



Home Office

Pre-departure accommodation operating standards

Version 1.0

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About this guidance

This guidance tells you the minimum operating standards that apply to the Home Office pre-departure accommodation (PDA).

Contacts

If you have any questions about the guidance and your line manager or senior caseworker cannot help you or you think that the guidance has factual errors then email Detention Policy team.

If you notice any formatting errors in this guidance (broken links, spelling mistakes and so on) or have any comments about the layout or navigability of the guidance then you can email the Guidance Rules and Forms team.

Clearance and publication

Below is information on when this version of the guidance was cleared:

- version **1.0**
- published for Home Office staff on **26 June 2017**

Changes from last version of this guidance

Full review of original pre-departure accommodation operating standards to reflect establishment of Tinsley House PDA.

Placed into template.

Related content

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Pre-departure accommodation: overview

This page tells you about the establishment of the Home Office pre-departure accommodation (PDA) in 2011, its relocation from Cedars to Tinsley House and the revision of the PDA operating standards to take account of this relocation.

In 2010 the coalition government committed to end the routine detention of children for immigration purposes. To support this commitment, in March 2011 the Home Office changed the way in which it deals with families with no lawful basis of stay in the UK by introducing a new family returns process. This process seeks to give families every opportunity to leave the country voluntarily and places the welfare of the child at its heart.

See: family returns process guidance for further details.

The family returns process is divided into three stages, they are:

- assisted return
- required return
- ensured return

The government was clear that once the assisted and required return stages had been exhausted and a family failed to leave the UK of their own accord, the Home Office would continue to take steps to make sure they depart. Where necessary, as a last resort to support the family's removal, this might include a short stay in a new type of facility known as pre-departure accommodation (PDA). The first PDA, Cedars in West Sussex, opened in August 2011.

The approach at the PDA is deliberately intended to allow families to stay together as far as possible, allowing them to lead as normal a family life as possible during a short stay. Security is kept to a minimum, consistent with the need to ensure a safe and secure environment. There is a particular focus on providing families with support to enable them to come to terms with their situation and prepare for their departure, keeping any emotional distress at having to leave the UK to a minimum.

It was made clear from the beginning that the length of stay at the PDA would be limited to a normal maximum of 72 hours prior to the family's planned removal date. There is provision for them to remain for up to 7 days in exceptional circumstances, subject to ministerial approval. They are also subject to advice from the Independent Family Returns Panel (IFRP). The status of PDA is protected in law by [section 147 of the Immigration and Asylum Act 1999](#) (as inserted by [section 6 of the Immigration Act 2014](#)).

The comparatively low level of use of Cedars in the years that the family returns process has been in operation demonstrates how successful it has been in encouraging families to leave the UK voluntarily. The former Prisons and Probation Ombudsman, Stephen Shaw CBE, in his independent review of detainee welfare,

published in January 2016, recommended on value for money grounds that Cedars should be closed, or its use changed.

Ministers have accepted this recommendation and have decided to close Cedars and relocate the PDA to a new discrete unit at Tinsley House immigration removal centre at Gatwick airport. This new facility will be operated in line with the statutory framework introduced by the Immigration Act 2014. This includes the time limits on stays and the requirement for advice from the IFRP to be sought in advance in all cases where it is proposed to place a family at there.

To coincide with the original opening of the PDA in 2011 the Home Office published a series of auditable operating standards setting out the vision for the new facility, including the nature of the accommodation provided, the welfare support available to families and recreational activities on offer. They set out minimum standards for the facility's operation, rather than specific requirements. Those original standards were drawn up with the specific nature of Cedars very much in mind. The decision to relocate the PDA therefore means that it has been necessary to review the original operating standards to take account of the new facility. We are taking the opportunity to publish those revised standards now.

The changes that have been made as a result of that review are largely points of detail, rather than substance, and reflect continuity of provision at the new facility, as compared with Cedars. Families will continue to be provided with their own accommodation suite in the new PDA, with a living area, bedrooms and bathroom. There will be a range of recreational facilities available. Families will still be able to make requests to leave the new facility for short periods of time to undertake recreational activities, subject to a prior risk assessment and the provision of suitable supervision arrangements.

There will continue to be a strong focus on providing families with support at the new facility to allow them to come to terms with their situation and prepare for their departure from the UK. The provision of pre-return welfare support to families will continue to be important in ensuring that the emotional distress they may face as a result of having to leave the country is kept to a minimum.

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Admissions process

Standard

To have in place a safe and well managed admissions process, recording essential information and treating residents throughout with respect and regard for their well being.

Minimum auditable requirements

The facility must have a statement of admissions policy approved by Home Office Immigration Enforcement that sets out the way families will be treated during the admissions process and how staff will behave during the admissions process.

Family members will not be accepted into the facility without written authority in the form of an IS91.

Reception staff must make sure that parents know where they are and the reason why they are there.

The admissions process will take place in a discrete admissions area and will be carried out as soon, and swiftly, as possible to make sure that families are settled into their accommodation suite with minimal delay.

If any new risk information about the family comes to light during the escort journey it must be recorded on the escort record. Where such new information comes to light, on arrival at the facility escort staff must share it with the staff carrying out the admissions process and confirm that it has been recorded on the escort form. Staff carrying out the admissions process must, in turn, notify staff responsible for the care of residents of any new risk information immediately.

If a resident arrives without any suitable clothing for their stay they must be provided with suitable clothing.

Adult family members must be spoken to by the member of staff undertaking the admissions process using an interpreter (if necessary by telephone) if their English is not of a sufficiently high standard so that they understand their rights and responsibilities. Children will not be asked to interpret as part of the admissions process.

On arrival at the facility each family member will be allowed to make one 5 minute telephone call to anywhere in the world. This telephone call will be paid for by Home Office Immigration Enforcement. If a resident is unable to get through to the telephone number they are attempting to call they will be permitted to make further attempts until they are able to do so.

The admissions area must be welcoming with access to facilities suitable for the needs of residents. This must include toilets and baby changing facilities. Age appropriate snacks and drinks (including a range of baby milk and baby food) and other refreshments will be available during the admissions process. In addition, there

will be a range of age appropriate activities to occupy children during the admissions process and access to a small children's play area.

On completion of the admissions process a hot meal will be offered to adults and children unless a scheduled meal is due within 2 hours, when alternative healthy snacks will be provided.

All family members will be searched on arrival. Adult family members will undergo a pat down search by staff who have undergone the appropriate training. Children will be searched by asking them to walk through a security portal, followed by the use of a security wand in the event of the portal alarm being activated.

A list of prohibited items which families may not bring into the facility will be displayed in the admissions area. This list will be limited to items which it is necessary to prohibit in the interests of the security of the facility or the safety of any person. The list of prohibited items will also be displayed in pictures so that it is accessible to family members with limited English.

Staff responsible for undertaking the admissions process must gather core information in relation to all family members for record keeping purposes and to facilitate identification of individuals. This must include names, dates of birth, height, any distinguishing features and photographs. Information about next of kin must also be gathered. Information about family members or their next of kin must not be given to any other person unless that individual is authorised to receive it.

All residents must be medically screened by a nurse within 2 hours of their admission, including an assessment of their risk of self-harm or suicidal behaviour, with their consent. Screening of children must include recording their weight and height. Babies must be weighed using baby scales. Residents must be offered a follow up appointment with a GP within 24 hours.

