

# Behaviour Management

## Serco Immigration Services

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## 1. Introduction

### 1.1 Policy

Serco is committed to providing safe, well-ordered and decent immigration facilities. Staff are recruited and trained to encourage constructive, respectful and meaningful relationships with Detainees in all immigration detention facilities. Staff are expected to use their skill and influence to motivate and engage with Detainees to create and maintain decent, safe, respectful, culturally sensitive and well ordered detention environments.

Serco recognises that Detainees may experience complex emotions whilst in detention, which may result in stress, trauma, extreme anxiety or other psychological conditions. Serco must work collaboratively with partner organisations to address and support Detainees through this period. Fundamental to this is Serco's ability to offer an environment sensitive to the needs of the individual, balanced with the necessary processes to maintain a safe and secure environment for all who live or work in, or visit the facilities.

For the purposes of this PPM, good order is defined as:

*A variable state of the immigration detention facility where the mood of the Detainees in detention and the security of the facility is within acceptable parameters. The good order should be conducive to the welfare of the Detainees, visitors, staff from Serco, DIBP, IHMS and other service providers, and ensure that risk to these cohorts is appropriately minimised.*

Detainees in detention may sometimes behave in a manner that does not support good order and may take part in activity which threatens, harms or affects good order, or has the potential to do so. Serco will work collaboratively with partner organisations in assessing the motivations for and most appropriate method to manage such behaviours.

This policy sets out the procedures for maintaining good order, balanced with the range of interventions to promote and support positive Detainee engagement and behaviours.

This document provides guidance to all immigration facilities on how to manage people in detention who regularly display behaviour that does not support the good order of the immigration facility.

#### 1.1.1 Healthy Centre Framework

The Healthy Centre Framework represents Serco's benchmark of decent, safe and equitable facilities for all Detainees held in our care.

Our measures complement and support the three key service delivery and Immigration values:

- Respect for human dignity
- Fair and reasonable treatment within the law
- Appropriate services

A Healthy Centre is assessed against the following measures:

- **Safety:** Detainees are held in safety with due regard to the insecurity of their position.
- **Respect:** Detainees are treated with respect for their human dignity and the circumstances of their detention.

- **Purposeful:** Detainees are able to access a range of Programs and Activities which as far as possible reflect their individual needs providing meaning and purpose to their use of time whilst in detention.
- **Preparation for discharge/transfer or removal:** Detainee expectations are shaped realistically with regard to independent living and citizenship values. Detainees are able to maintain contacts with family, friends and others in preparedness for discharge, removal or transfer.

All behaviour management processes will be executed in line with the Healthy Centre Framework.

## 1.2 Related Documents

- Detention Services Manual Chapter 8 – Safety & Security Placement in a Correctional Facility
- Individual Management Plan PPM (SIS-OPS-PPM-0020)
- Personal Officer Scheme PPM (SIS-OPS-PPM-0011)
- Keep SAFE / PSP SME PPM (SIS-OPS-PPM-0001)
- Detainee Placement PPM (SIS-OPS-PPM-0051)
- Facilities Security Services Plan (SIS-OPS-DOC-0009)
- Programs and Activities PPM (SIS-OPS-PPM-0027)

## 1.3 Related Forms

- Request to Transfer Detainee to a Secure Facility (SIS-OPS-FRM-0013)
- Behaviour Management Plan (SIS-OPS-FRM-0012)
- Individual Management Plan (SIS-OPS-FRM-0030)
- Keep SAFE / PSP SME Documents

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP

## 2. Procedures

### 2.1 Early identification and accurate recording of incidents

It is imperative that Serco officers work in partnership with IHMS, DIBP Case Managers and Detention Operations, to identify and address Detainee behaviour before it escalates to a position where the good order of the facility is threatened or undermined and detainee safety and well-being potentially compromised. This should be addressed through the Detainee's Individual Management Plan (IMP) in the first instance.

It is the responsibility of all Serco staff to report and accurately record in the Portal all instances when a Detainee's behaviour is such that it threatens or undermines the good order of the immigration facility. It is also the responsibility of Serco staff to provide dynamic security measures which includes analysing incidents occurring in their facility, identifying trends and potential motivations and providing options for the resolution of issues. The early identification of issues and motivations can assist stakeholders to work together to formulate a response which can assist in resolving issues before they escalate.

### 2.2 High Needs Detainees

The requirements for the management of High Needs Detainees are detailed in the Complex Case Review PPM. Only the DIBP Contract Administrator can classify an individual as a High Needs Detainee.

### 2.3 Supporting Detainees who display anti social behaviour

#### 2.3.1 Examples of anti social behaviour

Behaviour likely to threaten or undermine the good order of the facility includes but is not limited to the following:

- any form of violence toward Detainees, staff or visitors. This includes physical violence; threats of any kind; bullying, intimidation and harassment
- possession of weapons or illegal drugs
- wilful damage to detention facility property
- misuse of IT facilities
- interfering with another Detainee's property without permission
- use of illegal drugs
- displaying or distribution of pornographic material
- sexual humiliation or abuse
- brewing and / or the consumption of alcohol
- discharging of fire extinguishers.

Serco staff who witness Detainees behaving in a manner not conducive to the maintenance of good order should address and challenge the behaviours immediately with the Detainee in a clear and non- confrontational manner to defuse the situation. The information must be incorporated into the Detainee's IMP and addressed accordingly.

A Behaviour Management Plan (BMP) should not be used to address any behaviours which have not already been addressed with the Detainee and detailed in their IMP. However, it is recognised that there may be occasions when a Detainee's behaviour deteriorates rapidly or is so negative that a BMP is warranted without having previously discussed and documented the behaviours through the Individual Management Plan.

### 2.3.2 Clinical Assessment

It is essential that a Detainee demonstrating unacceptable behaviours is referred to IHMS for review in the first instance to determine if there are any underlying mental health vulnerabilities and how best the Detainee can be assisted in managing their behaviour. If it is determined that the behaviour is not indicative of mental health vulnerabilities, a BMP must be developed using any feedback from the Health Services Provider to address the specific Detainee behaviour. Use of a BMP is inappropriate where IHMS determine that the individual may be experiencing mental health vulnerabilities. In such circumstances staff should work with IHMS to develop plans for appropriate Detainee support which must be recorded in the Individual Management Plan (IMP), however guidance from IHMS must be followed in such circumstances.

If a BMP is considered appropriate, IHMS will provide advice relating to:

- pre-existing conditions and vulnerabilities
- the appropriate level of IHMS support and engagement required
- actions that may be effective in managing behaviours

### 2.3.3 Following Clinical Assessment

The following procedure must be completed for all Detainees who continue to demonstrate any of the above behaviours despite being challenged by staff, if it has been established that the behaviour is not indicative of underlying mental health vulnerabilities.

A BMP based on incentives and consequences should be developed within 48 hours of the Detainee displaying antisocial behaviour that has already been challenged, with input from the Personal Officer, IHMS, the DIBP Centre Manager and Case Manager(s). It is imperative that all stakeholders be consulted in the creation of the BMP. The potential consequences should the Detainee choose not to take responsibility for their behaviour and adhere to the BMP must be clearly explained. The Detainee should be involved in the creation of the plan and be given the opportunity to sign the BMP.

To ensure the Detainee fully understands the implications of agreement to the plan, an interpreter is to be involved in this process as required with the interpreters signature also required on the BMP

While the Detainee remains on a BMP, IHMS will continue to monitor the Detainee's mental state as clinically indicated or as required, but no less than on a weekly basis. IHMS will share with Serco all pertinent information to enable Serco to appropriately manage the individual. Serco will record all such guidance on the BMP.

## 2.4 Management of illegal activities

The DIBP Regional Manager should be advised and the police contacted if Detainees are seen to be engaging in illegal activities. Staff must record accurately all incidents on the Service Provider Portal within appropriate reporting timescales.

The following are examples of illegal activities. This list is not comprehensive:

- Personal use or distribution / sales to any person, of illegal substances
- Personal use or distribution / sales to any person, of controlled substances when not entitled to them
- Downloading and the distribution of paedophilic material
- Inciting any person to violence
- Inciting any person to riot
- Arson
- Inciting Detainees, staff or visitors to commit arson
- Attacking any person
- Causing physical damage to the facility

## 2.5 Who develops a Behaviour Management Plan

Centre Manager / Team Leaders are responsible for ensuring that the appropriate Serco officer leads the development of a BMP, in conjunction with other stakeholders. This will usually be the Operations Manager, or CSM of the Detainee's residence area, or equivalent in a smaller facility, with significant input from the Detainee's Personal Officer.

Where Detainee behaviour has the potential to significantly affect the good order and security of the facility, or forms part of a large-scale incident with group associations, consideration should be given to the most senior security officer assuming responsibility for the development, review and management of the BMP in line with risk assessments.

When developing a BMP, Serco staff should be cognisant of any issues that may have influenced or encouraged the negative behaviour by the Detainee. Ideally, a meeting between all relevant stakeholders should be called to discuss the Detainee's BMP; if this is not possible, as a minimum Serco staff must consult with the following in the development of the plan:

- DIBP Centre Manager and Case Manager(/s), and Detention Operations as necessary
- Serco staff who witnessed the Detainee's behaviour
- IHMS

**Note:** IHMS must have already been consulted by this juncture, as described at paragraph 2.3.2 above.

All feedback from stakeholders, including the Personal Officer, should be included in the BMP where appropriate and applicable. BMP authors must exercise caution to include only information that is suitable for disclosure to the Detainee.



## 2.6 How to develop a Behaviour Management Plan

The purpose of the BMP is to support the Detainee in addressing any specific behaviours that threaten to undermine the good order of the facility. BMPs should include:

- the background to the behaviour management difficulties
- action that has been taken to modify the behaviour
- details of the more interventionist or restrictive measures then in place and contemplated for future enforcement (if required);
- an undertaking that the Detainee will improve their behaviour in the future
- milestones / clearly defined timescales at which the Detainee's behaviour is to be reassessed
- a review by the IHMS manager of any medical, psychological or psychiatric assessment and recommended treatment implications, and incorporate recommendations
- record of any consultation conducted with the DIBP Case Manager
- access / restrictions to discretionary amenities
- SMART objectives for the Detainee to achieve (Specific, Measurable, Achievable, Realistic, Time-bound)
- detail of support that the Detainee will receive in achieving their objectives, including the frequency of interactions regarding progress
- access to visitors – this can only be restricted if preapproved by DIBP and access to visitors cannot be removed entirely; Detainees must have access to their visitors on a daily basis.
- Signatures of all parties involved in developing the BMP, including the Detainee, noting the BMP is still to be considered in effect if the Detainee refuses to sign

A Detainee's BMP must include activities which might assist the Detainee in improving the specific behaviour detailed in the BMP e.g. attendance at relaxation sessions. The schedule, frequency and timescale for these activities should be detailed in the BMP. BMPs must not include activities to which the Detainee does not have ready access.

The BMP is intended to be used for the shortest period of time to address specific behaviours and therefore Detainees must be able to achieve the agreed objectives, within the agreed timeframes, through access to amenities or services available within the facility.

The Detainee concerned should be advised that continued behaviour of the type being addressed might result in one or all of the following:

- extension of the BMP
- loss of access to discretionary amenities
- counselling from a senior staff member
- use of curfews
- removal to a place of more restrictive accommodation
- referral to Police
- transfer to an alternative facility
- transfer to a correctional facility

In the presence of an interpreter, the Detainee should be advised that behaviour that amounts to illegal or criminal behaviour will result in the police being informed and possible legal action being taken against them. Detainees should be reminded of the Australian Government's position on illegal behaviour in immigration facilities.

The frequency of interactions will be determined by the stakeholders involved in the development of the BMP. These interactions are key in supporting the Detainee in achieving their objectives and should be detailed in the appropriate section of the BMP. It is imperative that interactions are not simply recorded as 'observations'. The purpose of the interaction is to coach and motivate the individual in achieving their objectives; merely noting the individual's current activities is not sufficient.

Should the Detainee choose not to sign the BMP, Serco will continue to treat the BMP as being in effect.

## 2.7 Detainees under the age of 18

### 2.7.1 Unaccompanied minors (UAMs)

The same processes as outlined above should be utilised for supporting UAMs who display anti social behaviour. The Department has delegated guardians under the IGOC Act and they should be consulted as part of this process. Additionally, their carers should be included in the development of the BMP and be involved in strategies to address the behaviour.

### 2.7.2 Accompanied minors

Where an accompanied minor displays antisocial behaviour, Serco must address this collaboratively with the individual's parents or guardians. Serco must not undermine parental or guardian responsibility, through addressing behaviour outside of the family structure. All guidance and feedback should be noted in the IMP of the parents/guardians.

## 2.8 Review of Behaviour Management Plan

### 2.8.1 Review of Individuals

The BMP should be reviewed at least weekly with the Detainee by the responsible Serco officer.

The purpose of the review of the BMP is to:

- identify issues which prevent the Detainee from meeting the agreed milestones
- ensure the Detainee is compliant in attending the agreed schedule of activities if applicable
- take into account any issues that were not apparent when first developing the BMP.

The responsible Serco officer should seek feedback from all stakeholders prior to reviewing the plan with the Detainee. All feedback should be recorded on the review sheet. As many copies of the BMP review page as are needed should be included in the BMP to facilitate all appropriate reviews.

Reviews of the Detainee's BMP should be provided within one business day of the review to the Detainee, and copied to the Detainee's dossier, to DIBP and to IHMS.

## 2.8.2 Review of Group Action

Where BMPs have been created for multiple Detainees for the same good order issues or as part of large-scale incident with group associations, the BMPs should be subject to additional review by the local senior management team (SMT) to ensure:

- Interconnectedness issues have been identified and addressed
- Lesser antagonists have been identified with a view to disengaging them from the action at the earliest opportunity
- Planning has occurred to return the Detainees to their normal routine as soon as possible
- All governance associated with the management of the BMP is in order

The BMP will be the primary management document for the Detainee's behaviour during this period and the reviewing officer will make updates, in conjunction with the Personal Officer, to the Detainees IMP referencing the BMP, actions and milestones met.

## 2.9 Portal Reporting Requirements

If a Detainee has a BMP opened, the 'Behaviour Management' objective must be created in Portal, with a scanned copy of the BMP uploaded as an attachment. Each subsequent review of the BMP will also be scanned and added as an attachment.

All mandatory verbal and Portal reporting requirements must be satisfied for any reportable incident, regardless of whether the Detainee has an active BMP.

### 3. Detainee Placement Options

#### 3.1 Placing a Detainee in a restrictive place of accommodation

Moving a Detainee to a different area of the facility may serve several functions:

- It may provide an opportunity for that Detainee to receive extra support and counselling in order to assist them in modifying and reflecting on their behaviour
- It may allow them to have a break from their environment which may serve to assist in reducing any frustration they may be experiencing and to develop more appropriate strategies to help them cope in the future
- It may provide respite for other Detainees in the area if an individual has been displaying consistently anti-social behaviour.

The opportunity should be taken to engage with the Detainee away from the pressures he / she may be experiencing in their normal area of residence, to try to counsel the individual to effect a positive change in their behaviour.

Input from IHMS must be sought on moving a detainee to a place of restrictive accommodation as a part of the BMP review process.

The approval of the DIBP Regional Manager must be obtained prior to placing a Detainee in a place of restrictive accommodation.

While the Detainee remains in a restrictive place of accommodation Serco is contractually obliged to:

- support and engage with the Detainee on a daily basis
- maintain accurate records of the Detainee's behaviour, health and well being
- record the Detainee's behaviour, health and wellbeing in the DIBP portal on a daily basis
- develop a further BMP.

Information must be provided to DIBP Detention Operations as requested as to whether Serco is requesting a further / continued placement of the Detainee in the restrictive place of detention.

Where a Detainee is placed in restrictive or separation detention as directed by the Department or in accordance with an order from a Court of competent jurisdiction, then any additional staffing costs will be payable at the additional monitoring variable rate specified in Schedule 5 (Detention Services Fee) of the Facilities and Detainee Services Contract 2014.

#### 3.2 Process for requesting the transfer of a Detainee to a more secure / alternative Immigration Detention Facility

Should the Detainee's behaviour escalate to a point where the good order of the facility is undermined, the Centre Manager / Team Leader may seek the Detainee's transfer to a more secure immigration detention facility, such as VIDC (Blaxland), MIDC or PIDC.

The motivation for the Detainee's unacceptable behaviour must be examined prior to requesting this transfer. Wherever possible antisocial behaviour caused by frustration at being in a remote location should not be responded to with a transfer to a metropolitan facility, as this sets a precedent of rewarding antisocial behaviour with the Detainee's desired outcome.

Furthermore, transfer to an alternative facility may only be for a short period of time as detailed in the BMP and if agreed, there is a high probability that the individual will be returned to the original facility in due course.

The transfer decision can only be made by DIBP. The following steps should be followed to pursue this transfer request.

- If applicable at the facility, Serco should discuss their intent to request the transfer of an individual at the Detainee Placement Meeting prior to submitting the formal request. This is courteous, ensures transparency and allows DIBP case management and Detention Operations to contribute their views if desired.
- Contact must be made with the proposed receiving facility. Information relating to how the receiving facility will support the Detainee in achieving the desired behavioural changes should be included in the submission to DIBP.
- The Request for Transfer to a more secure facility should be completed and emailed to the DIBP Centre Manager, copying in the Serco National operations group.
- The request should include:
  - Reasons why transfer is requested such as:
    - a. Details of risk detainee presents that cannot be managed at current facility
    - b. Details of detainee links / associations / community ties which increase risk at current facility
    - c. Details of specific infrastructure concerns which increase risk at current facility
  - Details of how a transfer to the proposed alternative facility will mitigate the identified risks
  - Details of actions which may be required to mitigate the risk posed should the Detainee remain at the original facility
- If after 48 to 72 hours (timescale depending on Detainee manageability), the DIBP Centre Manager fails to respond, the request will be raised at a national level with DIBP, by the National operations group.
- If a transfer is to occur, a report containing all relevant information and BMPs, must be forwarded to the receiving facility, prior to the Detainee's arrival. Where possible a teleconference should be arranged between the author of the BMP at the sending facility and their counterpart at the receiving facility to ensure full information disclosure and to address any queries held by the receiving facility.

See Appendix C for a Request for Transfer. (SIS-OPS-FRM-0013)

### 3.3 Process for requesting the transfer of a Detainee to a correctional facility

A temporary transfer to a correctional facility may occur in circumstances where the detainee's presence is considered to pose a significant risk to the good order and security of the facility. The reasons for transfer should be clearly noted in the Detainee's records. In this latter case, the transfer should only occur:

- for purposes of maintaining the safety and good order of the detention facility

- as a last resort and
- for the shortest time practicable

The following procedure must be followed for those Detainees who display illegal and or criminal behaviour that undermines the good order of the immigration detention facility.

1. The Centre Manager / Team Leader must immediately advise the DIBP Centre Manager of the nature of the illegal or criminal behaviour which undermines the good order of the immigration facility and a history of the Detainee's previous behaviour as recorded.
2. The Centre Manager / Team Leader or their representative must provide to the Serco National operations group and the Serco Regional Manager the following information:
  - a. Detainee details, including name, date of birth, ethnicity, time in detention
  - b. Detainee Service ID
  - c. Record of anti-social and / or illegal behaviour
  - d. Recommendation that the Detainee be removed to a correctional facility, including justification of why the Detainee's continued presence in the IDF threatens the good order of the facility, and the safety and security of other Detainees, staff and visitors to the IDF
3. In line with the DIBP Detention Services Manual, the National Operations Group will draft a letter of recommendation to the DIBP Regional Manager. This is to be provided to the Centre Manager / Team Leader for their signature and sent to the DIBP Regional Manager.
4. Should no action in support of the recommendation be taken within three days, the National operations group will send a letter recommending the removal of the Detainee to a correction facility to DIBP nationally.

# Case Management

## Serco Immigration Services

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## 1. Introduction

### 1.1 Policy

Case Management in Immigration Detention Facilities (IDFs) is primarily a Department of Immigration and Border Protection (DIBP) responsibility.

All Serco staff will contribute and assist with this process as required by Serco management. All Serco staff will play an active and positive role in the management of the Detainee. The Serco Individual Management Plan (IMP) and Personal Officer processes will contribute to the qualitative outcomes of DIBP Case Management actions.

This policy provides detail of Serco's responsibility to cooperate with DIBP Case Managers in ensuring that Detainees are managed in a holistic way and in accordance with the National Case Management Framework.

### 1.2 Related Documents

- Personal Officer Scheme PPM (SIS-OPS-PPM-0011)
- Individual Management Plan PPM (SIS-OPS-PPM-0020)

### 1.3 Related Forms

- Individual Management Plan Form (SIS-OPS-FRM-0030)

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP (PAM), DIBP
- National Case Management Framework, DIBP
- Detainee Placement Model, DIBP

## 2. Procedures

### 2.1 DIBP Case Management

The DIBP approach to Case Management is documented in their *Case Management PAM*, and *National Case Management Framework*.

DIBP defines Case Management as a service delivery approach to holistically manage Detainees, particularly those who have complex circumstances and/or are vulnerable.

Case Management is characterised by the early identification of vulnerable Detainees or those with complex circumstances, and the individualised and proactive provision of services to Detainees through coordination, integration and management of services drawn from key service providers.

Case Managers do not advocate for a particular immigration outcome on behalf of Detainees, do not make immigration decisions, and do not actively service Detainees' needs themselves. The role of Case Managers is to ensure that work on each case is being undertaken by all relevant parties in a coordinated, logical and planned way, with a focus on achieving an immigration outcome

Case Managers document this individualised and active provision of services in a case or service plan based upon a comprehensive assessment of a Detainee's needs, determined in consultation with them.

Other key requirements of Case Management from the DIBP perspective are that it:

- Ensures that Detainees are managed in a fair, lawful, reasonable and timely manner
- Ensures a complete Detainee view across multiple service providers
- Provides clear actions and review timeframes for all identified services
- Provides clear lines of accountability for managing Detainee outcomes
- Fully involves Detainees and carers/service providers in the development of actions
- Seeks to provide seamless service delivery for the Detainee
- Monitors both the immigration and health and welfare outcomes for Detainee

The Case Management Framework has been developed specifically to:

- Assign responsibility for ensuring that an immigration outcome is reached for a Detainee
- Enable the timely identification of possible immigration pathways for a Detainee
- Ensure that all options and services applicable to a Detainee's circumstances are identified from the outset
- Identify all the service providers (internal and external) that are linked to a Detainee
- Coordinate, integrate and actively manage the Detainee's case to ensure that service providers are progressing their aspect of a case according to the schedule and goals outlined in the Detainee's case plan
- Escalate the case where there is limited progress and/or barriers to resolution of the immigration process
- Maintain a holistic and up-to-date view of what is happening with a Detainee
- Enable a Detainee's case to be reviewed regularly, ensuring its timely progression to an appropriate immigration outcome and that it is under control

- Pinpoint gaps in available services and, where possible, facilitate alternative services

## 2.2 DIBP Case Management Team

The DIBP Case Management Team is responsible for:

- Undertaking a comprehensive assessment of the Detainee's circumstances in respect of their immigration history, health and welfare situation and personal circumstances
- In consultation with key business stakeholders, set out in the Case Plan the expected immigration pathway, key events and anticipated milestone dates, along with the services needed to move the Detainee to an immigration outcome
- Coordinating services for the Detainee by drawing on the available services needed to achieve an immigration outcome, noting that case manager is not a direct service provider
- Providing appropriate support to ensure a Detainee proceeds expeditiously towards an immigration outcome
- Intervening, escalating and resolving relevant issues where appropriate
- Reviewing their cases regularly
- Ensuring key decisions, and progress towards decisions, are communicated by relevant business staff to a Detainee in the most appropriate way (e.g. decisions to release from detention, decisions around granting and refusing visas, decisions of merits and judicial review bodies, ministerial intervention decisions)
- Documenting key decisions and the progress of a case
- Responding to requests from elsewhere in DIBP for information about a case.

If a Detainee wishes to see a Case Manager he or she can:

- Complete a Detainee Request Form asking to speak to a Case Manager
- Approach a Case Manager within the facility
- Ask Serco staff to contact a DIBP Case Manager on their behalf. Serco staff should advise the Detainee that it is the Department's preference for Detainees to access Case Managers during routine facility visits, or via formal Request Forms in order that requests may be officially documented. However, Serco will assist with these processes if required.

## 2.3 Case Management Meetings

A series of formal meetings will occur to enable DIBP Case Management processes, including:

- Security Review Meeting
- Psychological Support Program case conferences
- Individual Management and Placement Review Meetings
- Detainee Consultative Meeting

## 2.4 Serco Responsibilities

Serco notes that the responsibility for case management rests with the Department. The broad role of Serco personnel will be to support, assist and facilitate these processes.

To support and ensure the success of DIBP Case Management and the realisation of the expected outcomes, Serco staff will:

- Provide a safe, secure and humane environment in which DIBP Case Management can be fostered, particularly for the vulnerable
- Have an understanding of the objectives, structure and processes of DIBP Case Management
- Create and maintain Individual Management Plans (IMP) for all Detainees based on assessed needs and behaviours
- Ensure, through effective communication and the timely exchange of information and documentation, that Serco's endeavours for the Detainees are in accordance with their IMPs and integrated with DIBP's Case Management directions and priorities
- Maintain records of all Case Management related meetings chaired by Serco
- Maintain accurate, timely and comprehensive Case Notes and documentation of all interactions with the Detainees
- Establish a cooperative relationship with DIBP staff
- Provide a safe and secure environment in which DIBP staff can undertake daily walk-throughs of accommodation
- Maintain daily contact with Detainees and be accessible to them
- Maintain awareness of the Detainees, their circumstances, wellbeing and behaviour
- Follow through on all commitments made to a Detainee
- Ensure that the execution of their duties support the efforts of the DIBP Case Managers
- Provide timely and accurate information to ensure DIBP Case Management Team members are able to complete high quality Case Management Assessments
- Provide support to Detainees in accessing their Case Managers
- Ensure that Detainees are informed of the complaints management system.
- Create opportunity through the Personal Officer Scheme and Individual Management processes, for delivery of a comprehensive and integrated approach to Detainee welfare and that maximum collaboration and synergy between Serco staff and the Case Management service is enabled.
- Ensure that Detainees understand Serco's service delivery responsibilities and how they differ from those of the Case Management service, including ensuring Detainees are aware that Serco are the primary contact point for all security, and accommodation and care related queries and concerns.
- Not provide advice to Detainees on immigration related matters, including immigration status and/or decision outcomes.

# White Compound Active Management

<b>Document:</b>	White Compound Active Management
<b>Type:</b>	Operating Procedure
<b>Applies To:</b>	White One & Two Compounds – Christmas Island IDC
<b>Owner:</b>	Serco SMT - CI
<b>Date Approved:</b>	1 July 2015
<b>Version:</b>	6.0

## Introduction

### Philosophy

The Christmas Island Immigration Detention Centre (CIIDC) has safe and secure infrastructure that allows Serco, Australian Border Force (ABF) and International Health and Medical Services (IHMS) staff to work individually and in groups with detainees who have elevated and enhanced monitoring needs. The infrastructure includes the Support Unit, White One (1) and White Two (2) Compounds. These compounds are located on the southern wing of CI IDC and represent a special precinct that provides a safe and secure environment for detainees whilst allowing an efficient concentration of specialist services with effective through-care.

The three compounds have particular roles which are mutually supportive. The following principles underpin the management of high needs detainees:

- White One and White Two compounds restricted to 48 detainees (Support Unit remains at 18 beds)
- Maintenance of a safe and supportive environment
- Multi-disciplinary approach (Serco, ABF and IHMS)
- Focus on prevention and management of detainee in mainstream population to prevent placement into support Unit or White Compounds.
- Focus on re-engagement within mainstream compounds
- Through-Care approach
- Personal Officer Scheme will underpin detainee management.

### Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- SOW Section 2.2.1, clause 3.10 – Behavioural Management of People in Detention
- Behaviour Management Policy and Procedure (SIS-OPS-PPM-0006)

### Roles & Responsibilities

**Table 1 – Roles and Responsibilities**

Role	Responsibility
Serco General Manager (GM)	Authority for detainee placement.
Security & Risk Manager (SRM)	Oversight of daily operations.
Facility Operations Manager (OM)	Ensure compliance against Behavioural Management Plan (BMP).
Emergency Response Team (ERT)	Detainee Supervision – White 1.
Joint Intelligence Group (JIG)	Intelligence and Detainee Risk Assessments

## CIIDC Operations

### White One - Detainee Active Management Compound

White One Compound will be utilised as an active management compound for detainee's either:

- Arriving at CIIDC from mainland detention facilities that are deemed high or extreme risk due to previous behaviour at other facilities or who present high risk behaviours.
- Have caused ongoing disruption to the good order of CIIDC and can no longer be effectively managed within the general population of the facility.

White Compound will be utilised as a means to encourage improved behaviour and manage the threat by detainee's who have proven themselves to be a risk to the good order and security of the facility. The Active Management Regime will encourage detainee's to act in a compliant manner and will use a progression system through the accommodation blocks that re-enforces rewards for compliant behaviour and restrictions for non-compliant behaviour.

### Detainee Reception and Placement

Reception processing for arriving detainees will take place within Support Unit - CIIDC. This will enable Serco staff to undertake full reception and induction tasks within an operationally secure environment. ERT will divide the arriving cohort into Support 1 and Support 2, where processing will occur concurrently. This will provide Serco with the benefit of fulfilling its reception duties, within a secure and contained environment, expediting the process and maximising staff and task allocation. Detainees will have access to the courtyard and be provided meals whilst the process is undertaken. If any acts of aggression or anti-social behaviours are displayed, approval will be sought from the local ABF Superintendent to accommodate that detainee within Support Unit till compliant.

Once reception processing is completed, detainees will all be accommodated in White One. All detainees prior to entering White One for this initial placement will undergo a pat down and metal detector search. In addition to this, any property entering will be searched. This will occur for all detainee movements in and out of White One. Upon placement to an allocated room, the detainee should be provided with an orientation of their accommodation, surrounding areas and explained and sign a copy of the unit rules as soon as practicable in a language of their understanding.

Re-accommodating non-compliant detainees into White One (1) from other compounds should be individually assessed to ascertain the best course of action to maintain the safety of all concerned. If it is deemed accommodating the detainee into White One (1) compound is unsafe at that particular point in time then in accordance with the protocols of the Support Unit, they should be placed within this unit. Detainees should only be accommodated in the support unit for the shortest and safest possible time required



## White One (1)

### Level 1:

Detainee's arriving into White Compound will initially be accommodated in White One (1) Compound and placed on a personalised Behaviour Management Program (BMP) and will be managed in accordance with the Active Management Regime (an example is at section 9). Detainee's will initially be placed on Level One (1) for a period of seven (7) days and will then be reviewed

Level One (1) will consist of minimal unnecessary items with the view of encouraging detainee's to behave in a compliant manner re-enforcing the concept of good behaviour being followed by rewards (In accordance with an Individual Behavioural Management Plan)

After the initial Seven (7) day period a review will be held between Serco, IHMS and ABF to review the BMP and the behaviour of the detainee. If a detainee on Level One (1) has been compliant with the Active Management Regime they will then proceed to Level Two (2).

In the event that detainee's placed on Level One (1) have displayed non-compliant or disruptive behaviour they will then continue to remain on Level One (1) for a further period of seven (7) more days when another review can be held. Detainees shall only progress to Level Two (2) when they have displayed compliant behaviour.

### Level 2:

Once detainees have progressed to Level Two (2) they will spend a further period of seven (7) days and will be managed in accordance with the Active Management Regime. Level Two (2) will hold more items of incentive than Level One (1) but less than Level Three (3).

Following seven (7) days on Level Two (2) a review will be held between Serco, IHMS and ABF to review the BMP and behaviour of the detainee's. If detainee's housed on Level Two (2) have been compliant with the Active Management Regime they will then precede to Charlie (C) block.

In the event that detainees housed on Level Two (2) have displayed non-compliant or disruptive behaviour they will then be removed to Level One (1) and the Active Management Regime will commence again.

### Level 3:

Once detainees have progressed to Level Three (3) they will spend a period of fourteen (14) days and will be managed through the Active Management Regime.

Level Three (3) will hold more items of incentive than Level 2 and Level 3 .

Following Fourteen (14) days on Level Three (3) a review will be held between Serco, IHMS and ABF to review the BMP and behaviour of the detainee's. If detainees housed on Level Three (3) have been compliant with the Active Management Regime they will then proceed to White Two (2) Compound.

## White Two (2)

### White Two (2) Compound:

Detainees who progress to White Two (2) Compound will have successfully completing four (4) weeks of good behaviour in White (1) Compound.

Detainee's located in White Two (2) compounds will all be afforded a range of privileges and further access to the Greenheart as per the daily schedule.

Detainee's who conduct themselves in an adverse manner that threatens or disrupts the good order of the Centre will be relocated back to White One (1) Level One (1) and will recommence the Active Management Regime.

## Serco Staffing

- White One (1) compound will be manned by One (1) Detainee Services Officer (CSO) per shift.
- White Two (2) compound will be manned by One (1) Detainee Services Officer per shift
- White Compound will be managed by One (1) Facility Operations Manager Monday to Friday from 08:00 hours until 16:00 hours
- White Compound will also have a Detainee Services Manager providing coverage twenty four (24) hours per day / seven (7) days per week.
- Emergency Response Team (ERT) members will actively support and engage within both White One (1) and White Two (2) The Emergency Response Team (ERT) members will support White One (1) and White Two (2) Detainee Service Officer's.
- Detainee Services Officer's will be rotated through White Compound to avoid the possibility of forming counterproductive relationships with detainees and also avoid the possibility of being groomed.
- To preserve the safety and well-being of all staff in White 1 Compound, staff will radio control when entering any accommodation block in White 1, ensuring they are accounted for at all times.

## Routines

### P&A Schedule

CIIDC will maintain a programs and activities schedule with an approach to empowering detainees to gain the skills and confidence to cope with their time in detention and to prepare them for eventual settlement or repatriation. Programs will be offered which are responsive to the individual needs of detainees, and cognisant of their cultural perspectives. The programs imply gradual change over time. Types of programs might include:

- Facilitated and thematic group work
- Narrative based programs
- Educational programs
- Art and craft based therapy
- Music based therapy.

## Canteen

Detainee's within White One compound will place canteen orders and have them delivered on a weekly basis within the compound.

## Meals

All meals will be served via plastic containers and with plastic implements. These items will then be collected by compound staff when the meal time is over.

## Internet Facilities

Six (6) PC's with internet access have been installed into White One (1) and White Two (2) Activities rooms for ease of access and facilitation to the detainees housed within those compounds.

## Phone Calls

Detainees will be afforded legal calls whenever required. Personal calls can be made if detainees have purchased phone cards and when given access to the grassed area of White One (1) as allocated.

## Detainee Behavioural Management Plan (BMP)

Detainees placed into White (1) One Compound are required to have a detailed and thorough BMP that describes the behaviours that resulted in their placement as well as their expected and agreed behaviours and goals. Exceptions for a BMP may include; placement on high level observations, medical isolation or where placement other than for a behavioural reasons has been agreed by stakeholders. The detainee induction into White One (1) is to be detailed, available in a written form and delivered in a language understood by the detainee. As a minimum, the detainee induction and unit rules is to include:

- Behavioural Management Plan
- Right of Appeal process
- Introduction of Personal Officer
- Access to medical and mental health support
- Safety
- Daily routines
- Review process
- Canteen process
- Complaints process
- Access to Commonwealth Ombudsman

## Detainee Review

All White One (1) detainees are formally reviewed each week by a multi-stakeholder panel. The review panel will discuss detainee goals and behaviours and has the aim of motivating the detainee to progress through to mainstream compounds.

Interim detainee reviews are also available and can be initiated by staff or detainees. Detainees can transition to mainstream compounds at any point where it is deemed through review that their risk levels have appropriately reduced and such placement is deemed more appropriate.

TIME	ROUTINE
0630	<ul style="list-style-type: none"> <li>• Headcount conducted</li> </ul>
0700	<ul style="list-style-type: none"> <li>• Breakfast starts &amp; Welfare Check</li> </ul>
0730	<ul style="list-style-type: none"> <li>• Level 1 Access to grassed area of White 1 commences</li> </ul>
0800	<ul style="list-style-type: none"> <li>• Breakfast Ceases</li> <li>• Chores commence ( Room cleaning , cleaning eating area's etc.</li> </ul>
0830	<ul style="list-style-type: none"> <li>• Level 1 Access to grassed area of White 1 ceases</li> <li>• Level 2 access to grassed area of White 1 Commences</li> </ul>
0900	<ul style="list-style-type: none"> <li>• Chores complete</li> <li>• Room inspections</li> </ul>
1000	<ul style="list-style-type: none"> <li>• Level 2 Access to grassed area of White 2 ceases</li> <li>• Level 3 Access to grassed area of White 1 commences</li> <li>• Program and Activities available</li> </ul>
1100	<ul style="list-style-type: none"> <li>• Program and Activities available</li> </ul>
1200	<ul style="list-style-type: none"> <li>• Level 3 Access to grassed area of White 1 ceases</li> <li>• Program and Activities available</li> </ul>
1200	<ul style="list-style-type: none"> <li>• Lunch Service</li> <li>• Welfare check</li> </ul>

1300	<ul style="list-style-type: none"> <li>• Lunch Period ends</li> <li>• Clean up commences</li> <li>• Level 1 Access to grassed area of White 1 commences</li> </ul>
1400	<ul style="list-style-type: none"> <li>• Clean up completed</li> <li>• Level 1 Access to grassed area of White 1 ceases</li> <li>• Level 2 Access to grassed area of White 1 commences</li> <li>• Program and Activities available</li> </ul>
1500	<ul style="list-style-type: none"> <li>• Program and Activities available</li> </ul>
1530	<ul style="list-style-type: none"> <li>• Level 2 Access to grassed area of White 1 ceases</li> <li>• Level 3 Access to grassed area of White 1 commences</li> </ul>
1730	<ul style="list-style-type: none"> <li>• Level 3 Access to grassed area of White 1 ceases</li> </ul>
1800	<ul style="list-style-type: none"> <li>• All Programmes &amp; Activities cease</li> <li>• Dinner Service</li> <li>• Welfare check</li> <li>• Clean up to be completed prior to 1900.</li> </ul>
1900	<ul style="list-style-type: none"> <li>• Alpha ( A) Block association starts</li> <li>• Bravo (B) Block association starts</li> <li>• Charlie (C) Block association starts.</li> <li>• Level 3 Access to grassed area of White 1 Compound commences</li> </ul>
2000	<ul style="list-style-type: none"> <li>• Level 3 Access to grassed area of White 1 Compound concludes</li> </ul>
2230	<ul style="list-style-type: none"> <li>• Lights Out, Detainees returned to rooms and all lights turned off.</li> </ul>
2300	<ul style="list-style-type: none"> <li>• Headcount conducted</li> </ul>
0100	<ul style="list-style-type: none"> <li>• Headcount conducted</li> </ul>
0300	<ul style="list-style-type: none"> <li>• Headcount conducted</li> </ul>
0500	<ul style="list-style-type: none"> <li>• Headcount conducted</li> </ul>

## CIIDC Daily Routine

### WHITE ONE RULE'S ARE AS FOLLOWS:

- Always follow the basic rules as explained to you on induction
- Do not steal or interfere with others property
- Meal times are:           07:00 – 07:30 Breakfast  
                                  13:00 – 13:45 Lunch  
                                  18:00– 19:00 Dinner
- You will be woken up at 06:30hrs daily you must be dressed and ready for breakfast at 07:00hrs
- Visits or contact with Detainees from other Compounds will not be permitted
- Do not bully or intimidate others.
- Rooms must be kept clean and tidy at all times and there is to be no writing on walls. Your toilet and surrounding area is also your responsibility to keep clean. Inspections will be carried out on a daily basis.
- You must not lend or give any article to another Detainee.
- Do not destroy, damage or deface centre property
- You must attend all Programs and Activities offered to you
- Do not misuse your alarm bell. It's for emergencies only
- Do not cover your light fittings or observation panel
- Keep noise to an acceptable level at all times
- No racial or sexual comments, or comments designed to intimidate a negative feeling or response
- Appropriate physical contact with peers and staff at all times
- Respect other people's personal space
- Respond to staff when directed/prompted
- Maintain a good level of hygiene and appearance
- Complete all allocated chores, including personal laundry and domestic tasks
- Help to maintain a clean environment
- Remain in designated areas

I understand that behaviour which does not respect me or other people is totally unacceptable.

Unacceptable Behaviour Includes:

- Bullying or intimidating others.
- Taking property.
- Verbally abusing others.
- Physically abusing others.
- Assaulting others.
- Harming myself.
- Damaging centre property.
- Speaking or acting in a racist manner.
- Speaking or acting in a sexist manner.
- Be sexist.

I understand that I am expected to:

- Abide by the rules of the centre.
- Following and comply with any staff instructions.
- Help with allocated compound chores.
- Keep myself and clothes clean and tidy at all times.
- Respect others and their views.
- Treat others as I would like to be treated.
- Help and support other detainees and staff when needed.
- Address any problems I have in a constructive manner seeking help as needed.
- Comply with compound rules and regulations at all times.

To be signed by the detainee

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# CIIDC ACTIVE MANAGEMENT PLAN - WHITE COMPOUND

## WHITE 1

**LEVEL ONE - Seven (7) Days**

- Placement on BMP
- Minimal personal items
- Minimal privileges
- No Greenheart Access
- Negative Review may result in increased time at current level

Positive Review

**LEVEL TWO - Seven (7) Days**

- Placement on BMP
- Minimal personal items
- Increased privileges; More than level 1
- No Greenheart Access
- Negative Review may result in a regression of level, or increased time at current level

Positive Review

**LEVEL THREE - Fourteen (14) Days**

- Placement on BMP
- Increased personal items
- Increased privileges; More than levels 1 & 2
- No greenheart access
- Weekend gymnasium access
- Negative Review may result in a regression of level (or levels), or increased time at current level

Negative Review

Negative Review

## WHITE 2

**All Blocks**

- Ongoing
- IDC typical items
- Typical privileges
- Greenheart access
- Removal from BMP

Positive Review



# Communication Services

## Serco Immigration Services

### Document Control

<b>Document:</b>	Communication Services
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## 1. Introduction

### 1.1 Policy

Serco Immigration Services (SIS) acknowledges the importance of communication for Detainees and the contribution that such can have to an individual's wellbeing. SIS will have processes and procedures in place to ensure that Detainees have efficient and effective access to mail, fax, telephonic, computer and internet services, in a manner which promotes the safety and security of the facility and all people who visit, live or work in it, subject to restrictions imposed on Detainees in Border Screening Detention as per Departmental policy.

Detainees will have access to interpreters provided by DIBP or the telephone interpreting service to assist with any communications when required.

### 1.2 Related Documents

- Personal Officer PPM (SIS-OPS-PPM-0011)
- Duty of Care PPM (SIS-OPS-PPM-0026)
- Search & Fabric Check PPM (SIS-OPS-PPM-0050)
- Property Management PPM (SIS-OPS-PPM-0012)
- Reception, Induction, Accommodation, Transfer & Discharge PPM (SIS-OPS-PPM-0029)

### 1.3 Related Forms

- Incoming Mail & Fax Registers
- Conditions of Computer Use Form

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Privacy Act

## 2. Procedures

### 2.1 Detainees in Border Screening Detention

The communication services described in the following sections are subject to the restrictions placed on Detainees in border screening detention.

The Detention Services Manual stipulates that, except with the written approval of the Departmental Regional Manager, Detainees in border screening detention are not permitted to:

- have contact with the general immigration detention population or members of the public
- receive personal visits or have community contacts
- make or receive telephone calls, other than with the Ombudsman and the AHRC
- have access to incoming or outgoing mail, faxes, email, or other correspondence, other than from the Ombudsman and AHRC
- have access to a mobile phone or computer with a modem or any other forms of internet access
- have access to non-approved television, radio, newspapers or magazines.
- participate in group excursions.

Detainees in border screening detention are, however, permitted one overseas telephone call to inform their family of their whereabouts and circumstances.

### 2.2 Mail

#### 2.2.1 Incoming Mail

Mail received at the facility will be collected and processed once daily.

All mail delivered to the facility for Detainees will be recorded.

All mail addressed to a Detainee will be treated confidentially and distributed unopened to that person on the same day as it is received at the facility, subject to 2.1.3 below.

SIS staff must notify DIBP Regional Management if a Detainee receives any correspondence from DIBP or any other body which relates to that Detainee's immigration status or pathway, such as the Refugee Review tribunal or the Migration Review Tribunal.

Each Detainee must sign the appropriate register / log to acknowledge receipt of their mail.

Detainees will be allowed to write and receive as many letters as they wish.

Any mail to Detainees received after they have left the facility will be passed to DIBP Case Management.

Detainees who receive parcels must be reminded that any property received must be managed in accordance with the principles of the Property Management PPM.

## 2.2.2 Outgoing Mail

Postage costs for mail sent by Detainees will be at the Detainee's expense.

Detainees must be informed of the process for outgoing mail. Any outgoing mail must be retrieved from each accommodation area on a daily basis and posted accordingly.

The use of "outgoing mail registers" is not a contractual requirement; however, registers of outgoing mail may be maintained as they provide accountability for staff and detainees. Any records must not contain names and addresses of members of the public as this may breach privacy laws.

## 2.2.3 Security of Mail Services

At facilities with appropriate equipment, SIS staff must electronically scan all incoming mail.

If there is a reasonable suspicion that a letter or package may contain Illegal, Excluded or Controlled Items, the Detainee must be requested to open the letter or package addressed to them in the presence of SIS staff.

Should a Detainee refuse to open a letter or package in the presence of staff when requested to do so, the letter or package must be withheld and the DIBP Regional Management contacted immediately.

Where Illegal, Controlled or Excluded items are found in a letter or package, Serco staff must:

remove the items

- record the items
- hold the items in trust; and
- deal with the items in accordance with the Search and Fabric Check & Property Management PPMs, including satisfying mandatory reporting requirements where necessary.

## 2.3 Access to and Use of Telephones

### 2.3.1 Mobile Telephones

Mobile telephones are controlled items within Immigration Detention Facilities. They may only be held in possession by non IMAs, referred to in the Act as unauthorised maritime arrivals.

Furthermore, the device must not have any recording capabilities (digital, audio or visual), must not have a camera, and must not have the capacity to connect to the internet.

Such telephones held in possession when an individual enters detention must be held securely in their 'in trust' property in accordance with the Property Management PPM.

### 2.3.2 Outgoing Calls

SIS staff will ensure that Detainees have:

- access to a telephone for telephone calls within Australia during designated times (or otherwise by appointment) to make a call to any person without charge to the Detainee
- access to a telephone at any time by a Detainee where the Detainee wishes to contact a family member, a legal representative or a consular official in relation to immigration process without charge to the Detainee

SIS will provide public telephones in all Facilities for Detainee use, except at the Christmas Island Facilities. The Department will arrange for public telephone access for Detainees on Christmas Island.

### 2.3.3 Incoming Calls

Detainees will have access to incoming calls at all times.

All Detainees will be notified of incoming calls immediately.

Detainees will be notified of any calls received for them when they were not available to receive the call, maintaining privacy and security of information at all times.

### 2.4 Faxes & Photocopying

Fax and photocopying facilities must be made available to Detainees, at SIS cost.

All faxes received for Detainees must be treated as confidential and registered. Faxes must be delivered to the Detainee in an internal envelope by the end of the business day on which the fax is received, or first thing on the next business day if the fax is received out of hours. If a fax is deemed to be urgent, it should be delivered within four hours of receipt.

### 2.5 Access and Use of Computers and Internet

Computers must be available to Detainees to perform functions such as word processing, spreadsheets, internet, printing and email for private use, related to Programmes and Activities, and for the preparation of documents related to their immigration outcome.

SIS will have processes in place to ensure fair and equitable access to and use of printing services.

Detainees and any visitors seeking to assist Detainees to use internet or computer services, must sign the Conditions of Computer Use form before they can access those services.

Appropriate filtering software and supervision of computer use will be in place to control and limit access by Detainees to pornographic and other prohibited sites (including those containing or promoting illegal acts), personal software, File Transfer Protocol sites, software or data, and prohibited foreign language sites.

1GB memory sticks will be available to Detainees, on which to save any personal documentation.

Christmas Island IT facilities for Detainees are managed by DIBP. If there are any defects that affect the use of internet services by Detainees, DIBP must be notified.

## 2.6 Television and Other Media

SIS, unless otherwise directed by the Department, must provide and facilitate access by Detainees to:

- free-to-air television and other broadcast services (excluding any pay-to-view television services), where available, covering news, current affairs and other content that the SIS recommends to promote the welfare of Detainees;
- library services suitable to the current demographic and occupancy levels of Detainees, including:
  - English and foreign language videos/DVDs
  - a selection of local, national and foreign language books
  - foreign language – English translation dictionaries

SIS must:

- ensure that the books offered through the library service meet the cultural, educational and recreational needs of the Detainee cohorts of the Facility
- ensure that the quantity of books available is adequate for the population at the Facility
- review and maintain the library stock holdings on a quarterly basis, factoring in recommendations from the Consultative Committees or the Department

The Department will provide the infrastructure associated with access to free-to-air television (including television sets, media players, cabling, ports and satellite dishes, where required).

SIS may, with the approval of the Department, restrict access to some television and other media services in certain circumstances.

SIS must ensure that Detainees who access media and entertainment facilities comply with the requirements set out in the Rights and Responsibilities of Detainees in Immigration Detention Facilities.



# Complex Case Reviews

## Serco Immigration Services

### Document Control

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# 1. Introduction

## 1.1 Policy

Serco is committed to providing safe, well-ordered and decent immigration facilities. Staff are recruited and trained to encourage constructive, respectful and meaningful relationships with Detainees in all immigration detention facilities. Staff are expected to use their skill and influence to motivate and engage with Detainees to create and maintain decent, safe, respectful, culturally sensitive and well ordered detention environments.

Serco recognises that Detainees may experience complex emotions or distress from internal and external influences whilst in detention; these may result in stress, trauma, extreme anxiety or other psychological or physical issues. Serco must work collaboratively with all stakeholders to address and support Detainees through this period. Fundamental to this is Serco's ability to offer an environment sensitive to the needs of the individual, balanced with the necessary processes to maintain a safe and secure environment for all who live, work, or visit the facilities.

This policy sets out the procedures for assisting vulnerable and at risk individuals within the detention environment who may require additional support in the management of challenging behaviours or vulnerabilities through consideration at the Complex Case Review (CCR).

This policy document provides guidance to all immigration facilities on eligibility criteria for consideration at CCR, how to make a referral to the CCR and details of the review mechanism.

## 1.2 Healthy Centre Framework

The Healthy Centre Framework represents Serco's benchmark of decent, safe and equitable facilities for all Detainees held in our care. The Healthy Centre Framework reflects the International standards used for the inspection of Immigration Detention Facilities.

Our measures complement and support the Department of Immigration and Border Protection (DIBP) three key service delivery and Immigration values:

- Respect for human dignity
- Fair and reasonable treatment within the law
- Appropriate services

The Healthy Centre Framework is assessed against the following measures:

- **Safety:** Detainees are held in safety with due regard to the insecurity of their position.
- **Respect:** Detainees are treated with respect for their human dignity and the circumstances of their detention.
- **Purposeful:** Detainees are able to access a range of Programmes and Activities, which as far as possible reflect their individual needs providing meaning and purpose to their use of time whilst in detention.
- **Preparation for discharge/transfer or removal:** Detainee expectations are shaped realistically with regard to independent living and citizenship values in line with Government Policy and Detainees are able to maintain contacts with family, friends and others in preparedness for discharge, removal or transfer.

The CCR processes and decisions will be implemented in line with the Healthy Centre Framework.

### 1.3 Related Documents

- Individual Management Plan PPM (SIS-OPS-PPM-0020)
- Personal Officer Scheme PPM (SIS-OPS-PPM-0011)
- Keep SAFE / PSP SME PPM (SIS-OPS-PPM-0001)
- Detainee Placement PPM (SIS-OPS-PPM-0051)
- Enhanced Monitoring PPM (SIS-OPS-PPM-0015)

### 1.4 Related Forms

- Behaviour Management Plan (SIS-OPS-FRM-0012)
- Individual Management Plan (SIS-OPS-FRM-0030)
- Keep SAFE / PSP SME Documents

### 1.5 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP

### 1.6 Roles & Responsibilities

**Table 1 – Roles and Responsibilities**

Role	Responsibility
Welfare & Engagement Manager	Approves CCR referrals and leads CCR discussion
Personal /Welfare Officer	Outlines Detainee issues and implements decisions of CCR
Facility Management	Assessment of local stakeholder interest/concerns.
National Security, Risk and Intelligence Manager	Ensures revised risk assessment is undertaken as appropriate
Commercial Lead	Preparation in collaboration with Facility of financial documentation
Legal Counsel	Assessment of legal/media issues and or risks

## 2. Procedures

### 2.1 Early Identification and Accurate Recording of Incidents

It is imperative that all Serco officers work in partnership with the Health Service Provider, DIBP Case Managers, DIBP Detention Operations and other support service providers, to identify and address concerning and or challenging behaviours of Detainees before it escalates to a position where the Detainee is in acute distress or at risk. This should be identified and efforts made to address the behaviours through the Detainee's Individual Management Plan (IMP) in the first instance. All actions taken to address and respond to the Detainee's behaviour should be fully documented in the IMP, or BMP as appropriate, and the Detainee's Security Risk Assessment (SRA).

It is the responsibility of all Serco staff to report and accurately record, in Portal, all instances where a Detainee's behaviour is such that it poses a risk to themselves or others.

### 2.2 Purpose of Complex Case Review (CCR)

The Complex Case Review (CCR) operates at national level within Serco Immigration Services. The purpose of the CCR is to review, in conjunction with the facility management, the local management procedures in place to address and support vulnerable Detainees presenting with multiple complex needs and/or requirements.

### 2.3 Eligibility for CCR

The Complex Case Review will meet to consider the local arrangements and support being offered to any Detainee or family group who:

- Is in receipt of, or may require specific or additional services to be provided by Serco
- Has a condition/behaviour which is likely to raise significant public concern or place at risk the safety of other Detainees or staff stakeholders
- Is of significant stakeholder interest or has specific media notoriety
- Has another condition or vulnerability e.g. age, gender, disability etc which may attract public or media attention
- Is referred by National Office in Canberra

Detainees subject to CCR may be considered High Needs Detainees. High Needs Detainees means those Detainees not subject to or compensated accordingly by SM&E under the Psychological Support Programme and require an enhanced level of security monitoring due to a consistent pattern of anti-social and/or unacceptable behaviour, that threatens the integrity of immigration detention and/or the safety of persons in the Facility. A Detainee can only be classified as a High Needs Detainee following approval by the Contract Administrator. Additional costs will be charged at the additional monitoring variable rate or such other applicable pricing mechanisms in the Contract.

## 2.4 Referral Process

Referral to the CCR must be generated by the Facility Manager/Team Leader, and supported by the Regional Manager, with the exception of those cases referred through National Office in Canberra. The referral process in the first instance should be through submission of a short description of the presenting issues along with the current IMP and SRA to the National Welfare & Engagement Team who will determine in consultation with other CCR members, and with DIBP National Office, whether a CCR is appropriate.

The CCR process should not be regarded as an additional national check to override local decision making of all Detainee cases, but rather a collaborative and holistic support mechanism to ensure a consolidated effort to support the Detainee, staff and management of the facility in line with the Healthy Centre Framework. The CCR process is the key decision making forum for the approval of additional services and or resources to support vulnerable Detainees.

The eligibility criterion is provided as a guide, however where a Detainee is of significant concern, then contact should be made with the National Welfare & Engagement Team for specific advice.

## 2.5 Proposed Membership

National membership of the CCR includes:

- National Welfare & Engagement Team (CCR Lead)
- Serco Legal Counsel
- Commercial Lead
- National Operations Manager
- National T&E Manager
- Operations Director
- National Security Risk & Intelligence Manager

Facility membership for CCR discussions must include:

- Facility Manager or nominated representative
- Regional Manager or representative
- Personal Officer/Welfare Officer
- Others Serco staff as appropriate

## 2.6 CCR Operation

Following referral from the Facility or National Office, the National Welfare & Engagement Team will, as appropriate, authorise a CCR meeting to be convened. The meeting frequency and duration will be determined by the CCR group based on the complexity of the case under Review. As a general guide the duration of the CCR meetings vary between 30 – 60 mins, therefore facility staff required to attend must be provided with appropriate cover to ensure their full attendance for the duration of the CCR meeting.

All cases approved for discussion at CCR, will be issued with a CCR teleconference request and reference number from National Office Canberra.

At least 24 hours prior to the CCR teleconference appointment, the IMP and any other relevant documents must be forwarded to the Welfare and Engagement Manager in Canberra.

The general format for CCR discussion will begin with the Personal Officer/Welfare Officer asked to outline the presenting issues and any new information, including all actions previously taken to support the Detainee.

The information provided from the Facility should include:

- An assessment of risk
- Detainee attendance at Programmes and Activities including Excursions
- Detainee general behaviour in the Facility and relationship with staff
- Impact of Detainee behaviour/vulnerabilities on family, other Detainees or staff
- Any support being provided from support service providers or community/interest groups
- Input relating to whether the Detainee should be considered for High Needs Classifications
- Recommendations from local DHSP and DIBP regarding management of the Detainee

## 2.7 Agenda

While some flexibility will be required throughout the meeting, the following agenda items provide a guide to the CCR discussion:

**Table 2 – CCR Agenda**

Agenda Item	Person Responsible
1. Introduction and context	Welfare & Engagement Manager
2. Update on Detainee situation	Personal Officer/Welfare Officer/Facility Manager
3. Personal Officer/Welfare Officer Input	Personal Officer/Welfare Officer
4. Stakeholder engagement overview	Facility Manager
5. Security Risk & Intelligence overview	Facility Intelligence Manager or National Security & Intelligence Manager
6. High Needs Detainee status consideration	Welfare & Engagement Manager
7. Legal/ Media Issues	Legal Counsel
8. Finance issues	Commercial Lead
9. Future actions/recommendations	Welfare and Engagement Manager
10. AOB	All

## 2.8 DIBP National Office Engagement

Prior to the convening of a CCR, the Welfare and Engagement Manager will seek DIBP National Office input for consideration at the CCR. Should the CCR determine that SIS will request the classification of a Detainee as High Needs Status, the Welfare and Engagement Manager will pursue this with DIBP National Office to obtain Contract Administrator approval.

DIBP National Office will be kept informed of the status of CCR cases regardless of whether the Detainee is considered High Needs.



## 2.9 Record Keeping

Action items agreed from the CCR will be recorded on the Detainee's individual CCR form and issued to meeting attendees, and to National DIBP within 24 hours by the National Welfare and Engagement team.

The individual Detainee CCR forms are Serco evidence of governance around the issue of managing and supporting vulnerable Detainees. There is no requirement for these forms to be uploaded on to Portal, although it is good practice to share the decisions of the CCR with DIBP and the Health Service Provider at IMP review meetings about the Detainee.

Where the CCR determines that additional services may be required to support the Detainee, the National Commercial lead will work with the Facility team to prepare the required documents, for initial approval by the Welfare and Engagement Manager, prior to submission to National DIBP.

# Compliance Transport and Escort Tasks

## Serco Immigration Services

### Document Control

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# 1. Policy

## 1.1 Policy Statement

Procedures and processes will be in place and implemented to ensure that all transport and escort tasks are executed safely, securely and professionally while maintaining the rights, dignity and privacy of all People in Detention in accordance with the Immigration Detention Values and Serco Governing Principles.

The processes outlined within this document will ensure that all transport and escort tasks related to the management of Detainees from an initial point anywhere in Australia to a place of Immigration Detention are conducted in line with agreed procedure and within the requirements of our contractual undertaking with the Department.

## 1.2 Related Documents

- Screening and Searching (SIS-OPS-PPM-0030)
- Operational Safety (SIS-OPS-PPM-0035)
- Incident Reporting (SIS-OPS-PPM-0019)
- Property Management (SIS-OPS-PPM-0012)

## 1.3 Related Forms

- Escort Risk Assessment
- Escort Operational Order

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- AS/NZS 9001:2008 – Quality Management Systems Requirements

## 2. Contractual Responsibilities

### 2.1 Definition – Compliance Escort Task

Compliance escort tasks are defined within the Facilities and Detainees Services (FDS) Contract 2014, The provision of transport and Escorts for Detainees and the Property of Detainees from an initial point anywhere in Australia to a place of Immigration Detention, or from a place of Immigration Detention to an international airport within Australia for Removal from Australia”.

### 2.2 Timeliness of Transport and Escort Services

The FDS Contract explicitly requires Serco Immigration Services to undertake Compliance escort tasks within identified timescales. These timescales are determined by the request provided by the Department and whether the task is to be undertaken as a Local escort or a Regional escort.

Where a Request for Service (RFS) specifies that a Compliance escort for a Local escort should commence as soon as possible, the Transport and Escort team must depart within one hour of acknowledging the RFS.

Where the Compliance escort task is determined as being within a Regional task, the Transport and Escort team should endeavour to collect the Detainee as soon as possible and no later than 24 hours from the time of receiving the RFS.

## 3. Planning

### 3.1 Request for Service (RFS)

The RFS is a document that is provided by DIBP to allow the transport and escort task to be undertaken. In respect of Compliance escort tasks, no escort movement will occur without prior receipt of a RFS from the Department.

The RFS will stipulate as a minimum, the date of the escort, the identity of the Detainee, the location for collection, the required time of arrival and the point of delivery. The RFS should contain information relating to any known risk factors associated with the task or the Detainee as they are available to DIBP at that point. Should Serco identify a different risk level for the task then the task is not to commence until agreement is reached on the appropriate risk rating for the task in agreement with the contract.

Where a RFS is received for a Compliance escort task designated as a Regional Task, the local T&E Manager must contact National Operations to inform of the task and seek advice and or assistance where necessary.

### 3.2 Required Documentation

All Compliance Escorts will be planned and executed using the following documentation:-

- Escort Operational Order
- Escort Risk Assessment
- Site Risk Assessment

- SIS-TE SIS-TE-DOC-0003 T&E Task Process and Approvals Framework – Local
- Approval Process and Operational Changes SIS-TE-PPM-0001

### 3.3 Escort Risk Assessment

The local Transport & Escort (T&E) team will complete the Escort Risk Assessment in line with guidelines. If an individual is assessed as presenting a high or extreme risk, or they have been identified as meeting the s501 criteria by DIBP, then further consideration will be given to the resources required to safely and efficiently execute the escort.

The Escort Risk Assessment is approved by the T&E Manager. In locations where this post does not exist then the assessment will be approved by the Senior Operations Manager.

The risk assessment will determine the staffing levels of each task. There will be a minimum of two staff members for each escort task where vehicular travel is required.

When a form of controlled restraint is required, the T&E Manager must seek approval from the DIBP Centre Manager (CM) and follow the approval process as set out in the SIS-TE-PPM-0001 Approval Process and Operational Changes.

