



Home Office

Detention Services Order 01/2019

Detainee Escort Records

March 2019



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Document Details

Process: To provide consistent standards on the use, management and storage of detainee escort records.

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Contains Mandatory Instructions

For Action: All Home Office staff and suppliers operating in immigration removal centres (IRC), Gatwick pre-departure accommodation (PDA) and short-term holding facilities (STHF), Detainee Escorting Population Management Unit (DEPMU) staff and escort supplier staff.

For Information: Home Office caseworkers

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Processes Affected: This DSO sets out instructions to ensure that detainee escort records are completed accurately and are maintained by the custodial or escorting supplier for every detainee being transferred to or between places of detention.

Assumptions: All staff will have the necessary knowledge to follow these instructions.

Notes: This DSO replaces 12/2005 - Detainee transferable document and warrant of detention form, 13/2007 - Updating of Part C risk assessment and 18/2012 - Person Escort Record (PER).

Instruction

Introduction

1. This Detention Services Order (DSO) provides instructions for all staff in Home Office IRCs, Gatwick PDA, STHFs, as well as escorting staff and DEPMU, on the requirement to accurately complete and maintain detainee escort records. Escort records must travel with every detainee transferred to or between places of detention.
2. Facilities in non-residential STHFs tend to be more limited than those in IRCs and residential STHF (RSTHF). Where applicable, this guidance will make specific references to the procedures required in non-residential STHF.
3. For the purpose of this guidance, “centre” refers to IRCs, RSTHFs and the Gatwick PDA.

Purpose

4. In order to safeguard detainees, staff and members of the public, it is essential, when transferring a detainee to or across the Home Office detention estate, that any new or known risks or vulnerabilities are recorded and made available to those responsible for the detainee. Before any escort, an assessment needs to be made by the escorting staff of the risks posed by the detainee during escort and of any circumstances which may impact on how the escort should be carried out.
5. Proper completion, sharing and storage of risk assessments can help prevent suicide and self-harm, escapes, assaults and releases in error. When any risks and/or vulnerabilities relating to the escorting of detainees are identified (whether before, during or on completion of a transfer) supplier and escorting staff must act immediately to mitigate such risks ensuring the safety and security of the escort and safeguarding the detainee and members of the public. All new risks identified must be notified to the Home Office by completing and sending by email an IS91 RA Part C (see paragraphs 42-49) to DEPMU and the local HOIE team, where one is available.
6. All staff must be aware of the appropriate use, management and storage of detainee escort records in accordance with the current legislative framework for data protection. Home Office and supplier staff working in the Home Office detention estate must ensure escort records are kept for every individual in detention and that all relevant information and risk assessments are held within these documents.

Detainee Transferable Document (DTD)

7. The purpose of the DTD is to capture the history of all identified risks associated with a detainee during his/her time in detention, regardless of any transfers between centres. The DTD is an individual file opened at the first reception and must travel with all detainees being permanently transferred within the immigration detention estate. It is a live document that contains a detainee's basic information and bio-data and to which any information relevant to the security and safety of detainees during escort and detention must be added. The DTD is a compilation of all information relevant to the safe management of any escorted transfer to or between places of detention or on removal.
8. The DTD comprises a front cover with the detainee's details and location history, a second page containing essential bio data information and a back cover with the history of movements and a checklist to ensure the documents needed are enclosed within it for every transfer – see paragraph 15.
9. Centre supplier staff must open a DTD on initial reception for every new detainee entering the detention estate and ensure that detainees transferring within the estate are accompanied by their DTD. The front and inside covers must be completed in full by supplier reception staff who will also conduct an initial risk assessment on each detainee upon arrival at the centre based on any risks identified on form IS91 (see paragraphs 34-40), the Person Escort Record (PER) (see paragraphs 23-33) and the movement order. A movement order is generated and provided to the receiving centre by DEPMU ahead of any transfer.
10. If the initial detention of an individual begins at a non-residential STHF, police station or on encounter by an Immigration Officer, escorting staff will complete a PER with all known risks, but a DTD will only be completed once the detainee is transferred to a centre as defined in paragraph 3.
11. In accordance with DSO 12/2012 - 'Room sharing risk assessment' (RSRA), an individual RSRA needs to be completed by centre supplier staff for every arrival. A copy of the initial RSRA and any subsequent RSRA's that are undertaken must be kept inside the DTD.
12. The bio data page of the DTD must be completed by supplier centre staff with all known details of the detainee. On the front page of the DTD, supplier staff must clearly state that fingerprints have been taken and the date and time recorded below their centre name. The detainee should be asked to assist the completion of the front page and provide his/her last address in the community and emergency contact details. Detainees should be reminded by supplier staff that these details are essential to ensure their chosen person is contacted in the event of an emergency; and that keeping the Home Office updated of any changes to their address in the community can also facilitate a quicker process in case of release under bail.