Staff must be trained to recognise behaviour and signs that indicate anxiety, distress or risk of self-harm in adults and children. Information about those showing signs of vulnerability must be recorded and passed to the health care team and others responsible for the care of residents.

Following conclusion of the initial reception process, a 'welcome meeting' will be held in the family's accommodation suite as soon as possible, provided the family arrives during the day. Welcome meetings will be carried out in a language understood by the family, using telephone interpreting services where necessary. During this meeting staff will provide the family with information about the facility, details of activities available and times for these and the support services available during their stay. The family will be provided with written information including a map which shows important areas of the facility. A 'child friendly' version of this information must also be provided. Information provided to families on arrival will be translated where necessary.

In those exceptional circumstances where a family arrive at the facility late at night, staff will provide them with basic information on admission. A full 'welcome meeting' will be held for them on the following day.

There will be a pack of toiletries provided in the family's accommodation suite to meet their immediate needs. This must include a comb, toothbrushes and toothpaste, soap, deodorant, shampoo, and sanitary protection. Where toiletries require replacing, additional items will be provided for the family when requested. Razors, nappies, milk and baby food must be available on request.

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Residents' cash and property

Standard

To operate a system which provides for residents to retain their own cash and property, alongside a system for safeguarding residents' larger items of property on request and recording receipt, possession and storage of that property, where requested to do so by residents.

Minimum auditable requirements

On arrival residents must be advised that they should retain their cash and smaller valuables in their accommodation suite. They must also be advised that, if they would prefer, larger valuables may be retained in storage for safe keeping.

If a family arrives with a large number of small valuables which they are unable to store safely in their accommodation suite, exceptionally, arrangements may be made for some or all of those items to be placed in storage.

Residents may not retain property in their accommodation suite where it would be contrary to the interests of safety and security or is incompatible with the personal storage facilities provided in the accommodation suite or it is a prohibited item.

Families will be provided with a small safe in their accommodation suite where their cash and small valuables can be kept. Residents must be advised that they are responsible for safeguarding their property and money held in their own accommodation suite. Posters will also be displayed around the facility to inform residents about their responsibility for this.

Where residents decide to keep larger valuables in their own possession they will be required to sign a disclaimer acknowledging their responsibility for that property. Where a resident declines to do so this must be recorded, together with the reasons for their refusal. A second member of staff must be asked to confirm this action by noting the record to this effect.

If it is agreed that a family will be allowed to leave any valuables in storage for safe keeping, they will be checked and recorded by reception staff in the presence of one of the adult family members. A second member of staff must be asked to confirm the action by noting the record to this effect. Residents will be asked to agree the record and sign to this effect. If a resident refuses to comply with such requests this must be recorded.

All residents, including children, will be given access to their property placed in storage as soon as possible after making a request to do so and within a maximum of one hour. Residents will have access to property placed in storage 24 hours a day.

Parents must be advised that they are responsible for any valuables their children retain in their own possession.

If a child's property retained in storage has been packed separately from that of their parents that property must be registered separately to that of the rest of the family so that the child can access it without the entire family's property having to be brought out of storage.

Stored property will be returned to the family on their departure from the facility.

Any property which a resident leaves behind when they depart the facility which remains unclaimed for a period of 28 days may be sold or disposed of. Records must be kept to indicate what action was taken with regard to such property and, if it is sold, details of any proceeds must also be recorded.

Proceeds from any sale of residents' unclaimed property must be used for the welfare of residents. Records relating to purchases (including costs) must be kept.

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Equality and diversity

Standard

To make sure that policies and practices are in place to tackle and eliminate discrimination on the part of staff, residents or any visitor to the facility and to promote equality and diversity in line with the [Equality Act 2010](#).

Minimum auditable requirements

The facility will be operated in accordance with the Equality Act 2010 duties. The acts duties cover the 'protected characteristics' of:

- age
- disability
- gender reassignment
- pregnancy and maternity
- race
- religion or belief
- sex and sexual orientation

In accordance with the public sector Equality Duty the facility will have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited by the act to advance equality of opportunity and foster good relations.

An Equality and Diversity officer must be appointed to assist in the process of monitoring complaints on equality and diversity other than those being dealt with by the Home Office Professional Standards Unit and to provide recommendations for action by the facility's manager.

Records must be kept of the training the Equality and Diversity officer has received and when it took place.

The Equality and Diversity officer will be responsible for developing a programme of training for all staff in equality and diversity matters and will maintain a record of those staff who have received such training. All staff must have refresher training annually.

An Equality and Diversity Committee (EDC) will be set up in the facility which will monitor and evaluate procedures and practices on equality and diversity issues. This committee should consist of senior members of staff of all partner organisations involved in the facility's operation, including healthcare, and those responsible for the provision of welfare support.

Members of the EDC must include as a minimum the facility's manager, the religious affairs manager, the catering manager and the Equality and Diversity officer.

A member of the Independent Monitoring Board must be invited to attend meetings of the EDC.

Information on policy and practice relating to equality and diversity must be made readily available to staff, residents and visitors to the facility.

A copy of the Home Office equal opportunities statement must be displayed in prominent places around the facility so that it is readily accessible to staff, residents and all others who visit the accommodation. A copy of the Home Office diversity strategy will be made available for residents in a variety of languages and made available in a format that children under 12 years old will understand.

A report on equality and diversity at the facility must be submitted to the Home Office Immigration Enforcement manager on an annual basis, and additionally as required.

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Pre-return welfare support

Standard

To make sure families are provided with advice and counselling, as necessary, to help them prepare for their return, and to deal with any distress caused by their impending departure from the UK.

Minimum auditable standard

Families will be treated with respect and dignity throughout their stay in the facility. Staff will carry out their duties with regard to the need to safeguard and promote the welfare of children, as required by [section 55 of the Borders, Citizenship and Immigration Act 2009](#).

The welfare of children will be promoted and safeguarded during a family's stay at the facility, with their interests being at the heart of all services provided.

Families will be allocated at least one 'key worker' before, or at the time of admission to the facility. In allocating key workers account will be taken of any specific needs of the family including issues of culture, race, gender, skills, interests and experience as well as staff availability. Key workers must be trained in child and adolescent development and therapies which will help them come to terms with the consequences of their impending removal from the country.

Key workers will oversee the admissions process and make sure it is welcoming to the family and provides them with appropriate information and support, including how to access facilities and services. Key workers will also make sure that a support plan has been drawn up for the family's stay at the facility which takes account of their specific needs. The family will be invited to contribute to this support plan. The role of key workers does not include the provision of advice or information to the family about their legal position, though they may advise families how to access legal advice if necessary.

Following admission, key workers will organise an initial welcome meeting with the family as soon as possible. At this meeting the family will be provided with information about the services, activities and facilities available to them during their stay. Information will also be gathered about the family's background, health and contacts such as other family members and friends.

Children's safety and emotional well-being will be monitored throughout their stay at the facility by staff trained in child development, attachment, child protection, identity, separation and loss specifically for children and adolescents.

During a family's stay in the facility best efforts will be made by the 'key worker' to put them in contact with support organisations in their destination country.

Throughout the family's stay in the facility the key workers will support families to cope with any emotional difficulties and problems they may be experiencing.

Parental consent for any counselling discussions with a child, which takes place without at least one parent being present, will be a matter for the professional judgement of the 'key worker' concerned, in line with professional best practice.

