



HM Inspectorate of Prisons and HM Inspectorate of Constabulary and Fire & Rescue Services

## **EXPECTATIONS**

## FOR BORDER FORCE CUSTODY SUITES

Criteria for assessing the treatment of and conditions for detainees in Border Force custody

Version 2, 2020

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#### Introduction

Welcome to the second edition of *Expectations for Border Force custody suites*, the standards by which we inspect outcomes for detainees in Border Force custody facilities. The *Expectations* arise from the requirement to inspect treatment and conditions in Border Force custody. This edition builds on our *Expectations for police custody* while recognising the distinct experience detainees held in designated Border Force custody facilities may encounter. These *Expectations* allow us to fulfil our responsibility to deliver independent and objective assessments of outcomes for detainees in Border Force custody facilities.

The requirement to inspect designated Border Force custody facilities arises from the UK's status as a party to the UN Optional Protocol against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT aims to strengthen the protection of people deprived of their liberty from ill-treatment, including by requiring States to have in place a system of regular, independent visits to all places of detention. OPCAT sets out both an international and a national framework for monitoring detention. At the national level, States Parties must establish or designate an independent National Preventive Mechanism (NPM) to carry out visits to places of detention. The UK's NPM is made up of 21 established bodies, including HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) and HM Inspectorate of Prisons (HMI Prisons).

#### The NPM must:

- regularly examine the treatment of people deprived of their liberty in places of detention;
- make recommendations to the relevant authorities with the aim of improving the treatment and conditions of detainees; and
- submit proposals and observations concerning existing draft legislation.

The programme of Border Force custody inspections takes place approximately every two years, with a risk-based approach to decide any follow-up visits. The inspections of these suites are completed as one national inspection within a two-week period. The inspections are undertaken jointly by Her Majesty's Inspectorate of Prisons (HMI Prisons) and Her Majesty's Inspectorate of Constabulary and Fire and Rescue Services (HMICFRS). \*\*

Expectations for Border Force custody suites sets out the framework and criteria used by the Inspectorates to assess Border Force custody arrangements and the outcomes for those detained in designated Border Force custody facilities. The Expectations are independent but are informed by the Police and Criminal Evidence Act (PACE) 1984 and its codes of practice, relevant legislation, professional guidance on detention and custody and relevant international and regional human rights standards. They are also drawn from inspection experience and wider consultation with external

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Inspecting Border Force suites in Scotland is the joint statutory responsibility of HMICFRS and Her Majesty's Inspectorate of Constabulary for Scotland (HMICS).

experts. They incorporate learning from the HMICFRS-led thematic inspection of the welfare of vulnerable people in police custody and from the cumulative experience of our joint inspections of police custody and Border Force custody to date.

The *Expectations* will be used by HMI Prisons and HMICFRS inspectors to assess the custody arrangements of designated Border Force custody facilities in the United Kingdom, with a particular focus on the treatment and conditions of those detained. They also offer a guide to the public and Border Force as to the standards we expect the service to meet.

The *Expectations* are grouped under four inspection areas:

- Leadership, accountability and partnerships
- In the custody suite: booking in, individual needs and legal rights
- In the custody cell, safeguarding and health care
- Release and transfer from custody.

**Expectations** set out the outcome we expect Border Force to achieve.

**Indicators** suggest evidence that may demonstrate whether the outcomes have been met. Forces do not have to meet each indicator; the list is not exhaustive and does not exclude other means of achieving the outcome.

This version of the Expectations takes effect from January 2020.

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## Section 1: Leadership, accountability and partnerships

There is a strategic focus on custody, including arrangements for diverting the most vulnerable from custody. There are arrangements to ensure custody-specific policies and procedures protect the well-being of detainees.

**Expectations – Leadership** 

1.1 There is leadership which communicates a clear focus on protecting and diverting vulnerable people from custody, wherever possible, and promotes the safe and respectful delivery of custody.

