



Home Office

Detention Services Order 06/2013

Reception, Induction and Discharge Checklist and Supplementary Guidance

August 2021



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Document Details

Process: To provide centre supplier staff with guidance on the process for admitting, inducting and discharging a detained person from an immigration removal centre, short-term holding facility or the pre-departure accommodation.

Implementation Date: November 2013 (reissued August 2021)

Review Date: August 2023

Version: 4.0

Contains Mandatory Instructions

For Action: All Home Office staff and suppliers operating in Immigration Removal Centres, residential Short-Term Holding Facilities and Pre-Departure Accommodation.

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Processes Affected: Reception, induction and discharge processes

Assumptions: N/A

Notes: Operating Standards for IRCs and the PDA cover admission/reception requirements. This DSO provides additional guidance on the requirements of centre supplier staff undertaking reception, induction and discharge processes to ensure standardisation across the immigration detention estate.

Instruction

Introduction

1. This Detention Services Order (DSO) provides a mandatory checklist and supplementary guidance on specific areas which must be addressed by supplier reception and induction officers when admitting a new detained individual to an immigration removal centre (IRC), residential short-term holding facility (RSTHF) or the pre-departure accommodation (PDA). References to “centre” in this document cover IRCs, RSTHFs and PDA.
2. This instruction provides guidance on admission, induction and discharge from a centre, in addition to the Detention Services IRC Operating Standards, the PDA Operating Standards, the Detention Centre Rules 2001, the Short-term Holding Facility Rules 2018 and any contractual or service level agreement (SLA) requirements.
3. Two different **Home Office teams** operate in IRCs:
 - Detention and Escorting Services (DES) Compliance team (Compliance team)
 - Immigration Enforcement Detention Engagement team (DET)
4. The **Compliance team** are responsible for all on-site commercial and contract monitoring work. The **DETs** interact with detained individuals face-to-face on behalf of responsible officers within the removal centres. They focus on communicating and engaging with people detained at IRCs, helping them to understand their cases and reasons for detention.
5. There are no DETs at RSTHFs, functions which are the responsibility of the DET in RSTHFs are carried out by the supplier and overseen by the Escorting Contract Monitoring Team (ECMT). In the Gatwick PDA the role of engagement with detained individuals is covered by the local Compliance Team.

Purpose

6. The purpose of this instruction is to standardise the information sought from and provided to detained individuals by centre supplier staff and the reception, induction and discharge processes that should be followed.

Procedures

7. Centre suppliers must put in place locally agreed procedures to ensure that each item on the checklists has been covered by staff involved in reception, induction and discharge procedures. They must be able to demonstrate that this has been done as and when required to the DES Compliance Manager and for the purposes of any audit, investigation or inspection.
8. Entering detention (or changing detention locations) can be a stressful time for people and this may impair an individual's ability to fully absorb important messages the first time they are delivered. Centre suppliers are therefore encouraged to repeat important information at regular intervals and use different formats, such as posters and leaflets. In addition, supplier staff should ensure that all processes are fully understood by detained individuals whose first language is not English. Professional interpreting facilities must be used whenever language barriers are identified on reception, induction or discharge.

Reception

9. The checklist at Annex A details the mandatory actions to be undertaken by the centre supplier at the point of admission, accompanied by explanatory notes at Annex B.
10. Centre suppliers must inform detained individuals on induction into the centre that there is surveillance camera equipment in operation within the establishment and explain the circumstances in which each type of equipment is used.

Emergency contact details

11. It is important that emergency contact details for next of kin are recorded for all individuals entering detention. When a detained individual refuses, or is unable to provide contact details, the DET, supplier and healthcare staff must use every opportunity during interactions with the individual to try to obtain and record this information.
12. Detained individuals must be made aware that the contact details recorded will only be used in emergency situations when the individual is unable to contact their next of kin himself/herself. When a detained individual refuses or is unwilling to provide these details, he/she must be encouraged to at least provide a telephone number without including the name or address details of the person acting as next of kin. Home Office DET staff must record instances in their induction note where emergency contact details for next of kin have not been provided and the reason given.
13. Visual information reminding detained individuals of the importance of providing an emergency contact for a next of kin, that include details of how this information will be used, stored and disposed of, must be available throughout every centre. As a

minimum, posters and leaflets must be displayed in the centre's reception area, social visits area, welfare office and legal/official interview areas.

14. The process detailed at paragraphs 11 – 26 must be completed by staff to gather and record next of kin details and to record situations where no information is volunteered by the detained individual. At RSTHFs, where there is a limited presence of Compliance staff, the supplier and healthcare staff must still follow this guidance where possible and attempt to gather emergency next of kin details for all detained individuals, recording any actions taken or findings in the Detainee Transferable Document (DTD).
15. Specific guidance relating to the obtaining of emergency contact details by the different categories of staff is set out below:

Centre supplier

16. Staff involved in the reception and induction of detained individuals must ask all individuals to provide an emergency next of kin contact for use in emergency situations, including unexpected illness or an accident. Details should include a name, contact number and the relationship to the detained individual (e.g. mother, brother, friend). Where possible, staff should also try to establish the level of English of the person recorded as next of kin. This should be recorded on the supplier's local IT systems; on the Emergency Contact Form attached at Annex C; and placed in the DTD. A copy of the bio data page of the DTD and details provided as next of kin must be made available to the local DET as soon as possible. These details must also be passed on to the healthcare supplier team.
17. If a detained individual refuses to provide any details or states that they do not have any contacts in the UK and do not wish to provide any overseas contacts, they must be advised that this information will not be used for any purpose other than to notify the next of kin in case of an emergency. All detained individuals must be encouraged to provide at the minimum a contact telephone number for a person that they wish to be notified in emergency circumstances when they cannot make that contact themselves.
18. If the supplier is unable to record a detained individual's next of kin details, staff must use the form at Annex C to notify the local DET and Healthcare team that no next of kin details are known for that individual. This should include details of all steps that were taken to try to gather this information. This must also be fully documented in the detained individual's DTD.
19. When centre supplier staff are unable to gather next of kin details at reception or induction but are notified of these details by the local DET or healthcare teams, this information must be recorded in the supplier's local IT systems and the detained individual's DTD must be updated immediately.

20. If supplier staff are made aware of an existing relationship between the detained individual and a friend or family member, such as when booking a visit or facilitating a phone call, enquiries should be made as to whether that person is recorded as the detained individual's next of kin and whether any details were provided by the detained individual. Reception, visits and welfare staff should be vigilant and use all appropriate interactions with detained individuals to remind them of the importance of recording current next of kin details. If new or updated contact details are obtained by the supplier, the local DET and healthcare teams must be notified using the process set out at paragraph 16.

Healthcare staff

21. Next of kin details for all detained individuals must be recorded on individual local healthcare files, where available. Once healthcare staff are notified by the centre supplier or DET of these details, an entry should be made on the detained individual's record on the healthcare management system (SystemOne in England).
22. In the case that no next of kin details are available, healthcare staff should attempt where possible to obtain such details from the detained individual, using the form at Annex C. When gathered, this information must be disseminated to the local DET and the centre supplier.