In the case of any family released back into the community, the provision of welfare support will include signposting them to services or organisations which may be able to offer them support or assistance with any aspect of their return to the community.

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Religion

Standard

To make sure that residents' religious and spiritual needs are met as far as possible and make sure that facilities are available for prayer, religious services and for their pastoral care.

Minimum auditable requirements

Provision will be made for a multi-faith room for use by residents, which has the flexibility to meet residents' diverse religious and spiritual needs. It must be equipped with a range of religious books from the major world faiths.

A member of staff will be appointed to have responsibility for the management of religious affairs at the facility, in conjunction with other duties. They will meet with each family during the first 24 hours following their admission to the facility to establish their faith needs and to offer pastoral care. If the family wish a minister of their religion to visit this will be arranged for the following day, at the latest. Further meetings, services or prayer times will be arranged from that point onward, according to the needs of the family. If the family does not require religious support, ongoing pastoral support will be provided through the on-site manager of religious affairs (chaplain).

The religion to which a resident belongs must be recorded, if the resident wants it to be, and the relevant religious minister informed.

Where a resident makes a specific request to see their minister of religion outside of any scheduled meetings, services or prayer times, steps must be taken to notify the relevant minister within 4 hours of that request and notification details recorded. If such a request is made at night, arrangements will be made to notify the relevant minister the following morning, as soon as possible.

Ministers of religion at the facility must be able to tend to the interests of children at the facility, as well as adults, and will receive training on safeguarding and child protection which is refreshed annually.

The facility must publish a calendar of religious festivals and observances from the major world religions so that recognition is given to those events and families are able to observe such events.

Where a family member is displaying disruptive behaviour and has been removed from the company of other members of the family the manager of religious affairs must be advised without delay so they can make arrangements for the relevant minister of religion to visit the individual where possible.

Where possible a minister of religion must visit all residents of their religion who are admitted to hospital.

The manager of religious affairs, members of the multi-faith team and the facility manager must agree arrangements for ministers of religion to conduct services for

residents of their religion, to meet the needs of residents and enable them to celebrate religious festivals, where possible.

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Interpreters and translation facilities

Standard

To take account of the needs of residents in the use of interpreters to ensure they are provided with information in a language they understand.

Minimum auditable requirements

The Compact, setting out residents' rights and responsibilities, must be made available to residents, along with the pre-departure accommodation operating standards in a range of different languages. The Compact, will be provided as part of the welcome pack provided on arrival.

Where it is not possible to provide a translated copy of these documents steps must be taken to identify someone who can translate the document in a language that the resident understands. Another resident or a member of staff can be asked to provide this service. If there is nobody available able to do so, the services of a telephone interpreter will be sought.

Details must be kept of official interpreters who can be called upon if needed to make sure that clear communication can take place.

In line with Detention Services Order (DSO) 06/2013: Reception, induction and discharge checklist and supplementary guidance, professional interpreting (including telephone interpreting) must be used during a family's reception to the facility where an initial assessment suggests their proficiency in English is not sufficiently strong. A further assessment of the family's proficiency in English will also be undertaken during the induction process. Where it is determined that the family has an insufficient knowledge of English every effort must be made to conduct the induction using professional interpreting (including telephone interpreting) in a language that the family understands. IT-based translation must not be used during reception or induction processes.

After admission to the facility residents whose command of English is considered not sufficiently strong must be offered access to a professional interpreter (either face-to-face or telephone interviewing) in sensitive circumstances or where accuracy is essential, such as during healthcare appointments or welfare interviews. This is regardless of the willingness of other residents to interpret for one another. IT-based translation must only be used in very exceptional circumstances and not in sensitive circumstances or where accuracy is essential.

After admission to the facility the use of other adult residents, visitors or staff to interpret is allowed during day-to-day routine interactions.

Following admission to the facility children will only be asked to interpret for their parents in very exceptional circumstances which must be limited to day-to-day, routine interactions only. A child must only be used to interpret if requested by their parents, they are of an age to understand the information being communicated and after the impact on them of being asked to translate has been considered.

In relation to healthcare matters, where a resident with a satisfactory command of English makes a specific request for the services of a professional interpreter attempts must be made to secure one (either face-to-face or telephone based interpretation).

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Suicide and self harm prevention

Standard

All staff working with residents will identify and provide care and support to those who may be at risk of suicide or self harm.

Minimum auditable requirements

The facility must have a policy approved by Home Office Immigration Enforcement that sets out the way that those at risk of suicide and self harm will be managed. This policy will be referred to as the Action Casework Resident Teamwork (ACRT) policy.

Identification

All staff must make checks prior to a family's arrival at the facility for any issues surrounding suicidal or self harming behaviour of individual family members.

All family members will be appropriately assessed for risk of self-harm or suicidal behaviour, by a qualified healthcare professional within 2 hours of their admission, as part of the initial reception medical screening. Residents are required to give their consent to this screening.

All staff must be alert to the risk of self-harm or suicidal behaviour by residents throughout their stay.

All staff must be trained in the agreed identification and management of suicide and self-harm procedures, which will include information on recognising those who may be at risk of suicide or self-harm. Staff must in particular make sure they are familiar with recognising children at risk.

Prevention

All staff must receive suicide awareness training refreshed at least every 3 years. Details of staff training and when it was delivered must be recorded.

Notices must be displayed to visitors and residents in relevant languages setting out that where they have concerns about a resident they should bring this to the attention of a member of staff.

A Safe Stay Committee (SSC) must be in place chaired by the facility's manager or another senior manager. Where the chair is not the facility's manager they are required to report directly to the facility's manager. There must be a member of the SSC whose role is to represent the interests of children at the facility in particular.

The SSC's terms of reference must include a requirement to meet monthly. The SSC must invite a member of the Independent Monitoring Board to attend.

Nominated staff must be issued with an anti-ligature knife and carry it with them at all times in order to prevent the suicide of a resident.

Response

All incidents of actual self-harm or use of self-harm procedures must be recorded by staff and reviewed by the SSC to assist with the management of individual residents at risk.

Care plans must be developed for those individuals identified to be at risk of suicide or self-harm.

Measures must be established to make sure there is active engagement with residents rather than passive monitoring in the event of a resident attempting suicide or self-harm.

Staff must call for urgent medical assistance in the event of a resident attempting suicide or self-harm.

Where a resident is refusing food or fluid the procedures outlined in current Home Office guidance must be followed.

All staff must be trained in the provision of emergency first aid in the event of self-harm or attempted suicide. Refresher training must be undertaken in line with required timescales.

Emergency first aid kits must be accessible and appropriately maintained.

Where a child is engaged in self-harm or believed to be at risk of attempting to self-harm, as well as following the ACRT procedures, the safeguarding referral processes must be followed as set out in the facility's safeguarding policy, including making a referral to local authority children's services.

Where there is a case of attempted suicide or self-harm by any family member, there must be arrangements in place to care for the needs of the other family members in the facility. If a single parent self-harms and needs to be taken to hospital, arrangements will be made for their child or children to be cared for until they are able to return to the facility. This includes making a referral to local authority children's services as soon as possible and without delay.

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Accommodation suites

Standard

Accommodation suites must be adequate for the needs of both adults and children and be certified accordingly.

Minimum auditable requirements

Accommodation suites must be adequate and safe for all residents and meet the needs of both adults and children.

No room must be used as family accommodation unless Home Office Immigration Enforcement has certified in writing that its size, lighting, heating, ventilation and fittings are adequate for the maintenance of health and safety.

