

Independent Advisory Panel on Non Compliance Management

Summary of evidence received

Introduction

1. The Independent Advisory Panel on Non-Compliance Management (IAPNCM) was established in 2013 by Home Office Ministers to offer independent advice on the quality and safety of a new training package for use by detainee custody officers who escort those being removed from the UK. The package will apply to adults (over 18) only, and will cover in-country and overseas escorts.
2. The focus of the Panel's work is on the management of non-compliance by those adults subject to removal. This emphatically means reducing anxiety, de-escalating tension, and minimising recourse to restraint, as well as any equipment and holds that may be deployed. The Panel's remit does not cover wider issues of immigration policy, nor how that policy affects particular individuals. Its key aim is to help the Home Office to adopt the best possible restraints package: one that avoids force whenever possible, which minimises harm and maximises safety.
3. To ensure that the Panel's work is carried out in as open a manner as possible, and to ensure that this is informed by as many people with an interest in this country's immigration laws and practices, the chair wrote to over 100 interested parties in the UK on 8 April 2013 and to around a dozen European immigration authorities and other international interested groups on 29 April. A list of those consulted is attached as Annex 1.
4. Both letters emphasised the Panel's role and focus, and invited responses. In addition, the Panel noted that it was:

‘... particularly keen to learn of any good practice that is available internationally, and any matters relating to the medical aspects of restraint. Issues of communication and cultural awareness are also on our agenda ...’
5. The Panel received a response rate of 33%, some of which were confidential. This paper summarises the substantive points received under main headings and on a non-attributable basis.

Control and Restraint (C&R)

6. Respondents argued that it is difficult to carry out a safe and professional restraint of a highly resistant person in a confined area such as an aeroplane and particularly in a seated situation. This, it was argued, is compounded by the reduced atmospheric pressure in an aircraft.
7. Any procedures developed for the purpose of restraining detainees on an aircraft should be subject to medical evaluation. It was accepted by some respondents that it may be

unavoidable to use manual restraint with a person who suddenly and unpredictably becomes aggressive during a flight. This therefore necessitates that the techniques for manual restraint on an aircraft need to be developed and correctly taught to ensure that no escort responds with untried, *ad hoc*, 'spontaneous' techniques that can result in fatalities. All levels of force must be kept consistently within safe parameters.

8. A number of respondents noted that escorts are given no specific training in how control and restraint techniques should be adapted for closely confined, seated restraint in an aeroplane. Respondents also noted that if restraint is carried out in a seated position, then it must be strongly emphasised to all escorts that the detainee is kept upright – not leant forwards – *at all times*.

Compliance and holds

9. Manual restraint usually relies upon a superiority of numbers to allow staff to safely restrain a person. Some respondents noted that, for a highly resistant person, this may be four or more staff. If the level of force is increased in order to achieve control, then the risk of injury and discomfort to the detainee is increased. To avoid such dangers, escort staff will need comprehensive training in the eventual, approved restraint techniques.

Training and Monitoring

10. The training of escorts is necessary and critical to ensure the safety of detainees, escorts and when on an aircraft, the other passengers.
11. Responses argued that the current training, and training material provided to the escorts is unclear concerning medical issues, and was 'insufficient to equip them to successfully restrain an individual under the circumstances and environment' in which they find themselves.
12. Respondents noted that no restraint procedures should be tested for the first time in the confused and challenging circumstances of a real life situation. They should be learnt and tested via realistic simulation in genuinely representative environments. This includes an aircraft on the ground and/or aircraft cabin simulator, along with safe methods to board an aircraft with a non-compliant detainee. Training in a classroom using rows of ordinary seats must not be considered adequate escort training.
13. Some respondents noted that the current detainee escort officer refresher training is only required to take place once a year. One expert respondent noted:

<p>'an annual one day refresher course is unlikely to bring all of the required complex, specialist skills up to date.' ... the staff engaged in the specific actions involved in removals by air 'should be more highly trained ... than prison officers ... where backup and support together with medical assistance and advice are rapidly obtained.'</p>

14. Cultural awareness, rather than cultural stereotyping, should form part of an officer's training course. Inevitably, officers will on occasions encounter non-compliance, but their understanding should start from a high-point rather than risk any possible denigration of a detainee because of the detainee's adverse behaviours.
15. As to the monitoring of situations, some respondents considered that more extensive use of CCTV (and not just for planned removals) may help to reduce the risk of escalation as both detainee and staff will be aware that an objective record of their action is being maintained. Any CCTV should be operational in the escort vehicle and be supported by equipment that can operate outside of this. Sound recording should also be sufficient on board vehicles to capture all conversations.
16. Respondents generally agreed that, whenever a resisted removal is anticipated, then the full procedure (from start to finish and without gaps) should be recorded by video camera for the protection of both the detainee and the escorting staff. This will require liaison with aircraft staff and in some instances may be prohibited.
17. The Panel was urged that any techniques developed should be documented in detailed protocols which include photographs and/or diagrams of the approved technique.
18. Where there has been an incident requiring use of force, the highest level of independence must be evident when an officer writes up their report. Everything should be done to prevent collusion.