DET staff

23. Local DET staff are responsible for ensuring the next of kin details are obtained, and recorded on Atlas and CID databases, and efforts must be made to ensure these are up to date. Following induction of a detained individual, these details must be recorded or updated on individual cases as a Special Condition (DS: DEPMU).
24. Next of kin details previously provided by the detained individual to centre suppliers must be confirmed during the Home Office induction conducted by DET staff. If no details are available, this must be discussed during the induction process. Detained individuals must be informed of the importance of providing these details and advised that this information will not be used for any purpose other than to notify their next of kin in case of an emergency. Detained individuals should be encouraged to provide at least the telephone contact details of the person that they wish to be notified in the case of an emergency.
25. If the detained individual provides new or updated contact details during induction, this information must be disseminated to the centre supplier and healthcare within 24 hours using Annex C.

26. If a detained individual refuses or is unable to provide next of kin details, the officer conducting the induction interview must check the available CID and Atlas records for a reference to any individual with a close relationship with the detained individual (such as linked immigration cases, interviews previously conducted, or sureties presented for bail hearings). If a possible next of kin is identified during these checks, the detained individual should be contacted to confirm he/she is happy for that person to be contacted in emergency situations. If no suitable next of kin can be found by the DET staff, this must be documented by updating CID and Atlas to show that the detained individual has refused to provide these details and what steps were taken to try to obtain this information.

First night in detention

27. Detained individuals who have never stayed in a custodial setting may be more vulnerable in their first night in detention and, as such, may require such additional support as is necessary. Supplier staff must review the information contained within the Person Escort Record (PER), DTD and movement order to establish if it is a detained individual's first night in any detention environment.
28. An auditable system must be in place to promptly alert residential and welfare staff to an individual spending their first night in detention so that they can provide additional support to the detained individual; additionally, staff working night shifts must be made aware of such individuals. This must happen every time a detained individual first arrives at an IRC, RSTHF or at the PDA, but not when a detained individual returns to the same centre after being temporarily discharged.
29. An assessment must be made on reception of the welfare needs of the detained individual, in addition to those highlighted through the room sharing risk assessment. If this assessment highlights a need for an individual care plan specific to the detained individual's welfare needs, then this should be implemented and authorised by the centre supplier duty manager. A post first night assessment must also be conducted to ensure the welfare of a detained individual. This must include, as a minimum, a discussion with residential and welfare staff and healthcare around the detained individuals first night in detention whilst exploring if any further support is required, and a record of this assessment must also be kept.

Identifying vulnerability / Assessment Care in Detention and Teamwork (ACDT)

30. Supplier staff working in reception must be appropriately trained to make an initial assessment of the arriving individual based on the documentary evidence that accompanies them, the information conveyed by escorting officers and information provided from third parties such as the HMPPS, police, the courts or the detained individual's family. Supplier staff should also make their own assessment of the detained individual's mood, behaviour and how the detained individual presents and interacts.

31. The onsite DET must be made aware of any immediate immigration case concerns which result in Vulnerable Adult Care Plan (VACP)/ACDT being opened. Where possible, a same day appointment should be facilitated.
32. Vulnerability issues may include (but are not limited to): susceptibility to bullying, mental health issues, noticeable medical conditions, pregnancy, overt sexuality, unusual behaviour, evidence of self harm, remarks indicating desires to self-harm/take own life or other evidence of abuse, or potential victims of trafficking or slavery.
33. In accordance with DSO 08/2016 Management of Adults at Risk, any detained individuals arriving at a centre currently identified as an adult at risk must be given priority in the reception and induction processes. This process must take into account the identified level of risk of the detained individual – prioritising first Level 3 adults at risk, then Level 2 and finally Level 1.
34. In cases where supplier staff have concerns about a newly arrived individual being at risk of self harm or suicide, they should immediately commence safeguarding procedures as detailed in DSO 06/2008 Assessment Care in Detention Teamwork (ACDT).
35. Any potential vulnerabilities identified in the detained individual's escort records or by reception staff must be reported to the centre's Duty Manager in order to determine how the individual's needs can be met within the centre e.g. by implementing an ACDT or VCAP. Where there are concerns that an individual may lack capacity, have a mental health condition, or disability arising from mental impairment, the individual's case must be brought to the attention of the IRC supplier Duty Manager and vulnerability lead (on-site supplier manager in RSTHFs). In cases in which there are indicators of disability arising from mental impairment or of a mental health condition Healthcare should be informed and requested to carry out an initial assessment. Further guidance is contained within the following: DSO 08/2016 - Management of Adults at Risk, DSO 04/2020 - Mental vulnerability and immigration detention: non-clinical guidance and DSO 03/2016 - Consideration of Detainee Placement.
36. Any new potential vulnerabilities discovered during the reception or induction processes must be communicated to both the local Compliance team and DET staff and DEPMU by way of an IS91RA Part C clearly highlighted as **adults at risk** in accordance with DSO 08/2016. If additional support is required, the supplier must contact the onsite DET who will offer a priority appointment for a Home Office Induction to be conducted.
37. Supplier staff are required to be trained in ACDT and mental health awareness in order to identify vulnerable individuals entering detention or individuals at risk of suicide or self-harm. If in doubt, supplier and Home Office staff should flag any vulnerability with healthcare staff.

Specific needs

38. When a detained individual arrives at a centre and during the course of the reception process it becomes apparent that either the full extent of a vulnerability has not been disclosed or that the detained individual has a previously undisclosed disability, the following steps should be followed:
- Healthcare must firstly make an assessment from a medical perspective as to whether the detained individual's condition can be appropriately managed within the centre
 - Then, in consultation with the centre's Duty Manager (or appropriate senior manager), it must be determined whether reasonable adjustments are in place or could be put in place (without unreasonable delay or disproportionate cost) to enable the detained individual to access the full range of facilities within the centre as if their condition did not exist
39. Where it is determined that reasonable adjustments are already in place or can be put in place, Care Plans relevant to the needs of the detained individual must be opened and recorded without delay e.g. VCAP, Personal Emergency Evacuation Plans etc. The detail of any adjustments must be submitted on an IS91 Part C to the Detainee Escorting and Population Management Unit (DEPMU), who will update Atlas and CID accordingly, and a copy must be provided electronically to both the on-site Compliance team and DET. Examples of adjustments may include, obtaining mobility or other assistance aids (e.g. hearing loop, incontinence pads, large print books, audio newspapers), increased one-to-one monitoring or assistance, providing access to lifts (not normally accessible to detained individuals) or modifying regime activities to take account of the detained individual's disability. The DET must advise the caseworker to ensure any new information is taken into consideration when reviewing detention and suitability for future removal. Further guidance and support is contained within DSO 04/2020 - Mental vulnerability and immigration detention: non-clinical guidance.
40. Where it is determined that it is not possible to make sufficient adjustments to accommodate the detained individual the on-site Compliance Manager must be notified as soon as practicable, who must immediately contact the DEPMU to arrange a transfer to a more suitable centre. Until such time as a transfer is effected, the initial centre must manage the detained individual through an open Care Plan with as many adjustments as can reasonably be achieved, taking into account the available facilities and resources.