### 3.4 Site Risk Assessment

Compliance escort tasks will be undertaken to a wide range of locations, which may include but is not limited to:-

- Residential properties
- Police stations
- Airports and Sea Ports
- Commercial properties
- DIBP offices

Local T&E will conduct a site risk assessment, where possible, which will be supplied to DIBP. This risk assessment will identify recognised concerns that contribute to the risks associated with an escort involving a particular location. The site risk assessment will inform the detailed planning of the escort, including the resources that will be required for the escort task.

In exceptional circumstances the risk assessment may indicate that the risks associated with a proposed location are too many to mitigate, in which case Serco Immigration Services must liaise with DIBP to determine alternative courses of action for the escort.

It is recognised that the notification period for certain Compliance escort tasks may mean that a detailed site risk assessment will not be undertaken before the task requires to be conducted. In these instances, the local T&E team will consider this when determining the overall escort risk assessment and agreed risk mitigation strategy.

### 3.5 EOO Preparation and Approval

Where the identified task timescale permits the Transport Scheduling Tool (TST) will produce an Escort Operation Order (EOO) which will address the contractual requirements.

In respect of 'as soon as possible' tasks, an Escort Operational Order (EOO) will be prepared locally utilising the information available in respect of the Compliance escort as determined by the RFS, escort risk assessment and site risk assessment (where applicable).

The preparation of the EOO will be in line with Serco Immigration Services policy.

Escort staff will be notified of all required information, as it is included within the EOO and supporting escort documentation, prior to the task as part of the escort briefing.

Where the Compliance escort has been assessed as a High or Extreme risk escort or where the Detainee or Detainees to be escorted are identified as being s501 cases, the escort task must be approved by National Operations before the task may commence.

### 3.6 Compliance Escort Planning Responsibilities

It is recognised that the level of inherent risk associated with Compliance escort tasks is greater than that related to general Local escort tasks. Accordingly all Serco Immigration Services Transport & Escort Officers and Managers will ensure that the ongoing detention security of the Detainee or Detainees is prioritised.

It is the responsibility of local Transport & Escort Management to:-

- ensure that an adequate and effective risk assessment has been prepared in respect of the management of the individual, on the basis of information available and in line with the National risk assessment policy;
- ensure that this risk assessment has been agreed with DIBP and is reflected in the Request for Service (RFS);
- ensure that an Escort Operational Order is prepared detailing the requirements of the escort;
- ensure that the escort is staffed appropriately, at all times, following consideration of all pertinent risk management factors and that an officer within the escort team is designated as Team Leader;
- ensure that the staff involved in the escort task are provided with the resources necessary to manage the escort effectively, which will include, but not be limited to, the provision of escort documentation, an escort pack and a mobile telephone;
- ensure and document that all staff are briefed on the expectations of management in respect of the escort task and to confirm that they understand clearly said requirements.

It is the responsibility of the Transport & Escort team assigned to the escort task to:-

- ensure that they are provided with all necessary resources to undertake the escort;
- confirm that they understand the requirements of the task and will comply with the Escort Operational Order and accompanying Risk Management documentation as it relates to the escort task.



## 4. Operational Implementation

### 4.1 Collection of Detainee(s)

Detainees will be collected from the appropriate location as designated in the RFS.

The identity of all persons will be verified against the details of the individuals on the RFS and the EOO. Should any discrepancy be noted the escort must not commence and the issue should be escalated by the escort Team Leader to local T&E Management.

Where appropriate, all Detainee property will be accounted for in accordance with Serco Immigration Services policy.

Any prescribed medication belonging to the Detainee (s) shall be retained by the escort Team Leader for the duration of the escort. Administration of any medication must be in accordance with written instruction from the Detention Health Service Provider and must be recorded on the EOO Occurrence Log.

All Detainees will be asked to declare any injury/illness prior to departure. If any injuries/illnesses are disclosed, the escort Team Leader must contact the local Centre for further instruction. The local T&E team may contact the Triage Line, medical staff at the facility, or DIBP for further advice.

The escort Team Leader will ensure there is a clear handover of the Detainee from DIBP representatives, noting the time of handover in the associated escort occurrence log.

### 4.2 Searching of Detainee(s)

All searching will be undertaken in accordance with Serco Immigration Services policy.

### 4.3 Departure and Transit

Prior to departure Detainees will be offered the opportunity of attending the toilet facilities at the collection location, if they are secure and the escort Team Leader is satisfied that any risks can be mitigated.

The Detainee (s) will be escorted to the T&E vehicle and seated in accordance with agreed process and training.

The escort will only commence when the escort Team Leader is satisfied that it is safe to do so. The escort Team Leader will inform the local T&E Centre of the time of departure. This will also be recorded in the EOO Log.

The risk profile of the escort can change at any point; therefore, staff must act in accordance with training and instruction received to mitigate any changing risks as they present.

Should any situation arise during the course of the Compliance escort, local T&E Management must be contacted by the escort Team Leader. The escort Team Leader does not have the authority to work outside of the direction provided during the escort briefing and agreed procedure unless the situation that presents impacts on the Health & Safety of those engaged in the escort.

### 4.4 Maintaining Detainee Dignity and Privacy

Serco Immigration Services will make every effort to maintain the dignity and privacy of the individual whom is being detained; however, identified risk factors may affect the security presence.

When managing the Detainee while they are using toileting facilities the escort team will operate in a manner that does not unnecessarily intrude on the privacy of the individual unless the risk assessment relevant to the Detainee determines that this would not support the overarching security needs.

Regardless of the risk level that the escort is determined at, the Detainee will not be permitted to fully close the door to a bathroom. The training provided to officers will identify the supervision requirements of the escort team when the Detainee is engaged in the above activity. This will include the positioning of individual escort team members and the ongoing engagement with the Detainee at this time.

#### 4.5 Use of Force

Force will only be used in accordance with Serco Immigration Services policy.

#### 4.6 Compliance Escort Operational Implementation Responsibilities

It is the responsibility of local Transport & Escort Management to:-

- ensure that regular communication is maintained with the escort team as may be determined by the Detainee risk rating and the duration of the escort;
- ensure that all reporting has been completed in line with policy.

It is the responsibility of the Transport & Escort team assigned to the escort task to:-

- remain focussed and alert during the escort task, ensuring that the Detainee remains within their control at all times;
- prioritise the safety, security and welfare of the Detainee;
- undertake a continuous review and assessment of the risks that arise during the escort task, taking immediate action to mitigate any identified risk;
- take appropriate steps immediately to protect the Detainee and any others from harm;
- ensure the Detainee remains in 'arms length' of the escort team at all times apart from circumstances in which this would undermine the Detainee's privacy and dignity, unless the risk assessment indicates the need for a higher level of monitoring;
- ensure under those circumstances when the Detainee is not in 'arms length' that no barriers to engagement are placed between the escort team and the Detainee. For example, ensuring that the Detainee is not able to close a door between themselves and the security escort;
- complete all necessary escort documentation that arises during the task;
- maintain contact with the local Transport & Escort Management team to provide regular communications on the conduct of the escort and to advise of any concerns or questions that arise during the course of the escort;
- maintain a safe working environment;
- inform local Transport & Escort Management of any incidents as appropriate.

## 4.7 Occurrence & Incident Reporting

The escort team will record all occurrences within the Escort Operational Order Log during the course of the escort task. It is the responsibility of the escort Team Leader to ensure the accuracy and content of EOO and Log.

The escort Team Leader will notify local Transport & Escort Management immediately of any incident as it arises during the escort task.

Local Transport & Escort Management will ensure that the escort team has followed all instructions in relevant PPMs, including Evidence Management where appropriate, and contingency plans. The local Transport & Escort Management team will ensure all relevant parties are informed in line with the Incident Reporting PPM.

Local Transport & Escort Management will ensure that the Escort Operational Order has been correctly completed during the course of the escort task and that all entries are made within the DIBP Portal system.

# Death in Detention

## Serco Immigration Services

### Document Control

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4	Update to reflect Facilities & Detainee Services Contract 2014	19/02/2015

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## 1. Introduction

### 1.1 Policy

Serco staff will respond quickly, safely, efficiently and sensitively to any apparent death of a Detainee.

This policy contains general guidance for the management of the death of a Detainee, and should be read in conjunction with the local contingency plan for Death in Detention which contains more specific instruction. All instructions in the local contingency must be followed.

Note: All local contingency plans must be submitted to the National Security Risk and Intelligence Manager.

If a death occurs within a hospital or other institution, Serco will notify the department immediately and follow the procedures of the hospital or institution.

### 1.2 Related Documents

- Local Contingency Plan for Death in Detention
- Incident Management Protocols (SIS-OPS-PPM-0008)
- Debriefing PPM (SIS-OPS-PPM-0004)
- Investigations PPM (SIS-OPS-PPM-0010)
- Incident Reporting PPM (SIS-OPS-PPM-0019)
- Use and Security of Rescue Tools (SIS-OPS-PPM-0047)
- Evidence Management PPM (SIS-OPS-PPM-0009)
- Duty of Care PPM (SIS-OPS-PPM-0026)

### 1.3 Related Forms

- Forms associated with above PPMs

### 1.4 Legislative and Standards Framework

- Facilities and Detainee Services Contract 2014
- Migration Act 1958
- Detention Services Manual, DIBP
- Work Health and Safety Act 2011
- Comcare Reporting Requirements

## 2. Procedures

### 2.1 On Scene Requirements

On discovering or being alerted to the apparent death of a Detainee, it is imperative that the staff member does not assume that the Detainee has died. Serco staff are not trained or qualified to make this distinction. Only a trained medical professional is qualified to make an assessment as to the extinction of life. Assistance, including medical assistance and / or emergency services, must be summoned, as soon as possible, using whatever available means at the facility, including alarms, radios, telephones or through another staff member, and first aid must be administered immediately if it is safe to do so, using all provided personal protective equipment, until relieved by a qualified medical practitioner.

If a ligature has been used, the detainee's body must be supported while the ligature is cut, where possible using a cut down tool. Never cut a ligature through the knot; whenever possible the knot must be preserved as it will be considered evidence. The Detainee should be laid on a solid, flat surface and first aid must be initiated if safe to do so.

Any death in detention is likely to be the subject of a State coronial inquiry or other agency inquiry such as a parliamentary committee. The area of the incident must be considered a crime scene, and as such care must be taken to ensure that the scene of the incident is preserved; access must be controlled and recorded. The area must be sealed off to prevent other Detainees or staff entering the area and contaminating it. This includes not removing any articles (evidence) from the area. A log must be made of all other people in the area; both staff and Detainees.

If the Detainee is confirmed as deceased while onsite, the body must not be left unattended until released to the appropriate authority. If possible, a copy of the certificate confirming Life Extinct should be obtained from the medical practitioner.

All staff involved must complete Officer's Reports and forward them to the Shift Supervisor / Operations Manager as appropriate in the facility.

In conjunction with the points above, staff must follow the actions stipulated in the local contingency plan.

### 2.2 Management Requirements

The following points are guidance for any management within the facility and should be adapted to fit the specific facility's operational structure.

- Ensure the emergency services have been contacted including notifying the relevant police service.
- Ensure a log of the incident is commenced and maintained,
- Ensure access to the scene is controlled and that the scene is not disturbed, as far as reasonably practicable, including identifying and listing all persons who entered the scene. The scene must not be released until permission to do so is given by the relevant agency, including the relevant police agency, and WHS / Comcare if confirmed by the Department as relevant
- Consider opening the command suite as appropriate.
- Ensure all departments within the facility are aware of their responsibilities in line with local contingency plans.



- If the facility is in night state, ensure staff are deployed to the entry point to facilitate the entry and exit of the emergency services.
- Ensure all appropriate agencies are informed of the incident; including facility senior management, DIBP, IHMS, Serco National Office, relevant police agencies and that all agencies are regularly updated.
- Ensure the scene has been sealed to ensure crime scene preservation, and that there are sufficient staff on scene to manage the situation. If necessary, arrange for further staff to attend the facility.
- Obtain a list of names of all individuals present at the time of discovery of the incident, or those believed to be involved.
- Secure the personal property of the deceased and transfer items of the deceased's property to the police as required.
- Immediately seize and secure all appropriate documents, including but not limited to:
  - Keep SAFE / PSP SME documents where applicable
  - The Detainee's dossier, IMP & BMP where applicable
  - The Detainee's medical file, where provided by IHMS
  - All relevant occurrence logs
- Comply with any safety instructions given by the Department

Documents should be scanned, where possible, or photocopied, prior to being sealed and provided to the relevant police agency/Coroner's staff. The scan or copies must be held by the Centre Manager / Team Leader. See Hold Order information and Document Checklist at Annex A & B for further information.

It is Serco's responsibility as per the Detention Services Manual, to ensure that subject to legal protocols, all relevant religious and spiritual customs are recognised and respected when a Detainee dies. Where there is a conflict between the wishes of the Detainee population and the required medical and legal procedures, this must be managed sensitively with the assistance of interpreters and mental health staff where necessary.

Furthermore, Serco is obligated to ensure that the rights are observed of local Indigenous traditional landowners to practice appropriate rituals relating to the spirit of the deceased.

### 2.2.1 Support for Staff and Detainees

After a death in detention, all staff and persons in detention in the facility should be informed promptly and sensitively about the facts of the death. It is important to establish the facts of the situation to avoid rumour and gossip, and to ensure transparency. Care should be taken to notify those staff who are off duty, but who were closely involved with the detainee.

Following a death in detention many staff may experience short-term stress reactions, such as feelings of distress, shock and guilt and need to be reassured that these reactions are normal. These issues will be addressed in the hot debrief, but the Employee Assistance Program should be engaged immediately to support staff involved, on both a 1:1 and group basis. Staff must not be left to make this contact for themselves; many may feel a stigma attached to interacting with a support or counselling service and should be encouraged to engage.

Following a death in detention research has indicated that there is a potential for a heightened risk of suicide and self-harm attempts among detainees. Staff should be alert to this possibility and provide extra support and supervision especially to known vulnerable persons in detention, known self-harmers or other identified high risk groups. Staff must utilise the Keep SAFE / PSP SME processes where appropriate.

Serco facility management must liaise with IHMS to ensure that all Detainees on heightened PSP SME and those who have recently ceased being managed under the PSP SME protocols, are reviewed quickly following any death in detention. IHMS Mental Health Support and counselling services should be requested to be onsite as soon as possible following the event to provide support to any Detainees and to maintain a presence within the facility for as long a timescale as agreed by IHMS, DIBP and Serco.

## 2.3 Reporting Requirements

### 2.3.1 Internal Notification

It is imperative that the Serco National Duty Operations Manager is kept informed of all developments in the incident, including but not limited to:

- Discovery of the apparent death
- Confirmed time of death
- Any reaction within the facility, and planned management of this
- Any media presence.

### 2.3.2 DIBP & Portal

A death is classified as a 'critical' incident within Portal; as such it should be verbally reported immediately to the on call DIBP representative as appropriate at the facility, and an Incident Report (IR) must be released on Portal within four hours. . The IR should contain, but not be limited to, the following information:

- The details of the detainee(s) – all detainees, including the deceased, any suspected assailants and witnesses, must be linked as participants to the IR
- Where the detainee was located (which facility, compound, room)
- The time, date and circumstances of discovery
- Staff actions upon discovery, including contacting emergency services
- Staff and all attending agencies must be linked as participants to the IR
- Details of how the reaction to the incident was managed.

While it is accepted that not all information may be available immediately, the incident report details should provide the reader with all pertinent information. If the reader is left with questions relating to the basics of the incident; who, what, when, where, how etc, the incident report has not been completed appropriately and must be rectified.

If there are any other reportable incidents that occur as part of this incident, the detail should be included in this IR but another IR for the appropriate incident must be opened and linked to this IR.

The IR must not be closed as there will inevitably be information to add to the IR at a subsequent time or date.

Further to the IR, a monthly report detailing any injury, illness, death or property damage and action taken to prevent recurrence or minimise impact must be provided to the Department.

### 2.3.3 Consular Post Notification

The DSM is clear that, in the event of the death of a foreign national in Australian immigration detention, notifying the relevant Consular Post for the individual is a DIBP responsibility. For certain nationalities, a copy of the death certificate must be provided; while this will usually be supplied directly to DIBP and IHMS; if Serco happen to receive this document it must be forwarded to DIBP without delay.

### 2.3.4 Next of Kin Notification

Serco will not normally hold next of kin information; as such there must be careful and efficient liaison with DIBP reference notifying the deceased Detainee's next of kin. This notification is a DIBP responsibility, however Serco should ensure that care is taken to ensure that the next of kin is notified as quickly as possible to avoid the media releasing details prior to the notification being made. If the next of kin is also in detention, Serco will work with the Department to ensure this notification is made efficiently and appropriately with all due care taken to ensure and maintain the wellbeing of all affected Detainees.

### 2.3.5 Occupational Health and Safety Reporting

Serco is contractually obligated to submit a monthly report detailing any injury, illness, death or property damage and action taken to prevent reoccurrence or minimise impact. While it is accepted that the time following an incident such as this is incredibly busy, this reporting requirement must not be overlooked.

## 2.4 Post Incident Requirements

### 2.4.1 Appointment of Contact Officer

The Centre Manager should appoint a Contact Officer to assist Serco in managing the processes involved following a death in detention. In particular, a Contact Officer should be able to coordinate a response to deal with the police, follow up on outstanding issues, respond to requests for documents (from the police and, later, Counsel Assisting the Coroner) and provide assistance to Serco's internal and external lawyers.

The Contact Officer should be someone who was not directly involved in the incident, but who has sufficient knowledge of the context of the incident, including but not limited to local operating procedures, facility and Detainee knowledge. The Contact Officer should be an Operations Manager grade or above.

### 2.4.2 Hot and Cold Debrief

It is imperative that hot and cold debriefs are conducted following any significant incident. The hot debrief should be led by a senior member of staff and be held in an informal atmosphere, away from the scene and should focus on reassurance, information sharing and provide an arena for staff to support each other. The hot debrief is essential for covering and addressing operational details which may be forgotten or overlooked by the time of the cold debrief.

The cold debrief should include all relevant agencies, including those outside of Serco, and should focus on the organisational issues identified during the incident which can provide areas for development.

See the Debriefing PPM for further information.

### 2.4.3 Investigation and Post Incident Review

All major and critical incidents are subject to Post Incident Reviews which must be completed within contractual timeframes. In addition to the Post Incident Review, Serco will conduct an internal investigation and cooperate with all appropriate external investigations or inquiries, in line with the Investigations PPM. It is likely the relevant State coroner or other agencies, such as a Parliamentary Committee, will conduct an inquiry. If this occurs, Serco Immigration Services (SIS) Legal Counsel will provide advice to management and staff as required including support to Serco employees during interviews and providing reports to the executive teams and boards to meet their due diligence requirements. SIS Legal Counsel will determine whether an external legal resource is required in order to assist with providing such advice.

## Annex A – Hold Orders

Serco management may issue a 'Hold Order' to Serco staff at a particular location after the occurrence of an incident (eg a death in detention). The purpose of a 'Hold Order' is to preserve all documents which Serco may be required by law to produce to police and which may be collected during the course of a police investigation to be used as evidence in legal proceedings.

### When a hold order has been issued, you must:

1. Read the Hold Order so you know what documents must be preserved. The Hold Order lists the dates and types of documents that are affected.
2. Do not destroy, delete, change or throw out any documents subject to the Hold Order. A document includes things like:
  - Electronic documents, for example emails, documents saved in soft copy on the system;
  - Hard copy documents, for example printed emails, letters, reports, drafts of documents, handwritten notes, diaries and notebooks;
  - Discs including video footage;
  - Business records for example, receipts, bank statements, employment records and job descriptions, contract tenders and detainee records; and
  - Maps, drawings, photographs, plans.
3. Preserve all existing documents by:
  - Keeping all emails in your Outlook account. If you run out of space, immediately contact IT to increase the size of your email box or to get assistance with archiving old emails.
  - Preserve all documents in the form that you find them – that means not destroying any documents and not altering, writing on, or converting a hardcopy document to softcopy or converting a softcopy document to hardcopy.
4. If you are a team leader you must:
  - Give a copy of the Hold Order to all team members
  - Keep a list of where relevant documents are kept (for example on computers or in office file storage)
  - Ensure team members understand that they must not alter, delete or throw out any documents

If you are not sure about what to do ask your team leader or Serco Legal Counsel at SIS National Office.

## Annex B – Responding to a Death or Serious Incident

Incidents in detention can lead to various forms of legal proceedings, such as a coronial investigation and inquest or a police investigation. As soon as possible following an incident, you should collect the following documents, make a copy and keep both copies in a safe place.

Documents such as those below may be required by a court or the police.

Serco is required to comply with the precise terms of any court order or specific categories of any subpoena addressed to it. Failure to do so can result in penalties.

Where you are authorised by a Serco manager to provide documents directly to the police, make sure you retain a copy and make a detailed record of everything that is provided.

**Table 1 – Document Checklist**

<b>Detainee's Dossier</b>		✓
Current dossier	Check dossier to ensure it is complete, including induction documents, PSP assessments and observations, security watch check sheets, SRATs, detainee requests and Serco responses, complaint forms, IMPs and personal record sheets	
Any previous dossiers from other centres		
<b>Incident-Specific Materials</b>		✓
Officers reports	From any involved officers Including any attachments	
Incident log / door keeper's log		
Debrief minutes	From Hot and Cold debriefs	
Video and/or CCTV footage of incident, and any photos	If applicable (eg Blaxland, Annex or use of force) Any footage should include any introductory briefing prior to filming of incident Any photos should include time, date, location and record of who took the photos	
<b>General Daily Documents</b>		✓
Daily occurrence logs	For 48 hours prior to incident For Control Room and any other relevant areas	
CSM Handover / Daily operational report	For area of centre in which detainee was housed, eg compound For 5 days prior to incident	
Daily Run Sheet / Daily Detail Sheet		
Visitors' log	For 5 days prior to incident	
Staff Sign-In/Sign-Out register	For 5 days prior to incident	

DIBP/Permanent Contractors Sign-In/Sign-Out register	For 5 days prior to incident	
Welfare checks	For 24 hours prior to incident	
<b>Portal</b>		✓
Incident reports	All reports regarding incident All reports regarding Detainee Include all attachments to incident reports	
Staff/Security Intelligence reports	All reports relating to Detainee	
IMPs	Including any operational plans, operational orders and incident resolution plans	
SRATs		
BMPs		
Observations	If entered into portal, eg at SIRH	
<b>Other Potentially Relevant Documents</b>		✓
Serco mobile phone records	If any Serco officers involved used mobile phones during the incident	
Meeting minutes	Any meeting in which detainee is mentioned Including morning meetings, Detainee placement assessment/PSP meetings etc	
Other notes	Any other notes or records (including emails) made by Serco officers, particularly those who were first to respond to the incident or were closely involved  In addition to their officers' reports, Serco officers who were involved in the incident should be encouraged to make a note of any surrounding details they remember, such as timings, phone calls and the people around	

# Detainee Placement

## Serco Immigration Services

### Document Control

<b>Document:</b>	Detainee Placement
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1.0.1	Update terminology and language	13/03/2014
2.0	Updated to reflect Facilities and Detainee Services Contract 2014	19/02/2015

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## 1. Introduction

### 1.1 Policy

The appropriate placement of Detainees within the immigration network is critical to the success of the Immigration detention business model and the individual management of Detainees and facilities. Serco Immigration Service (SIS) is contracted to provide risk advice to Department of Immigration and Border Protection (DIBP) and places an emphasis on the rigorous assessment of Detainees and immigration facilities to provide support to the operational objectives of DIBP.

The process for determining the placement of a Detainee is an intensive and time critical process involving a diverse local and national stakeholder group. During the process, it is important to consider not only the needs of DIBP but also the needs and welfare of the Detainee as this will contribute to the management of individual, facility and organisational risk.

The Department is responsible for determining which Facility a detainee is to be placed in. Serco is responsible for the allocation of accommodation for Detainees within each Facility.

This document provides direction to Serco on the required steps in assessing individual and facility risk and how best to use this information to provide input and considered opinion to the DIBP process of assessing suitable Detainee placement options.

### 1.2 Related Documents

- Behaviour Management PPM (SIS-OPS-PPM-0006)
- Individual Management Plan (SIS-OPS-PPM-0040)

### 1.3 Related Forms

- Proposed Placement Escalation Form (SIS-OPS-FRM-0031)
- Behaviour Management Plan (BMP) (SIS-OPS-FRM-0012)
- Request to Transfer a Detainee to a Secure Facility (SIS-OPS-FRM-0013)
- Individual Management Plan (IMP) (SIS-OPS-FRM-0030)

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- ISO 31000 Standard for Risk Management

## 2. Procedures

### 2.1 Network

The Department will seek to place Detainees in the most appropriate facility after considering security risk, Detainee cohort status, physical and mental health issues and other special needs, the provision of dedicated capacity for all Detainees in the immigration detention network.

Serco will notify the Department where it is believed that the placement in a Facility is inappropriate. This may result in a request to move the Detainee to another Facility, or suggesting additional security controls be implemented to mitigate the risk.

### 2.2 Facilities

Serco will identify and allocate the appropriate accommodation for detainees within each facility, taking into consideration the health, welfare, cultural, family and security related needs and circumstances prior to each accommodation placement. Detainee requests to be accommodated in a particular area or unit are to be taken into consideration when identifying suitable accommodation.

### 2.3 Recording Placement

The Department is responsible for setting a Detainee's location in the Portal information system. Only then can Serco access the Detainee's details.

Providing the Department has set the Detainee's location, Serco is responsible for setting further location details, such as the compound / room details.

## 3. Detainee Placement Options

Where a Detainee is accommodated in a facility that is not consistent with the detainee's security risk rating, and where Serco believes that the security controls are not sufficient to maintain the integrity of immigration detention, Serco may recommend to the Department one of the following actions:

- Implementing additional security controls at the facility
- Moving a Detainee into a more restrictive place of accommodation
- Requesting the transfer of the detainee to another facility
- Requesting the transfer of the detainee to a correctional facility

### 3.1 Implementing Additional Security Controls

Detainees should be placed at Facilities that are appropriate for their security risk, taking into consideration the individual Detainee Security Risk Assessment and the Facility Security Risk Assessment. Where Serco, acting reasonably, believes that the security controls are not sufficient to maintain the integrity of immigration detention, then:

- Serco may write to the Department detailing the issue and the proposed mitigation strategy for the Detainee(s); and
- If the Department, acting reasonably, acknowledges the security risk, and is satisfied that the mitigation strategy mitigates the security risk of the Detainee(s):
  - both parties shall implement the mitigation strategy, and
  - the costs associated with implementing the mitigation strategy will be charged to the Department at the additional monitoring variable rate set out in Schedule 5 (Detention Services Fee) or such other applicable pricing mechanisms in the Contract.

### 3.2 Placing a Detainee in a Restrictive Place of Accommodation

Moving a Detainee to a different area of the facility may serve several functions:

- It may provide an opportunity for that Detainee to receive extra support and counselling in order to assist them in modifying and reflecting on their behaviour
- It may allow them to have a break from their environment which may serve to assist in reducing any frustration they may be experiencing and to develop more appropriate strategies to help them cope in the future
- It may provide respite for other Detainees in the area if an individual has been displaying consistently anti-social behaviour.

The opportunity should be taken to engage with the Detainee away from the pressures he / she may be experiencing in their normal area of residence, to try to counsel the individual to effect a positive change in their behaviour.

The detainee must have been assessed by a mental health clinician to ensure the behaviour is not related to a mental health issue, and the approval of the DIBP Regional Manager must be obtained prior to placing a Detainee in a place of restrictive accommodation.

While the Detainee remains in a restrictive place of accommodation Serco is contractually obliged to:

- support and engage with the Detainee on a daily basis
- maintain accurate records of the Detainee's behaviour, health and well being
- record the Detainee's behaviour, health and wellbeing in the DIBP portal on a daily basis
- develop a further BMP.

Information must be provided to DIBP Detention Operations as requested as to whether Serco is requesting a further / continued placement of the Detainee in the restrictive place of detention.

Where a Detainee is placed in restrictive or separation detention as directed by the Department or in accordance with an order from a Court of competent jurisdiction, Serco may request that additional staffing costs will be payable at the additional monitoring variable rate specified in Schedule 5 (Detention Services Fee) of the Facilities and Detainee Services Contract 2014.

### 3.3 Requesting the Transfer of a Detainee to Another Facility

Should the Detainee's behaviour escalate to a point where the good order of the facility is undermined, the Centre Manager / Team Leader may seek the Detainee's removal to a more secure immigration detention facility, such as VIDC (Blaxland), MIDC or PIDC.

The motivation for the Detainee's unacceptable behaviour must be examined prior to requesting this transfer. Wherever possible antisocial behaviour caused by frustration at being in a remote location should not be responded to with a transfer to a metropolitan facility, as this sets a precedent of rewarding antisocial behaviour with the Detainee's desired outcome.

Furthermore, transfer to an alternative facility may only be for a short period of time as detailed in the BMP and if agreed, there is a high probability that the individual will be returned to the original facility in due course.

The transfer decision can only be made by DIBP. The following steps should be followed to pursue this transfer request.

- If applicable at the facility, Serco should discuss their intent to request the transfer of an individual at the Individual Management and Placement Review Meeting prior to submitting the formal request. This is courteous, ensures transparency and allows DIBP case management and other service providers to provide input into any placement related decision. Contact must be made with the proposed receiving facility. Information relating to how the receiving facility will support the Detainee in achieving the desired behavioural changes should be included in the submission to DIBP.
- The Request for Transfer to a more secure facility should be completed and emailed directly to the DIBP Regional Manager, copying in the National operations group.
- If after 48 to 72 hours (timescale depending on Detainee manageability), the DIBP Regional Manager fails to respond, the request will be raised at a national level with DIBP, by the National operations group.
- Should DIBP choose not to transfer the Detainee to a more secure place of detention the Serco Centre Manager / Team Leader concerned will advise the DIBP Regional Manager in writing that Serco remains concerned about the placement for the risks previously identified, and will propose additional security controls as per 3.1 above.
- If a transfer is to occur, a report containing all relevant information and BMPs, must be forwarded to the receiving facility, prior to the Detainee's arrival. Where possible a teleconference should be arranged between the author of the BMP at the sending facility and their counterpart at the receiving facility to ensure full information disclosure and to address any queries held by the receiving facility.

### 3.4 Requesting the Transfer of a Detainee to a Correctional Facility

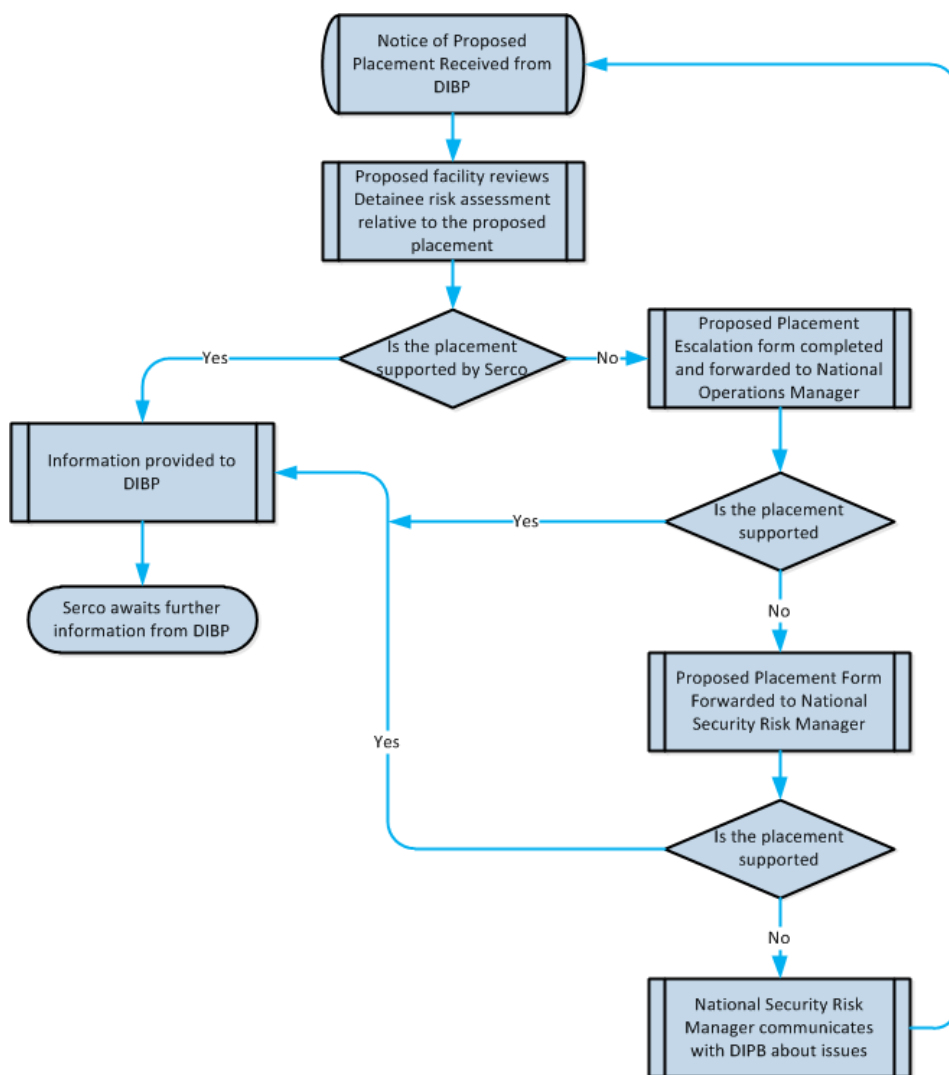
The following procedure must be followed for those Detainees who display illegal and or criminal behaviour that undermines the good order of the immigration detention facility.

1. The Serco Centre Manager / Team Leader must immediately advise the DIBP Regional Manager of the nature of the illegal or criminal behaviour which undermines the good order of the immigration facility and a history of the Detainee's previous behaviour as recorded, and ensure Portal is updated appropriately.
2. The Serco Centre Manager / Team Leader or their representative must provide to the Serco National operations group and the Serco Regional Manager the following information:

- a. Detainee details, including name, date of birth, ethnicity, time in detention
  - b. Detainee Service ID
  - c. Record of anti-social and / or illegal behaviour
  - d. Recommendation that the Detainee be removed to a correctional facility, including justification of why the Detainee’s continued presence in the IDF threatens the good order of the facility, and the safety and security of other Detainees, staff and visitors to the IDF
3. In line with the DIBP Detention Services Manual, the National operations group will draft a letter of recommendation to the DIBP Regional Manager. This is to be provided to the Centre Manager / Team Leader for their signature and sent to the DIBP Regional Manager.
  4. Should no action in support of the recommendation be taken within three days, the National operations group will send a letter recommending the removal of the Detainee to a correction facility to DIBP nationally.

### 3.5 Placement Process

Figure 1 – Placement Process



### 3.6 Placement Reviews

Serco will participate in the Individual Management Plan and Placement Review Committee at each Facility as per the FDS Contract, to review and discuss IMPs and Detainee Placement. Serco will inform the Department where Serco believes that existing placement in a Facility is inappropriate for the Detainee.



# Digital Audio Visual Records

## Serco Immigration Services

### Document Control

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2.0	Updated to reflect Facilities and Detainee Services Contract 2014	19/02/2015

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# 1. Introduction

## 1.1 Policy

Serco Immigration Services will have processes in place to promote the safety and security of all immigration detention facilities and people who visit, work or live in them. Digital and audio visual records will be taken as required and in line with the requirements of the Contract and with the Detention Services Manual, and stored as a means of accountability and to enable the Department of Immigration and Border Protection (DIBP) to review actions and occurrences captured in such records.

## 1.2 Related Forms

- Form 993i Safeguarding Your Personal Information

## 1.3 Related Documents

- Evidence Management (SIS-OPS-PPM-0009)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Privacy Act
- Freedom of Information Act 1982
- Evidence Act 1995
- Archives Act 1983

## 2. Procedures

### 2.1 What Constitutes Audio Visual Recordings?

The term 'Audio Visual Records' applies both to Closed Circuit Television (CCTV) and to handheld video imagery (Full Motion Video – FMV).

Regardless of the purpose of the creation of the audio visual record, the inherent dignity of the person in detention will be preserved. Recordings will be taken in accordance with Serco Training and Toolbox Talks.

The Contract and the DSM stipulate activities which must and must not be recorded.

### 2.2 Digital Records

Serco must digitally record an audio and visual record of all instances where:

- use of force is planned (excluding planned use of force or restraints when external to the Facility, unless directed to do so in special circumstances);
- the Accommodation of a Detainee is searched; or
- there is any other Incident that the Department would likely wish to view or hear as evidence of the actions of staff.

Where such audio and visual recordings have been made, Serco is required, within 24 hours of making the recording, to:

- make an unedited copy of the recording;
- label the original and copy of the recording with the date and time of the recording, and the names of the people who appear in the recording; and
- provide a copy of the recording to the Department on request, in an appropriate file format as determined by the Department.

Serco must maintain copies of all audio and/or visual records (including digital records and surveillance camera records) in accordance with the Archives Act 1983 and, in the instance of any recordings of Incidents, for the duration of the Term upon the expiry of which, all such recordings shall be transferred to the Department in accordance with the provisions of Section 7 (Business Services) of Schedule 2 (Statement of Work).

### 2.3 Surveillance Camera Records

Serco will operate and monitor all surveillance cameras at a Facility 24 hours per day, seven (7) days per week.

After each Incident, Serco must:

- review the surveillance camera recordings to determine if any recording captures evidence that may be relevant to the Incident; and

- provide the Department with a copy of any recording that captures evidence that may be relevant to an Incident, within 24 hours of a request.

Serco must provide the Department with a copy of any recording:

- that the Service Provider, acting reasonably, knows that the Department would wish to view; or
- if requested by the Department, within the 28 day storage period referred to below.

Serco must:

- keep all surveillance camera recordings in secure storage for at least 28 days after the recording is made;
- provide the Department with access to all surveillance camera recordings and any other related Material in secure storage; and
- ensure that any recordings that capture an Incident are not deleted.

## 2.4 Digital Record

Serco must digitally record an audio and visual Record of all Escort Tasks involving a "High" or "Extreme" risk Detainee, while the Detainee is within the vehicle.

Where such recordings have been made, Serco must, within one (1) hour of completing the Escort Task:

- make an unedited copy of the recording;
- label the original and copy of the recording with the date and time of the recording, and the names of people who were involved; and
- provide the unedited copy of the recording to the Department.

## 2.5 Activities Which Must Not Be Recorded

Detainees must not be recorded while undertaking personal activities that include:

- bathing and toileting;
- dressing in private;
- speaking to a religious representative or undertaking religious activities;
- speaking to a representative of an external organisation or agency about their immigration status or in regard to conditions of their detention, for example, a legal representative, a Commonwealth Ombudsman officer or a diplomatic or consular representative;
- undergoing medical treatment or consultation; and
- speaking with personal visitors (excluding those common areas already covered by CCTV camera).

Video imagery must not be taken of a Detainee while being strip searched. However, a witness must be present when a strip search is conducted, as described in the Searching and Fabric Check PPM (SIS-OPS-PPM-0050).

## 2.6 Labelling of Recordings

Footage taken of incidents will be saved and labelled according to the following naming convention:

YYYYMMDD\_Facility\_Type of recording (CCTV/FMV)\_Detainee name (if applicable)\_short description of incident including location.

For example:

20131002\_PIDC\_FMV\_JoeSmith\_Roomsearchroom1ABCDcompound.

OR

20130923\_VIDC\_CCTV\_AndrewJones\_AttemptedescapeBlaxland.

## 2.7 Access to Recordings

Access to and the viewing of recordings must be controlled. Staff must remain mindful of the confidentiality of all information included within recordings made, and treat access to and viewing of recordings appropriately.

## 2.8 Retention of Records

Serco must maintain copies of all audio and/or visual records (including digital records and surveillance camera records) in accordance with the Archives Act 1983.

Recordings of Incidents must be retained for the duration of the Contract term. On expiry of the Contract, all such recordings shall be transferred to the Department

## 2.9 Equipment

Audio visual recording equipment must be kept in a state of readiness. Access to such must be controlled.

# Domestic Transfers and Charters

## Serco Immigration Services

### Document Control

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# 1. Introduction

## 1.1 Policy

Serco Immigration Services (SIS) will have in place processes and procedures to effectively facilitate the transfer of Detainee(s) to Detention facilities with Australia or to Offshore Processing Centres (OPC). All Detainee(s) will be treated with dignity and respect, in accordance with their own culture, at all times. It is acknowledged that a transfer may cause the individual significant distress. Escorting officers will be mindful of this and act with compassion at all times, while maintaining the integrity of the escorting task.

In the event of the transfer not proceeding as planned, the Escort Team Leader will contact the Transport and Escort (T&E) Manager for further guidance, who will then notify the National Duty Manager.

## 1.2 Related Documents

- Reception, Induction, Transfer and Discharge PPM (SIS-OPS-PPM-0029)
- Operational Safety (SIS-OPS-PPM-0035)

## 1.3 Related Forms

- Escort Operational Order (SIS-TE-FRM-0003)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- AS/NZS 9001:2008 – Quality Management Systems - Requirements

## 2. Planning

### 2.1 Request for Service

No Domestic or Charter escort task will be undertaken without the receipt of a Request for Service (RFS) from Department of Immigration and Border Protection (DIBP). The RFS is a document received through the Service Provider Portal and is provided by DIBP to allow the T&E task to occur.

The RFS will stipulate as a minimum, the date of the transfer the identity of the Detainee(s), the location of the Detainee(s) and the destination of the transfer. The RFS should contain information relating to any known risk factors associated with the task or the Detainee(s), as they are available to DIBP at that point. When an RFS has been received locally, the National Operations Support Coordinator is to be notified immediately at [escort.intl@serco-ap.com.au](mailto:escort.intl@serco-ap.com.au).

The Operations Support Coordinator will liaise with the department and local T&E Managers to request staff to facilitate the escort and the development of the Escort Operational Order (EOO), this will include any mitigation stipulated by the National Planning Manager.

For a domestic transfer the Local T&E Manager will review the RFS from DIBP, accept the RFS through Portal and provide a risk assessment.

### 2.2 Risk Assessment and Approval From DIBP

The T&E Manager will review an RFS and Detainee(s) Security Risk Assessment Tool (SRAT) to conduct an initial risk assessment (RA). During the initial Risk Assessment, if a Detainee(s) has been identified as a High or Extreme risk or the pre-planned use of force is required then the T&E Manager is to request approval from the Department.

In the case of a charter operation, National Operations will conduct a Risk Assessment and develop Operational Plans.

### 2.3 Transfers and Charter Coordination

All domestic and Charter transfers will be coordinated through National Operations. When required a tactical plan will be developed which will become the overarching document that supports the further development of the EOO.

National Operations will request staff for domestic transfer and Charter tasks from the local T&E Manager who will utilise staff who are appropriately trained. The selection of staff will be based on the operational and DIBP requirements for each task.

### 2.4 Team Selection

Once the Risk Assessment has been completed, the National Operations Team will designate a team composition. The T&E Manager will identify a Team Leader, and driver, taking into consideration the following considerations including but not limited to:

- On each Escort Task where a female Detainee is to be transported, then at least one member of the team will be female. The staffing ratio will be based on the Serco risk assessment of the task. If children are being escorted, then at least one member of the team will be female
- If children are being escorted, all officers tasked must have satisfied all appropriate working with children checks
- When tasked as such, a 'medical escort' will include an appropriately trained individual; details will be supplied by DIBP / Detention Health Service Provider (DHSP)
- Physical capabilities of the Detainee(s)

Staff must ensure they maintain the nominated current certification and competency for all relevant training, such as Control and Restraint (C&R) and First Aid. Without current certification, officers will not be assigned to a domestic transfer task.

National Operations may develop training packages to meet the needs of the customer, with which all staff will need to be compliant to participate on a domestic transfer task.

## 2.5 Escort Team Submission to DIBP

When there is a domestic transfer task, National Operations will submit escort team names and passport details to DIBP within 4 hours of acceptance of the RFS, to enable escort staff travel to be organised by DIBP.

For all Charter Operations National Operations will submit staff to DIBP no later than 24 hours prior to the task occurring.

## 2.6 Escort Itineraries

When receiving escort staff itineraries from DIBP, National Operations will send escort itineraries to the local T&E Manager and request an EOO be developed. It is the responsibility of the local T&E Manager to verify the accuracy of the itinerary.

## 2.7 Escort Risk Assessment Process

The local T&E Manager will develop an EOO that addresses the risk and takes into account the SRAT, route and Site Risk Assessment (SRA, where applicable). The information included will assist in the risk determination and appropriate planning including risk mitigation required for each escort task

If the individual has been assessed at an elevated risk level i.e. high or extreme or they have been identified by DIBP as meeting specific criteria within s501 or compliance, then further consideration will be given to the resources required to safely and efficiently execute the escort.

When the enhanced escort position (EEP) or mechanical restraints are required, the T&E Manager will seek approval from the DIBP Centre Manager (CM) and follow the approval process as set out in the SIS-TE-PPM-0001 Approval Process and Operational Changes.

## 2.8 Portal Entry for a Domestic Transfer

The T&E Manager at the location where the escort is departing will be responsible for creating a transport entry on Portal and any subsequent Portal entries. On a domestic transfer task the receiving Centre will be responsible for the portal entry and if applicable the EOO from the airport to the Centre. Once this transport entry has been created, the T&E Manager will then send an email to National Operations with confirmation of the portal transport number.

## 2.9 Approval Process

All domestic transfer EOOs will be approved by National Operations, as per the SIS-TE-PPM-0001 Approval Process and Operational Changes.

## 2.10 Required Documentation

All transfers will be planned and executed using the following documentation:

- Escort Operational Order SIS-TE-DOC-0001
- Escort Risk Assessment Tool SIS-TE-REG-0001
- SIS-TE-PPM-0001 Approval Process and Operational Changes
- SIS-TE-DOC-0002 T&E Task Process and Approvals Framework – Domestic

# 3. Responsibilities

## 3.1 Team Leader

The Escort Team Leader is responsible for the following:

- Conduct of pre-departure operational briefings for the escort team including Code of Conduct, uniform and equipment checks, operational updates, embarkation, disembarkation and in-flight procedures, allocation of staff responsibilities.
- During a domestic transfer ensuring that the Detainee(s) are seated next to a window with an officer sitting next to them. When a Detainee(s) are in the middle row of an aircraft an officer will need to be seated immediately on both sides of the Detainee(s). During a Charter Operation, the Team Leader will ensure the seating arrangements are appropriate to the risk of the individuals.
- In-flight management of staff and Detainee(s) in accordance with procedures including searching, provision of refreshments, rest breaks, etc.
- Ensuring any incident involving the use of force is videoed when planned and Use of Force (UoF) reports are completed.
- On completion of the task scan the completed EOO to the T&E Manager who will then save the EOO onto the “G” drive.

## 3.2 Appearance

Serco staff are required to maintain a professional appearance at all times. The following dress codes are applicable to staff engaged in domestic transfer tasks:

- Domestic Transfers: staff will wear civilian clothing comprising of smart trousers, shirt / blouse. Jackets are optional
- Charter Operations: staff are to wear supplied Serco uniform.
- The following criteria apply to all domestic transfers:
- Appropriate footwear must be worn, in accordance with the dress code
- No steel toe capped shoes / boots to be worn
- No denim to be worn
- No shorts to be worn
- No training shoes / sandals / thongs to be worn
- Jackets, trousers and polo shirts must be logo free and must be in good order i.e. no rips.

### 3.3 Staff Luggage

Escorting officers at all times must be in a position to respond to an incident if necessary and should not carry large items such as large bags. Any carry-on luggage must be 'hands free' to enable staff to continue with escorting duties whilst in possession of their luggage. Suitcases, 'wheelie bags' or large holdalls are not acceptable.

Staff should consider the use of a small backpack. All personal items are to be stored in the overhead locker and will not be accessed until completion of the escort.

### 3.4 Vehicle Selection

The vehicle(s) allocated to the transfer will depend on the following factors:

- the risk levels of Detainee(s) scheduled to be removed
- any special needs
- the number of Detainee(s) scheduled to be transferred

Adequate planning processes will be in place to ensure appropriate allocation of vehicles to tasks considering the above factors and availability of resources.

### 3.5 Escort Operational Order Process

The planning process is explained in further detail in 'Operational Planning Process (SIS-OPS-PPM-0043)'. The local T&E Manager will plan the movement in detail including:

- Start times
- Collection time at place of detention
- Required arrival time at the place of departure allowing time for ticketing and handover of any documents from DIBP and IHMS
- Time to commence security screening through airport security
- Time to board the aircraft

Staff will be notified of all required information, as included within the International EOO, prior to the task.



When determining the proposed timings of the escort, time will be factored in to ensure the Detainee(s) welfare needs are met, such as:

- Acquiring refreshments
- Comfort breaks
- Any special requirements

### 3.6 Information Exchange with DIBP

DIBP must be provided with the following information as soon as it is determined:

- Names of the escort team for ticketing purposes or to develop a manifest
- The operational order (SIS-TE-FRM-0001)
- The T&E Manager must request the following documentation (prior to the commencement of the escort task):
- The location of passports or emergency travel documents for all individuals being escorted (if in the Detainee(s) stored property, these will be signed over to the escorting staff on collection of the Detainee(s))
- Medical notes (if required, they will be given directly to the medically trained staff member on the escort and are not Serco's responsibility)

## 4. Operational Implementation

### 4.1 Escort Team Briefing

Once National Operations has identified the resource(s) required to undertake the task, they will notify all staff of the following information as it becomes available:

- the date of the escort
- the muster time and location
- the estimated duration of the escort
- any scheduled stop built in to the escort
- the destination of the escort
- appropriate risk mitigations

The Team Leader will provide the following information to the team during briefing at the muster point:

- The number of Detainee(s) (including any dependent children) involved in the operation
- Collection point of the Detainee(s)
- The specific risk identified for each Detainee(s)
- Any special requirements (medical or support)
- If there is prior authority to use force (EEP or restraints), and the location of restraints

## 4.2 Mobile Telephones

The Team Leader will be issued a mobile telephone by the T&E Manager. The Team Leader will communicate effectively the progress of the transfer at each flight segment.

Staff are not permitted to use personal mobile phones during the escort task.

## 4.3 Collection of Detainee(s)

Detainee(s) will be collected from their place of detention or from another location as designated in the RFS.

The Team Leader will be advised of the required time of collection of the Detainee(s) by DIBP, however the Team Leader must contact the Detainee(s) location if there are any unforeseen changes to the schedule, and to request an update on the Detainee(s) behaviour. The EOO must be reviewed by the Team Leader to ensure that the RFS has been attached and all mitigations are followed. Upon arrival at the Detainee(s) location the site Manager is to give the escort staff an update of the Detainee(s) current behaviour, any recent intelligence or special needs, should be sought.

The Team Leader will become responsible for the Detainee(s) once custody has been handed over to the escort team. The Team Leader will ensure all appropriate documentation for the Detainee(s) transfer from their location is present.

All property will be accounted for in accordance with the Property Management PPM (SIS-OPS-PPM-0012). The Team Leader will hand over the Detainee(s) property to the destination escort officers.

Staff are to liaise with the DHSP and the Detainee(s) to ensure the Detainee(s) does not have any pre-existing injuries or illness prior to travel.

Any prescribed medication belonging to the Detainee(s) will be retained by the Team Leader or accompanying medical personnel until arrival at the destination Centre, whereupon it will be handed over to the receiving escort officers. Administration of any medication must be in accordance with written instruction from the DHSP and must be recorded on the EOO.

Staff must be mindful that collection is a critical point in the transfer process. The risk profile of the escort can change at any point, and staff must act in accordance with training and instruction received, to mitigate any changing risk and to deal sensitively and compassionately with individuals in their care.

## 4.4 Identification of the Detainee(s)

The Detainee(s) that is being transferred will need to be positively identified by the property officer and each member of the escort team. When on a Charter Operation, the Team Leader will nominate two staff to conduct independent identification checks. This will involve ensuring the Detainee(s) is verified as the person to be removed by checking the Detainee(s) ID card or statement of identity provided by DIBP or the departments IT system (Portal). The Detainee(s) is not to leave site or board the aircraft until verification is completed.

#### 4.5 Searching of Detainee(s)

All searching will be completed in accordance with SIS policy. The Detainee(s) is to be pat searched; during a pat search anything that could compromise the safety of the aircraft or the integrity of the escort is to be placed in the Detainee(s) luggage if appropriate for carriage on the aircraft.

#### 4.6 Detainee(s) Discharge

When Detainee(s) are being discharged for an IDF for a domestic or charter transfer, property staff will need to ensure the following has been completed:

- Check for contraband items in the Detainee(s) luggage - no dangerous goods i.e. matches or lighters to be packed in luggage.
- Ensure the relevant Detainee(s) documents, statement of identity are given to the Team Leader for the escort during discharge.
- Ensure luggage meets baggage guidelines for the designated carrier. The Detainee(s) will not be allowed any carry-on luggage, subject to the Escort Team Leader's assessment.
- Ensure all property, including sharp/wooden/metal objects, i.e. nail clippers/file, scissors and disposable razors etc., and liquids, aerosols and gels, are packed in check in luggage.
- Ensure the total weight of the Detainee(s) luggage does not exceed the individual weight allowance of the airline.
- That all travel documentation is included with the Detainee(s) valuables and recorded within the Dossier.

The escort team will greet and positively identify the Detainee(s). The escort Team Leader will brief the Detainee(s) on the escort.

#### 4.7 Dangerous Goods

Staff and Detainee(s) luggage must conform to airline, airport and aviation regulations regarding the presence of dangerous goods. Escorting staff must be satisfied that there are no dangerous goods in the Detainee(s) luggage.

#### 4.8 Seating in the Escort Vehicle

When a Detainee(s) is seated in a vehicle, the following principles need to be followed:

- The Detainee(s) are not to be seated behind the driver
- The Detainee(s) are to be seated by the window with an officer sitting directly next to him or have an officer seated on both sides of the Detainee(s)
- The Detainee(s) are not to be seated next to an exit
- When officers are not seated on both sides of the Detainee(s), then they are to be seated next to an exit
- Detainee(s) must wear a seat belt at all times when positioned in the vehicle;

- When moving a High/Extreme Risk Detainee(s) staff must ensure he/she is seated in a position to ensure an unobstructed view for 'in car video' recording purposes

The DIBP will liaise with the Australian Federal Police (AFP) or relevant State/Territory Policing Agency. and organise necessary assistance if required.

## 4.9 Airport Procedures

When possible all transfers are to be conducted airside and not through the front of the terminal where there may be security vulnerabilities. If a transfer needs to occur at any time in an unsecure area then the T&E Manager is to give consideration for additional staffing resources until departure.

Upon arrival at the terminal building, the escort vehicle will park in the designated area or proceed to the security gate for airside access, as determined locally and in accordance with the EOO.

When applicable the escort team will escort the Detainee(s) to the assigned holding area, when a holding room is not available then the escorts are to proceed to the departure gate.

Appropriate escorting procedures will be executed at all times, including staff maintaining an arm's length distance from the Detainee(s) at all times, if EEP or restraints are not utilised. The Detainee(s) safety and welfare, and the maintenance of the integrity of detention will be of paramount importance at all times.

Officers should, as far as possible, monitor the Detainee(s) levels of distress by interacting in a compassionate and understanding manner.

Officers should engage with the Detainee(s) in order to build a rapport, which may give the ability to elicit compliance and possibly gain intelligence that may assist the team with the transfer.

The escort driver must remain at the airport until the flight has departed in the event that the transfer is aborted or cancelled. Once the flight has departed the driver will notify the T&E Manager.

## 4.10 Checking In & Security Arrangements

As the team pass through the security screening, an officer will pass through first, then allow the Detainee(s) to proceed, followed by the next escorting officer(s) and if appropriate the driver last. This will ensure the integrity and security of the escort is maintained. Once the team have cleared the security screening, they are to make their way to the departure gate.

The Team Leader is responsible for coordination of the check in process.

When the Detainee(s) is being escorted in an unsecure area correct formations must be utilised. The escort team will be in arm's length of the Detainee(s) at all times, subject to any further use of force or restraints throughout the movement to the aircraft.

On a civilian flight, the back row of the aeroplane will usually be allocated to the escort. Under no circumstance must the team be seated away from the Detainee(s). The Team Leader must ensure appropriate seating is allocated prior to boarding the aircraft.

#### 4.11 Boarding

On arrival at the departure gate, Team Leader will make themselves known to the flight crew and agree the pre-boarding time and the process for boarding the flight. The escort will usually board the flight before any civilian passengers, however this will be negotiated with the flight crew and may be subject to change. If the Team Leader has concerns with the proposed boarding arrangements these must be flagged with airline immediately. The safety and security of all persons remains Serco's priority during this process.

Boarding is a high risk point of the transfer process. Officers must be mindful that the Detainee(s) may seek to disrupt the transfer at this juncture. The rapport established between escorting officers and Detainee(s) on the escort is of paramount importance, as the officer should be able to gauge whether disruption is likely. Irrespective of this assessment, officers must remain vigilant and ensure adherence with "close escorting" processes in order to maintain the integrity of the escort and the safety and security of all involved. Any assessment made by the escorting staff regarding the Detainee(s) demeanour and possible disruption must be shared with DIBP and the flight crew.

A nominated staff member is to ensure that the area where the Detainee(s) is to be seated is free from any objects that could compromise the escort. Any items that are removed, to ensure the safety and integrity of the escort (in consultation with the flight crew), will need to be given to the flight crew to be stored.

Once the flight has departed, the driver will return to the vehicle and contact the T&E Manager and provide a full report paying specific attention to any problems encountered and how they were resolved.

#### 4.12 Tarmac Transfer

In the event of increased security risk surrounding the transfer of the Detainee(s) through public areas due to a Detainee(s) non-compliance, media presence or increased public interest the escort staff will access the aerobridge from the Tarmac. Serco is to liaise with DIBP who will seek approval from the relevant Airport authority.

The T&E Manager will need to ensure there is agreement from DIBP, Airline and airport operations manager prior to commencing the transfer.

#### 4.13 Seating in the Aircraft

The seating allocation for a transfer needs to follow these principles:

- The Detainee(s) are not to be seated on an emergency exit and would normally be seated at the back of an aircraft
- The Detainee(s) are to be seated by the window and with an officer sitting directly next to him or have an officer seated on both sides of the Detainee(s) if located in the middle seat
- When officers are not seated on either side of the Detainee(s) then they are to be seated on an aisle behind the Detainee(s)
- Detainee(s) must wear a seat belt at all times when seated or unless instructed by airline staff i.e. when the plane is refuelling

#### 4.14 In Flight

Escorting staff are to remain alert for the duration of the flight, unless they are on a rest break period. There is to be a minimum of one staff member in control of the Detainee(s) at all times, this requirement may change due to risk which will be stated in the EOO.

All escorting staff and Detainee(s) will abide by the instructions of the Captain at all times throughout the duration of the flight. On landing, the escorting staff and Detainee(s) on board will remain in their seats until all other passengers have disembarked the aircraft.

#### 4.15 Meals

The Team Leader must assess the Detainee(s) demeanour in determining appropriate processes for providing the Detainee(s) with a meal.

If the Detainee(s) appears compliant, in the interests of promoting decency, the Team Leader may choose to allow the Detainee(s) and staff to eat their meals together.

If the Detainee(s) is non-compliant, the Team Leader will review the pertaining risks associated with staff accessing a meal to ensure that the security of the Detainee(s) is maintained at all times.

Consideration must be given to permitting the Detainee(s) access to any implement that may be used as a weapon. This includes cutlery, serving dishes etc. Should the behaviour of the Detainee(s) at the time of the meal service be deemed unsafe, the Team Leader may choose to request of the cabin crew that the meal be served at a later time. Staff must ensure the meal is provided if this is the case. The intention is in no way to deprive the Detainee(s) of their meal. In this situation, staff must also wait for their meal.

Prior to collection of the meal tray by the cabin crew, officers must ensure that all items (cutlery etc.) are accounted for and returned. This is of paramount importance in the maintenance of a safe and secure environment for all on the flight.

Regular observations of the Detainee(s) no less than hourly must be noted in the EOO and all incidents must be recorded to facilitate accurate incident reporting.

#### 4.16 Rest Breaks

The Team Leader must assess the Detainee(s) demeanour in determining appropriate processes for providing the Detainee(s) with a rest break, i.e. the opportunity to attend the toileting facility or to stretch and move while on the flight.

Escorting staff are to attend to the welfare requirements of the Detainee(s). If the Detainee(s) requests to use the aircraft toilet facilities, the Detainee(s) must remain seated until appropriate arrangements have been made. The escorting officers will stand in front and behind of the Detainee(s) and escort the Detainee(s) to the toilet. This process must be reversed for the return of the Detainee(s) to their allocated seat. The toilet will be searched prior to entering and any items considered dangerous are removed i.e. disposable shaving razors etc.).

An officer will remain outside and the toilet door will remain slightly ajar, this must be controlled at all times, an escort may use their foot to ensure the door is prevented from closing. The dignity of the Detainee(s) must be maintained at all times, however the Detainee(s) must never be allowed to close or lock the toilet door during this process.

All staff rest breaks for staff are to occur on the aircraft and when practicable not at a transit point. During the rest break on the aircraft, there is to be at least one officer in control of the Detainee at all times. The number of officers supervising the Detainee may increase due to non-compliance or mitigation for an elevated risk rating.

#### 4.17 Arrival

When the escort has arrived at the destination whether at an airport or the destination Centre the Team Leader will ensure that the Detainee(s) property and all relevant property is handed over to the Team Leader or the property officer.

#### 4.18 Use of Force / Restraint

Escorts will be completed in a manner conducive to encouraging the Detainee(s) cooperation at all times, however it is acknowledged that there may be circumstances where an individual being removed from Australia is not compliant.

Use of force must always be a last resort. De-escalation, negotiation and conflict resolution techniques are to be used before force. Use of force should be avoided if possible, and only used where no other measures are appropriate or available to protect the safety of all persons, the Detainee(s) and property, or if instructed by DIBP and the captain of the aircraft.

The level of force must always be proportionate to the degree of risk faced. The minimum level of force necessary is to be used and for no longer than is essential. Excessive force is not to be used in any circumstances.

On each international escort there will be discussion regarding the type of restraints to be used with a DIBP representative as part of the planning process to the escort. It is acknowledged that the type and extent of restraints may change depending on the nature of the risks posed by the Detainee(s) to be escorted and the requirements of the countries/air captain involved.

When restraints are used, it should be covered (where possible) with a blanket or piece of clothing to hide their use and to maintain the Detainee(s) dignity as much as possible. The use of restraints may be utilised in circumstances to:

- Prevent escape of a Detainee(s), especially in transit areas
- Prevent Detainee(s) from injuring themselves during transportation or during flight
- Prevent Detainee(s) from injuring the escort officers or others
- Prevent Detainee(s) from injuring the crew and/or passengers or an aircraft during a flight
- Prevent Detainee(s) from causing large scale damage to property
- Prevent Detainee(s) from delaying their transfer by causing disruption during the transfer operation
- Restraint should only be used in exceptional circumstances where the actions of the Detainee(s) deem it to be necessary

Incidents may potentially occur on any escort and escorting staff will be prepared for any eventuality and will manage these incidents according to the Serco Transport and Escort Contingency Plans for all international escorts, which form part of the escort pack.