Living accommodation must not exceed the occupation level certified by Home Office Immigration Enforcement except under exceptional circumstances and, even then, for the shortest possible time.

Families must be provided with the means to lock their accommodation suite, though there will also be provision for staff to enter a family's accommodation in an emergency situation.

Each accommodation suite must be self contained and consist of as a minimum:

- a sofa
- table
- chairs
- a television
- an adequate number of beds, and cots where necessary, for the family occupying the suite
- a bathroom with shower

An intercom system must be provided to enable residents to contact a member of staff at any time. This must be checked on a daily basis and records kept to this effect.

On a family's arrival their accommodation suite will contain a basic food pack and facilities for making hot drinks.

Each accommodation suite will contain a safe to allow families within reasonable limits to retain their own smaller valuables safely during their stay at the facility.

Windows in accommodation suites will have curtains or blinds.

Furniture to facilitate breast feeding by nursing mothers (for example a suitable chair and cushions) will be provided as necessary, as will cleaning and sterilising equipment for bottle feeding mothers. Where necessary, baby changing will also be provided in accommodation suites.

Bathrooms in accommodation suites will consist of a shower, sink, toilet, mirror, towel rail and towels.

Each bedroom will contain sufficient beds for the number of occupants, along with a bedside light, bedside table and curtains. Beds must be of adequate size and quality. Cots and bed guards will be provided as necessary.

Pre-occupation and change of occupation checks must be carried out to make sure the cleanliness of the accommodation suite meets requirements and to check the availability of facilities/ equipment.

Accommodation suites will have natural light and contain adequate and safe heating and ventilation systems which are in good working order.

Each accommodation suite will have a smoke detector which will be tested at least once every quarter.

Where accommodation fails to meet the terms of its certificate it may not be used. Wherever possible, this must be rectified within 24 hours.

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Disabled residents

Standard

To make sure that appropriate provision will be made for residents with physical or mental disabilities, or other special needs, and that they are able, as far as possible, to participate in activities at the facility or in its outdoor space. There will also be provision made, as far as possible, for them to take part in recreational activities outside the facility and its outdoor space.

Minimum auditable requirements

Families with a disabled family member must be provided with an accommodation suite which meets their particular needs as far as possible.

Procedures must be in place to prevent discrimination against residents on the grounds of disability.

Preparations must be made as far as possible for the arrival of any disabled resident, where information about their disability is known prior to arrival.

Arrangements must be made for an assessment of residents' needs on arrival. A record detailing specific communication and mobility needs of disabled residents must be kept.

Auxiliary aids or services as available in the community will be provided as far as possible so that disabled residents are able to make use of the accommodation's facilities.

Appropriate services must be provided for residents who have a hearing or vision impairment, or who are blind.

Residents with disabilities must have access to activities and all other facilities in the accommodation as far as possible, with reasonable adjustments made where necessary. Residents with disabilities will have access to activities outside the facility and its grounds as far as possible, with reasonable adjustments made where necessary.

There must be a system for monitoring the number of disabled residents who are unable to participate in activities by reason of their disability. A record must be kept of occasions where disabled residents have been unable to access activities, with a view to making improvements.

Where required, information provided to residents on arrival at the facility will be communicated in a format that is accessible to those with physical, sensory or other significant needs affecting their ability to communicate.

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Catering

Standard

Residents will be provided with a varied and healthy menu and, where appropriate, be given the option of cooking for themselves, for which ingredients will be provided. Provision of food will take account of religious, cultural and medical needs, whilst complying with food safety legislation.

Minimum auditable requirements

There will be a system in place for families to pre-order prepared main meals each day provided either in their accommodation suite or in the facility's communal dining area.

Alternatively, families will be able to pre-order ingredients, including culturally appropriate ones, every day to enable them to cook in the communal kitchen of the facility if they would prefer. A variety of standard ingredients will be made available, though the operator will source other ingredients as far as reasonably possible.

Home Office Immigration Enforcement will set a cap on the cost of ingredients for families wishing to cook for themselves. This amount will be reviewed each year.

Food stock will be varied to enable families to cook special meals during religious festivals.

Families will not have to pay either for pre-ordered meals, or for cooking ingredients within given limits.

Meals provided must be nutritious, varied, culturally appropriate, good quality and meet the dietary needs of children and young people. Meals will take account of dietary and religious needs and will therefore include vegetarian and halal options. There must be the option of at least one hot meal each day.

A multi-choice menu must be provided with a choice of at least two main courses as part of residents' main meals each day.

The menu will include options for children with choices which reflect current government guidance on healthy eating for children and young people.

Arrangements must be made to make sure that the food supply (including monitoring of deliveries), storage arrangements and other processes and practices comply with relevant food safety legislation.

There must be a fully documented Hazards Analysis and Critical Control Points (HACCP) system in place showing daily monitoring of time and temperature controls in operation.

There must be a mechanism for residents to provide their views on food provided in the facility. Concerns about the standard of food provided must be addressed promptly by the facility's manager where they are found to be well founded.

The manager of religious affairs must be consulted to make sure the dietary needs of residents during special occasions of religious observance are met.

The healthcare team must be consulted to make sure that any resident's special dietary needs on grounds of health are met.

Families are able to order meals when they wish, and as often as they wish, throughout their stay. Residents will also have the option of being able to cook simple meals for themselves in the communal kitchen of the facility if they wish.

A range of free healthy snacks and drinks must be available at all times to children and adults in the facility. A full range of approved ready made and powdered baby milk and ready made baby food must be available at all times.

There must be arrangements to provide meals for new arrivals at the accommodation.

Families being discharged from the facility will be provided with a proper meal before their departure. They will also be provided with snacks for their journey.

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Recreational activities

Standard

There must be provision for residents to have access to a range of age-appropriate recreational activities in the facility and its outside space. Residents will also be permitted to undertake recreational activities away from the facility subject to a risk assessment.

Minimum auditable requirements

There will be a range of activities provided both within the facility and its outside space which families will be able to utilise.

There will also be a daily programme of age-appropriate structured activities for families provided in the facility. The range of activities will be tailored to the needs of children and families, taking account of their individual choices, needs, ages and abilities. Residents will have access to all communal areas within the facility, unless access has to be restricted in the interest of safety or security.

Information must be displayed about the recreational activities available in languages reflecting the diverse nature of the resident population.

Residents must be invited to offer suggestions about what other recreational activities might be made available.

The provision of recreational facilities must be reviewed on a regular basis to determine their appropriateness.

The facility will contain a communal lounge area where families can mix with one another if they wish to do so.

There will be a children's play area inside the facility equipped with a range of age-appropriate toys and provision made for other age appropriate activities. Separate age-appropriate recreational facilities will also be provided for older children and teenagers.

Residents will have access to a range of books, audio books and electronic reading material suitable for both adults and children. Books must be kept in good condition and replaced when necessary. Books, audio books and electronic reading material must be appropriate in terms of equality and diversity, including race, gender and disability. They must also be provided in a range of languages reflecting the diverse resident population.

Daily newspapers and magazines in the principal languages spoken by residents of the facility, including children's magazines will also be made available. A range of DVDs will also be provided.

Details about religious services, facilities and events available to residents and about befriending groups must also be on display within the facility.

Appropriate footwear and clothing must be provided for physical activities if residents do not possess suitable clothing or footwear.

Residents must be provided with the option of physical activities appropriate to their needs and interests, where possible.

