator be aware of resident decency and should the healthcare professional need to make a full examination, then consideration should be made as to the dignity and decency of the person being examined. Post incident review of the detainee's health, wellbeing and any injuries must be reviewed by the following:

- Duty Nurse within 2 hours of force being used.
- Duty GP within 24 hours of force being used.
- Duty Director (or Senior Manager equivalent) within 24 hours of force being used.

Debriefing

Any de-brief must be recorded as part of the incident and once complete an incident report must be completed and handed to the Duty Manager. The footage will automatically save to the camera once the stop button is activated on the camera and it is stored on the SD card.

The manager supervising the incident, will be required to notify the IT department via email with the details of the incident such as date, time and CEPR number of the resident(s) involved.

Debriefing an incident must follow the below debrief checklist. A copy of all briefing and debriefing templates used in the management of the incident must accompany use of force reports submitted to the Security Department, HOIE DES, IMB and Healthcare.

Incident Footage Retention

The IT department must also be notified by the Security Department of any handheld or body worn video cameras used. The IT department must ensure that all body worn and handheld cameras present have the content download for evidence purposes.

The supervising manager should assure themselves that the briefing, incident and de-brief are captured on camera to ensure that IT department can download the incident footage without issue.

The IT department will then upload the footage to the hard drive where all managers can view the footage via their log ins.

The footage will remain on the hard drive archived, with general housekeeping of this archive maintained by the IT department. All recorded footage must be kept for a minimum of 6 years in accordance with [DSO 04/2017 – Surveillance Camera Systems](#).

Debrief Checklist

	Details	Yes	No
Name of Supervisor			
Time and Date of debrief			
The purpose of the debrief <ul style="list-style-type: none"> • What has happened? • Who was relocated? • What was the plan? • Where there any deviations from the plan? • Was the relocation successfully achieved? 			
Learning Points observed by supervisor <ul style="list-style-type: none"> • What went well? • What could have been done better? • Is there anything that could have been done better in the planning stages? 			
The Team's perspective. <ul style="list-style-type: none"> • What went well? • How did they feel at the time and afterwards? • What do they think could have been done better? • Did anyone sustain any injuries? 			
Healthcare <ul style="list-style-type: none"> • Were they aware of the resident sustaining any injury? • If so, where the injuries photographed? OR <ul style="list-style-type: none"> • Was the resident relocated without injury? • Has the resident received a post incident medical review within 2 hours? • Are arrangements for the resident to be seen by a doctor being made (if not leaving the centre) 			
Ask others present for input/feedback – HOIE, Duty Director, IMB etc.			
Ensure that all staff required to submit reports are aware of their obligation and given time to do so.			
ASK IF ANYONE HAS ANY QUESTIONS			
Inform Duty Director, HOIE Compliance Manager and IMB of the outcomes.			
Complete and distribute relevant documentation <ul style="list-style-type: none"> • Use of Force documentation 			

<ul style="list-style-type: none"> Any applicable RFA/TC Annex documents Incident Reports Accident/Injury forms 			
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4.0 Control & Restraint Advanced & Mutual Aid

Gatwick IRCs will provide a 14-person response unit consisting of 12 C&R Advanced Officers and 2 C&R Advanced Unit Commanders. The C&R advanced unit will be deployed in accordance with local contingency plans if and when required. In the event of a significant incident requiring mutual aid, Serco will utilise the on-call Serco Gold Command procedures whereby additional resources will initially be provided from other Serco Immigration Removal Centres and Prisons.

To best manage the impact on workforce management (WFM) every effort will be made to keep those accredited in ticket for advanced C&R to ensure a 2 day annual refresher is all that is required to maintain accreditation rather than sending people on 5 day revalidation courses.

It will be the overall responsibility of the Training Manager to ensure that the minimum requirement of 14 advanced C&R staff are trained within the Centre's actual staffing level (ASL) at any one time.

During the initial ITC all new staff will be informed of the possibility of becoming advanced C&R trained. There will be a specific slot within the ITC designed to outline the purpose of advanced C&R, the benefits and some key information about the sort of activities and fitness levels involved in the course.