#### 4.19 Enhanced Escort Position

The Enhanced Escort Position has been developed to meet the risk assessment and risk mitigation strategy for Detainee(s) who are rated below a High or Extreme risk level, noting the enhanced escort position could also be used for High or Extreme risk Detainee(s) but, preferably, with restraints also applied.

As a planned use of force the following conditions must be met:

- A written request to DIBP is required
- Approval in writing is required from the Department which will be indicated within the EOO
- or other written instrument
- The use of planned force will be recorded on the escort operational order
- A Use of Force Report must be completed and submitted
- Incident Report must be completed and submitted
- Detainee(s) must be offered a medical assessment by IHMS as soon as practicable. Contingencies

#### 4.20 Control of Detainee(s) within the Aircraft Prior to Departure

The Captain of the aircraft has ultimate responsibility for the safety and security of everyone travelling on the flight, should the behaviour of the Detainee(s) be deemed unsafe by the Captain, he/she has the authority to refuse boarding or carriage.

If the Captain refuses carriage, the Team Leader must contact the National Duty Manager immediately for further instruction.

The escorting team has a responsibility for the safety and welfare of all persons on board the flight and must remain vigilant at all times. In the event of any incident on board the Team Leader must advise Senior Cabin Crew and the DIBP.

### 5. Escort Operational Order

The Team Leader must ensure that all information is recorded on the EOO. All incidents, use of force etc. must be reported to DIBP and the T&E Manager as soon as possible.

If force or restraints are used at any point, appropriate reports must be completed in line with the Operational Safety PPM, prior to completing their shift.



# Duty of Care

## Serco Immigration Services

### Document Control

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1.0.1	Minor language amendments to reflect changed terminology	12/03/2014
2.0	Updated to reflect Facilities and Detainee Services Contract 2014	19/02/2015

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## 1. Introduction

### 1.1 Policy

Under the Migration Act 1958 (the Act), non-citizens who are present in Australia without a visa that is in effect (that is, unlawful non-citizens) may be detained and taken into immigration detention. When this occurs, Department of Immigration and Border Protection (DIBP) assumes responsibility for the non-citizen and makes many decisions about their day-to-day wellbeing and care. Detainees are in a position of vulnerability and accordingly, DIBP and Serco owe such people a duty of care.

Serco aligns its core values with DIBP's duty of care responsibilities towards Detainees. As such, the actions of individual staff reflect this alignment and demonstrate Serco's commitment to ensuring the upmost care is delivered at all times.

In providing this service, key elements need to be considered, namely the safety of people in detention, the public and staff, with security, care, welfare and decency underpinning the overall policy. Duty of Care is therefore the backbone of all policies and procedures. Serco and DIBP share this responsibility and are both accountable, should it be demonstrated and proven that Duty of Care has not been delivered.

Duty of Care influences all of the work we do. Duty of Care should be the primary consideration of all staff in performing their duties.

### 1.2 Related Documents

- All Policy and Procedure Manuals (PPMs)

### 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Facilities and Detainee Services Contract 2014
- Work Health & Safety Act (2011)

## 2. Duty of Care

### 2.1 What is a Duty of Care

A duty of care is a legal obligation to exercise reasonable care to prevent a person from suffering reasonably foreseeable harm.

DIBP owes a duty of care to all persons in all types of immigration detention. This means DIBP and its service providers are legally obliged to exercise reasonable care to prevent Detainees from suffering reasonably foreseeable harm, and must provide Detainees with a reasonable standard of care. A duty of care is also afforded to all staff and visitors to IDFs, however this document is primarily concerned with the duty of care required for Detainees.

DIBP and Serco's duty of care requires both agencies to exercise reasonable care for the day-to-day needs as well as the safety and welfare of Detainees. It extends to taking reasonable care to prevent harm that could stem from the foreseeable activities of a Detainee or from third persons. It also extends to taking reasonable care to ensure that a Detainee does not suffer ill-health from the circumstances of detention and that he or she receives adequate medical and psychiatric attention while in detention.

It is important to note that there are other standards that also inform how a Detainee is to be treated, such as international human rights standards.

### 2.2 What Would a Reasonable Authority Do

In order to carry out its duty of care, DIBP and Serco must take those steps that a reasonable authority with the same powers, resources and duties would take in the circumstances in question.

It is important to understand that a breach of duty of care can arise by:

- an omission to act (failing to do something that a reasonable authority would do), or
- performing an act which is unreasonable in the circumstances (doing something that a reasonable authority would not do).

This means Serco staff must:

- attend any training provided that is appropriate to their role
- be familiar with, and follow, the guidelines and procedures manuals
- have the authority to make the decision or take the action
- be the most appropriate person in the circumstances to make the decision or take the action and
- refer the matter to a senior officer if they are unsure about any of the above.

### 2.3 What is a Reasonably Foreseeable Risk of Harm

Serco has a duty to consider how their act or omission will impact on a Detainee. If Serco reasonably foresees that its act or omission could cause harm to a person, and therefore a risk of harm exists, Serco must take steps to prevent the harm from occurring to that person.

A risk may be reasonably foreseeable if it is a risk about which the authority knew or ought to have known. Most risks of harm are reasonably foreseeable. A risk that is unlikely could still be reasonably foreseeable provided it is not far-fetched or fanciful.

Examples of situations in which there is a reasonably foreseeable risk of harm to a Detainee:

- A Serco officer leaving his shift, notices that a Detainee has threatened self-harm and makes a note to that effect, but does not inform officers beginning the next shift. The Detainee self-harms that day.
- Loose electrical wiring in an accommodation compound has been reported but not repaired. An electrical short-circuit then causes a fire within the compound and a Detainee is badly burned.

## 2.4 DIBP's Duty of Care as Non-delegable

When DIBP contracts out the provision of services in held detention to third parties, such as Serco, DIBP still owes a duty of care to Detainees and must ensure that Serco takes reasonable care to avoid the Detainees suffering reasonably foreseeable harm. Most importantly, if Serco is found to have breached its duty of care towards Detainees in held detention, DIBP will also be found to have breached its (non-delegable) duty of care.

## 2.5 Serco's Duty of Care

While DIBP maintains ultimate responsibility for all Detainees in held detention, Serco must protect the Commonwealth's interests by strictly discharging the provider's duty of care obligations.

Serco Officers have a duty of care for any Detainee that they are personally accompanying, restraining or holding in detention. Every officer is personally responsible for carrying out this duty of care. This means that officers are obliged to take all reasonable actions to avoid Detainees suffering any physical harm or undue emotional distress while detained. In other words, the duty of care falls to the custodian of the Detainee.

A transfer of custody of the Detainee results in transfer of the duty of care. However, the duty of care of each custodian extends to informing the next custodian of all known information relevant to enabling them to fulfill their duty of care. This does not mean DIBP does not have a duty of care.

## 2.6 Shared Responsibility

Responsibility for the duty of care owed to Detainees is shared between DIBP and Serco on the one hand, and the Detainees on the other. The level to which a person will be responsible for their own safety depends on their individual circumstances. It is expected that a person will act in accordance with their capacity in a given situation. Their capacity will be affected by their personal situation, including but not limited to:

- their age
- language ability
- place of origin
- if they have a mental illness
- if they may have been subject to torture and trauma

- if they have intellectual and physical impairments and disabilities
- their literacy level
- the amount of time they have spent in Australia.

For example, a person who has lived previously in a similar environment for six months will have a greater capacity to operate in that environment than a person who has been in Australia for two days. Similarly, a person who is fluent in the English language will have a greater capacity for understanding instructions and warnings than a person who does not speak English at all.

It is not DIBP's responsibility to ensure that a person does not suffer harm if the person ignores obvious danger, because this would not be required of a reasonable comparable authority. Detainees are expected to exercise ordinary care for their own safety and avoid risks that, in the circumstances, would be obvious to a reasonable person in the same position.

Furthermore, the standard of care required will be affected by the extent to which a person's freedom of movement and capacity to care for themselves has been restricted by their place of detention.

### 3. Executing our Duty of Care

Serco will have policies, procedures and processes in place to ensure that our Duty of Care is executed in all dealings with Detainees.

#### 3.1 Detainee Management

Serco has in place practices, policies and procedures relating to a range of provisions to promote Detainee wellbeing and welfare. These include but are not limited to:

- The Personal Officer Scheme
- Individual Management Plans
- Detainee Consultative Committees
- Provision of Programs and Activities
- Keep Safe / Psychological Support Program Supportive Monitoring and Engagement
- Welfare checks
- Providing excursions
- Facilitating access to physical and psychological health services
- Providing access to a varied meal provision
- Access to community and religious support
- Providing communication services
- Providing access to visits
- Supporting family units and minors in detention

### 3.2 Appropriate Training and Warning of Dangers

Serco has a duty to ensure that a person in detention is appropriately warned of any hazards or dangers of which they might not be aware. The existence of a duty to warn will depend on the knowledge and capacity of the individual, because this will determine whether the person is aware of the danger. A person that is relatively unaccustomed to the environment might not be aware of a danger that would otherwise be obvious.

An important part of conveying a warning to a person is making sure that they understand the warning. The potential consequences if the warning is not followed should also be explained. This may require the use of an interpreter and/or a written explanation.

Serco may be under a duty to ensure that a building in which a person is held, or directed to live, is reasonably safe. This would include an assessment of both the condition of the premises, the potential occupants and any persons sharing the accommodation.

Attention will need to be given to the potential occupants of the property as premises might be safe for adults but may pose a greater risk for children. Where a property is provided by a member of the community, they will have the same duty to take reasonable care in relation to the person in detention as any other person entering upon their land.

### 3.3 Dealing with Minors

Minors in immigration detention require specific individual care, their needs differs from that required for adult Detainees as they represent a particularly vulnerable group.

All decisions taken by all members of the immigration detention network (IDN) must consider the best interests of the minor. This is not restricted to the child's legally enforceable rights but also long- term and short-term welfare concerns, physical and emotional well-being, financial, moral, religious and health interests.

As part of its duty of care Serco is responsible for providing safe and appropriate accommodation for children in detention. This duty will involve a consideration of the best interests of the child in all the circumstances including whether the child is accompanied or unaccompanied.

Serco should be alert to any signs that a child may not be coping or that they are being abused or mistreated. Serco must consider the capacity of the child's parents to provide proper care, however must not make any assumptions of such. Serco's duty of care to Detainees arises partly from the acknowledged vulnerability of them. Children are a particularly vulnerable sub-group of this wider group and, as such, the standard of care owed will be higher.



## 4. Duty of Care in Immigration Detention

DIBP and Serco must exercise reasonable care to prevent Detainees from suffering reasonably foreseeable harm. Exactly what standard of care is “reasonable care” will depend on the circumstances in question. Generally, the standard of care that DIBP would be obliged to provide to a person in an IDC would be higher than the standard provided to a person in community detention. This is because persons in community detention have a greater degree of freedom to look after their own day-to-day needs. However, the standard of care is not always ‘higher’ in one place of detention compared to another. The standard of care must always be “reasonable” in the circumstances in question.

### 4.1 Immigration Detention Centres (IDC)

IDCs provide a secure environment for persons in detention who are a higher flight or security risk than those placed in other immigration detention facilities. Families with children are not accommodated in an IDC under any circumstances.

The standard of care owed to persons in an IDC is very high because DIBP has assumed responsibility for them and makes most of the decisions about their day-to-day care. As a result, such persons are in a position of particular vulnerability.

However, officers can assume that persons in an IDC will look out for their own safety within their capacity. The capacity of each person to manage their own safety will depend on their individual circumstances and it is integral that officers engage with Detainees and advise stakeholders of any issues/concerns as soon as practicable.

### 4.2 Immigration Residential Housing (IRH)

IRH is a form of detention in a less institutional, more domestic detention environment for eligible low flight-risk and low security-risk persons in detention. IRH provide accommodation for:

- families with children
- those awaiting a residence determination decision and
- those that have not been granted a residence determination.

IRH may also be used to accommodate other low risk Detainees.

The standard of care owed to persons in IRH is high because persons in IRH are ordinarily restricted to the premises and are not free to leave at will. However, they are allowed more scope for freedom than persons in an IDC. For example, they are able to cook their own food and are responsible for keeping their individual accommodation clean and tidy.

Therefore, officers can again assume that persons detained in an IRH will look out for their own safety. The capacity of each person to do so will depend on their individual circumstances and it is integral that officers engage with Detainees and advise stakeholders of any issues/concerns as soon as practicable.

### 4.3 Immigration Transit Accommodation (ITA)

Immigration transit accommodation (ITA) were introduced for short-term, low flight risk Detainees, though now accommodate an IMA caseload as required. ITA offers hostel-style accommodation, with central dining areas and semi-independent living. Facilities at ITA vary from site to site.

Officers may assume that detainees in an ITA can exercise a reasonable degree of care for their own safety. Once again, the capability of each Detainee to do so will depend on their individual circumstances.

Furthermore, the content of the department's duty of care towards Detainees in an ITA depends on the extent to which a detainee's movement is restricted within the facility.

### 4.4 Alternative Places of Detention

Family groups, women and children as well as unaccompanied minors are the primary groups for consideration for alternative places of detention (APOD). This option is also suitable for single men and women who have specialist health or physical needs that would be best met in a non IDC environment.

The standard of care owed to persons held in alternative temporary detention in the community will depend on the extent to which their freedom of movement is restricted and the extent to which DIBP is responsible for the close supervision of the person in detention. This will vary considerably.

If a person is detained in a hotel or motel room, they will usually be held in that place by officers and not permitted to leave the room except under escort. The person is kept under close supervision by officers.

The standard of care owed to the detained person in these circumstances is very high because DIBP has assumed responsibility for them and makes most of the decisions about their day-to-day care. Arguably, the standard of care is higher than when a Detainee is held in an IDC, because the person's movements are so heavily restricted.

### 4.5 Detainee Placement

DIBP is the authority for placing Detainees to a particular facility. Placement within the facility is determined by taking into consideration the individual welfare, cultural, family and security related needs of each Detainee.

All placements are determined through a risk assessment and consideration of the duty of care owed to the Detainee. Serco must communicate all relevant information to DIBP to enable appropriate decisions to be made regarding the Detainee's placement within the network.

## 4.6 External Scrutiny Mechanisms

There are external scrutiny mechanisms to ensure that DIBP and Serco are fulfilling their duty of care obligations, including organisations such as: the Australian Human Rights Commission and the Commonwealth and Immigration Ombudsman. Furthermore, other international bodies and non-government organisations from time to time may also release reports in relation to immigration detention issues (For example, Amnesty International, the Australian Red Cross, etc.).

# Emergency Response Team

## Serco Immigration Services

### Document Control

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## 1. Procedure

The concept development of an Emergency Response Team (ERT) capability followed critical incidents (riots and rooftop protest) in 2011 at both Christmas Island (CI) and Villawood Immigration Detention Facility (VIDF). This incident response capability was designed to cover identified gaps that had been a major contributing factor to the intensity and duration of these critical incidents. Since being established, the ERT capability has been an appropriate and essential risk mitigation strategy for Department of Immigration and Border Protection (DIBP) and Serco Immigration Services (SIS) and has maintained the safety and security of staff, Detainees and other stakeholders.

The national ERT capability provides options to support and assist managers and staff at all levels throughout the business to ensure that the services provided by SIS to the Commonwealth accord with our contractual obligations. In particular aspects of service delivery that relate to SIS's duty of care obligations and our compliance with the Immigration Detention Values. These obligations extend to the following groups and stakeholders:

- Detainees
- Visitors (to include other Government and non-Government organisation representatives)
- Other persons (to include subcontractors and the Department)

This PPM builds on previous versions and provides a further refined foundation of knowledge and experience from which to develop future incident response and crisis management capabilities within the core framework of SIS's service delivery model for immigration detention operations. Importantly this PPM addresses developments post Additional Service Request (ASR) 419963 - ERT - 1 July to 10 December 2014 and the transition under the commencement of the new Facilities and Detention Services (FDS) contract.

### 1.1 Related documents

- Incident Management Protocols (SIS-OPS-PPM-0008)
- Intelligence and Operational Risk Management PPM (SIS-OPS-PPM-0021)
- First Response Negotiators PPM (SIS-OPS-PPM-0056)
- Secondment Management PPM (SIS-OPS-PPM-0046)
- Procurement PPM / Toolbox
- Quality Manual (SIS-QMS-DOC-0001)

### 1.2 Legislative and Standards Framework

- Migration Act 1958
- Migration Regulations 1994
- Immigration Guardianship of Children Act 1946
- Australian Citizenship Act 2007
- Detention Services Manual (DSM),
- AS/NZS ISO 9001:2008 – Quality Management Systems – Requirements



### 1.3 Abbreviations

**Table 1 - Abbreviations**

<b>Acronym</b>	<b>Description</b>
AFP	Australian Federal Police
APOD	Alternative Place of Detention
ASR	Additional Service Request
C2	Command and control
DIBP	Department of Immigration and Border Protection
FDSP	Facilities and Detainee Service Provider
ERT	Emergency Response Team
ECC	Emergency Control Centre
FIFO	Fly-in-fly-out
FRN	First Response Negotiators
IC	Incident Controller
IDC	Immigration Detention Centre
IDF	Immigration Detention Facilities
IDN	Immigration Detention Network
ITA	Immigration Transit Accommodation
POM	Public Order Management
PPE	Personal Protective Equipment
RA	Risk Assessment
RFS	Request for Service
STRA	Security Threat and Risk Assessment
SIS	Serco Immigration Services
T&E	Transport and Escort
TL	Team Leader
UoF	Use of Force
WFP	Work Force Planning

## 2. Background

### 2.1 Situation

On 11 December 2014, the Department and SIS commenced the new Immigration Detention Facilities and Detainee Services Contract, for an initial five-year period with two extension options of up to two years each.

Under the contract arrangements, at some facilities, full-time equivalent (FTE) positions will be designated on a roster to be filled by ERT qualified staff members on a 24/7 basis. These changes when coupled with other developments require that further clearly defined direction in regards to the ERT operating model and other procedural, governance and administrative aspects be provided to staff and other stakeholders.

### 2.2 Purpose

The purpose of this PPM is to advise and clarify the ERT operating model with stakeholders at the national, regional and centre levels as SIS moves forward under the new contract arrangements. Specifically this directive will address the following:

- Background (current arrangements, role, objectives, capability, employment principles, officer selection and organisational structure)
- Roles and responsibilities
- First Response Negotiators
- National workforce spreadsheet
- Training
- Deployments
- Equipment management
- Payroll and Budget Controls
- Billing

### 2.3 ERT Support Under the FDS Contract

Under the terms and conditions of the FDS contract the following centres will be required to continually maintain two (2) ERT trained and certified staff on both day and night shift (for a total of forty (40) ERT officers) :

- Christmas Island IDC
- Villawood IDC
- Yongah Hill IDC
- Maribyrnong IDC
- Wickham Point IDC / APOD

The actual implementation of this schedule will be as agreed with the Department under the transition period of the contract.

## 2.4 Latent ERT

There remains a latent Tier 2 capability, consisting of approximately 150 trained officers, within the network that can be activated from centre staffing if required to address emergent operational requirements.

## 2.5 Additional Tier 2 ERT Deployments

The Department may consider the approval of additional ERT deployments on a case-by-case basis, to address requirements elsewhere in the IDN. An example of such deployments include the commitment of additional ERT officers from the IDN to planned operations such as the CI IDC deliberate action (DA) for the extraction and relocation of a Detainee protest group from the Green Heart Area to White One.

## 2.6 National ERT Role

The role of the National ERT capability is to provide specialist response capabilities to the IDN at centres or the regional level for the purpose of risk mitigation and incident control.

## 2.7 Strategic Objectives

The National ERT capability strategic objectives are as follows:

- Preserve life
- Prevent escape
- Maintain the safety of Detainees
- Provide assistance to staff and contractors under duress
- Maintain public safety.

## 2.8 Tactical Objectives

The tactical objectives of the National ERT capability for the conduct of and support to operations within the IDN mirror the strategic objectives and additionally include:

- Respond to incidents and emergencies within one hour
- Support high risk detention operations
- Develop local emergency response plans
- Support to intelligence gathering activities.

## 2.9 ERT Capability

ERT officers are accredited SIS personnel trained in the following key areas:

- Incident response
- De-escalation <sup>1</sup>
- Cordon and containment
- Operational Risk Assessment (RA) & planning
- Command and control (C2)
- Enhanced officer safety techniques
- Utilisation of Personal Protective Equipment (PPE) and disorder tactics
- Room extraction
- Barricade / hostage response
- Protester removal
- Infra-structure security and stabilisation
- Escort operations
- Evidence gathering.

## 2.10 ERT Employment Principles

The employment of ERT officers must accord with the conditions of the contract and associated policy and procedures. The following are employment principles that should guide the utilisation of ERT in support of centre level operations:

- ERT officers are to be utilised for critical incident and major incident response
- ERT Team Leader can assist with planning and advice as part of centre level emergency management response
- ERT officers should be focused on high risk tasking internal / external to the centre
- ERT officers can provide enhanced escape deterrence / response capabilities – internal / external to the centre.
- ERT officers can provide collection support to targeted intelligence led operations
- ERT officers can provide support to EXTREME / HIGH risk domestic escorts / removals (ERT officers are not to replace T&E staff but can augment them in order to provide an enhanced risk mitigation)
- ERT officers can act as a deterrent through high visibility presence patrolling – internal and external perimeter

<sup>1</sup> ERT officers may also hold First Response Negotiator (FRN) qualifications, which would provide them with the ability to undertake negotiations in order to resolve a critical or major incident, preferably without the need to resort to measures such as the use of force.

## 2.11 ERT officer selection

ERT officers are selected from operational staff who:

- Expressed their interest in being part of the ERT
- Are not subject to any current warnings or investigations
- Have received a supporting nomination from their Centre Manager (CM) / ERT Team Leader (TL)
- Have passed all appropriate selection testing, including psychometric testing conducted by SIS Psychological Services
- Have passed the Operational Safety Tier Three (ERT) training.

To maintain status as an ERT Officer, staff must:

- Maintain core and specialist competencies
- Not be subject to current disciplinary warnings
- Maintain robust psychological functioning through engagement with post deployment debriefing and SIS Psychological Services.
- Maintain and be accountable for their issued equipment.

## 2.12 Operational Structure

The structure of an ERT element is scalable and is based on the operational requirement of the task that is being supported. Typically, a section of between three (3) to nine (9) ERT officers will be led by a Section Leader; a number of ERT sections are then usually led collectively by an ERT Team Leader (TL). One of the rostered ERT officers within each of the five centres will be nominated as the TL. The ERT will answer to the Serco Incident Controller in the event of an incident. Should handover to another agency occur, the use of resources will be determined by the Incident Commander.

ERT Tier 2 deployments usually involve smaller elements and as such, a TL is not allocated but a Section Leader will be nominated. If a Section Leader is allocated, with no TL, then the ERT Section Leader would report to the Senior Operations Manager (SOM) Security or another OM as directed by the SIS General Manager (GM) or CM of the centre being supported.

## 2.13 Organisational Structure

A detailed organisational structure for the current national ERT capability under the contract arrangements is contained at annex A. The intent of annex A is to demonstrate the relationship between the national capability management, enabling functions and the ERT capability at the centre levels in the implementation of Government policy on behalf of the Department. This organisational structure chart does not strictly reflect management structure, control or operational responsibilities concerning the hierarchical operational primacy of RMs etc.

### 3. Roles and Responsibilities

#### 3.1 Operations Support Manager

Operations Support Manager is responsible for the following:

- Oversight and management of the ERT workforce
- Oversight and management of the selection, training and skill maintenance process for the National ERT capability
- Provide guidance and advice on National ERT policy and capability requirements
- Develop National ERT policy and procedures
- Provide ERT planning, advice and support to the National Executive Leadership Team (ELT) and regional and centre level Senior Leadership Team (SLT)
- Development of strategic policy to support the transition and future operating models for the incident response capability using the current National ERT capability as a framework
- Ensure that the ERT is being employed at the centre and regional level in accordance with the contract and policy
- Provide guidance and advice on ERT policy and employment requirements to GMs and CMs
- Develop ERT operational plans, policy and procedures
- Provide ERT planning, advice and support to GMs and CMs.

#### 3.2 National Planning Manager

National Planning Manager is responsible for the following:

- Liaising with Work Force Planning (WFP) and TLs in regards to Tier 2 deployments
- Ensuring that financial controls are maintained and implemented within the regions
- Reviewing rosters and providing advice to the Operations Support Manager
- Oversight and management of ERT on aviation tasks including Charters
- Oversight of operational ERT logistics
- Oversight of and assist with the management and maintenance of equipment for the ERT workforce

#### 3.3 ERT National Training Manager / ERT Operations Manager Training

ERT National Training Manager and ERT OM Training are responsible for the following:

- Development of a national training plan for ERT and FRN
- Development of enhanced training concepts to include ERT specific control and restraint (CnR) techniques under the Operational Safety Continuum
- The management and maintenance of equipment for the ERT workforce
- Day to day training of the ERT
- Provide advice on ERT and FRN officer selection and testing to National Operations

- Provide input on training currency for qualified ERT and FRN officers
- Provide input and support to the ERT/FRN national spreadsheet
- Provide regular advice and updates to GMs and CMs on the number and certification status of their ERT/FRN trained staff
- Engage with the ERT workforce to provide professional / technical support and mentoring in consultation with regional and centre management teams
- Be prepared to conduct and / or support centre level site visits (operational assessments / other specific tasking) and the delivery of training support across the IDN
- Be prepared to support centre level operational tasking i.e. the conduct of deliberate search operations and other planned and unplanned short notice operational tasks

### 3.4 Workforce Planning Manager

Workforce Planning Manager is responsible for the following:

- Plan, organise and coordinate travel for ERT officers on Tier 2 deployments
- Liaise with GMs for the release of staff and backfill CSOs when required
- Coordinate the distribution of ERT Tier 2 Deployment letters to staff prior to deployments
- Development and maintenance of the ERT/FRN national spreadsheet.

### 3.5 Operations Support Coordinator

Operations Support Coordinator is responsible for the following:

- Supporting the development of the National ERT spreadsheet, this is maintained by the National Operations WFP team
- The development of ERT workforce reporting products to support planning and capability readiness requirements.

### 3.6 ERT Team Leader

ERT TL is responsible for the following:

- Line management and performance management/appraisals of the ERT staff within area of responsibility
- Develop rosters to meet the operational need of the supported centre
- Report to the CM and follow their directions in regards to operational utilisation
- Control and reporting of any deficiencies identified with ERT equipment
- Ensure team members attend training as scheduled / required
- Ensure operational reporting is submitted in a timely fashion
- Liaise with Human Resources (HR) and ERT National Training Manager / ERT Operations Manager Training to ensure that all staff within the ERT have up-to-date training and qualifications to meet contractual requirements

- As required, represent the Contract both at internal and external meetings, ensuring the professionalism of the Contract is maintained
- During operational tasking:
  - Provide support to the Incident Controller (IC) / Emergency Control Centre (ECC)
  - Assist with ERT operational planning
  - Follow instructions from the General Manager (GM), Centre Manager, or Incident Controller
  - Lead the ERT during ERT operations
  - Ensure all appropriate reporting requirements are fulfilled in accordance with centre, regional and national requirements

### 3.7 ERT Section Leader

ERT Section Leader is responsible for the following:

- Supporting the TL as directed
- Acting as TL when required
- Monitoring the welfare and capability of ERT Officers
- Ensuring appropriate administrative and operational reporting requirements are fulfilled in accordance with direction or as detailed in planning documentation.

### 3.8 ERT Officer

ERT officer<sup>2</sup> is responsible for the following:

- Attending training as provided
- Maintaining personal issue equipment – cleaning, serviceability, accountability etc
- Completion of appropriate documentation as directed or as detailed in planning documentation.

## 4. First Response Negotiators

FRN, ideally as part of a four-person team, are located throughout the IDN. Their primary function is that of operational staff members and this is their usual employment. FRN are part of the ERT capability, however on occasion they may be employed to assist in situations where the ERT is not deployed. For the purposes of this PPM, further detail in regards to the FRN capability is contained within the FRN PPM (SIS-OPS-PPM-0056).

<sup>2</sup> While ERT Officers receive specific training, primarily their roles are that of CSO or CSM and as such, they must maintain their operational qualifications and refresher courses, and may be called upon to fulfil any appropriate duty when deployed.



## 5. National Spreadsheet

SIS National Operations will maintain a spreadsheet of the training records and relevant information of all ERT / FRN trained staff for the purposes of planning to support operational deployment and training requirements. This spreadsheet will be maintained by the Workforce Planning Manager in consultation with and supported by the National Planning Manager, ERT National Training Manager and ERT Operations Manager Training.

The spreadsheet will include ERT / FRN officer home location and contact details, when circumstances change the ERT officer will need to notify the secondment team immediately at [secondment@serco-ap.com.au](mailto:secondment@serco-ap.com.au) additionally when deployed the ERT TL will need to be advised of any changes in contact details.

The Operations Support Coordinator will assist National WFP staff in the development of the spreadsheet and in preparing appropriate reports to support planning and operational decision making.

## 6. Training

### 6.1 Training Categories

Training for the ERT can be categorised as follows:

- Structured training
- Training on deployment
- Personal fitness training

Structured training constitutes formal training courses including training at the National Training Centre or at the staff member's home centre. Structured training is not to be conducted during deployments. Structured training can be:

- Initial training for new recruits
- Refresher training
- Section or TL courses
- Other Specialist courses

When participating in structured training no deployment allowance is payable and these training hours do not contribute to the minimum deployment hours worked during a deployment.

### 6.2 Training Framework

There is a three-tiered approach to the Use of Force (UoF) within SIS detention provision. Each tier corresponds to a specific program, which comprises its own competencies, training level and skill set relevant to that tier. Tier 1 represents the core skills required in the management and maintenance of Operational Safety. All SIS operational staff receive this training as part of their Initial Training Course (ICT). Tiers 2 and 3 represent a further development of skills appropriate to the functions to be carried out by staff trained to each tier. The relevant competencies for each tier, which must be satisfied in order for an Officer to achieve certification or recertification (as the case may be) for each tier, are set out below.

**Table 2 – National training framework definitions<sup>3</sup>**

Term	Definition
<b>Tier 1</b>	The program whereby Officers will, in their Initial Training Course receive operational safety training, which will include conflict de-escalation, communication, personal safety, Use of Force and Use of Restraints techniques.
<b>Tier 2</b>	The program whereby Officers will receive specialist operational safety training, which will include Tier 1 competencies, advanced use of force techniques, use of PPE, and room extraction.
<b>Tier 3</b>	The program whereby Officers will receive Emergency Response Team training, which will include Tiers 1 and 2 competencies, cordon and containment techniques, Disorder Management training, and resolution tactics.

Officers must pass psychometric testing conducted by SIS Psychological Services as part of the ERT selection process. Existing ERT Officers will be expected to pass psychometric testing as part of their recertification.

### 6.3 ERT National Training Manager / ERT Operations Manager Training

The ERT National Training Manager and ERT Operations Manager Training are responsible for developing and implementing training throughout the network. Training will usually be conducted at the National Training Centre, located in Canberra. When operationally required training may occur in the regions following consultation with the RMs and the Operational Support Manager (such occasions will be by exception).

Currently the following training packages are delivered by National Operations:

- ERT Tier 2 certification program
- TL Tier 2 instructor program
- Section leader program
- Recertification program.

### 6.4 ERT Staff Responsibilities

Staff are to ensure they comply with the recertification requirements of each course. Staff will need to ensure that they are available to attend scheduled training courses or they may become uncertified and will no longer be deployable. Prior to attending a course staff will need to ensure they are physically fit to meet the requirements. National Operations will regularly conduct a training needs analysis and modify existing or implement additional courses to meet the operational needs of the Department.

<sup>3</sup> The training framework tiers are not to be confused with the ERT deployment tier framework.

## 6.5 Personal Fitness Training

In general, while ERT members are required to maintain a standard of fitness, personal fitness training does not formally constitute ERT training and is unpaid. Personal fitness training may be performed whilst deployed during such times that the ERT member is on standby as long as such training does not prevent the ERT member from fulfilling response times including the one hours' notice under a Tier 2 deployment.

## 7. Deployments

### 7.1 Potential Triggers

The following situations / incidents may prompt consideration of deploying an ERT capability, however each situation must be assessed on its own merits by the Incident Controller, considering the impact of an ERT deployment. This list is not exhaustive.

- Intelligence driven deployment
- Any situation requiring extraction of staff or people in detention from an unsafe situation
- Major disturbance / disorder
- Escape / attempted escape
- Hostage situations
- Death of a Detainee or staff member
- Evacuation of the facility or parts of due to disaster or major emergency
- Damage to property or accommodation areas
- Perimeter or major security failure
- Major assault / serious accidental injury
- Loss of security keys / radio
- Fire incident requiring external assistance
- Major search of a significant portion of the facility
- Any incident requiring immediate additional security staff presence.

### 7.2 Short Term – Tier 2

Short Term (Tier 2) deployments must have written authorisation from the SIS Director of Operations in consultation with the Department. Such short-term deployments will only normally be deployed to either assist ERT officers in the event of a major disturbance within the network or as required to locations where ERT staff are not deployed. The duration of Tier 2 deployments will be controlled by National Operations in consultation with the respective General Manager (GM) and Centre Manager (CM). These deployments will normally only be approved for a short period (normally not exceeding a maximum of 14 days) and re-approval must be sought via National Operations within 72hrs of the approved period expiring.

Tier 2 deployments are discretionary deployments based on the management of a specific and non-routine risk event. All deployments must be supported by the risk assessment and operational plan and approved by the Director Operations.

No Tier 2 deployments are to occur without officers being issued and accepting a deployment letter. Failure to comply with this will mean loss of entitlement for ERT allowances and disciplinary proceedings against managers.

### 7.3 Additional Requirements

Staff are to ensure that they are fully fit for duty prior to accepting a secondment / deployment. Staff that have any physical limitations whatsoever i.e. an injury, are to notify the secondment team immediately, as we need to ensure that you are not at risk of exacerbating a pre-existing injury.

It is the responsibility of staff to ensure that prior to accepting a deployment that they have a current first aid certificate, ITC refresher and AFP check. If any of these requirements are due to expire the Secondment team are to be notified who will then liaise with the seconded Centre for training or paperwork to be submitted.

ERT officers are not to contact staff at National Operations. All communication must occur through line management or the designated ERT TL whilst on deployment.

ERT officers are not to deploy without a deployment letter signed by the National Operations Manager or Operations Support Manager. Without a signed letter, authorising their deployment, officers will not be eligible for any ERT allowances.

All ERT officers must seek authority from their CM prior to deployment. The flights, accommodation and incidentals will then be booked by the National WFP team, which is managed by the Workforce Planning Manager.

### 7.4 Secondments

Where operationally possible, ERT staff will be rotated through the seconded positions throughout the IDN (Tier 2). This will be determined by the National Planning Manager in consultation with the Operations Support Manager, taking into account the operational needs of the home Centre.

When ERT staff are required for rotation or short notice deployment an email will be sent to ERT staff to determine availability. If available then ERT staff will need to respond via email. This is not a confirmation that staff will be selected for deployment, as National Operations will need to contact respective CMs to confirm that staff can be released.

Staff that have been selected to be seconded to work on an ERT deployment will be issued a secondment letter / contract which they will need to sign a week prior to travel commencing. The ERT deployment letter / contract will be sent to employees by the National Operations Secondment Section (part of National Operations). This will need to be co-signed by the CM or SOM at the staff members' normal place of work. The signed letter / contract will then need to be emailed to the secondment team at [secondment@serco-ap.com.au](mailto:secondment@serco-ap.com.au).

Staff on deployment that require travel are to request travel through the ERT TL who will then submit a request to the secondment team. This will be reflected in the weekly report that is submitted to the National Planning Manager and the Workforce Planning Manager. ERT staff are to adhere to this process at all times and the Serco Travel Policy.

## 8. ERT Equipment Accountability

### 8.1 Purpose

The purpose of this policy is to ensure the correct issue and counting of inventory items at the National Training Centre (NTC) and all network wide ERT site-specific equipment stores is undertaken in a planned and methodical manner. It will also ensure that the processes are documented to management, accounting, review, and audit requirements regarding ERT equipment inventory holdings are satisfied.

### 8.2 Scope

This policy applies to all ERT inventory items held across the SIS network. This policy covers issue, audit, and equipment return. This policy also deals with stock take inventory adjustments but will not cover write-off transactions.

### 8.3 Principles

ERT in its current form across the SIS has a number of legacy equipment items and processes. Up until now, there has not been one consistent process to cover issue and stock take because of the different issue system at each centre. Therefore this policy is transitional and will be updated upon first review post implementation.

Equipment stock take and audits are used to:

- Obtain a physical verification of the quantity of stock held to enable reconciliation to inventory accounting systems
- Obtain the calculation of the respective dollar value of stock on hand
- Demonstrate that controls and processes are being applied regarding the management of inventory and to check that those measures are working effectively.

Counting of ERT equipment items may be performed via a monthly individual equipment stock take or a biannual site stock take. All equipment is to be counted in accordance with the source site-specific equipment inventory.

### 8.4 Governance

For the purposes of equipment accountability, both the ERT National Training Manager and ERT Operations Manager Training will jointly have responsibility for ERT equipment management on behalf of the National Operations Support Manager. These responsibilities will include but not be limited to the following:

- Direct the frequency and nature of equipment stock takes and audits in accordance with the equipment management policy
- Maintenance of the national site specific ERT equipment register (current issued items and legacy items)
- Maintenance of the NTC individual PPE issue register in order to closely track all issued items and assist in re-order / back order activities

- Maintenance of all records relating to logistic administrative documents such as loss or damaged form, equipment order form, and accountability issue forms
- Provide direction and advice in regards to the process for repair, reissue, and audit or ERT equipment
- Be prepared to assist centre and regional staff in the maintenance of the mechanical restraint register, which is to including item, serial number and model details
- Be prepared to conduct centre level snap audits of ERT equipment holdings as directed by the National Operations Support Manager.

Further detail in regards to ERT equipment accountability is contained at Annex B.

## 9. Payroll and Budget Controls

### 9.1 Hours Worked

**Short Term (Tier 2).** Short-term deployments while variable and set prior to deployment (by way of the ERT Tier 2 Deployment letter), are generally based on hours worked as required by the deployment. While short-term deployments may result in significant overtime, consideration must always be given to fatigue and utilising additional staff where possible to reduce excessive hours worked.

Hours worked on ERT tasking during a short-term deployment attract the Deployment Allowance. This excludes travel time, which is paid at ordinary rates.

### 9.2 Procurement

All goods and services are to be purchased through authorised vendors using SAP purchase orders and in accordance with the procurement PPM. For further detail including how to add a new supplier in the event existing preferred suppliers are unable to deliver the required equipment, refer to the Asia Pacific (ASPAC) Procurement Toolkit.

Upon appointment of a preferred vendor, existing vendors within the same supply category must not be used within SAP unless there is an emergency that puts the business or personnel safety at risk.

In addition to these controls an Internal Requisition Request (IRR) (SIS-OPS-FRM-0081) is to be completed, which is to be utilised to conform with procurement policies. The IRR must be used for all procurement and general purchases outside of personal travel expenses. As part of this request, the following information will be required:

- Vendor quotations
- Business case (If applicable).

Failure to meet with these prerequisites will result in approval not being given. For courses or activities the IRR can be used to provide a business case (if applicable) / project plan for the procurement of items required.

Following receipt of this documentation, submit the completed Internal Requisition Request (IRR) (SIS-OPS-FRM-0081) to the Operations Support Manager [DL\\_SISOpsApprovals@serco-ap.com.au](mailto:DL_SISOpsApprovals@serco-ap.com.au)

The National Operations Manager remains the primary approver for ERT expenditure. The National Director Transport and Escort (T&E) also has authority to approve if required due to absence.

### 9.3 Car and Van Rentals

Vehicle rentals are to be booked through Serco Travel or the online booking tool noting that the National Operations Manager remains the approving authority for all ERT vehicles.

### 9.4 Credit Cards

In general, company credit cards are only to be utilised in accordance with company policies. Specifically, where possible and practical, company credit cards should not be used for non-travel procurement in relation to the ERT whether for deployment or training purposes. Credit cards are generally only to be used for travel expense purposes including accommodation, meals, taxis and fuel however excluding regular booking of airfares. For further details, refer to the Serco ASPAC Purchasing Card Policy and the ASPAC Corporate Credit Card Policy – SIS Supplementary document.

### 9.5 SAP WBS

**Table 3 – SAP WBS**

<b>Cost Category</b>	<b>Expense Examples</b>	<b>WBS</b>
<b>Deployment</b>	Salaries (inclusive travel time), travel costs, car hire, fuel	E.007215.01.03
<b>Structured Training</b>	Salaries (inclusive travel time), travel costs, car hire, fuel, trainer costs, stationary, venue hire	E.007215.01.02
<b>Equipment Purchase</b>	Shields, helmets, furniture, first aid kits	E.007215.01.01

### 9.6 Deployment Allowance

The Deployment Allowance is payable on salaries and wages paid to ERT members for time spent on deployment while fulfilling all of their obligations in relation to and adhering to conditions of the deployment. Should any obligations not be met the ERT member will cease to be eligible for the Deployment Allowance. In addition, travel time and structured training do not attract the Deployment Allowance.

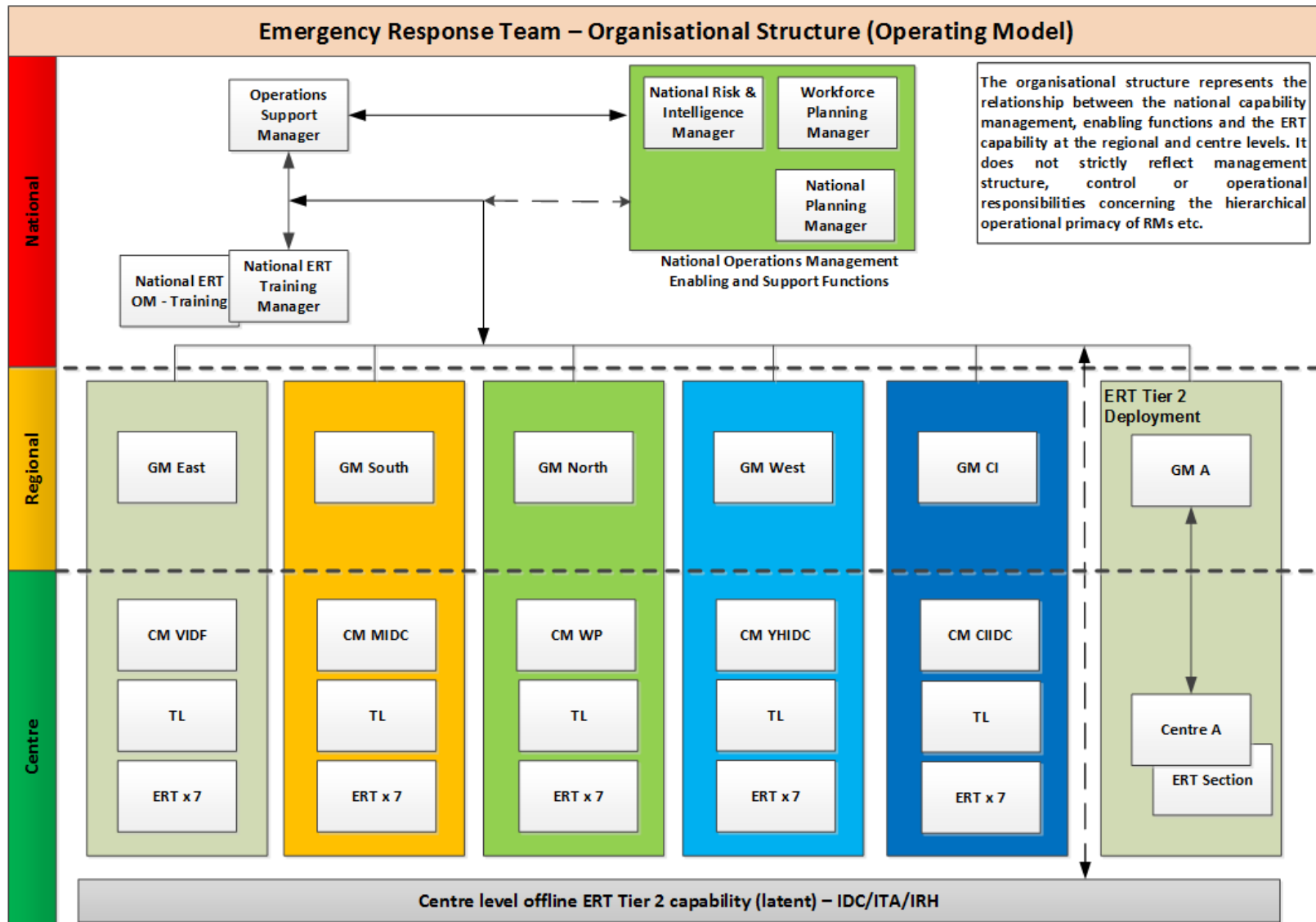
## 10. Billing

### 10.1 Ongoing Maintenance and Training

Serco invoices the Department a set monthly charge for ongoing maintenance and training. This fee is to cover scheduled training and equipment purchases. This fee is subject to an annual 'True-up' process.

At the end of the year a 'True-up' process is undertaken whereby all costs incurred in relation to equipment purchases and scheduled training are compared to the total invoiced amount. Should the total costs incurred be lower than the invoiced value a refund will be credited to the Department. For this reason, it is important that all scheduled ERT training costs are accurately captured under the correct WBS in SAP to ensure full recovery of costs.

# Annex A – ERT Organisational Structure





## Annex B – ERT Equipment Accountability

### Purpose

The purpose of this policy is to ensure the correct issue and counting of inventory items at the National Training Centre (NTC) and all network wide ERT site specific equipment stores is performed in a planned and methodical manner. It is to also ensure that the process is documented to ensure management, accounting, review, and audit requirements regarding ERT equipment inventory holdings are satisfied.

### Scope

This policy applies to all ERT inventory items held across the SIS network. This policy covers issue, audit, and equipment return. This policy also deals with stock take inventory adjustments but will not cover write-off transactions.

### Principles

ERT in its current form across the SIS has a number of legacy equipment items and processes. Up until now, there has not been one consistent process to cover issue and stock take because of the different issue system at each centre. Therefore this policy is transitional and will be updated upon first review post implementation.

Equipment stock take and audits are used to:

- Obtain a physical verification of the quantity of stock held to enable reconciliation to inventory accounting systems
- Obtain the calculation of the respective dollar value of stock on hand
- Demonstrate that controls and processes are being applied regarding the management of inventory and to check that those measures are working effectively.

Counting of ERT equipment items may be performed via a monthly individual equipment stock take or a biannual site stock take. All equipment is to be counted in accordance with the source site-specific equipment inventory.

### Types of Stock Takes

The ERT equipment manager will determine if a complete biannual stock take is necessary depending on whether scheduled cycle (monthly) counting has been successfully performed or if he is unsure of the current physical location of key ERT items.

**Biannual stock take** - The ERT Biannual stock take is a physical count of the entire individual and site specific inventory, performed twice a year. The first count is in January with the second being in July. This stocktaking method satisfies accounting and audit requirements for counting of inventory and is required if the monthly cycle checks are not performed and reported back to the NTC.

**Cycle stock take (monthly 10%)** - A scheduled ERT site-specific equipment stock take is a physical count of a portion of the inventory on a set schedule (monthly) whereby the entire inventory is counted during a 12-month period. The site inventories are to be predefined into categories for the purpose of the cycle count and the frequency is dictated by the category. The ERT equipment manager will determine the schedule of cycle counts; however as it stands 10% per month is required.

The cycle counts will satisfy the audit and accounting requirements for counting the entire ERT inventory. If an approved cyclical count schedule has been maintained throughout the year, and it can be clearly demonstrated and supported by evidence, the biannual stock take may not be required. Yet they still may be conducted if deemed necessary for any reason.

### Exception Based Cycle Counts

Exception based cycle counts occur on an ad-hoc basis as required. Checking inventory via an exception based cycle count may be required for a number of reasons, including, but not limited to, a large amount of PPE kit issued out or a discrepancy identified when issuing PPE.

**Stock take process** – biannual stock take first count. ERT staff will count the number of items physically present in the designated area, ensuring that an accurate count is made and the sizing is noted where appropriate. The count results will then be entered into the Site Specific Inventory or if at the NTC the Stock Inventory will be updated. Where the physical count of the first count is the same as the current balance the biannual stock take will be considered true and complete.

**Biannual stock takes discrepancy** – second count. On completion of the first count and ERT database update, conditional formatting will highlight when the on issue and on hand balance does not agree. Where the first count and the balance do not agree, a second count for every item with a discrepancy is to be conducted under the same principles as applied to the initial count. The second count is not to be conducted by the same person.

At the conclusion of the second count, the stock take will be considered complete when the items on hand match the items on issue. If the second count is, still not the same the ERT equipment manager will decide whether a quick investigation needs to be conducted into the discrepancy.

### Biannual Stock Take Discrepancy Investigation

With any major discrepancies, significant in terms of number or value, a quick investigation is to be conducted in order to ascertain the cause.

The investigation will take the form of a third party and once complete the ERT equipment manager and the investigating officer will decide on how to manage the discrepancy.

### Individual issue Personal Protective Equipment (PPE) accountability

Once a month each ERT member who has an individual PPE kit issued to them must conduct their own individual equipment check and update the individual equipment tracker inventory, which will be located on the public drive. Failure to conduct the appropriate equipment checks may end in removal from an ERT position.

## ERT Equipment Control

The ERT equipment control process includes:

- An up to date and maintained individual issue tracker and site specific asset tracker
- Procedures for the provision of adequate quantities of suitable equipment to meet the established requirement as per the NTC issue equipment inventory
- A means of repairing equipment with the least possible delay
- Clear operating instructions where applicable
- Procedures to monitor the viability of equipment repair
- Additional monitoring of those assets that are particularly portable and attractive eg. laptop computer, camera roam 2 and cuffs
- Responsibility for the care and control of equipment delegated to an appropriate level as determined by the ERT manager
- Proper housing and / or protection and clear identification
- The conduct of a stock take at least biannually
- Replacement action when required using the ERT equipment request form
- Identification of excess equipment for disposal such as the legacy Damascus items for immediate disposal
- Prohibition and identification of, illegal and/or unauthorised modifications to equipment;
- Investigation of discrepancies and misuse of ERT equipment
- Identification of assets by engraving if it does not already have a serial number
- The return of all assets in an officer's care prior to retirement, dismissal, resignation or transfer.

Controls are implemented to avoid following equipment management problems:

- Non-registration of equipment
- Stockpiling of equipment (retaining replaced equipment unnecessarily)
- Unauthorised ordering of equipment
- Excessive usage of equipment
- Unauthorised use of equipment
- Loss of equipment
- Abuse of equipment
- Unreported incidents
- Suspicious stock take adjustments
- Illegal disposal of equipment
- Lack of physical security (especially regarding mechanical restraints)
- Poor attitude to equipment management
- Loan practice
- Equipment register data accuracy and quality.

## Equipment Register

The current ERT Equipment registers are:

- NTC PPE Issue Inventory
- Individual Issue Tracker
- Site Specific Equipment Inventory

These registers record all acquisitions, transfers, loans and disposals of ERT items and enable fast and reliable metrics for analysis and action.

Equipment registers are maintained by:

- Performing biannual stock take of all accountable equipment comparing items physically held with details contained in the aforementioned equipment registers
- Recording and investigating items not accounted for in stock take
- Annually reviewing for disposal worn out, obsolete, surplus or uneconomic equipment
- Validating equipment register data to ensure all appropriate data fields are accurate.

## Marking Equipment

Clearly and permanently, identify all accountable equipment (portable and attractive, and capital assets) with an asset number. This will deface equipment making it less attractive to thieves and will assist in the identification of recovered equipment. Marking equipment also aids conduct of stock takes. All marking is to be cleared through the ERT equipment manager prior to engraving.

## Safe Handling Equipment

Equipment operators are trained to observe the prescribed safety measures as detailed in the relevant operating instructions for all equipment held by ERT. Ongoing training further develops these skills.

## Stock Takes

As aforementioned, stock takes of all accountable equipment are carried out biannually. Documentation verifying that these stock takes have been conducted is held for audit purposes.

## Annual Useful Life Review

An annual review of the useful lives of ERT assets is required to be conducted by the ERT equipment manager. The residual value and the useful life of an asset shall be reviewed at least at the end of each annual reporting period. This is important to identify any possible flaws in PPE items that may cause injury.

## Equipment Replacement Plan

Equipment requires periodic replacement. This is facilitated through an equipment replacement plan taking into account equipment's:

- Estimated useful life
- Current condition
- Current expenditure on maintenance
- Obsolescence.

A replacement plan will enable planning for future operations is conducted and:

- Looks forward over next five year
- Covers all items of capital assets and costly portable and attractive items (eg computers and riot equipment)
- Is updated every year
- Is consulted in the budget development process.

**Figure 1 – ERT Equipment**



# Enhanced Monitoring

## Serco Immigration Services

### Document Control

<b>Document:</b>	Enhanced Monitoring
<b>Type:</b>	Policy & Procedure Manual
<b>Reference No:</b>	SIS-OPS-PPM-0015
<b>Applies To:</b>	FDS Contract
<b>Owner:</b>	Operations Director
<b>Last Approved:</b>	18/02/2015
<b>Last Reviewed:</b>	19/02/2015
<b>Version:</b>	1.0



Certificate Number: 14741

## Amendment Record

Version	Description	Issue Date
1.0	Initial Release	19/02/2015

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## 1. Introduction

### 1.1 Policy

Within the Immigration Detention Network there is a requirement for the application of enhanced monitoring. This is generally a result of a need identified due to the personal circumstances of a Detainee or the likelihood of the Detainee participating in adverse behaviour or placing the safety and wellbeing of staff or other Detainees at risk. Underpinning the requirement for enhanced monitoring is a range of programs that addresses the needs of Detainees. These programs include:

- Personal Officer Scheme (POS).
- Individual Management Plans (IMP).
- Behaviour Management Plans (BMP).
- Keep SAFE & Psychological Support Program Supportive Monitoring and Engagement (PSPSME).
- Detainee Placement mechanisms.

Initial concerns may not fall within the Keep SAFE or BMP policies. In this situation enhanced monitoring may be required. The purpose of this policy is to provide direction on how enhanced monitoring will be managed by SIS, whilst preserving the privacy and dignity of the individual.

### 1.2 Related Documents

- Personal Officer Scheme (SIS-OPS-PPM-0011)
- Individual Management Plan (SIS-OPS-PPM-0020)
- Keep SAFE & PSP SME (SIS-OPS-PPM-0001)
- Behaviour Management (SIS-OPS-PPM-0006)
- Detainee Placement (SIS-OPS-PPM-0051)

### 1.3 Related Forms

- Detainee IMP Progress Note (SIS-OPS-FRM-0073)
- Individual Management Plan(SIS-OPS-FRM-0030)
- Immediate Keep SAFE Action Plan (SIS-OPS-FRM-0006)
- PSP Referral (SIS-OPS-FRM-0007)
- Behaviour Management Plan (SIS-OPS-FRM-0012)
- Proposed Placement Escalation Form (SIS-OPS-FRM-0012)
- Enhanced Monitoring Process - Tasking Sheet

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP

## 1.5 Roles & Responsibilities

**Table 1 – Roles and Responsibilities**

<b>Role</b>	<b>Responsibility</b>
All SIS officers	Identify any concerns regarding the wellbeing of a person in detention or the security and good order of the facility.
Shift supervisor (as appropriate)	Initiate the Enhanced Monitoring Process (EMP) through development of an EMP Tasking Sheet.
Operations Manager	Approve the parameters of the EMP and ensure a review is conducted within 48 hours of approval of the EMP.
Intelligence or Programs & Activities Manager	Information should be provided to both the senior on-site Intelligence manager and programs manager on a daily basis. This is done to inform Security Risk Assessments (SRA) and Individual Management Plans (IMP).
Centre Manager	Approve EMP and ensure all EMPs are reviewed no later than 48 hours following initiation. Approve extensions where appropriate and provide notification to SIS Regional Manager.
Regional Manager	Receive notification of Detainees under enhanced monitoring and offer advice where required.
National Operations	Receive notification of Detainees under enhanced monitoring and record in a central location for audit purposes. Confirm High Needs Detainee status with DIBP National Office

## 2. Procedures

### 2.1 Enhanced Monitoring

Enhanced monitoring is an additional tool employed to enhance security or care for a Detainee, over and above Individual/Behavioural Management and Keep SAFE. It is not intended to be undertaken for an extended period due to the impact on the individual's privacy, wellbeing or state of mind. While enhanced monitoring is ostensibly seen as a security and good order strategy it must be constructive and engaging, with a clear pathway leading to existent supportive mechanisms or through a formal review of the Detainee placement.

Circumstances where enhanced monitoring may be warranted include, but are not limited to:

- An individual or group that has shown an interest in security infrastructure or procedures.
- An individual or group who has articulated an intent to escape or for whom intelligence exists that escape is a probability.
- An individual placed in restrictive detention or an observation room for violent or aggressive behaviour.
- Where there is a large-scale transfer of a group of Detainees into another facility, particularly where there has been Detainee resistance to the move.
- UAM that is vulnerable, non-compliant or has shown intent to escape.

### 2.2 High Needs Detainees

High Needs Detainees means those Detainees not subject to or compensated accordingly by SM&E under the Psychological Support Program and require an enhanced level of security monitoring due to a consistent pattern of anti-social and/or unacceptable behaviour, that threatens the integrity of immigration detention and/or the safety of persons in the Facility. Detainees will only be classified as High Needs following approval by the Contract Administrator. Additional costs may be charged at the additional monitoring variable rate or such other applicable pricing mechanisms in the Contract.

Where an application is to be made for a Detainee to be considered for High Needs status, all relevant information must be forwarded to the National Operations Team. The Operations Director or delegate will confirm High Needs status with the DIBP Contract Administrator.

### 2.3 The Nature of Monitoring

Enhanced monitoring can fulfil the security requirements of being vigilant, environmentally aware, with robust documentation while at the same time being highly engaging and courteous. Enhanced monitoring must be consistent with how SIS delivers services throughout the IDN. All efforts must be made to ensure that enhanced monitoring is engaging and encourages the person(s) in detention to participate in the centres day-to-day routine, such as programs and activities.

The enhanced monitoring regime must be applied for the shortest possible duration and be sufficient to only observe, engage, understand, record, inform and where appropriate refer the Detainee to other supportive mechanisms. Particular aspects of the monitoring are to be included within an EMP Tasking Sheet specific to each application of enhanced monitoring.

Enhanced monitoring may only be applied in 48 hour blocks, after which it must be reviewed and approved by a centre manager in consultation with the SIS Regional Operations Manager or member of the National Operations Team.

## 2.4 Enhanced Monitoring of Groups

Enhanced monitoring of groups will require a multi-faceted approach. In addition to the enhanced monitoring of the group, security arrangements may be required to temporarily enhance the procedures or infrastructure of the centre. This might include placing static posts at entry/egress points, posting staff members around the perimeter of the facility, enlisting the assistance of the ERT or refocussing Programs and Activities to target a specific group. These functions can remain largely unseen or unknown to the group of concern.

Consideration should be given to the temporary deployment of a CSO as a 'Group Liaison Officer'<sup>1</sup> (GLO). This role is highly interactive and will require:

- Assisting with the Detainee group's induction into the facility.
- Building relationships and engaging with the group.
- Socialising the group to their new environment.
- Assisting with requests and access to services.
- Generally being the contact and liaison point within the centre.

Deployment of a GLO should be underpinned by a number of directives within an EMP Tasking Sheet (in writing) that outline:

- The purpose of the role.
- The nature of the Detainee group.
- The individual/s / Detainees and their details.
- General concerns held.
- What issues requires attention.
- Reporting process at the completion of the monitoring period.

These directives must be reviewed at least every 48 hours, in tandem with the approval of the enhanced monitoring process.

At the completion of each shift, a detailed report is to be submitted within an SIR. This report will be immediately shared with the operational management. The Operations Manager/Shift Supervisor is responsible for ensuring that a handover is conducted by the departing GLO to the oncoming GLO, which includes reading and signing the EMP Tasking Sheet.

A review of the enhanced monitoring arrangements are to be undertaken by the Operations Manager at the completion of the monitoring period (each 48 hours), to recap information obtained and to determine whether concerns still exist regarding the group.

<sup>1</sup> This may be a Personal Officer with a skill-set that would not only educate the group on the availability of facilities and activities, but also who can glean information about the group to better inform any concerns raised initially.

Should there still be concerns about the groups, approval from the CM for a further period of enhanced monitoring, is then required. Consideration should be given to the viability of the group's placement, with a view to lodging a Detainee Placement Review to transfer either all, or of the group, to a more appropriate facility.

Consideration should be made regarding the viability of the group's placement with a view to lodging a Detainee Placement Review for either all, or some of the group to be transferred to a more appropriate facility.

## 2.5 Enhanced Monitoring of Individuals

Serco officers are expected to positively engage with Detainees during any period of enhanced monitoring. The EMP Tasking Sheet should reflect this.

## 2.6 Extension to Defined Period

Where an extension to enhanced monitoring is warranted beyond the initial defined 48 hour period, approval must be sought from the CM. The CM will inform the RM of all applications of enhanced monitoring and extensions.

## 2.7 Recording

Depending on the reason for enhanced monitoring, the OM is responsible to file the completed EMP Tasking Sheet. This information will inform the intelligence picture and security risk rating of the Detainee(s).

When the Detainee requests additional support while living in the centre, the request should be recorded on the Detainee's dossier and uploaded to Portal.

When the Detainee requests additional support while living in the centre, the request should be recorded on the Detainee's dossier and uploaded to Portal.

# External Health Appointments

## Serco Immigration Services

### Document Control

<b>Document:</b>	External Health Appointments
<b>Type:</b>	Policy & Procedure Manual
<b>Reference No:</b>	SIS-OPS-PPM-0049
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1.0	Formal issue	06/09/2012
2.0	Update to risk assessment and person in detention notification	30/11/2012
2.1	Update following DIBP review of document	18/03/2014
3	Updated to reflect the Facilities and Detainee Services Contract 2014	19/02/2015

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## 1. Introduction

### 1.1 Policy

Detainees are entitled to medical care to a standard equivalent to the Australian community. Serco is committed to its duty of care towards all Detainees. Serco will liaise closely with the Department of Immigration and Border Protection (DIBP), and the Detention Health Service Provider (DHSP) to ensure processes are in place to facilitate external medical appointments in a timely and appropriate manner.