Residents will have full access to the facility's outside space from dawn to dusk. A quiet period operates from 11.30pm to 6.30am when residents are encouraged to be in their accommodation suites. Residents will be allowed the opportunity to spend time in the open air outside of this quiet period.

An external play area will be provided for children with a range of age and development appropriate play equipment, including free standing items that can be interchanged.

There will be provision for families to undertake activities away from the facility in line with the relevant Detention Services Order (DSO) on temporary absence.

Home Office Immigration Enforcement may provide, at its own discretion, a small amount of pocket money for children undertaking recreational activities outside the facility. The amount of pocket money provided will depend on the activity being undertaken.

Families and children leaving the facility will be accompanied by a member of staff at all times for the duration of the period of temporary absence.

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Hygiene

Standard

Residents must be provided with living and recreational facilities that are clean and hygienic.

Minimum auditable requirements

Families must be provided with a newly-cleaned accommodation suite on arrival, equipped with clean towels and bed linen which are sufficient for the number of family members. The accommodation suite must be cleaned again when the family departs.

The family must be provided with the necessary equipment, on request, to allow them to keep their accommodation suite clean during their stay. Families will also have access to a washing machine and a tumble drier in the kitchen area.

Arrangements must be made for regular cleaning of the communal areas of the facility.

Toilet and washing facilities must be provided for staff and visitors sufficient to comply with the requirements of [The Workplace \(Health, Safety and Welfare\) Regulations 1992](#). This includes facilitating baby-changing in accommodation suites and the visiting areas.

There must be a system in place for monitoring the cleaning service in the facility to make sure that a good standard is maintained.

There must be infection control processes in place, including the provision of gel dispensers.

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Keeping residents informed

Standard

To keep residents informed, including in relation to preparations for their return.

Minimum auditable requirements

All family members will meet with a member of the Home Office Immigration Enforcement team within 4 hours of their arrival, including during weekends. Where their arrival is during the night, they will be seen as soon as possible during office hours. A check will be made that the family understands where they are, why they have been brought to the facility and the arrangements in place for their return.

Adult family members will be met again before their planned removal to confirm the arrangements for their return.

Throughout their stay in the facility, residents will be kept informed about arrangements for their return. This includes, but is not limited to:

- the provision of information about when they will be leaving the facility
- arrangements for returning any retained items
- arrangements for their journey to the airport
- what will happen at boarding
- what will happen to the family on arrival at their destination
- possible sources of support at their destination

There must be systems in place for residents to make a request to see a member of the local Home Office Immigration Enforcement team. Where such requests are made, residents must be seen within 4 hours of their request during normal office hours.

Home Office Immigration Enforcement staff at the facility must make every effort to answer questions raised by the family relating to their immigration case or the arrangements for their departure from the UK. Details of such requests, the action taken by the Home Office Immigration Enforcement staff and when the required information was given to the resident must be recorded on residents' files.

Where a resident asks for information to be forwarded to their Home Office caseworker, this must be relayed within 2 hours of receiving the request during normal office hours.

The facility must hold copies of extant immigration acts and the pre-departure accommodation operating standards for residents to consult. Books on immigration law must also be provided. Current Home Office country information reports must also be made available to residents, if requested.

On arrival at the facility residents will be informed about the Independent Monitoring Board (IMB) and their attention drawn to information about the IMB and how to request a meeting with an IMB representative.

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Access to legal services

Standard

To make sure that residents are aware of their right to legal representation and have access to it.

Minimum auditable requirements

Residents must be advised during their induction meeting with Home Office staff of their right to legal representation, and how they can obtain such representation. They must be reminded of their right to legal representation at intervals throughout their stay at the facility.

Where residents have legal representation, details of the representative must be placed on the residents' record.

Where families do not have legal representation, they will be advised during the welcome meeting of the services of the Detention Duty Advice Scheme operated under the Legal Aid Agency contract and invited to seek their advice through a telephone consultation.

A list of legal representatives must be maintained and made available to residents. It must be made clear that it is a matter for residents themselves as to whom they wish to appoint. This list should be updated on a monthly basis.

Leaflets on accessing legal advice from legal advisers regulated by the Office of the Immigration Services Commissioner (OISC) and the Solicitors' Regulation Authority (SRA) must be made available to residents, as well as leaflets produced by the Legal Aid Agency.

The OISC complaint leaflet must be made available to residents, as well as information about complaint services provided by the Legal Ombudsman.

Information about those advisers authorised by OISC must be available in the library and made available to residents on request. Staff can obtain this information from the [OISC's website](#).

Residents who cannot read or write must receive assistance from staff in obtaining legal representation. Residents whose English is not of a sufficiently high standard must also receive such assistance, if necessary using an interpreter (face-to-face or telephone translation).

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Communications: correspondence, telephone calls and internet access

Standard

Residents must be permitted to maintain contact with family, friends and others using the post, fax, telephone and the internet.

Minimum auditable requirements

Correspondence

Where residents are not able to meet the cost of writing materials or postage, arrangements must be in place for them to be able to write to family and friends within reasonable limits.

Reasonable steps must be taken to provide residents with access to writing materials, fax and photocopying facilities for the purpose of pursuing their case.

There must be arrangements in place for making sure that incoming faxes are delivered to recipients as soon as possible but within a 2 hour maximum. When the message is marked urgent it will be delivered immediately.

There must be a system in place for collecting outgoing mail at least once daily from Monday to Saturday.

Residents will not be permitted to keep any items sent to them which are prohibited. Where the items are not ones which the resident is permitted to keep in their personal possession, they will be advised of the reason for this and informed that the items will be placed with any property held in storage. The resident must be given a receipt for the property. A record must be kept.

Prohibited items sent to the family during their stay at the facility will be returned on the family's departure, with the exception of illegal items.

Access to the internet and email

Mobile devices will be provided to ensure families have restricted access to the internet. Access will be provided subject to families signing up to the facility's code of conduct for internet use.

Internet usage will be monitored discreetly to ensure that inappropriate sites are not accessed. The facility manager will manage a screening system to bar inappropriate sites.

Children may use the internet but parents are responsible for monitoring their child's usage. Where the internet is being used as part of an organised activity staff will monitor children's use of the internet.

Telephones

Families will be permitted free calls to their legal adviser.

Each family member, including children, will be offered a free 5 minute telephone call to anywhere in the world on arrival at the facility. If the family has any subsequent need to make any further free calls, this will be at the discretion of members of staff, subject to an assessment of the family's financial circumstances.

Families will have unlimited access to incoming telephone calls during their stay. If the resident for whom an incoming call is intended is not available, a message will be taken and passed on to the individual promptly. Families will have access to free outgoing calls for official purposes, for example, to allow them to contact their legal adviser.

In line with existing guidance, residents, including children, will be allowed to retain their personal mobile telephones, except those mobile telephones with cameras, recording or internet facilities.

Families without a mobile telephone will be provided with a mobile telephone during their stay at the facility to allow them to make and receive private telephone calls. Children may also be issued with a mobile telephone provided their parents consent and accept responsibility for their child's use of the mobile telephone. Residents will be issued with a £5 phone card with every mobile phone provided. They will also be able to purchase additional top up phone cards, if needed, and will be advised of this when given their mobile telephone.

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Visits: social, legal and official

Standard

Residents must be allowed to maintain contact with family, friends and others during their stay in the facility.