13. In IRCs only, supplier staff must ask the detainee to sign the bio data page and the page must be copied and sent to the local DET team within 24 hours. If the detainee refuses to sign the bio data page, this must be noted on the DTD by the reception officer. Upon receipt, the local DET team must forward the bio data page to the detainee's caseowner and make a note of this action in the Case Information Database (CID).
14. While located at the centre, the DTD will remain the responsibility of the supplier Centre Manager and it must be stored in a safe and secure place – preferably in the reception area - while being accessible to all staff. The DTD and all its accompanying records must be handed over to the escorting officers in the event of a permanent transfer to a different IRC or other custodial location and in the event of removal directions being set.
15. The DTD must be updated to reflect the most recent assessments or changes to any of the risks identified. The following documents must be included in the DTD:
 - IS91
 - All IS91 Part C(s) completed in detention and, where possible, under escort.
 - All room sharing risk assessments (RSRA);
 - All person escort record(s) (PER) completed in detention;
 - Any current Assessment Care in Detention and Teamwork (ACDT) documents, when one is open when transfer occurs, and copies of all past ACDT documents;
 - Any current careplan, when one is open when transfer occurs, and copies of all previously closed careplans – including vulnerable adult warning forms completed by escorting staff;
 - IS106 bail grant;
 - Discharging information from healthcare;
 - Prison files, where available (prison licences must be kept within the prison file in the DTD);
16. Escorting staff cannot escort a detainee from a centre without a DTD containing the IS91 and the PER handing over the custody of the detainee. Before the transfer or removal of a detainee, escorting staff arriving at the centre must check that the DTD contains all documents required and that any medical information is contained in sealed envelopes as required by DSO 01/2016 - Protection, Use and Sharing of Medical Information. Staff must confirm these checks by completing the back of the DTD.

17. It is the responsibility of centre supplier staff to ensure that the documents listed at paragraph 15 are kept within the DTD and are handed over to the escorting staff.
18. Escorting staff must ensure the entirety of the DTD is collected and delivered along with the detainee to the next place of detention or when travelling for removal purposes. If the DTD is incomplete and essential information is missing (such as the IS91, the PER, open ACDT documents or discharging information from healthcare for a detainee with medication in possession), supplier staff must raise this with a manager from the discharging centre. Where the information required for the transfer cannot be supplied by the discharging centre, the escorting lead officer must raise this immediately with the escorting duty manager. The escorting duty manager must escalate such cases with DEPMU's Duty Manager who will provide replacement documents from the CID where possible, or otherwise advise if the transfer can proceed.
19. If a detainee is being transferred while on an open ACDT plan or vulnerable adult careplan, escorting staff must not proceed with the transfer without the accompanying plan. In such circumstances, if the careplan or ACDT plan are missing and cannot be located by the IRC supplier staff, the escorting staff must notify the DEPMU Duty Manager immediately who will advise whether the transfer or removal can proceed based on the information available from previous risk assessments and escorting records. Where appropriate, the DEPMU duty manager should also consult with the local Home Office teams, supplier staff and the immigration caseworker before authorising or cancelling the removal or transfer of the detainee in such circumstances.
20. Following the successful removal of a detainee, details of the removal must be entered on the back cover of the DTD and the file should be retained by the escort supplier for central storage in accordance with paragraphs 60-62.
21. In the event of a failed removal, DEPMU will arrange the return of the detainee to detention. Escorting staff must note the details of the failed removal on the back cover of the DTD and ensure it returns with the detainee to the place of detention.
22. Following the bail of a detainee, the details of such a release must be entered on the back cover of the DTD and the file retained by the supplier of the discharging centre in accordance with paragraphs 60-62. When a detainee is bailed following a court appearance, the escorting supplier will be responsible for the retention of the escorting records and the actions detailed at paragraphs 60-62.

Person Escort Record (PER)

23. The PER is a standard form agreed with and used by all agencies involved in the movement of detainees. The form highlights the risks posed by and to detainees on external movements and provides assurance that such risks and any vulnerabilities

have been identified and communicated to those who are responsible for the detainee.