### 1.2 Related Documents

- Approval Process and Operational Changes (SIS-TE-PPM-0001)

### 1.3 Related Forms

- External Appointment Form (not a Serco document)
- Request for Service
- Transport & Escort Operational Order
- Transport & Escort Risk Assessment

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Detention Health Framework, DIBP

### 1.5 Roles & Responsibilities

**Table 1 – Roles and Responsibilities**

Role	Responsibility
DHSP	Make appointment
DHSP	Notifications to DIBP & Serco of appointment
DIBP	Submit RFS for travel
Serco/DHSP	Notify Detainee of appointment (depending on risk)
Serco	Facilitate appointment

## 2. Procedures

### 2.1 Making the Appointment

The Detention Health Services Provider will arrange all external medical appointments for Detainees. No appointments will be made independently of the DHSP.

### 2.2 Notifications to Stakeholders

Upon receiving confirmation of an external appointment, the DHSP will complete the notification section of the External Medical Appointment Form and present this at the daily centre operational meeting.

Except in the case of urgent clinical necessity, this notification will occur at least 3 working days in advance of the appointment to ensure appropriate risk assessment, planning and Detainee notification can occur in a timely fashion.

If a request is urgent and required to be undertaken 'as soon as possible' the DHSP or Department must contact Serco by telephone at the time the Request for Service is lodged, in accordance with the contractual requirement.

### 2.3 Authorisation

Transport for medical appointments can only be actioned through a Request for Service in writing or on the Portal system from either the Department or DHSP.

### 2.4 Risk Assessment

Serco will complete an Operational Order and Transport & Escort Risk Assessment in response to the Request for Service.

Serco will share the Transport & Escort Risk Assessment with DIBP and the DHSP at the next daily operational meeting.

Where any of the following conditions are met, Serco will seek DIBP approval of the Operational Order:

- The task is identified as High or Extreme Risk
- DIBP specifically requests that it approve the Operational Order
- Interpreting services are required for the task, the Department's provided interpreting service should be used in the first instance. Where the Department is unable to provide interpreters if required, the costs associated with engaging an external interpreter are to be paid for as a Pass Through Cost, if pre-approved by the Department.
- Where the existing fleet is inadequate to meet the needs of an Escort Task, Serco may propose to hire a vehicle in order to carry out the task, and to treat the cost as a Pass Through Cost. This must be approved in advance by the Contract Administrator or his authorised representative.

## 2.5 Notification to Detainee

The means and notification times of external appointments will be dependant upon an individualised risk assessment of the individual and the location and will follow the following guidelines:

- Notification will be in writing and will contain:
  - the date, time and type of appointment
  - the time at which the Detainee must present themselves for their appointment and the appropriate location (usually Reception)
  - any special requirements
- Where there is a higher security risk the notification timeframe may be reduced. This may occur where:
  - the Detainee has a known history of escape
  - the Detainee is rated as Extreme risk
  - the Detainee is classed as a '501'
  - relevant intelligence has been received
- Notifications will be explained to the Detainee in a language they understand, if necessary with the assistance of an interpreter

Where risk is identified as low the DHSP will notify the Detainee of the appointment as soon as possible. Where notification is withheld as a result of security concerns the DHSP will advise the Detainee that Serco will provide the appointment details in accordance with their risk assessment.

It is imperative that the Detainee not be given the location of their appointment in advance, by any agency, in order to preserve as far as possible the safety of the escort.

## 2.6 Facilitating the Appointment

All external escorts will be facilitated in as discreet a manner as possible, in line with the Operational Order and Risk Assessments. All Detainee information will be handled with the utmost regard for Detainee confidentiality. Escorts will be conducted in accordance with Transport and Escort operating procedures.

# First Response Negotiators

## Serco Immigration Services

### Document Control

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## 1. Introduction

Serco Immigration Services (SIS) understands that the resolution of any incident requires effective communication, de-escalation and negotiation. Whilst all staff are trained in these skills, some incidents require a greater depth of knowledge and expertise. As such, SIS will have qualified First Response Negotiators (FRN) available for deployment where required.

SIS is committed to using FRN as a primary response to support and enable successful incident management, working towards incident resolutions that demonstrate Serco's commitment to treating all Detainees, staff and stakeholders with decency and respect.

### 1.1 Related Documents

- Emergency Response Team PPM (SIS-OPS-PPM-0045)
- Operational Safety PPM (SIS-OPS-PPM-0035)
- Debriefing PPM (SIS-OPS-PPM-0004)
- Incident Reporting PPM (SIS-OPS-PPM-0019)
- Individual Management Plans PPM (SIS-OPS-PPM-0020)
- Behaviour Management PPM (SIS-OPS-PPM-0006)
- Incident Handover (SIS-OPS-PPM-0044)
- Keep Safe/SME PPM (SIS-OPS-PPM-0001)
- Working with Families and Minors PPM (SIS-OPS-PPM-0037)
- Incident Management Protocol (SIS-OPS-PPM-0016)
- Evidence Management (SIS-OPS-PPM-0009)
- Contingency plans

### 1.2 Related Forms

- Negotiator Logs (SIS-OPS-REG-0009)
- Negotiator Debrief (SIS-OPS-FRM-0068)
- Officers Report (SIS-OPS-FRM-0051)
- Security Information Report (SIS-OPS-FRM-0053)
- Individual Management Plan (SIS-OPS-FRM-0030)
- Behaviour Management Plan (SIS-OPS-FRM-0012)
- Keep SAFE (SIS-OPS-FRM-0001 to 0009)

### 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Listening Devices Act 1964 (NSW)

- Listening and Surveillance Devices Act 1972 (SA)
- Surveillance Devices Act 1998 (WA)
- Invasion of Privacy Act 1971 (QLD)
- Listening Devices Act 1991(TAS)
- Surveillance Devices Act 2007 (NT)
- Surveillance Devices Act 1999 (VIC)



## 2. Deployment

### 2.1 Structure

FRN are located throughout the network. Their primary function is that of an operational staff member, and this is their usual employment.

FRN are part of the Emergency Response Team capability, however may on occasion be deployed to assist in situations where the ERT is not deployed.

### 2.2 Team structure

Where operationally achievable, FRN will operate as a four person team, consisting of the following roles:

- Primary negotiator: the individual primarily responsible for conducting the negotiations with the subject, primary intelligence gatherer
- Secondary negotiator: relieving and supporting the primary negotiator, takes notes but should not act as scribe for the log
- Negotiator team leader: communicate with the Emergency Control Centre to provide technical advice
- Tertiary: may complete the role of scribe, complete running sheets, records, manage tools & security and provide general support to the negotiating team.

It is acknowledged that it is not always achievable to operate the above model; as a minimum, FRN should work in pairs (primary and secondary) with a scribe assisting. The scribe does not necessarily have to be a qualified FRN, however the individual selected should:

- have an understanding of the process
- write legibly

Selecting the appropriate individual to complete each role is key to a successful negotiation. Care must be taken to consider any pre existing rapport with the subject, but balance this against the possibility that existing rapport and preconceived ideas about the subject may also influence the negotiator. Any adverse history with the subject may create friction within the negotiation.

Responsibility for allocation of roles to individuals falls to the FRN team deployed.

### 2.3 Chain of command

FRN can be called out by an individual of Operations Manager or above, or by the Duty Manager.

The Incident Commander or their delegate should brief the FRN team.

The role of the FRN team is solely to negotiate, and support the negotiator. FRN deployed as such must not be engaged in fulfilling other roles, such as maintaining a cordon or controlling the scene. If the tactics of the Scene Commander interfere with negotiation, the Scene Commander must understand that the negotiator's needs take precedence and adapt their tactics, providing the situation is safe. Security and safety is of paramount importance. The Scene Commander must work with the FRN team and ensure open communication; the FRN team should be aware of any planned action, and should be consulted regarding any individual's entry to the cordon, in order to minimise interference with the negotiation strategies.

Part of FRN training includes the fact that the decision maker in any given situation will not attend the scene. This message is reiterated to the subject of the negotiation. It is important that the hierarchy of facility management support this message and not attend the scene.

### 2.3.1 Cordon & Containment

It is important in the safe negotiation of any incident that an appropriate cordon be maintained around the scene. This serves several functions:

- promotes the security of the scene and individuals / equipment within
- promotes clear incident management capability through restricting the number of people with access to the scene / subject

While a negotiation is in progress, only the negotiator will communicate with the subject.

### 2.4 Availability

FRN may be deployed at their own facility, or may be required to travel to another facility as necessary. Contact details for FRN at each facility should be available to the duty manager.

FRN who are called but unable to attend on two separate occasions will have their position on the FRN team reviewed by the ERT Manager.

### 2.5 Call Out / Deployments

Incidents in which an FRN may be deployed include, but are not limited to:

- Any incident requiring the opening of the local Emergency Control Centre
- Persons threatening or attempting suicide / self harm
- Barricade / hostage
- Roof top / incidents at height
- Protest
- Any incident where the Centre Manager considers FRN may be useful in the resolution of the incident

## 2.6 Responsibilities

When a FRN attends an incident, they will be provided with a full brief by the Scene Commander, including any relevant intelligence about the subject / situation.

If there is, a staff member already engaged in negotiations with the subject, who is not a qualified FRN but has built a good rapport and is comfortable, the FRN will support them through fulfilling the secondary / Team Leader roles. FRN must remain mindful that the individual is not a trained FRN and may make mistakes, and as such should monitor the situation closely. If there are errors made which are dangerous, or jeopardise the safe resolution of the incident, the FRN will take control of the negotiation.

The facility is responsible for supporting and enabling the FRN and adhering to the principles of this PPM. While the Incident Commander retains the ultimate decision making responsibility, where an FRN has been engaged they must be mindful of the skills, training and expertise of this individual and consult them accordingly.

If audio equipment is in use to communicate the negotiation to the Emergency Control Centre, the FRN team must not assume that this is enough to communicate important events within the negotiation and will ensure such events are communicated through the command structure immediately.

## 2.7 Uniform

FRN will wear Negotiator specific provided uniform. This is important to distinguish the negotiator from their normal role.

If an FRN is deployed as such during a normal shift, wearing normal uniform, they must ensure to don an FRN vest.

## 2.8 Team Handover

FRN team handover is a crucial part of any negotiation. It is imperative that all roles are thoroughly and properly handed-over to the oncoming team. There should be as much time dedicated to this function as required, and it should never be rushed.

Each role in the team should hand over to their correlating member of the oncoming team, on an individual basis. The whole team should not be replaced at once, as this may jeopardise the continuity of the negotiation; rather oncoming team members should work with the existing team during handover.

The outgoing team must ensure all logs are up to date prior to handover. Both the outgoing and the incoming team must sign all records and update audio records to reflect the new identities, including the time at which responsibility is passed on.

If an incident has the capacity to become protracted, the Incident Commander should aim to have a replacement FRN team in place and up to date, ready to take over within 11.5 hours of the commencement of the negotiation, in order to give the outgoing team time for a hot debrief. The debrief should be allocated at least 30 minutes.

## 2.9 Incident Handover

If an incident is handed over to a law enforcement agency, staff must comply with the Incident Handover PPM. Handing over the negotiation to an external negotiator should be completed in the same method as described at 2.8

## 2.10 Interpreters

Where there is a language barrier present between the negotiator and the Detainee, a DIBP authorised interpreter must be utilised to assist. A Serco staff member with appropriate language skills may be used if an interpreter is not available, however only after all attempts to source an interpreter have been made. Where possible, another interpreter should be used to check the interpretation, through listening in on the negotiation.

Under no circumstances should a Detainee be used to interpret for another Detainee.

## 2.11 Negotiating with a Stakeholder / Subject Matter Expert (IHMS)

In the interests of securing the best available outcome, should a subject matter expert be required to advise the negotiator, that individual should be in a position to hear the negotiations and advise the FRN, but ideally would not be visible to the Detainee. The SME should not be placed in a position to negotiate directly with the Detainee; rather the FRN already engaged with the Detainee should continue.

## 2.12 Psychological Services

SIS Psychological Services may be contacted to offer support to FRN at any point during a negotiation.

### 3. Evidence

#### 3.1 Records, Reports & Audio Visual Recording

All records taken during the negotiation, including the FRN logs, will be considered evidence and handled accordingly, in line with the Evidence Management and Digital Audio Visual Records PPMs.

Any audio or visual recording made of a Detainee must be supplied to DIBP within an hour of producing the recording.

#### 3.2 Incident Reporting

FRN must ensure all appropriate information is communicated out of the negotiation in order that any appropriate Incident Reports (IRs) can be completed within the appropriate timeframes. FRN must not be expected to complete the IR themselves as this may not always be possible during contractual timeframes.

#### 3.3 Anything Given by Subject

Any item given to the FRN by the subject must be considered as evidence and handled accordingly.

## 4. Post Deployment

### 4.1 Debrief

Further to the FRN team hot debrief, FRN should engage with hot and cold debriefs conducted as per the Debriefing PPM.

### 4.2 Negotiator Specific Debrief & Negotiator Wellbeing

At the end of an incident or at a shift swap, the team member running the negotiator team will ensure a hot debrief is completed with the negotiator team. This must be completed. FRN will be mindful of the need to maintain their personal wellbeing and will consider the need to engage with psychological services.

#### 4.2.1 Psychological Services

FRN will engage with Psychological Services to complete a post deployment interview after every deployment. Where appropriate / necessary critical incident debriefing will be made available.

### 4.3 Review & Lessons Learned

It is the responsibility of the ERT Manager to ensure issues identified through debrief and review are addressed in the following ways:

1. Ensure review of forms and PPM to reflect amendments required
2. Ensure learning points are distributed throughout the network

## 5. Training & Communication

### 5.1 Application

Staff wishing to be trained as FRN must complete the following process:

1. Respond to advertised positions
2. Undergo psychological aptitude testing
3. Have application supported by Centre Manager and be released for training

### 5.2 Program

Applicants must successfully complete the First Response Negotiators Program. This program is provided by an external provider and is five days in duration. Each applicant will be assessed on their individual merits with a view to further action, should they fail to complete the program.

### 5.3 Re-Certification

Annual recertification as an FRN involves one training day with the external provider and three days operational training in conjunction with ERT training.

If an individual does not display the required competencies during the recertification day with the external provider, further training will be made available.

Facilities will make negotiator staff available for required training.

### 5.4 Review of Footage

It is acknowledged that significant lessons can be learned from reviewing footage of actual negotiations completed, both as self and peer assessment.

Where possible, any footage / audio taken of negotiations will be made available to negotiators for training and review.

### 5.5 Network Communication

FRN will communicate with each other through an email distribution list. Staff trained as FRN will ensure they have email access and they check their email regularly (at least twice weekly).

This network communication is important to support peers, share ideas, best practice and lessons learned within the network.

## 6. Resources

### 6.1 Mobile Phones

FRN will not use mobile phones in negotiations.

### 6.2 Negotiator Kits

Negotiator kits will be distributed throughout the network, containing relevant equipment to assist in a negotiation. FRN are responsible for maintaining the kits at their location. The ERT Logistics & Administration Officer will audit the kits on a periodic basis.

FRN may have access to specific audio recording equipment to assist in the management of an incident involving negotiation, depending on the situation. In the event that such equipment is used, any individual who is recorded must be informed of the fact that they are being recorded.

### 6.3 Replacement / Replenishment of Consumables / Broken Items

FRN must communicate any deficiency in equipment to the ERT Logistics and Admin Officer who will arrange for the replenishment of equipment.

### 6.4 Staff Welfare

During an ongoing incident the Incident Commander must ensure that the FRN are provided with any additional equipment required to facilitate their role and refreshments as required to ensure their sustainability during what can be lengthy operations.



# Food and Fluid Refusal

## Serco Immigration Services

### Document Control

<b>Document:</b>	Food and Fluid Refusal
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2.0	Updated to reflect Facilities and Detainee Services Contract 2014	19/02/2015

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# 1. Introduction

## 1.1 Policy

Serco recognises the complexity of emotions experienced by people held in immigration detention and is committed to ensuring they are treated with decency and respect. Whilst all Detainees are encouraged by Serco staff to make healthy decisions, it is acknowledged that some Detainees may choose to pursue food and fluid refusal ('voluntary hunger strike' or 'voluntary starvation'). This policy addresses the required staff actions and provides standard forms for use with Detainees pursuing this course of action.

## 1.2 Related Documents

- Keep S.A.F.E / PSP PPM (SIS-OPS-PPM-0001)
- Incident Reporting PPM (SIS-OPS-PPM-0019)
- Duty of Care PPM

## 1.3 Related Forms

- Food / Fluid Refusal Monitoring Form (SIS-OPS-FRM-0015)
- Commencement of FFR Notification (SIS-OPS-FRM-0014)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- AS/NZS ISO 9001:2008 – Quality Management Systems - Requirements

## 2. Procedures

### 2.1 What is Food & Fluid Refusal (FFR)?

Food and Fluid Refusal, also sometimes known as voluntary starvation or voluntary hunger strike, is generally a form of passive protest employed by individuals who may feel they have an unresolved grievance with some aspect of their situation. The justification for pursuing FFR will rarely be reflective of the Detainee's opinion of the quality of the food provided to them.

Whatever the stated justification for pursuing FFR, it is important that the Detainee experience Serco staff as being approachable and ready to discuss the matter.

### 2.2 Identification of a Detainee Pursuing FFR

In the majority of facilities, staff will be able to identify a Detainee who is not taking their meals at the point of food service / delivery. If a Detainee is identified as not having taken their meal, staff must speak to the individual to ascertain their reasoning and check on their wellbeing. After not taking three meals in a 24 hour period, the Detainee should be classed as pursuing FFR, and should be monitored using the Food / Fluid Refusal Monitoring Form (SIS-OPS-FRM-0015). The Shift Supervisor / Operations Manager must be informed.

Note: for FFR purposes, breakfast should not be considered a meal as breakfast items are continuously available and therefore it is difficult to monitor whether breakfast has been taken. For the purposes of identifying three meals missed within a 24 hour period, only lunchtime and evening meals should be considered.

If a Detainee makes a declaration that they are pursuing FFR, the reasons for this must be discussed with the Detainee and as much information as possible recorded and communicated to the Shift Supervisor / Ops Manager, DIBP and IHMS. The incident report should not be raised until the Detainee has been identified as not having taken their meals.

Where a Detainee is fasting for religious / cultural reasons, staff must take care to ensure any changes to the Detainee's eating habits, outside of the fast, are noted, and that should a Detainee commence FFR during a fast, this is captured.

#### 2.2.1 Communication of FFR

Upon a Detainee missing three consecutive meals, or stating that they are pursuing FFR, as much information as possible relating to the reasons for their decision must be communicated to DIBP and IHMS as soon as possible, using Commencement of FFR form (SIS-OPS-FRM-0014). The following information should also be included:

- Is the Detainee drinking?
- Does the Detainee have food in their room?
- What shop purchases have they recently made?
- If they share a room, is their roommate taking more food than normal?
- Are there any other concerns about the individual – self harm, bullying (perpetrator or victim)

The negative effects of refusing food and / or fluids should be explained to the Detainee, with the use of an interpreter or Telephone Interpreting Service if necessary. The long-term effects of not taking food or fluids may include, but are not limited to:

- malnutrition and associated health problems
- dehydration
- slowed thinking, poor memory
- dizziness, fainting and headaches
- poor sleeping cycle
- vitamin deficiencies and associated health problems

Detainees should be reminded that they can discuss their FFR with IHMS, should they wish to do so.

A PSP Referral should be completed for the Detainee as a matter of course in all cases of FFR, however Keep SAFE monitoring in the interim period between completion of referral and IHMS assessment is only necessary where there is a specific concern about the Detainee's mental health.

## 2.3 Monitoring of a Detainee Pursuing FFR

Any Detainee pursuing FFR should be monitored to ensure their safety and wellbeing, whilst checking for possible causes of unusual behaviour, such as being the victim of bullying. They should regularly be offered and encouraged to partake in food and drink. A detailed note should be made of all food / drink offered, and items the Detainee is seen to consume, be they liquid or solid, on the Food / Fluid Refusal monitoring form (SIS-OPS-FRM-0015). This information should be communicated to DIBP and IHMS.

Where operationally possible, Serco and IHMS should consider relocating a Detainee who has been pursuing FFR for ten to fourteen days or more, to an area where they can receive more support than may be possible in their usual accommodation. This will also provide the opportunity for consistent monitoring of the individual, to enable Serco to observe and accurately report their food or fluid consumption.

### 2.3.1 FFR as Part of a Psychological Support Program (PSP)

The Detention Services Manual (06-08 PSP) states

*“Voluntary starvation (voluntary total fasting) can be viewed as self harming behaviour; however, it will not be managed using this [PSP] process unless clinical assessments indicate that a psychological support program intervention is appropriate”.*

Serco will submit a PSP Referral for any Detainee pursuing FFR as detailed at 2.2.1.

If IHMS does not consider PSP SME warranted, Serco must remain mindful that while Detainees who pursue FFR often do not require additional support, the mood and language of the person pursuing FFR must be carefully monitored. If necessary, Serco must adhere to Keep SAFE procedures, including completing a PSP referral to have the individual re-assessed by a healthcare professional.

If a Detainee already managed under the Keep SAFE / PSP protocol commences FFR, this must be documented within the Keep SAFE / PSP paperwork to avoid duplication with two sets of observations, however all pertinent information relating to the FFR must be included and communicated appropriately.

### 2.3.2 Frequency of Support and Observation

If IHMS increase the Detainee's PSP Supportive Monitoring and Engagement, Serco will comply with any clinical instruction given.

If IHMS does not consider PSP SME to be appropriate, the frequency of support and observation should be decided locally as appropriate to the individual incident. It is acknowledged that if a Detainee is displaying no other behaviour that is cause for concern; regular monitoring for the sole purpose of checking their food and / or / fluid intake may be operationally difficult to achieve. Managers must ensure the Detainee is monitored frequently; monitoring should be conducted as an absolute minimum at and after meal times whilst they are pursuing FFR.

### 2.3.3 Quality of Entries

Entries made on the monitoring forms must be thorough and detailed and should reflect all efforts made by the staff member to engage the Detainee in conversation. It is not sufficient to state 'checked on Mr. Ali; he seems fine'. Instead, the observation should include comment as to the conversation had between the staff member and the Detainee – remember, food should be regularly offered and the Detainees response and any further information given about their motivation should be noted, including the Detainees demeanour, their activity, visitors received etc. Any changes to the Detainee's usual behaviour, outside of the FFR, should be noted and discussed with the Detainee.

It is important to note any changes of behaviour outside of their food / fluid refusal, as this may indicate underlying problems, which require attention. Furthermore, if the food/ fluid refusal has been ongoing for a considerable period but the Detainee is showing none of the expected side effects of not eating, such as weakness or lethargy, this information is important and must be communicated to other stakeholders as appropriate. How quickly FFR would result in physical effects noticeable to a non-medically trained individual varies greatly. Guidance should be sought from local Detention Health Service Provider (DHSP) staff as to what to expect with an individual pursuing FFR.

### 2.3.4 Medical Attention

Any Detainee pursuing FFR should be encouraged to attend healthcare whenever requested to do so, however Serco is not in a position to force individuals to avail themselves of medical attention if they refuse. An individual's health remains his / her own responsibility unless Serco is advised otherwise by the DHSP.

A Detainee pursuing FFR may require external medical attention; Serco should facilitate any access to external healthcare providers as recommended by the DHSP.

## 2.4 Removal from FFR

A Detainee should be considered to have ceased FFR after being observed to have eaten two meals in a 24 hour period, or when they confirm cessation of the protest.

## 2.5 Reporting Requirements

### 2.5.1 Portal Incident Reporting

Once a Detainee fails to consume three meals in a 24 hour period and confirms or does not deny they are pursuing FFR, the 'Food/Fluid Refusal' incident report (IR) must be opened. If the Detainee is under the age of 18, the IR 'Food / Fluid Refusal – client <18' must be opened.

These IRs are both 'major' classification and must be reported within the applicable timeframes; within one hour for verbal notification to DIBP, with an Incident Report released on Portal within 6 hours of the verbal notification

If more than one person commences FFR at one time, a separate IR must be opened for each individual. It is not appropriate or acceptable to create one IR and link all participants.

The participation type must be logged as 'alleged victim', not 'involved'.

The IR must be updated every 24 hours until the client confirms cessation of the protest or the client is observed eating two meals in a 24 hour period. The IR should be closed when the FFR ceases.

Post Incident Reviews must be conducted for Major incidents.

### 2.5.2 Creating an Objective under 'Work Plans' in Portal

Any Detainee pursuing FFR must have an objective created under the Work Plan 'Voluntary Starvation'. All observation sheets must be scanned and uploaded as attachments, at least every 72 hours. This work plan must be kept up to date with all pertinent information.

### 2.5.3 Participation in Multidisciplinary FFR Meetings

Some sites operate a multidisciplinary meeting for the monitoring of all / any Detainees on FFR. This may be requested by DIBP or the DHSP, or might be conducted as part of a routine multidisciplinary meeting; for example, as part of a PSP meeting. In the interests of collaborative working and appropriate information sharing, Serco should engage with any requested meeting and provide updates as to the Detainee's observed nutritional intake, as well as their demeanour and general activities. All stakeholders should be aware of the protective factors in each individual's case and should promote them with the Detainee.



# Incident Management Protocols

## Serco Immigration Services

### Document Control

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2.0	Standardising for all sites, additional reporting requirements	25/7/2013
2.1	Inclusion of final AMEAA Incident Reporting process	21/02/2014
3.0	Update to Reflect Facilities and Detainee Services Contract 2014	20/02/2015

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## 1. Introduction

### 1.1 Policy

The first priority in the management of incidents will be to preserve the safety and welfare of Detainees and other people in the facility. The incident management process will be based on Australian Emergency Management standards and managed in consultation with the Department of Immigration and Border Protection (DIBP), emergency services and other service providers to ensure a coordinated and effective response.

Serco is responsible for managing incidents within detention facilities. This includes:

- **Planning & Preparation** – Developing plans with key stakeholders to identify risks, allocate responsibilities and develop response strategies; then providing training to staff and conducting exercises.
- **Reporting** – Ensuring relevant stakeholders are provided with accurate and timely information.
- **Management** – Managing incidents in conjunction with other key stakeholders, to ensure the safety and security of people and facilities.
- **Post-Incident** – Ensuring that after each incident, the welfare of staff is provided for, the incident is reviewed and investigated, and any lessons learnt are incorporated into future plans.

### 1.2 Related Documents

- Incident Reporting How To Guide (SIS-OPS-DOC-0001)
- Death in Detention PPM (SIS-OPS-PPM-0002)
- Debriefing PPM (SIS-OPS-PPM-0004)
- Incident Reporting PPM (SIS-OPS-PPM-0019)
- Incident Handover PPM (SIS-OPS-PPM-0044)
- Emergency Response Team PPM (SIS-OPS-PPM-0045)
- Risk Management Plan (SIS-OPS-DOC-0010)
- ASPAC Incident Notification Process (ASPAC-INP-001-1014)
- ASPAC Crisis Management Plan (ASPAC-CMP-1014-ASPAC)

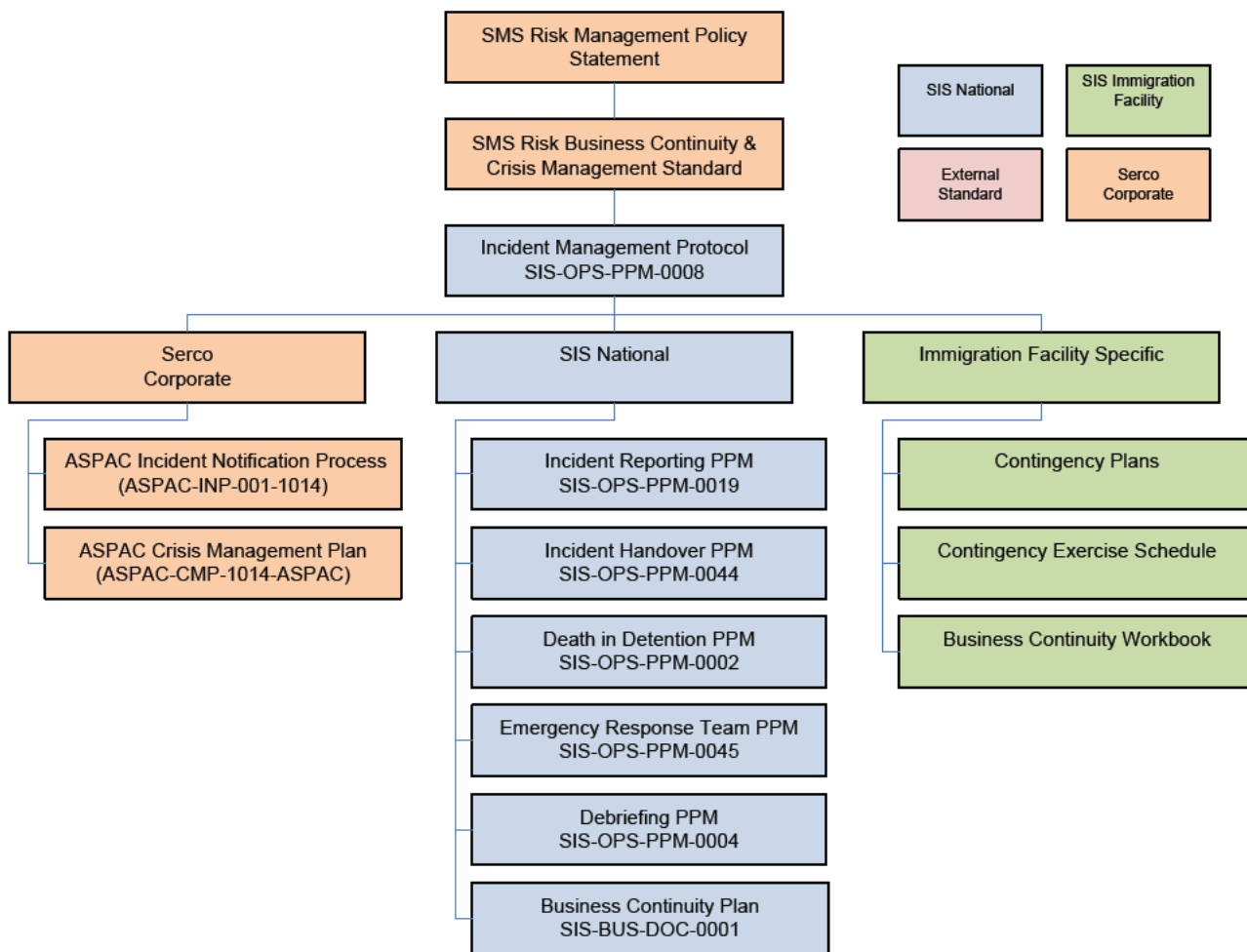
### 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Facilities and Detainee Services Contract 2014
- AS 3745:2010 Planning for emergencies in facilities

## 1.4 Document Hierarchy

This Incident Management Protocol is designed to implement Serco policies, standards and procedures relating to risk and crisis management, as well as meet all related contractual requirements. Supporting this protocol are a number of Serco procedures, SIS National documents, and facility specific documents. This is illustrated below.

**Figure 1 – Document Hierarchy**



## 2. Planning & Preparation

The Serco Centre Manager is responsible for ensuring planning and preparation is undertaken to manage any foreseeable contingencies. This includes establishing the incident management and emergency control structure, holding planning meetings, ensuring staff are trained, developing contingency plans, and ensuring exercises are conducted.

## 2.1 Emergency Planning Committee

An Emergency Planning Committee (EPC) must be formed at each facility. The EPC should consist of Serco, DIBP Regional Management and other service providers, but Serco will establish and lead the EPC. The EPC must meet quarterly and within seven days after any emergency.

The duties of the EPC include the following:

- Identifying events that could reasonably result in an emergency situations.
- Developing and implementing emergency plans, supporting this Incident Management Protocol and Contingency Plans.
- Ensuring that resources (including sufficient staff numbers) are provided to enable development and implementation of the emergency plan, and to manage an emergency.
- Controlling emergency situations until the appropriate emergency services arrive to take control and, thereafter, working with that emergency service.
- Nominating the validity period for the emergency plan and the evacuation diagram.
- Ensuring that the emergency plan is readily identifiable and available to the appropriate persons.
- Establishing an Emergency Control Organisation (ECO) to operate in accordance with the emergency plan.
- If deemed necessary, establishing a specialist response team.
- Authorising the release and implementation of the emergency plan. The following shall apply to the implementation process:
  - Awareness of the emergency response procedures - Information about the procedures shall be disseminated to staff.
  - Training - A formalised training schedule shall be developed to ensure that relevant training is provided to ECO members, all Serco staff within their area of responsibility and facility occupants.
  - Testing the emergency procedures - The EPC should ensure that the emergency procedures are tested.
  - Review of procedures - The effect of the procedures on an organisation should be monitored at all stages of the implementation process. Amendments shall be made to rectify any deficiencies or inaccuracies that are identified in the procedures.
- Establishing arrangements to ensure the continuing operation of the ECO.
- Ensuring that the register of ECO members is current and readily available.
- Establishing strategies to ensure visitors are made aware of emergency response procedures.
- Ensuring that the emergency response procedures remain viable and effective by reviewing, and testing the emergency response procedures at least annually.
- Ensuring that the emergency plan is reviewed at the end of the validity period, after an emergency, an exercise, or any changes that affect the emergency plan.
- Ensuring that a permanent record of events for each emergency is compiled and retained.
- Identifying and rectifying deficiencies and opportunities for improvement in the emergency plan and emergency response procedures.

## 2.2 Emergency Control Organisation

Each facility will ensure an ECO is formed to manage situations where emergency response procedures have been activated. Persons appointed to the ECO should:

- be physically capable of performing their duties;
- have leadership qualities and command authority;
- have maturity of judgment, good decision-making skills and be capable of remaining calm under pressure;
- be familiar with their future areas of responsibility;
- be available to undertake their appointed duties;
- have clear diction and be able to communicate with the majority of occupants and visitors; and
- be willing and able to undergo relevant training.

## 2.3 Staff Training

Staff will receive training in the management of incidents, appropriate to their role. Staff will also be involved in exercises to improve their knowledge of contingency plans in a simulated environment.

Staff training includes the following:

- **Duty Managers** – Command of Serious Incidents or Equivalent
- **Operational Staff** – Incident response training as part of the Induction Training Course and refresher training
- **Negotiators** – First Response Negotiators
- **Emergency Response Team** – Serco Emergency Response course

## 2.4 Contingency Plans

Each facility must develop a set of contingency plans to address a range of plausible contingencies, detailing the control arrangements, communications, and other processes and procedures required for Serco to maintain the safety and security of Detainees and other people who may be in the facility at the time of an Incident, other non-routine or emergency event.

Contingency plans must be communicated to staff, and tested during exercises. They must be reviewed annually and following any significant incident.

## 2.5 Contingency Schedule

An annual Contingency Schedule will be produced by the National Operations team, containing the minimum required contingency exercises. Facilities may add additional exercises to the schedule to meet local requirements. The schedule will contain a range of:

- Desk Top Exercises
- Live Exercises and Response Drills



- Multi-Agency Exercises

## 2.6 Contingency Exercises

Contingency exercises will be conducted to test the ability to manage possible incident scenarios and operational pressures. These exercises must take place quarterly. All relevant key staff should take an active role in practice exercises to ensure operational cohesion. Following an exercise the results and lessons learnt will be communicated amongst the facility management team and to the national operations team. This will form the basis for policy adjustments or operational procedure changes.

## 2.7 Annual Multi-Agency Exercise

Each facility will host an annual multi-agency, full day, contingency planning exercise, involving local emergency services, local authority emergency planning teams and the Department, where contingency plans for potential serious incidents will be tested.

## 2.8 Post-Exercise Reports

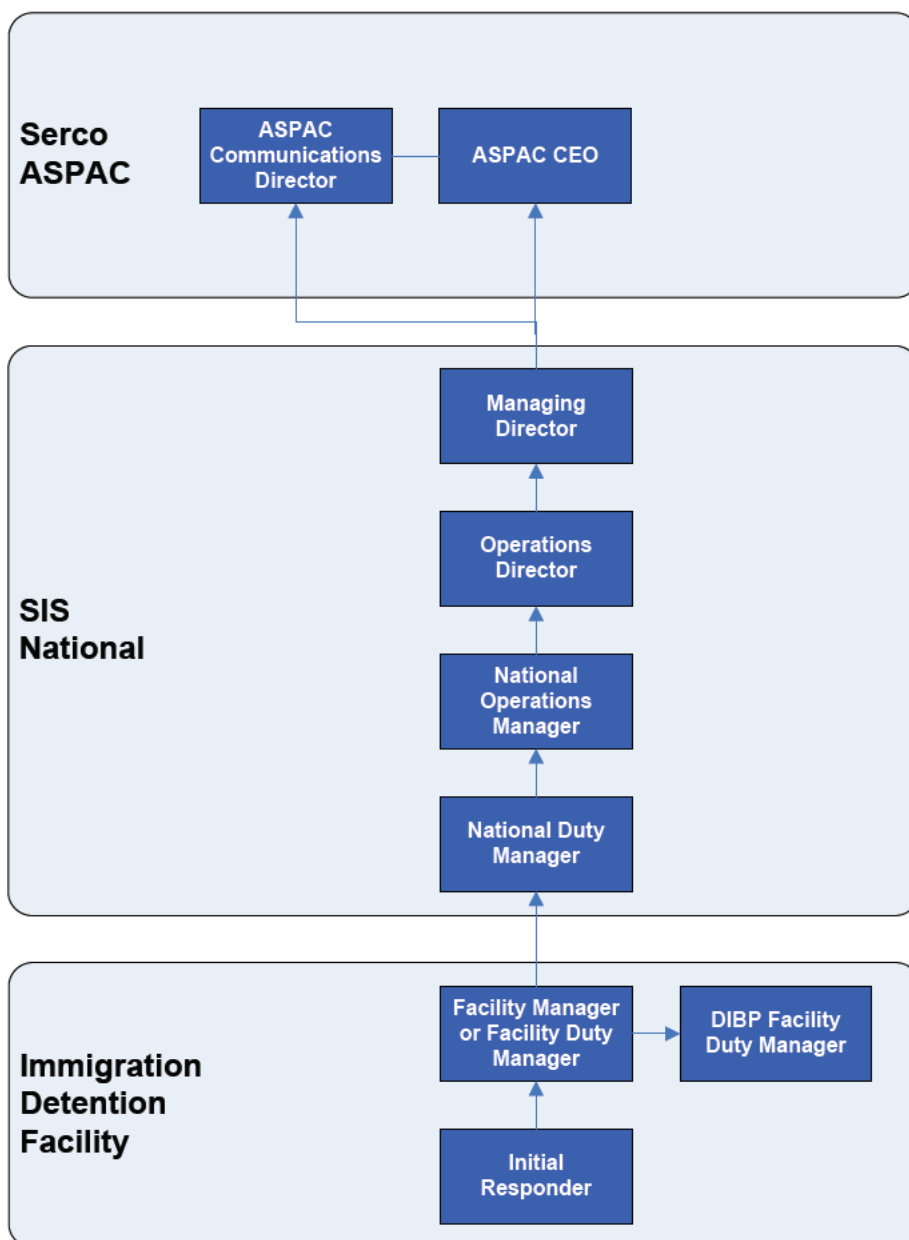
Each exercise will result in lessons that may need to be incorporated into emergency management plans and contingency plans. The Emergency Control Organisation should be debriefed as soon as possible after the end of an exercise to ensure it is fresh in people's minds.

At the conclusion of each exercise, a written report (forming part of the monthly Immigration Detention Facility Report) must be provided to DIBP management on the outcomes from the exercise including any proposals for continuous improvement.

### 3. Reporting

It is essential that incidents are escalated appropriately within Serco, and to external stakeholders. The Incident Reporting PPM (SIS0OPS0PPM-0019) details reporting requirements for all incidents. The key escalation paths are shown in the figure below, and described in the following sections.

**Figure 2 – Incident Escalation Paths**



*Note: the above shows incident reporting paths, rather than organisational hierarchy*

### 3.1 IDF to DIBP

All incidents must be reported to DIBP in accordance with the Contract and Incident Reporting PPM. Incidents are defined in three categories, critical, major and minor.

**Table 1 – Incident Category**

<b>Critical</b>	
Assault - Sexual	Hostage
Client < 18 taken without Consent	Industrial Action - No Labour
Death	Public Health Risk - Serious
Escape	Riot
<b>Major</b>	
Accident / Injury – Serious	Food Poisoning
Assault - Client < 18	Media - Unauthorised Presence
Assault - Serious	Notification by Welfare Authority
Contamination	Obs Room Client < 18 under 24 hours
Damage - Serious	Removal - Aborted
Demonstration - Offsite	Self Harm - Actual
Demonstration - Onsite	Self Harm - Threatened
Disturbance - Major	Serious Illness – Ambulance requested
Escape - Attempted	Strip Search
Escape - Tools in Possession	Threat – Bomb, Biological or Chemical
Failure - Power	Use of Fire Equipment / False Alarm
Failure - Security Systems	Use of Force
Failure - Sewage / Water	Use of Observation Room > 24 hrs
Food / Fluid Refusal	Visitor - HP Refused Access
Food / Fluid Refusal - Client < 18	Weapon - Client in Possession
<b>Minor</b>	
Abusive / Aggressive Behaviour	Industrial Action - Minor
Accident / Injury - Minor	Media - approach Staff / Clients
Assault - Minor	Property - Missing
Client Denied Information from File	Property - Missing Money
Complaint Regarding Incident	Public Health Risk - Minor
Contraband brought in by Visitor	Substance Abuse
Contraband found	Theft
Damage - Minor	Visitor - Client Denied
Disturbance - Minor	Visitor - Other Refused Access
Failure - IT Systems	

*Depending on the category of the incident, it must be reported within the following timeframes.*

**Table 2 – Incident Category Reporting Timeframes**

Category	Verbal Report (DIBP Duty Manager)		Written Report (Portal System)
Critical	Immediate	No later than 30 minutes on becoming aware of a Critical Incident occurring	Within 4 hours of the Department being verbally informed
Major	Immediate	No later than 1 hour on becoming aware of a Major incident occurring)	Within 6 hours of the Department being verbally informed
Minor	Not required		Within 24 hours

### 3.2 IDF to SIS National

Serious incidents must be reported to the Serco National Duty Manager in accordance with the Incident Reporting PPM. A written Incident Situation Report (SIS-OPS-FRM-0040) is to be completed and emailed to the situation report distribution list ([DL\\_DIBPIRSituationreports@serco-ap.com.au](mailto:DL_DIBPIRSituationreports@serco-ap.com.au)).

Serious incidents include:

- Escape from facility / escort
- Death in detention
- Serious injuries to staff, clients or visitors
- Lost time injuries (LTI)
- Fires
- Roof top protests
- Large scale protests / demonstrations / disturbance and incidents likely to escalate
- Media enquiries or anything likely to cause major negative media exposure

### 3.3 SIS National to Serco ASPAC

The process for reporting incidents to Serco ASPAC is contained in the ASPAC Incident Notification Process (ASPAC-INP-001-1014) and ASPAC Crisis Management Plan (ASPAC-CMP-1014 ASPAC). These processes are summarised below.

Notifications to Serco ASPAC are based on Serco Incident Reporting Scale (SIRS) levels 1 and 2 defined in Appendix A. Potential issues and incidents that must be escalated as defined in SIRS 1 and 2 include:

- Death of any person.
- Major disturbances that have resulted in major staff, client or public impacts and which have received or are likely to receive major media coverage.
- Escape of a client that would attract significant media attention or cause significant customer dissatisfaction.
- Injuries to any person that are life threatening or has resulted in permanent loss of substantial physical or neurological capacity

- Any employee injury that causes them to be away from work for more than 7 days.
- Serious staff assaults including which caused physical injury and/or have the potential to result in serious psychological harm and including all instances of a staff member being held against their will.
- Significant fire or explosion.
- Any fraud or corruption event.

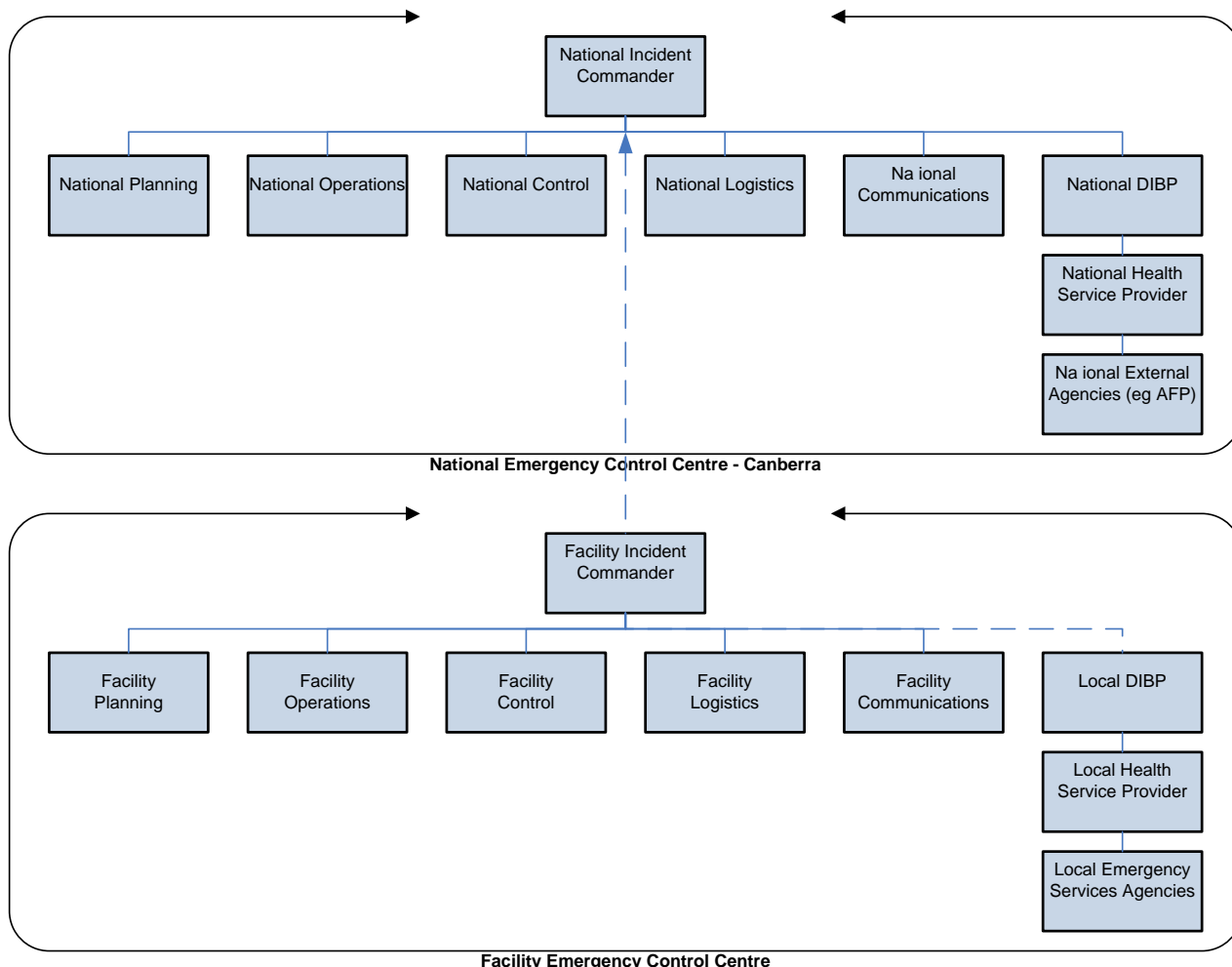
**Table 3 – ASPAC Notification Process**

Responsibility	Action
All	Incidents are escalated to the Operations Director and Managing Director as per the Incident Reporting PPM and duty manager processes.
Managing Director	Inform the Leadership Team as appropriate, nominating an appropriate lead director
Managing Director/ Ops Director/ RQC Director/ HSE Director	Determine Serco Incident Reporting System (SIRS) level (1 to 4), in Accordance with Annex A
Managing Director	SIRS 1 Incidents – Verbally report all incidents to ASPAC CEO SIRS 2 Incidents – Verbally report to ASPAC CEO based on judgement
ASPAC CEO	Determines whether to activate ASPAC Crisis Management Plan
Managing Director	Report to DIBP senior executives where required
Ops Director/ RQC Director HSE Director	SIRS 1/2 Incidents - Complete ASPAC Incident Notification Form as soon as possible after the incident (within 8 hours maximum). Email Incident Notification Form to: <ul style="list-style-type: none"> <li>• SIRS1 – <a href="mailto:DL_SIRS1incidents.Aspac@serco-ap.com.au">DL_SIRS1incidents.Aspac@serco-ap.com.au</a> – Territory CEO, Territory Communications Director, Territory Human Resources Director, ASPAC Assurance Director and Media Hotline (<a href="mailto:media@serco-ap.com.au">media@serco-ap.com.au</a>)</li> <li>• SIRS 2 – <a href="mailto:DL_SIRS2incidents.Aspac@serco-ap.com.au">DL_SIRS2incidents.Aspac@serco-ap.com.au</a> – ASPAC Assurance Director, Territory Communications Director, and Media Hotline (<a href="mailto:media@serco-ap.com.au">media@serco-ap.com.au</a>)</li> </ul> Flag as High Importance, and Subject line should include “SIRS X Incident Notification – Immigration”
Ops Director/ RQC Director HSE Director	SIRS 1/2/3/4 – Incident logged within Assure system within 24 hours

## 4. Management

Facility and National Emergency Control Centres (ECC) may be established in response to an incident. The structure of these ECC's is similar, with the Facility ECC reporting into the National ECC. These are described in the following sections.

Figure 3 – Emergency Control Centres



### 4.1 Facility Emergency Control Centre

Each facility will designate a primary on-site Emergency Control Centre. The Emergency Control Centre will be equipped with the necessary resources, documentation and communications equipment. The Emergency Control Centre does not need to be a dedicated area at all times, and may need to be moved offsite during some Incidents.

When the Emergency Control Centre is activated, a Serco senior manager will be appointed as the onsite Incident Commander. The Incident Commander has responsibility for managing the actual onsite incident. If the National ECC is opened, the onsite Incident Commander will report to the National Incident Commander. The Incident Commander will ensure the following functions are managed:

- **Control** – The local management of all activities necessary for the resolution of an incident.

- **Planning** – The collection and analysis of information directly from the incident, and developing tactical plans for the resolution of an incident. Ensuring these plans are coordinated with local DIBP, local emergency services and other onsite service providers.
- **External Communications** – External communications should be directed to the National Incident Commander.
- **Operations** – The tasking and application of resources to achieve resolution of an incident. This includes the allocation and employment of Emergency Response Team personnel currently onsite.
- **Logistics** – This will include identifying specialist and operational staff to be deployed to the incident location, transportation, and equipment and supplies. Requests for external staff and support must be provided to the National Incident Commander for action.

Each facility will ensure that regular Situation Reports and briefings are made regularly to:

- Serco Regional Manager
- National Emergency Control Centre (when open)
- DIBP Regional Manager

Other stakeholders may be included in the Facility ECC, including representatives from DIBP, the Health Services Provider, the Australian Federal Police, State police, local emergency services and other government agencies.

## 4.2 National Emergency Control Centre

The National Emergency Control Centre (ECC) will be utilised as a support centre to all Serco Immigration facilities during times of crises and/or emergency.

The National ECC will have a primary location in the SIS Canberra office, and have secondary off-site locations in each of the operational regions. The National ECC will be made available to Serco Management, DIBP, key stakeholders and Emergency Services as required.

The National ECC will be the point of contact for Serco ASPAC/AMEAA executive management, the DIBP National Office, and all media liaison.

When the National ECC is activated, a Serco senior manager will be appointed as the National Incident Commander. The National Incident Commander will assume overall responsibility for the incident, allowing the Facility Incident Commander to focus on the onsite activities. The National Incident Commander will ensure the following functions are managed:

- **Control** – The management of all activities necessary for the resolution of an incident. Developing the national command structure in response to an incident, and ensuring the local facility has an appropriate structure in place.
- **Planning** – The collection and analysis of information and the development of plans for the resolution of an incident. Ensuring these plans are coordinated with DIBP, emergency services and other service providers.
- **External Communications** – Liaising with Serco ASPAC/AMEAA Executives, DIBP National Office, and the media.
- **Operations** – The tasking and application of resources to achieve resolution of an incident. This includes providing additional deployments of Emergency Response Team or other operational staff from across the network.

- **Logistics** – This will include identifying specialist and operational staff to be deployed to the incident location, transportation, and equipment and supplies.

Other stakeholders may be included in the National ECC, including representatives from DIBP, the Health Services Provider, the Australian Federal Police, and other government agencies.

### 4.3 Incident Log

An Incident Management Log must be maintained in the Command Centre for all Incidents where the command and control area has been activated. The Incident Commander will nominate an individual to maintain the log at the beginning of an incident.

The log must maintain an accurate and comprehensive record of the date, time and location for all Incidents, the name(s) of people involved and any witnesses, key decisions, the actions taken, and instructions given.

### 4.4 Emergency Services

DIBP is responsible for negotiating Memorandums of Understanding (MoU) with State governments, for the engagement of emergency services.

### 4.5 Incident Handover

In the event that an incident escalates to a level that requires control to be transferred to the Australian Federal Police (AFP) or State police, the process contained in the Incident Handover PPM must be followed (SIS-OPS-PPM-0044).

## 5. Post-Incident

### 5.1 Debriefing

Debriefings must be conducted following any serious incident in accordance with the Debriefing PPM (SIS-OPS-PPM-0004).

The debriefing process not only provides an opportunity to identify & recognise what went well about the management of / response to an incident, but also to identify those areas / practices / processes which require development.

Staff involved in managing an incident such as those described above require the opportunity to address and issues they may have arising from the management of / response to the incident. Stress responses to intense situations are common and a debrief to address and deconstruct the events, followed by further support from the employee assistance programme (EAP), may assist in identifying and supporting those staff who require it.



## 5.2 Post-Incident Review

After a Critical or Major Incident has been resolved, post-incident review will be conducted by the Operations Manager and completed within 7 days, in accordance with the Incident Reporting PPM (SIS-OPS-PPM-0019). The purpose of this is to:

- determine the causes and contributing factors to the Incident (including relevant security intelligence)
- analyse and evaluate the actions taken in response to the Incident, including the conduct of all Serco staff members
- identify any gaps in processes, procedures and training requirements
- make any necessary changes to processes, procedures and training in accordance with the Quality Management System
- provide a written report that focuses on providing actionable information to the Department Regional Management within one week of the resolution of the Incident. This report must be submitted to the Department electronically.

## 5.3 Investigations

Following a significant incident, internal and external investigations may be conducted as required.

The Operations Director may initiate an internal investigation, in accordance with the Incident Reporting PPM (SIS-OPS-PPM-0019).

The Death in Detention PPM (SIS-OPS-PPM-0002) contains additional information regarding information that should be immediately collected following a death, to support future coronial inquiries.

## Appendix A – Serco Incident Reporting Scale (SIRS)

Level	Descriptor	Serco Group Criteria	Additional ASPAC Guidance
1	<b>Matter with Public Interest Implications / Accident</b>	<ul style="list-style-type: none"> <li>■ Accident/assault/situation resulting in the death or very serious injury to significant numbers of staff or sub-contractors and to any number of our customers or the general public.</li> <li>■ Incident potentially resulting from legal action or loss of business.</li> <li>■ Accident/hostile action/situation resulting in the severe or widespread damage to third party or public property and/or the environment affecting the general public.</li> <li>■ An information security breach impacting Serco or Client information where serious damage to Serco's interests may result in legal or regulatory penalties or loss of control.</li> <li>■ Actual or potential security breach where serious damage to the national interest may result.</li> <li>■ Financial discrepancy or breach of ethics in the relationship between Serco and our supplier(s).</li> <li>■ Any incident that would spark media interest and/or cause major concern in the city, to a major stakeholder or among the general public.</li> <li>■ Law enforcement investigation into possible criminal activity by member(s) of staff.</li> <li>■ <i>Where applicable</i> - Aviation SCE 1 (Safety Critical Event - Serco Aviation Safety Management System)</li> <li>■ <i>Where applicable</i> - SPAD Severity Code 4 – 8 (Signal Passed at Danger Severity Code - UK HM Rail Inspectorate / Network Rail)</li> <li>■ <i>Where applicable</i> - INES Level 2 - 7 nuclear events (International Nuclear Event Scale – International Atomic Energy Agency)</li> </ul>	<ul style="list-style-type: none"> <li>■ Death of any employee caused (or thought likely to have been caused) by a workplace safety incident or from self harm or commuting to and from work – including contractors, customers, detainees, prisoners, other persons for whom we had a duty of care</li> <li>■ An injury to any employee caused (or thought likely to have been caused) by a workplace safety incident, self harm or during commuting to and from work that is life threatening or has resulted in permanent loss of substantial physical or neurological capacity</li> <li>■ Major prison or custodial disturbances that have resulted in major staff, prisoner, detainee or public impacts and which have received or are likely to receive major media coverage.</li> <li>■ Escape of a prisoner.</li> <li>■ Any fraud or corruption event.</li> <li>■ Major loss of confidential and sensitive client information e.g. release of prisoner database or access to credit card details through GSR system.</li> <li>■ Train derailments.</li> <li>■ SPAD incidents with the potential to cause serious harm or which have caused serious harm.</li> <li>■ Toxic contaminant release.</li> <li>■ Significant fire or explosion.</li> <li>■ Major rail collisions</li> </ul>
2	<b>Matter Not Affecting General Public / Accident Or Significant Incident</b>	<ul style="list-style-type: none"> <li>■ Accident/assault/situation resulting in serious injury to small numbers of staff, sub-contractors or customers requiring hospital treatment.</li> <li>■ Accident/hostile action/situation causing significant damage to third party or public property and/or the</li> </ul>	<ul style="list-style-type: none"> <li>■ Any death that occurs to an employee or someone for whom we have a duty of care that does not fall within the SIRS 1 definition.</li> <li>■ Any employee injury that causes them to be away from</li> </ul>

Level	Descriptor	Serco Group Criteria	Additional ASPAC Guidance
		<p>environment limited to the site concerned and not immediately affecting the general public.</p> <ul style="list-style-type: none"> <li>■ Any suppliers used by Serco are involved in some form of malpractice with another client.</li> <li>■ “Near Miss” in which a further failure of safety systems could have led to accident conditions or a situation in which safety systems would have been unable to prevent an accident.</li> <li>■ A security breach affecting Serco information / property which would adversely affect our ability to function and would require large resources (time, money or staff) to recover from an incident.</li> <li>■ <i>Where applicable</i> - Aviation SCE 2.</li> <li>■ <i>Where applicable</i> - SPAD Severity Code 3.</li> <li>■ <i>Where applicable</i> - INES Level 2 nuclear event.</li> </ul>	<p>work for more than 7 days (<b>does not require incident notification</b>).</p> <ul style="list-style-type: none"> <li>■ Any employee injury caused (or thought likely to have been caused) by a workplace safety incident or from self harm or during commuting to and from work that requires hospitalisation (other than outpatients) or significant medical treatment e.g. overnight hospital stay, surgery, significant medical procedure) and occurs to an employee or someone for whom we have a duty of care.</li> <li>■ Needle stick injuries.</li> <li>■ Escape of a detainee that would attract significant media attention or cause significant customer dissatisfaction.</li> <li>■ Prison or custodial disturbances that do not fall under the definition of SIRS 1.</li> <li>■ SPAD incidents that did not have the potential to cause serious harm given where they occurred and the response.</li> <li>■ Serious staff assaults including which caused physical injury and/or have the potential to result in serious psychological harm.</li> <li>■ Any other incident that is notifiable to a Regulator and is not s SIRS 1 incident.</li> <li>■ Near misses that could have resulted in a serious incident based on judgement.</li> <li>■ Rail level crossing or pedestrian injury incidents.</li> <li>■ Other IT incidents as deemed appropriate by IT.</li> </ul>
3	Incident	<ul style="list-style-type: none"> <li>■ Incidents resulting in minor injuries to staff, subcontractors or customers requiring local first aid treatment.</li> </ul>	<ul style="list-style-type: none"> <li>■ A minor injury caused (or thought likely to have been caused) by a workplace safety</li> </ul>

Level	Descriptor	Serco Group Criteria	Additional ASPAC Guidance
		<ul style="list-style-type: none"> <li>■ Incidents with potentially significant safety considerations at issue despite the presence of other mitigating precautions as determined jointly by the contract and safety management.</li> <li>■ An information security breach affecting company information / property which would disrupt our ability to function and would require moderate resources (time, money or staff) to recover from the incident</li> <li>■ Environmental incidents with minor, localised impact.</li> <li>■ <i>Where applicable</i> - Aviation SCE 3.</li> <li>■ <i>Where applicable</i> - SPAD Severity Codes 1 and 2.</li> <li>■ <i>Where applicable</i> - INES Level 1 nuclear event.</li> </ul>	<p>incident or from self harm or during commuting to and from work that requires a visit to a GP, hospital outpatient treatment or first aid treatment.</p> <ul style="list-style-type: none"> <li>■ Escapes of detainees other than as indicated as a SIRS1 or 2.</li> </ul>
4	<b>Anomaly</b>	<ul style="list-style-type: none"> <li>■ Anomaly beyond the authorised safety/control regime. This may be due to equipment failure, human error or procedural inadequacies.</li> <li>■ An information security breach or weakness which has minimal impact to Serco and recovery can be scheduled to an appropriate time without negatively impacting the business function.</li> <li>■ Deficiency in internal safety or security controls identified as the result of routine audit.</li> <li>■ <i>Where applicable</i> - Aviation SCE 4.</li> <li>■ <i>Where applicable</i> - INES Level 0 nuclear event.</li> </ul>	<ul style="list-style-type: none"> <li>■ Any incidents that do not fall within the definitions provided above.</li> <li>■ Near misses</li> </ul>

# Incident Reporting

## Serco Immigration Services

### Document Control

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## Amendment Record

Version	Description	Issue Date
1.0	Original Document (IDC-OPS-PPM-0011)	
1.1	Format Update (IDC-OPS-PPM-0011)	
1.2	Update incidents to accurately reflect current Portal reporting requirements (IDC-OPS-PPM-0011)	07/06/2011
1.3	Update to reflect changed internal reporting requirements & consolidate IRH / ITA / IDC PPMs into a SIS-OPS document	15/09/2011
1.3.1	Include statement regarding appropriate use of language	18/01/2012
2.0	Significant changes to reportable incidents, with effect from 23 March 2013	05/03/2013
2.1	Insertion of omitted incident from 'Major' incidents – Accident / Injury Serious	25/03/2013
3.0	Update to reflect changes to reportable incidents, with effect from 23 November 2013. Changes to language	07/11/2013
4.0	Updated to reflect Facilities and Detainee Services Contract 2014. Incorporate Investigations and National Duty Manager information	19/02/2015
4.1	Updated to include section on mandatory reporting of child abuse or neglect	26/05/2015
4.2	Naming Terminology Change	16/06/2015

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## 1. Introduction

### 1.1 Policy

Incident reporting is a vital communication tool to ensure that the Department of Immigration and Border Protection (DIBP) and Serco National Executive are kept fully informed of specific activities at Serco managed Immigration Detention Facilities (IDFs).