Minimum auditable requirements

Family members must be given the opportunity to receive daily visits, which should be booked in advance, wherever possible. Every attempt will be made to be flexible in arranging visits for those families expected to be at the facility for very short periods of time.

Visiting hours will be between 9am and 9pm, every day. Lengths of visits will be unlimited but may be restricted during busy periods.

Where a family is being removed on a particular day, and this is to take place during the course of the visiting period, reasonable steps must be taken to facilitate visits where possible.

Where requests for visits out of hours are made by legal representatives or officials, attempts must be made to accommodate these.

There will be separate arrangements for booking legal visits from those which exist for social visits. Arrangements must be in place for legal visits to take place in private.

Refreshment facilities, which may be charged, must be provided for the family and friends of residents during their visit.

There must be play facilities provided for children visiting the facility.

An accurate and up-to-date record of all visitors to the facility, including children, must be maintained. The record must include their home address and proof of identity required for admission to the facility as set out in Detention Services Order 04/2012: Visitors and visiting procedures. Such records will be disposed of 12 months after the last visit.

All visitors will be searched on arrival with sensitivity and in line with current guidance. Where a visitor is refused access (for example, because they refuse to comply with search procedures) this must be recorded and the reasons for such a decision explained. Details of this kind will be retained for a minimum of 12 months.

Social visitors will not be permitted to bring mobile telephones into the facility.

Up-to-date lists of local befriending groups and contact details for the Independent Monitoring Board (IMB) and local support groups must be maintained and residents must be made aware of their services.

The welfare of any visiting children must be promoted by making sure that adults accompanying visiting children are aware of their responsibility for the child and that staff are alert to identifying and escalating any safeguarding issues.

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Removing individuals from the company of others

Standard

Removing adult family members from the company of other residents must achieve the correct balance between the need to maintain safety and security and the need to show regard for the dignity of the individual.

Minimum auditable requirements

In the interests of safety or security, where an adult resident is behaving in a violent or unruly manner, consideration will be given to placing them in accommodation within the facility separate from other residents. This also applies where there are clear and verifiable indications that an incident of harm to an individual has occurred, or will occur. It must only happen as a last resort and where other options for managing the individual's behaviour have been exhausted. In no circumstances will a resident be moved to accommodation separate from other residents as a punishment.

Removing an adult from the company of other residents is intended to be exceptional and for the minimum time possible. In no circumstances can an initial authorisation be for a period beyond 24 hours. Other than in cases of urgency, removal for an initial 24 hour period must be authorised in advance by a manager from the Home Office Immigration Enforcement (HOIE) team (executive officer or above). In cases of urgency, and if the circumstances are such that it is impractical to seek the required authority in advance, the facility manager can take the emergency decision and the authority is considered to begin at that point. When this happens, the HOIE manager must be notified immediately.

Authorisation for moving a resident to accommodation separate from other residents must be noted by the individual responsible for the authorisation. Every authority must be reviewed on a daily basis by the HOIE manager for as long as the individual remains separated from other residents.

Adult residents removed from the company of other residents should be moved to an area of the facility where access for other residents will be restricted.

Removing an adult resident from the company of other residents must only take place when all other attempts to calm the situation have failed. All such incidents must be recorded.

Where an adult is moved to accommodation away from other residents they will be monitored at least every hour by a member of staff to consider whether there is still a need for them to remain separate from others. A record of all such observations must be maintained. Efforts must also be made to engage with the individual to minimise the time spent separate from other residents.

Adults who are moved to accommodation away from other residents must be provided with written reasons for the decision within 2 hours of it being made. The

individual must also be provided with a verbal explanation for the decision, using a telephone translation service if necessary. If a detainee asks for this to be sent to their legal representative this must be done as soon as possible by email or fax. Where an individual is removed from the company of other residents beyond the initial 24 hour period the resident must also be provided with reasons.

Authorisation for removing an adult resident to accommodation away from other residents beyond 24 hours must be given by the Home Office Immigration Enforcement Manager. If the authority is given by a manager below senior executive officer (SEO) grade it must be reviewed by a manager of at least SEO grade as soon as possible and within 24 hours, or the first working day if it is a weekend.

Children must not be moved to accommodation in the facility away from other family members at any time.

Where consideration is being given to removing an adult resident from the company of others within the facility, and the resident may be at risk of self-harm or suicide, this must only take place where their behaviour is severe and likely to cause harm to others. It should only take place in exceptional circumstances, as a last resort and for the shortest time possible. In such cases the individual must be monitored at least once every 15 minutes.

Any adult resident who is removed from the company of others will continue to have access to recreational activities, with the exception of those which involve mixing with other residents. They will continue to have access to mobile phones for the duration of their time separate from other residents, unless there are grounds to believe they will use it to cause harm to themselves or another person. Where this happens the individual must continue to be able to speak to their legal representative.

Removing individuals from the company of other residents may take place at the individual's own request where they feel vulnerable for any reason, at the discretion of the manager of the facility. The HOIE manager must be notified without delay.

A representative of the Independent Monitoring Board (IMB), the healthcare manager, the manager of religious affairs and the family's key workers must be notified without delay when a resident is removed from the company of others and a record kept to this effect. The HOIE immigration removal centre manager and supplier manager must be notified no later than 2 hours after the resident has been moved from the company of others.

The healthcare manager, manager of religious affairs, HOIE manager and supplier manager and the family's key workers must visit and speak to any resident removed from the company of others at least on a daily basis. An IMB representative must also be invited to visit within the initial 24 hours and thereafter during their routine visits to the facility. The purpose of such visits is to determine that the individual is being treated with dignity and decency, and assess the behaviour and attitude of the resident.

A resident must be returned to the company of other residents as soon as the behaviour which resulted in them being separated from others has stopped.

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Complaints procedures

Standard

The investigation of complaints made by residents, including children, must be timely, thorough, fair and just.

Minimum auditable requirements

All residents, including children, must be able to raise a complaint or grievance and have it considered seriously. Complaints will be dealt with in a timely, thorough, fair and just way.

Residents, including children, must be made aware of the procedures for making complaints and requests during their initial welcome meeting on arrival.

Information about the complaint and requests process must be displayed around the facility and in languages and styles reflecting the make up of the residents.

A locally established 'child friendly' complaints system must operate in the facility which children can understand how to access. There will be an additional mechanism for obtaining feedback from children on facilities in the accommodation and ensuring that this feedback is documented and acted upon.

There must be procedures in place for recording:

- comprehensive details of complaints and requests, including when they were made
- comprehensive details of investigations or enquiries
- comprehensive details concerning outcomes
- details of when residents, and those involved in any enquiries, were informed of outcomes

There will be a process in place for residents to seek local resolution of any complaints.

Where a resident does not wish to seek local resolution of a complaint, they may seek to escalate their complaint using the formal complaints process where it will be dealt with in accordance with Detention Services Order (DSO) 03/2015 - handling complaints. Complaints by adults should be completed where possible on form DCF 9 following the laid down procedures, though complaints will be accepted in other formats.

Discrete and secure boxes where residents can submit formal complaints must be provided in communal areas of the facility. These boxes must be emptied daily by Home Office staff. All non-healthcare complaints must be forwarded to the Home Office Immigration Enforcement Detention Services Customer Service Unit (CSU) who will ensure the complaint is logged by the Complaints Allocation Hub and then allocate the complaint for investigation and response.