While 14 trained staff is the minimum that will be maintained, to ensure that this is continuously met in the event of DCOs leaving the business or withdrawing from the accreditation a buffer of additionally trained staff will be maintained.

To enable effective monitoring of our C&R advanced trained numbers the Training manager will maintain a live spreadsheet outlining numbers currently trained, dates of accreditation expiry and date of initial or refresher course.

In the event that the IRCs fall below the buffer, the Training Manager with the support of the Departmental Managers will roll out communications to encourage additional DCOs to gain the advanced C&R accreditation.

In the event that the numbers of advanced C&R trained staff fall below the minimum requirement of 14 this will be reported to the Authority on a monthly basis until the matter is resolved.

5.0 Removal from Association

Removal from Association (RFA – Rule 40) and Temporary Confinement (TC - Rule 42) will only be used in the interest of safety/security and the safeguarding of staff, detainees and visitors. The Care and Separation Unit (Brook House) and the Care & Observation Room (Tinsley House) are the certified Rule 40 accommodation areas at Gatwick IRCs and will be operated by dedicated staff specifically trained in the de-escalation, care and support of detainees that present heightened risk to themselves or others. These dedicated teams will receive training in:

- Five-Minute Intervention (FMI), a behaviour management tool to verbally diffuse challenging behaviour
- SASH – suicide awareness and self-harm
- Conflict management
- Safeguarding
- Use of Force – appropriate HMPPS-approved techniques
- First aid.

The training will enable staff to manage incidents with the potential to escalate by giving detainees the appropriate direction and autonomy to resolve matters of concern. This will reduce the risk level that the detainee poses to themselves and others, preventing/reducing the time that detainees spend while located in the CSU or Care & Observation Room.

Any use of RFA/TC will be documented using the relevant [DSO 02/2017](#) Annex documents to justify the initial decision, the regime provided, daily multi-disciplinary team reviews, daily visits, daily observations and the care plan for reintegration back into the IRC/PDA community.

CSU and the Care & Observation Room will be staffed 24/7 when occupied. Where these locations are unoccupied, staff will be redeployed around the IRCs by the Duty Manager, taking into account their additional welfare training.

Any application of Detention Centre Rule 40 may only be applied as detailed within the rule itself:

"(1) Where it appears necessary in the interests of security or safety that a detained person should not associate with other detained persons, either generally or for particular purposes, the Secretary of State (in the case of a contracted-out detention centre) or the manager (in the case of a directly managed detention centre) may arrange for the detained person's removal from association accordingly.

(2) In cases of urgency, the manager of a contracted-out detention centre may assume the responsibility of the Secretary of State under paragraph (1) but shall notify the Secretary of State as soon as possible after making the necessary arrangements.

(3) A detained person shall not be removed under this rule for a period of more than 24 hours without the authority of the Secretary of State.

(4) An authority under paragraph (3) shall be for a period not exceeding 14 days.

(5) Notice of removal from association under this rule shall be given without delay to a member of the visiting committee, the medical practitioner and the manager of religious affairs.

(6) Where a detained person has been removed from association, he shall be given written reasons for such removal within 2 hours of that removal.

(7) The manager may arrange at his discretion for such a detained person as aforesaid to resume association with other detained persons and shall do so if in any case the medical practitioner so advises on medical grounds.

(8) Particulars of every case of removal from association shall be recorded by the manager in a manner to be directed by the Secretary of State.

(9) The manager, the medical practitioner and (at a contracted-out detention centre) an officer of the Secretary of State shall visit all detained persons who have been removed from association at least once each day for so long as they remain so removed"