#### **Indicators**

- There are objectives concerning the diversion of vulnerable adults and children away from custody. These are promoted and accessible to staff.
- There is an effective management structure that ensures appropriate
  policies and procedures for the whole custody process are in place, fully
  implemented and reviewed regularly to ensure compliance with legislation
  and relevant human rights standards. Policies and procedures are
  accessible and staff understand them.
- There are sufficient resources to carry out the custody functions to ensure
  the safety and well-being of detainees. Custody suites are staffed with
  personnel (including contracted staff) who are trained, with the right skills
  and security clearance, who understand how to respond to detainees and
  whose training needs are assessed, met and evaluated to perform the
  requirements of the role.
- Services provided externally to support custody are monitored and scrutinised to hold providers to account.
- There is a clear whistle-blowing procedure in place and all staff know how to raise concerns.
- 1.2 There is an evident and effective focus on the protection and welfare of children and vulnerable adults.

- Safeguarding of children is embedded at a strategic level, supported by clear policies and procedures specific to the needs of children. Border Force staff are trained to recognise child abuse and to understand the need to safeguard and promote the welfare of children, and are supported to do so. Relevant authorities are notified if children are detained in custody (see section 3).
- There is a robust safeguarding policy for vulnerable adults (see section 3).
- Staff are provided with training in awareness of human trafficking, sexual abuse (including exploitation), extortion, grooming and smuggling. All staff

are alert to the signs that a detainee has potentially been a victim of trafficking, sexual abuse or grooming, know how to report it and do so appropriately, including to the National Referral Mechanism.

**Expectations – Accountability** 

### 1.3 Performance management data supports the safe delivery of custody.

#### **Indicators**

- Accurate data (including custody throughput, demographics, adverse incidents, strip-searching, use of force and complaints) are routinely collated and analysed to identify trends, and used to inform organisational learning and improve outcomes for detainees in Border Force custody.
- The central custody directorate receives all relevant management information and data, including on the use of force and equality and diversity.
- Border Force has mechanisms in place to assure itself and the public that the use of force in relation to arrest, detention and custody is strictly necessary, safe and proportionate.
- Quality assurance processes promote the safe and respectful treatment of detainees and continuing professional development of staff.
- Effective mechanisms are in place to learn from adverse incidents and to identify and share good practice within and across Border Force and relevant partnerships.
- 1.4 Border Force staff demonstrate an understanding of their obligations under the Equality Act 2010, including the public sector equality duty. Border Force promotes respect for people from all backgrounds and with diverse needs and raises awareness of the discrimination that can be faced by particular groups.

- There are effective monitoring systems to identify discrimination in treatment, including analysis of data on custody throughput.
- Assessments are conducted across custody operations, including an element of external challenge to identify whether services deliver fair and equal treatment.
- An equality governance and accountability framework is established, linked to the Border Force risk register.
- Where staff come across unfair or discriminatory treatment, they are able and required to take action in challenging, eliminating and reporting it (see section 3).

- Equality monitoring, and any other monitoring required for protected characteristics, are communicated to all staff and staff understand how they can implement and monitor appropriate action.
- Staff have been trained to recognise and meet the needs of people who have one or more of the protected characteristics under equality legislation.
- There are policies and procedures in place to ensure staff understand their obligations under the Equality Act 2010.
- 1.5 Border Force facilitates access as required for effective external scrutiny.

#### Indicators

- Border Force responds to issues and complaints raised by Independent Custody Visitors (ICV). This includes dealing with immediate complaints and issues raised during visits.
- Feedback is used appropriately by Border Force and there are regular and formal opportunities for issues to be raised with senior officers.

## **Expectation – Partnerships**

1.6 Partnership arrangements effectively support the identification and management of risks to the welfare of vulnerable detainees (including children) in Border Force custody.

#### Indicator

 There is constructive engagement with all relevant partner agencies (including relevant safeguarding boards, ICVs, health care providers and commissioners, local authorities, youth offending services, criminal justice agencies, escort providers, immigration authorities, ambulance service, courts, etc) to protect and divert children and vulnerable adults from custody, where possible, and to support the safe and respectful delivery of custody. Outcomes can be clearly demonstrated.