Acknowledgement of a complaint must be sent by the relevant responder within 2 working days of receipt from CSU. If the family has already left the facility that acknowledgement must be sent to a forwarding address provided by the family.

Where an investigation and response takes longer than the family's stay in the facility, the full response must be sent to a forwarding address provided by the family.

Complaints about healthcare provision are handled under separate NHS England complaints procedures, which have different timescales for investigation and response. Such complaints are not monitored by the Home Office. Complaints about healthcare facilities placed in the complaints box must be directed to the healthcare supplier, in line with DSO 03/2015 - handling complaints. Only the name of the person making the complaint and the date the complaint was passed to the healthcare provider will be recorded by the Home Office.

The Home Office Professional Standards Unit is responsible for dealing with all allegations of serious misconduct, including alleged racial discrimination, with the exception of any serious misconduct complaints against healthcare staff.

Any complaints alleging racial discrimination must also be brought to the attention of the Equality and Diversity officer.

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Safety and security

Standard

Security will be kept to a minimum consistent with the need to provide a safe and secure family environment.

Minimum auditable standard

Security management: general

There must be a local security document in place which includes all extant instructions relating to security at the facility. This must include arrangements for complying with the regulation of the [Investigatory Powers Act 2016](#), [Data Protection Act 1998](#) and [Human Rights Act 1998](#).

There must be auditable procedures in place for the secure storage, allocation, return and safe keeping of keys and swipe cards.

There must be investigations into all reports of loss of swipe cards, keys and locks and compromises of keys, swipe cards and locks.

Any actual or apparent loss of a lock, key or swipe card must be reported immediately to the manager of the facility.

Any security incidents at the facility must be reported to Home Office Immigration Enforcement using established procedures.

The police must be advised of alleged criminal offences committed at the facility.

Staff must have access to all areas of the facility. Staff seeking to enter an accommodation suite must, in general, only do so with the consent of the family following gentle knocking on the door to the suite. The duty manager may, however, authorise access to a family's accommodation suite without the family's consent for reasons of safety or security, including in connection with securing the family's compliance with reasonable instructions. In exceptional circumstances, where there is an urgent need to do so, staff may enter an accommodation suite without having to seek the manager's consent. Such circumstances may include, for example, where there is an immediate and serious concern about the safety of a family member. Where the duty manager authorises access to a family's accommodation suite without their consent the incident must be logged, including details of the justification for doing so.

The facility manager, or duty manager, must be contactable 24 hours a day and able to respond immediately to any security incident.

Contingency plans agreed with the Head of Detention Operations, Home Office Detention and Escorting Services must be in place to manage any security incident in the facility.

A security briefing and training on security matters must be provided to all new staff. This must include the use of swipe cards and their safe keeping. Training must be recorded on the individual training records of all staff.

A welfare check will be conducted twice a day, with the consent of the family, including discreet checks on their accommodation suite. Checks will also be made on communal areas of the facility twice a day, including checks of the perimeter, to maintain the safety and welfare of residents.

Procedures must be in place, agreed with the Head of Detention Operations, Home Office Detention and Escorting Services for searching residents, visitors, staff, contractors, all areas of the facility and its grounds, vehicles, property and incoming goods.

Escorts

There must be a strategy in place setting out the procedures involved in planning escorts outside the facility.

There must be a risk assessment undertaken for each escort.

Any risk factors relating to the family must be shared with Home Office Detention and Escorting Services Detainee Escorting and Population Management Unit (DEPMU) so they can be taken into account.

Vehicles used for escorting must be safe and suitable for the needs of individuals being moved. Caged vehicles may not be used to transport families.

Use of restraints on individuals being escorted must be in line with published Home Office instructions.

Family members under escort should, wherever possible, normally travel in the same vehicle, unless the risk assessment indicates that there are reasons why separate vehicles should be used. A child travelling in a separate vehicle to their parents will be reunited with their parents when the risk subsides sufficiently to permit this to happen, provided this is possible.

Family members must be searched prior to an escort in line with instructions on searching. Any searches taking place during escort journeys will be kept to a minimum.

There must be suitable arrangements planned in advance to allow breastfeeding mothers under escort to feed their baby or young child, with as much privacy as possible. The mother's breastfeeding schedule will dictate when stops for breast feeding take place, as far as possible.

Babies and children being escorted must be provided with an age-appropriate seat.

Age appropriate refreshments must be provided for the journey.

In the event of a resident requiring hospital treatment, they will be accompanied to the hospital by a member of staff. Individuals needing to remain in hospital will be accompanied by a member of staff for the duration of their stay. If a single parent is hospitalised during a stay at the facility, their child or children will normally be allowed to accompany them during their stay in hospital. Where this is not possible an immediate referral to local authority children's services must be made.

In the case of a couple, where one parent requires hospitalisation for non-life threatening reasons, the unaffected parent will normally remain at the facility to care for the child or children. Where a child or children in a single parent family requires admission to hospital the expectation is that the parent will normally be permitted to accompany them to hospital. Any other children of the family would also be permitted to accompany their parent and sibling to hospital. In a two parent family one of the parents will normally be permitted to accompany the child or children to hospital.

Every effort will be made to keep external medical appointments made for residents, unless the family's removal has been arranged to take place before the date of the appointment. Where appointments cannot be kept because of the family's removal from the UK adult family members will be provided with a letter to pass on to healthcare staff on their return where the requirements set out in Detention Services Order (DSO) 07/2012: Medical appointments outside the detention estate are met.

Supervision of residents and visitors

There must be a system of checks in place to account for the whereabouts of all residents twice each day, with a 6 hour minimum interval between each check.

There must be procedures in place for managing and supervising visits in a discreet and unobtrusive manner.

There must be a system in place for checking and recording the identity of all visitors to the facility, including children.

There must be a system in place to prevent residents leaving with, or posing as visitors.

Searching

All residents, including children, will be searched on arrival at the facility, or on return to the facility. Residents may also be searched again during their stay in the facility if deemed necessary to maintain safety and security, subject to a record being kept justifying the reason for doing so.

All visitors, including children, will be searched on arrival.

All searches must be carried out in a consistent and sensitive manner, taking account of gender, religious and cultural beliefs, age, disability and other relevant factors.

Only female staff may search other females.

Searching of children on arrival will take place by asking them to walk through a portal. If the alarm is activated a wand will be used.

If there is reason to believe that a child is carrying a prohibited item or being used by one of their parents to conceal a prohibited item, staff will use communication skills to retrieve the item or, alternatively, until they have confirmed that no such item is being carried.

All staff involved in searching must be provided with training in the authorised search procedures and techniques. Training in authorised use of force techniques must also be provided.

The prior authority of the Home Office Immigration Enforcement manager must be sought to use force to conduct a search of a resident, unless the search is required in an emergency to prevent harm when it may take place without prior authority.

Force may not be used to search a child.

A clear written policy on searching procedures, including consent to search and searching of children, must be displayed in appropriate locations and in a range of languages around the facility where they can be viewed by visitors and residents.

A list of prohibited items which visitors may not bring into the facility must be displayed in appropriate locations where visitors and residents can view them clearly. This list will be limited to items it is necessary to prohibit in the interests of safety and security of the facility. The list will also be displayed in pictures so that it is accessible to residents with limited English.

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Check out process

Standard

To have in place a safe and well managed departure process, treating residents throughout with respect and regard for their well being.

Minimum auditable requirements

There must be procedures in place to ensure that departing families are made ready for departure at the correct time.