Detention Centre Rule 40, Detention Centre Rules 2001

Process

- May be applied where it appears **necessary in the interests of security or safety** that a detained person should not associate with other detained persons, either generally or for particular purposes.
- Residents/detainees located under RFA conditions will not be locked in rooms unless a documented risk assessment states that this is necessary in the interest of safety and security of the IRC, staff or residents.
- Residents/detainees located under RFA conditions may associate with other residents under RFA conditions provided that there are not any risks to safety and security of the IRC, residents or staff in doing so.
- May not be applied as a punishment.
- Residents/detainees posing a risk to the safety and security of the IRC, other residents or staff may be accommodated under removal from association subject to prior approval by the Home Office Manager or in a case of urgency by Duty Manager in consultation with the Duty Director.
- DSO 02/2017 **Annex A & B** Documentation must be raised by the Duty Manager with the approval of the Home.
- Home Office on-call Manager. Only in a case of urgency may the Detention Operations Manager assume the role of the secretary of state (DC Rule 40). Verbal or written approval must be received from the Duty Home Office on-call Manager and this should be recorded on the **Annex B** (sections 16-22), including:
 - Name of authorising person
 - Time of approval
 - Method of approval (via phone, email etc.)
 - Any other relevant notes
- Distribution of **Annex B** documentation is to be carried out as per the table below.
- Any use or planned use of removal from association must be communicated to the Duty Director, Home Office on-call Manager, IMB on-call member, Medical Practitioner and Religious Affairs Minister without undue delay.

- Residents/detainees must receive written notification of the reasons for removal from association within 2 hours of relocation.
- It is the responsibility of the Unit Officer to ensure that **Annex C** documentation is updated to account for regime being offered (as per *Annex G*) and that all visits to the resident are recorded in **Annex D**.
- A Multidisciplinary Review must take place daily with the Home Office Manager, Duty Director, Duty Manager, Duty Nurse and Unit Officer in attendance as a minimum. The multidisciplinary review must be recorded in **Annex E**.
- Removal from Association will not ordinarily exceed 24 hours and any such requirement will require full justification and approval by the duty Home Office Manager. The resident must receive written notification of the reasons for extension of removal from association within 2 hours of this being approved.
- Any period of removal from association, which is extended beyond 24 hours must not exceed 72 hours without SEO Grade Home Office approval.
- Removal from Association regime will be limited to the times noted in Annex G. The association times offered may be extended or reduced depending on changes with a resident/detainee's conduct. Any change to the level of association offered must be risk assessed with the decision documented in **Annex E** by the Duty Manager.
- Male and Female residents/detainees can be accommodated in removal from association simultaneously but **must** be located in separate living areas (if applicable)
- If a resident/detainee that is subject to removal from association does not have access to a mobile phone they must be given the opportunity to contact their legal representative by other means as soon as practicable.
- A detainee at risk of suicide or self-harm should only ever be placed under Removal from Association accommodation in **exceptional circumstances, for the shortest time possible** and as a **last resort**.
- All other options for managing the behaviour must be considered and exhausted as per DSO 06/2008 - ACDT, before Rule 40 is considered.

6.0 Temporary Confinement

Temporary Confinement may only be applied if a resident or detainee is violent or refractory. All annex documents referred to are the annex documents found within [DSO 02/2017](#). Any application of Temporary Confinement must be compliant with the Detention Centre Rule 42:

- May **not** be applied as a punishment, or beyond the point where a resident has ceased violent or refractory conduct.
- Any use of Temporary Confinement must be communicated to the Duty Director, Home Office on-call Manager, IMB on-call member, Medical Practitioner and Religious Affairs Minister without undue delay.

- Residents must receive written notification of the reasons for Temporary Confinement within 2 hours of relocation.
- **Annex A & B** Documentation must be raised by the Duty Manager with the approval of the Home Office on-call Manager. Only in a case of urgency may the Detention Operations Manager assume the role of the secretary of state (DC Rule 42). Verbal or written approval must be received from the Duty Home Office on-call Manager and this should be recorded on the **Annex B**, including:
 - Name of authorising person
 - Time of approval
 - Method of approval (via phone, email etc.)
 - Any other relevant notes
- It is the responsibility of the Unit Officer to ensure that **Annex C** documentation is updated to account for regime being offered (as per **Annex G**) and that all visitors to the resident are recorded in **Annex D**.
- A Multidisciplinary Review must take place daily with the Home Office Manager, Duty Director, Duty Manager, Duty Nurse and Unit Officer in attendance as a minimum. This must be recorded in **Annex E**.
- Temporary Confinement will not ordinarily exceed 24 hours and must be subject to regular review by the Duty Manager once the rule is applied.
- Any such requirement to extend Temporary Confinement beyond 24 hours will require full justification and approval by a Home Office Manager at SEO grade or above. The resident must receive written notification of the reasons for extension of Temporary Confinement within 2 hours of this being approved.
- Male and Female residents can be accommodated in Temporary Confinement simultaneously, however, residents under Temporary Confinement will not associate with any other residents.
- If a resident that is subject to temporary confinement does not have access to a mobile phone they must be given the opportunity to contact their legal representative by other means as soon as practicable.
- A detainee at risk of suicide or self-harm should only ever be placed under Temporary Confinement accommodation in **exceptional circumstances, for the shortest time possible** and as a **last resort**. All other options for managing the behaviour must be considered and exhausted as per DSO 06/2008 - ACDT, before Rule 42 is considered.