#### References

In relation to expectations 1.1–1.6: Human rights standards require that all places of detention are managed to ensure that detention is prescribed by law and that detainees' human rights are respected, protected and fulfilled. That means that the humanity and inherent dignity of each and every detainee is recognised in policy and practice, that vulnerable detainees are identified and safeguarded and that managers ensure that all staff have the requisite knowledge, aptitude and skill to perform their duties so as to be human rights compliant. A child (any person under the age of 18 years) must be treated as vulnerable by reason of age and their best interests remain a primary consideration. See ECHR 2, 3, 5; ICCPR 10(1); ICESCR 12(1); CERD 2, 5, 6; CAT 2, 10, 11, 12, 13, 16; OPCAT 19, 20, 21, 22; BOP 1, 4, 5, 7, 9, 29; PPMI 1, 2, 20; CCLEO 2, 3, 6, 7; BPUFF 1, 15, 18; DEDRB 2; DRM 4; DHRIN 5. In relation to children specifically see CRC 3, 19, 24, 33–37, 40; HR 17.

# Section 2: In the custody suite: booking in, individual needs and legal rights

Detainees receive respectful treatment in the custody suite and their individual needs are met. Detainees are informed of their legal rights and can freely exercise these rights while in custody. All risks are identified at the earliest opportunity.

**Expectations – Respect** 

2.1 Detainees are treated with dignity and their individual needs, while in custody, are met.

### **Indicators**

- Border Force officers and staff interact with detainees courteously and all detainees are treated with dignity from the first point of contact and throughout their detention in custody.
- Detainees are able to disclose confidential information, and any situation or condition that makes them vulnerable, in private.
- Border Force officers and staff listen to detainees and are alert to and understand the impact of detention in custody, particularly for those detainees identified as vulnerable. Effective support to cope with their detention in custody is provided.
- Border Force officers and staff positively engage with detainees during their detention in custody and, in particular, with those who are vulnerable and high risk.
- Border Force officers and staff explain to detainees that CCTV operates in the suites, and where this is in cells, how detainee privacy is ensured.

**Expectations – Meeting individual and diverse needs** 

2.2 Staff understand how to promote equality and diversity and recognise and respond to the specific needs of people with protected and other minority characteristics. All detainees are treated according to their individual and diverse needs.

- Staff have a good understanding of and can meet the specific needs of diverse groups, including children, older people, women (including women who are pregnant or breastfeeding), detainees from all racial and ethnic groups, detainees with disabilities, detainees with learning difficulties, detainees of all religions and beliefs, detainees of all sexual orientations and transgender and intersex detainees.
- There are sufficient female custody staff members and appropriate provision and facilities to respond to the welfare needs of detained women. Female

detainees are routinely provided (without having to ask) with menstrual care products suitable to their needs.

- Custody staff are equipped to recognise mental capacity and to identify detainees with intellectual impairments (learning disabilities) to ensure that effective safeguards are appropriately implemented.
- There is an adequate range of facilities and adaptations for detainees with disabilities and staff know how to use them.
- Staff show awareness of, for example:
  - appropriately responding to detainees' religious observations;
  - searching detainees in a religiously and culturally sensitive manner and taking account of gender and gender identity; and
  - recognising the distinct needs of older detainees, such as signs of mental and physical health problems and the onset of dementia and any safeguarding issues.
- There are effective arrangements to raise the awareness of staff to positively respond to the needs of transgender people.
- Inappropriate language and behaviour, if it occurs, is addressed by staff and there is strong leadership to enable a culture of challenge in relation to it. Homophobic, transphobic, racist, sexist and other derogatory language and behaviour is not tolerated.
- There is provision for detainees to access information in a language and format they can easily understand, for example, easy read format, Braille and DVD. Detainees are helped with clear explanations by staff when needed (see expectation 2.5).
- Legal rights and entitlements and other relevant documents are provided in a range of formats, for example in Braille, and in languages which reflect the population in the relevant area.
- Staff use accredited translation and interpreting services where that is needed and, in particular, wherever accuracy or confidentiality is important.
- Telephone translation is conducted using equipment that enables effective communication in privacy.
- Detainees are provided with information about the reason for their detention in custody and, where necessary, have their immigration status and procedures in relation to that status explained in a language/format they can understand.

#### **Expectation – Risk assessments**

2.3 All detainees are held safely and any risk they pose to themselves and/or others is competently assessed and kept under review. Staff recognise they have a positive obligation to intervene to protect detainees from harm to themselves and from others.