24. The PER ensures that all staff escorting and receiving detainees are provided with all necessary information, including any risks or vulnerabilities that the person may present, such as risk of absconding or harm to themselves or others.
25. The PER is not a risk assessment. It merely, but importantly, conveys information about the assessed risks to others who may need to know about them. A PER must be completed by centre and escort supplier staff whenever a detainee is escorted from or between an IRC and another location, whether the custody of the detainee transfers to another supplier or not. This includes initial movements from non-residential STHF into the detention estate and movement or transfer between centres in the immigration estate and other detention/custody accommodation (courts, tribunals, prisons and police stations) and also between centres and other temporary locations such as hospital appointments. Full guidance notes on completion of the PER are contained in the PER document itself.
26. A new PER must be completed by supplier staff if a detainee returns to a centre one day and goes out to the same destination the following day, e.g. a court appearance that may last several days with the detainee returning each day will require a new PER document for each day of the appearance. The outcome of any previous transfers or movements must be taken into consideration when assessing the risks of a new transfer and this must be documented on the PER form.
27. Contact details for the centre responsible for completing the PER must be clearly recorded on the “Handover Details” in case further information is required during escort.
28. In order to protect detainees, staff and the public, it is essential that known risks of escape, assault, suicide/self-harm or harassment are communicated to others into whose custody the detainee is transferred. The identification of risks of suicide or self-harm is one of the prime purposes of the PER and both escorting and detention staff should note that it is a requirement to indicate both current risks and any known past risks. It is also essential that any new risks that develop during a movement are recorded.
29. Supplier staff must provide supporting information when ticking any warning marker box of the “Risk Indicator” page of the PER and cannot simply refer to any attached documents such as an ACDT document or room share risk assessment. In accordance with DSO 08/2016 Management of adults at risk in immigration detention, when completing a PER before a movement or transfer of a detainee identified as an Adult at Risk, details of any known vulnerabilities must be fully documented, and the PER warning marker box completed must clearly highlight that the detainee is an **Adult at Risk**. When the detainee being transferred is on an

open ACDT plan or has an open careplan, these documents must be attached to the PER and the appropriate boxes highlighted in the “Escort Handover” page.

30. When recording any events or interactions with detainees in the PER event log, escorting officers should not limit these entries to simple actions but describe any impact these interactions may have had on the ongoing risk assessment. Relevant details will include the mood or demeanour of the detainee, statements made or actions by the detainee that may impact the original assessment made before the escort.
31. The PER form must provide details of the transfer of medication with the detainee, if applicable, and the centre must ensure that a sufficient supply of medication is available to the detainee to allow for the onwards transfer period. Confidential medical information must be attached in a sealed envelope (see DSO 01/2016 Medical information sharing).
32. On completion of a transfer, the risk and vulnerabilities identified by the supplier responsible for the movement must be noted and acted on by the supplier of the receiving centre. All PERs must be stored in the detainee’s DTD at the end of each movement.
33. HOIE enforcement teams and police/prison services in Scotland and Northern Ireland do not complete PER forms. Escort supplier staff should not expect to receive a PER form for transfers of detainees from these organisations. DEPMU are responsible for providing full details on the background of those initially being transferred from HOIE enforcement teams or police/prison services in Scotland and Northern Ireland to escort suppliers and centres. The risk information will be on the IS91, IS91RA Part A and on the IS278 Movement Order. Escort supplier staff must then open a PER for the move using the information provided by DEPMU.

IS91

34. An IS91 form authorises the detention of an individual in immigration detention. A new IS91 must be completed every time a detainee enters immigration detention by the caseworker/detaining team and all IS 91 forms are recorded on CID.
35. All cases referred for detention must have an up to date PNC check completed by the caseworker/detaining team. The outcome of the check must be recorded on the IS91 and on CID by the caseworker. Full details of the PNC check must be included on these records as without this a bed space cannot be allocated. This must include the PNC reference number and the name of the person conducting the check.
36. In accordance with DSO 03/2016 ‘Consideration of Detainee Placement in the Detention Estate’, the detaining team or caseowner authorising detention must consider all known risks when requesting allocation in the detention estate. Details

of previous violence, self harm and full medical details, when available, must be recorded on form IS91RA Part A by the caseowner or detaining team. All risks that are known before detention and that can potentially impact the safe transfer and allocation of an individual must be reflected on the risk section of the IS91. Where appropriate, these risks must also be updated by DEPMU as special conditions on CID and reflected on the movement order.