7.0 Operating the CSU/Care & Observation Room

It may be possible that a detainee/resident resides in CSU or Care & Observation room either through their own choice to support them at a notably difficult time, or in the event that they present a high risk of suicide or self-harm that may impact on both the wellbeing of the detainee/resident concerned, and those in shared accommodation. Those detainees or residents that are not located under Rule 40/42 conditions will have access to the main IRC regimes and services **without restrictions**.

Detainees located in the CSU or Care & Observation Room that remain under Rule 40/42 conditions will be subject to the regime applied to that DC Rule.

RESPONSIBILITY

The Care and Separation Unit/ Care & Observation Room Officers are responsible for:

- Providing a safe, secure and friendly environment for Detainees/Residents
- Complete Detainee personal unit file system and updating CMS with any significant updates.
- Ensure that all visits of authorised personnel are recorded in the unit diary
- The recording of all staff on duty, and all detainees held in the location.
- Providing a focal point for information to and from Detainees/Residents.
- Ensuring that detainees and residents where applicable, receive the appropriate hygiene packs and, where it is deemed necessary, clothing and shoes
- Ensuring Detainees/Residents are advised and made ready for activities, particularly interviews, during their stay.
- Monitoring the use of recreational facilities in the Care and Separation Unit and Care & Observation Room.
- Ensuring Detainees/Residents receive incoming mail and accept outgoing mail for despatch.
- Ensuring that all Detainees/Residents located in the CSU/Care & Observation Room have appropriate documentation completed and are authorised to be located there.
- Ensuring that only authorised personnel have access to the unit/room and all visitors to a detainee or resident complete the Annex D as well as note all visitors are recorded in the unit diary.

The Residential Detainee Custody Manager is responsible for the day-to-day supervision of the Care and Separation Unit at Brook House IRC. The Duty Manager is responsible for the management of the Care & Observation room at Tinsley House. Both managers must ensure all Officers understand and are competent in carrying out their duties. The Annex documentation will include what other measures have been considered prior to locating a Detainee/Resident in CSU (Rule 40/42).

Where possible, prior authority regarding the use of CSU Rule 40 should be obtained from a Home Office Compliance Manager, however, in the event that CSU – Rule 40 is used in a case of urgency, it is the responsibility of the Duty Manager to notify the IMB, Home Office Manager, Healthcare and the Religious Affairs Manager that a Detainee/Resident has been removed from association, and that action has been recorded.

Detainees/residents will receive written confirmation of the justification of their Removal from Association within two hours of relocation under Rule 40/42.

Where deemed necessary for Detainees/Residents to remain in CSU – Rule 40 for periods exceeding 24 hours – the responsible Detainee Custody Manager/ Duty Director will present reasons to the Secretary of State and request an extension. Any period of removal from association authority cannot exceed more than 14 days.

ALLOCATION OF BEDROOMS (BROOK HOUSE IRC ONLY)

When a Detainee/Resident is allocated to the Care and Separation Unit, the Unit Officer will allocate a room to each Detainee.

When not in use all other bedrooms in the CSU unit must be kept locked.

On arrival to the CSU Unit, the Escorting Officer will hand over to the CSU Unit Officer the full RFA/TC Annex document which will include a photograph of the detainee concerned.

LATE NIGHT ARRIVALS (BROOK HOUSE ONLY)

Detainees who arrive in the Care and Separation Unit late at night, when others have gone to bed, must be encouraged to keep as quiet as possible and respect other Detainees.