- Detainees are not made to wait outside the custody suite in vehicles. There
  is an ongoing risk assessment of all detainees where there is a delay in
  booking in.
- Officers and staff know how to effectively assess and respond to any risk detainees pose to themselves and/or others.
- Officers and staff use all existing up-to-date information about a detainee to complete any risk assessment.
- Officers and staff make sufficient enquiries to ascertain whether there is any additional information about which they should be aware to reduce the risk of harm to the detainee or to others.
- All officers and staff demonstrate awareness and understanding of the different ways in which detainees may present mental health problems and other vulnerabilities and respond appropriately.
- Officers and staff have access to appropriate medical services, and make referrals as appropriate.
- Care plans and observation levels reflect presenting risks, and assessments are ongoing and are reviewed throughout the period of detention in custody.
- Officers and staff have knowledge and understanding of self-harm and how to support detainees at risk of harming themselves or others.
- Staff explain to detainees how to use the cell call bell and activations are responded to promptly.
- Removal of clothing to manage risks is only undertaken subject to an individual assessment, as a last resort, when other options have been considered.
- Officers and staff understand the purpose and importance of regular monitoring and rousing, particularly for those under the influence of drugs or alcohol or who are believed to have concealed drugs internally.
- Handovers involve all custody staff where possible. They are recorded and conducted in private, and result in the accurate sharing of relevant information.

#### Expectations - Individual legal rights

## 2.4 Detention in custody is appropriate, authorised and lasts no longer than is necessary.

#### **Indicators**

- Grounds and necessity for detention are established and recorded, and detention in custody is appropriately authorised.
- Alternatives to custody are considered to avoid unnecessary detention.
- Information on vulnerability and associated risk factors is communicated between custody officers and staff, including investigation teams, to inform decisions on the prioritisation and progression of cases.
- Cases are progressed to allow detainees to be released or transferred at the earliest opportunity.
- PACE reviews are conducted in the best interests of the detainee to ensure that ongoing detention in custody is necessary. They are conducted in a timely fashion and focus on safeguarding the interests of the detainee and progression of the case. Detainees are reminded of the reasons for their arrest and continued detention in custody during the PACE review of the necessity to detain and this is clearly recorded. Border Force officers of an appropriate rank conduct reviews of detention of a person who is vulnerable, including children, in person unless this can be adequately justified.

## 2.5 Detainees understand and receive their rights while in Border Force custody.

- Detainees are provided as soon as possible with sufficient information to understand the reason(s) and necessity for their arrest. This is clearly explained in the presence of the detainee and a written record of this maintained.
- All detainees receive and are helped to understand their rights and entitlements. If there are any reasons to delay issuing a detainees' rights and entitlements there is appropriate written justification and authorisation.
- Detainees are told that they are entitled to have someone concerned for their welfare informed of their whereabouts and that someone can be contacted as soon as possible.
- All detainees are advised that they are entitled to have legal representation
  of their choice or to have independent legal representation provided, and
  that they are able to speak with their legal representatives in private, free of
  charge and as soon as possible. If detainees decline the right to speak to a
  legal representative, the reasons for this are recorded.
- Detainees or their legal representatives are able to obtain a copy of their custody record.

- Staff explain to detainees, in a language they can understand, documents that have important consequences or that concern their rights.
- Detainees are told that they can contact their relevant Consulate, Embassy or High Commission, and are enabled to consult with them on request.
- Detainees are not interviewed while under the influence of alcohol or drugs, or if medically unfit, unless exceptional circumstances prevail; in which case a record is made of those circumstances.

### **Expectation – Complaints**

## 2.6 Detainees know how to make a complaint and are enabled to do so before they leave Border Force custody.

#### Indicators

- Detainees are told how to complain and are provided with relevant information.
- Complaints are taken and recorded before detainees leave custody.
- Detainees' complaints are investigated fairly and swiftly and are monitored, with any significant concerns addressed and outcomes recorded.
- Detainees are not discouraged or deterred in any way from complaining and are not subjected to any form of intimidation or disadvantaged in any way because they have made a complaint.
- Detainees are not discouraged from or disadvantaged in any way as a result of speaking to HMICFRS or HMI Prisons inspectors or other independent visitors to custody. ICVs inform HMICFRS/HMI Prisons inspectors of any repercussions for detainees outside inspections.