Mechanical restraints

19. A number of respondents raised the issue of a perceived over-reliance on the use of handcuffs.
20. Concerns were raised by some respondents regarding detainee safety during take-off (when all seats need to be in an upright position) and landing, especially if the brace position becomes necessary.
21. Respondents also argued that, if handcuffs are placed on a detainee, these must be applied to the front both for safety, and to minimise discomfort.
22. The Panel has been advised that, for particularly disruptive and/or violent removals, it may need to consider an enhanced level of mechanical restraint such as a waist restraint belt, forms of which are used for example in Sweden.

Detainee removals

23. Where faced with a 'difficult removal', an IRC instanced their approach which is centred on a multi-disciplinary, individual strategy meeting. This includes a member of the healthcare team to provide medical input. The IRC's aim is to achieve a successful handover to the overseas escorts and to minimise the risk of having to use force to achieve this.
24. The Panel was informed that in the USA policy requirements on cultural sensitivity include making certain that instructions and requirements are given to the detainee in a

language the detainee understands. Detainees who cannot read must be given verbal instructions.

25. In New Zealand, a risk assessment must be carried out for all custodial deportation cases ahead of determining the appropriate level of security escort requirements.
26. Respondents observed that a dedicated security area, or holding room at an airfield, can help to maintain a calmer atmosphere as it removes detainees from public gaze.
27. Respondents observed with concern that some detainees can be confined to the removal vehicle for over six hours. This can lead to heightened stress levels as they are first transported from the IRC and then must sit and watch as each detainee is removed one by one to the aircraft, noting that their turn is yet to come.

Detainee dignity/modesty

28. The use of the toilet facilities, including on an aircraft, remains an issue as officers are not permitted to allow the detainee to lock the door.
29. Concerns have been raised about detainees who remove all of their clothes by way of a protest; as a consequence, several respondents have questioned whether some form of disposable gown with fastenings could be provided for the flight to maintain a detainee's modesty.
30. On a scheduled flight, a flash point can arise when passengers take pictures of a detainee on their mobile phones. This can lead to detainee agitation and subsequent non-compliance.

Medical

31. A number of respondents have suggested that all escort staff should be medically trained, able to place an unresponsive person in the recovery position and, where necessary, able to carry out cardiopulmonary resuscitation (CPR) as required. If a situation arises on a scheduled flight, the escorting officers should know how to liaise with, and to seek, prompt medical help from the airline staff.
32. Concern was expressed by a number of respondents that the current escort officer training fails to focus and underscore the risk of positional asphyxia in *any* seated or splintered position (i.e. when the head is below the heart). Nor, it is argued, is a distinction made as to the difference in warning signs between the onset of positional asphyxia as opposed to excited delirium. Respondents therefore suggest that all staff should not only be taught about the possibility and danger of positional asphyxia, but should also be fully trained in assessing the risk and symptoms, and be capable of correctly applying their training when carrying out their duties.
33. One respondent claimed that medical escorts on charter flights are not all trained to the level suggested by their title, and was concerned that this may give escorting officers a false sense of security and confidence.

34. A number of respondents argued that mental health problems feature high on the list of detainee health complications. Assessment of such medical issues should be clearly diagnosed within the IRC setting and should then be noted on the PER. Escort officers should be warned concerning the signs for which they should monitor if a potentially vulnerable detainee's health deteriorates during the removal process.
35. Some respondents took the view that many of the signs and symptoms currently taught to escort officers are inappropriate as a warning as they relate to symptoms that occur too late for remedial action.

Liaison with detainees

36. Repeated mention was made that there should be better preparation with a detainee *prior* to the removal process to ensure a calm, successful procedure. The issue of detainees' misplaced belongings can often be the trigger for non-compliance, with the detainee being asked to sign that all their belongings have been safely handed over to the overseas escort team - when in fact items have been misplaced and are yet to be found. Incomplete paperwork and missing travel documents can also trigger disruptive behaviour.
37. It was stated that some UK detainees can become stressed when they realise that the flight has gone to a third, unexpected and unexplained country, fearing that they may be 'dumped' in the unknown destination. In such situations better detainee liaison before the flight could greatly ease tensions.

Conclusion

38. The Panel is grateful to all those organisations and individual experts who have replied to its call for evidence.
39. The Panel thanks all respondents for their replies and trusts that this summary gives assurance that their evidence has been fully documented and will help to inform and guide the Panel's work.

Annex 1: Respondents to the request for evidence

Immigration authorities in the following countries:
Australia
Belgium
Canada
New Zealand
Sweden
Switzerland
USA
Domestic contributions:
Citizens UK
Coventry University
Freedom from Torture
Gatwick Airport
GEO / Harmondsworth IRC
HM Inspectorate of Prisons
Immigration Law Practitioners' Association
IMB Secretariat and IMBs at several IRCs
Independent Chief Inspector of Borders and Immigration
Liberty
Medical Justice
Prisons and Probation Ombudsman for England and Wales
Youth Justice Board

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