Language skills

41. During the reception process the centre supplier must conduct a basic assessment of a detained individual's proficiency in spoken English. The assessment should take place through a short conversation with the individual using open questions. Escorting staff should not be relied upon to confirm an individual's proficiency in English. Where telephone interpreting services are required to conduct the reception process this should be recorded on the local suppliers' databases. A further assessment of English language proficiency should take place during the detained individual's induction to the centre. Where available, written information should be provided either in pictorial form or in a language understood by the detained individual.
42. Where a detained individual displays signs of a learning disability or literacy issues, these should be noted by supplier staff who should inform healthcare and the Home Office and steps taken to ensure the detained individual is provided with relevant information in an accessible format.

Fast track reception

43. For the purposes of this DSO, intra-centre moves are those that take place between two neighbouring IRC sites only, therefore this is currently only applicable to the Gatwick and Heathrow clusters.
44. In certain cases when a detained individual is discharged and returns to the same centre on the same day or in cases of intra-centre moves, centre suppliers may decide that a fast track reception option can be followed. This includes but is not limited to escorted moves to Embassies and High Commissions, hospital and dental appointments, attendance at a birth, funeral or marriage or any other escort as approved by the Home Office such as an immigration case related hearing or interview. For such moves, the full reception process is not required but records of the decision-making process should be kept and made available to the on-site Compliance Manager on request.
45. For detained individuals that remain in the custody of the centre supplier throughout the entire escort and the fast track reception route is followed, it is imperative that suppliers:
 - ensure the correct identity of the detained individual
 - ask for next of kin details if these have not already been provided
 - conduct and implement any procedures necessary where the authority to detain is unclear for any reason
 - ensure any welfare/healthcare needs are addressed upon return i.e. offer a nurse/GP appointment
 - offer a hot/cold meal and drink if the detained individual has or will miss a meal provided by the centre as per normal regime
 - ensure the detained individual is housed immediately or at the latest, within the contractual time limit

46. However, where responsibility for the detained individual has temporarily been transferred to another supplier prior to returning to the IRC, the fast track route will not be applicable and the requirement to follow the full reception process will remain in place.

Induction

47. The checklist at Annex D details the mandatory actions to be undertaken by the centre supplier during induction, accompanied by explanatory notes at Annex E.

48. The induction session should be used as an additional opportunity to conduct a secondary assessment of the detained individual's proficiency and understanding of English. Any noted proficiency recorded at the time of reception should be used as a benchmark for the secondary assessment. If it is considered that the initial assessment was not representative of the detained individual's true English language ability, then the detained individual's record should be amended accordingly.

49. Where it is determined that the detained individual has an insufficient knowledge of English to receive the centre induction suppliers must utilise professional interpreting services to complete the centre induction. Where available, written information should be provided either in pictorial form or in a language understood by the detained individual so far as reasonably practicable. An alternative medium such as a pre-recorded audio version of the induction in the required language can be provided.

50. Suppliers must be able to demonstrate that they have given suitable consideration to language needs and have responded appropriately. Where an interpreter is used to facilitate an induction (or an alternative medium such as a pre-recorded audio version of the induction in the required language is used) this must be documented on the detained individual's record.

51. In most circumstances other detained individuals must not be used for specific translation purposes due to confidentiality and quality issues. However, peer support can be provided by detained individuals undertaking paid activities for general purposes, this can include support during group inductions.

52. For arrivals to RSTHFs, supplier staff must ensure during the induction process they ask detained individuals whether they have legal representation, and where appropriate, advise those requiring legal services how to obtain such services. This will be done through the use of an interpreter where required. This information should be recorded on the supplier induction checklist. All individuals will be made aware of their right to seek legal advice and signposted to a list of local OISC & Law Society advisers, which includes some that offer legal aid services (except in Northern Ireland).

53. In the event the person states they have had difficulties accessing legal advice, and have been served with removal directions, details of the person and their claim will be passed to their caseworker, the Operational Support and Certification Unit (OSCU) or National Command and Control Unit (NCCU) out of hours, who will consider whether it is appropriate to defer the removal.

DET Induction

54. On-site DET staff will conduct an induction interview with a detained individual within 48 hours of their arrival at a centre, which will cover as a minimum the areas detailed in Annex F. DET inductions will be undertaken using professional telephone interpretation services unless the individual is fluent in English. The DET staff will record the information supplied by the person on CID and Atlas.
55. Next of kin information supplied by the individual must be recorded as a special condition (DS:DEPMU) on CID and Atlas.
56. As per Annex F, DET staff conducting an induction interview must confirm whether the detained individual is receiving legal representation, for those who are not receiving this service but require it, DET staff must signpost the individual in how to obtain this. This information will be recorded on the DET induction checklist including whether the individual does not wish to access legal advice. The ECMT do not conduct a separate induction to that undertaken by supplier in the RSTHF.
57. Where the detained individual has transferred from one IRC to another and a full induction has been completed by the DET previously a reduced 'mini' induction, as per Annex G, will be undertaken to avoid unnecessary duplication of questions.

Discharge

58. The checklist at Annex H details the mandatory actions to be undertaken by the centre supplier at the point of discharge.
59. The PER and DTD must be completed by supplier staff at the point of discharge and provided to escort staff upon handover, along with the medical notes and prison file (if applicable). Supplier staff must ensure that all property belonging to the detained individual accompanies them in line with DSO 06/2012 Management of Property.
60. If a detained individual has no spare clothing upon release, supplier staff should ensure that weather appropriate destitute clothing is provided.
61. Complaints boxes should be easily accessible to detained individuals in the discharge area. If no complaints boxes are available in this area, detained individuals should be given the opportunity to raise their concerns with staff prior to being discharged and express any dissatisfaction verbally or in writing.

Destitute payments

62. A detained individual may bring to the attention of centre or escorting staff that they do not have the financial means to reach their final destination when being removed from the UK.
63. If this is raised prior to removal, then centre staff should contact DEPMU directly to request that a destitute payment be made. DEPMU will approve or reject straightforward requests for destitute payments and update the detained individual's CID and Atlas records. Some cases may be referred to the caseworker for a decision. For families located at the PDA, the supplier staff will undertake a family funding analysis and will agree with the onsite Compliance team the appropriate amount of funding to be issued.
64. If the detained individual raises this during an escorted removal, then the Senior Detainee Custody Officer (SDCO) will review the detained individual's property sheet to assess their personal funds available and make a decision on whether a payment is justifiable. Payment will only be made by the Home Office following a successful removal.
65. For unescorted removals, the SDCO should refer the request for a destitute payment to the DEPMU Duty Manager prior to the removal, giving details of the amount required and reason. The DEPMU Duty Manager will consider the request and either decline or approve payment. Payment for unescorted removals is made at the point of departure.