#### References

In relation to expectations 2.1 to 2.6: Human rights standards prescribe a range of measures which apply to safeguard the rights of detainees as they arrive in custody and in the early stages of detention. The measures aim to ensure that detainees are treated in a manner that respects and meets their individual needs, that their vulnerabilities (including from detention itself) are identified and met and that they are safe from harm (whether self-harm or from others) from the outset of detention. They also provide that detainees should be provided with and assisted to understand their rights, including: to contact those concerned for their welfare; to seek legal representation of their choice; to speak with their legal representative in private; to speak with other independent persons such as lay visitors; and to complain without fear of adverse consequences. Moreover, nothing should be done to infringe a detainee's subsequent right to a fair trial. The standards also recognise that some people may be too vulnerable to be held in detention and that other lawful options should be explored. See ECHR 2, 3, 5, 6, 8, 9, 10, 14; ICCPR 6, 7, 9, 10(1), 14; ICESCR 12(1); CAT 2, 10, 11, 12, 13, 16; OPCAT 19, 20, 21, 22; CERD 2, 5; CEDAW 2, 12; DEDRB 2, 4; CRPD 14, 21, 22; BOP 1, 2, 5, 6, 9-18, 21, 24, 29, 33,

38, 39; PPMI 1, 2, 20; CCLEO 2, 4, 5, 6; DHRIN 5; BPRL 1, 5–8. In relation to children specifically see CRC 3, 37, 40 and HR 2, 17, 18(a), 75, 76.

## Section 3: In the custody cell, safeguarding and health care

Detainees are held in a safe and clean environment in which their safety is protected at all points during custody.

**Expectation – Physical environment** 

3.1 Detainees are held in a custody suite that is and feels safe, and is in a good state of repair.

#### **Indicators**

- Cells and communal areas are clean, free from potential ligature points and graffiti, of a suitable temperature and well ventilated, with access to natural light. Staff carry out daily cell checks to maintain these standards and records are maintained and monitored.
- All cells are equipped with working call bell systems that cannot be permanently muted. Staff explain to detainees how to use the call bell and activations are responded to promptly.
- There are adequate arrangements in place for daily cleaning, removing any biological hazards, regular deep cleaning, and prompt repair of any defects.
- There are working fire alarms throughout custody. Staff can safely evacuate
  the custody area in the event of an emergency and evacuations are
  regularly practised and recorded.

Expectation - Safety: Use of force

3.2 Any force used from first point of contact is strictly necessary, proportionate and lawful, used as a last resort and subject to robust accountability. It is carried out by trained staff using approved techniques.

- All staff are trained in and use effective de-escalation techniques.
- Where force is used, staff only use approved techniques in line with their training, with no more force and for no longer than is strictly necessary and proportionate.
- Staff can demonstrate awareness of risks associated with particular forms of restraint and of how these risks can be minimised. When force is used detainees are examined by an appropriately qualified health care professional if requested, or if there are health care concerns.
- Detainees in need of mental health care who are restrained for their own or others' safety are treated as a medical emergency.
- Only age-appropriate and approved restraint techniques are used for children. When force is used, children are always examined promptly by an appropriately qualified health care professional.

- Use of force prior to arrival and within custody suites, including the use of control and restraint equipment, is documented within the individual custody record and a separate 'use of force' form is submitted.
- Strip-searching is conducted only when absolutely necessary. It is
  appropriately authorised with a written record of the justification and
  authorisation. It is carried out in private by members of staff of the same
  gender (in the presence of an appropriate adult if required), and is monitored
  at a senior level to ensure appropriate use.
- No child is subject to a strip search unless it is intelligence led, authorised by a senior officer and conducted in the presence of an appropriate adult.

### **Expectation – Detainee care**

#### 3.3 Detainees have their care needs met.

- Detainees are offered sufficient, and varied nutritious food and drink in accordance with their dietary requirements.
- Detainees are able to shower/wash and suitable alternative clothing, including underwear, is available to them.
- Detainees are routinely provided with a clean mattress, pillow and blanket.
- Detainees are offered outside exercise.
- Detainees are routinely offered suitable activities, including reading materials.
- When under surveillance, detainees are able to use the toilet with decency and dignity and toilet paper is readily available.
- Children and other vulnerable detainees are provided with the opportunity to have visits by family members and/or appropriate agencies that can provide support.