BED LINEN ISSUES

It is the responsibility of the Care and Separation Unit Officer/Care & Observation Room to ensure that Detainees/Residents have adequate bedding when they arrive on the unit.

Each bed is fitted with a mattress and a pillow. Bed linen issues as a minimum will consist of a sheet and duvet cover, a pillowslip, 1 towel and a duvet.

It is the responsibility of the supervising officer to ensure that all bedding is changed for fresh linen every time there is a change of occupancy of the bed or when any item has been soiled.

Care and Separation Unit/Observation Room Officers must be particularly vigilant upon the departure from the centre of Detainees/Residents and must check that all items of issued bed linen are recovered for laundering prior to their departure. Where it is found that any item of bed linen cannot be accounted for, the Care and Separation Unit Officers must carry out a search of the baggage of the Detainee/Resident in an effort to recover the missing items.

CLEANING REGIME

The Serco Cleaning Department are responsible for all cleaning tasks within the Care and Separation Unit/Observation Room. It is the responsibility of the Care and Separation Unit Officers to monitor the cleanliness of the accommodation and to bring to the attention of the Detainee Custody Manager any defects in cleaning.

The Care and Separation Unit will be cleaned in accordance with an agreed schedule.

It is the responsibility of cleaning staff to adhere to all of the requirements of the Health and Safety Act and regulations, particularly in relation to the safeguarding of

cleaning fluid and materials. Wet floors should be adequately sign-posted. It is the responsibility of the Unit Officer to monitor compliance by the Cleaning Sub Contractor with the Health and Safety Act and Regulation requirements.

If the detainee/resident requests the laundering of their personal clothing, then unit staff will make provisions for the laundering of the clothing. The Residential Detainee Custody Manager (Brook House) or Duty Manager (Tinsley House) is to be consulted for such requests.

TELEPHONE CALLS

Detainees and residents will be able to keep their personal mobiles phones with them whilst in the CSU unit and may continue to make or receive phone calls. Where information regarding security or safeguarding concerns are noted, individuals only access telephone usage under supervision.

VISITS

Detainees/residents located under rule 40 will not be restricted in their entitlement to domestic or official visits except to the extent determined by their conduct in the visits room or by security intelligence. Detainees/residents located under Rule 42 will need to be risk assessed as to whether their conduct presents a risk to themselves or others in permitting a social visit. A closed visit may be considered under these circumstances.

Social Visits

Brook House IRC - A detainee/resident will receive their visitors in the main Visits Hall unless otherwise instructed by the Contract Director or Duty Director, notably for those detailed under Rule 42 above.

Tinsley House IRC – Detainees will apply as above. Residents may also have a visit accommodated within the PDA, subject to risk assessment by the Duty Director.

All Detainees/Residents will be escorted to and from visits by Detainee Custody Officers/Family Care Officers and will be subject to a level B rub down search before and after each visit

Official Visits

There are official visits rooms available at both Brook & Tinsley House These are to facilitate private interviews between a Detainee/Resident and an official visitor.

Detainees/Residents will be escorted to and from visits by Detainee Custody Officers and will be subject to a level B rub down search before and after each visit.

INDUCTION AND INFORMATION

It is vital that Detainees/Residents receive as much information as possible concerning the CSU Unit/Care & Observation Room and the facilities that are available to them.

The induction will cover the following points:

- i) To inform the Detainee/Resident of the kind of regime which the unit will offer, (providing the Detainee/Resident complies with the behavioural responsibilities expected of them).

- ii) Facilities and aspects of the regime, which the Detainee/Resident could reasonably expect would be provided for them.
- iii) To confirm that the Detainee/Resident understands:
 - Care and Separation Unit/Care & Observation Room routine
 - Timetable to include Shop opening hours
 - Dining arrangements
 - Obtaining of information
 - Complaints Procedure
 - Visit times
 - Surgery times
 - Availability of Immigration Officers and other agencies.

Any concerns during the induction with a Detainee/Residents should be brought to the attention of the Residential Detainee Custody Manager (Brook) or Duty Manager (Tinsley).