The Incident Reporting processes will provide timely and accurate information in respect of all incidents to best enable the Incident Commander, Centre Manager and Duty Manager to make decisions, and if necessary, instigate further action.

The first priority in the management of incidents will be to preserve the safety and wellbeing of all Detainees, staff and visitors. All events will be contained and controlled and all risks mitigated.

Incidents will be dealt with and resolved by ensuring that sufficient trained staff are available, and that the incident is managed, where required, in accordance with the relevant approved Contingency Plan.

A key component of the management of incidents will be the reporting to DIBP by Serco personnel.

All language used in reports will be professional, appropriate, and indicative of the culture of decency and respect Serco aims to promote within all IDFs. Detainees will not be referred to by their boat numbers.

### 1.2 Related Documents

- Incident Management Protocols (SIS-OPS-PPM-0008)
- Incident Reporting How To Guide (SIS-OPS-DOC-0001)
- Debriefing PPM (SIS-OPS-PPM-0004)

### 1.3 Related Forms

- Incident Situation Report (SIS-OPS-FRM-0040)

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Facilities and Detainee Services Contract 2014



## 2. Procedures

### 2.1 Incident Categories

Under the FDS Contract, all incidents are categorised as:

- Critical
- Major
- Minor

The definition and specific reporting requirements of each incident category is covered in the following sections of this procedure.

Note: The incidents under each classification is correct at the time of release of this policy. While every effort is made to ensure this policy remains up to date, managers must ensure they check the Service Provider Portal (SPP) for current information relating to each incident classification.

### 2.2 Reporting Types

There are two distinct and separate types of incident reporting, that must often operate in parallel to meet the needs of different stakeholders:

- Internal reporting of the incident within Serco
- prescribed external reporting of the incident to DIBP via the Detention Operations Duty phone and Service Provider Portal (SPP)

These reporting requirements will be covered in the following sections.

### 3. Internal Reporting and National Duty Manager Procedures

**The internal reporting requirement does not remove the requirement for External Reporting to DIBP, the DIBP Regional Commander or other regulatory Authorities. Reporting to the Department is covered in section 4.**

It is a vital that internal Serco stakeholders are kept fully informed of significant incidents to ensure situational awareness and enable decision making.

#### 3.1 Internal Incident Reporting (RED FILED Incidents)

The designated senior on-site manager is to provide a verbal situation report (SITREP) to the Serco National Duty Manager (0417 322 772) no later than 30 minutes after the commencement of any of the following 'RED FILED' incidents:

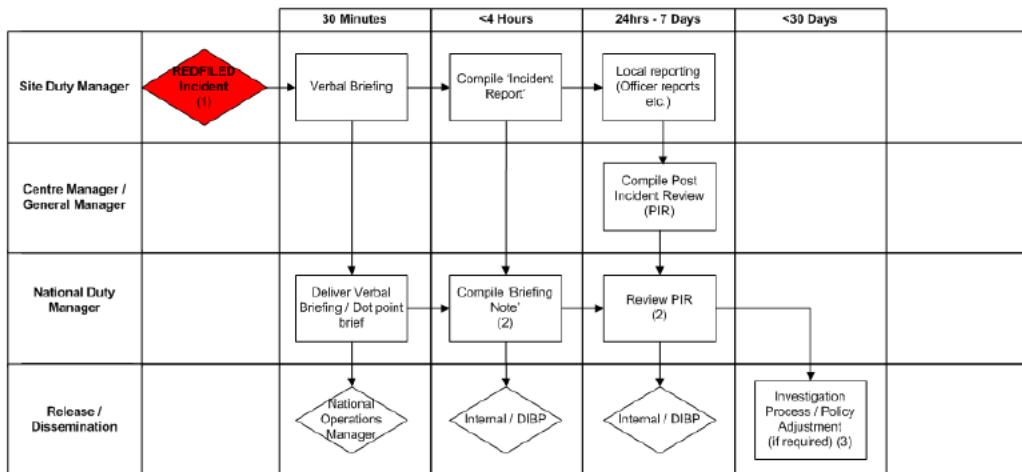
- Roof Top Protest
- Escape from facility/escort
- Death in detention
- Fire
- Injury (serious) to Detainees or visitors
- Lost time injuries
- Embarrassment / Enquiry by Media (onsite or interest)
- Demonstration, protests, disturbances and incidents likely to escalate.

Following verbal notification, the National Duty Manager should obtain all available information from the facility and immediately notify the National Operations Manager. The National Duty Manager should send a dot point brief to the '[DL\\_SISNatOps@serco-ap.com.au](mailto:DL_SISNatOps@serco-ap.com.au)' email distribution list, indicating:

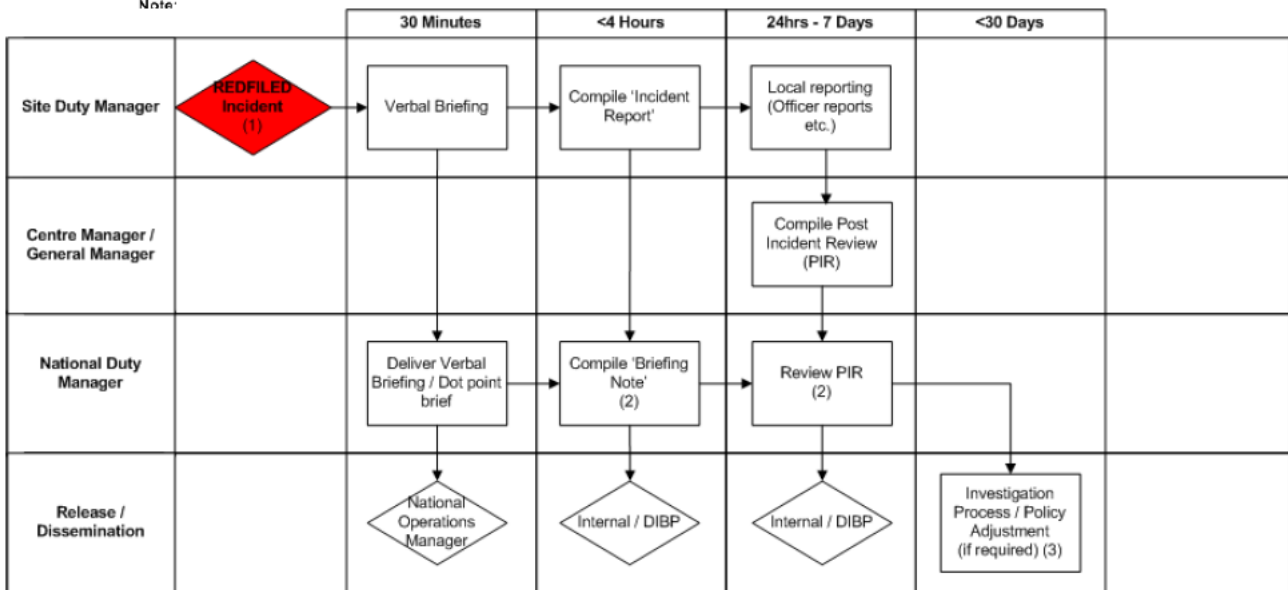
- What has happened
- Who was involved (Detainees, staff, visitors, others)
- When it occurred
- How it occurred (if available)
- Reporting already completed (local DIBP / Police / Fire brigade / Ambulance)
- Operational actions taken / proposed to be taken

This brief should be completed no longer than 45 minutes after initial verbal notification from the on-site manager. If information is not available the National Duty Manager should not wait but rather clearly state what information gaps exist and the expected timelines on obtaining the missing information.

Following the verbal SITREP a written Incident Situation Report should be prepared by the on-site senior manager and sent to the National Duty Manager ([DL\\_SISNatOps@serco-ap.com.au](mailto:DL_SISNatOps@serco-ap.com.au)) for approval prior to release ([DL\\_DIACIRSituationReports@serco-ap.com.au](mailto:DL_DIACIRSituationReports@serco-ap.com.au)). The subject line of the email should contain an indication of the type of incident.



Note:



**Note:**

1. A REDFILED incident includes: Roof Top Protest; Escape from Facility or Escort; Death; Fire; Injury (serious) to detainee, staff or visitor; LTI: Embarrassment / media enquiry; Demonstration, protest, disturbances and incident likely to escalate.
2. To be cleared by Director Operations or National Operations Manager (as delegated) prior to release / dissemination.
3. The investigation can be conducted by National Operations staff; other SIS staff or by an external service provider.

### 3.2 National Duty Manager Procedures

The National Duty Manager is responsible for the national oversight and reporting of all REDFILED incidents, unless directed otherwise. Specifically, the National Duty Manager will be responsible for providing operational support to the incident manager at facility level and managing internal and external reporting requirements. The National Duty Manager will also be responsible for the management and/or facilitation the National Emergency Control Centre (ECC) if established.

Post incident the National Duty Manager is responsible for managing the development of any post incident reporting – inclusive of any Briefing Notes requested by Serco or DIBP Management and the formal PIR. Specific requirements for post incident reporting will be on a case-by-case basis and as directed by the General Manager and/or National Operations Manager.

### 3.3 Duty Responsibilities

The National Duty Manager will operate on a 7-day rotational roster commencing every Wednesday at 0900 hrs. The National Operations Support Manager is responsible for managing the roster and allocation of staff to the roster. Each Wednesday an email will be sent out to all relevant stakeholders nominating the duty manager and listing other relevant contact details.

Should a person nominated be unavailable to carry out the duties it is their responsibility to negotiate a replacement and notify the National Operations Support Manager. This also applies if the duty manager is going to be un-contactable or unavailable for an extended period due to travel or meetings.

During the duty period, the National Duty Manager must:

- Ensure they are contactable by phone and email for the duration of their duty period.
- Ensure they are not under the influence of any substance that could impair their judgement.
- Are able to, within 2 hours of notification, manage the production of formal written briefs.
- Ensure they have access to the relevant templates and contact details available for use.
- As directed by either the Operations Director or National Operations Manager activate the National ECC.

## 4. DIBP Reporting

When an incident occurs, the witnessing Serco staff member (First on Scene) will report it immediately to the Control Room or designated area within the facility by sounding a duress alarm, by radio or by telephone.

Where necessary, the procedure in the appropriate Contingency Plan will be then be followed and the Duty Manager will be informed.

All available information will be forwarded to the Duty Manager as soon as possible.

The Duty Manager will ensure the Centre Manager and the DIBP Regional Commander, or DIBP on call staff member are informed (as appropriate according to incident classification; DIBP must only be verbally informed for Major and Critical incidents) and that the incident is recorded on the SPP.

If the DIBP Regional Commander / Local DIBP on call cannot be contacted, the Duty Manager or Centre Manager will report the incident to DIBP via the Detention Operations Duty phone number: 0478 301 652

When reporting an incident, a check will be made to ensure that the report contains, as a minimum, details of:

- Participants and witnesses
- Date/time
- Location
- Detailed description of events
- Incident category

- Actions taken
- Agencies notified

All appropriate incidents must be reported to the Police. Details of police action / attendance must be included in the written IR submitted on the SPP.

#### 4.1 Timeframes for Reporting Incidents to DIBP

**Table 1 - Incident Reporting Timeframes**

Category	Verbal Report	Written Report
Critical	Within 30 minutes of Serco becoming aware of the incident	Within 4 hours of verbally notifying DIBP
Major	Within 1 hour of Serco becoming aware of the incident	Within 6 hours of verbally notifying DIBP
Minor	Not required	Within 24 hours of Serco becoming aware of the incident

#### 4.2 Definition of a Critical Incident

A Critical incident is an incident that seriously affects the security or safety of the facility or where there is serious injury or threat to life.

Critical incidents include:

- Assault - sexual
- Client under the age of 18 taken without consent
- Death
- Escape
- Hostage
- Industrial action - no labour
- Public health risk - serious
- Riot

#### 4.3 Definition of a Major Incident

A major incident is an incident or event that seriously affects, or has the potential to threaten or harm the security and safety of the facility, the welfare of Detainees, or the success of Escorts/Transfer/Removal activities.

Major incidents include:

- Accident / Injury – Serious
- Assault - Detainee under the age of 18
- Assault - serious

- Contamination
- Damage - serious
- Demonstration - offsite
- Demonstration - onsite
- Disturbance - major
- Escape - attempted
- Escape - tools in possession
- Failure - power
- Failure - security systems
- Failure – sewerage / water
- Food / Fluid Refusal
- Food / Fluid Refusal by client under the age of 18
- Food poisoning
- Media - unauthorised presence
- Notification by welfare authority
- Observation room client under the age of 18 under 24 hours
- Removal - aborted
- Self harm - actual
- Self harm - threatened
- Serious illness – ambulance requested
- Strip search
- Threat - Bomb biological chemical
- Use of fire equipment / false alarm
- Use of force
- Use of observation room > 24 hrs
- Visitor - HP refused access
- Weapon - client in possession

#### 4.4 Definition of a Minor Incident

A Minor incident is an incident or event which affects, but to a lesser degree than a Major incident, the safety and security of the facility, the welfare of Detainees, or which threatens the success of Escorts/Transfer/Removal activities.

Minor incidents include:

- Abusive / aggressive behaviour
- Accident / Injury - Minor
- Assault - minor
- Client denied info from file
- Complaint re. Incident

## Bringing service to life

- Contraband brought in by visitor
- Contraband found
- Damage - minor
- Disturbance - minor
- Failure - IT systems
- Industrial action - minor
- Media - approach staff / client
- Property - missing
- Property - missing money
- Public health risk - minor
- Substance abuse
- Theft
- Visitor - Detainee denied
- Visitor - other refused access

### 4.5 Written Reports

The Serco staff member first discovering or observing the incident will complete and submit a report to the Centre Manager or Duty Manager. This will be done within a timeframe which allows for DIBP incident reporting requirements to be met.

The Duty Manager or Centre Manager will collect all other relevant documentation, such as Officers Reports and Health Services Manager Report (if applicable); and ensure that appropriate entries are made in the Service Provider Portal.

A written report must be provided following the post incident debrief, in accordance with contract requirement and instruction in the Debriefing PPM.

### 4.6 Follow Up Reporting

Given an incident may continue for an extended period of time, it is important that incident reporting continues for the duration of the incident. For critical and major incidents, updated reports will be submitted daily (at a minimum), or at the request of DIBP. All further escalation or de-escalation of the incident must be detailed in the IR.

### 4.7 Post Incident Reporting

Following the conclusion of an incident additional reporting is required. The scope and nature of the additional reporting will depend on contractual requirements and the nature of the incident. The types of post incident reporting include:

- **Post Incident Review (PIR).** A PIR is a contractual requirement for all major and critical incidents and 10% of minor incidents per month, and is used to review the incident, the response and capture any lessons learnt.

- **Formal Investigation.** A Formal Investigation is a review of an incident that is done under a terms of reference commissioned by the National Operations Team. Formal investigations are not mandatory and are commissioned when the incident is of a high profile or additional review is deemed to be required.

The PIR or Formal Investigation must be conducted with impartiality and reach evidence based conclusions. Recommendations from PIRs and Formal Investigations must be specific, measurable, achievable, relevant and time-based.

During post incident reporting and investigations all Serco staff must cooperate in line with the conditions of their employment. Failure to cooperate can result in disciplinary action.

All pertinent information must be made available, upon request, to the individual responsible for any investigation or PIR. While not exhaustive, at a minimum this information should include:

- **Relevant background information.** This includes any documentation relevant to the incident including incidents reports, briefing notes or other documentation prepared in relation to the incident such as individual management plans, risk assessments, and operational planning documentation.
- **Officer's reports.** Any person involved in the incident is required to submit a comprehensive and factual officer report. This is should be done prior to the end of the individuals shift. This also includes use of force reports.
- **Evidentiary material.** Evidentiary material includes any other information collected during the incident. This includes any images, video (handheld or closed-circuit television (CCTV) and materials seized during the incident. These items / media should be handled in accordance with the Preservation of Evidence PPM.

The CM is responsible for ensuring the timely collection and submission of documents. The CM is furthermore responsible for the quality control of any documentation and the adherence to any contractual timelines.

#### 4.7.1 Post Incident Review

The Operations Manager must ensure that Post Incident Review is completed for all Critical and Major incidents. It should also be completed for 10% of Minor incidents to assess the quality of incident reporting.

The Post Incident Review must:

- determine the causes and contributing factors to the Incident (including relevant Security Intelligence);
- analyse and evaluate the actions taken in response to the Incident, including the conduct of Service Provider Personnel;
- identify any gaps in processes, procedures and training requirements; and
- make appropriate recommendations and implement any necessary changes to processes, procedures and training.

Recommendations must be specific and measurable, with a due date, and responsibility for implementation recorded.

The Post Incident Review must be provided to the Department within seven days of the resolution of the Incident. Post Incident Reviews may be discussed with the Department at the Weekly Department Review or other forums.

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Once finalised, Post Incident Reviews should be attached to the Incident in the Portal system, unless otherwise directed by the Department. This can happen outside of the seven day time limit.

Following a REDFILED incident the responsible CM or GM should liaise with the National Operations Team to establish the PIR requirements. These requirements should be requested in writing and will include:

- Who will be responsible for preparing the document,
- The due dates,
- The format of the document, and
- The specific approval requirements.

Following preparation of the PIR the form is to be submitted for approval to the relevant GM and National Operations Manager. The PIR must not be circulated or released to any other stakeholder prior to this review and authorisation process occurring.

#### 4.7.2 Formal Investigations

Investigations are not a mandatory requirement and must only be initiated following consultation and direction from the Operations Director. Generally, an investigation will be directed from a national level subsequent to the PIR being released and will be commissioned to further evaluate the incident or occurrence.

Once an investigation requirement has been identified, the National Operations Manager will be responsible for the following:

- Registering the requirement and initiating the process.
- Preparing the terms of reference.
- Appointing / engaging the investigator.
- Managing any required travel and/or invoicing.
- Ensuring the investigation is properly conducted and completed.
- Ensure enough time and resources are allocated to the investigator.
- Take receipt of the report and all supporting documentation on completion.

## 5. Additional Requirements

### 5.1 Mandatory Reporting of Child Abuse or Neglect

All instances of suspected abuse or neglect of a minor are to be reported to the relevant State or Territory child protection agency, whether or not that State has a mandatory reporting requirement. Mandatory reporting is the term used to describe the legislative requirement imposed on selected classes of people to report suspected cases of child abuse and neglect, and where applicable, domestic violence, to government authorities. In all jurisdictions, the legislation protects the reporter's identity from disclosure. In addition, the legislation provides that as long as the report is made in good faith, the reporter cannot be liable in any civil, criminal or administrative proceeding.

Further details of mandatory reporting requirements are defined in the Working with Families and Minors PPM (SIS-OPS-PPM-0037), including roles and responsibilities of each stakeholder within the detention facilities.

Potential signs of abuse or neglect include:

- **physical:** fractures or broken bones, bruises, burns, sexually transmitted infections (often referred to as STIs), poor hygiene, constant hunger, actions of self-harm or food/fluid refusal (also referred to as voluntary starvation) whether initiated by the child of their own volition or coerced by others
- **behavioural:** caution or suspicion with parents or guardians, alcohol or drug misuse, inappropriate sexualised behaviour or social relationships, wearing excessive clothing to hide bruises, displaying little or no emotion when hurt, displaying minimal emotion or excessive friendliness toward strangers, significant changes in behaviour or attitude
- **disclosures:** by the child, or another person, that they or someone has been abused family and domestic violence: behaviour that results in physical, sexual and/or psychological damage, forced social isolation or behaviour that causes the victim to live in fear.

## Notification Requirements

Once Serco has been notified of, or reasonably suspects, potential abuse or neglect of a child, Serco staff must:

- notify Department staff
- ensure the relevant child protection agency and the police are notified
- ensure the risks to the child continue to be mitigated and the child (and the child's family) are in a safe environment
- monitor the child and the child's family for further incident
- raise an incident in the Portal and update as required, ensuring 'Alerted Agency' tab is completed with all relevant information provided
- update and highlight the child's individual management plan for review by the department and health service provider
- not undertake specialist casework with the alleged victim or family; such work must be the responsibility of the child protection agency or the health service provider.

## 5.2 Operational Updates

The Operations Analyst Coordinator or other member of the National Operations Group will prepare and release an Operational Update by 0900 detailing all incidents of note from the preceding 24 hours. This update will be distributed to the daily updates email distribution list ([DL\\_DIACDailyUpdates@serco-ap.com.au](mailto:DL_DIACDailyUpdates@serco-ap.com.au)).

## 5.3 Reporting Unprofessional Conduct

Unprofessional conduct, or an allegation of unprofessional conduct, can have significant and wide ranging implications. All SIS staff have a responsibility to report unprofessional conduct if they see it. This can be achieved in several ways:

- Reporting to a local manager with whom the staff member feels comfortable
- Reporting directly to SIS National Office

- Using the Speak Up facility explained below

It is expected that most issues will be managed at the local level by HR and local management, however both SIS and Serco Group acknowledge that this is not always appropriate or feasible.

Some issues, if raised locally, must be directly escalated to the SIS national office, to the National Operations Manager or to the Risk, Quality and Compliance Director. Any actual, alleged or suspected cases of illegal activity by staff should be immediately escalated in this way. These may be notified through line management channels or directly to these persons however the obligation is that as soon as staff become aware of such matters, these are escalated immediately. Examples of this would include, but not be limited to, physical or sexual assault, fraud, or forgery.

If a staff member becomes aware of such an issue but is not comfortable to raise the issue locally, they may contact the National Operations Manager or the Risk, Quality and Compliance Director at SIS National Office directly.

Serco must also report all behaviour that breaches the DIBP Code of Conduct and all allegations and/or possible incidents of criminal activity, corruption, dishonesty, unlawful conduct and conflicts of interest to the Department.

#### 5.4 Staff and Sensitive Incidents

Incidents that are not covered by the incident reporting guidelines, but involve staff or are sensitive in nature, should be reported directly to the Serco National Duty Manager. The Serco National Duty Manager will advise on a case by case basis on any further reporting requirements. These incidents include:

- Alleged sexual assault of staff or detainees
- Alleged assault on detainee under 18 years
- Alleged assault of detainees by staff or other non-detainees
- Serious breaches of the Code of Conduct by staff involving detainees

Where these incidents involve alleged illegal activity by staff, the National Operations Manager and / or RQC Director must also be informed immediately by the National Duty Manager.

#### 5.5 Speak Up

If a staff member becomes aware of an issue such as those described above, or the list below, but feels the issue should be reported outside of SIS, they may use the Speak Up facility by the following methods:

- calling the hotline - Australia 1-800-267-057
- reporting online at [www.tnwinc.com/serco](http://www.tnwinc.com/serco)
- emailing [ethicshotline@serco.com](mailto:ethicshotline@serco.com), or
- writing to: Company Secretary, Serco Group plc, Palm Court, 4 Heron Square, Richmond-upon-Thames, Surrey TW9 1EW, UK.

As long as staff are acting in good faith, they will not be disciplined for asking questions or reporting concerns. Serco absolutely prohibits anyone from retaliating against staff for doing so.

Examples of issues that may be raised through the Speak Up facility:

- Failure to comply with a legal obligation or statutes
- Criminal activity
- Non-compliance with company policies
- Violations of our code of conduct
- Behaviour inconsistent with our governing principles
- Improper conduct or unethical behaviour
- Harassment, violence or bullying
- Abuse of human rights
- Drug or alcohol abuse
- Giving or receiving of bribes or other improper advantages
- Conflicts of interest
- Insider trading
- Competition or anti-trust violations
- Dangers to health and safety or the environment
- Financial malpractice or impropriety or fraud
- Misuse of confidential information or reporting
- Improper use of company assets
- Improper use of social media
- Attempts to conceal any of these.

## 5.6 Workplace Health & Safety (WH&S) Reporting

All injuries and accidents to staff, Detainees or any other person on site will be reported to the Serco WH&S representative onsite, who will ensure all further appropriate reporting is conducted.

## 5.7 Medical Reports

All information regarding an incident affecting a Detainee's mental or physical health will be provided to a Health Services representative, who will be responsible for submitting a health report to DIBP.

## 5.8 Review of Centre Documentation

Following an incident a number of routine documentation must be reviewed and updated to ensure compliance. These reviews include:

- **Facility Security Services Plan.** The facility security services plan is a dynamic document and must be continually updated to ensure it appropriately captures risk assessments and management plans.
- **Contingency Planning documentation.** All relevant contingency planning documents should be reviewed to ensure any lessons learnt are captured.

- **Risk Assessment (RA) documentation.** Following an incident RAs and risk mitigation plans for both detainees and the site should be reviewed and updated.
- **Critical Incident Database.** The Critical incident database is maintained by the National Operations Team (Security Risk Manager) and incident outcomes and recommendations should be reviewed and continually monitored following an incident.

# Individual Management Plan

## Serco Immigration Services

### Document Control

<b>Document:</b>	Individual Management Plan
<b>Type:</b>	Policy & Procedure Manual
<b>Reference No:</b>	SIS-OPS-PPM-0020
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1.1.1	Combine IDC/IRH/ITA PPM	04/02/2011
2.0	Review and Format Update	09/10/2012
2.0.1	Minor language amendments to reflect changed terminology	12/03/2014
3.0	Update to reflect Facility and Detainee Services Contract 2014	19/02/2015

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# 1. Introduction

## 1.1 Context

The care and well-being of Detainees is the central tenet of Serco's approach to delivering services in Immigration facilities.

Serco polices and services will reflect the commitment to decency and respect for all Detainees.

A key component of Serco Immigration Services (SIS) approach to decency is through the Healthy Centre Framework, which focuses on:

- Safety: Detainees held in safety with due regard to the insecurity of their position
- Respect: Detainees treated with respect for their human dignity and the circumstances surrounding their detention
- Purposeful engagement: Detainees are able to access a range of Programs and Activities which as far as possible reflects their individual needs, providing meaning and purpose to their use of time whilst in detention
- Preparation for discharge/transfer or removal: Detainees supported to develop realistic expectations concerning independent living and citizenship values. Detainees supported to maintain contacts with family and friends in preparedness for discharge, transfer or removal.

## 1.2 Policy

The Individual Management Plan (IMP) is central to the individual management of each Detainee. It is a valuable tool for building relationships with Detainees and is the mechanism for the capture of all information relevant to the welfare and wellbeing of all Detainees and enables Serco to provide support more effectively.

Serco will treat all Detainees as individuals, recognising that the different needs of Detainees will require a different response in each case. Serco will respect and value the cultural and religious requirements of Detainees from different nationalities and ethnic backgrounds.

## 1.3 Related Documents

- Detention Services Manual (DSM)
- Personal Officers Scheme PPM (SIS-OPS-PPM-0011)
- Behaviour Management PPM (SIS-OPS-PPM-0006)

## 1.4 Related Forms

- Individual Management Plan (SIS-OPS-FRM-0030)
- Behaviour Management Plan (SIS-OPS-PPM-0012)

## 1.5 Legislative and Standards Framework

- Migration Act 1958
- The Universal Declaration of Human Rights

## 1.6 Roles and Responsibilities

**Table 1 – Roles and Responsibilities**

Role	Responsibility
Centre Manager	Ensuring a system is in place for the timely development and review of IMPs.
Centre Manager (or delegate)	The implementation and operational management of the IMP process including assigning Personal Officers
Personal Officers	The development of the initial IMP, participating in IMP reviews and recording Progress Notes
Welfare and Engagement Manager	Must approve any change to the process as outlined in this policy or the related forms. This is to ensure a consistent approach across all detention facilities

## 2. Procedure

The IMP along with the supporting process of IMP reviews, IMP Progress Notes and regular contact with assigned Personal Officers provides the framework for managing the welfare and wellbeing of Detainees. This framework of interaction provides opportunity for communication, engagement in activities and promotes individual responsibility.

This Detainee engagement approach contributes to the goals of DIBP, IHMS and Serco in taking a holistic approach to Detainee wellbeing.

### 2.1 Timescales

**Table 2 – Event Timescales**

Timescale	Event
Within 48 hours of commencement of reception processes	Identify welfare requirements
Within 10 calendar days of Detainee arrival at the facility	Implement IMP in conjunction with other service providers and the Department.
At least every 14 calendar days	Personal Officer meets with Detainee to review and discuss the Detainee's IMP and record such discussions (including any recommendations to amend the IMP) on a Detainee IMP Progress Note, and upload to Portal within 24 hours of the meeting
Within 24 hours of PO meeting	Upload IMP Progress Note to Portal
Monthly (or more frequently, if determined by the Department)	Participate in Individual Management and Detainee Placement Committee Meeting
Within 24 hours of the Individual Management and Detainee Placement Committee meeting	Upload amended IMPs to Portal
Monthly	Update all IMPs and upload to Portal
Following any trigger event as determined at 2.4 below	Update IMP and upload to Portal
In accordance with agreed timeframes	Action all required action items in IMP

## 2.2 DIBP Case Management Engagement

DIBP Case Managers and Serco staff responsible for the development and monitoring of the IMP should work collaboratively in the best interest of the Detainee. Successful collaboration should ensure ease of information flow, shared regularly in a timely and professional manner. This should avoid Detainees having to repeat sensitive or distressing issues or information to numerous individuals on different occasions. Detainees should be reassured that sensitive information will be communicated to those who are required to be notified in a confidential manner and, that any necessary adjustments to their IMP will be discussed with them and formally communicated to them in a timely manner.

## 2.3 Individual Management Plan (IMP)

The Facility and Detainee Services Contract states that Detainee welfare requirements must be identified within 48 hours of commencement of reception into a facility, and an IMP is to be developed for every Detainee within 10 calendar days of a Detainee's arrival at a facility.

- **Adult IMP** - The IMP includes input from the Detainee and others who interact and have knowledge of the Detainee including the Personal Officer, IHMS, DIBP and Serco officers. This is a dynamic document subject to review to reflect the changing needs and circumstances of the Detainee.
- **Child IMP** - Serco aims to create a child safe and family friendly environment by minimising the impact of detention on parenting ability by encouraging and supporting opportunities for exercising parental responsibility and decision making. The parent must be included in the development of the IMP for their dependent children 17 years and younger. This must be noted in the IMP.
- **Unaccompanied minors IMP** – Serco will ensure that the SRSS provider has input into the IMP of all unaccompanied minors. Unaccompanied minors are to be consulted about their needs and all opportunity is to be taken to ensure they are active in decision making in regards to their care and wellbeing. The extent of involvement will depend upon their age and maturity.

As a minimum, the following information must be collected and recorded in the IMP in order for it to identify and tailor the ongoing care and services required for each Detainee:

- Identification details including name, sex, date of birth, nationality
- Assigned Personal Officer
- Security Risk Assessment
- Any matters considered material to the welfare of the Detainee. This includes but is not limited to;
  - Family within the Facility
  - Languages spoken
  - Religious, Spiritual and Cultural needs
  - Current personal situation, community support network
  - Dietary requirements
  - Presenting physical or mental health concerns including disability or impairment impacting on their ability to participate in programs or activities
- Any program and activity needs or requests. This will include preferred
  - Interests or hobbies

- Education interests including ESL
- Sporting interests
- Identification of existing education level, employment history and qualifications
- Any required prevention strategies for those at risk

## 2.4 IMP Review

Serco, having collated information from the Personal Officer for each Detainee, will participate in a monthly (or more frequently, as directed by the Department) Individual Management and Placement Review Committee meeting.

The IMP identifies and tailors the ongoing care and services required for each Detainee. This case management model of Detainee support assumes a collaborative approach to service delivery that meets the individual needs of the Detainee. This approach is Detainee driven rather than organisationally driven.

To facilitate the review process, the Personal Officer is to meet with their assigned Detainee at least every 14 calendar days to review any action against the IMP. The role of the Personal Officer is to keep the Detainee informed of any matters relevant to them, be alert to changes in the Detainees demeanour, attitude or behaviour and to be the first line of contact for the Detainee should problems arise.

- The Personal Officer is to record a minimum of one quality IMP Progress Note every 14 days in the Detainees file.
- The IMP Progress Notes and the IMP will be used as the basis for developing further actions. This may include recommendations for an increase in Detainee engagement, implementing a Behaviour Management Plan (BMP) or a referral for Keep SAFE/ Psychological Support Program (PSP).
- New information and updates to IMPs arising from the review are to be recorded on DIBP Portal within 24 hours of the meeting.

All IMPs must be reviewed and updated every month, regardless of whether the Detainee has been escalated to the Individual Management and Placement Review Committee. This includes updating all IMPs in Portal, and addressing any outstanding actions in accordance with stipulated timeframes.

A Detainee's IMP must be reviewed and updated on the occurrence of any of the following:

- Any Critical or Major Incident involving the Detainee
- The creation of a Behaviour Management Plan
- A significant health event
- A change in the Security Risk Assessment of the Detainee
- A significant Immigration pathway event such as the Detainee being notified that they are to be removed.
- The placement of the Detainee on any psychological support programme
- Any other event identified as significant by SIS, and other service provider or the Department.

## 2.5 IMP and IMP Progress Notes

The IMP is the foundation document in a comprehensive approach to supporting Detainees through their immigration pathway. The Progress Notes supplement the IMP by providing a record of Detainee interaction. They are a written record of interactions, observations and actions relating to a particular Detainee. This information assists in the decision making and coordination of services in managing the immigration outcomes for Detainees.

Personal Officers are to record a detailed Progress Note at a minimum of one Progress Note every 14 calendar days. The entry should include information that is relevant, timely and accurate.

If a Detainee does not want to engage or interact, Personal Officers should respect their position and make an entry to that effect, checking with other staff if the Detainee is engaging generally around the centre, eg attending P&A. This information is to be included in the POS entry.

## 2.6 IMP and Programs and Activities (P&A)

The initial IMP collates information in relation to the Detainee skills, interest and hobbies, educational and vocational skills and experience, sporting interests and cultural and religious practices that the Detainee wishes to maintain while in detention.

This information is also used for the Programs and Activities teams to develop a monthly program schedule that is responsive to the needs, requests and interests of the Detainees.

The Personal Officer is to encourage Detainee participation in activities and advise Detainees of their avenues to provide feedback and comment about the P&A service through the Detainee Consultative Committee meetings, the Detainee complaints process and the Detainee requests process.

Non participation in P&A may constitute a change in the Detainees' circumstances or behaviour. The Personal Officer is to clarify the reasons for this and note this as a POS entry in the Detainee file and on the IMP review update.

## 2.7 IMP and Behaviour Management Plan (BMP)

All Serco staff are to accurately record instances where Detainees behave in an anti-social manner, conduct illegal activities or where the behaviour is such that it threatens or undermines the good order of the facility.

This behaviour must be reported to DIBP and IHMS and may result in the development of a Behaviour Management Plan. In conjunction with DIBP and IHMS, a BMP based on incentives and/or removal of privileges is to be developed within 48 hours of the Detainee displaying anti-social behaviour that has already been challenged.

The BMP will be the primary plan for the duration of monitoring Detainee behaviour and will use the IMP and POS entries as a reference source.

## 2.8 IMP and Keep SAFE/Psychological Support Program (PSP)

The Keep SAFE/Psychological Support Program is the over-arching approach to the prevention of self harm for Detainees in immigration detention.

Where there are concerns about a Detainees mental health status, this should be referred to IHMS as a matter of priority. IHMS will then decide the best course of intervention and this may result in the decision to place a Detainee on on an elevated level of PSP that is referred to as Supportive Monitoring and Engagement (SME).

The IMP and POS entries will be used as a reference in developing any intervention strategy.

Clear arrangements must be in place to ensure that the Detainee continues to be monitored in a safe and supportive environment.

# Intelligence Management

## Serco Immigration Services

### Document Control

<b>Document:</b>	Intelligence Management
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2.0	Updated to reflect Facilities and Detainee Services Contract 2014	3/6/2015



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# 1. Introduction

## 1.1 Policy

Provision of timely and accurate intelligence is a fundamental input into the decision making process. Decision makers need well balanced, reasoned argument and assessment with which to base operational decisions. Intelligence will be utilised in a manner to assist with predictive analysis and the identification of risks and the subsequent proactive management of those risks. Confidentiality and privacy will be assured in the collection and management of intelligence gathering.

## 1.2 Related Documents

- Risk Management Plan (SIS-BUS-DOC-0010)
- DIBP Risk Management Toolkit
- Security Risk Assessment Tool

## 1.3 Related Forms

- Security Information Report (SIS-OPS-FRM-0053)
- Intelligence Report (SIS-OPS-FRM-0058)
- Intelligence Summary (SIS-OPS-FRM-0060)
- Supplementary Intelligence Report (SIS-OPS-FRM-0059)
- Security Risk and Threat Assessment (SIS-OPS-FRM-0062)
- Northern Territory Joint Intelligence Group (SIS-OPS-FRM-0063)
- Christmas Island Joint Intelligence Group (SIS-OPS-FRM-0064)
- Induction Risk Assessment (SIS-OPS-FRM-0077)

## 1.4 Legislative and Standards Framework

- ISO 31000–2009: Risk Management Standard
- HB167:2006: Security Risk Management
- AS/NZS ISO 5050-2010 Business Continuity Management
- Protective Security Policy Framework (PSPF)
- ASIO T4 Threat Assessment Methodology
- Australian Intelligence Community (AIC) standards

## 2. Intelligence Procedure

### 2.1 Security Information Reports

A Security Information Report (SIR) must be completed immediately after staff obtain or observe any information relating to the effective management of detainees or any information that may affect the safety, security and good order of the facility. The SIR will be completed and forwarded immediately to the Intelligence Analyst for evaluation, then to the Centre Manager. If staff are concerned about reporting information, SIRs may be completed anonymously. Staff are encouraged to carry a notebook in which to make contemporaneous notes to aid SIR production at a later stage. Generally, when filling out the SIR, staff are further encouraged to include the 'who, what, when, where, why and how' details.

For immediate security concerns or intelligence reports, the Intelligence Analyst or Serco 24-hour Facility Duty Manager can be contacted.

Where possible, the analyst is to follow up with the officer who submits the SIR in order to further contextualise the SIR and to glean further information that may not be contained in the report.

The SIR will be the main source of security-related information for the Facility. All security information, however received, will be written up as an SIR. The type of information may include:

- Unusual associations
- Unusual observations, whether in or outside the Facility
- Conversations with Detainees
- Overheard comments between Detainees
- Unusual occurrences on an escort
- Hoarding of cafeteria goods or clothing
- A Detainees actions that are out of character
- Any other perceived security related matters

All SIRs will be numbered serially within each year by the Intelligence Analyst, as per the Intel Reporting Guidelines and Standards.

The Intelligence Analyst will evaluate the information as per section 2.2 below, and consider both whether an immediate response is needed, and whether there are any wider implications.

All information provided will be logged on the intelligence database to assist in identifying emerging risks and trends in reporting. The SIR should then be filed in chronological sequence for future reference.

The originator of the SIR will have it acknowledged formally by the Intelligence Analyst. This ethos will ensure future continuity of staff information.

## 2.2 Intelligence Database

The Intelligence Analyst should enter information on the database as it comes to light. Information received will be evaluated and graded as follows, with the source graded separately from the information (the Admiralty Grading System):

Reliability of Source:

- A Completely Reliable
- B Usually Reliable
- C Fairly Reliable
- D Not usually reliable
- E Unreliable
- F Reliability cannot be judged

Accuracy of the Information:

- 1 Confirmed by other sources
- 2 Probably true
- 3 Possibly true
- 4 Doubtful
- 5 Improbable
- 6 Truth cannot be judged

After evaluation, the information should be regarded and recorded as, for example, B2 or D4. The purpose of the evaluation grades is to:

- indicate the quality of the information relative to other pieces of information
- indicate its quality to others who may have access to it in the future
- protect a source.

## 2.3 Intelligence Reports

The Intelligence Report (INTREP) is the primary instrument with which Serco provides formal intelligence advice to not only the Serco Senior Leadership Team but also to the Department. Therefore, it is to be accurate, concise and disseminated in a timely manner. Following the receipt of one or more SIRs on the same or related information, the Intelligence Analyst, in consultation with the relevant managers, will draft an Intelligence Report for the dissemination of information of intelligence value. This report is to be sent through the Centre Manager or Regional Intelligence Manager, prior to sending to National Intelligence staff for quality assessment before release. Where the information is deemed to be 'time sensitive', the analyst is to request authority from the National intelligence staff to 'locally release' the document to centre management staff.

Intelligence reports, along with all other intelligence products, are to be created according to and consistent with Serco Intelligence reporting Guidelines using the nationally approved template.

## 2.4 Likely Risk Records

The Intelligence Analyst will collate the SIR information to ascertain any prevailing trends or risk identification.

A range of likely risk records on specific subjects or categories will be created in the Intelligence Database as the need arises. Examples include:

- Possibility of weapons
- Assaults
- Unrest
- Bullying
- Drugs
- Attempts to escape
- Any other identifiable risk-related situations

Any information collected will be collated and assessed for likely connection with any of these situations.

The sought outcome is to join multiple pieces of information together to see if any prevailing situations or risks can be identified.

Central in the collation of intelligence is the “established” presence of a risk. Caution must always exist to not be misled by pieces of information which suggest scenarios that simply do not exist.

Any situations resulting from the collation of intelligence must be assessed, to ensure that the perceived situation is real and not a misrepresentation of available information.

## 2.5 Department Access to Intelligence

Facilities will have in place processes to ensure any Department of Immigration and Border Protection (DIBP) request for access to the Intelligence Database is facilitated as soon as possible. While SIS collates and maintains the Database, DIBP has free access to the information included therein. The Centre Manager will ensure that all trends and reports generated by the Intelligence personnel will be provided to the DIBP Regional Manager. In order to facilitate an open and free exchange of information, the Intelligence Analyst is to establish and maintain a good working relationship and ongoing dialogue with the DIBP Security Liaison Officer (SLO). As such, the weekly centre Security/Stability rating is to be in consultation with the DIBP SLO. Serco will convene a forum of all stakeholders to discuss intelligence matters if DIBP requests such action.

## 2.6 Security Briefings

When intelligence is of a time critical nature, for example imminent threat of escape, the analyst is to verbally brief the Centre Manager and other relevant staff of the information and their assessment as soon as practicable, before forwarding the information to the National Office. The Intelligence Analyst will ensure the Centre Manager and Senior Operations Managers are kept up to date with all intelligence, reports and identified risks. This will ensure close monitoring, and allow for remedial or preventative measures to be taken.

The Intelligence Analyst will ensure that the Serco management team is briefed on a daily basis, providing information on current and immediate security concerns.

When compiling the brief, if there is little to no information on current and emerging security concerns, this information is to be highlighted to the management team. Areas of security effectiveness and trend analysis are to be identified with a view to replication in others areas of the centre.

## 2.7 Staff Handovers

Where staff report security concerns via SIR, they should consider including the information in the occurrence book for the relevant area, in order that effective shift handovers can occur. This will allow all staff to have up-to-date security information regarding Detainees or situations within their area and will facilitate consistency in response to the threat.

The Intelligence Analyst will ensure that where intelligence exists about a detainee, staff involved in the management of that detainee are briefed where appropriate, and that the occurrence book for the applicable area is updated to reflect the information.

Serco will provide standard induction briefings for DIBP and other stakeholder staff to ensure they understand the requirements for information to be passed to Serco intelligence analysts and how that will be utilised within the intelligence systems. Serco will also provide posters and other material to be placed in areas away from detainees to remind and educate all staff on their obligations to report information that may assist the maintenance of security and good order.

Serco will seek to establish a system whereby all stakeholder staff will be able to report information for action by Serco intelligence analysts. This system will take the form of a security hotline, email address or drop box, depending on the suitability for each site.

## 2.8 Staff Training

Staff conducting the intelligence analyst functions at a Facility will be required to have appropriate training and experience, to enable them to collate and analyse all information received.

All other operational staff will receive training during the Induction Training Course and refresher training in the overall mechanism of the intelligence system, including issues to be aware of and how to report intelligence.

# International Removals

## Serco Immigration Services

### Document Control

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# 1. Introduction

## 1.1 Policy

Serco Immigration Services (SIS) will have in place processes and procedures to effectively facilitate the escorted removal of a Detainee to a location outside of Australia. All Detainees will be treated with dignity and respect, in accordance with their own culture, at all times. It is acknowledged that a removal may cause the individual significant distress. Escorting officers will be mindful of this and act with compassion at all times, while maintaining the integrity of the escorting task.

International Removal Escorts encompass the provision of Escorts for Detainees and the Property of Detainees on board an international flight while they are being Removed from Australia. International Removal Escort Services also include ensuring Detainees are cleared by immigration control or otherwise received by approved officials in the country of destination, and ensuring that documentation associated with the Removal is completed.

In the event of the removal not proceeding as planned, the Escort Team Leader will contact the Transport and Escort (T&E) Manager for further guidance, who will then notify the National Duty Manager.

## 1.2 Related Documents

- Reception, Induction, Transfer and Discharge PPM (SIS-OPS-PPM-0029)
- Operational Safety (SIS-OPS-PPM-0035)

## 1.3 Related Forms

- Operational Departure Plan (DIBP Document)
- Escort Removal Report (DIBP Document)
- International Escort Operational Order (SIS-TE-FRM-0003)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- AS/NZS ISO 9001:2008 – Quality Management Systems - Requirements

## 2. Planning

### 2.1 Request for Service

No international escort task will be undertaken without the receipt of a Request for Service (RFS) from Department of Immigration and Border Protection (DIBP). The RFS is a document received through the Service Provider Portal and is provided by DIBP to allow the T&E task to occur.

Only where there is a sensitive operation where there is a risk of information being leaked, will Serco accept an RFS outside of Portal. This must be in writing and accepted by the Centre Manager or National T&E.

The RFS will stipulate as a minimum, the date of the removal, the identity of the Detainee, the location of the Detainee and the destination of the removal. The RFS should contain information relating to any known risk factors associated with the task or the Detainee, as they are available to DIBP at that point. When an RFS has been received locally, the National Operations Support Coordinator is to be notified immediately at [escort.intl@serco-ap.com.au](mailto:escort.intl@serco-ap.com.au).

The Operations Support Coordinator will liaise with the department and local T&E Managers to request staff to facilitate the escort and the development of the Escort Operational Order (EOO).

The National Planning Team will review the RFS from DIBP, accept the RFS through Portal and provide a preliminary risk assessment.

### 2.2 Risk Assessment

The National Planning Manager will review an RFS and Detainee Security Risk Assessment Tool (SRAT) to conduct a risk assessment (RA). During the Risk Assessment, where a removal has been identified as an elevated risk level or high profile, the National Security Risk and Intelligence Manager will provide further assessment and advice. This may include the development of a Security Threat and Risk Assessment (STRA).

### 2.3 Removals Coordination

All escorted removals will be coordinated through National Operations. When required a tactical plan will be developed which will become the overarching document that supports the further development of the EOO.

National Operations will request staff for removal tasks from the local T&E Manager who will use those staff who are trained and have registered an interest in International Escorts. The selection of staff will be based on the operational and DIBP requirements for each task.

When required, a teleconference involving National Operations, DIBP -Removals Unit, the T&E Manager and the Centre Manager (CM) or General Manager (GM) will be convened. The purpose of this meeting is to discuss the risk factors and develop a risk mitigation strategy which is to be included in the tactical plan and EOO.

## 2.4 Removals Liaison Officer Duties

Removal Liaison Officers (RLOs) undertake escort duties during the complex or sensitive removal of an unlawful non-citizen from Australia. The role of an RLO is to represent the department and liaise with a range of internal and external stakeholders (including airline, airport and foreign government officials) to ensure the successful removal of an unlawful non-citizen.

## 2.5 Team Selection

Once the RA has been completed, the National Operations Team will designate a team composition. The T&E Manager will identify a Team Leader, and driver, taking into consideration the following considerations including but not limited to:

- Each female Detainee requires a female officer on the escort
- The standard ratio is two officers for each adult Detainee, however this may be increased based on the Detainee's Risk Assessment and following consultation with DIBP
- If dependent children are being escorted, then at least one member of the team will be female
- If children are being escorted, all officers tasked must have satisfied all appropriate working with children checks
- When tasked as such, a 'medical escort' will include an appropriately trained individual; details will be supplied by DIBP / Detention Health Service Provider (DHSP)
- Physical capabilities of the Detainee(s)
- Risk presented by the task, including the risk the Detainee poses.

Staff will be allocated to the escort according to the operational requirement of each task. Staff will submit their interest to participate on International Removals to the T&E Manager and will be expected to undertake any task that they are assigned.

Staff must ensure they maintain the nominated current certification and competency for all relevant training, such as Control and Restraint (C&R) or First Aid. Without current certification, officers will not be assigned to an international escorting task.

National Operations may develop training packages to meet the needs of the customer, with which all staff will need to be compliant to participate in an International Removal task.

Staff must hold a valid Australian passport, which must have at least 6 months validity in order to be considered for inclusion on the International Escorting Assignment Register that will be maintained by National Operations.

## 2.6 Escort Team Submission to DIBP

National Operations will submit escort team names and passport details to DIBP within 24 hours of acceptance of the initial RFS, to enable escort staff travel to be organised by DIBP.

## 2.7 Escort Itineraries

When receiving escort staff itineraries from DIBP, National Operations will send escort itineraries to the local T&E Manager and request an EOO be developed. It is the responsibility of the local T&E Manager to verify the accuracy of the itinerary.

## 2.8 Escort Risk Assessment Process

National Operations will notify the T&E Manager to develop an EOO for the task when they have received the itineraries; the T&E Manager will develop an EOO within 24 hours of receipt of a request from National Operations. The EOO is to be reviewed and approved, as per the SIS-TE-PPM-0001 Approval Process and Operational Changes.

The local T&E Manager will develop an EOO that addresses the risk and takes into account the SRAT, route and Site Risk Assessment (SRA, where applicable). The information included will assist in the risk determination and appropriate planning including risk mitigation required for each escort task

If the individual has been assessed at an elevated risk level i.e. high or extreme or they have been identified by DIBP as meeting specific criteria within s501 or compliance, then further consideration will be given to the resources required to safely and efficiently execute the escort.

When the enhanced escort position (EEP) or mechanical restraints are required, the T&E Manager will seek approval from the DIBP Centre Manager (CM) and follow the approval process as set out in the SIS-TE-PPM-0001 Approval Process and Operational Changes.

## 2.9 Portal Entry for the International Escort

The T&E Manager at the location where the escort is departing will be responsible for creating a transport entry on Portal and any subsequent Portal entries. If Portal is not available, this may be done via email or in writing. Once this transport entry has been created, the T&E Manager will then send an email to National Operations with confirmation of the portal transport number.

## 2.10 Visas and Immunisations

The relevant site T&E Manager on behalf of National Operations will coordinate with the nominated escort staff to obtain Visas and immunisations when required. Once a visa has been obtained, a scanned copy is to be sent to [Escort.Intl@serco-ap.com.au](mailto:Escort.Intl@serco-ap.com.au) by the T&E Manager.

## 2.11 Submission to DIBP

All International Removal EOOs will be approved by National Operations as per the SIS-TE-PPM-0001 Approval Process and Operational Changes. The EOO and supporting tactical plans (if required) are to be sent to the relevant travel/removal unit no later than 72 hours prior to the commencement of the removal.

## 2.12 Required Documentation

All removals will be planned and executed using the following documentation:

- International Escort Operational Order SIS-TE-DOC-0001
- Escort Risk Assessment Tool SIS-TE-REG-0001
- Operational Departure Plan (supplied by DIBP)
- SIS-TE-PPM-0001 Approval Process and Operational Changes
- SIS-TE-DOC-0003 T&E Task Process and Approvals Framework – International

## 3. Responsibilities

### 3.1 Team Leader

The Escort Team Leader is responsible for the following:

- Attend an Operational Departure Plan (ODP) briefing with DIBP and the T&E Manager. The Team Leader is to ensure that all facets of the operation are correct, including the EOO, itineraries, emergency contact requirements, risk mitigations and that there are appropriate mitigations are in place.
- Conduct of pre-departure operational briefings for the escort team including Code of Conduct, uniform and equipment checks, operational updates, embarkation, disembarkation and in-flight procedures, allocation of staff responsibilities.
- Ensuring that the Detainee(s) are seated next to a window with an officer sitting next to them. When a Detainee is in the middle row of an aircraft an officer will need to be seated immediately on both sides of the Detainee.
- In-flight management of staff and Detainees in accordance with procedures including searching, provision of refreshments, rest breaks, etc.
- Ensuring any incident involving the use of force is videoed when planned and use of force reports are completed.
- Completion and handover of escort operational documentation, including escort log, use of force report, incident reports and Removal Report, scanned to [escort.intl@serco-ap.com.au](mailto:escort.intl@serco-ap.com.au).
- To ensure the escort Team or the Detainee are not to consume alcohol during the escort.
- That the Detainee does not have access to any items that could compromise the escort i.e. a High Risk Detainee would not have access to metal utensils.

### 3.2 Appearance

Serco staff are required to maintain a professional appearance at all times. The following dress codes are applicable to staff engaged in international escort tasks:

- International escorts and carrier liability removals: staff will wear civilian clothing comprising of smart trousers, shirt / blouse. Jackets are optional
- Family removals: dress code as above, however no black or dark clothing to be worn

The following criteria apply to all international escorts:

- Appropriate footwear must be worn, in accordance with the dress code
- No steel toe capped shoes / boots to be worn
- No denim to be worn
- No shorts to be worn
- No training shoes / sandals / thongs to be worn
- Jackets, trousers and polo shirts must be logo free and must be in good order i.e. no rips.



### 3.3 Staff Luggage

Escorting officers at all times must be in a position to respond to an incident if necessary and should not carry large items such as large bags. Any carry-on luggage must be 'hands free' to enable staff to continue with escorting duties whilst in possession of their luggage. Suitcases, 'wheelie bags' or large holdalls are not acceptable.

Escorts should also avoid wearing or carrying on their person metal items (e.g. jewellery) or other such items, which may trigger an indication at a screening point and cause delay or compromise the ability to maintain positive control of the Detainee.

Staff should consider the use of a small backpack. All personal items are to be stored in the overhead locker and will not be accessed until completion of the escort.

### 3.4 Vehicle Selection

The vehicle(s) allocated to the removal will depend on the following factors:

- the risk levels of Detainee(s) scheduled to be removed
- Approved for airside access
- any special needs
- the number of Detainee(s) scheduled to be removed
- Any airport requirements i.e. authorisation to utilise vehicle airside

Adequate planning processes will be in place to ensure appropriate allocation of vehicles to tasks considering the above factors and availability of resources.

### 3.5 Escort Operational Order Process

The planning process is explained in further detail in 'Operational Planning Process (SIS-OPS-PPM-0043)'. The local T&E Manager will plan the movement in detail including:

- Start times
- Collection time at place of detention
- Road route
- Required arrival time at the place of departure allowing time for ticketing and handover of any documents from DIBP
- Time to commence security screening through airport security
- Time to board the aircraft

Staff will be notified of all required information, as included within the International EOO, prior to the task.

When determining the proposed timings of the escort, time will be factored in to ensure the Detainee's welfare needs are met, such as:

- Acquiring refreshments
- Comfort breaks
- Any special requirements

### 3.6 Information Exchange with DIBP

DIBP must be provided with the following information as soon as it is determined:

- Names of the escort team for ticketing purposes
- Confirmation of appropriate visas
- The operational order (SIS-TE-FRM-0001) The T&E OM must request the following documentation from DIBP (prior to the commencement of the escort task):
- The location of passports or emergency travel documents for all individuals being escorted (if in the Detainee's stored property, these will be signed over to the escorting staff on collection of the Detainee)
- Medical notes (if required, they will be given directly to the medically trained staff member on the escort and are not Serco's responsibility)

DIBP will provide the ODP (DIBP Document) which will contain:

- post return care plan (if required)
- fitness to travel
- details relating to nature of removal and any associated sensitivities
- authority to hold the Detainee in detention
- relevant security information
- whether authority is granted for unplanned Use of Force / restraints during the removal
- confirmation of airline uplift approval
- all useful / appropriate contact details
- accommodation details for staff at the final destination, where applicable

The Team Leader is to ensure all requirements of the ODP are followed and additional to any requirements stated in the EOO.

No escorting task will be undertaken without prior receipt of the ODP from DIBP. In the case an ODP is not received 24 hours prior to the removal commencing the National Planning Manager is to be immediately notified.

### 3.7 Removal Liaison Officer

DIBP may, at their discretion, provide a Removal Liaison Officer (RLO) on certain sensitive escorted removals. The purpose of this role is to facilitate the passage of the Detainee through border controls. The RLO is not involved in the management of security of the Detainee.

## 4. Operational Implementation

### 4.1 Escort Team briefing

Once the National Operations has identified the resource(s) required to undertake the task, they will notify all staff of the following information as it becomes available:

- the date of the escort
- the muster time and location
- the estimated duration of the escort

- any scheduled stop built in to the escort
- the destination of the escort
- appropriate risk mitigations

The Team Leader will provide the following information to the team during briefing at the muster point:

- The number of Detainees (including any dependent children) involved in the operation
- Collection point of the Detainee(s)
- The specific risk identified for each Detainee
- Any special requirements (medical or support)
- Whether there are any specific duties, different from those required of an escorting officer or driver, required of any officer
- The seating plan to be used on the vehicle and aircraft during the escort
- Detainee(s) property/baggage restrictions
- If there is prior authority to use force (EEP or restraints), and the location of restraints
- Reminder that all officers are responsible for their own documentation:
  - Passport
  - Visa
  - Serco identification (ID)
  - Aviation Security ID Card (ASIC) ID where applicable
  - Vaccination card
  - Foreign currency

#### 4.2 Mobile Telephones

The Team Leader will be issued a mobile telephone by the T&E Manager with international roaming. The Team Leader will communicate effectively the progress of the removal where appropriate as per the ODP.

Staff are not permitted to use their personal mobile phones during the escort task.

#### 4.3 Collection of Detainee(s)

Detainees will be collected from their place of detention or from another location as designated in the RFS.

The Team Leader will be advised of the required time of collection of the Detainee by DIBP, however the Team Leader must contact the Detainee's location if there are any unforeseen changes to the schedule, and to request an update on the Detainee's behaviour. The ODP must be reviewed by the Team Leader to ensure the authority to detain has been received prior to departure from the collection point. Upon arrival at the Detainee's location the site Manager is to give the escort staff an update of the Detainee's current behaviour, any recent intelligence or special needs, should be sought.

The Team Leader will become responsible for the Detainee(s) once DIBP have completed their interview with the Detainee(s), upon receipt of appropriately signed documentation from DIBP. The identity of all persons will be verified against the details of the individuals on the RFS and in the ODP. The Team Leader will ensure all appropriate documentation for the Detainee's discharge from their location and onward journey is present and complete, including the Detainees travel document.

All property will be accounted for in accordance with the Property Management PPM (SIS-OPS-PPM-0012). The Team Leader will hand over the Detainee's property and valuables to the Detainee when the aircraft has landed at the removal destination.

Escort Staff are to liaise with the DHSP and the Detainee to ensure the Detainee does not have any pre-existing injuries or illness prior to travel.

Any prescribed medication belonging to the Detainee(s) will be retained by the Team Leader or accompanying medical personnel until arrival at the final destination, whereupon it will be handed over to the receiving authority, or directly to the Detainee, in accordance with instruction from DIBP and the Detention Health Service Provider (DHSP). Administration of any medication must be in accordance with written instruction from the DHSP and must be recorded on the EOO.

Staff must be mindful that collection is a critical point in the removal process. The risk profile of the escort can change at any point, and staff must act in accordance with training and instruction received, to mitigate any changing risk and to deal sensitively and compassionately with individuals in their care. If during any stage of the collection process, the Detainee risk profile changes, the Team Leader is required to communicate this immediately to DIBP removal officer as per the ODP. This will ensure the airline is informed of any emerging risks.

#### 4.4 Identification of the Detainee

The Detainee who is being removed will need to be positively identified by the property officer (when the location is at an immigration detention facility (IDF) and each member of the escort team. This will involve ensuring the Detainee is verified as the person to be removed by checking their travel documentation or ID in the departments IT system (Portal). The Detainee is not to leave site until verification is completed and the officers making the verification are noted in the EOO.

#### 4.5 Searching of Detainees

All searching will be completed in accordance with SIS and DIBP policy. The Detainee is to be pat searched; during a pat search anything that could compromise the safety of the aircraft or the integrity of the escort is to be placed in the Detainees luggage if appropriate for carriage on the aircraft.

#### 4.6 Detainee Discharge

When Detainees are being discharged for an international removal. Property staff will need to ensure the following has been completed:

- Check for contraband items in the Detainee's luggage - no dangerous goods i.e. matches or lighters to be packed in luggage.
- Ensure the relevant Detainee documents, such as passport or statement of identity are given to the Team Leader for the escort during discharge.

- Ensure luggage meets baggage guidelines for the designated carrier. The Detainee will not be allowed any carry-on luggage, Ensure all property, including sharp/wooden/metal objects, i.e. nail clippers/file, scissors and disposable razors etc, and liquids, aerosols and gels, are packed in check in luggage.
- Ensure the total weight of the Detainees luggage does not exceed the individual weight allowance of the airline.
- That all travel documentation is included with the Detainees valuables and recorded within the Dossier.

The escort team will greet and positively identify the Detainee. The escort Team Leader will brief the Detainee on the escort.

#### 4.7 Dangerous Goods/Restrictions for personal items

Staff and Detainee luggage must conform to airline, airport and international regulations regarding the presence of dangerous goods. Escorting staff must be satisfied that there are no dangerous goods in the Detainee's luggage, as they will be required to sign to this effect at check-in.

Staff are to ensure that in all luggage that they do not exceed limitations for items such as liquids, gels or aerosols.

#### 4.8 Seating in the Escort Vehicle

When a Detainee is seated in a vehicle, the following principles need to be followed:

- The Detainee(s) are not to be seated behind the driver
- The Detainee(s) are to be seated by the window with an officer sitting directly next to him or have an officer seated on both sides of the Detainee
- The Detainee(s) are not to be seated next to an exit
- When officers are not seated on both sides of the Detainee, then they are to be seated next to an exit
- Detainee(s) must wear a seat belt at all times when positioned in the vehicle;
- When moving a High/Extreme Risk Detainee staff must ensure he/she is seated in a position to ensure an unobstructed view for 'in car video' recording purposes

The Removals Unit will liaise with the Australian Federal Police (AFP) or the relevant Law Enforcement Agency and organise necessary assistance at the airport if required.

#### 4.9 Airport Procedures

When possible all removals are to be conducted airside and not through the front of the terminal where there may be security vulnerabilities. If a removal needs to occur at any time in an unsecured area then the T&E Manager is to give consideration for additional staffing resources until departure.

Upon arrival at the terminal building, the escort vehicle will park in the designated area or proceed to the security gate for airside access, as determined locally and in accordance with local procedures.

The escort team will escort the Detainee to the assigned holding area in preparation for DIBP processing, customs and security clearance.