Revision History

Review date	Reviewed by	Review outcome	Next review
June 2016	Emily Jarvis	General update to include discharge, fast track reception and first night detention processes	June 2018
July 2021	Kevin Teefey	Reformat and general update including the property waiver form, induction of adults at risk, next of kin details and voluntary departures.	August 2023
January 2023	Tosin Amisu	Update to Annex F – Detention Engagement Team (DET) Record	December 2024

Annex A – Reception Checklist

Centre Supplier Reception Officer

1. Person Escort Record (PER) form up to date on arrival? If not, has appropriate action been undertaken by raising with the escorting staff and the on-site Compliance manager for escalation?
2. DTD (detainee transferable document) up to date? If not, has appropriate action been undertaken?
3. Did the prison file accompany the detained individual (where appropriate)? If not, has the appropriate action been undertaken to obtain it?
4. Has the prison file been passed to the IRC security department and prison licence been copied to DET staff?
5. Is the detained individual accompanied by medical notes (where appropriate) and any prescribed medication?
6. Has a room sharing risk assessment been undertaken?
7. Is a single occupancy room needed? Has a single occupancy room been provided?
8. Has an initial evaluation of English language skills been made and the outcome noted?
9. Is interpreting required for the reception process? It is important that all service providers utilise professional interpreting facilities where a language barrier is identified and the information being interpreted is specific to the detained individual. This is to be logged on the suppliers' detainee management system.
10. Have Emergency Contact details / Next of Kin details been sought and recorded? If not, have the reasons why been recorded? Has the detained individual been assured of the confidentiality of this information? Has the detained individual been advised to, as a minimum, provide a contact telephone number?
11. Are there any initial indications of the need for an Assessment Care in Detention Teamwork (ACDT) or has the detained individual transferred from another centre on an open ACDT, or have other vulnerability issues been identified? Further guidance and support is contained within DSO 04/2020 - Mental vulnerability and immigration detention: non-clinical guidance
12. Has a toiletries pack been given and recorded?

13. Has a free 5 minute phone call (or similar) been facilitated?
14. Have clothing needs been considered?
15. Has a clothing pack been issued?
16. Has the detained individual been given the opportunity to note stored phone numbers from prohibited mobile phones or swap SIM card?
17. Has the detained individual been asked if all property has arrived with them?
18. Has the detained individual been explained the property allowance in accordance to DSO 06 – 2012 and given the opportunity to sign the property disclaimer form?
19. Does the detained individual require the assistance of the welfare officer (or similarly nominated member of staff) to acquire missing property or property from outside the IRC?
20. Has the welfare officer (or similar staff member) been notified of the location of the detained individual's property in order to try and obtain it?
21. Have fingerprints been taken or checked if they have already been taken?
22. Has the detained individual been provided with a copy of the IRC centre rules and Compact in a language they understand?
23. Has the detained individual been informed that there is surveillance camera equipment in operation within the establishment, and explained the circumstances in which each type of equipment is used?
24. Has the detained individual been told they may not have access to their own mobile phone on removal, and that as such they should copy down important numbers?

Centre Healthcare Staff

1. Has the detained individual been seen within 2 hours of arrival for an initial health screening?
2. Has the detained individual been advised that they may request to be seen by member of same sex (nurse/doctor)?
3. Is interpreting required for the screening process? It is important that all healthcare providers utilise professional interpreting facilities where a language barrier is identified and the information being interpreted is specific to the detained individual. This is to be logged on the detained individual's medical file and SystemOne, where applicable.
4. Has the detained individual been advised of their ability to request their own doctor (at their own expense)?
5. Have specific medical needs been identified?
6. Have Emergency Contact details / Next of Kin details been sought and recorded? If not, have the reasons why been recorded? Has the detained individual been assured of the confidentiality of this information? Has the detained individual been advised to, as a minimum, provide a contact telephone number?
7. Is a Personal Emergency Evacuation Plan (PEEP) needed?
8. Has the Health and Safety Officer been notified re the PEEP requirement?
9. Are mobility aids required?
10. Are reasonable adjustments needed?
11. Is a single occupancy room medically indicated?
12. Has detained individual been offered an appointment with the doctor (to take place within 24 hours)?
13. Has the detained individual arrived with the necessary supply of medication (if transferring from another IRC)? If not, the centre healthcare team should contact the previous centre to determine what medication is required. If the receiving centre does not have the medication in stock, and the ordering time for obtaining a replacement would result in a break in continuity of medication, the receiving centre should make arrangements for the detained individual's medication from the previous centre to be transferred to the new centre without delay. Additionally, ensure detained individuals requiring medication are aware of dispensing times and dispensing location.

14. Has a full initial assessment of vulnerability been undertaken via the healthcare screening questionnaire? If vulnerabilities have been identified have these been notified appropriately and action taken (e.g. ACDT opened)
15. Are there any pre-existing external medical appointments scheduled for the detained individual? Every effort should be made to keep and fulfil existing external medical appointments already in place for those in detention, both those arranged prior to and during detention. In these circumstances the guidance in Detention Services Order 07/2012 'Medical Appointments outside of the Detention Estate' should be followed.

Annex B – Reception Checklist Guidance

Prison File

Where a Foreign National Offender (FNO) detained individual arrives at a centre, reception staff should ensure that the individual's prison file is accompanying them. This file should be passed (without delay) to the centre's security department to enable them to begin the process of evaluating the presenting risk of the individual. Where a licence is present on the file the reception staff should notify the DET accordingly. Security department staff should additionally pay careful attention to the full range of risks/vulnerabilities that are recorded within the file and cascade this information appropriately and without delay to the appropriate colleague (e.g. Healthcare). Where it is known that an individual has served a custodial sentence in prison and is brought to a centre without their accompanying Prison file it is the responsibility of the centre's security department to make every effort to try and locate the file or to contact the last known prison in an attempt to ascertain any pertinent security information about the individual. Further guidance on actions required for missing prison files are contained within DSO - 12/2012 Room Sharing Risk Assessment.

For detained individuals who have transferred out of a Scottish prison, the receiving centre must call the last prison the detained individual was held at for a read out of any adjudications and any other relevant security information, and add it to the individual's records.

Medical Notes

Detained individuals who arrive having been transferred from other centres or from prison establishments should be accompanied by either their full medical file, a summary of their medical history/treatment from the previous establishment or a letter from the previous clinician indicating any medical conditions or special needs.

Detained individuals transferred from another centre should have been discharged with any medication that has been prescribed to them to ensure continuity of treatment. Where reception staff at the receiving centre become aware that medication is absent on arrival, this should be flagged to the centre healthcare team who should contact the previous centre to determine what medication is required. If the receiving centre does not have the medication in stock, and the ordering time for obtaining a replacement would result in a break in continuity of medication, the receiving centre should make arrangements for the detained individual's medication from the previous centre to be transferred to the new centre without delay. If there are any difficulties with accessing medication healthcare staff should inform Home Office as a matter of urgency.

Healthcare

All detained individuals must receive an initial healthcare screening within 2 hours of their arrival at an IRC. An assessment of whether the detained individual requires an immediate appointment with a doctor must be conducted. Where an immediate appointment is not required, an appointment that would take place within 24 hours of the detained individual's arrival at the centre must be offered.