37. Form IS91 is issued only once for a period of detention, irrespective of any transfers between centres. A new IS91 will only be issued in exceptional circumstances where there is substantive and permanent alteration in risk factors or when an IS91 has been issued with erroneous information. In such cases, the DET local team must contact the caseowner, who is ultimately responsible for authorising and issuing a new IS91. When reissued, the new IS91 must be sent by the caseowner to the centre to be attached to the DTD.
38. Upon arrival of a detainee, supplier reception staff at the receiving centre must check the IS91 to ensure that it has been fully completed, that the attached photo is a true likeness of the detainee and that the bio-data information is correct. If any errors or issues are highlighted this should be immediately raised with the onsite DET team will contact the detaining officer or caseowner to issue a new IS91 as per paragraph 38. Outside of office hours, the local Compliance team on-call manager must escalate such cases with the DEPMU duty manager and replacement IS91s needed must be generated by the Command and Control Unit.
39. The IS91 form is part of the DTD and must be handed over to the escort supplier upon a detainee's discharge from a centre for permanent transfer or removal. When a detainee is released from detention, the original IS91 must be returned to the local DET team by the centre supplier – see paragraphs 60-62.
40. If, following a risk assessment during the reception process, a supplier Duty Manager feels that an individual detainee has been incorrectly assigned to their centre, this must be raised with the local Compliance Team manager or on-call manager. The Compliance Team manager must submit a request for reallocation, together with any supporting evidence, to DEPMU as soon as possible.

IS91 RA Part C

41. Form IS91RA Part C is the vehicle by which detention staff notify DEPMU of any changes to a detainee's circumstances that impact on the initial risk assessment as reflected on the IS91 and movement order.
42. Risk assessment is an ongoing process. Both supplier and healthcare staff are responsible for notifying both local Home Office teams and DEPMU of any notable changes to the risks in the detention of any individual under their care. This must be completed as soon as operationally possible by sending a copy of form IS91RA part C to DEPMU Population Management.

43. In accordance with DSO 08/2016 'Management of adults at risk in immigration detention', all changes to the physical or mental health of a detainee, or a change in the nature or severity of a previously identified vulnerability, must be raised by supplier or healthcare staff to DEPMU. In such cases, a IS91RA Part C must be submitted, including the reference 'adult at risk' on the first line of the form, and also notifying the Detained AAR Part C' inbox and both local Home Office teams – see paragraph 50.
44. On receipt of an IS91RA Part C, DEPMU staff will update the detainee's case notes on CID by copying the contents of the notification. When appropriate, a special condition will be recorded as well. DEPMU may also, when appropriate, reassess the risk posed by or to the detainee and reallocate detention location.
45. In IRCs, all IS91RA Part C received by the local DET teams must be sent to the individual caseowner of the detainee.
46. In STHFs, all IS91RA Part C received must be sent to the individual caseowner by DEPMU.
47. IS91 RA Part Cs can be completed by any detention or escorting staff, including all Home Office, supplier and healthcare staff. The form must clearly identify the detainee, place of detention and the person completing the form (name and organization). The time, date and details of the incident or circumstances that prompted the change in risk assessment must be clear and include any relevant information impacting the detainee's suitability for detention or escort - such as new or reassessed vulnerabilities, ACDT or Care Plan updates, likelihood of compliance with the removal process or details of violence or disruption such as the use of Rule 40 or 42. Any medical information shared through an IS91 Part C must comply with the requirements of DSO 01/2016 - Protection, use and sharing of medical information relating to people detained under immigration powers.
48. Centre supplier and, when possible, escorting staff must ensure that a copy of all completed IS91 RA Part Cs are attached to the corresponding IS91 document within the DTD to guarantee all such risk assessments are readily available and easily accessible to all staff in detention and during escort.

Vulnerable detainees

49. This guidance should be considered alongside guidance on the management of adults at risk within immigration detention, DSO 8/2016. The adults at risk policy sets out a process for determining whether an individual would be particularly vulnerable to harm in detention or during transfer
50. In accordance with DSO 08/2016, during the reception process of a detainee identified as an adult at risk, supplier and healthcare staff must jointly undertake a centre-specific risk assessment within 24 hours. This assessment must include

consideration of any medical concerns and risks. Any notable changes in risk must be notified to DEPMU on form IS91RA Part C as detailed in paragraphs 42-48. Centre supplier staff should document any further risk assessments as deemed necessary and copies of all Part Cs completed must be kept on the DTD.