## Border Force officers understand the obligations and duties arising from safeguarding (protection of children and adults at risk).

**Expectations – Safeguarding** 

## 3.4 Detainees are protected from harm and neglect. They receive effective care and support.

#### **Indicators**

- Custody staff are trained in safeguarding and have the knowledge required to protect vulnerable groups in their care, including arrangements for contacting appropriate adults and making suitable referrals to partner agencies.
- Current government and local guidance about safeguarding children and adults is accessible and safeguarding procedures are known and used by all staff.
- Those responsible for the welfare of detained children are informed of a child's detention in custody and the grounds for detention at the earliest opportunity.
- Children are kept safe in custody and separate from those who might pose a risk to them. Where it is appropriate to do so, children are not held in cells.
- 3.5 Independent appropriate adult schemes for children and vulnerable adults are in place, operate to relevant national standards and are used.

- The parents or guardians of those under 18 are used whenever they are willing, able and suitable for the role of appropriate adult. They are given written guidance on the role and are encouraged to actively protect the child's rights.
- The regions work actively with local partners to ensure the provision of independent, effective and suitably vetted appropriate adults for children and vulnerable adults.
- There are no delays in securing an appropriate adult and they are available 24 hours a day.
- Adequate facilities are available to ensure that appropriate adults can speak
  to children or vulnerable adults in private and to remain with them if the
  appropriate adult considers this is necessary to ensure their welfare.
- The central custody directorate collects data in relation to the provision of appropriate adults including those who performed the role (for example, parents/guardians and social workers). The data includes waiting times and which aspects of the process they were present for, and is collated and analysed to assess whether the service is meeting the needs of children and vulnerable adults.

3.6 Children are kept safe in custody and are treated according to their needs. They are held for the minimum time possible and not overnight, except as a last resort.

- Children are diverted from custody where possible.
- Staff understand and respond to the distinct needs of children. They
  recognise levels of maturity and how physical, sexual and emotional abuse
  and exploitation might affect a child's behaviour and any subsequent
  decisions taken about their care and welfare.
- Risk assessments are based on all relevant information. Particular attention is given to recognised risks associated with:
  - looked-after children
  - disabilities, including intellectual impairment (learning disabilities), communication difficulties, health conditions and substance misuse
  - a previous history of abuse
  - those in custody for the first time
  - child sexual exploitation
  - human trafficking.
- Children are kept safe in custody and separate from those who might pose a
  risk to them. Where it is appropriate to do so children are not held in cells
  and are offered age-appropriate suitable activities.
- Children are returned home to their parent/guardian. Where this is not
  possible and/or there are safeguarding concerns, there are effective
  arrangements with the local authority that cover the provision of accessible
  safe accommodation for children.
- Girls under the age of 18 are allocated and informed of the identity of a named female officer who is responsible for meeting their welfare needs while detained in custody.
- Custody officers actively seek to minimise the time children spend in custody and if investigations cannot be progressed they promptly consider alternatives to custody.

Detainees have access to competent health care practitioners who meet their physical health, mental health and substance use needs in a timely way.

**Expectation – Governance of health care** 

3.7 Detainees are cared for by competent health care practitioners in a safe, professional and caring manner that respects their decency, privacy and dignity.

- The requirement for health services for detainees in Border Force custody is assessed and the services provided are appropriate to need.
- Accountability and contract monitoring arrangements consider the impact any breaches of performance have on detainee health outcomes.
- Clinical governance arrangements are robust and effective, including
  partnership working between Border Force and health providers, incident
  management, information sharing, a confidential health complaints process,
  monitoring of response times for all health services and patient outcomes
  and processes to improve provision based on lessons learned.
- Detainees are treated by health care practitioners who receive ongoing training, supervision and support to maintain their professional registration and development.
- Health care practitioners have the skills, knowledge and competences to meet the health care needs of all detainees.
- Health care practitioners are sensitive to detainees' situations and diverse needs and have access to professional interpretation services.
- Information sharing protocols exist with appropriate agencies to ensure efficient and confidential sharing of relevant health and social care information.
- Clinical examinations are conducted confidentially unless risk assessment suggests otherwise.
- Clinical rooms provide conditions that maintain decency, privacy and dignity.
- Clinical facilities are fit for purpose and meet required infection prevention and control standards.
- Providers of health services have registered with the relevant regulatory authorities as required.
- All first aid equipment (including the resuscitation kit) is appropriate, ready for use and regularly checked and maintained, and staff understand how to access and use the equipment effectively.