Healthcare staff must advise detained individuals that they may request an appointment with a medical professional of the same sex and that, if they require an examination by a doctor, that they may request to be seen by their own doctor (if their own doctor is amenable to such a request). Detained individuals should be made aware that there may be a delay in their own doctor attending and that their doctor may charge them a fee to enable their attendance at the centre for this purpose.

If a detained individual has a pre-existing external medical appointment(s), healthcare staff must notify centre supplier staff and the procedures set out in DSO 07/2012 Medical Appointments outside of the Detention Estate followed.

Personal Emergency Evacuations Plan (PEEP)

The healthcare professional must notify the Duty Operations manager and the health and safety officer (H&S) in the centre of any detained individuals identified with a disability or with a temporary medical condition that necessitates increased assistance (e.g. fractures, sprains, back injuries, pregnancy, learning difficulties, and dyslexia) in order that a PEEP can be prepared without delay by the H&S officer or appropriately assigned manager, in either case, a detained individual must not be placed into residential accommodation without an active PEEP. The H&S officer must ensure that all staff are aware of their responsibilities to individuals with a PEEP and what to do in the event of an evacuation. A copy of the PEEP should also be sent electronically to the DET.

Rule 35/Rule 32 considerations

DSO 09/2016 Detention centre rule 35 and Short term Holding Facility rule 32

Rule 40 and Rule 42

The regime requirements for Rule 40 and Rule 42 accommodation should be displayed publicly in the reception area. During the induction process detained individuals must be explained the rules governing the use of Rule 40 and Rule 42 accommodation.

Room Sharing Risk Assessment (RSRA)

DSO 12/2012 Room sharing risk assessment refers.

Refreshments / Toiletries / Free Phone Call / Clothing / Mobile Phone

Reception officers must ensure that all new arrivals are offered:

- refreshments (including a meal)
- free hygiene packs available at all centres or are notified at which point in the process that one will be provided,
- a free 5 minute phone call (or similar),
- clothing if required
- and are issued with a loan telephone (where theirs is not compatible with DSO 05/2018 – Mobile Phones and Cameras in Centres) and able to transfer their SIM card or note important contact details.

Where any of these services are declined the reception officer must record this and (where given) the reasons why.

Detained Individual's Property

DSO 6/2012 Management of Property refers.

Fingerprints

DSO 15/2012 Fingerprinting of Detainees refers.

Annex C – Emergency Contact Form

Please complete this form as accurately as possible. These details will help us should we need to get hold of your Emergency Contact urgently in an emergency only,

The information recorded in this form will not be used for any purpose other than notifying your next of kin in case of an emergency, in any situation where you are unable to do this yourself. These details will not be shared with third parties or other government agencies and will be stored and disposed of in accordance with the General Data Protection Act 2018

Name:	
CEPR Number:	
Detained at:	
Mobile Number:	

Emergency Contact Details

(a close relative or friend in the UK or Overseas)

Name (CAPITALS):	
Relationship:	
Address:	
Phone Number 1:	
Phone Number2:	
Email:	

Signature _____

Date _____

Removal centre use only

I confirm that the resident provided /refused to provide/was unable to provide emergency contact details, I also confirm that the resident was informed how this information will be used and stored in accordance with the above.

Signed _____

PRINT NAME _____

Date _____

Interpreter used? Interpreter code: _____

Annex D – Induction Checklist

Centre Supplier Induction Officer

1. Is interpreting required for the Induction process? It is important that all centre suppliers utilise professional interpreting facilities where a language barrier is identified and the information being interpreted is specific for the detained individual.
2. Has a full tour of the centre been undertaken - pointing out key facilities and amenities including (but not limited to) library and internet access, education, sport and leisure activities?
3. Have Emergency Contact details / Next of Kin details been sought and recorded? If not, have the reasons why been recorded? Has the detained individual been assured of the confidentiality of this information? Has the detained individual been advised to, as a minimum, provide a contact telephone number?
4. Has the role of the supplier at the centre been explained?
5. Has the role of the onsite Compliance and DET been explained?
6. Has the role of the Independent Monitoring Board been explained, including an explanation of a detained individual's ability to make complaints to Board Members in person or via the IMB complaints boxes?
7. Have the procedures and times for meals been explained?
8. Has access to healthcare been explained?
9. Welfare Officer / Welfare Services role explained?
10. Has the anti-bullying strategy been explained, and the helpline number provided?
11. Has the use of Rule 40 or Rule 42 accommodation been explained and the regime availability in such accommodation detailed?
12. Has the role of the Religious Affairs team been explained, and places of worship signposted?
13. Has signposting been undertaken to support groups e.g. visiting groups – including AVID, Samaritans, Red Cross?
14. Have all new arrivals been asked if they currently have legal representation, ensuring the process on how to access to legal advice been explained, including Duty Solicitor Scheme, its independence from the centre, the times of surgeries and that it is free of charge?

15. Has the weekly allowance disbursement been explained?
16. Have the rules surrounding paid activity been explained?
17. Has voluntary departure been discussed? In particular the opportunity to reimburse the Home Office for the cost of their airfare home in return for a potentially lower re-entry ban.
18. Has a secondary evaluation of special needs / vulnerabilities been undertaken?
19. Action taken as a result?
20. Has the complaints system been explained and the confidentiality of the complaints system emphasised – including both Home Office and NHS complaints processes?
21. Have the procedures and times for social / legal visits been explained?
22. Have the smoking arrangements in the centre been explained?
23. Management of property volumes/weights explained and detained individual given the opportunity to sign the property disclaimer form?
24. Shop opening hours / functions explained e.g. phone credit top ups.
25. Confirm that detained individual has received all entitled provisions if needed i.e. refreshments, clothing, loan mobile phone, toiletries, 5 minute telephone call
26. Detained individuals buddy system explained, and buddy assigned (where applicable)?
27. If not already undertaken arrange for a post first night assessment to be undertaken

Healthcare Staff

1. Has Rule 35/ Rule 32 been actively considered during the doctor's appointment?
2. Is interpreting required for the Induction process? It is important that all service providers utilise professional interpreting facilities where a language barrier is identified.
3. Have Emergency Contact details / Next of Kin details been sought and recorded? If not, have the reasons why been recorded? Has the detained individual been assured of the confidentiality of this information? Has the detained individual been advised to, as a minimum, provide a contact telephone number?

Annex E – Induction Checklist Guidance

Tour of the centre conducted

Detained individuals who are entering a removal centre for the first time must receive a full tour of the centre during which the location of key areas and facilities should be pointed out such as:

- Bedroom Accommodation
- Dining Hall
- Library
- Welfare Office
- Recreation / sporting / education facilities
- IT facilities
- Shop
- Healthcare
- Social visits lounge (and visiting times)
- Outdoor recreation/leisure areas
- Immigration offices
- Complaints boxes
- IMB office / complaint boxes
- Faith / prayer rooms

Where an individual has been accommodated at the centre in the recent past and is re-entering the centre for a second time a reduced version of this tour can be conducted subject to there having been no significant alterations to the location of key facilities.