Appropriate escorting procedures will be executed at all times, including staff maintaining an arm's length distance from the Detainee at all times "close escorting", if EEP or restraints are not utilised. The Detainee's safety and welfare, and the maintenance of the integrity of detention will be of paramount importance at all times.

Officers should, as far as possible, monitor the Detainee's levels of distress by interacting in a compassionate and understanding manner.

Officers should engage with the Detainee(s) in order to build a rapport, which may give the ability to elicit compliance and possibly gain intelligence that may assist the team with the removal.

The escort driver must remain at the airport until the flight has departed in the event that the removal is aborted or cancelled. Once the flight has departed the driver will notify the T&E OM.

#### 4.10 Checking In & Security Arrangements

As the team pass through the security screening, an officer will pass through first, then allow the Detainee to proceed, followed by the next escorting officer(s) and if appropriate the driver last. This will ensure the integrity and security of the escort is maintained. Once the team have cleared the security screening, they are to make their way to the departure gate.

The Team Leader is responsible for coordination of the check in process. In some cases (including when a RLO is assigned) DIBP will be responsible for this process, however this will be outlined in the ODP.

The Team Leader must ensure that appropriate customs departure cards are completed prior to leaving the holding area.

When the Detainee is being escorted in an unsecure area correct formations must be utilised, which will be outlined in the EOO. The escort team will be in arm's length of the Detainee at all times, subject to any further use of force or restraints throughout the movement to the aircraft.

On a civilian flight, the back row of the aeroplane will usually be allocated to the escort. Under no circumstance must the team be seated away from the Detainee(s). The Team Leader must ensure appropriate seating is allocated prior to boarding the aircraft.

The seating location of any accompanying RLO is not mandated.

#### 4.11 Boarding

The Detainee should be provided with the opportunity attend the toileting facilities prior to boarding, to prevent disturbances once onboard the aircraft.

On arrival at the departure gate, the DIBP Removals officer or Team Leader will make themselves known to the flight crew and agree the pre-boarding time and the process for boarding the flight. The escort will usually board the flight before any civilian passengers, however this will be negotiated with the flight crew and may be subject to change. If the Team Leader has concerns with the proposed boarding arrangements these must be flagged with DIBP immediately. The safety and security of all persons remains Serco's priority during this process.

Boarding is a high risk point of the removal process. Officers must be mindful that the Detainee(s) may seek to disrupt the removal at this juncture. The rapport established between escorting officers and Detainee(s) on the escort is of paramount importance, as the officer should be able to gauge whether disruption is likely. Irrespective of this assessment, officers must remain vigilant and ensure adherence with “close escorting” processes in order to maintain the integrity of the escort and the safety and security of all involved. Any assessment made by the escorting staff regarding the Detainee’s demeanour and possible disruption must be shared with DIBP and the flight crew.

A nominated staff member is to ensure that the area where the Detainee is to be seated is free from any objects that could compromise the escort. Any items that are removed, to ensure the safety and integrity of the escort (in consultation with the flight crew), will need to be given to the flight crew to be stored.

Once the flight has departed, the driver will return to the vehicle and contact the T&E Manager and provide a full report paying specific attention to any problems encountered and how they were resolved.

#### 4.12 Tarmac Removal

In the event of increased security risk surrounding the removal of the Detainee through public areas due to a Detainees non-compliance, media presence or increased public interest in the removal, the Detainee and the escort team will be custom and immigration cleared in the holding rooms or in the escort vehicle (airside).

Once the Detainee has been cleared by customs and immigration, the escort will board the plane in consultation with airline staff.

It is the responsibility of the T&E Manager to organise airport ASIC passes for officers attending the airport. The T&E Manager will also arrange mandatory registration of the transport vehicle for the purpose of airside access..

#### 4.13 Seating in the Aircraft

The seating allocation on an International removal needs to follow these principles:

- The Detainee(s) are not to be seated on an emergency exit and would normally be seated at the back of an aircraft
- The Detainee(s) are to be seated by the window and with an officer sitting directly next to him or have an officer seated on both sides of the Detainee if located in the middle seat
- When officers are not seated on either side of the Detainee then they are to be seated on an aisle behind the Detainee
- Detainee(s) must wear a seat belt at all times when seated or unless instructed by airline staff i.e. when the plane is refuelling.

#### 4.14 Unescorted Removals

When a Detainee is being removed unescorted, staff are to ensure that they hand over the valuables and documentation either to the Detainee on the aircraft or the airline depending on the individual airline requirements. Airline staff may require that the detainee's travel document is held by the purser under airline policy during the flight. The T&E Manager will provide staff the specific airline procedure during the escort briefing.

Adequate staff are to remain on the aerobridge until the aircraft doors are closed and the aircraft has pushed back. Staff will then depart the Airport when confirmation is received that the aircraft has taken off.

#### 4.15 Transit Points

When there is not a holding room available at a transit point staff are to ensure that the Detainee is not taken through areas where there is alcohol or into the shopping areas. Staff will be required to escort the Detainee on arrival to the departure gate, any movement outside access to toilets will need to be approved by the National Duty Manager and recorded in the escort log. Staff will need to remain in arm's length of the Detainee at all times and when the Detainee needs to use a toilet, all same sex staff will be required to stand outside the cubicle with the door ajar to prevent the Detainee locking the door. If there is a staff member of the opposite gender then they will need to stand outside the entrance of the toilet. When practicable staff are only to allow Detainees to use toilets with only one entry and exit point.

If the Detainee's behaviour during the transit period deteriorates to the point the Team Leader feels it could jeopardise the safety and security of any person, or the onward journey, the Team Leader should raise their concerns immediately with local authorities and contact the Serco National Duty Manager and DIBP.

When the EOO does not indicate a requirement for the Detainee to be placed in a holding area while in transit, but the Detainee's behaviour during the first leg of the journey indicates that this may be required, the Team Leader must liaise with the DIBP representative on the flight (if present), and with the flight crew, to arrange for the crew to contact the security function at the transit airport to facilitate an appropriate holding area. On arrival at a transit point where a holding room is not required, the escort is to move directly to the next departure gate.

When there is a requirement to transit staff are to ensure the requirements set out in the ODP are followed. When there is a transit point and the ODP requires staff to escort the Detainee to a holding room they are to follow the directions of the local authorities. When there is a requirement to remain static outside the holding room or meet the Detainee before the flight. The Team Leader is to obtain the contact information of the officer in charge of the holding room and supply the escort phone details. Staff are to ensure they are at the holding room no later than 2 hours prior to the departure of the connecting flight.

Under no circumstances (aside from a medical emergency requiring treatment) are staff or the Detainee to be processed through Customs to leave the airport. The escort is to remain within the customs controlled area at all times.

#### 4.16 In Flight

Escorting staff are to remain alert for the duration of the flight, unless they are on a rest break period. There is to be a minimum of one staff member in control of the Detainee at all times, this requirement may change due to risk which will be stated in the EOO or change in risk during the flight due to Detainee non-compliance or other risk identified.



All escorting staff and Detainees will abide by the instructions of the Captain at all times throughout the duration of the flight. On landing, the escorting staff and Detainees on board will remain in their seats until all other passengers have disembarked the aircraft.

#### 4.17 Meals

The Team Leader must assess the Detainee's demeanour in determining appropriate processes for providing the Detainee(s) with a meal. Detainees and staff are not be permitted to consume alcohol.

If the Detainee appears compliant, in the interests of promoting decency, the Team Leader may choose to allow the Detainee and staff to eat their meals together.

If the Detainee is non-compliant, the Team Leader will review the pertaining risks associated with staff accessing a meal to ensure that the security of the Detainee is maintained at all times.

Consideration must be given to permitting the Detainee access to any implement that may be used as a weapon. This includes cutlery, serving dishes etc. Should the behaviour of the Detainee at the time of the meal service be deemed unsafe, the Team Leader may choose to request of the cabin crew that the meal be served at a later time. Staff must ensure the meal is provided if this is the case. The intention is in no way to deprive the Detainee of their meal. In this situation, staff must also wait for their meal.

Prior to collection of the meal tray by the cabin crew, officers must ensure that all items (cutlery etc) are accounted for and returned. This is of paramount importance in the maintenance of a safe and secure environment for all on the flight.

Regular observations of the Detainee must be noted in the EOO and all incidents must be recorded to facilitate accurate incident reporting.

#### 4.18 Rest Breaks

The Team Leader must assess the Detainee's demeanour in determining appropriate processes for providing the Detainee(s) with a rest break, i.e. the opportunity to attend the toileting facility or to stretch and move while on the flight.

Escorting staff are to attend to the welfare requirements of the Detainee. If the Detainee requests to the use the aircraft toilet facilities, the Detainee must remain seated until appropriate arrangements have been made. The escorting officers will stand in front and behind of the Detainee and escort the Detainee to the toilet. This process must be reversed for the return of the Detainee to their allocated seat. The toilet will be searched prior to entering and any items considered dangerous are removed i.e. disposable shaving razors etc).

An officer will remain outside and the toilet door will remain slightly ajar, this must be controlled at all times, an escort may use their foot to ensure the door is prevented from closing. The dignity of the Detainee must be maintained at all times, however the Detainee must never be allowed to close or lock the toilet door during this process.

Rest breaks for staff are to occur on the aircraft and when practicable not at a transit point. During the rest break on the aircraft, there is to be at least one officer in control of the Detainee at all times. The number of officers supervising the Detainee may increase due to non-compliance or mitigation for an elevated risk rating.

When there is an extended transit or delay at a transit point staff are to escort the Detainee to a holding room. When there is not a holding room available the Team Leader is to liaise with the local authorities and request assistance such as locating the Detainee in the manned security office with at least one Serco officer in control of the Detainee at all times.

#### 4.19 Arrival

The timing of returning of valuables, money etc to the Detainee is at the discretion of the Team Leader. Consideration must be given to the appropriate point at which to do this, as the handing over of such items may attract attention to the Detainee, and their property, if not handled sensitively. Valuables are not to be handed to the Detainee:

- Prior or during a transit point
- Earlier than one hour prior to landing at the country of origin
- When it has been arranged to hand over custody to a government agency at the country of origin

Any Post Arrival Support (PAS) monies must be signed for by the detainee, witnessed by an escort officer and a copy kept with the documentation for return to Removals DIBP.

The ODP will contain instruction as to whether the Detainee(s) are being met by local authorities upon arrival, and will determine at what point the escorting function is to cease. The escort function will usually cease once the Detainee has commenced immigration clearance in their home country.

If the Detainee is not to be met, escorting staff will accompany the Detainee to the point of immigration control and liaise with the authorities, following any instruction given.

If the Detainee is met by receiving authorities (such as embassy liaison, immigration or police), the escorting team must liaise with said authorities and follow any instruction given in regards to the handover of the Detainee.

Any and all instructions given by local authorities must be noted in the EOO. The Team Leader is to ensure that all reporting requirements are followed as per the EOO and ODP.

#### 4.20 At Destination and the Return Journey

At all stages of the escort, officers must be aware that they are representing Serco and working on behalf of the Australian Government and are on duty until their arrival back in Australia.

While unlikely, the escorting team may receive notification of a further escorting task from National Operations.

Alcohol is not to be consumed during any stage of the removal or whilst on duty.

All officers must report to their base upon arrival in Australia to return all documentation and escort kit and to be de-briefed by the Team Leader.

## 5. Restraints and EEP

### 5.1 Use of Force / Restraint

Escorts will be completed in a manner conducive to encouraging the Detainee's cooperation at all times, however it is acknowledged that there may be circumstances where an individual being removed from Australia is not compliant.

Use of force must always be a last resort. De-escalation, negotiation and conflict resolution techniques are to be used before force. Use of force should be avoided if possible, and only used where no other measures are appropriate or available to protect the safety of all persons, the Detainee and property, or if instructed by DIBP and the captain of the aircraft.

The level of force must always be proportionate to the degree of risk faced. The minimum level of force necessary is to be used and for no longer than is essential. Excessive force is not to be used in any circumstances.

On each international escort there will be discussion regarding the type of restraints to be used with a DIBP representative as part of the planning process to the escort. It is acknowledged that the type and extent of restraints may change depending on the nature of the risks posed by the Detainee to be escorted and the requirements of the countries/air captain involved.

When restraints are used, it should be covered (where possible) with a blanket or piece of clothing to hide their use and to maintain the Detainee's dignity as much as possible. The use of restraints may be utilised in circumstances to:

- Prevent escape of a Detainee, especially in transit areas
- Prevent a Detainee from injuring themselves during transportation or during flight
- Prevent a Detainee from injuring the escort officers or others
- Prevent a Detainee from injuring the crew and/or passengers or an aircraft during a flight
- Prevent a Detainee from causing large scale damage to property
- Prevent a Detainee from delaying their removal by causing disruption during the removal operation
- Restraint should only be used in exceptional circumstances where the actions of the detainee deem it to be necessary

Incidents may potentially occur on any escort and escorting staff will be prepared for any eventuality and will manage these incidents according to the Serco Transport and Escort Contingency Plans for all international escorts, which form part of the escort pack.

### 5.2 Enhanced Escort Position

The EEP has been developed to meet the risk assessment and risk mitigation strategy for Detainees who are rated below a High or Extreme risk level, noting the enhanced escort position could also be used for High or Extreme risk Detainees but, preferably, with restraints also applied.

As a planned use of force the following conditions must be met:

- A written request to DIBP is required
- Approval in writing is required from the Department which will be indicated within the EOO
- or other written instrument

- The use of planned force will be recorded on the escort operational order
- A Use of Force Report must be completed and submitted
- Incident Report must be completed and submitted
- Detainee must be offered a medical assessment by DHSPas soon as practicable. In the case of an International Removal when DHSP are not able to provide an assessment the escort are to ask the Detainee If there is any discomfort or injury and note the Detainees response and observations in the EOO

## 6. EOO and Escort Removal Report

The Team Leader must ensure the notification requirements and all key events during the escort, as per the EOO, and that all information is recorded on the EOO. All incidents, use of force etc must be reported to DIBP and the National Operations Team as soon as possible.

If force or restraints are used at any point, appropriate reports must be completed in line with the Operational Safety PPM, prior to returning to base.

The Team Leader must collate receipts and complete an expenses form for expenses incurred.

The Team Leader must ensure the Escorts Removal Report, which is supplied by DIBP prior to the removal, is completed and emailed to national Operations within 24 hours of completion of the escorting task.

When an escort is aborted the T&E Manager and DIBP are to be contacted immediately. If the removal is aborted due to non-compliance then National Operations is to be contacted. The Detainee is to be taken to the holding room until advised by DIBP on placement.

# Keep SAFE and PSP SME

## Serco Immigration Services

### Document Control

<b>Document:</b>	Keep SAFE and PSP SME Supportive Monitoring and Engagement
<b>Type:</b>	Policy & Procedure Manual
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## Amendment Record

Version	Description	Issue Date
1.0.1	Inclusion of instruction to complete 'Wellbeing Indicator' in Portal to satisfy abatement requirement 11.1	
2.0	Removal of process for using Keep SAFE where heightened PSP has not been implemented, clarification over scope of PSP and further amendments	31/08/2012
2.0.1	Minor language amendments to reflect changed terminology	13/03/2014
2.0.2	Minor language amendments and format update	05/05/2014
3.0	Updated to reflect Facilities and Detainee Services Contract 2014	08/04/2015

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# 1. Introduction

## 1.1 Policy

The wellbeing, safety and security, of all people in immigration detention is of paramount importance, and Serco will have processes in place to work both independently and cohesively with other agencies towards ensuring the safety of all people in immigration detention.

This policy should be read and implemented locally in conjunction with the Detention Services Manual (DSM) Chapter 6: Detention Health, Psychological Support Program (PSP).

The PSP aims to:

- Provide a clinically recommended approach for the identification and support of persons in immigration detention who have psychological vulnerabilities or are at risk of self-harm and suicide, regardless of any perceived motivation, thereby reducing risk and improving health outcomes.
- Reduce the level of uncertainty and stress for staff in dealing with persons in immigration detention who exhibit self-harming and suicidal behaviour

Detainees are managed through the PSP protocols from their arrival in immigration detention until discharge and concerns regarding their welfare may be raised at any time. That means that the role of Serco officers includes supportive monitoring and engagement of all Detainees at all times, but the intensity of this will vary depending on the Detainee's needs. Some circumstances may require formalised monitoring processes (PSP SME levels of Ongoing, Moderate and High Imminent); however the concept of being 'on' or 'off' PSP is inaccurate. Continuing meaningful engagement with all persons in immigration detention is essential, regardless of a clinically determined 'risk level'.

The Keep SAFE procedure operationalises these aspects of the PSP by:

- Providing clear and practical instruction for all Serco staff in the management of persons in immigration detention at increased risk of self-harm or suicide in line with the supportive monitoring and engagement requirements of the PSP; and
- Ensuring Serco officers use standard documentation across all sites when providing services to people in immigration detention who require supportive monitoring and engagement to manage increased levels of risk of suicide or self harm

Thus, the Keep SAFE procedure ('Keep SAFE') provides operational guidance for the supportive monitoring and engagement requirements of the PSP and provides instruction to Serco officers in providing appropriate care to people at increased risk of suicide and self harm in the absence of a clinician and emphasises prevention, support, engagement, autonomy and reintegration.

The level of supportive monitoring and engagement any Detainee requires under the PSP can only be assessed and changed by a clinician; it is Serco's responsibility to work as part of a collaborative team with IHMS and DIBP in caring for and supporting people in immigration detention at risk of self-harm or suicide. Substantial personal and organisational risks exist for any individuals operating outside of clinical assessments and decisions.

In managing the immediate needs of those Detainees at risk of self-harm or harm to others, staff must:

- (i) act immediately to ensure the safety of any Detainee;



- (ii) place the Detainee under immediate observation; and
- (iii) advise the Department of the identified Detainee and actions taken.

## 1.2 Related Forms

- Keep SAFE document cover and inside front page (SIS-OPS-FRM-0001 and SIS-OPS-FRM-0002, respectively)
- Keep SAFE Management Check (SIS-OPS-FRM-0003)
- Keep SAFE Action Flowchart (SIS-OPS-FRM-0004)
- Concern and Keep SAFE Information (SIS-OPS-FRM-0005)
- Immediate Keep SAFE Action plan (SIS-OPS-FRM-0006)
- PSP Referral (SIS-OPS-FRM-0007)
- Keep Safe / PSP Observations and Interactions (front sheet, SIS-OPS-FRM-0008, and continuation sheet, SIS-OPS-FRM-0009)
- PSP Placement / Change form – **not** a Serco document, this will be supplied by IHMS
- PSP Care Plan – not a Serco document, this will be supplied by IHMS

## 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Facilities and Detainee Services Contract 2014
- Work Health and Safety Act 2011

## 1.4 Roles & Responsibilities

**Table 1 – Roles and Responsibilities**

Role	Responsibility
Any staff member	Identifying a concern regarding the wellbeing of a Detainee
Duty Operations Manager / Shift Supervisor as appropriate	Completing Keep SAFE processes to safeguard the wellbeing of a person in immigration detention following identification of a concern, until the individual can be assessed by IHMS
Appropriate staff member as locally designated	Contribute to PSP meetings
All Serco staff	Actively work towards maintaining the safety of all people in immigration detention

## 2. Principles for the Prevention and Management of Self-Harm

The DSM lists the following nine principles as underpinning the prevention and management of self-harm for people in immigration detention. Through a collaborative working relationship with IHMS and DIBP, Serco aims to address each of these principles as described in the table below.

**Table 2 – Nine Principles for the Prevention and Management of Self-Harm**

Principle	How Serco aim to meet the principle
A supportive environment	Engaging with people in immigration detention; treating them with dignity and respect. Providing an environment in which an individual should feel comfortable to disclose any issues, they might be experiencing, when such disclosure may be helpful.
Clinically-informed response	Serco will liaise with, seek advice from and act on advice provided by IHMS who manage the PSP processes, and work together to promote safety of the person in immigration detention.
A positive, supportive response	This will be achieved through interaction with individuals at risk of self-harm or suicide and ensuring as much as possible that all 'normal' routines and behaviours can still be accessed. A balance must be reached to avoid excessive surveillance, which may increase distress and risk. Serco will support an individual in line with IHMS instructions regarding the level of interaction appropriate for the Detainee in question
Early identification of risk	Effective risk assessment screening completed on reception, but also through the creation of essential professional relationships between staff and people in immigration detention to ensure any risk factors / changes in behaviour are identified at the earliest possible opportunity.
Response appropriate to the level of risk	Upon identification of a person in immigration detention who may require increased support under the PSP, Serco must ensure that the individual is kept safe until they are assessed by a member of the IHMS Mental Health team. Once the level of risk is determined by IHMS and the Detainee has been assigned a level of supportive monitoring and engagement, Serco will engage with and facilitate the individual's support plan.
External referral in high risk cases	Where an individual is assessed as presenting a high imminent level of risk, and maintains this level of risk for a period of 24 hours, they must receive external assessment. This may be facilitated by an external clinician attending the centre, or through transferring the individual to an external healthcare provider, however both of these options will be coordinated by IHMS as the lead agency.
Well trained and supported staff	Serco's contract with DIBP stipulates that DIBP will develop a PSP training programme in line with the PSP policy and such training will be updated to reflect policy changes and cleared by the Dept. for Serco personnel. To supplement this, Serco provide mental health awareness and PSP within the initial training course for all staff. In managing an individual at risk of self-harm or suicide, or an actual incident of self-harm or suicide, staff will receive peer and managerial support. All staff are able to access the Employee Assistance Programme for further confidential support if desired.
Cultural competence is critical	All staff are provided with cross cultural diversity training, and interpreters are available either in person at the site, or through the use of a telephone interpreting service. Serco staff come from diverse backgrounds and possess skills and knowledge to assist in this area.
Response must actively seek out and offer support to others who may be affected.	Serco is aware that if an act of self-harm / suicide occurs or is threatened, this may have a wider impact on the community within the immigration detention facility (both people in immigration detention and staff). As such, support for people in immigration detention will be facilitated through the Personal Officer Scheme, the

	welfare officer, support provided by IHMS. Support for staff will include peer and management support and the services of the EAP and internal psychological services
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### 3. The SAFE (Support, Action, Follow-up and Evaluation) Approach

The approach starts with the premise that 'self-harm and suicide is everyone's concern' and that staff locally will work in multidisciplinary teams to create a safe and caring environment in all immigration detention facilities. The approach aims to ensure that distress to people in detention is minimised through clear efficient actions and that Detainees are able to seek help and support before, during and after a crisis.

#### 3.1 Support

Preventing self-harm or suicide involves:

- Actively listening to the person at risk and making the time to do so
- Suspending any personal judgements about the individual or their intention/motivation
- Engaging the individual in planning ways of reducing or addressing the presenting problem
- Talking to the person at risk about their concerns in an open and transparent manner – this is a strength not a weakness
- Helping the individual make healthy decisions

#### 3.2 Action

Prompt, clear and consistent action is necessary to reduce the risks of self-harm or suicide. The Keep SAFE policy provides all paperwork and forms that **must be** completed by Serco staff to support the management of an individual at risk of self-harm or suicide. All documents should be kept securely within the individual's Keep SAFE file.

**Remember only a qualified clinician can make a judgement as to the individual's 'at risk' status.** Serco staff should always operate on the basis of care and support for the individual in the first instance and the Keep SAFE documents are designed to clarify the process in the absence of a clinician on site.

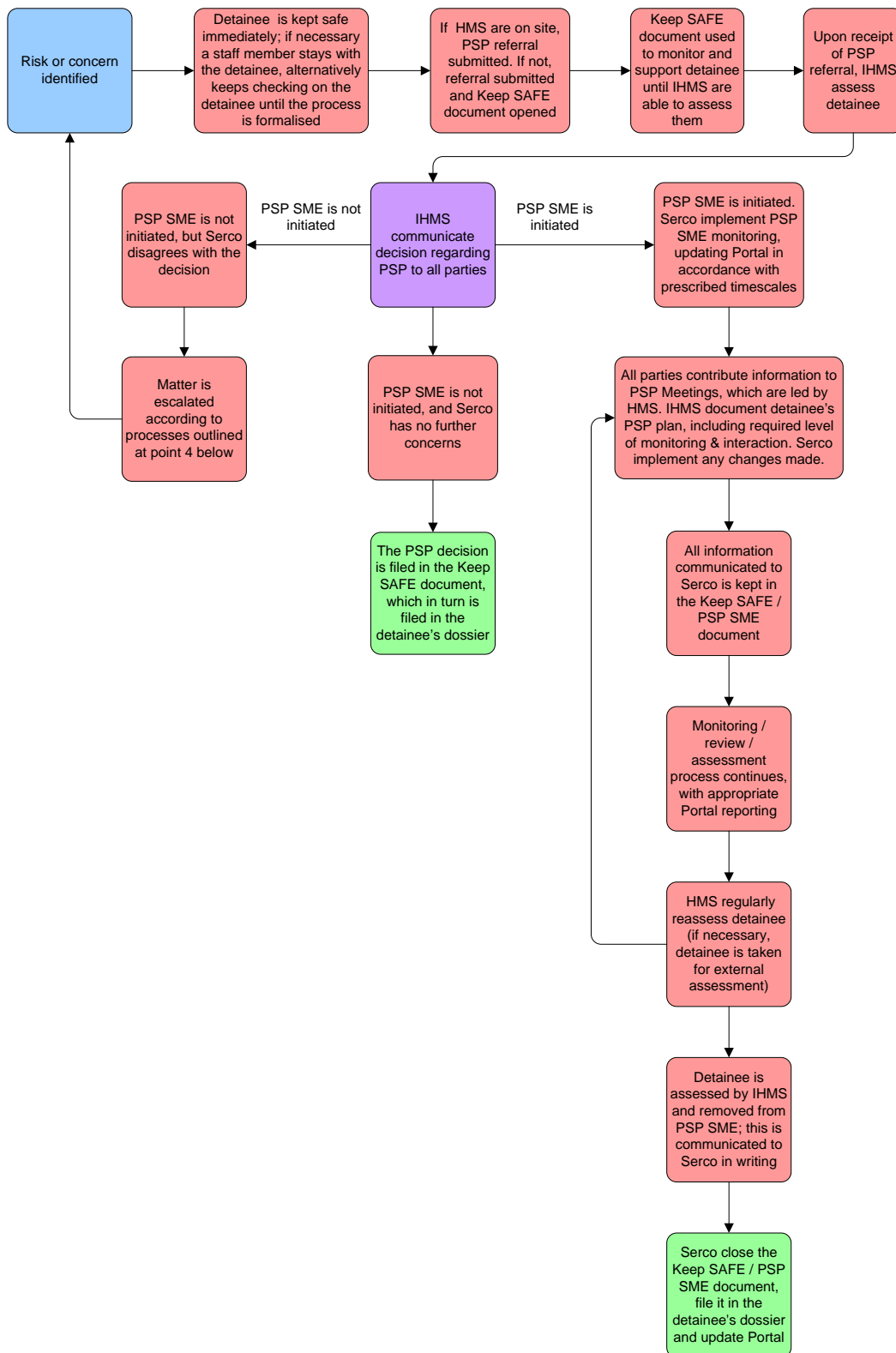
The following documents all contribute to the Keep SAFE monitoring process:

- Keep SAFE document cover and inside front page (SIS-OPS-FRM-0001 and SIS-OPS-FRM-0002, respectively)
- Keep SAFE Management Check (SIS-OPS-FRM-0003)
- Keep SAFE Action Flowchart (SIS-OPS-FRM-0004)
- Concern and Keep SAFE Information (SIS-OPS-FRM-0005)
- Immediate Keep SAFE Action plan (SIS-OPS-FRM-0006)
- PSP Referral (SIS-OPS-FRM-0007)
- Keep Safe / PSP Observations and Interactions (front sheet, SIS-OPS-FRM-0008, and continuation sheet, SIS-OPS-FRM-0009)

- PSP Placement / Change form – **not** a Serco document, this will be supplied by IHMS

### 3.3 Keep SAFE and PSP/SM&E Processes

Diagram 1 – Keep SAFE & PSP Processes



### 3.3.1 PSP Referrals

Serco staff must be aware of situations, triggers and changes in behaviour, which might create the need for a PSP referral to be completed. These may include but are not limited to the following:

- Negative information / delays relating to a visa application / outcome or appeal process
- Impending removal
- Harm to or concern about a friend / family member
- Changes in behaviour – e.g. increased aggression, becoming withdrawn, continued refusal of food/fluids
- Threats and warnings of self-harm or suicidal idealisation
- Current affairs and media reporting
- Self-harm by other people in immigration detention

See PSP referral form. Referrals must be passed to IHMS immediately by whichever means is agreed at site level. People in immigration detention must be kept safe until assessed by a mental health professional. Information will be shared at the PSP Meetings about incidents or concerns, which will prompt an automatic reassessment of risk, by IHMS.

### 3.3.2 Use of Closed Circuit TV

Observation of a person in immigration detention must not, **under any circumstances**, be via CCTV. Monitoring and engagement with a Detainee must involve person to person interaction.

### 3.3.3 Keep SAFE / PSP Reporting – Serco Requirements

Serco is responsible for providing DIBP with formal incident reports on all threats, attempts or occurrences of self-harm and suicide, in accordance with prescribed incident reporting timescales. In addition to this, changes to a Detainee's wellbeing must be updated within Portal within one hour. The opening of a Keep SAFE document should accordingly be recorded.

A Detainee being managed through Keep SAFE or PSP SME procedures should be reported following the process below:

**Table 3 – Creation of PSP Record within Portal**

Process	Portal reporting requirement	Timescale
Keep SAFE document opened	Wellbeing Indicator created	Within one hour of document being opened
PSP SME level confirmed in writing by IHMS on PSP care plan form	PSP Indicator recorded with the correct start date of the Detainee being placed on PSP in the Portal	Within one hour of receipt of paperwork
	PSP objective is created under 'work plans' and Placement form is scanned and attached to the Placement form task	As soon as possible
PSP Multidisciplinary team meeting minutes forwarded to Serco	Minutes are scanned and attached under the work plan on the Prevention Committee Meeting task	As soon as possible
PSP SME level is changed and confirmed by PSP care plan form	PSP form is scanned and attached under the work plan on the Step Down/Removal Form task	Within one hour of receipt of paperwork

Monitoring and engagement observations recorded by Serco	Observation sheets are scanned and attached under the work plan on the Observation task - NOTE: this task can be copied by using the Copy button function	Regularly; at least every 24 hours
Detainee removed from PSP SME – confirmed by PSP care plan form	PSP form is scanned and attached under the work plan PSP Indicator is end dated under the Detainee Info tab. PSP work plan tasks and the Objective are all updated to a Status of Complete.	Within one hour of receipt of paperwork

**NOTE:** A new PSP work plan must be created each time a Detainee is placed on PSP SME.

### 3.3.4 Escalation to Serco National Operations Office

There are clear processes within the PSP policy for the escalation of complex cases/issues. In addition, the Centre Manager or equivalent should consider notification to the Serco National Operations Office in cases where:

- The individual concerned is of particular public/media interest e.g. activist or previous media interest
- The age/gender of the individual is likely to raise public interest
- It is a case of a significant 'near miss'
- Any other circumstance that might evoke public acceptability test and as such might require Serco National response

Nothing in any of the above should be read as an alternative to established PSP processes but rather as an additional strategic management check and response to abnormal events.

If in doubt call the National Duty Operations Manager on **0417 322 772**.

Hindsight is not a defensible management position.

### 3.4 Follow Up

Follow up of the 'at risk' status of an individual is clearly regulated by the PSP reporting requirements. The PSP also stresses the need for follow up care of the individual or support for staff in the event of a 'near miss' or other distressing incident.

The Client Services Manager (CSM) or other appropriate manager should ensure that the Personal Officer is fully briefed, if they have not been fully engaged in the PSP process, to offer follow up support with the Detainee. The CSM must ensure that relevant staff are aware of the current situation at handover or shift changes.

Special care must be taken with fly in / out staff or new staff who may not be fully cognisant of the Detainee population in the facility.

Clear arrangements must be in place to ensure that the Detainee continues to feel supported and that he / she can see other ways of dealing with similar problems should they arise in the future. This information should be detailed in the Detainee's Individual Management Plan.

### 3.5 Impact of Suicides, Self-Harm, Suicide Attempts / 'Near Misses' on Staff

Stress reactions following a suicide or attempted suicide / 'near miss' are common and in fact are normal reactions to an abnormal event. The Centre Manager and HSE Manager or equivalent, should work with all staff to ensure staff:

- recognise that stress is a normal reaction
- accept that taking care of yourself is a strength – not a weakness
- are encouraged to talk to a colleague, friend, family member or employee assistance program
- take part in debriefing sessions to the extent to which they are comfortable
- get back to normal routines as soon as possible
- get enough sleep, food and regular exercise
- exercise additional caution when driving long distances or operating machinery
- are supported to seek additional external support if this is required
- are discouraged from using negative coping strategies such as using alcohol or other drugs, or engaging in self-destructive behaviour

### 3.6 Evaluation

Actions taken by staff after an incident are as important as those that take place during an incident.

Any death, suicide attempt or 'near miss' is devastating for the families, friends, staff or associates of the individual. In immigration detention facilities it is likely to have additional significance for those who may have formed close relationships e.g. they travelled on the same vessel, or were / have been in the same facilities for a lengthy period etc. Centre Managers therefore play a critical role in ensuring that clear and sensitive procedures follow an incident.

The evaluation approach should:

- be non-judgemental, and all attempts to apportion blame must be avoided by staff and Detainees – *it must not be an attempt to re-live the incident*
- include next of kin where they are known or where there is an established relationship with other Detainee/s every effort should be made to keep them informed as appropriate and time made to listen (not challenge) their views/ concerns etc
- ensure debriefs take place in a timely manner for all staff
- ensure debriefs take place with Detainees as soon as is practicable ensure the relevant religious leader is included and any faith /cultural traditions respected
- ensure that any learning / suggestions derived are discussed as soon as possible with the appropriate parties

## 4. Escalation Procedure for Disagreement Regarding Outcome of PSP Referral

The PSP protocol is designed to cater for safeguarding all individuals at risk of self harm or suicide behaviour, regardless of any perceptions about their motivation. Only IHMS Clinicians are qualified to make the assessment regarding this and the appropriate response that balances risks and benefits of the possible responses. Nevertheless this should be a collaborative process involving all stakeholders which is discussed and documented formally via the PSP meeting.

In the event that there is disagreement following the PSP meeting regarding the appropriate course of action, including SME level, the concerns must be escalated in the first instance to the respective local centre managers for Serco, DIBP and IHMS. If the concerns cannot be resolved at this level then further escalation must occur to regional and national level in alignment with escalation processes contained within the DSM.

## 5. Roles and Team Arrangements

Sections 11-13 of the PSP Policy (DSM) provide information relating to the roles and responsibilities of all parties involved with the PSP process.

Serco's responsibilities are:

- to conduct an initial self-harm assessment with each Detainee and refer the Detainee to IHMS if appropriate
- be alert to early warning signs; to keep the individual in question safe through engagement and monitoring, while seeking immediate advice from IHMS where there is a suspected risk of self-harm
- follow the clinical advice of IHMS
- engage with people identified as at risk of self-harm in a supportive way
- record meaningful observations of people on monitoring and engagement plans and ensure these are communicated to the PSP team
- respond to any attempted or committed self-harm or suicide incidents and submit incident reports to DIBP on Portal within the prescribed timescales
- ensure that responsibility for supporting people at risk of self-harm is transferred effectively at shift changeovers
- engage in PSP Team processes
- complete all Portal reporting requirements

### 5.1 The PSP Team

While PSP is a clinically driven process, collaborative working relationships between Serco, DIBP, and IHMS are paramount to provide the best care to any person in immigration detention at risk of self-harm or suicide. The membership of the PSP Team will usually be as follows:

- Team leader – Senior Clinician (usually mental health specialist)
- Serco Operations Manager or Shift Supervisor
- DIBP representative(s)



- Any other person as deemed appropriate by the team leader who may be able to offer valuable information relating to the person in immigration detention

Serco must contribute to and implement the decisions made by the PSP Team.

Pertinent information to share at a PSP Team meeting includes but is not limited to:

- How the Detainee states they are feeling, and whether they feel there is anything they need which would help
- Any changes in attitude / behaviour displayed by the Detainee
- What has the Detainee been doing? Have they been involved in any programs & activities?
- Do they interact with staff / other Detainees? Is the Detainee associating with different people from normal?
- Has their routine changed?

A thorough review of the Keep SAFE and PSP SME documents should provide this information, however best practice is always to have a discussion with the Detainee, ensuring to record the interaction in the documentation.

The Keep SAFE documents must be brought to the PSP meeting and the management plan updated according to the decisions made by agreement at this meeting. Staff must ensure when the document is taken to the meeting that sufficient observation sheets are left with the staff monitoring the Detainee and that all staff on shift are cognisant of the details of the plan. The observation sheets must immediately be placed in the document when it is returned to the residence area following the meeting.

## 5.2 Privacy and Confidentiality

Serco staff are, by the nature of their roles, likely to have information pertinent to the effective support / management of a person in immigration detention. This information will be shared with the appropriate parties within the PSP meeting arena, and IHMS will share pertinent information with Serco to enable staff to appropriately support any individual whose needs have increased. The PSP Policy (DSM) contains information relating to the process that must be followed if any party believes another is applying the rules relating to confidentiality so rigidly as to compromise the care of people in immigration detention.

## 6. Levels of Risk and Associated Monitoring

There are three levels of risk and associated supportive monitoring and engagement under the PSP Protocol:

- Ongoing
- Moderate
- High Imminent

The level of supportive monitoring and engagement interaction required to effectively support any Detainee will be detailed on the PSP Care Plan. Serco must adhere to the instructions given by IHMS and detailed in writing on the PSP Care Plan.

Where a detainee is placed on PSP/SM&E resulting from the PSP (or Serco's Keep SAFE policy if the DHSP is offsite or unavailable) and the Detainee remains on SM&E for a consecutive period in excess of 72 hours then any costs incurred by SIS for the period in excess of the initial 72 hours will be payable at the PSP high imminent or PSP moderate variable rates. For clarity, the calculation of the 72 hour period commences at the time the Detainee is placed on a SM&E plan (i.e. the classification of a detainee as High imminent, Moderate or Ongoing is a single event triggering commencement of the 72 hour period).

## 7. Monitoring & Engagement Guidelines

When the detainee is placed on Keep SAFE or PSP SME programme consideration should be placed as to the vulnerability and individual needs of that detainee. Staff engaged in the Supportive monitoring and engagement should where appropriate:

- Engage the detainee through maintaining conversations
- Encourage the detainee to engage in normal routines including meal times, social interaction with others and P&A
- Ensuring that the person cannot harm themselves and/or others
- Seek approval from their line manager to move the detainee to an area within their place of immigration detention that excludes items could reasonably be seen to facilitate self harm

### 7.1 Accommodation Placement

In considering whether a person can be safely accommodated within the place of immigration detention, Serco and departmental Shift Managers and/or Duty Staff will need to determine whether the usual accommodation area of the person, or any of the other available accommodation areas offer safe accommodation (per the definition above). The following may be used as a guide:

- Do these areas have hanging points?
- Do these areas have easy access to large trees, stairways or other fixtures that might allow access to an upper floor or the roof?
- Can any of the following items be found in these areas:
  - objects that can be smashed or broken to fashion a sharp implement?
  - shoelaces, drawstrings, ties, belts, long socks, or material that could be used to fashion a noose?
  - objects that could be ingested?
- If "Yes", can any of these objects be replaced with similar but safer items? If so, the area may then offer safe accommodation.

## 8. Review

It is imperative that the entries made in each document be of a standard sufficient to communicate adequately with other team members and to actively promote Detainee welfare and safety. As such, each Keep SAFE and PSP SME document should be checked on a daily basis by the manager of the residence area, the duty operations manager and the welfare officer / manager, and entries recorded on the management check sheet.

A summary of the management review must be included in the shift change handover information.

In addition to this review process, Serco must work collaboratively with IHMS and DIBP and engage in any PSP reviews initiated.

## 9. Handovers

Handovers at changes of shift are critical. Incoming staff must be fully briefed and continue the monitoring and engagement plans developed by the PSP team. It is the responsibility of shift managers to ensure that plans are adhered to and that reporting requirements are satisfied.

## 10. Behaviour Management Plans / Individual Management Plans / Personal Officer Scheme

An Individual Management Plan and engagement with the Personal Officer Scheme must be in place for all Detainees. Where any concerns about the Detainee are identified through these processes, the Keep SAFE procedures must be followed as outlined above.

Whenever a Behaviour Management Plan (BMP) is considered, staff must ensure IHMS are consulted in the development of the BMP in accordance with procedures detailed in the Behaviour Management PPM (SIS-OPS-PPM-0006).

# Local Escorts

## Serco Immigration Services

### Document Control

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1.1	Visits to financial institutions separated from special purpose visits	2/4/2015

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# 1. Policy

## 1.1 Policy Statement

Procedures and processes will be in place and implemented, to ensure that all transport and escort tasks are executed safely, securely and professionally while maintaining the rights, dignity and privacy of all Detainees in accordance with the Immigration Detention Values and Serco Governing Principles.

The processes outlined within this document, will ensure that all local transport and escort tasks related to the management of Detainees are conducted in line with procedure and within the requirements of our contractual undertaking with the Department of Immigration and Border Protection. In particular, aspects of service delivery that relate to SIS's duty of care obligations and our compliance with the Immigration Detention Values. These obligations extend to the following groups and stakeholders:

- Detainee (PID)
- Visitors (to include other government and Non-Government Organisation (NGO) representatives)
- Other persons (to include subcontractors and the Department)

## 1.2 Related Documents

- Search and Screen (SIS-OPS-PPM-0050)
- Operational Safety (SIS-OPS-PPM-0035)
- Incident Reporting (SIS-OPS-PPM-0019)
- Property Management (SIS-OPS-PPM-0012)
- Approval Process and Operational Changes (SIS-TE-PPM-0001)

## 1.3 Related Forms

- Escort Operational Order (SIS-TE-FRM-0001)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Migration Regulations 1994
- Immigration Guardianship of Children Act 1946
- Australian Citizenship Act 2007
- Detention Services Manual (DSM), DIBP
- AS/NZS ISO 9001:2008 – Quality Management Systems Requirements

## 2. Contractual Responsibilities

### 2.1 Definition – Local Escort Task

Local Transport and Escort (T&E) Services encompass the provision of transport and Escorts for PID(s) and their property to and from the same Facility or another Facility within a 100km radius. Local T&E Services will consist mostly of travel within a metropolitan or district area.

### 2.2 Timeliness of Transport and Escort Services

The Detention Services Contract requires Serco Immigration Services (SIS) to comply with the timings specified in the Transport Request or as directed by the Department Regional Management. The Transport Request is otherwise known as the Request for Service (RFS).

## 3. Planning

### 3.1 Request for Service

For local escort tasks, the request for service can be received from any one of the three main stakeholders to the detention network – Department of Immigration and Border Protection (DIBP), the Detention Health Service Provider (DHSP) and Serco Immigration Services.

The RFS/Request For Transport (RFT) is a document that is provided by the stakeholders to allow the transport and escort task to be undertaken. The RFS received from the Department will be generated on the DIBP Portal computer system. The RFT received from the DHSP will be related to medical issues and those received internally from SIS will relate to Program and Activities (P&A). No escort movement will occur without prior receipt of a RFS/RFT from one of the stakeholders.

The RFS/RFT will stipulate as a minimum, the date of the escort, the identity of the Detainee, the location for collection, the required time of arrival and the point of delivery of the escort task. The RFS/RFT may contain information relating to any known risk factors associated with the task or the Detainee as they are available to the stakeholders at that point.

### 3.2 Required Documentation

All Local escorts will be planned and executed using the following documentation:

- Escort Operational Order – SIS-TE-DOC-0001
- SIS-TE SIS-TE-DOC-0003 T&E Task Process and Approvals Framework – Local
- Approval Process and Operational Changes SIS-TE-PPM-0001

### 3.3 Escort Risk Assessment

The local T&E Manager will ensure the appropriate risk mitigations are in place for each escort task to address the risk and take into account the Security Risk Assessment Tool (SRAT), route and Site Risk Assessment (SRA). The information included within these documents will assist in



the risk determination and appropriate planning including risk mitigation required for each escort task.

The T&E Manager will complete the Escort Risk Assessment (RA) in line with risk assessment policy. If an individual is assessed as presenting a Medium, High or an Extreme risk, or they have been identified as meeting the s501 criteria, are a compliance pickup or belong to a National Operations designated interest group (to be communicated by National Operations), then further consideration will be given to the resources required to ensure the safe and efficient execution the escort task.

The Escort Risk Assessment will be approved by the local T&E Manager in consultation with the facility Intelligence (Intel) Analyst. In detention facilities where there is not an Intel Analyst then the assessment will be approved by the Senior Security Manager onsite.

The risk assessment will determine the staffing levels of each task. There will be a minimum of two staff members for each escort task where vehicular travel is required.

Where the Department raises concerns regarding the appropriateness of an Escort Risk Assessment rating or proposed controls, these concerns must be escalated to the Contract Administrator for resolution. The Escort Task will not proceed until the matter is resolved. Resolution of the issue will be confirmed in writing between the Serco and Department National offices.

When a form of controlled restraint is required, the T&E Manager must seek approval from the DIBP Centre Manager (CM) and follow the approval process as set out in the SIS-TE-PPM-0001 Approval Process and Operational Changes.

### 3.4 Site Risk Assessment

Local escort tasks will be undertaken to a wide range of locations, which may include but are not limited to:

- Community organisations
- Court buildings
- DIBP offices
- Medical facilities
- Recreational locations (parks, libraries, etc)
- Religious buildings/locations
- Residential properties
- Schools & Colleges
- Sport & Leisure Centres

Local T&E will conduct a Site Risk Assessment (SRA) of the identified location prior to the escort task commencing. This assessment will be provided to DIBP. It will identify recognised concerns that contribute to the risks associated with an escort involving the designated location and will inform the detailed planning of the task, including the resources that will be required for the conduct of the escort.

The Intel Analyst at each facility will review the Risk Assessment with the T&E OM to identify any other risk considerations.

In exceptional circumstances, the Risk Assessment may indicate that the risks associated with a proposed location are too many to mitigate, in which case SIS must liaise with DIBP to determine alternative courses of action or to seek cancellation of the proposed escort task.

The site risk assessment includes the following information:-

- Description of site
- Hazards to and from site
- Site integrity (security of site, entry and egress points)
- OH&S concerns
- Vehicular access
- Congestion points (vehicular and pedestrian traffic)
- Access to public transport in the event of an escape
- Additional resources available (Police, Medical Services, etc)

Site Risk Assessments are live documents and subject to regular review and update.

### 3.5 Briefing and Approval

The Transport Scheduling Tool (TST) will produce an Escort Operation Order (EOO), which will address the contractual requirements.

Escort staff will be allocated to the task guided by the risk assessment. Escort staff will be notified of all required information, as included within the EOO and supporting escort documentation, prior to the task as part of the escort briefing.

An escort task is not to be conducted without a detailed briefing by the T&E Manager responsible. This will include the T&E Manager printing the Detainee risk assessment (with photo) of the Detainees on the escort and stipulate any additional requirements i.e. restraints or EEP. When the T&E Manager is unable to provide a briefing, the Centre Manager or the General Manager is to be notified immediately for further advice.

All EOOs are to be approved by the relevant managers as per the "Review and Approval Process". When determining the proposed timings of the escort, local T&E Management will factor in time to ensure that the Detainee(s)' welfare needs are met, including but not limited to the provision of refreshments, access to bathroom facilities, and providing a rest break of at least 15 minutes for every two hours of surface travel.

### 3.6 Local Escort Planning Responsibilities

It is recognised that there exists a level of inherent risk associated with any Local escort task. Accordingly, all Serco Immigration Services Transport & Escort Officers and Managers will ensure that the ongoing detention security of the Detainee or Detainees is prioritised.

It is the responsibility of local Transport & Escort management to:-

- ensure that an adequate and effective risk assessment has been prepared in respect of the management of the individual, on the basis of information available and in line with the National risk assessment policy;

- ensure that this risk assessment has been agreed with DIBP and is reflected in the Request for Service (RFS);
- ensure that the site risk assessment is current and has been robustly reviewed;
- ensure that an Escort Operational Order is provided for the escort task;
- ensure that the escort is staffed appropriately, at all times, following consideration of all pertinent risk management factors and that an officer within the escort team is designated as Team Leader;
- ensure that the staff involved in the escort task are provided with the resources necessary to manage the escort effectively, which will include, but not be limited to, the provision of escort documentation, an escort pack and a mobile telephone;
- ensure that all staff are briefed on the expectations of management in respect of the escort task and to confirm that they understand clearly said requirements.

It is the responsibility of the Transport & Escort team assigned to the escort task to:-

- ensure that they are provided with all necessary resources to undertake the escort;
- confirm that they understand and will comply with the contents and directions of the Escort Operational Order and accompanying Risk Management documentation as it relates to the escort task.

## 4. Operational Implementation

### 4.1 Collection of Detainee(s)

Detainee(s) will be collected from the appropriate location as designated in the RFS/RFT.

The identity of all persons will be verified against the details of the individuals on the RFS/RFT, the Detainees photographic identification (ID) and the EOO. Should any discrepancy be noted the escort must not commence and the issue should be escalated by the escort Team Leader to local T&E Management.

Where appropriate, all Detainee property will be accounted for in accordance with SIS policy.

Any prescribed medication belonging to the Detainee(s) shall be retained by the escort Team Leader for the duration of the escort. Administration of any medication must be in accordance with written instruction from the DHSP and must be recorded on the EOO Log.

All Detainees will be asked to declare any injury/illness prior to departure. If any injuries/illnesses are disclosed, the escort Team Leader must contact the T&E Manager for further instruction. The local T&E management team may contact the Triage Line, medical staff at the facility, or DIBP for further advice.

### 4.2 Searching of Detainee(s)

All searching will be undertaken in accordance with SIS policy.

### 4.3 Departure and Transit

Prior to departure Detainee(s) will be briefed by the escort Team Leader on the conduct expected during the escort and will be offered the opportunity of attending the toilet facilities and may be provided with refreshments, e.g. food and fresh water.

The Detainee(s) will be escorted to the T&E vehicle and seated in accordance with accepted procedure and training provided to staff. This may mean that the Detainee is escorted utilising a controlled restraint technique.

The escort will only commence when the escort Team Leader is satisfied that it is safe to do so. The escort Team Leader will inform the local T&E Centre of the time of departure. This will also be recorded in the EOO and Log.

The risk profile of the escort can change at any point. Therefore, staff must act in accordance with training and instruction received, to mitigate any risks as they present.

Should any situation arise during the course of the Local escort, that deviates from the policy or briefing, the local T&E Manager must be contacted by the escort Team Leader. The escort Team Leader does not have authority to work outside of policy and the escort briefing by the T&E Manager, unless the presenting situation impacts immediately on the health and safety of those engaged in the escort.

#### 4.4 Route

The route for each escort should be the most direct possible to ensure Detainee(s) are not in a vehicle longer than necessary. When deciding on the route the escort team takes, the T&E Manger will consider the following factors prior to briefing staff on the escort task:

- Most direct route possible
- Vehicle capabilities
- Welfare needs are sufficient
- Any potential risks that may arise are manageable by the escort team

### 5. Escorts to Medical Appointments

Escort officers must respect the privacy and dignity of Detainees at all times, and generally, should not be present during a medical consultation.

Should the planned location of the medical consultation result in the Detainee no longer being within arm's length of the escort officers, the escort Team Leader should request to view the room in which the consultation is to occur prior to the appointment commencing. This will allow a dynamic assessment of the area to be undertaken to determine and identify any security issues and mitigation strategies required to maintain the security of the escort. If satisfied with the security of the room, the escort Team Leader may permit the consultation to commence and will wait for the Detainee outside the room. This decision must be included within the EOO Log.

Where the Detainee is deemed a risk to either themselves or others, or the room does not provide the necessary level of security, the escort officers will remain present during the consultation without requiring the consent of the Detainee. Where this occurs, the Detainee may decide not to continue with the consultation. This decision must be included within the EOO Log.

Any escort officers present during a medical consultation, must conduct themselves in a professional and discreet manner. Personal or medical information disclosed during the consultation is private to the Detainee and is to be treated as confidential information.

## 6. Program & Activity Excursions

P&A excursions offer Detainee(s) the opportunity to have a 'normalised' social experience. While escort officers should support Detainee(s) and promote an enjoyable experience, they must remain vigilant and ensure that they continue to monitor the mood and safety of those participating. The activity will be coordinated and run by the P&A officer appointed to the task.

Only excursions approved by the Department as part of the monthly P&A schedule or additional excursions agreed by DIBP and Serco, will be provided.

The local T&E team will ensure that all proposed excursion sites have a current risk assessment before the P&A schedule is finalised. The draft activity schedule will be provided to the T&E Management team to allow planning for the proposed tasks before approval of the schedule is sought from the Department.

It is the responsibility of the local facility P&A team to ensure that T&E Management has agreed the excursion schedule before a request for approval is submitted to the Department. Once approved by the Department, the finalised activity schedule will be provided to the T&E Management team to allow planning within the Serco TST.

During the course of the escort, Detainees will be offered food and refreshment, toilet breaks and comfort stops, and if the excursion activity is outdoors sunscreen must be provided.

## 7. Escorts to Courts/Hearings/Tribunals

While held in immigration detention, Detainee(s) may be required to attend court, hearings or tribunals.

When entering the court building, the escort Team Leader should advise the court officials that the Detainee(s) has arrived and should request direction to the identified holding area. This may be a meeting room or a holding cell within the Court.

The Detainee(s) will be provided the opportunity to meet with their legal representative prior to the commencement of their case being heard before the court, hearing or tribunal. The escort Team Leader will advise the legal representative of the need to maintain a security presence and will provide direction on any limiting conditions that will be in effect during the meeting, e.g.; the Detainee(s) will not be permitted to make a telephone call during this meeting or leave the identified meeting room with their legal representative.

Should the planned location of the legal meeting result in the Detainee no longer being within 'arm's length' of the escort officers, the escort Team Leader should request to view the room in which the meeting is to take place. This will allow a dynamic assessment of the area to be undertaken to determine and identify any security issues and mitigation strategies that will be required to maintain the security of the escort. If satisfied with the security of the room, the escort Team Leader may permit the legal meeting to proceed and will wait for the Detainee outside the room. This decision must be included within the EOO Log.

Where the Detainee is deemed a risk to either themselves or others or the room does not provide the necessary level of security, the escort officers will remain present during the meeting without requiring the consent of the Detainee. Where this occurs, the Detainee may decide not to continue with the legal meeting. This decision must be included within the EOO Log.

While presenting at court, the escort staff must follow the direction of the court officials. However, the safety and security of the Detainee must remain paramount. The positioning of staff is at the discretion of the Judge or Member depending on the matter that is being officiated. However, staff must ensure that "Line of Sight" is maintained and access to exits is prevented.

All mobile telephone devices must be switched to silent within the court, hearing or tribunal and the escort staff must not engage in telephone communication during this time.

Should the court, hearing or tribunal be adjourned, the escort team will return the Detainee(s) to the identified interview room or holding room, if available. Should one not be available, the Detainee(s) will be escorted to a secure seated area away from the general public.

On completion of their appearance before the Court, hearing or tribunal, the Detainee(s) will be permitted opportunity to meet with their legal representative. This meeting will take place in a secure location in accordance with the instruction detailed above.

On completion the escort Team Leader will contact the local T&E Centre to advise of the return of the Detainee(s).

## 8. Transfer to Directed Persons

There are occasions where Detainees within Serco's care may have the responsibility for their immigration detention transferred to another person / institution e.g. medical facility, school, college, etc. In such situations, identified individuals at these institutions will be recorded as 'Directed Persons' for the purpose of maintaining immigration detention.

Transfer to a 'Directed Person' will only be facilitated after receipt of a RFS from the Department clearly stipulating that immigration detention will be transferred. The RFS must contain as a minimum the following information to allow transfer to occur:-

- A clear indication of the request to transfer custody
- The name of the person whom is the 'Directed Person'
- The address of the location to which the escort will be undertaken
- The duration of period of immigration detention transfer

A 'Transfer of Custody' document will be provided by the Department as an associated document to the RFS. Transfer of immigration detention responsibility will not be undertaken until the 'Transfer of Custody' document has been signed by the 'Directed Person'. The 'Transfer of Custody' document may include a list of those individuals at the destination location that may act as 'Directed Persons'.

It is the responsibility of the escort Team Leader to confirm the identity of the 'Directed Person' prior to the transfer of custody occurring, which will include requesting photographic identification.

## 9. Special Purpose Visits

### 9.1 Application for a Special Purpose Visit

Detainees may make an application for a Special Purpose Visit. Detainees do not have a right to attend a SPV, nor is there an entitlement to receive the opportunity for this particular escort task. The application will be considered by DIBP and Serco Immigration Services prior to any approval being given for such a visit.

Special purpose visits are visits by detainees where significant compassionate or humanitarian circumstances exist. These circumstances may include the death or critical illness of close family or the birth of a child to the detainee.

A SPV will only be conducted if the escort task has been approved in writing by DIBP, and following the provision of a request for service.

### 9.2 Escorts to Residential Properties

When escorting a Detainee within a residential property escort officers will respect the property as they are entering an individual's home. Any escort officers present during the SPV must conduct themselves in a professional manner.

Prior to the Detainee leaving the escort vehicle, the escort Team Leader will meet with the property owner and explain the limits of the SPV as determined by the original application and risk assessment. This may include, but is not limited to, determining agreed areas of the property, including the garden that the Detainee will be allowed to enter. If agreement is not reached on the conduct of the escort then the SPV will not proceed and the escort Team Leader will contact local T&E Management for direction.

The visit will only be allowed to occur if those named on the SPV application are physically present within the property at that time. Should other individuals be identified as being present within the property. The SPV will not commence until confirmation is received from Local T&E Management that the escort may proceed as planned.

The escort Team Leader will undertake a full search of the property prior to the escort commencing. This will allow a dynamic assessment of the property to be undertaken to determine and identify any security issues and mitigation strategies that will be required to maintain the security of the escort. This search will determine whether it is safe for the escort to proceed. Escort officers will not remove their shoes when entering a property. Any request to do so will result in the SPV being immediately cancelled and the Detainee(s) will be returned to the local Facility.

During the course of the SPV, the Detainee will remain within 'Line of Sight' of the escort officers at all times. The Detainee will not be permitted to engage with any individual in the property without an officer being present within the room or area. Only sealed drinks purchased from a shop are to be consumed by the Detainee(s) during the escort and will be examined by the escorting officers before being passed to the Detainee. Escort officers are not to accept any food or beverages from the individuals within the property during the course of the escort.

Where more than one Detainee is being escorted as part of the SPV, each Detainee will be allocated an officer for monitoring purposes, as part of the security detail. This allocation of role will be recorded on the EOO and Log.

On identifying any concerns regarding the ongoing conduct of the SPV, the escort Team Leader will contact the local T&E Management. The local T&E Management will determine whether the escort should cease or whether other mitigating strategies are deployed. The decision will be recorded within the EOO Log.

## 10. Escorts to Financial Institutions

Detainees may make an application to visit a financial institution. The application will be considered by DIBP, and if approved, a Request for Service must be raised.

Prior to the Detainee leaving the escort vehicle, the escort Team Leader will enter the financial institution to undertake an assessment of potential risks or threats to the security of the escort. The escort Team Leader will ask for the Detainees personal financial matters to be considered in a private room.

If a room is not available, the escort team will remain within close proximity to the Detainee as they are served at the financial desk/counter.

Due to the personal nature of the individual Detainee's financial dealings, the escort team will conduct themselves in a professional manner throughout.

As the escort is in a public setting, the escort team will continually assess the environment against potential threats to the security and safety of the escort.

## 11. Escort to Medical Facilities

When escorting a Detainee(s) to a medical facility to attend a SPV, the escorting officers will conduct themselves in a professional manner at all times, noting the environment within which they will be working.

Prior to the Detainee(s) leaving the vehicle, the escort Team Leader will meet with the designated manager of the Ward or Unit in which the visit will occur, to agree on the limits of the visit and to ensure the ongoing care of other patients is not impacted while the Detainee(s) is in attendance.

Escorting officers will maintain a discrete position, depending on the agreed risk mitigations, while the escort task is occurring, to allow the Detainee to interact with the patient during the period of the visit. The Detainee will not be permitted to interact with other patients and should the visit result in distress to other patients then the escort task will be terminated and the Detainee will be returned to the local Facility. A decision to terminate the escort will be recorded on the EOO operational log.

Personal or medical information disclosed during the course of the SPV is private to the individual whom the Detainee is visiting and is to be treated as confidential information.

## 12. Transport for People being released into the Community

It is the responsibility of T&E, to escort Detainee(s) who are being released into the community. As the individual being released is no longer in immigration detention, the role of the escort officer is limited to a transportation support role.



While the escort officers must continue to support the safety, security and welfare of the released person(s) who they are escorting, they have no power to detain the individual who is being escorted. Should the released person refuse to undertake any direction provided by the escort officer, then the escort Team Leader must immediately contact local T&E management for guidance and assistance.

Escort officers will assist the released person to settle into new accommodation and where motel/hostel accommodation has been booked, the escort officers will assist with check-in of the person before disengaging from the task.

Where the escort is to an airport or train/bus station, escort officers will assist with check in and then support the released person(s) until their departure. Upon confirmation that the released person has departed, the escort officers are free to disengage from the task.

Where a released person is not being met by another agency at an interstate destination, an escort team will be arranged to meet and accompany them to their initial point of accommodation and assist as described above.

It is the responsibility of the escort Team Leader to ensure that the released person is provided with all personal property and documentation (including temporary living allowance). Confirmation of this action will be recorded on the EOO Log.

## 13. Maintaining Detainee Welfare, Dignity and Privacy

SIS will make every effort to maintain the welfare, dignity and privacy of the individual being detained; however, identified risk factors may affect the security presence necessary to mitigate any operational management concerns.

All Detainees will be provided access to fresh water during the course of the escort task. Provision will also be made for meals and rest breaks as determined by duration of the escort. When managing the Detainee while they are using toileting facilities, the escort team will operate in a manner that does not unnecessarily intrude on the privacy of the individual unless the risk assessment relevant to the Detainee determines that this would not support the overarching security needs.

Regardless of the level of risk determined for the escort, the Detainee will not be permitted to fully close the door to a bathroom.

### 13.1 Use of Force

Use of Force will only be used in accordance with SIS Operational Safety policy.

### 13.2 Local Escort Operational Implementation Responsibilities

It is the responsibility of local T&E management to:

- Ensure that regular communication is maintained with the escort team as may be determined by the Detainee risk rating and the duration of the escort;
- Ensure that all reporting has been completed in line with policy.