#### **Expectations – Patient care**

3.8 Detainees are advised that they have a right to see a health care practitioner, are able to request to see one at any time for all their needs, and are treated appropriately in a timely manner.

#### **Indicators**

- All detainees who are held in Border Force custody are seen promptly by a health care practitioner.
- Arrangements to gain and review patient consent are appropriate. When
  patients lack mental capacity to make a decision, health professionals make
  'best interests' decisions in accordance with legislation.
- Interventions are appropriate to the clinical needs of the detainee and are in line with national guidance.
- Detainees can see a health care practitioner of the gender of their choice on request. There are arrangements for a chaperone to be present if required.
- Health professionals monitor patients for adverse effects on health and wellbeing linked to prolonged detention in custody, and implement appropriate plans of care to counteract this.
- Each patient has a single clinical record which meets contemporary recordkeeping and storage standards.
- Information is shared within the bounds of medical confidentiality to promote continuity of care and maintain patient safety.
- Health care professionals liaise with other agencies, as necessary, to ensure continuity of care.
- 3.9 Detainees receive prescribed medication if needed and, subject to validation, detainees can continue with previously prescribed medications.

- Detainees are prescribed and receive medication promptly.
- Detainees are, where indicated, monitored for signs of withdrawal, receive medication to provide relief for drug and alcohol withdrawal symptoms if clinically indicated, and can continue community prescribed opiate substitution treatment in custody, subject to validation.
- Detainees who smoke have prompt access to nicotine replacement treatment.
- Medications are administered at clinically appropriate times by competent staff and appropriate records are made.

- All medications (including detainees' own) are stored safely and securely, and are disposed of safely if not consumed. There is safe pharmaceutical stock management and use.
- Detainees who are due prescribed medication and are being transferred to court custody receive their medication and have safe access to adequate ongoing treatment while at court.

#### **Expectation – Mental health**

3.10 Detainees have prompt access to mental health practitioners who are able to assess their clinical needs, divert/refer to mental health services and/or advise on treatment as necessary.

#### **Indicators**

- Border Force officers and staff receive regular training on mental health, personality disorders and learning disability issues, including identification of such issues and how to support detainees who are experiencing problems.
- All staff involved in the care of detainees, including health professionals, are cognisant of the potential adverse impact of prolonged detention in custody on mental health and well-being and take appropriate action to mitigate this.
- There is a clear mental health referral pathway that ensures prompt assessment, appropriate support and continuity of care during detention in custody and on release.
- Detainees who require assessment or treatment under the Mental Health Act are assessed and transferred promptly.

#### References

In relation to expectations 3.1–3.11: Human rights standards require detainees to be held in safe and sanitary conditions that pay due respect to their dignity and do not adversely affect a detainee's mental or physical well-being. Detainees' health care needs must be considered. There is a positive obligation to protect detainees from harm, including self-harm, while also giving due weight to the detainee's other rights, such as the right not to be subjected to inhuman or degrading treatment or punishment and the right to privacy and personal autonomy. The duty to protect from harm does not permit unnecessary or disproportionate infringements of other rights. See ECHR 2, 3, 8; CAT 2, 10, 11, 12, 13, 16; OPCAT 19, 20; ICCPR 6, 7, 10; ICESCR 12(1); CRPD 3, 13, 14, 15–17, 21, 22; CEDAW 2, 12; CCLEO 2, 3, 6, 7; BOP 1, 5, 6, 19, 24, 26, 28, 29; BPUFF 1, 4–6, 18, 19; PME 1; PPMI 1, 2, 20. In relation to children specifically see CRC 3, 6, 37 and HR 1, 17, 18, 85.