Role of supplier explained

Detained individuals should receive an explanation of the role of the supplier at the centre and the type of matters that they can assist the detained individual with e.g.

- Provide safety and security functions e.g. dealing with bullying, facilitating fire drills, ensuring building and its contents are safe for use
- Provide for the care and welfare of detained individuals e.g. being available for detained individuals to flag concerns of self harm or suicide risk for themselves or on behalf of others
- Provide cleaning and catering services
- Responsible for ensuring strategies are in place for the reduction of violence and that detained individuals are made aware of these at the earliest opportunity
- Responsible for ensuring there is faith provision
- Responsible for ensuring there are educational, recreational and cultural activities

Role of on-site immigration team explained

Detained individuals should be advised how to contact the immigration teams at the centre and have the role of the onsite immigration teams explained in general terms that:

DET:

- Act as a link between the detained individual and their caseworker
- Will encourage the detained individual to make a voluntary departure
- Will answer questions posed by detained individuals about the current position of their immigration case and plans for removal
- Will serve paperwork to the detained individual on behalf of their caseworker
- Are not responsible for making any decisions on their case
- Will deliver a separate induction from the service provider

Compliance Team:

- Will monitor the overall running of the centre to ensure that detained individuals receive care and facilities in line with the supplier's contract / SLA with the Home Office

Role of IMB explained

Detained individuals should be advised of the role of the IMB at the centre and how to contact them including that:

- The IMB are independent to the supplier and the Home Office
- They are appointed to monitor and report on the state of the removal centre premises, the administration of the removal centre and the treatment of the detained individuals
- The IMB will inform the Secretary of State immediately of any abuse which comes to their knowledge or of any matter causing them concern.
- The IMB can raise concerns about the processes and procedures which surround a detained individual's immigration status (e.g. time delays in reaching a decision) but cannot concern themselves directly with the detained individual's immigration status (e.g. the substance or merits of any application they have made)

Procedures for Mealtimes explained

Detained individuals must be:

- Made aware of the arrangements for meals within the centre (e.g. if they are served on residential units via a servery or in a central dining hall)
- Shown where meal service takes place
- Notified of the times that meals are served / provided
- Advised of any pre-ordering requirements that must be undertaken
- Encouraged to raise at an early stage any special dietary requirements they have (Halal/vegetarian / vegan etc). Dietary requirements due to medical reasons will be determined and notified by the healthcare team

How to access healthcare explained

Detained individuals must be advised of:

- The hours of attendance of the nurses and doctors to the centre
- Hours of drop in clinics, nurses and doctor consultation times and how to make appointments to access these services
- The general principles governing "in possession" medication and the arrangements for collecting / receiving dispensed medication
- How to report that they are unwell while in the centre

- Their ability to request that they be attended by their own doctor (if their doctor is amenable to such a request) or by a doctor of the same sex. Detained individuals should be advised that their own doctor may request a fee to attend to them in the removal centre

Role of the welfare officer explained

Detained individuals must be:

- Shown the location of the welfare office
- Advised of the hours of welfare provision
- Provided with the name(s) of the welfare officers at the centre
- Given an overview of the general issues that the welfare officer can assist with and give support on (DSO 07/2013 refers)

Anti-bullying strategy explained

Detained individuals must be explained the anti-bullying strategy at the centre and provided with the helpline number and relevant leaflets, if available, in particular to those detained individuals who are vulnerable.

Faith provision explained

Detained individuals must be:

- Shown the location of the various worship facilities within the centre
- Made aware of the ability to request a visit by a minister of their own faith
- Notified of the hours during which they can access the worship facilities and where possible provided with the times of formal religious services and celebrations
- Advised of the availability of clothing / worship aids that the supplier can provide e.g. religious texts, prayer beads, prayer mats, Koran stands etc

Access to legal advice explained

Detained individuals must be:

- Advised of their right to receive legal advice during their stay in the centre
- Shown where legal texts are located in the centre's library
- Advised of the arrangements for the Duty Solicitor Scheme which operates at the centre – i.e. the days and times of consultations and the procedures for obtaining an appointment

- Advised of the ability of legal representatives to book appointments with them at the centre
- Notified of their entitlements to enable them to make contact with their legal representative (faxing and photocopying availability)

Signposting to support groups undertaken

Detained individuals must be:

- Advised of any visiting group / charitable organisation / support group that routinely visit the centre and be notified of the days / hours of attendance and how they might contact them
- Shown any literature / leaflets associated with groups that can offer support to detained individuals, where this information is available in centres

Paid activities opportunity explained

The rules surrounding eligibility for paid activities must be explained, along with the types of opportunities available and the application process (DSO 01/2013 refers).

Voluntary departure discussed

Officers should signpost detained individuals to information on voluntary departure and encourage them to discuss voluntary departure with the onsite DET staff. In particular the opportunity to reimburse the Home Office for the cost of their airfare home in return for a potentially lower re-entry ban.

Secondary evaluation of special needs / vulnerabilities

The induction process should be used by officers as an opportunity to re-assess any special needs / vulnerabilities identified at the point of reception or to identify any concerns not immediately apparent when admitted to the centre and pass this information to the Home Office. Any concerns should be escalated appropriately, or added to the individual's records – in particular you should consider whether healthcare teams need to be contacted.

Officers should give careful consideration to whether an ACDT is required (or not) following the period since initial reception. This consideration and resultant decision must be recorded.

Complaints system explained

Detained individuals must be:

- Advised of the formal complaints system, including healthcare complaints (DSO 03/2015 refers)

- Shown where to find complaints forms and complaints post-boxes
- Advised that assistance from staff is available to help complete a complaint form
- Advised that complaints may be submitted in languages other than English, although responses will be in English (with the exception of healthcare complaints)
- Reassured that making a complaint will not impact negatively on their treatment in the centre or on their immigration case
- Advised of the role of the Prison and Probation Ombudsman (PPO)

Social and Legal visit procedures explained

Detained individuals must be shown where social and legal visits can take place and must be advised of how appointment can be made.

Visiting hours and items that can be brought to visits for the detained individual must be explained.

Smoking rules in the centre explained

Detained individuals must be advised of the locations in which they are permitted to smoke outside the centre in the recreation areas.

Management of property explained

Detained individuals must be:

- Advised of baggage limitations for their removal
- Notified that they may swap items in possession for other items brought in by visitors
- Told about other arrangements to deal with excess baggage such as paying for excess baggage to be taken on board the aircraft or paying to ship excess baggage back to their country of return as per DSO 06/2012 Management of Property.
- Advised on how they can access their stored property in the removal centre
- Given and explained the property disclaimer form as detailed in DSO 06 - 2012

Shop hours

Detained individuals must be:

- Shown the location of the shop and advised of its days / hours of opening
- Advised how to purchase items

- Advised of any additional functions carried out by the shop (e.g. catalogue ordering, money exchange)
- Advised of the arrangements for the detained individual weekly allowance, the criteria for initial eligibility, the amount paid, the way in which it is paid and the arrangements to receive any balance if they are transferred to another centre.