Staff must talk to the family prior to their departure to identify any potential issues which might prevent return and to make sure that the family understands the return arrangements.

Arrangements must be in place to make sure that staff responsible for the check out process correctly identify residents departing from the facility. These arrangements must include checks against residents' personal files, including photographs, dates of birth, physical measurements and features.

Prior to departure the correct property, cash, valuables and any prescribed medicines belonging to the resident must be placed in their care.

Residents must be asked to sign a receipt for any property which the family placed in storage and where that signature is withheld staff must note the record to this effect, including reasons why the resident refused to do so. The issuing officer must make sure that a second member of staff confirms the action and signs the record to this effect.

Following departure from the facility residents will be provided with a summary of their medical records, in line with Detention Services Order (DSO) 01/2016: the protection, use and sharing of medical information relating to people detained under immigration powers.

Where residents have no suitable clothing or shoes of their own at the time of discharge or removal, they must be provided with such clothing and footwear, taking into account the resident's destination.

A family must be offered refreshments prior to their departure, or discharge, from the facility.

Arrangements will be made for families being discharged from the facility back into the community to be transported back to their home address as soon as possible.

Daily visits must be made to the departure area by the duty manager to supervise the activity and make sure that everything is in good order. Times of these should be staggered but conducted where possible during a family's departure. These visits must be logged, together with details of any observations the duty manager may have.

The Home Office Family Returns Unit must confirm with the escorting contractor that a family has been successfully removed from the UK. This information must be shared with Home Office Immigration Enforcement staff at the facility.

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Healthcare

Standard

To provide healthcare services that meet the health needs of families during their stay at the pre-departure accommodation (PDA) and provide, as a minimum, equity with community services. These services are delivered in partnership with the centre manager, Home Office and a range of healthcare and other providers and stakeholders as required. The model of care supports improvements in health, patient experience and addresses the health needs of residents through the health service in the facility.

The health and wellbeing provision in the facility incorporates a variety of services to best meet the needs of children and young people in the facility as well as adults.

The provision of health services in the PDA is the commissioning responsibility of NHS England (NHSE), who set the service specification and who own and manage the contracts relating to the delivery of all elements of health provision at the facility. The inclusion of this particular standard in the overall set of Home Office operating standards for the PDA is for the sake of completeness and does not indicate that the Home Office has assumed responsibility for healthcare matters that are properly the responsibility of NHSE.

Whilst commissioning of health services is the responsibility of NHSE effective implementation is reliant on effective partnership working with all interested parties. To this end, a National Partnership Agreement between NHSE, Public Health England and Home Office Immigration Enforcement has been developed to set the general expectations on all parties.

The health service for PDA residents is subject to on-going review and development by both commissioners and service providers. This ongoing review process will take note of the needs of residents, emerging best practice, advances in approach and service user feedback where captured. The health care providers will strive to continuously improve service delivery, embrace innovation and provide a flexible service which can readily respond to the immediate health needs of the population during their short time in the facility.

Minimum auditable requirements

NHS England will make sure of the following:

- that a healthcare team is in place at the facility with an appropriate mix of skills and training
- the delivery of a high quality, safe service in accordance with the NHS Clinical Governance framework which provides for patient safety and satisfaction
- the delivery of integrated services where all providers, including non-healthcare providers, proactively work together as a team to deliver patient centred care delivered by appropriately trained staff sensitive to individual needs and the diversity of the patients, including children

- integration between primary and secondary care provision (where relevant), making sure that wherever possible residents are treated within the facility in preparation for removal
- delivery of seamless and cohesive services which will support continuity of care for the departure of all residents coming into the facility- residents will be assisted in managing their treatment and care, focussed on progression to removal from the UK
- that health providers will work collaboratively with other service providers to ensure that interventions and services are sequenced appropriately and without undue delay
- that residents are assessed according to British Medical Association guidance or International Air Transportation Guidelines (IATA) when fit to fly or not fit to fly and the Home Office Immigration Enforcement manager is notified accordingly

NHS England will also make sure that residents' physical and mental health is managed well throughout their stay at the facility. Where medical practitioners at the facility have concerns that a resident's health may be injuriously affected by continuing to remain at the facility, or where they have concerns a resident may have suicidal intentions, or that they may have been a victim of torture they must follow procedures set out in Detention Services Order (DSO) 09/2016: Detention centre rule 35. Please note that although rule 35 of the Detention Centre Rules 2001 does not apply to the pre-departure accommodation the spirit of this rule and the relevant DSO on rule 35 reports nevertheless apply.

Related content

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Staff training

Standard

Staff must undertake training and development in order to meet the aims, objectives and needs of the facility.

Minimum auditable requirements

The facility must employ staff with responsibility for planning and management of training plans for their respective organisations.

Staff training must take account of the diverse nature of the facility's population, which will require the provision of background information about the many different cultures staff are likely to come into contact with, as well as the specific role of the organisation working within the facility. All training must incorporate the need to understand and better communicate with residents.

Records must be maintained of all individual training undertaken and when it took place.

There must be systems in place for recognising when staff are required to take refresher training, where appropriate. Staff requiring refresher training must not have any contact with detainees until they have undergone, and passed, the necessary training.

Training and refresher training programmes must be implemented which include, but are not limited to, the following elements, where relevant to the staff member's role:

- communication and interpersonal skills, including with children
- values and principles underpinning the treatment of residents at the facility
- first aid training to approved standards
- suicide awareness
- mental health awareness
- managing risk behaviour
- equality and diversity training
- child protection training
- child care and supervision
- security training and practice
- control and restraint and minimising and managing physical restraint (MMPR)
- escort procedures
- searching procedures
- report writing

Training will be evaluated and revised in line with operational experience.

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Standards audit

Standard

Audit arrangements must be in place to reliably measure compliance with the requirements of the Home Office's pre-departure accommodation operating standards and support continuous improvement.

Minimum auditable requirements

Self-audit

The facility must have a system of self-audit for approval by Home Office Immigration Enforcement (HOIE) Detention and Escorting Services.

Service providers must have a manager in place for the audit programme.

The frequency of self-audit must be agreed with HOIE Detention and Escorting Services.

Details of audit findings must be recorded on an audit worksheet approved by HOIE Detention and Escorting Services.

Worksheets must contain evidence that each minimum auditable requirement has been thoroughly evaluated. Records of audit findings, including action plans, must be maintained for a period of at least 2 years.

On completion of the audit a list of findings must be submitted to the HOIE manager.

Within 28 days of submission of audit findings the HOIE manager and the service providers must agree the dates by which any outstanding actions must be completed.

Further self-audits of any minimum auditable requirements identified as requiring action must be completed within one month of the agreed date for completed actions.

Temporary non-compliance with pre-departure accommodation operating standards

Any variances from minimum auditable requirements or frequencies must be authorised by the HOIE Head of Detention Operations.

Measures and action plans for temporary non-compliance to achieve future compliance must be implemented and must replace the original baseline for audit purposes.

Audits by HOIE

HOIE must work to a programme that includes the audit standards and other selected standards.

The facility manager must make copies of self-audit reports and any other documents to the HOIE manager on request.

The facility manager must agree an action plan with HOIE within 28 days of receiving the report on an audit.

Feedback on the audit of individual standards must be provided during the course of an audit in enough detail to enable improvements to be planned.

A final report must be sent to the facility manager within 28 days of the audit finishing.

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