## Section 4: Release and transfer from custody

Pre-release or transfer arrangements reflect all risks identified during the detainee's stay in custody. Detainees are offered and provided with advice, information and onward referral to other agencies as necessary to support their safety and well-being on release. Detainees appear promptly at court in person or by video.

**Expectation – Pre-release or transfer arrangements** 

## 4.1 Arrangements are in place for ensuring detainees are released or transferred safely.

- Good quality pre-release risk assessments are completed with the detainee: they are documented and identify any risks and vulnerability throughout the detainee's period of detention. Action is taken to reduce any risks and welfare concerns prior to release, and particular attention is given to safely managing the release of vulnerable detainees.
- Appropriate relevant information about risk, vulnerability or safeguarding is communicated to relevant agencies and support organisations.
- There is up-to-date information, including contact details for support organisations, and this is provided to detainees in a format and language they can easily understand.
- When a detainee is to be released under investigation, this is fully explained to them.
- Where a detainee is to be bailed, they are transferred to a police station at the earliest opportunity.
- Detainees who are transferred to and from police stations for charging purposes are dealt with expeditiously.
- There are effective arrangements with Home Office immigration enforcement to ensure that the transfer of detainees to immigration detention is expeditious. Detainees are not transferred to immigration detention without proper authorisation.
- For detainees transferring to other agencies, person escort records (PERs) are completed clearly and accurately with all relevant detail, especially any issues relating to risk or self-harm, and are shared with the relevant agencies.
- Detainees who are being transferred to and from custody facilities are escorted safely and with consideration to their individual needs.

### **Expectation – Courts**

## 4.2 Detainees who are required to appear in court do so promptly either in person or via video link.

#### **Indicators**

- Detainees required to appear in court either in person or via video link do so in a timely manner and are not held in Border Force custody for longer than is necessary.
- Detainees appearing at court in person and via video link are suitably dressed.

#### References

In relation to expectations 4.1 and 4.2: Human rights standards require consideration be given to a detainee's need for assistance on release, including health needs. In addition, detainees' right to a fair trial must be protected and nothing done that might interfere with due process. Detention should be for the shortest possible duration. See ECHR 2, 3, 6, 8; ICCPR 9, 10(1), 14; ICESCR 12; CCLEO 2, 6; BOP 1, 6, 13, 36, 37, 38, 39; PPMI 1, 2, 20; PME 1. In relation to children specifically see CRC 3, 37(d); HR 17.

## Glossary of acronyms

**BOP** Body of Principles for the Protection of all Persons under any Form of

Detention or Imprisonment

**BPUFF** Basic Principles on the Use of Force and Firearms by Law

Enforcement Officials

**BPRL** Basic Principles on the Role of Lawyers

CAT United Nations Convention against Torture and other Cruel, Inhuman

and Degrading Treatment or Punishment

**CCLEO** Code of Conduct for Law Enforcement Officials

**CEDAW** Convention on the Elimination of All Forms of Discrimination against

Women

**CERD** Convention on the Elimination of all Forms of Racial Discrimination

**CRC** Convention on the Rights of the Child

**CRPD** Convention on the Rights of Persons with Disabilities

**DEDRB** Declaration on the Elimination of all Forms of Intolerance and of

Discrimination based on Religion or Belief

**DHRIN** Declaration on the Human Rights of Individuals who are not Nationals

of the Country in which they live

**DRM** Declaration on the Rights of Persons Belonging to National Minorities

or Ethnic, Religious and Linguistic Minorities

**ECHR** European Convention for the Protection of Human Rights and

**Fundamental Freedoms** 

ICCPR International Covenant on Civil and Political Rights

ICESCR International Covenant on Economic, Social and Cultural Rights

**HR** United Nations Rules for the Protection of Juveniles Deprived of their

Liberty (known as the Havana Rules)

**OPCAT** Optional Protocol to the UN Convention against Torture and other

Cruel, Inhuman and Degrading Treatment or Punishment

**PME** Principles of Medical Ethics relevant to the Role of Health Personnel,

particularly Physicians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or

Punishment

**PPMI** Principles for the Protection of Persons with Mental Illness and the

Improvement of Mental Health Care