It is the responsibility of the T&E team assigned to the escort task to:-

- Remain focussed and alert during the escort task, ensuring that the Detainee(s) remains within their control at all times;
- Prioritise the safety, security and welfare of the Detainee(s);
- Undertake a continuous review and assessment of the risks that arise during the escort task, taking immediate action to mitigate any identified risk;
- Take appropriate steps immediately to protect the Detainee(s) and any others from harm;
- Ensure the Detainee(s) remains within arm's length of the escort team at all times apart from circumstances in which this would undermine the Detainee's privacy and dignity, unless the risk assessment indicates the need for a higher level of monitoring;
- Ensure under those circumstances when the Detainee is not within arm's length, that no barriers to engagement are placed between the escort team and the Detainee. For example, ensuring that the Detainee is not able to close a door between themselves and the security escort;
- Complete all necessary escort documentation that arises during the task;
- Maintain contact with the local T&E Management team, to provide regular communications on the conduct of the escort and to advise of any concerns or questions that arise during the course of the escort;
- Maintain a safe working environment;
- Inform local T&E Management of any incidents as appropriate.

### 13.3 Occurrence & Incident Reporting

The escort team will record all occurrences within the EOO Log during the course of the escort task. It is the responsibility of the escort Team Leader to ensure the accuracy and content of the EOO and Log.

The escort Team Leader will notify local Transport & Escort Management immediately of any incident as it arises during the escort task.

Local Transport & Escort Management will ensure that the escort team has followed all instructions in relevant PPMs, including contingency plans and Evidence Management where appropriate. The local Transport & Escort Management team will ensure all relevant parties are informed in accordance with the Incident Reporting PPM.

Local Transport & Escort Management will ensure that the Escort Operational Order has been completed correctly during the course of the escort task and that all entries are made within the DIBP Portal system.

# Operational Planning

## Serco Immigration Services

### Document Control

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## 1. Introduction

### 1.1 Policy

Timely and appropriate operational planning contributes towards successful and cost effective business outcomes. Operational planning ensures tasks are sufficiently prepared for and assists to minimise risks. The successful completion of activity and effective risk management directly enhances the reputation of Serco Immigration Services (SIS), which leads to an increased likelihood of contract success and other business development opportunities.

Effective operational planning will assist managers and staff at all levels throughout the business to ensure that the services provided by SIS to the Commonwealth accord with our contractual obligations. In particular aspects of service delivery that relate to SIS' duty of care obligations and our compliance with the Immigration Detention Values. These obligations extend to the following groups and stakeholders:

- People in Detention (PID)
- Visitors (to include other government and Non-Government Organisation (NGO) representatives)
- Other persons (to include subcontractors and the Department)

Serco is required to create operational orders for tasks involving the movement of detainees to and from an Immigration Detention Facility (IDF). It is a contractual requirement for SIS to generate operational plans that direct and support network operations. These operations may be complex in nature or may pose an elevated risk to SIS or the Department of Immigration and Border Protection (DIBP). SIS and DIBP senior executive require the creation of operational plans that demonstrates the application of the planning process prior to the conduct of high profile activities or during an incident.

When the network operational tempo is high, necessarily, the number of operational plans developed increases commensurately. It is imperative that there is consistency across the network for all plans and formats to ensure a consistent and professional outcome.

### 1.2 Related Documents

- Intelligence and Operational Risk Management Policy & Procedure Manual (PPM) (SIS-OPS-PPM-0021)
- Transport and Escort PPMs)
- Emergency Response Team PPM (SIS-OPS-PPM-0045)
- First Response Negotiators PPM (SIS-OPS-PPM-0056)
- Operational Plan (SIS-OPS-FRM-0084)
- Risk Management Plan (SIS-BUS-DOC-0010)

### 1.3 Legislative and Standards Framework

- Migration Act 1958
- Migration Regulations 1994
- Immigration Guardianship of Children Act 1946
- Detention Services Manual, DIBP

## 1.4 Abbreviations

**Table 1 – Abbreviations**

Acronym	Description
AFP	Australian Federal Police
DIBP	Department of Immigration and Border Protection
ECC	Emergency Control Centre
FDS	Facilities & Detainee Services
IDC	Immigration Detention Centre
IDN	Immigration Detention Network
PID	Person in Detention
RA	Risk Assessment
RFS	Request for Service
STRA	Security Threat and Risk Assessment
SIS	Serco Immigration Services
T&E	Transport and Escort

## 1.5 Planning Document Hierarchy

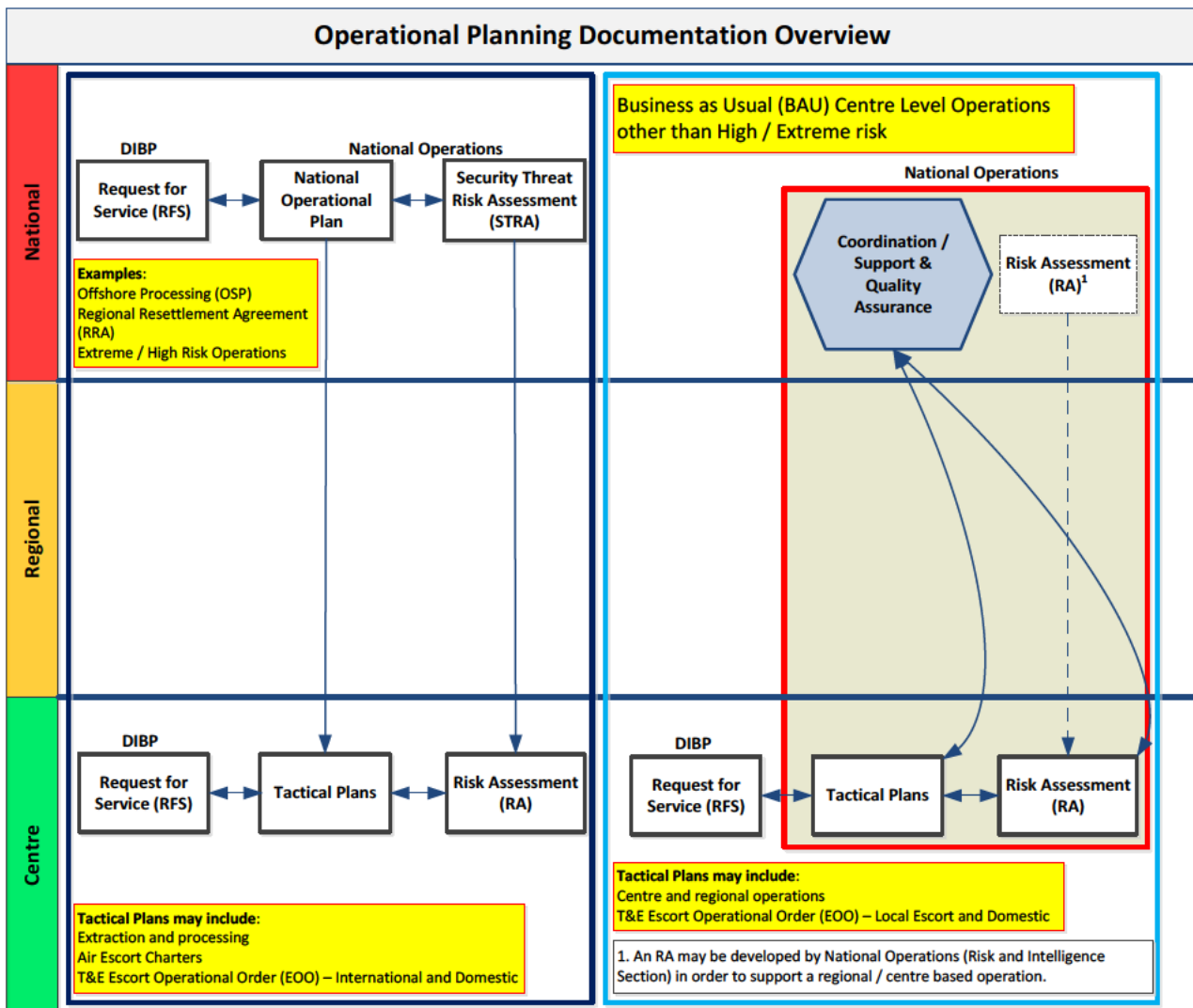
There is a range of planning documents that are prepared at the national, regional and centre levels within the immigration detention network (IDN). The key planning documents that will be produced, at a minimum, when planning and conducting operations within the IDN are detailed at Figure 1.

The intent of Figure 1 is to demonstrate the relationship between the National and Centre level planning documentation (it does not reflect management structure, control or operational responsibilities) in the implementation of Government policy on behalf of the Department.

Figure 1 outlines two different models in the development of operational plans to support service delivery by SIS. The left-hand side process, surrounded by a dark blue box, represents a deliberate planning activity, which has been initiated by the National Office in response to a request for operational support from the Department. In this situation, an overarching National Operations Plan and accompanying Security Threat Risk Assessment (STRA) are developed to provide direction to regional and centre level management and staff. The centre planning and operational staff will subsequently develop the respective tactical level plans in order to execute the task, drawing on the guidance and direction contained within the higher-level operational documentation.

The second process model, surrounded by a light blue box, represents a business as usual (BAU) centre level planning activity. In this circumstance, the required tactical level planning documentation is produced by the centre's operation and planning staff in consultation with National Operations – there is no National Operations Plan. In some cases, the tactical plan will be cleared for release by the centre through National Operations, dependant on considerations such as the complexity and risk assessment. There may also be some additional support to centre staff by National Operations in the development of the Risk Assessment (RA) and other planning products (to include the provision of satellite imagery etc).

Figure 1 – Operational Planning Documentation Overview



A more detailed explanation of the Planning Document Hierarchy is contained at Annex A.

Activities within the IDN that may require the development of a National Operations endorsed plan could include the following:

- Contractual obligations as prescribed under the Detention Services Contract.
- Any change in Government policy that necessitates tactical level actions beyond centre BAU operations (i.e. OSP / RRA) or as directed by the Department.
- Any activity that is assessed to represent a HIGH or EXTREME risk in accordance with the Serco Risk Management Plan (SIS-BUS-DOC-0010).
- Any activity that is high profile in nature and may have the potential to cause reputational damage to either SIS or the Department.
- Any other operational activity when directed by either the National Operations Director, National Operations Manager or Regional General Managers (e.g. ongoing management of critical incidents).

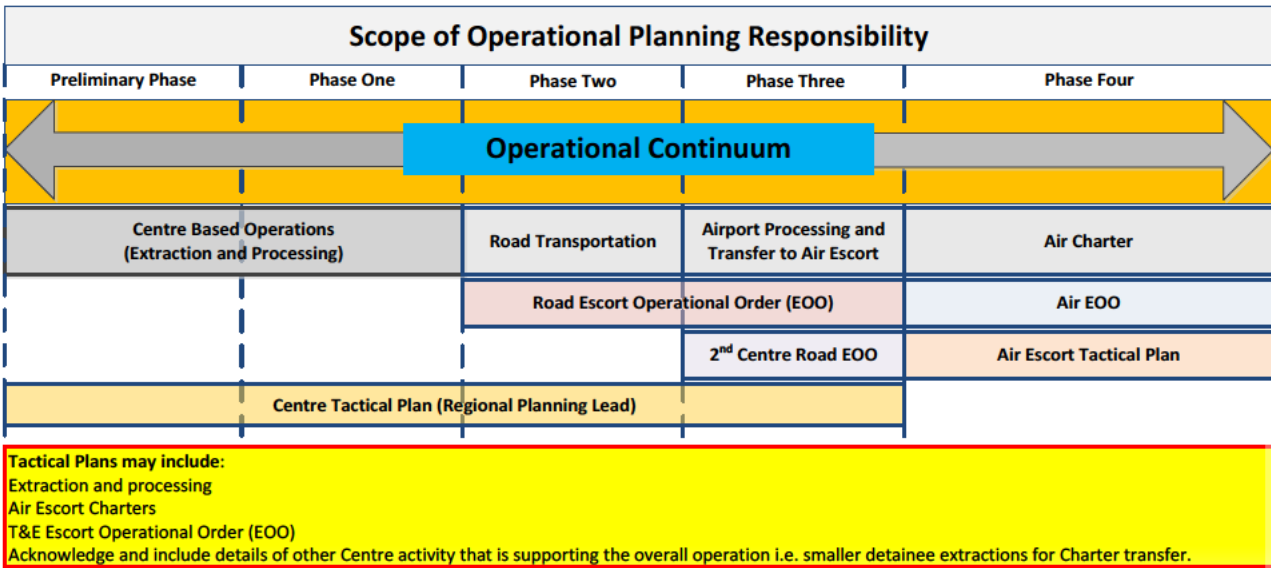


### 1.6 Planning Responsibility

The development of centre level planning documents, when an operation incorporates existential elements and activity, will require a collective approach. Figure 2 is a generic graphical representation of how respective plans align in regards to an operation where detainees are to be returned to their country of origin. In outline the operation involves detainees from two facilities, where one facility (with a larger cohort of detainees) has the planning lead. National Operations in consultation with Regional and Centre Managers will direct the planning lead. This planning effort does not remove respective responsibilities (T&E, other detention facilities or National Office) for the development of plans that are specific to certain phases of the operation.

The lead centre retains responsibility for the overall synchronisation and coordination of the respective planning efforts and will need to include these elements in the overarching plan that is developed (for example in Figure 2 this would be from the Preliminary Phase through to the conclusion of Phase Three). National Operations staff will remain engaged during the development of the plan and are to provide planning assistance as required. In this example, the final endorsement of the plan would be sought through the Operations Director and / or National Operations Manager.

**Figure 2 – Scope of Operational Planning Responsibility**



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## 2. Background

### 2.1 Purpose

The purpose of this PPM is to provide guidance to operational planners within the IDN and to assist them with the development, content and format of operational plans. All operational managers and planners are to apply the principles of this guidance when preparing operational plans. Adherence to the principles and considerations will result in consistency across the network and ensure sufficient detail is provided to the Department, National Operations Team and other supporting stakeholders to enable an understanding of the specific requirements for the operation to be conducted.

### 2.2 Why Planning?

A good planner is able to quickly grasp a thorough understanding of an issue or situation, perceive the desired outcome, and lay out the effective ways of achieving that result. Planning helps managers to develop and effectively communicate a common vision between their staff, the Department, and other stakeholders. Planning results in a directive for future action (plan and orders) that synchronises the action of our staff and their respective capabilities in time, space, and purpose to achieve the task at hand in an efficient and effective manner.

The measure of a good plan is not whether execution transpires as envisaged, but whether the plan facilitates effective action in the face of unforeseen events. An activity that is well planned and communicated to the respective stakeholders will engender initiative (a balanced and appropriate response based on rehearsed contingency) should the situation change.

Plans do vary in the scope, complexity, and length depending on considerations such as the nature of the task and the risks involved. Generally, managers and their staff develop plans well in advance of execution, and the plan is not executed until directed by management at the appropriate level (either centre, regional or at the national level – depending on the task).

Planning is a process to ensure operational success and assists in managing risk. Therefore, the operational planning process is a fundamental business activity to ensure SIS is sufficiently prepared to conduct operations and to manage identified operational risks within the IDN. SIS Operational Plans establish accountability for all stakeholders involved, and when the process is undertaken in a thorough manner, the outcome will be operational success. Additionally, planning can assist in identifying and managing risks, which may affect the execution of an operation. Planning highlights preparedness gaps and helps to ensure all risks are within acceptable business risk thresholds. Importantly, planning is the mechanism to ensure all processes, functions and resources are available to support the conduct of an operation.

Undertaking planning process will assist those who are responsible for the conduct of the operation to:

- understand and develop solutions in response to a Request for Service (RFS)
- minimise or prevent problems occurring during an operation
- provide the ability to anticipate events and adapt to changing circumstances (robust contingency planning)
- identify and organise the assets / resources required, determine tasks and prioritise effort
- direct, coordinate, and synchronise action.

When undertaking planning activities, planners are guided by basic planning principles and considerations. Principles are those aspects of the planning cycle, which are applicable to most environments; planning considerations are those elements, which should be thought through for the particular operational environment.

## 2.3 Planning Principles

When undertaking a planning activity, the planner should apply the following principles:

- Identify the mission, supporting goals and stakeholders involved in the operation.
- Include input from all stakeholders involved in the operation.
- Understand each stakeholder's role, responsibility, capabilities and limitations.
- Apply logical and analytical problem-solving processes to address the operational complexity and reduce, as best as possible, operational uncertainty.
- Identify and understand the implications of the identified risks, including in the context of known hazards, risks and threats to the operation (drawn on lessons learned from similar operations conducted in the past).
- Demonstrate flexibility in planning development, which will account for traditional incidents and provides a mechanism to deal with evolving operational uncertainty.

## 2.4 Planning Considerations

When undertaking a planning process, the planner should consider the following:

- What is the mission to be achieved, what resources are required and the time available to conduct the mission.
- What are the management (command) lines of authority and who are the key personnel?
- Specify the applicable governance and / or legislative requirements.
- Identify the mutual support requirements are required from other stakeholders to ensure mission success?
- Identify the tasks that are to be conducted and any additional resources required to achieve those tasks.
- Analyse the required time and space to ensure all elements involved in the operation are synchronised, and know where they need to be and by when.
- Detail the operational responsibilities: who is responsible for particular tasks / requirements, what to do; why to do it; when to do it by.
- Must be completed in sufficient time to allow for review, amendment and senior and executive management approval.
- Detail any limitations and / or impacts on the operation based on an analysis of infrastructure and environment (i.e. weather, roads, aircraft, vehicles)

## 2.5 Quick Operational Assessment / Appreciation

Upon receipt of an RFS from the Department, or an operational concept or planning directive from National Operations, the planner will undertake an appreciation of the assigned task. One method to undertake this assessment is attached at Annex B and includes a series of questions and actions under the following broad headings:

- Operational analysis
- Risk analysis
- Organisational analysis
- Develop and execute.

## 2.6 Plan Requirements

An operational plan is designed to inform all stakeholders of the detail of an intended operation. The plan must contain sufficient detail to inform stakeholders of what is to occur, how the operation will be conducted, who will be involved, the intended timing schedule, and what resources will be needed to conduct the operation. Importantly, application of the planning process will identify the capability and resource requirements and should identify any capability and preparedness gaps.

An authorised delegate (national, regional or centre level) must approve all operational plans. Depending on the nature of the operation and the residual risk level, plans must be approved at an appropriate management level within SIS. For example, for the offshore transfers of detainees from Christmas Island or Darwin, the National Operations Manager is the approving authority.

Regional and Centre Managers are able to approve BAU plans. Operational Plans which involve risk ratings of HIGH or above (consistent with the Serco Risk Management Plan), e.g. movement of detainees, who have a violent history, will require reviewed and potential authorisation by National Operations.

## 2.7 Observations

The following are some general observations in regards to the planning of operations within the IDN:

- **Seamless planning.** There is no distinction between SIS business units when it comes to the conduct of a successful operation. The Department and other stakeholders will not distinguish between centre and regional business unit responsibility when an operation is not well planned, coordinated and conducted. It is therefore the responsibility of the lead planner to coordinate plans and planning inputs from all areas of the business, which contribute to the overall operational planning document. Planners need to take a holistic view to ensure that all elements of the respective plans are synchronised and coordinated (from the centre extraction and processing plan for an international transfer through to the T&E road and air escort components of that operation etc).
- **Risk treatment.** All planning documents are to demonstrate that the risks as identified in the STRA / RA have been appropriately treated to mitigate the risks. Simply attaching the STRA / RA to an operational plan without reference to the identified risks and a treatment strategy within the planning document will not suffice.

- **Coordination.** The importance of early engagement and coordination with all stakeholders contributing capabilities to the execution of the operation / tactical plan must not be underestimated. The conduct of regular meetings to develop courses of action and supporting concepts for plan development is key to the success of an activity by building understanding and support for the plan amongst stakeholders. Coordination is particularly important where external service providers and other agencies are providing direct support to the conduct of the operation.
- **Contingency.** An important component in the treatment of identified operational risks is the development of robust contingency plans. Whilst some contingency plans may fall into the realm of Standard Operating Procedures (SOPs), there are others that will require detailed understanding by staff and coordination with contributing business units and external stakeholders. Some examples of contingency plans that could be applied to a range of operational and tactical plans include, but are not limited to:
  - Concerted attempt to breach perimeter fence
  - Critical Incident within the detention facility
  - Detainees on Rooftop
  - Fire
  - Threatened and Actual Self-Harm
  - Detainee refuses to board / disembark
  - Attempted escape
  - Assisted escape
  - Unscheduled aircraft landing
  - Refusal by destination nation
  - Disruption during flight
  - In-flight emergency
  - Medical emergency (detainee / Escort Team personnel)
  - Death of a detainee

### 3. Procedure

#### 3.1 Plan Format / Structure

Operational Plans are to be developed using the SIS Operational Plan format, as endorsed by the Director Operations (several framework examples of which are attached at Annex B). Plans are prepared using the acronym “SMEAC” as a logical means by which managers create and communicate a common vision for successfully achieving an objective / outcome between their staff:

- Situation
- Mission
- Execution
- Administration and Logistics
- Command and Control

An explanation of SMEAC is as follows:

**Situation:** Details the current situation, which has brought about the requirement for the operation. The situation provides sufficient detail to ensure stakeholders understand the environment and risks of the operation that will be conducted. The situation section should be no more than a few paragraphs of half a page of written text, and must be relevant to the operation being conducted.

**Mission:** A succinct statement of the requirement for the conduct of the operation. It should state desired end state. Importantly the mission statement must be an achievable objective. If the mission statement is not achievable, the statement may be too complex and should be simplified. Mission statements should detail what is to be achieved, why, by when, and with whom.

**Execution:** Provides the overview of how the operation is to be conducted. Normally operations are conducted in a number of sequential phases. Each phase of the operation is specified, and the activities which will occur in each phase are detailed. This section of the plan also identifies the operational and enabling support services / activities, and stakeholders who will be involved in the operation. Each group enabling service and stakeholder’s task will be specified. Stakeholders at the national, regional and centre level may include:

- DIPB (to include interpreters)
- AFP (and / or other relevant state law enforcement agencies)
- Customs
- Respective state police
- Serco
  - Centre staff
  - Emergency Response Team (ERT) and First Response Negotiators (FRN)
  - T&E
  - Property
  - Programs and Activities (P&A)
  - Catering
  - Facilities Maintenance (FM)
- International Health Management Services (IHMS)
- Other FM service provider

- International Organisation for Migration (IOM)
- Other external stakeholders

It is not necessary to detail how those groups will carry out their tasks; this level of detail is to be formulated by the respective group commanders / managers and should be documented in either tactical plans or in an SOP. It is expected all group commanders / managers / stakeholders will issue specific tactical orders and / or follow approved SOP relevant to their respective teams.

The Execution Section of the Operations Plan is to be amended to suit the specific operation being conducted. While there are some components of the execution section which may be consistent for all operations, this section must be tailored to ensure the concept operations, groupings and tasks, timings and resource requirements are appropriately identified and assigned to ensure the successful conduct of the operation.

Importantly, the Execution Section must assign operational resources appropriate to the identified risks. This will ensure identified risks are appropriately mitigated through a considered planning process.

Mandatory sections in the Execution section are:

- **Concept of Operations.** A narrative of how the operation is to be conducted from commencement to its conclusion.
- **Grouping and Tasks.** Identify each group involved (contributing business unit or capability) in the operation and detail their tasks.
- **Coordinating Instructions.** Details how each group will be coordinated throughout the conduct of the operation. Coordinating instructions can vary significantly dependent upon the type of operation being conducted. Therefore, this section includes, but is not limited to:
  - Phase times
  - Briefing schedules
  - Opening the Emergency Control Centre (ECC)
  - Delivery of situation reports (SITREP)
  - Vehicles
  - Meals
  - Any rehearsals
  - Training requirements
  - Post operational responsibilities, such as accountability for equipment and personnel
  - Debriefing times and locations
  - Who will submit after-action reports, line-of-duty injury reports, communications logs, etc. and by when.

**Administration and Logistics (Admin & Log):** Provides all the administrative and logistics requirements to support the operation. Detail in this section may include, but is not limited to, the need for vehicles, meals, accommodation, ablutions, and laundry facilities. The Admin & Log section may also provide details for alternative locations to conduct operational tasks due to changes in environmental or operational conditions e.g. wet weather, delayed aircraft, incident management.

**Command and Communication.** This section identifies the command (management) personnel for each group who will be involved in the operation. This section needs to identify the overall operational commander and what control mechanisms are in place to ensure the successful conduct of an operation. Details of reporting timings are also included in this section.

It may be necessary to change command responsibilities during the operation as it transitions through the phases. This can be achieved by providing command detail for each phases of the operation.

Communication details are to be included in this section. Telephone numbers for command personnel, radio call signs and code-words, and a network diagram should also be included.

### 3.2 Attachments and Supporting Documentation

Operational Plans should contain specific notes as attachments. These attachments may relate to immigration policy or SIS contractual obligations, which are relevant to the operation. An example of this are the attachments currently used for offshore processing operations (OSP), which contain specific legal advice and use of force protocols. Notes of this nature, that include legal or endorsed SIS policy, are not to be amended without the approval of the Operations Director or the National Operations Manager. Requests for amendment will not be considered unless there is demonstrated need or a legal requirement to effect the change.

### 3.3 Quality Control

Centre Managers or Operational Commanders (managers) are responsible for ensuring high levels of quality control for all planning documents. Operational plans which do not meet the quality control criteria will not be approved and will be returned to the originator.

### 3.4 File Naming Convention

The following electronic file naming standard convention is to be followed in order to ensure consistency of file naming for operational plans:

- **YYMMDD\_Plan Type\_Operation** (i.e. 131118\_FAM Transfer to Nauru\_Post OSP RRA )

## 4. Queries

Queries relating to the operational planning process utilising the SMEAC structure are to be directed to the National Operations Manager or Operations Support Manager, National Operations Team.

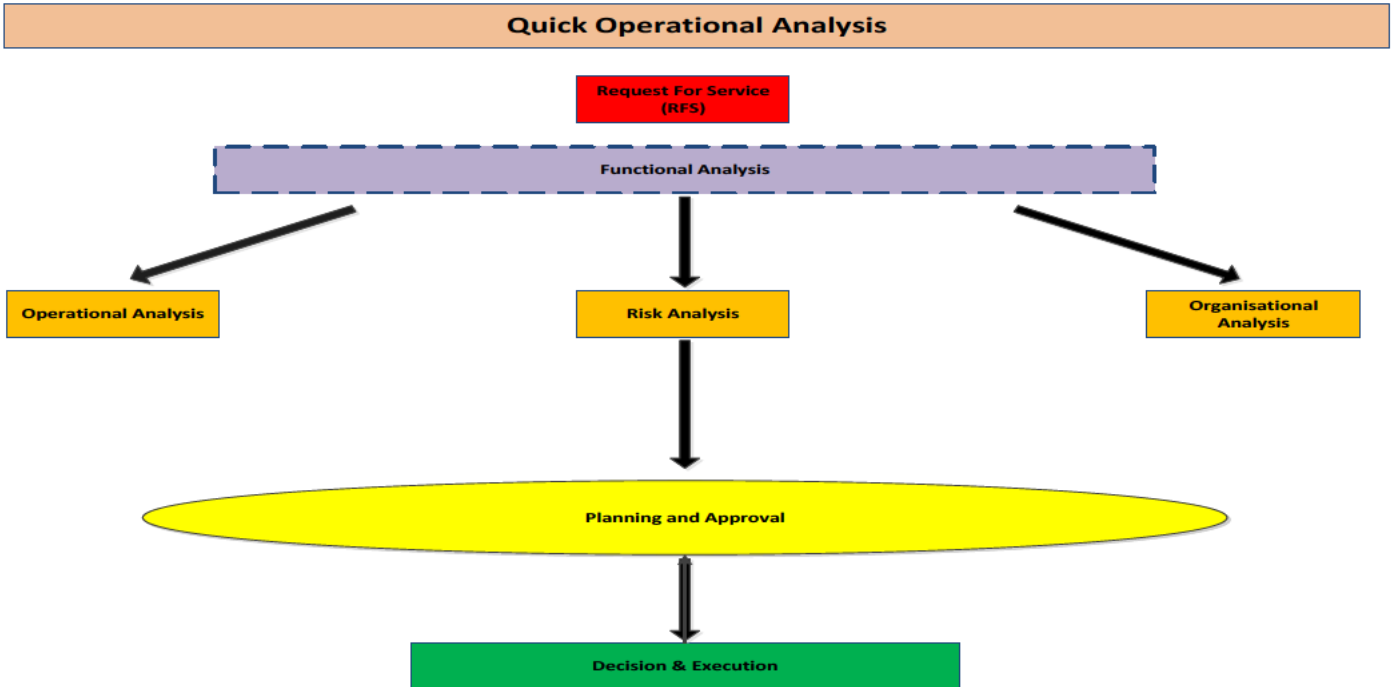


## Annex A – Planning Document Hierarchy

### Planning Document Hierarchy

Level	Plan Type	Comments
National	Operational Plan	<p>Prepared by National Operations in consultation with stakeholders in order to address the following:</p> <ul style="list-style-type: none"> <li>Contractual obligations as subscribed under the Detention Services Contract.</li> <li>Operationalizing any change in government policy such as Offshore Processing (OSP) and Regional Resettlement Agreement (RRA).</li> <li>Other operational activities that have been identified as HIGH or EXTREME risk.</li> <li>Any activity that is high profile in nature and may have the potential to cause reputational damage to either SIS or the Department.</li> </ul>
		<p><b>Security Threat and Risk Assessment (STRA)</b></p> <p>Prepared by the National Security Risk &amp; Intelligence team this document is a key component of the planning process. The STRA forms an attachment to the Operational Plan and informs risk mitigation measures within the National Plan. <i>(The identification of threat and risk are key inputs in the development of operational plans within the IDN. As such the STRA and / or RA are key inputs to the planning process)</i></p>
		<p><b>Risk Assessment (RA)</b></p> <p>Prepared by the National Security Risk &amp; Intelligence team this document informs and support the development of tactical plans at the national, regional or centre level. Centre level planners and intelligence staff can produced an RA without the development of a national document (National Security Risk &amp; Intelligence team will provide assistance).</p>
Regional or Centre Level	Tactical Plans	<p>Prepared by regional or centre level staff in order to execute plans derived either from the National Operations Plan or to facilitate business as usual (BAU) activities at the region or centre level. Examples include:</p> <ul style="list-style-type: none"> <li>Contractual obligations as subscribed under the Detention Services Contract.</li> <li>Extraction and processing of detainees for offshore transfer to an Offshore Processing Centre (OPC) in a Regional Processing Country (RPC).</li> <li>Air escort of detainees for offshore transfer to an OPC in an RPC.</li> <li>International charter transfer to country of origin (extraction and processing, ground transport and air escort plans).</li> <li>Domestic charter transfer operations.</li> <li>Other operational activities that have been identified as HIGH or EXTREME risk.</li> <li>Any other operational activity when directed by either the National Operations Director or National Operations Manager (e.g. ongoing management of critical incidents).</li> </ul> <p><i>(Whilst the T&amp;E Escort Operational Order (EOO) may be sufficient for local tasking for MEDIUM and LOW risk BAU activities it will be accompanied by a tactical plan in accordance with National Office policy when the task meets the above parameters)</i></p>

# Annex B – Quick Operational Analysis



Operational Criteria	Organisational Criteria
What is happening / what do I need to do?	How can I best use my resources?
What are my critical timings?	Do I need any National Level resources?
Do I have the resources / assets required to do the task?	Do I need any other resources?
Have I notified my senior staff / function leads / National Operations?	
Risk Criteria	Develop and Execute
What are the existing threat groups (media / IMG / detainees / staff)?	Fuse all functional planning into single governance document
What risk to they pose to the operation?	Consult / notify / seek approval for plan (if required)
What can I do to reduce / mitigate the risk?	Disseminate plan locally / functional
What is likely to provoke higher risk?	Track progress / inform stakeholders / debrief and learn
What intelligence collection / analysis do I need?	
What risk / vulnerability assessments are required?	

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# Programmes and Activities

## Serco Immigration Services

### Document Control

<b>Document:</b>	Programmes and Activities
<b>Type:</b>	Policy & Procedure Manual
<b>Reference No:</b>	SIS-OPS-PPM-0027
<b>Applies To:</b>	FDS Contract
<b>Owner:</b>	Operations Director
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## 1. Introduction

### 1.1 Policy

Programmes and Activities (P&A) is a fundamental part in helping to promote and maintain positive mental, physical health and, general wellbeing of Detainees. P&A also makes a significant contribution to the maintenance of good order and dynamic security within detention facilities across the Immigration Detention Network (IDN).

A key component of Serco Immigration Services (SIS) approach to decency is through the Healthy Centre Framework, which focuses on:

- Safety: Detainees held in safety with due regard to the insecurity of their position
- Respect: Detainees treated with respect for their human dignity and the circumstances surrounding their detention
- Purposeful engagement: Detainees are able to access a range of Programmes and Activities which as far as possible reflects their individual needs, providing meaning and purpose to their use of time whilst in detention
- Preparation for discharge/transfer or removal: Detainees supported to develop realistic expectations concerning independent living and citizenship values. Detainees supported to maintain contacts with family and friends in preparedness for discharge, transfer or removal.

The Programmes and Activities Operating Model (P&A OM) has been developed in collaboration with the Department of Immigration and Border Protection (DIBP) and Serco Immigration Services (SIS), to provide clarity as to SOW requirements and responsibilities. The P&A OM should be viewed in conjunction with this PPM, although key elements are referenced throughout this document..

### 1.2 Related Documents

- Detention Services Manual - Chapter 5, Section 5 – Programmes and Activities
- Detention Services Manual – Chapter 1, Section 2 – Duty of care to persons in immigration detention
- Programmes and Activities Operating Model
- Healthy Centre Framework
- Personal Officer Scheme PPM (SIS-OPS-PPM-0011)
- Individual Allowance Programme PPM (SIS-OPS-PPM-0040)
- Individual Management Plan PPM (SIS-OPS-PPM-0020)

### 1.3 Related Forms

- Individual Management Plan (SIS-OPS-FRM-0030)
- Daily P&A Attendance Sheet (SIS-OPS-FRM-0037)
- Unstructured P&A Checklist (SIS-OPS-FRM-0027)
- Structured P&A Approval Request (SIS-OPS-FRM-0038)
- P&A Schedule Approval (SIS-OPS-FRM-0056)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual
- Work Health & Safety Regulations 2011

## 1.5 Roles and Responsibilities

**Table 1 – Roles and Responsibilities**

<b>Role</b>	<b>Responsibility</b>
P&A Manager	Provides overall responsibility for delivery of Welfare and Engagement Services and the management of the integrated P&A and Welfare team. Develop and disseminate a monthly P&A Schedule, which reflects the preferences and profile of the Detainees at a detention facility. Consult with other service providers e.g. IHMS and community agencies to enhance the range of programmes available.
Religious Liaison Officer	To coordinate religious and cultural activities for the facility and deliver structured P&A sessions as specified on the approved P&A Schedule.
Activities Officers	Responsible for consulting and engaging with Detainees in the development of monthly P&A Schedules and to deliver structured P&A sessions as specified on the approved schedule.
Welfare Officers	Responsible for assisting locally with the implementation of the Personal Officer Scheme (POS) and identifying and escalating vulnerable Detainees through to appropriate mechanisms. Delivering P&A sessions as specified on the approved schedule to enhance the health and wellbeing of Detainees.
EAL Teachers	Qualified to deliver English as a Second Language or English as an Additional Language (EAL) to Detainees.
Gym/Activities Officer	Appropriately qualified staff to supervise correct use of fitness equipment and deliver physical activities/ programmes as specified on the approved P&A Schedule.
National Welfare and Engagement Manager	Responsible for the development, maintenance and monitoring of Serco's National P&A Catalogue and implementation and assessment of the Healthy Centre Framework at detention facilities. Approve any changes to the process as outlined in this policy or the related forms, to ensure a consistent approach across all detention facilities.



## 2. Procedures

### 2.1 Introduction

Programmes and Activities (P&A) are a critical component of the services delivered within Immigration Facilities. Detainee attendance at P&A supports both the positive maintenance of mental health and general wellbeing of Detainees.

Serco will have a Programmes and Activities (P&A) Manager at each Immigration Detention Facility (IDF).

The P&A Manager will develop and disseminate a monthly Programmes and Activities schedule at each IDF. The schedule must reflect the preferences, interests and profile of Detainees at each facility.

The P&A schedule must deliver structured and unstructured P&A designed to provide educational and recreational opportunities, and diverse meaningful structured activities, that will:

- enhance and support positive mental health and general wellbeing of individuals in Immigration Detention
- create a balance against the necessary routines within the IDF
- encourage Detainees to increase their motivation and self agency through the provision of a structured day
- contribute to the dynamic security of the IDF and the safety of Detainees and those who work in the IDF.

All Detainees will have access to materials and facilities for exercise, recreation, cultural expression, intellectual and educational pursuits to utilise their time in detention in a constructive manner and to enhance their mental health and general wellbeing.

Detainees should be provided the opportunity to contribute to the development, structure and delivery of P&A via the following, but not limited to:

- Detainee Individual Management Plans (IMPs);
- P&A discussions at the monthly Detainee Consultative Committee;
- P&A related Detainee complaints, suggestions or feedback;
- Detainee Surveys

Whilst attendance and participation of Detainees in P&A is voluntary, P&A staff should actively encourage detainee attendance and actively engage with those detainees who fail to attend P&A to establish the reasons for non-attendance.

The P&A Manager will ensure that the approved schedule is widely distributed to:

- Serco staff, including to Operations (Ops) Managers, Transport and Escort (T&E) Managers, Detainee Service Managers (DSMs)
- Detainees
- DIBP staff
- IHMS
- Any other service provider as appropriate

## 2.2 Scope

The scope of the monthly P&A Schedule developed by the P&A Manager will provide a tailor-made programme for all Detainees who are in the facility for a period longer than ten days.

The content will be informed by the outcomes and/or identified needs outlined in the Individual Management Plans (IMPs), which must be developed in accordance with contractual timeframes.

Delivery of P&A will be structured to suit the needs of Detainees. The delivery model is flexible and can be group focused, delivered in a classroom, provided as part of an outdoor activity, or an individual activity tailored to meet an individual's specific needs; for example, someone with mobility issues or mental health vulnerabilities.

The scope and range of P&A must be determined by Detainee interest and need. Allocation of Individual Allowance Programme (IAP) points will only be awarded for structured activities.

## 2.3 Flexibility

The P&A Manager will ensure that monthly P&A Schedules are adequately flexible to respond to changes in the profile of the Detainee population, which may occur over a relatively short period.

The schedule will also vary the types of P&A sessions on offer to maintain the interest and commitment of Detainees.

## 2.4 Programmes and Activities Schedule

The P&A Schedule must be developed using the approved P&A template and submitted monthly to DIBP. The draft schedule should include all planned structured and unstructured P&A, including P&A to be delivered by support service providers and volunteers. The draft schedule must cater for the diverse needs of all Detainees in the facility and should include an appropriate range of educational, health and wellbeing, recreational, cultural and social activities.

It is suggested that the following timeframes be used as a guide to ensure adequate time for monthly P&A Schedules to be developed and approved, ready for implementation the following month:

- Day 15 of the month – FDSP to discuss the draft P&A Schedule with the DIBP Centre Manager.
- Day 20 of the month – FDSP submits the P&A Schedule, along with the P&A Schedule Approval Checklist
- By day 23 of the month – DIBP considers the P&A Schedule, provides feedback to the FDSP as necessary with a view to finding a mutually acceptable P&A Schedule
- Day 23 of the month – DIBP locally seek advice from DIBP national office if approval cannot be negotiated locally.
- Day 25 of the month – DIBP local (or national if escalated) provides approval of the P&A Schedule or DIBP NatO advises that previous schedule will continue until new P&A schedule is agreed. To enable Detainees to fully appreciate the range of activities available to enable appropriate choice of attendance, the P&A Schedule should provide a holistic view of the services and amenities available including religious activities, formal education including library, IT, hairdressers/barber times etc.

The following considerations are used to inform the development of the P&A Schedule:

- Individual Management Plans/Updates
- Detainee Consultative Committee Meetings
- Complaints, Feedback or Request Process
- Detainee Survey
- Religious and Cultural Observances
- Input from Support Services Providers

In the event a draft schedule is not approved by local DIBP, escalation to Serco National Office should occur as per the P&A OM as soon as possible. Serco National Office will undertake the necessary negotiations or discussions with DIBP National Office.

All structured P&A on an approved schedule are subject to abatement unless they reflect services included to assist Detainees' daily planning including formal education for minors, internet, hairdresser and facility shop.

## 2.5 Changes to Scheduled Activities

A decision to cancel or postpone P&A must be made in consultation with the DIBP Regional or Centre Management with reasonable notice. If an Excusable Performance Failure (EPF) has not been granted, Serco may be subject to abatement for non-delivery of that programme or activity.

Changes (additional, cancellation, time/location, or postponement) to structured P&A in an approved schedule must be approved by DIBP through a written notification (via Structured P&A Approval Request form) from DIBP Regional or Centre Management. Changes to unstructured P&A in an approved schedule must be advised to DIBP at the next available morning meeting and confirmed in writing via the Unstructured P&A Checklist form.

This notification process also applies to changes to the unstructured activities occurring out of hours and/or on the weekend.

Serco is obliged to provide an alternative P&A during any month where a structured activity included in an approved schedule is amended or cancelled. If practical the alternate P&A activity should be provided within the same month or as otherwise agreed with DIBP.

Where Serco postpones a structured programme or activity without prior approval/ notification (for example an activity held on a weekend), the DIBP Regional or Centre Management may provide approval to change the schedule after the alternative P&A has been delivered. If this is provided, Serco would be considered compliant with the approved schedule. Requests for approval to change the P&A Schedule retrospectively will be assessed on a case by case basis by DIBP Centre Management. If DIBP approval was not provided, a written request for an EPF may be submitted.

The non-availability of staff or P&A resources is neither a valid nor a sufficient reason to cancel P&A. If there is a risk to detainee safety due to staff that hold specialist qualifications such as Bronze Life Saving Medallion being sick or unavailable, then the structured activity must be rescheduled to occur in the same month. In addition, volunteers such as those who provide specific religious activities may not have an appropriate replacement and while every effort is to be made to prevent cancellation, it should be addressed with DIBP on a case by case basis. Supply of an EPF by Serco does not guarantee that abatement will not be applied.

If a P&A Schedule needs to be modified after it has been approved by DIBP Centre Management, evidence supporting this change must be presented. Evidence could include, but is not limited to, feedback or complaints from detainees, minutes from Detainee Consultative Committees or information collected through detainee IMPs.

Where additional structured P&A are to be included in a schedule, the changes must be approved by DIBP Centre Management. Where additional unstructured P&A are to be included, DIBP Regional or Centre Management must be advised of the changes to the P&A Schedule at the next meeting with DIBP.

## 2.6 Excursions

The P&A Manager will include supervised external excursions in the range of P&A offered to Detainees.

For all excursions included in the P&A Schedule, the P&A Manager will ensure that:

- People in restrictive detention are not eligible to apply for, or participate in, an excursion during the period of restrictive detention
- All excursions proposed are in consultation with T&E through early provision of the draft P&A schedule
- Records are maintained of all movement of Detainees in the Service Provider Portal (SPP) as well as any incidents that occur during any excursion
- Risk assessments for all excursions are undertaken by T&E staff who will ensure they are based on risk management principles and appropriate resources identified and secured

## 2.7 Programme and Activity Integrity

The P&A Manager will ensure that appropriately qualified Serco staff or other providers deliver all structured P&A for Detainees. The P&A Manager will ensure that the necessary approved resources to support the P&A Schedule are available and where appropriate, will ensure that all materials and equipment are tested for operability and safety before Detainees use them.

## 2.8 Workplace, Health, Safety and Environment (WHS&E)

People are Serco's most valuable asset. Serco is therefore committed to the highest standards of safety to protect Detainees, visitors, contractors and Serco staff. All staff have a responsibility to follow all Company safety procedures, as well as applicable laws and regulations. Nothing justifies working around or ignoring any safety rule, whether Company rule, regulation or law.

If staff become aware of, or suspect, any unsafe working conditions or other safety issues, they should report the situation to their manager, or site safety co-ordinator.

### 2.8.1 Individual WHS&E Obligations

Individuals have a responsibility to ensure their own safety and to take reasonable care to protect their own health and safety and that of fellow workers.

- All staff are required to comply with instructions and co-operate with any actions necessary to comply with WHS&E requirements.
- All staff must comply with policies and procedures governing WHS and ensure that they do not act in such a way as to avoid or frustrate such policies and procedures.

Accordingly, staff should:

- report all accidents, incidents or safety hazards as soon as reasonably possible
- not misuse or damage equipment
- comply with instructions, policies and procedures
- use protective clothing and equipment (if required)

### 2.8.2 Serco's WHS&E Obligations

- Ensure workers receive sufficient information, instruction and training in the work that the worker may be required to perform.
- Enable the worker to perform the work without risk to the health and safety of the worker, or any other person.
- Ensure that the workplace infrastructure or equipment, and workplace materials are maintained in a safe condition.
- Ensure the safe handling, packaging, storage and transport of chemicals such as dangerous goods and other harmful materials.
- Provide adequate facilities that workers can access while at work.

### 2.8.3 Serco's Obligation to Detainees

- Ensure safety briefs are conducted prior to any activities being undertaken to ensure risks are clearly identified.
- Ensure equipment is appropriate for use (damaged equipment should be replaced immediately)
- Ensure Detainees wear appropriate clothing footwear and sun protection at all times
- Ensure all incidents involving Detainees are reported as soon as possible, certainly within mandatory incident reporting timescales

## 2.9 Types of Programmes and Activities

Serco must develop strategies to encourage persons in detention to participate in P&A. To achieve this P&A must:

- be relevant, meaningful and beneficial for the Detainee
- be focused on achieving relevant outcomes appropriate to the demographics of people across the IDN
- be consistent in delivery outcomes
- use the nationally approved materials from the Serco National P&A Catalogue

### 2.9.1 Structured Programmes and Activities

Structured P&A organised by Serco generally involve several participants and include, but not limited to:

- individual development
- health and wellbeing sessions
- sporting events
- educational activities

Structured P&A must deliver a sense of purpose and achievement and produce a meaningful outcome for persons in detention. Structured P&A creates incentive for participation to accrue Individual Allowance Programme (IAP) points. Serco will ensure that structured programs have a maximum of 30 Adult detainees and a maximum of 24 for programs specified for detainees below 17 years of age. There must be sufficient structured P&A delivered each week to enable all detainees to earn their maximum IAP quota. Structured P&A will generally be conducted during normal business hours.

### 2.9.2 Unstructured Programmes and Activities

Unstructured P&A refers to leisure and general recreational activities, which include but are not limited to:

- board games, cards, puzzles etc
- watching DVDs (not as part of an organised movie night)
- playing pool, table tennis etc
- computer games

Engaging in these types of activities does not entitle Detainee's to accrue IAP points.

The range of P&A offered will vary across the IDN and will be subject to availability, practicality and interest. Detainees are to be offered a range of P&A from the Serco National P&A Catalogue, including but not limited to:

- religious activities
- cultural activities
- sporting and fitness activities
- use of / access to a library
- educational P&A (e.g. learning English, but excluding any formal qualification)
- excursions
- arts and crafts
- Health and Safety training

When deciding the type of P&A offered, consideration must be given to the demographics of the detention facility population. Detainees are to be consulted on appropriate P&A offered or requested.

### 2.9.3 Detainee Led or Supported Activities

Detainees may express a desire to provide in-class support while a programme or activity is running, or volunteer to lead a scheduled activity. This can include both unstructured and structured activities.

Serco P&A staff retain the responsibility as the lead person in delivering the P&A session.

Detainees leading or supporting structured activities may still earn IAP points, but only at the rate of all other participants.

Detainees acting in either capacity above must be supervised by P&A staff for the duration of the session and be supported in the development of session guides and materials for the session.

### 2.10 Minors Accessing Programmes and Activities

Minors must have access to appropriate P&A. Minors living in a family situation will need the permission of their parent or guardian before they can participate in P&A. A parent or guardian should be encouraged to support children to attend P&A either through attendance with them, as appropriate, or with the completion of any quizzes/reading or homework activity designed for children to complete to achieve IAP points. Serco's key role is to encourage and support parental responsibility and engagement. Specific care and attention must be undertaken to ensure the best interest of a minor is considered when determining access to a suitable range of P&A.

### 2.11 Minors and Education

Serco should encourage parents/guardians of school age children to send children to local schools.

Serco must arrange for Transport and Escort (T&E) services to enable parents and children to participate in school related activities including:

- school registration days for their children
- parents and teacher sessions
- school based sporting activities
- excursions / activities

Should a minor or their parent or guardian choose that the minor not attend school, that issue must be documented within the IMP and communicated to DIBP.

### 2.12 Denying Access to Programmes and Activities

All efforts must be made to ensure equal access to programmes, activities, amenities or religious activities for all detainees. If a Detainee is denied access to any programme or activity, a record clearly identifying the reasons why and any comments in relation to the event should be made.

## 2.13 Religious Activities Programmes

The Religious activities programme, developed by the Religious Liaison Officer (RLO), must be integrated with the monthly P&A Schedule. The RLO will also participate in delivering P&A.

This integration will ensure that the P&A function acknowledges cultural or religious events such as religious festivals across the diverse range of religions, which may influence participation by Detainees. Religious pursuits, such as weekly visits to a mosque or church, will not constitute a structured activity and no IAP points will be awarded.

### 2.13.1 English Language Instruction

A key component of the P&A Schedule will be English language instruction as a structured programme. Sufficient opportunities for Detainees to attend English as an Additional Language (EAL), for differing abilities, should be available on the schedule. Where Detainees themselves have sufficient skills to provide others with English Language instruction, this should be encouraged and supported by teaching and P&A staff.

## 2.14 Social Activities

The P&A Manager will develop a range of social activities. Examples of social activities include:

- film nights
- sporting events
- BBQs
- dance/disco nights
- cultural activities
- quizzes/trivia/Bingo
- music

## 2.15 Health, Wellbeing & Individual Development Programmes

The P&A Manager will ensure that all Detainees are offered a range of programmes that assist them to adjust to life in the detention facility and develop an understanding of Australian community standards. Delivery of Programmes should be variable and appropriate to suit the differing learning styles of the participants, such as:

- one-on-one sessions
- group discussions
- incidental learning
- workshops, etc.

Health, Wellbeing & Individual Development, programmes include but are not limited to:

- Australian culture



- Budgeting/Currency
- Employment/Education
- Accommodation
- Healthy cooking/Food nutrition
- DHSP led activities such as yoga, anxiety management, mindfulness, brain gym, parenting classes and anger management

All subject topics must be approved by the National Welfare & Engagement team and included in the Serco National P&A Catalogue prior to these being included in the schedule. Suggestions for new P&A sessions are encouraged and must be submitted to the National Office for consideration/ approval prior to implementation.

## 2.16 Computer Access

Computer and email access will be available to Detainees through computers located in common areas.

Serco staff will ensure that all computer users sign a computer Conditions of Computer Use form and share computer facilities in accordance with the Conditions of Computer Use. Parents or guardians will sign these on behalf of minors after explaining the obligations of computer use. Access to the internet by minors must be supervised by their parents.

Computers will be available to Detainees to perform functions such as word processing, spreadsheets, internet and email.

Facilities will have processes in place to ensure equitable Detainee access to computer and printer facilities, which have the flexibility to provide priority access as required to meet unusual Detainee circumstances.

Serco will ensure that appropriate filtering software is in place to control and limit access by Detainees to:

- pornographic and other prohibited sites, including those containing or promoting illegal acts
- personal software
- File Transfer Protocol sites, software or data
- prohibited sites in foreign languages

The filtering software will be complemented by Serco staff supervision.

## 2.17 TV, Other Media and Library Services

Detainees will be afforded access to free-to-air television and other broadcast services (excluding pay-to-view television services) where available, covering news, current affairs, politics, arts and culture and sport.

The P&A Manager will ensure that Detainees are able to access a library, which should operate as a Multi-Cultural Resource Centre. Library services will be suitable to the demographic and occupancy levels of Detainees at a given point in time.

Library holdings will include English and foreign language videos/DVDs; a selection of local, national and foreign language books, periodicals, and newspapers; and foreign language – English translation dictionaries.

## 2.18 Programme and Activity Participation

Participation in P&A is not compulsory and Detainees have the right to refuse to participate. Refusal to participate will have no bearing on the outcome of a person's immigration status.

Persons in restrictive detention or border screening detention are ineligible to participate in P&A or join in excursions if they would be mixing with persons in immigration detention who are not in border screening detention.

For detainees who are identified as meeting a specific criteria DIBP will notify the FDSP and where appropriate agreement to provide additional programs. This includes external training courses will be agreed at a national level between the FDSP and DIBP.

Serco staff will actively encourage Detainees to engage in P&A offered. To assist in direct personal encouragement, Detainees who are members of various Detainee consultative committees should be enlisted to encourage programme participation by newly arrived Detainees.

Where a Detainee's non-participation is noticeable either in all activity areas, or one specific area, staff will talk to the Detainee informally to ascertain why he/she is not participating, and log the results of the discussion in the Detainee's Individual Management Plan. Staff will be mindful of the possibilities of intimidation and harassment as a causal factor in any instances of non-participation by Detainees.

The P&A Manager will advise the DIBP Regional Management of Detainees who do not regularly participate in P&A and provide details regarding reasons for non-participation. If a Detainee persistently seems uninterested in P&A, the facility's Health Services Manager (HSM) should be notified to assess if there are any underlying mental health issues.

The performance measure Incentive Measure 1.1 – Programmes and Activities Participation allows incentive credit points to be awarded to the FDSP if:

- the FDSP encourages more than 96% of Detainees to participate in ten or more structured P&A per week; and
- there are no instances of an individual Detainee participating in less than five structured P&A per week.

Participation is considered valid if the Detainee actively participates in the P&A for more than half of the designated duration time of the P&A.

## 2.19 Women

The P&A Manager will ensure that a female staff member engages with female Detainees in the development and delivery of programmes and activities specifically for women, and that where required, discrete activities are arranged for women in settings that respect their privacy, religion and cultural expectations.

## 2.20 Young Adults

The P&A Schedule will respond to the particular requirements of young adult Detainees. This response will include the provision of a range of P&A to mitigate against boredom and inactivity and foster individual development, health and wellbeing. The schedule will include sports and physical activities, which provide an outlet for the energy levels and interests of young adults.

## 2.21 Detainees with Disabilities or other Special Needs and Vulnerabilities

Where Detainees have physical disabilities or other identified special needs and vulnerabilities, P&A staff should ensure appropriate arrangements are made to cater for the individual to ensure they have equity of access to P&A.

Where special provisions are required, e.g. Detainee with identified mental health vulnerability, the P&A Manager should ensure advice is sought from the Detention Health Service Provider as to the most appropriate delivery method.

## 2.22 Community Groups and Volunteers

Community volunteers and groups may provide activities to support the P&A Schedule.

All volunteers and members of community groups must comply with the requirements to enter the IDF as stipulated in the Visitor Management PPM. Where an IDF has minors present, volunteers must undergo a Working with Children check prior to any engagement with Detainees, unless agreed by DIBP.

## 2.23 Facilities and Resources

The P&A Manager will be responsible for ensuring:

- all P&A facilities are clean and fit for purpose
- all equipment, facilities and assets used in P&A are inspected regularly as part of the site WHS&E Plan
- all defective and damaged items are taken out of service immediately and replaced as soon as possible
- the resources required to support the P&A Schedule are correctly identified and available at the time of submission of the draft schedule to DIBP
- adequate resources are available to support the P&A Schedule and that access to these resources does not become a source of competition and tension amongst Detainees
- access to stores of expendables to support the P&A Schedule is controlled by a Serco staff member
- an accurate inventory of equipment is maintained for audit and security purposes.

## 2.24 Detainee Consultative Committee

All facilities will establish a Detainee Consultative Committee (DCC) at which persons in detention can raise any matters of concern or interest to persons detained at the facility.

The P&A Manager will establish, through the DCC, a process for Detainees to contribute to the development and dissemination of a monthly P&A Schedule and to provide feedback on the content and delivery of the P&A Schedule.

## 2.25 Records

All records relating to participation by Detainees in P&A is detailed in the P&A OM. Serco staff have primary responsibility for the maintenance of such records, however, accredited persons from a support service provider may occasionally supervise a structured programme or activity. Supervising staff will record the names and service ID of Detainees who attend each P&A and the duration of that attendance, at the end of the session. For P&A that attract IAP points, the supervising staff member will record the IAP points accumulated by each Detainee who attended at least 45 minutes of a 60-minute programme.

This participation detail should be made available to DIBP Case Managers as requested.

## 2.26 Reporting and Monitoring

The P&A Manager is required to ensure the timely submission of monthly monitoring data to Serco National Office. The monitoring data should be signed by the Deputy General Manager or equivalent, prior to submission to National Office

P&A Manager's are required to attend the fortnightly P&A teleconference, and any other meetings as determined by Serco National Office, to ensure timely information flow and / or changes to processes are appropriately communicated in a timely manner.

## 2.27 Staff Training

P&A Induction Training will be undertaken by Serco staff before assuming duty at an IDF. This training will include the roles and responsibilities of Serco staff to address Detainee needs in a manner which complements the Welfare and Engagement Services and DIBP's Case Management objectives and values, and which meets the requirements of the SOW and P&A Operating Model.

# Property Management

## Serco Immigration Services

### Document Control

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Version	Description	Issue Date
1.0	Consolidation of existing ITA, IRTH & IDC policies: significant form and content review and update	24/07/2013
1.0.1	Changes to terminology made, DIAC to DIBP, Detainee to Detainee, also minor amendments as per DIBP review	12/03/2014
1.0.2	Changes to the abandoned property and disposal sections, several minor amendments	14/10/2014
2.0	Updated to reflect the Facility & Detainee Services Contract 2014	24/02/2015

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## 1. Introduction

### 1.1 Policy

Serco will ensure that Detainees property is screened, accurately recorded, and securely stored while they are in Detention. Serco will ensure the Detainee is aware of their responsibilities in relation to property they choose to keep in their possession within the facility. All property belonging to an individual will be returned to the owner upon discharge from immigration detention.

### 1.2 Related Documents

- Privacy PPM (SIS-OPS-PPM-0052)
- Reception, Transfer and Discharge PPM (SIS-OPS-PPM-0029)
- Death in Detention PPM (SIS-OPS-PPM-0002)
- Complaints Management PPM (SIS-OPS-PPM-0016)
- Quality Management Plan (SIS-QMS-DOC-0001)
- Search and Fabric Check PPM (SIS-OPS-PPM-0050)

### 1.3 Related Forms/Paperwork

- In Possession Property (SIS-OPS-FRM-0041)
- In Trust Property (SIS-OPS-FRM-0042)
- In Trust Currency Foreign (SIS-OPS-FRM-0043)
- In Trust Currency Australian (SIS-OPS-FRM-0044)
- Property Receipt (SIS-OPS-FRM-0046)
- Transit / Discharge Property Form (SIS-OPS-FRM-0047)
- Abandoned Property Register (SIS-OPS-REG-0007)
- Bulk Transit / Discharge Property Form (SIS-OPS-FRM-0048)
- Release of Property Authorisation (RPA) (SIS-OPS-FRM-0049)
- Currency Handover (SIS-OPS-FRM-0061)

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, Chapter 3 – Personal Property
- Department of Immigration and Border Protection (DIBP) – Financial Rules 2012/01
- Public Governance, Performance and Accountability Act 2013



## 2. Detainee Personal Property

Detainees arrive into immigration detention with a variety of property and personal effects; these items must be screened, catalogued and stored on their behalf, or recorded as remaining in the Detainee's possession within the facility. Serco handles large amounts of property that regularly contains items of spiritual, personal and / or monetary value and may contain currency of various denominations. All personal property to be handled with care and respect.

Detainees can request to keep certain items in their possession within immigration detention facilities. Articles kept by the Detainees are referred to as "In Possession"; all property that is stored by Serco is referred to as "In Trust" property. In Trust property will be stored in a secure location and in the same facility as the Detainee.

In keeping property in their possession, Detainees assume responsibility for that property; this includes informing Serco of any damage to or loss of the property, in order that records are updated accordingly.

### 2.1 In Trust - Property

Serco is responsible for the safe and secure storage of all In Trust property. In Trust property will be catalogued on the In Trust Property form (SIS-OPS-FRM-0042), detailing the condition, status (handed in, held on reception, handed out etc) and description of the item. The property should be stored securely and sealed using numbered security seals and in a manner that will maintain the condition of the property. The security seal number must be recorded on the In Trust Property form.

During property screening, Serco will identify any items that are controlled or excluded within immigration detention, retain and record them as In Trust property. Any illegal items that are located during property processing will be managed as per section 2.4. The reasons for withholding items must be clearly explained to the Detainee in a language they understand.

A Detainee may request to access their In Trust property and this must be facilitated within a reasonable timeframe. Detainees should be monitored during any access to their In Trust property, and any items which they want to take as In Possession property must be approved and appropriately recorded. The In Trust form must be updated accordingly, including details of the new security seal number. The details of the item must be transposed onto the Detainee's In Possession form.

Valuable items must be recorded and stored securely, these items must be recorded on the In Trust Property form and recorded as 'valuables' in the In Trust type. Detainee's must be encouraged not to take valuable items into the facility, as Serco cannot ensure the safety of, and will not accept liability for, such items if kept In Possession. Valuable items may include:

- Watches
- Jewellery
- Travel / identity documents
- Small electronic devices, such as mobile phones
- Religious artefacts

Detainee cash / valuables must be securely stored as In Trust property. This must include the use of anti tamper pouches, and the seal number must be recorded. The following factors would support the secure nature of storage:

- restricted access to the area
- locked containers within a lockable room
- CCTV coverage of the room
- appropriate key controls
- use of a safe or safety deposit box

Items believed to be valuable must be recorded with an objective description, such as 'Yellow metal ring with clear stone', rather than 'gold ring with diamond'

Staff may refuse to allow Detainees to have valuable items as In Possession property if it is believed the property may be utilised inappropriately within the IDF (i.e. used as currency, or that the Detainee may suffer as a result of having the item In Possession through blackmail or standover). This must be clearly documented and explained to the Detainee.

Perishable or hazardous items are not to be stored as In Trust; they will be disposed of in accordance with section 3.8.

In Trust property must not be allowed to accumulate to a level that would be considered excessive as per section 2.6.

Detainees must be provided with a receipt for all In Trust property, it is sufficient that the Detainee be provided with a photocopy of the In Trust property that is held on their behalf.

### 2.1.1 In Trust - Currency

Detainees must not take currency into an IDF as In Possession property. Currency must be securely stored separately from all other property. Note: currency may be stored in the same location as In Trust valuables, however it should be kept under a separate seal. When handling any currency that exceeds AUD \$100.00 staff actions must be witnessed by another staff member, and all transactions to be in the presence of the Detainee.

All details of the currency must be recorded on either the In Trust Currency Australian (SIS-OPS-FRM-0044) or In Trust Currency Foreign (SIS-OPS-FRM-0043) forms. All currency must be stored in an anti tamper (opaque if available) valuables pouch and the seal number must be recorded on the relevant 'In Trust Currency' form.