DETAINEES WITHOUT FUNDS OR CLOTHING

If it appears that a Detainee/Resident is without funds or adequate clothing, the Officer on duty should examine the Detainee/Resident's stored property on CMS to ascertain if they have any property in safekeeping. If this is the case, arrangements should be made for the Detainee to have access to their property

Clothing will not be issued to Detainees/Residents who have adequate changes of clothing, but all requests will be dealt sympathetically.

Whilst a detainee/resident is in CSU/Care & Observation Room a request for the laundering of clothing can be facilitated.

INTERVIEWS

It is critical to the operation of the respective IRC/PDA that Detainees/residents attend all the interviews arranged for them. Failure to attend or attending the interviews late will seriously disrupt the interview process and it therefore follows that particular care needs to be exercised to ensure all Detainees/Residents scheduled attend those interviews.

It is the responsibility of the unit officer, to ensure that all Detainees/Residents scheduled for interview attend their interview at the appointed time. It is the responsibility of the unit officer to ensure that the Detainee/Resident is aware of the interview.

MOVEMENT LOG

All movements of all detainees that are held in Care and Separation will be recorded in the unit diary and personal file.

RECREATIONAL FACILITIES

CSU/Care & Observation Rooms are not automatically equipped with televisions; however, subject to risk assessment and authority, televisions can be added to rooms. Equally portable televisions and DVD players can be provided.

There is a television located in the communal area of the CSU (Brook House only).

Detainees located in the CSU/Care & Observation Room have access to religious artefacts, books, educational learning, board and card games. These will be returned to the office when not in use.

EXERCISE

All detainees/residents in CSU (Rule 40 & 42) will have the opportunity to exercise for a minimum period of 1 hour daily in the open air in a dedicated exercise area accessible from the unit. The exercise yard must be searched before and after any exercise period.

MAIL

Incoming mail for Detainees/Residents will be delivered to the office in CSU office or Care & Observation Room.

Any Registered or Recorded Mail will be logged and signed for by the detainee/resident on the relevant form with the following details recorded:

- Name:
- Room number:
- CEPR Ref. No.

The Registered/Recorded Letters must be delivered to the Detainee/Resident within four hours of receipt in the centre.

The Detainee/Resident will be shown the address on the Registered/Recorded item and must sign as acknowledgement of receipt once they have confirmed the mail is for them. The CSU Unit Officer will also sign as confirmation of receipt.

Ordinary mail for Detainees/Residents will be checked against the Roll Board/Location List to ensure that the Detainee/Resident is present in the CSU Unit/Observation Room. Mail will be delivered directly to the respective location.

Mail received for a Detainee/Resident who has left the CSU Unit and any mail for Detainees/Residents that have left the Centre, or who cannot be identified must be returned to the Mail Officer who will make arrangements for returning to the sender or to the Home Office for forwarding on to an alternative Removal Centre if applicable.

MEDICAL

Detainees located in the CSU Unit/Care & Observation Room (Rule 40 & 42) will be assessed by Healthcare within two hours of relocation. The Healthcare member of staff will confirm the Detainee/Resident's suitability to be placed into Care and Separation. Based on the Healthcare Assessment, the Duty Manager / Duty Director will then make an informed decision about the individual's ongoing regime and location.

In the event that a Detainee is reported to be ill, the Nurse will be contacted and, if circumstances dictate, at the request of the staff, will attend the Unit to assess the

situation. Under no circumstances will medical treatment or investigation be prevented or delayed by reason of the detainee/resident's location.

A First Aid Kit and SASH (Self Harm and Suicide) box is available in the Eden Wing office (Brook House) or in Healthcare (Tinsley House).

DETAINEE & RESIDENT REQUESTS/COMPLAINTS/GRIEVANCES

Detainees/Residents located in the CSU Unit (Rule 40) have the same rights of access to the requests/complaints/grievances procedures that apply to any other Detainee/Resident at Gatwick IRC's. DCF9 complaint forms & IMB Requests will be freely available in the CSU and Care & Observation Room. DCF9 Complaint and IMB Request boxes will both be available in the respective CSU or Care & Observation Room.

DINING ARRANGEMENTS

Meals will be routinely served to individuals in their room in CSU/Care & Observation Room according to the respective meal orders.

Detainees & Residents will have access to hot water and tea/coffee making facilities via requests from Supervising Officers.