Detained individuals Buddy system

Where centres operate a system of fellow detained individuals that occupy the role of “buddies”, the inducting officer must advise detained individuals of this provision and outline the role that the buddy fulfils advising them if a buddy has been allocated to them. Detained individuals should also be advised about the procedures to become a “buddy” if this is appropriate.

Rule 35/ Rule 32 reconsideration

The responsibility for submitting Rule 35/Rule 32 reports in accordance with the requirements of the Detention Centre Rules 2001/Short-term Holding Facility Rules 2018 rests with the centre doctors in IRCs. Rule 32 reports may be submitted by nurses as they have day-to-day responsibility for healthcare provision in residential STHFs. However officers who are involved in the induction process with detained individuals should be alert to any statements made, behaviours observed or reports by others which indicate that a detained individual has:

- Displayed evidence that their health is likely to be injuriously affected by continued detention or any conditions of detention
- Shown evidence of having suicidal intentions
- Claimed that they have been the victim of torture

Any concerns that an officer has about a detained individual relative to any of the above conditions should be reported without delay to the centre healthcare team and a record made that this has been undertaken.



Name of resident	
DOB of resident	
Nationality	
Interpreter language/dialect and code (if applicable)	
Induction completed at (location)	
Induction completed by (engagement officer name)	
Date and Time	

Interpreter (if applicable)

1. Can you understand the interpreter?

Option 1 - for use in DAC cases only

Do you require an interpreter in this language for any further engagements, including your substantive asylum interview? (if no, provide details of any alternative languages or if an interpreter will not be required)

End of option 1

Introduction

Please read the following statement before proceeding

My name is and I work **in/on behalf of (as applicable)** the Home Office Detention Engagement Team. We are here to help you with any questions or issues you may have with your immigration case. We do not make any decisions on your case, but we will provide you with documents and updates from the casework team.

I am seeing you today to complete an IRC induction and I will be asking you a number of questions. This information will help the Home Office understand your personal history and what support you may require during your stay.

Personal Administration

2. Can you confirm your name, nationality and date of birth? (record details and any aliases/changes)
3. Confirm identity against records – biographical details and photographs held (note any concerns)
4. Is there anyone we could contact on your behalf in case of an emergency? (include contact details and relationship)
5. Do you have a support network in the UK (family, friends, distant relatives etc) who you are in contact with? (capture detail)
6. Can you confirm that you have an IRC provided mobile phone and sim card?



7. Explain to the person that they are entitled to access to the internet, Skype, and alternative SIM cards if they have difficulty with phone signal. Remind them that should they
8. experience an issue with any of these items they should go to Welfare immediately, including where it may affect contact with their legal advisors.
9. Explain the reasons for detention and ask for confirmation that they understand the reasons why they are detained. Ensure the person's detention paperwork (including the entry to detention letter and BAIL 403 form) has been received and explained. (provide your business card with contact details)

Voluntary Departure

10. (If eligible) You have been detained on the basis just explained. We would like your detention to be as short as possible and you can help to achieve that if you would like to take the opportunity to depart voluntarily. We can help by arranging and paying for your flight. Do you wish to leave on a voluntary basis?
11. (if YES to Q.9) Do you have a preferred arrival destination within the country you wish to return to? (If YES, record destination)
12. (If NO to Q.9) Is there anything we could do to encourage you to leave the UK on a voluntary basis?
13. (If NO to Q9) Is there a reason for why you do not want to voluntarily return home? (record details)
14. Location of travel document (record travel document type and location)

Access to Legal Advice

Option 1 - for use in non-DAC cases

15. Do you have a legal representative? (If YES record name and contact details of solicitor, ask that they provide to DET as soon as possible if they do not have to hand)
16. Explain weekly Duty Solicitor Schemes – (advise only to use registered solicitors / legal advisors, if in doubt over registered legal advisors the OISC should be contacted via welfare / internet. If they experience any issues securing an appointment through the Detained Duty Advice (DDA) scheme they should notify a member of the IRC Service Provider staff (ideally) based in the Welfare office who will contact the Legal Aid Agency).

End of option 1



Option 2 - for use in DAC cases only

TO READ OUTLOUD

While you are at the centre, you may wish to seek the advice of a legal representative to assist you in your case for asylum in the United Kingdom. There are duty solicitors available who are able to assist you free of charge, and independently. They are not employed by the British government. Your Interview will not usually be delayed if the person you want to seek advice from is not available.

You can however instruct a legal representative privately. Should you decide to do this, you will need to satisfy yourself that the legal representative fully understands the asylum processes. You also need to ensure that our office is notified of your representative's details at the earliest possible opportunity. During this time you can of course decide to opt again for a duty solicitor.

Within the next 2 working days you should inform us if you wish to use a duty legal representative, private legal representative, or if you wish to represent yourself at your substantive asylum interview. If you do not tell us within 2 working days, you will be allocated a duty legal representative. If you have a private legal representative, but require additional time to provide their details, please contact the Detention Engagement Team (DET). To provide this information you must contact the DET directly on telephone number 0203 300 4346 or by fax on 0370 336 9523 (please ensure you place a Home Office reference number on the fax header and mark it as "DAC case urgent").

Once booked, an asylum interview will only be cancelled in exceptional circumstances. Late instruction of a legal representative will not normally justify the cancellation of an interview.

17. Do you currently have a legal representative? If so, what is the name, telephone number and address of the firm you are using.
18. Do you wish to be given a duty legal representative?

End of option 2

19. Explain to the person that they have a right to contact their Embassy or Consulate and ask if they are aware of how to do so.
20. **For those who have been transferred from a prison and will spend less than 5 days in the IRC before their scheduled removal date (mark as N/A if this does not apply)** - check whether they have experienced any issue with access to legal advice since the service of their removal directions.

Healthcare

21. Were you seen by Healthcare for an initial screening within 2 hours of arrival at the centre and have you have had an opportunity to raise any health concerns with them? (If NO, confirm that this been referred to Healthcare / Compliance team)
22. Were you offered an appointment with a GP/Doctor within 24 hours of arrival at the centre? (If NO, capture detail including if the person rejected an appointment. If YES, confirm whether the person attended the appointment and if this resulted in a R35 report.)
23. Do you have anything else that you want to tell me about your physical or mental health since being seen by healthcare on arrival that you haven't said before? (capture detail)



Welfare

Please read the following statement before proceeding

I'm now going to ask two questions about your welfare. We understand that these issues might be difficult for you to talk about, but this information is important as it will help the immigration casework team and Healthcare to understand what support you may require in the centre. Any information you provide may be used as evidence during the progression of your case.