51. In accordance with DSO 08/2016, individuals in detention may be managed under a careplan to ensure that the wellbeing of the detainee is safeguarded. The careplan should record the nature of the limitation or vulnerability, the reasonable adjustments put in place or any interventions agreed. Centre supplier staff must provide both local Home Office teams with a copy of all careplan implemented. The careplan must then be shared with the detainee's caseworkers. DEPMU must be notified by centre supplier staff of any reviews of the careplan that alter the original assessment of risk or the level of support being provided. Centre supplier staff must document such reviews or details of any careplans being closed in a IS91RA Part C as per paragraph 42.
52. Any vulnerabilities that may impact on the safety and wellbeing of an individual detained at a non-residential STHF must be documented in a vulnerable adult warning form (VAWF). The VAWF must be used by escorting staff at non-residential STHFs to ensure any vulnerabilities identified are appropriately documented and shared before the detainee is transferred to an IRC, where longer term support can be implemented. If a VAWF is completed upon initial detention at a non-residential STHF, it should be attached to the PER and delivered along with the detainee to the next place of detention or when travelling for removal purposes.
53. At IRCs and RSTHFs, any such vulnerabilities that may impact on the safety and wellbeing of a detainee must be addressed and reasonable adjustments put in place and documented in a careplan. Any newly identified vulnerability or changes to their nature or severity must be notified to the Home Office by the way of an IS91 RA Part C.
54. When a VAWF is completed, a IS91RA Part C must be submitted to DEPMU, including the reference 'adult at risk' on the first line of the form, and also notifying the Detained AAR Part C' inbox and both Compliance and DET teams – see paragraph 42.
55. Transfers between centres of an adult at risk must be kept to a minimum. Centre supplier staff must ensure that a safer detention referral is completed and discussed with the receiving centre prior to a transfer taking place for an adult at risk. This referral should happen as soon as possible and at least 48hrs before the transfer occurs. The referral must highlight the known risks, presence of careplans, VAWFs or ACDT documents. Special consideration should be given to cases where reasonable adjustments are already in place in the centre prior to the transfer, or when the detainee requires ongoing support from healthcare staff – such as detainees with physical disabilities, undergoing outpatient medical treatment or drug or alcohol withdrawal programmes.

Training

56. Centre and escort suppliers must ensure that officers are trained and competent in the completion of IS 91 RA Part Cs, DTD and PERs and understand the information provided on the forms. Suppliers must make this training part of the refresher schedule for all staff.
57. All detainee custody officers must receive training on data protection and information management as part of their initial training course.

Auditing and monitoring

58. Detention custody managers (or equivalent grade officers) are required to carry out daily spot checks of the completion of DTD and PER forms by their staff. These checks must include auditing a minimum of two detainee escort records and checking that the entries below are completed as required:
- A DTD has been opened in the centre upon initial detention, or the location history was updated with the current detention place.;
 - The DTD contains all required documents as per paragraph 15.
 - A PER was completed for every external movement to any destination;
 - For at least two PERs contained in the DTD, the manager must confirm that:
 - All sections of the PER forms have been completed by the relevant department in order to ensure all aspects of the form have been considered;
 - All boxes which require staff to print their name were completed in a legible manner;
 - If risks were identified, supporting information has been provided for the escort;
 - Events and interactions were appropriately recorded in the events log of the PER and reflected an ongoing assessment of the original risks identified; and
 - All entries are legible.
59. Evidence that the checks detailed at paragraph 57 were carried out should be recorded and kept by the supplier. These should be made available to the local Compliance team upon request.
60. In addition to the management checks, centre supplier senior managers must complete a monthly programme of quality assurance checks of DTDs and PERs.

This monthly monitoring must include auditing 2% of the current detained population of the centre against the requirements detailed at paragraph 57.

Disposal of Detainee Escort Records

61. For detainees released from detention, the centre supplier must pass the original IS91 to the onsite DET team. For all Border Force cases, the onsite DET team must post the IS91 to Accounts Receivable, Capabilities and Resources. IS91s for all other cases must be retained by the onsite DET team for 30 days, after which they may be destroyed.
62. With exception of the original IS91, the centre supplier (for detainees who are released) and the escort supplier (for detainees who are removed) must retain all forms contained in the DTD for 7 years after the last completed action, after which they may be destroyed.
63. If a prison file or licence is held in a centre for a detainee, they must be returned by the centre supplier to the original prison establishment when the detainee is released or removed. In case of a permanent transfer to a different centre, the prison file or licence must travel with the detainee as part of the DTD – see paragraph 15.