LIBRARY

- All detainees will be offered the opportunity to borrow books from the library. There will be books in the CSU/Care & Observation Room offering a reasonable selection.
- Requests for special books for educational purposes will be dealt with by the education/activity staff.
- An activity member of staff will visit the CSU Unit/Care & Observation Room each week to change a selection of the books.

Staff will take special orders for books from detainees/residents that will be forwarded to the Library. Staff will collect finished books from detainees and examine them for damage.

Staff will question the detainee about any damage found and, if necessary, may refer it to the Activity Detainee Custody Manager to pursue replacement costs.

Detainees/residents requiring input from the education department will be visited in the CSU/Care & Observation Unit by the education / activities staff.

SHOP

- Each person located in the CSU Unit/Care & Observation Room will have the opportunity to place a shop order daily – from the shopping list.
- Each person will receive their shop order on the day ordered.
- Detainees who have difficulty with reading, understanding or writing English will receive assistance.

DAILY VISITORS TO CARE AND SEPARATION UNIT

Visitors to the Detainee/Resident in the Care and Separation Unit on a daily basis (7 days a week) will include:

- Duty Director
- Medical Officer
- Home Office DES Compliance or DET Manager
- Detainee Custody Manager

and may include:

- The Independent Monitoring Board
- Visiting Chaplaincy
- Education Staff
- All Visitors will be recorded in the CSU/Care & Observation Room.
- Anyone visiting a Detainee/Resident under Rule 40/42 conditions will be required to make a comment on the Annex C documentation.

Arrangements will be made for any of the above to visit the detainee/resident in either their room or in the association area

Visitors must be informed of any concerns regarding unsettled detainees/residents who may present a risk, and where appropriate, advised against seeing the Detainee/Resident unaccompanied.

When requested not to be present in the room with the visitor, supervising Officers will stand outside of the room, within sight of the visitor / Detainee or Resident. When these requests are made, they must always be recorded in the CSU/Care & Observation Room Diary.

Apart from the daily unit officers, all other officers will be classed as visitors and will be required to make a record of their visit in the unit diary.

8.0 Governance of Use of Force, RFA & TC

Use of Force Review

The Duty Director will review all use of force documentation within 24 hours of the incident ensuring that all documentation is complete, and that all post incident observations have taken place including:

- Duty Nurse review within 2 hours of force being used.
- Duty GP review within 24 hours of force being used.
- Senior Manager welfare check of the detainee/resident within 24 hours used.

Every Use of Force will be reviewed within 24 hours by the Assistant Director Security and the Use of Force Co-ordinator. This will include Use of Force reports, footage, risk assessments used, and details of injuries sustained. Authority representatives and IMB members will also be invited to attend.

In addition to the immediate 'hot' debrief, a 'cold' debrief will be held to identify lessons to be learnt from the incident (from the staff involved), with 'lessons learnt'

shared amongst all operations staff and discussed at the monthly Use of Force Committee Meeting. The debrief will be recorded and submitted to the Authority, where requested.

The Use of Force Committee, chaired by the Assistant Director Security and attended by senior management, the Use of Force Co-ordinator and other key stakeholders (Authority and IMB) will review trends and agree actions to reduce Use of Force further.

Removal from Association & Temporary Confinement

Duty Director/Contract Director:

- Will visit the CSU Unit/Care & Observation Room at least once each day.
- Will discuss with the staff any problems they may have with the running of the unit or the detainees/residents accommodated within it.
- Will visit each detainee/resident and make general enquiries about their welfare and treatment.
- Will contribute towards the assessment of whether a detainee/resident is required to remain under RFA or TC conditions.

Assistant Director Security

- Will review the quality and completeness of all RFA & TC documentation.
- Will ensure that contractual timings have been adhered to with regard to dissemination of documentation to the detainee/resident concerned within 2 hours, and that the Home Office & IMB receive a full copy of the document immediately following closure.
- Will ensure that all minimum regime requirements have been adhered to in accordance with DC Rule 40/42 legislation.
- Will ensure that any contractual non-conformities are declared to HOIE Compliance immediately.

Steve Hewer

Contract Director, Gatwick IRC
Serco Justice & Immigration