24. In your country of origin, on the way to the UK, or in the UK have you ever been subject to exploitation, for example being forced into prostitution, forced labour, or did you have reason to believe you were going to be exploited? (if indicators identified capture detail and refer to NRM process)

25. Have you ever been a victim of torture and / or sexual or gender-based violence? (capture response and if YES signpost the person to Healthcare and notify case owner)

Any other comments

26. Are there any other issues that you haven't mentioned and would like to raise?

Post-Induction Safeguarding Check

Please delete either option 1 or option 2 as applicable

Option 1

Based upon my observations during the induction interview, I do not have any current concerns regarding the person's mental state (other than medical conditions already specified during the induction).

Option 2

Based upon my observations during the induction interview, I do have concerns regarding the person's mental state (other than medical conditions already specified during the induction). These concerns are detailed in the box below.

(If applicable) provide further information about the person's mental state as observed during the induction. This should include any concerns related to the person's mental wellbeing and/or their ability to understand what you have said during the induction interview.

Please ensure that the casework team and healthcare are made aware of any concerns.

Free text

Annex G – DET Mini Induction Record

This record is only to be used in the following scenario:

- Where the person has transferred from a different IRC where a full Induction has been completed previously.

Note for Engagement Officer:

Ensure that you have the content of the previous induction available when completing this mini induction.

Personal Details

1. Interpreter used? YES NO If YES, language/dialect –
2. Introduce yourself and explain you are seeing them today to complete a mini Home Office induction and will be asking them some questions / providing information YES NO

Introduction

3. A mini induction has been completed at [insert name of IRC] with [insert name of person] today at [insert time]. This is because [insert name of person] has previously received a full DET induction at [insert name of IRC] on [insert date/ time]
4. Tick box when completed;
 - Ensure the person's detention paperwork had been received and, where applicable, that they are aware of their removal date and have received removal directions paperwork
 - Explain that I will be their Engagement Officer during their stay
 - Provide my business card with contact details
5. Where relevant, have the following documents been issued and explained to you?
 - Bail information (Form 403 – explained SoS / FTT bail) YES NO N/A (If NO, provide copy of 403 and in language preference if available)
6. I confirm that the individual appears to be able to converse with me and I do not currently have concerns around their mental state or ability to understand what I am asking
YES NO (Detail any concerns)

Personal Admin (to be checked from any previous induction)

7. Emergency contact details / relationship –
8. What is your mobile number –
9. Is this an IRC phone YES NO
10. Is this an IRC provided SIM card YES NO (Record Network)
11. Explain to the person that they are entitled to access to the internet, Skype, and alternative SIM cards if they have difficulty with phone signal. Remind them that should they experience an issue with any of these items they should go to Welfare immediately, including where it may affect contact with their legal advisors. Confirm this is understood
YES NO

Access to Legal Advice (to be checked from any previous induction)

12. Legal Advisor engaged YES NO (If YES record name and contact details of solicitor, ask that they provide to DET as soon as possible if they do not have to hand)
13. Explain weekly Duty Solicitor Schemes – YES NO (advise only to use registered solicitors / legal advisors, if in doubt over registered legal advisors the OISC should be contacted via welfare / internet. If they experience any issues securing an appointment through the Detained Duty Advice (DDA) scheme they should notify a member of the IRC Service Provider staff (ideally) based in the Welfare office who will contact the Legal Aid Agency).

IRC Induction and Healthcare

14. The local service provider carries out their own induction, has this taken place?
YES NO (If NO, confirm that this been referred to Service Provider / Compliance team)
15. Were you seen by Healthcare for an initial screening within 2 hours of arrival at the centre and have you have had an opportunity to raise any health concerns with them?
YES NO (If NO, confirm that this been referred to Healthcare / Compliance team)
16. Were you offered an appointment with a GP/Doctor within 24 hours of arrival at the centre?
YES NO (If NO, capture detail. If YES, confirm whether the person attended the appointment and if this resulted in a R35 report.)
17. Do you have anything else that you want to tell me about your physical or mental health since being seen by healthcare on arrival that you haven't said before? YES NO (capture detail)

Welfare Check (to be checked from any previous induction)

18. In your country of origin, on the way to the UK, or in the UK have you ever been subject to exploitation, for example being forced into prostitution, forced labour, or did you have reason to believe you were going to be exploited? YES NO (if indicators identified capture detail and refer to NRM process)
19. Have you ever been a victim of torture and / or sexual or gender-based violence?
YES NO (Capture response and if YES signpost the person to Healthcare and notify case worker)

Case Progression (to be checked from any previous induction)

20. Has the person expressed or implied they wish to make a protection claim YES NO
21. In the preparation for your flight you may be offered the opportunity to take a further Covid-19 test prior to departure; the test is voluntary. The Home Office will arrange for this to take place with results expected back within 72 hours. For those who take the test, data will be processed by the Home Office in fulfilment of its official functions for reasons of substantial public interest. Test results will be shared with you and the authorities of the country that you are being returned to. Do you agree to further testing? YES NO

Concluding question

22. In addition to the above I have identified the further potential safeguarding issues and/or vulnerabilities during the induction (for example, any concerns about the person's wellbeing or ability to understand the induction and/or their rights) (Capture details / or state none if applicable)

Annex H – Discharge Checklist

Centre Supplier Discharge Officer

1. Person Escort Record (PER) form up to date on discharge? If not, has appropriate action been undertaken?
2. Detainee transferrable document up to date? If not has appropriate action been undertaken?
3. Detained individual identified with photograph on IS91, name/date of birth confirmed and fingerprint biometrics confirmed via the fingerprint system.
4. Detained individual informed on where he/she is being moved to and whether or not they had any questions with regards to this move.
5. If being transferred to another centre has the prison file been made available to accompany the detained individual? If not has the appropriate action been undertaken to obtain it?
6. Has the prison file been passed to the escorts?
7. Is the detained individual accompanied by medical notes (where appropriate) and any prescribed medication?
8. If being removed, has a handover taken place with medical escort and healthcare information provided in accordance with DSO 01/2016 (Medical Information Sharing)?
9. Was telephone interpreting used for the discharge process?
10. Is there any indication of the need for an Assessment Care in Detention Teamwork or have other vulnerability issues been notified to the escorts?
11. Have clothing needs been considered (where a detained individual is being removed to different climactic conditions)?
12. Has a clothing pack been issued?
13. Has the detained individual been asked to check and confirm if all property is available prior to discharge?
14. Does the detained individual require the assistance of the welfare officer (or similarly nominated member of staff) to acquire travel plan on release?
15. Has the Welfare officer (or similar staff member) been notified of the location of the detained individual's property in order to ensure it is ready at point of discharge?

16. If being released into the community has the detained individual received the necessary travel warrant or has confirmed that they have made alternative arrangements to be collected from the centre.
17. Have any vulnerabilities been identified that would affect release into the community?
18. If being released has the appropriateness of the time of release and onward journey been considered?
19. If being removed, does the detained individual have the financial means to reach their final destination?
20. Personal mobile phones may not be available to the detained individual during the return process. Have they been given the opportunity to note stored phone numbers?
21. Has detained individual been advised that they may be filmed during the returns process (particularly pertinent for charter flight returns)?
22. If an FNO is being released into the community has the detained individual been provided a copy of their licence prior to their release?