The Detainee must be provided with an appropriate receipt for all In Trust currency, this may be in the form of a photocopy of the In Trust Currency form.

Serco will not exchange Detainee currency from or to Australian dollars, nor deposit currency into an account on their behalf. Detainees may apply to deposit into a bank some or all of the currency that is stored on their behalf, this may be authorised as a Special Purpose Visit (SPV) to the relevant financial institution. The Detainee must meet the identification requirements that required by that financial institute.

### 2.2 In Possession - Property

Detainees may elect to keep personal items with them within IDFs; but the safety and security of that property is the responsibility of the Detainee, and Serco will not be liable for any damage to or loss of In Possession property (unless it is proven that Serco staff behaviour or negligence caused the loss or damage).

Prior to taking property into a facility, Serco staff will ensure Detainees understand their responsibility and sign the disclaimer on the In Possession Property form (SIS-OPS-FRM-0041) to this effect.

### 2.2.1 Detainee to Detainee Transfer (Gifting)

Detainees are allowed to swap, gift or receive personal property from other Detainees, however this must be only if the transaction is not motivated by coercion or standover tactics. Staff must only authorise such activity if it does not undermine the good order, security of the facility or the safety staff or residence. It is the responsibility of the Detainees involved to ensure that their in-possession paperwork is updated.

### 2.3 Use of Brand Names in Recording Property

While it is useful to use a brand name as a descriptor when recording property items, for example, blue Nike shirt, or Rolex watch, Serco is not in a position to verify the authenticity of any branded goods.

### 2.4 Screening for Illegal, Controlled/Excluded items

While processing Detainee personal property, staff will:

- screen, and where necessary search, all Detainees and their property on arrival at the Immigration Detention Facility (IDF) to detect illegal items, or those which are controlled/excluded within immigration detention
- treat any illegal items as evidence & handle accordingly (see Serco's Evidence Management PPM) and pass to the security department, which will notify DIBP / law enforcement agencies accordingly
- ensure a copy of the "police seizure receipt" is placed into the Detainees dossier if the article is removed by the police
- provide Detainees with a receipt for any illegal item confiscated from their property

Excluded items are otherwise lawful in the Australian community but are not permitted in an IDF in any circumstances because they present risks to the health, privacy, security or safety of those in the facility, or they are offensive to others. Excluded items include but are not limited to:

- all mobile phones for IMAs
- alcohol
- non-prescribed pharmaceutical medication
- traditional medical remedies
- prescribed pharmaceutical medication not supported by a medical certificate and not cleared by the HSM for personal use by the Detainee
- travel and identity documents, including passports
- personal equipment such as cameras, mobile phones or other communication technology with Personal Internet Enabled Devices (PIED), internet, audio, photographic or videoing recording capabilities
- pornographic books, magazines or related material and

- material that incites violence, racism or hatred
- cash

**NOTE:** while the DSM stipulates that cash is a controlled item, it is Serco policy that cash is not permitted within IDFs.

Controlled items are items that are otherwise lawful in the Australian community, but must be controlled within the detention environment as they may present a risk to the health and safety, privacy or security of Detainees, visitors, staff or other stakeholders. Controlled items include but are not limited to:

- perishable foods
- sharp items including syringes, knives, scissors, razorblades
- glass items including mirrors and picture frames
- aerosols and pressure propelled products
- computers with modems
- PC accessories including thumb drives, scanners etc

## 2.5 Property Records

Using only nationally approved documentation, staff must

- record In Trust and In Possession property in the presence of the Detainee
- provide the Detainee with a receipt for all property held In Trust, confiscated, or handed out
- recording clear and accurate descriptions of all In Trust Property
- record the date and time if a Detainee refuses to sign property paperwork, and have this witnessed by another staff member
- witness all documentation relating to In Trust Currency where the total amount of currency exceeds AUD \$100.00
- store all property documentation in the Detainee's dossier
- ensure the Detainee signs accepting responsibility for all property held In Possession

The Detainee must sign the relevant In Trust Property forms. If the Detainee cannot speak or read English, evidence of an Interpreter (e.g. signature or ID number) being present, as required, at the time of Detainee signing the property receipt (where the Department can facilitate access to an interpreter).

If a Detainee refuses to sign his/her property paperwork, staff must:

- establish why the Detainee is refusing to sign the paperwork
- provide the Detainee with access to the Detainee complaint form

If the dispute occurs when the Detainee is in the process of being released/ repatriated, record the dispute on the relevant property form and request the Detainee provide an address where they can be contacted. The escorting staff should inform the discharging facility, as soon as possible and forward the relevant paperwork. The dispatching centre must lodge a complaint of behalf of the Detainee in accordance with the Complaints Management PPM (SIS-OPS-PPM-0016), and investigate appropriately.

### 2.5.1 Property receipt

The Property Receipt (SIS-OPS-FRM-0046) to be used to provide receipts in the following circumstances:

- To provide a receipt for property handed in by a member of the public
- To provide a Detainee with a receipt for property held In Trust (a photocopy of the record is sufficient)
- To provide a Detainee with a receipt for property confiscated from them (on a search etc).  
NOTE: confiscated controlled / excluded items will be placed in the Detainee's In Trust property, however illegal items will be forwarded to the security department and will not be returned to the Detainee.

### 2.5.2 Use of DIBP Form 41

Form 41 is not for use by Serco staff, as Serco documentation satisfies the outcomes of this form.

## 2.6 Volumetric Control

DIBP guidelines stipulate that Detainees should not accumulate personal property that exceeds 27kg, in case of repatriation. This will consist of 20kg check-in and 7kg carry-on baggage.

Serco must weigh the luggage prior to the task to ensure there is not excess luggage when they arrive at the airport.

Detainees who have accumulated personal property in excess of the 27kg limit may:

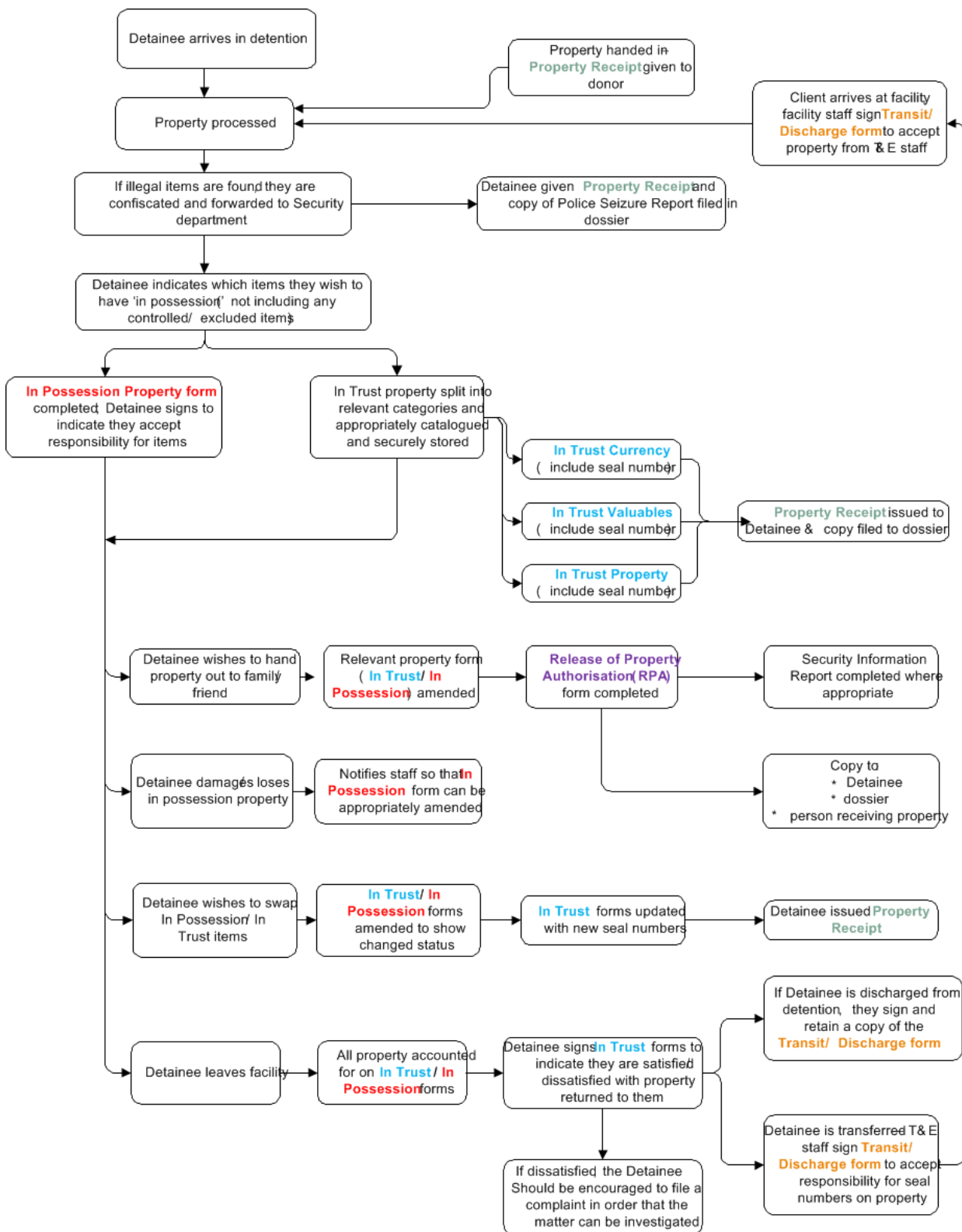
- arrange for a friend or relative to collect the excess property prior to the departure date,
- arrange for the excess property to be shipped to their destination country at their own expense,
- pay for excess baggage from their own funds, or
- dispose the excess property prior to removal.

Serco is not responsible for paying excess luggage fees. If the Department has agreed to pay for the Detainees excess luggage, then that must be noted on the RFS, and it will be passed through to the Department.

### 3. Procedures

This flowchart depicts the overall process and is indicative of the form usage, however the stages involved in each separate property process may be more detailed than depicted here.

Figure 1 – Property Procedure Flowchart



### 3.1 Arrival at an IDF

Property management processes must be completed within four (4) days of a detainee arriving at a Facility, independent of the reception and induction processes. If property processes are not completed immediately, the Detainee's property must be isolated and securely stored until it is processed.

#### 3.1.1 Initial arrival at an IDF with prescription medications

If a detainee arrives at an IDF, either initially or after having spent time in the community, with medications in their possession, these medications are to be confiscated and transferred to the health services manager (HSM). If IHMS are not onsite, then the Health Advice Service must be contacted for direction. A documented record of the medications and transfer must be kept by Serco.

Once medications are in the possession of the HSM, they will be reviewed by a doctor and if required, new medications issued.

Medications that have been confiscated are then disposed of in accordance with HSM procedures.

If the detainee is concerned about the next dose, they will be referred to the HSM.

#### 3.1.2 Short-Term / Turnaround Detainees

Detainees that are received at IDF for a short period of time, usually while DIBP secure their return flights, are sometimes referred to as "turnaround Detainees". These Detainees are generally people who have arrived into Australia via air without correct immigration paperwork.

Their detention is generally very short in duration and the Detainees are usually returned to their country of origin sometimes within a few days of their arrival at the IDF.

The handling of property belonging to turnaround Detainees is minimal and may involve the secure temporary storage of the baggage, without screening and cataloguing each item/article. If the 'turn around' Detainees are to be housed for more than four days, the Detainee's property must be fully processed and catalogued.

### 3.2 Items Handed Out of IDFs

Detainees may opt to hand their property out to persons external to the detention facility. The Centre Manager may deny such a request if evidence exists that indicates that it may undermine the security of the facility or cause harm the staff or Detainees. A Release of Property Authorisation (RPA) form must be completed, and copies distributed as follows:

1. The dossier; (White copy - original)
2. The Detainee; (Green copy)
3. Person receiving the item (Pink copy)

The RPA number must be recorded against the relevant item on the Detainee's property records. Staff must record the name of the person receiving the item(s). Property must not be released without staff verifying the recipients' identity through sighting identification.

### 3.3 Items handed into IDF

If Detainee property is handed / posted into an IDF, the Detainee's appropriate property record must be amended to reflect the additional property.

Serco may accept controlled or excluded items on behalf of the Detainee, however they must be stored in the Detainee's In Trust property.

If accumulated property exceeds DIBP suggested volumetric control, Serco must inform the Detainee, who should reduce the property held within the facility in accordance with section 2.6.

### 3.4 Transfers

All of a Detainee's personal property must accompany the individual should they be transferred between IDFs; this includes all In Trust and In Possession property.

Only in exceptional circumstances, which must be approved by both the National Transport and Escort Manager and the relevant Serco Centre Manager, may the property travel separately from the Detainee. This approval may be in the form of an email, phone call or in person, the details must be recorded on the Detainees paperwork, including the time when approval was gained.

The Property Transit / Discharge form, detailing seal numbers used to secure all Detainee property, must accompany the Detainee to their receiving facility.

For transfers involving a number of Detainees, staff will use the Bulk Transfer / Discharge Form (SIS-OPS-FRM-0049). This allows up to 20 Detainees' property to be recorded and accounted for on each form. A copy of all property that has been transferred/discharged may be retained by the discharging facility, escort staff and receiving facility.

This triplicate form must be signed as follows:

- The white copy must be signed by the staff at the sending facility and the T&E staff accepting the property; top two copies (white and pink) to be dispatched with transport; bottom copy (green) remains in the Property Discharge / Transfer book,
- White copy signed on arrival at the receiving facility by both T&E staff and staff at the receiving facility; second copy (pink) retained by T&E staff, and
- White copy retained by receiving facility and stored in the Detainee's dossier.

If a Detainee is escorted from the facility for a temporary / short-term activity, for reasons such as an excursion or medical appointment, the Detainee's property will remain at the IDF.

#### 3.4.1 Short/Medium Term Care Outside an IDF

If a Detainee is removed from the facility to receive urgent medical attention, for injuries or an ailment that was unforeseen, staff will:

- Secure the Detainees room (where practicable); or
- Identify and secure the Detainees property as per the Detainees in possession form.

If a Detainee is admitted to a medical facility the Detainee's property will remain secured at the IDF, unless special arrangements to allow certain In Possession items to accompany the Detainee are made by the relevant Serco manager.



### 3.5 Discharge from an IDF

When a Detainee is discharged from immigration detention at a Serco facility, Serco staff must ensure that no personal property remains at the facility. All personal belongings must be returned to the Detainee at the end of their detention.

Detainees must be given the opportunity to review their In Trust property, valuables and currency. Their satisfaction/dissatisfaction must be recorded on their property documentation. If a Detainee is not satisfied with the condition/content of their In Trust property, the Detainee must be encouraged to complete a complaint form, detailing the issue.

All In Trust and In Possession paperwork must be finalised, prior to being placed in the Detainee's dossier prior to the dossier being passed to DIBP.

If a Detainee is released to Corrections or a healthcare facility, the Detainee's personal property must be handed to the relevant officer/carer, receiving a signature on the Property Transit / discharge form thus completing a transfer of custody.

#### 3.5.1 Repatriation to a Country Outside Australia

Detainees discharged from an IDF for repatriation/removal will have all of their personal property sealed into appropriate baggage, which will be sealed appropriately. Seal numbers will be recorded on the Property Transit / Discharge form. The form must include the total weight of the Detainee's personal property. Escorting staff retain responsibility for the Detainee's personal property until the Detainee is released from Serco care, at which point the Detainee must sign and be provided with a copy of the Property Transit / Discharge form.

Detainees must sign the Transit / Discharge form accepting responsibility for their baggage at the point that the Detainee is discharged from Serco care.

### 3.6 Lost or Damaged Property

Detainees must be encouraged to report to staff any damage to or loss of In Possession property, in order that property records are maintained and up to date. This should include a description of item and/or the damage sustained.

### 3.7 Abandoned/Found/Unclaimed property

Abandoned/found/unclaimed property is:

- property that the owner has relinquished ownership of by the actions,
- property that has been found/located with no claimed ownership,
- property held on behalf of a Detainee who has escaped from immigration detention.

Abandoned property must remain in secure storage, appropriately labelled and separated from current In Trust property. These items must be stored for a minimum period of six months before it is disposed of in line with section 3.9.

If the owner is known and believed to be living in the Australian community (CD, BVE Detainees), Serco will seek assistance from DIBP to provide relevant contact information. Where contact details are not available, the property description must be recorded on the abandoned property register, and this should be disposed of in line with relevant state legislation, and no earlier than within six (6) months of identification.

If the identity of the owner is unknown, Serco staff must make reasonable efforts to identify and return the property to the legitimate owner. If the owner is located, the article(s) are to be sent to that person via Australia Post Registered Delivery, at Serco's cost.

Abandoned Property registers (SIS-OPS-REG-0007) to be maintained at every IDF, which must contain:

- a description of the item(s)
- the seal number(s)
- detailed and historic records of the item, including the efforts made to identify and/or locate the owner.

Included in the register should be an area where the Centre Manager / Team Leader can authorise disposal of the item(s) in accordance with the relevant State/ Territory legislation, recording the details on the abandoned property register.

### 3.8 Currency with Owner Known

Where the owner has been identified and believed to be living in the Australian community or removed to a third country, Serco provide the department with a paid registered post envelope for the department to organise the return of the property.

#### 3.8.1 Return of Currency to Owner Procedure

Depending on the value of the currency, the following procedure will be implemented:

1. For \$A250 or less - Where the owner is located, the currency will be sent to the owner via Registered Australia Post.
2. For more than \$A250 - Where the owner is located, the Serco Regional Finance Manager will write to the owner to arrange a suitable manner to return the currency to the owner, this will be managed on a case by case basis.

If after six months the contact details remain unavailable, or if the currency is Returned to Sender (RTS) the currency may be returned to the Department in line with section 1.10.1 below.

#### 3.8.2 Property Belonging to Deceased Persons

If a Detainee dies whilst in immigration detention their property is to be secured by Serco until the subsequent investigations have been completed. The property is to be managed in accordance with any will that the Detainee may have established or in the absence of a will, release to the deceased next of kin or family. If no family contacts can be established the property is to be handled and managed as abandoned, found or unclaimed property (as per Section 3.11)

### 3.9 Abandoned/Found/Unclaimed Detainee Money

Detainee currency where the identity of the owner is unknown or where the currency cannot be returned to the owner is to be handled as abandoned/found/unclaimed money.

- This money must be secured and recorded in the Abandoned Property Register (SIS-OPS-REG-0007).
- Serco must conduct a comprehensive investigation to either ascertain the ownership or make reasonable efforts to reacquaint the money with its owner, which may be requested by the department.

If after a period of six (6) months from being identified as abandoned, and all efforts have been made to identify the owner and return it, the currency may be handed over to the Department in accordance with section 3.10.1.

### 3.10 Currency Held by Serco Not Linked to a Complaint or Detainee

This relates to all currency that is held by Serco where either the owner is not known, (for example where records were not correctly maintained on arrival, or property is found within a facility and has not been claimed). This also includes property where the owner cannot be located, such as a detainee transferred into the community or returned overseas without a correct forwarding address, or property left by a detainee following an escape.

#### 3.10.1 Disposal of Abandoned/Unclaimed/Found Currency Procedure

Abandoned currency may only be returned to the Department once a comprehensive investigation has been conducted (as per 3.8), and all reasonable attempts have been made to identify the owner and return the currency. This currency must be stored securely for a period of six months before it may be disposed of. Abandoned/found/unclaimed currency is then must be approved for banking by the Contract Administrator (DIBP) to be deposited all the bankable moneys to a nominated departmental CBA bank account.

If approved by the department, once banked a copy of the deposit slip along with a breakdown of the money deemed bankable (by the bank) which were banked to [debtors@immi.gov.au](mailto:debtors@immi.gov.au) and detention.services@immi.gov.au.

Currency in all denominations and condition should be physically taken to the bank, with the bank to provide advice on what is “unbankable”; currency that is determined to be “unbankable” is to be consolidated and sent as recorded post to:

**Attention: Andrew Horsfall**  
 Serco National Compliance Team,  
 SERCO Immigration Services  
 Level 1, 39 Brisbane Avenue  
**BARTON ACT 2600**

### 3.11 Disposal of Property

Property may only be disposed of once a comprehensive investigation has been conducted, and all reasonable attempts have been made to identify and make contact with the owner and relevant state and territory legislative requirements have been met. The only exceptions to this are for perishable/contaminated/hazardous items, or excess property that is been voluntarily discarded by the Detainee prior to being transferred or removed from Australia due to luggage restrictions.

Serco will not dispose of any property that:

- Is believed to be related to a dispute or complaint
- Are Detainee identity documents (Passports, etc) – These must be permanently retained
- Are sensitive items such as religious artefacts (Bibles, Korans, etc)

Property must be disposed of in accordance with all legislative requirements. There is a range of legislation and other requirements that must be considered, including the DIBP Detention Services Manual, State-based Uncollected Goods Acts, the previous Financial Management Act (FMA), and the Public Governance, Performance and Accountability Act 2013 (Cth) (PGPA Act) that superseded the FMA from July 2014.

Due to these changes in legislation, separate guidance is provided below for items found up to and including 30 June 2014, and items found from 1 July 2014 onwards.

#### 3.11.1 Disposal of Property Procedure – Items Received Prior to 30 June 2014

The Financial Management Act (FMA) was in force up to 30 June 2014,(replaced by the Public Governance, Performance and Accountability Act 2013 (Cth) (PGPA Act) in July 2014) and applies to all items found or received on that date or earlier.

Once an item of property (not including currency) has met all requirements outlined above, the following process will be implemented:

1. The item of property must have been held for over six months, and all attempts to identify or contact the owner have been exhausted, and all requirements under relevant state/territory legislation have been met
2. The item be recorded in the Abandoned Property Register.
3. Photographs are taken of the item(s) and stored in the same location as the Abandoned Property Register.
4. Approval from the Serco Centre Manager to destroy the item be recorded in the Abandoned Property Register.
5. The item is disposed of in the most appropriate manner. The following must be considered in the disposal process:
  - a. Any information or personally identifying information must be destroyed in a manner to prevent its disclosure.
  - b. Mobile phones may be sent to the Serco National Office, Lvl 1, 39 Brisbane Ave BARTON ACT 2600. (Attention: National Risk, Quality and Compliance Team) who has a certified provider that securely wipes information from phones and recycles them.
  - c. Appropriate safety precautions must be taken when dealing with mouldy items or hazardous materials.

6. The staff member disposing of the item and a witness will sign the Abandoned Property Register.

### 3.11.2 Disposal of Property Procedure – Items Received From 1 July 2014

The Public Governance, Performance and Accountability Act 2013 (Cth) (PGPA Act) took effect from 1 July 2014. It no longer specifies how property on Commonwealth land is to be disposed of, although additional regulations may be provided to cover this in the future.

Without this specified in Commonwealth legislation, individual State based Uncollected Goods Acts may apply. Depending on the State, this may require a court order to dispose of items, and may require advertising for the owner in local newspapers.

Given the relatively small amount of unclaimed property that Serco should have received after 1 July 2014, it is recommended Serco manage this in line with the relevant state / territory legislation

If it is determined that the property must be disposed of, once all requirements under state / territory legislation are met, the following process will be implemented:

1. The item of property must have been held for over six months, or longer if required by State legislation, and all attempts to identify or contact the owner have been exhausted.
2. The item is recorded in the Abandoned Property Register.
3. Photo's are taken of the item and stored with the Abandoned Property Register.
4. Approval from the Serco Centre Manager to destroy the item is received and recorded in the Abandoned Property Register.
5. Specific requirements relating to the State based legislation are reviewed. Generally the changes relate to the retention period, requiring a court order, and how the disposal is to be advertised. Approval by the Serco Assurance Director is required prior to conducting any of these activities
6. The item is disposed of in the most appropriate manner. The following must be considered in the disposal process:
  - a. Any requirements under State legislation must be complied with.
  - b. Any information or personally identifying information must be destroyed in a manner to prevent its disclosure.
  - c. Mobile phones may be sent to the Serco National Office who has a certified provider that securely wipes information from phones and recycles them.
  - d. Appropriate safety precautions must be taken when dealing with mouldy items or hazardous materials.
7. The staff member disposing of the item and a witness will sign the Abandoned Property Register.

### 3.12 Reimbursements/Compensation for Lost Property or Money

Reimbursements for lost property may be authorised by Centre Manager, once determined that Serco was at fault. Replacement property or garments of clothing is completed on a like for like basis, for the items, this does not include "Brand Name", i.e. a pair of jeans is replaced with an average priced pair jeans, runners are replaced with an average priced runners.

Financial reimbursements may only be authorised by the Regional Financial Manager, and will be managed case by case.

### 3.13 Staff Training

All staff included in the processing of Detainee personal property must be appropriately trained this is generally on the job training. Records of such training must be held at the facility. Property must not be managed by staff that have not completed the relevant in house training.

### 3.14 Auditing of Property paperwork

All of the In Trust and In Possession forms contain an area for Serco local management to record their review/audit of the form/ process. This allows for a scheduled and ad hoc audits to be performed and recorded across the property management process. It is anticipated that as a minimum, the CSM / Operational Manager will audit the property process on a weekly basis.

# Reception, Induction, Accommodation, Transfer and Discharge Serco Immigration Services

## Document Control

<b>Document:</b>	Reception, Induction, Accommodation, Transfer and Discharge
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# 1. Introduction

## 1.1 Policy

Serco Immigration Services (SIS) will have processes in place to ensure the reception, induction, transfer and discharge stages of detention are executed thoroughly and efficiently, placing utmost emphasis on treating Detainees with dignity and respect, preserving their wellbeing and safety, and the security of Detainees and the Immigration Detention Facility (IDF). Detainees will receive information about the facility, and the processes they can expect, in a language they understand.

## 1.2 Related Documents

- Working with Families & Minors PPM (SIS-OPS-PPM-0037)
- Behaviour Management (SIS-OPS-PPM-0006)
- Detainee Placement PPM (SIS)-OPS-PPM-0051)
- Privacy (SIS-OPS-PPM-0052)
- Search and Fabric Check (SIS-OPS-PPM-0050)
- Personal Officers Scheme (SIS-OPS-PPM-0011)
- Individual Management Plan (SIS-OPS-PPM-0020)

## 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, Chapter 3, Entering and Leaving detention
- AS/NZS 9001:2008 – Quality Management Systems

## 2. Procedures

### 2.1 Reception/Induction/Discharge Processing Times

The Centre Manager will ensure that:

- sufficient numbers of trained staff are available to undertake Reception, Induction Accommodation, Transfer and Discharge activities at any time;
- staff commence the reception processes immediately after the Detainee arrives at the facility and complete the reception process within 12 hours of their arrival. The Portal tasks must be completed by the end of the next business day following the completion of the induction processes;
- a detainee Security Risk Assessment is conducted during the reception process, and uploaded to the Portal within 12 hours of their arrival;
- staff commence the induction processes as soon as reasonably practicable after the Detainee's arrival at the facility and complete the induction processes within 48 hours of their arrival. The Portal tasks must be completed by the end of the next business day following the completion of the induction processes;
- the initial allocation of a detainee's accommodation details, as well as any subsequent changes, are updated on the Portal within 4 hours of allocation/change;
- detainees property is processed within 4 days of their arrival; and
- staff commence the discharge process within 30 mins of being notified by DIBP, and the Portal tasks completed by the end of the next business day following the person being discharged from detention.

### 2.2 Portal Reporting Times

Reception and Induction tasks must be completed on the DIBP Portal on the first Business Day following the Induction processes (see Performance Management Framework).

For example: A Detainee arrives at 0800hrs the Monday, Reception Tasks to be completed by 2000hrs that day, Induction Tasks to be completed by 0800hrs Wednesday. The portal be updated by 2359hrs on the Thursday ("following business day"). Detainee Property may be processed separately from the Reception/Induction processes, within four days of the Detainee arriving at the facility.

TO ensure consistency across the network, the following Work Plans, Types, Sub-Types and attachments will be updated in Portal during the relevant processes.

Table 1 – Portal

Work plan	Type	Sub-Type	Attachment	Due
Nil - Update Location and Accommodation Details				Within 4 hours of arrival/change
Reception	Risk Assessment	Placement Risk	Risk Assessment	Within 12 hours of arrival
Reception	Induction	DSP	Reception and Induction checklists, confirming that info has been provided to the detainee, detainee has signed rights and responsibilities, computer conditions of use etc, dietary needs checked and indicator opened if required	End of next Business Day following the Induction Process
Reception	Reception	PSP Risk Assessment	Self-Harm Assessment Interview	End of next Business Day following the Induction Process
Reception	Property		All property paperwork against 1 objective	End of fourth Calendar Days after detainee arrival
Client Transfer	Client Transfer	Client Notification	Transfer checklist	
Client Transfer	Property	Property Reconciliation	Signed property paperwork	
Client Discharge	Client Discharge	Client Notification	Discharge checklist	Commence process within 30 mins of being notified by DIBP,
Client Discharge	Property	Property Reconciliation	Signed property paperwork	Completion of Portal tasks by end of next Business Day following the person being discharged.

### 2.3 Detainees under the Age of 18 Years

When working with Detainees under the age of 18 years, staff must hold the best interests of the minor as their primary concern. If any Serco staff member has a strong suspicion or belief that a Detainee is under the age of 18 and not identified as a minor, the Department must be notified immediately.

## 3. Reception

SIS acknowledges that the reception process is a critical and sensitive time. It is usually the first encounter between a Detainee and an Immigration Detention Facility (IDF), and may also be the first engagement between SIS staff and the Detainee.

The Centre Manager will ensure that the reception and induction processes are conducted in a manner that promotes the wellbeing, dignity and safety of the Detainee. Staff members will also ensure that the Detainee is provided with regular information about what is happening to them, in a language they understand.

### 3.1 Reception Process

The following actions will be conducted during the reception process:

- A Reception and Induction Checklist will be used to record actions.
- The DIBP's information technology system to record data relating to a Detainee collected during the reception process.
- A television and DVD player will be used to display explanatory programs in relevant languages about the facility and reception process.
- Leaflets will be provided explaining the Reception and Induction process in languages understood by detainees, or explained through an interpreting service when required.

- Provision of meals and drinks, access to showers, appropriate clothing, and basic toiletries.
- Allow the Detainee with the opportunity to make a local telephone call within 24 hours of arrival.
- Advise the Detainee that may receive visits from a legal representative and may contact their legal representative by telephone or email, or via post.

### 3.2 Communication of information to the Detainee

On reception, staff will ensure that each Detainee nominates a preferred language and signs to this effect. Information provided to the Detainee will be in the appropriate language, or use Department provided interpreters.

### 3.3 Identification of the Detainee

Serco must collect and record information and biometric data relating to a Detainee during the Reception Process to assist in the identification of the Detainee, in accordance with Department policy and guidance, in particular the identification tests instruction (see Detention Services Manual – Chapter 3 – Entering and Leaving Detention), unless the Detainee:

- has been Transferred from another Facility;
- has already provided personal information and biometric data at another Facility; and
- such information and data is recorded in the Department's nominated information technology system and is accessible to Serco during the Reception process.

During the reception process to assist in the identification of the Detainee in accordance with DIBP policy and guidance, and appropriate legislation, staff will collect and record information and biometric data as follows:

- Detainees over the age of 15 – facial photograph and fingerprint identifier
- Detainees under the age of 15 and incapable persons – facial photograph only

Only appropriately, trained staff that have been cleared by DIBP will collect biometric data.

SIS staff are not responsible for establishing the integrity of any information provided to them by the Detainee. Concerns regarding the integrity of information provided will be forwarded to DIBP.

### 3.4 Identity Cards

All Detainees will be issued with a photographic Identification card, and be advised that he/she must carry their ID cards at all times.

The DIBP regional manager must be consulted and approval sought if a new ID card is required for a Detainee whose card no longer displays a true likeness of the individual.

### 3.5 Detainee Health Induction Assessment

A Health Induction Assessment (HIA) will be offered to all detainees and conducted by the DHSP if consent is provided. The HIA is independent from Serco's reception/induction processes.

### 3.6 Searching and Screening

Staff conducting the reception process will perform screening and searching in line with the Search and Fabric Checks PPM and Property Management PPM.

Reception staff will:

- ensure that the Detainee understands the screening and searching process and that at all stages of the process there are clear explanations given to the Detainee about why any screening or searching procedure is being carried out;
- screen, and where necessary search, all Detainees and their property on arrival at the IDF to detect Illegal, Excluded or Controlled Items. All such items should be handled in accordance with the Property Management PPM; and
- conduct screening and searches with sensitivity and with regard to the Detainee's dignity and self respect and in accordance with the Immigration Detention Values and the Serco Screening & Searching PPM.

### 3.7 Detainee Personal Property

Detainee's personal property is screened, checked, and managed in accordance with the Property Management PPM. The property management process may be actioned independently of reception and induction processes provided the process be completed within 4 days of the Detainee's arrival at a facility.

### 3.8 Bedding, Clothing and Footwear

Staff will provide the following items during the reception process:

- Bedding that is clean and fit for purpose
- Freshly laundered sheets that are in good condition and suited to the local conditions
- Where required, clothing and footwear that is new and suited to the local conditions and the Detainee's cultural needs

Staff will replenish bedding, clothing and footwear as required.

### 3.9 Toiletries

Staff will provide each Detainee, unless the Detainee has been transferred from another facility and has brought their own toiletries, with a starter pack of toiletries during the reception process, which includes (where appropriate):

- Soap, shampoo and conditioner
- Toothbrush and toothpaste
- Hairbrush or comb
- Deodorant, moisturiser and talcum powder
- Razor and shaving cream (if required)

- Feminine hygiene products where appropriate
- Fingernail clippers
- Sunscreen and insect repellent

### 3.10 Detainee Security Risk Assessment (SRA)

During the reception process, staff will conduct a Detainee security risk assessment, which includes an examination of any previous risk assessments and information about the Detainee. This assessment must be uploaded to the Service Provider Portal within 12 hours of the Detainee's arrival.

The SRA will be considered in the development of the Detainee's Individual Management Plan.

### 3.11 Complaint, Request and Feedback Systems

The Centre Manager will ensure that staff conducting the reception process communicate the complaint, request and feedback systems process to the Detainee, including the provision of a written guide in the relevant language.

## 4. Induction

The induction processes will explain to the Detainee how the IDF operates, what the Detainee can expect, and what is expected of them. Induction processes will be concluded within 48 hours of the Detainee's arrival at the facility.

### 4.1 Induction Briefing for the Detainee

The induction briefing includes all information relevant to accommodation in the facility including:

- a description of domestic routines, facilities and services that are available, including how to access Services and amenities;
- the Detainees' Rights and Responsibilities;
- the roles and responsibilities of the Department and Service Provider Personnel;
- how to communicate with Service Provider Personnel, including access to translators and interpreters;
- how to arrange a meeting with Department Personnel;
- how to access legal advice or contact diplomatic or consular representatives;
- how to access information from the Australian Human Rights Commission, the Commonwealth and Immigration Ombudsman, the International Organisation for Migration and other international and regulatory bodies;
- how to submit requests and complaints and provide effective feedback;
- how to obtain access to non-government organisations;
- information on Consultative Committees and how to be involved;

- information on the Individual Allowance Program, Programmes and Activities, and associated schemes;
- a notification that photos of Key Service Provider Personnel are placed on the Facility noticeboard;
- which items are Illegal, Excluded and Controlled Items and why;
- how the Personal Officer Scheme operates and who is the Detainee's Personal Officer and deputy Personal Officer; and
- how to access medical services.
- ensuring that the detainee understands that they are in immigration detention and why; and
- explaining the department's obligations to remove detainees from Australia in certain circumstances

#### 4.2 Personal Officer Scheme (POS)

The POS is a formalised mechanism for ensuring that all Detainees have meaningful interactions and engagement with an identified member of staff. During the induction period, all Detainees will be allocated their Personal Officer, who will ensure that the Individual Management Plan is completed within appropriate timescales. Further information is contained in the Individual Management Plan PPM (SIS-OPS-PPM-0020) and Personal Officer PPM (SIS-OPS-PPM-0011).

## 5. Accommodation

Serco will allocate the accommodation placement for each Detainee. This will be established at the time of reception by the relevant Serco management. The portal must be updated with the detainee's accommodation details within 4 hours of arriving at the facility, or within four hours of any subsequent room changes

## 6. Transfer

### 6.1 Transfer of the Detainee

When notified by DIBP, SIS staff will prepare Detainees for their transfer within the Immigration Detention Network and will:

- ensure SIS has received a Fit for Travel certificate for the Detainee from the HSM or a clinical practitioner, i.e. GP, as well as a Health Discharge Assessment
- prepare a discharge summary for the next party taking the Detainee into their care that outlines any known and relevant management or behavioural issues
- ensure that the Detainee Security Risk Assessment has been reviewed and updated
- ensure medications and other essential items are prepared
- ensure that all of the Detainee's property is transferred with the Detainee
- ensure that the Detainee is advised of the reason for the transfer, and is provided with the opportunity to ask questions, contact support networks and seek further advice



- ensure that all hard copy Detainee records are provided to the escort for transfer to the same destination as the Detainee
- ensure that the Detainee has been provided with clothing that is appropriate for the journey and the destination climate
- co-operate with DIBP and any other service providers involved in the transfer process

A Transfer Checklist will be completed for each Detainee on transfer, to confirm that the transfer process is completed. All appropriate documentation supporting the transfer process will be completed.

## 6.2 Escort Requirements

All escorts will be conducted with the wellbeing and safety of the Detainee as the primary consideration, while maintaining the security of the Detainee, the staff, respective IDFs and the escort. Staff will take care to ensure all appropriate documentation and approvals are in place, that the identity of the Detainee is checked, and that the escort does not depart without all of the Detainee's property.

## 7. Discharge

### 7.1 Discharge of a Detainee

SIS will not discharge any Detainee from detention without the appropriate request and approval from DIBP. Only SIS staff appropriately trained in discharge procedures will conduct a Detainee discharge.

The discharge process must commence within 30 minutes of the time advised by the Department for the Detainee's release.

SIS staff managing the discharge process will:

- confirm that the identity of the Detainee matches that in the DIBP's Release documentation
- confirm that the DIBP Release documentation is complete and has been properly authorised
- ensure that the Detainee is advised of the reason for their discharge, and are provided with the opportunity to ask questions, contact support networks and seek further advice
- ensure the Detainee has been provided with clothing appropriate to any journey and destination climate
- ensure all personal belongings are returned to the Detainee on release, or passed to the Detainee's escort if the Detainee is being removed from Australia
- ensure that, if the Detainee is taking prescription medication, specific instructions from the prescribing medical officer are included
- for detainees being removed from Australia, ensure the Health Discharge Assessment (conducted within the last 28 days) is held by both the escorting personnel and the Detainee

- ensure the hardcopy Detainee records held by Serco are transferred to the DIBP Regional Management by the end of the following business day after a Detainee has left the facility
- ensure the Departments Portal system is updated by the end of the following business day after a Detainee has left the facility
- provide all the Detainee being discharged with the opportunity to provide feedback on matters such as:
  - the conditions of their stay
  - the attitude and responsiveness of Serco staff
  - any complaints or suggestions for any improvement
  - their general level of satisfaction with the way they have been treated at the IDF

The Duty Manager will immediately inform the DIBP Regional Manager of any concerns about the post-release welfare of a discharged Detainee.

## 7.2 Removal from Australia

When notified by DIBP that a Detainee is being removed, SIS staff will:

- Ensure that the Detainee Security Risk Assessment up to date prior to removal and complete all appropriate documentation, as determined by the DSM and the Contract
- Organise packing and weighing of the property belonging to the Detainee
- Search the Detainees carry on luggage, and ensure that it complies with aviation requirements.
- Assist DIBP in facilitating the removal

Refer to the International Removals PPM (SIS-TE-PPM-0002) for further details.

## 7.3 Post Release

When requested by DIBP, Serco will:

- book temporary accommodation (for example, in a hostel or motel) for a Detainee who is being released, and arrange for transport to that accommodation, in accordance with the destination and accommodation requirements notified by DIBP
- assist the released person to settle into new accommodation (including assisting with check-in)
- if the released person is not being met by someone at the interstate destination, arrange for them to be met and accompanied to the initial point of accommodation
- issue a temporary living allowance to the released person, upon release

If accommodation and transport involves interstate air travel, there is no requirement for Serco to escort the person during the flight.

Costs associated with the temporary living allowance, flights and accommodation will be reimbursed by the Department as a Pass Through Cost.

# Registrable Detainees

## Serco Immigration Services

### Document Control

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## 1. Introduction

### 1.1 Policy

The purpose of this policy is to ensure Serco meets its legislative responsibilities under Child Protection legislation and the Work, Health and Safety Act 2011 (Cth) with regard to Detainees who may be registrable persons under the Acts ('Registrable Detainees') and children who may be at risk from those Registrable Detainees. The various state legislative requirements are designed to ensure children are safe from any risk of harm from individuals who are registered child sex offenders. A list of relevant offender legislation in each Australian state and territory is included in section 1.2 below. The legislation places a number of obligations upon the registrable Detainee.

This policy is a general statement only. Each facility is to develop local procedures that are consistent with the purpose of this policy and the requirements of the state/territory based legislation.

The following link provides details of the offender registration legislation in each Australian state and territory: <http://www.aifs.gov.au/institute/pubs/carc/3b.html>.

As Detainees are under the care and supervision of Serco it is important that Serco ensures that:

- the Registrable Detainee - whilst detained within the immigration detention network - complies with the restrictions placed upon them by the relevant legislation; and
- children visiting or in close proximity to the immigration detention centre network are not put at any risk by the presence of the Registrable Detainee

### 1.1 Related Documents

- Working with Families and Minors (SIS-OPS-PPM-0037)
- Visitor Management (SIS-OPS-PPM-0039)

### 1.2 Legislative and Standards Framework

- Migration Act 1958 (Cth)
- United Nations Convention on the Rights of the Child (1989)
- Work, Health and Safety Act 2011 (Cth)
- Privacy Act 1988 (Cth)
- *Crimes (Child Sex Offenders) Act 2005* (ACT)
- *Child Protection (Offenders Registration) Act 2000* (NSW)
- *Child Protection (Offender Reporting and Registration) Act 2004* (NT)
- *Child Protection (Offender Reporting) Act 2004* (QLD)
- *Child Sex Offenders Registration Act 2006* (SA)
- *Community Protection (Offender Reporting) Act 2005* (TAS)
- *Sex Offenders Registration Act 2004* (VIC)
- *Community Protection (Offender Reporting) Act 2004* (WA)

## 2. Procedures

The following process shall apply in order to enable Serco to meet its legislative obligations as identified above:

- The Department of Immigration and Border Protection (DIBP) will advise both Serco and the relevant State or Territory Police Force in writing of the presence of registrable Detainees within the immigration detention network.
- The relevant State or Territory Police Force, including the relevant reportable offender management unit, is to facilitate the registration of the registrable Detainee. Serco will assist the relevant State or Territory Police Force in that process by providing a secure and private interview room.
- DIBP will advise Serco of any special conditions relating to the accommodation or reporting requirements for the registrable Detainees.
- Serco will facilitate any reporting requirements that are specified as special conditions for registrable Detainees. Detainees will be expected to manage their own reporting requirements relevant to their specific case.
- Any external persons applying to visit a registrable Detainee within the immigration detention network will be required to provide at least 24 hours notice of their intended visit to enable appropriate checks to be carried out by Serco. This is in accordance with current visitor management practices.
- Normal visitor supervision arrangements will apply. This consists of a minimum allocation of two Serco officers to the visits area. Arrangements need to be dynamic and take into account any special conditions that apply to individual registrable Detainees. Serco and Departmental staff will need to risk assess and mitigate according to the conditions. Where special conditions for registrable Detainees require greater levels of supervision, extra staffing will be arranged. In the event that additional staff are required above the normal roster, Serco may seek approval of an Additional Services Request to provide the staffing.
- Normal visits routine will continue to be applied by Serco to ensure no undue attention is brought to the registrable Detainee either during attendance at the visits area or otherwise whilst the registrable Detainee is detained in immigration detention.
- DIBP shall be responsible for advising the relevant State or Territory Police Force when a registrable Detainee is to be discharged into the community, returned to their country of origin or otherwise removed from immigration detention.
- Serco Operations Managers will be briefed by the Serco Intelligence team regarding the identity of a registrable Detainee and any relevant reporting requirements placed upon the registrable Detainee by the relevant State Police Force.
- Any Serco staff required to be advised of the identity of a registrable Detainee will be reminded of their obligation to retain such information in confidence under the Privacy Act and the relevant State child protection legislation.
- In the event of an incident involving a registrable Detainee that is in breach of the conditions of their order, they will be relocated to the relevant Management Support Unit located within that Centre.
- No additional monitoring of Detainee usage of internet or telephone communication is to be conducted unless this is specified as a special condition for the registrable Detainee. In the event that additional monitoring is required Serco may seek approval of an Additional Services Request in order to obtain the resources.
- In the event that a registrable Detainee is threatened, or becomes a risk to the safety and good order of the facility, the Department will be informed in order to review placement options within the immigration network.

### 3. Work, Health and Safety

Staff are required to familiarise themselves with the WH&S assessment relating to working with a registrable Detainee within the immigration detention network. If they have any questions, they should direct these to the centre manager.

### 4. Privacy

Staff are to be reminded that information relating to a registrable Detainee is not to be disclosed pursuant to section 21E of the Child Protection (Offenders Registration) Act (NSW) or relevant State child protection legislation.

Staff are to be reminded that once made aware of the identity of those Detainees listed on the sex offenders register, that under relevant State child protection legislation as listed in section 1.2 above, they are under strict obligations not to disclose any information relating to those Detainees. Staff could potentially face criminal penalties should they disclose this information without authorisation. This prohibition on unauthorised disclosure could arguably extend to the revelation of a registered person's identity via non-verbal means. In addition to this, all staff are bound by the provisions of Schedule 10 – Confidential Information and Schedule 11 – Non-Disclosure of Personal Information.

### 5. Mandatory Reporting

The mandatory reporting requirement to report suspected cases of child abuse and neglect in accordance with the Working with Families and Minors PPM (SIS-OPS-PPM-0037) remains extant. This requirement applies to all Detainees including registrable Detainees.

As the Service Provider, Serco is obliged to report to the department all incidents that occur within the immigration detention environment according to the provisions of the Facilities and Detainee Services Contract 2014. This would include any incident that occurs involving a registrable Detainee in breach of their conditions. Serco also has a contractual security intelligence obligation to provide the department with unfettered access to intelligence on request. Information and intelligence may be received from Detainees and this includes registrable Detainees who are obliged to report circumstances specific to their order. The DIBP Security Liaison Officer (SLO) is responsible for Police referrals and all incidents involving registrable persons will be forwarded to the relevant DIBP SLO for their attention. Accurate documentation will be retained by Serco to demonstrate the time and date of the referral.



# Religious and Spiritual Care

## Serco Immigration Services

### Document Control

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# 1. Introduction

## 1.1 Policy

The provision of religious and spiritual care services to Detainees will be consistent with the religious and spiritual care available in the Australian community and relevant to the population of Detainees. The religious beliefs of individual Detainees are respected and opportunities given to practice their religious faith. Serco will ensure that all Detainees are free to practice the religion of their choice. This will include the possession of books and other items of religious observance and instruction. Where appropriate, religious dietary requirements will be met.

The aim of this policy is to define the systems, facilities, appointments and responsibilities of Serco staff to enable Detainees to practise their religion of choice individually or communally, at all detention facilities in accordance with Department of Immigration and Border Protection (DIBP) policy.

## 1.2 Related Documents

- Facilities and Detainee Services Contract

## 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual - Chapter 5 Section 1 - Religious & Spiritual Care

## 1.4 Roles and Responsibilities

**Table 1 – Roles and Responsibilities**

Role	Responsibility
Religious Liaison Officer	Coordinate all religious and spiritual care services in the Immigration Detention Facility

# 2. Procedures

## 2.1 Religion and Wellbeing

Centre Managers will ensure that all religions are supported and respected by Serco staff in the detention environment. The wellbeing of Detainees is of paramount importance and the provision of religious services and activities is a means to provide hope, meaning, optimism and security to Detainees. It can also be an important element of an individual’s lifestyle, affecting diet, relationships, clothing and activities.

## 2.2 Religious Liaison Officer

Facilities will have a Religious Liaison officer to coordinate all religious and spiritual care services in the IDF. The coordination of religious and spiritual care services will be performed in accordance with the DIBP policy.

The RLO will be the first point of contact for Detainees and visitors regarding the provision of religious and spiritual care in the detention facility. An official record of all decisions affecting religious or spiritual practice and religious visits will be kept by the RLO.

### 2.3 Staff Training

The Serco HR department will provide a comprehensive Induction Training Course (ITC) for all Serco staff working in a detention facility. The manager of the facility will ensure that all operational staff have completed the ITC before assuming duty at the facility. This training program is developed in accordance with the Policies, Procedures, Governing Principles, Values and organisational requirements of Serco and DIBP. The training is also mapped against Nationally Recognised Industry Training Qualifications and is facilitated through ASPAC Training (Serco's Registered Training Organisation (RTO) and its partners).

Cultural Awareness and Diversity are components of the Induction Training, which will include matters relating to religions and religious practices that Serco staff can expect to witness during their normal working day.

### 2.4 Religious Affiliation

During the induction process, Detainees will be asked to identify their religious affiliation, so that appropriate support may be offered and arranged. The support of religious visitors and spiritual care is available to all regardless of whether they have declared a religious affiliation.

Religious and cultural expectations are recorded in the detainees Individual Management Plan.

Detainees may request to contact religious leaders in the community; these requests are actioned by the RLO at each facility.

### 2.5 Religious Visitors

A religious visitor is a recognised official of any religion who has an ongoing pastoral relationship with those in detention and their duties can include:

- religious and spiritual support:
  - conducting religious services;
  - performing religious ceremonies;
  - providing religious education.
- pastoral care and appropriate counselling:
  - helping persons in the IDF address personal problems;
  - supporting persons in the IDF in times of crisis, distress or illness;
  - providing emotional support.

Religious visitors will be subject to standard visitor procedures and will be provided with identification allowing recognition of their function within the IDF.

## 2.6 Chaplains

Chaplains are religious visitors who are nominated by their religious organisation, the department or Serco, to undertake the pastoral care of persons in the IDF.

All religious visitors who have met the following criteria will be known as chaplains:

- been granted appropriate clearances consistent with Volunteering Australia guidelines ([www.volunteeringaustralia.org](http://www.volunteeringaustralia.org));
- have signed a Visitor Conditions of Entry form;
- have attended an introduction session at the IDF.

Both the chaplain and Serco are to retain a copy of the signed Conditions of Entry form for their records.

The special position of trust that chaplains occupy in the IDF allows them greater access to Detainees including:

- access to areas of the IDF beyond the visitors centre;
- special escorting arrangements;
- access to an IDF outside visiting hours to fulfil their religious duties;
- bringing a colleague into the IDF for a specific purpose, such as assisting in ceremonies.

The number of chaplains at an IDF will be determined by Serco management, in consultation with the department regional manager and individual religious organisations or denominations. The numbers, to be reviewed annually, will be based on the religious, cultural and linguistic composition of those in the IDF.

## 2.7 Escorting Requirements

Chaplains may have unescorted access to the communal areas of the facility. Escorting arrangements for other religious visitors will be determined by senior management based on the needs of the Detainees and the operational environment. Chaplains who would not normally require an escort may be provided with one should they request one, subject to operational requirements, for all or part of their visit.

Chaplains may bring a colleague into the detention facility for a specific purpose, such as assisting in ceremonies, but must escort that colleague at all times.

## 2.8 Religious Activities

The RLO, in consultation with Detainees and community religious leaders, will develop a monthly Religious Activities Program, which is to be incorporated into the monthly Programs and Activities schedule. At the discretion of the centre manager, a program may be altered in delivery or cancelled if it is determined that it poses a threat to the good order of the facility. In this instance the RLO will communicate through Detainee Consultative Committee meetings where appropriate.

The RLO will ensure that:

- The monthly Religious Activities Program is sufficiently flexible to cater for changes in the demographics of the Detainee population, which can occur over a relatively short period of time.

- The Religious Activities Program is widely promoted
- Processes are in place for Detainees and religious leaders to provide feedback

Any area set aside in the facility for religious purposes will be a multi faith area, with no permanent religious symbols. Whenever possible, taking infrastructure into consideration, each facility will designate:

- An area for communal worship
- An area for prayer and meditation
- Private rooms for individual spiritual counselling

Use of these areas will be coordinated through the RLO. Operational requirements may take precedence over existing bookings. If a reserved area becomes unavailable for operational reasons, the RLO will negotiate alternative arrangements.

### 2.8.1 Religious Requirements

Religious Visitors may bring special items into the IDF used in religious workshop, that may be considered controlled items.

Sacramental wine, bread, and candles for religious ceremonies may be brought into the facility by religious practitioners, in limited but sufficient quantities for consumption / use by those attending the service. The wine must be clearly labelled, and must only be consumed during the religious service; any unused wine must be returned to the visitors and taken from the IDF.

Ceremonial Sikh daggers or Kirpan may be brought into the facility by religious practitioners, if prior approval is obtained through the Religious Liaison Officers (RLO). The RLO will obtain prior approval from the DIBP regional manager in consultation with DSP centre manager, before the items are permitted.

### 2.8.2 Ceremonies Inside an IDF

Religious ceremonies will be facilitated by the RLO. The privacy of those in detention and the integrity of the ceremony will be respected. Religious ceremonies may be performed by:

- Any individual in detention conducting personal religious ceremonies for themselves and their family; or
- Religious visitors, chaplains and designated individual in detention conducting ceremonies for groups of persons in a facility.

### 2.8.3 Ceremonies Outside an IDF

Attendance at religious services outside of a facility is considered an excursion and can be authorised at the discretion of the DIBP Regional Manager.

#### 2.8.4 Acts of Worship and Religious Festivals

The Centre Manager will ensure all Detainees are free to practice their religion of choice individually or communally in accordance with the DIBP policy and subject to the overriding safety and security of Detainees.

#### 2.8.5 Other Spiritual and Religious Activities

The RLO will, in consultation with Detainees and religious leaders, establish study groups and other activities to provide instruction and offer opportunities for growth in religious faith.

#### 2.9 Community Links

The RLO will foster links with religious groups and leaders in the community in order to enhance spiritual support for people while they are in detention, and to provide spiritual support for Detainees transferring to another facility and/or upon release into the community.

Religious groups from the community may be invited by senior management to lead or join religious activities in the detention facility.

Attendance at religious services outside of the detention facility is considered to be an excursion and can be authorised at the discretion of the Department Regional Manager in accordance with the DIBP Policy for excursions.

#### 2.10 Logistics of Religious Festivals and Celebrations

Specific requirements for religious practices, including food, clothing and books will be facilitated, where possible. All items, which are required for the observance of religious festivals and celebrations, will be coordinated by the RLO and approved by senior management.

At facilities where catering services are supplied by Serco, the catering manager, in consultation with the RLO, will endeavour to accommodate religious festivals and holy days.

#### 2.11 Death of a Detainee

If a person dies while in detention, the senior management and RLO will ensure that, subject to legal protocols, all relevant religious and spiritual customs are recognised and respected. This may include the attendance of an appropriate religious leader and facilitation of a religious ceremony.

#### 2.12 Detainees Held Outside an IDF or in an Emergency Situation

If a religious leader asks to visit a Detainee who is being held outside of the detention facility or during an emergency situation, approval for access may be arranged on a case by case basis by Serco management and the RLO, taking into consideration:

- The welfare of the Detainee
- The wishes of the Detainee



- The requirements of the place in which they are being held
- Operational requirements at the time.

If a Detainee requests to speak with a religious leader while being held outside of the detention facility or during an emergency situation, access may be granted, taking into consideration:

- The welfare of the Detainee
- The wishes of the Detainee
- The requirements of the place in which they are being held
- The nature and location of the emergency situation
- The safety and security of the environment

# Searching and Fabric Checks

## Serco Immigration Services

### Document Control

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# 1. Introduction

## 1.1 Policy

Serco will provide a safe and secure environment for all people who live and work in, or who visit immigration detention facilities (IDFs). This document aims to provide a procedural base and framework governing the execution of searches and fabric checks within any IDF.

In line with Serco's contract with the Department of Immigration and Border Protection, searches of Detainees and their property while in detention will be conducted to detect illegal, excluded or controlled items.

All searches and screening procedures will be completed in line with the requirements of the DSM and the Human Rights Standards for Immigration Detention. Detainees will be treated with dignity and respect at all times.

The Detention Services Manual stipulates numerous actions that must be completed in relation to both searches and screening procedures of people, as well as searching accommodation. Some of these stipulations are covered in this PPM, however this is supported by further detail provided in the DSM compliant training that all operational staff receive during their initial and refresher training.

The contract contains a requirement for the completion of 'security checks' of Detainee accommodation. In the context of searching Detainee accommodation, 'security check' has the same meaning as 'search'. This PPM will use the term 'search'.

## 1.2 Related Documents

- Evidence Management PPM (SIS-OPS-PPM-0009)
- Entry and Exit Control PPM (SIS-OPS-PPM-0018)
- Health Services Support PPM (SIS-OPS-PPM-00xx)

## 1.3 Related Forms

- Security Information Report (SIS-OPS-FRM-0053)
- Fabric Check Log (SIS-OPS-FRM-0028)
- Search Form (SIS-OPS-FRM-0029)

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- Facilities and Detainee Services Contract 2014

## 2. Fabric Checks

The purpose of a fabric check is to identify the following:

- Items that require repair or maintenance in order to function properly or preserve the safety, security and wellbeing of people who live / work in the facility
- Health and safety issues
- Life saving equipment provision and operational readiness

All Detainee accommodation will be subject to monthly Fabric Checks, which will contribute to the maintenance of a safe and secure environment.

Completed Fabric Checks will be recorded on the Fabric Check Log. This form must be used by all IDFs.

Officers must not search a Detainee, or go through or search a Detainee's property during a Fabric Check, in any way. Fabric Checks are not searches and therefore may be completed by a single officer and do not need audio/visual recording.

If excluded / controlled items are observed during the course of the Fabric Check, they must be recorded, removed and stored (if safe to do so) with the Detainee's personal belongings until such a time that the person is to be removed or leaves the detention environment. The Detainee must be informed and provided with a receipt for any such property.

Officers should execute the following actions on completion of a fabric check:

- Report to Facilities Management any repair / maintenance issues identified
- Address where possible any Health, Safety & Environment (HSE) concerns; if the staff member is not able to address the matter it should be reported to
  - The HSE representative within the immigration facility
  - Detention Health Service Provider (DHSP) representative (where drugs are concerned)
  - Line Manager
- Report any security concerns to line manager and through completion of a Security Information Report (SIR)

Officers conducting fabric checks should pay particular attention to the following items:

- Lighting: switches and fittings are intact and fully operational
- Fire / smoke alarms: all are in place and have not been tampered with
- Fire extinguishers: all are in date, intact and serviceable (officers must not test fire extinguishers)
- Windows and coverings: windows open and close properly, coverings are not damaged in any way
- Door hinges & closure: door closes correctly and hinges are fitted correctly
- Bathroom fittings (towel and shower rails and toilet roll holders): all are intact and securely fixed
- Beds: all are stable, sheets and covers are intact

- Condition of cupboards / drawers: doors are properly attached and close properly, the cupboard is properly affixed to the wall (if applicable) NOTE: When checking doors and drawers work properly, staff must not go through any property within the cupboard / drawer
- Fly screens (if applicable): all are intact and appropriately fixed
- Air conditioner is working and is being used appropriately
- Floor coverings are undamaged
- Check medical safe is locked, if present
- Checks walls and other areas for damage/graffiti.

Staff should be mindful of the following, however must not search or go through a Detainee's property in order to look for the following items:

- Stock piling of food: particularly sugar, fruit & food containing yeast products (bread products, vegemite etc)
- Pornographic or offensive material
- Build up of combustible materials
- Stock piling of medicines

If excess food or combustible material is observed when completing a Fabric Check, the Detainee should be informed and the excess should be removed. Confirmation should be sought from the DHSP as to whether the Detainee should be in possession of whatever medication is observed in excess quantities, and officers should act in accordance with any feedback provided.

## 2.1 Reporting Repair and Maintenance Issues

Items identified requiring repair or maintenance will be reported to the appropriate provider as per local protocols. Staff must inform the Facilities Management (FM) staff and Operational Management of any damage or maintenance issues that may jeopardise the safety of staff or Detainees or the security infrastructure.

## 2.2 Vacant Room Requirements

Vacant rooms must still be subject to Fabric Checks if they are unsecured. If a room is vacant and secured, it need not be subject to Fabric Checks.

There are additional requirements when a room is vacant in a tropical climate to ensure the room does not suffer adverse affects from humidity. It is imperative that where air conditioners are fitted they are turned on and that the appropriate settings are chosen to provide the best protection against mould.

### 2.2.1 Setting Air Conditioners

- Room Air Conditioners (RAC)
  - Set the RAC to operate on the "Dry" cycle
  - If "Dry" cycle is not fitted then set RAC to "Fan" only

- If there is a fresh air vent fitted to the RAC – then close this to prevent humid air entering the room
- Run at 24 degrees Celsius
- Adjust the vent levers on the air conditioner to face upwards to cool (hot air rises, cool air drops)
- Rooms with Split System Air Conditioners
  - air conditioners remain “ON” and
  - temperature set to 24 degrees C
  - remote set on “Dry”

### 3. Legal Framework for Searches (excluding strip searches)

**Table 1 – Legal Framework**

Legislation / Section	Subject	Stipulations
Migration Act, Section 252	Searches of persons	<p>Persons detained in Australia, their clothing and any property under their immediate control may be searched, by an authorised officer under the S252 Act:</p> <ul style="list-style-type: none"> <li>■ to find out whether there is hidden on the person, in the clothing or in the property, a weapon or other thing capable of being used to inflict bodily injury or to help the person to escape from immigration detention;</li> <li>■ to find out whether there is hidden on the person, in the clothing or in the property, a document or other thing that is, or may be, evidence for grounds for cancelling the person's visa.</li> </ul> <p>The officer must:</p> <ul style="list-style-type: none"> <li>■ not remove the person's clothing and must not require that the person remove any of their clothing, however can request that the person removes outer garments</li> <li>■ be of the same sex as the person subject to the search</li> <li>■ not use more force, or subject a person to greater indignity than is reasonably necessary in order to conduct the search</li> </ul>



Legislation / Section	Subject	Stipulations
Migration Act, Section 252AA	Power to conduct a screening procedure	<p>Persons detained in Immigration Detention Facilities in Australia may be subject to a screening procedure to establish whether there is hidden on them, in their clothing or a thing in their possession a weapon, or other item capable of being used:</p> <ul style="list-style-type: none"> <li>■ to inflict harm</li> <li>■ to help them, or anyone else, escape from Immigration Detention</li> </ul> <p>The officer conducting the screening procedure must:</p> <ul style="list-style-type: none"> <li>■ not remove the person's clothing and must not require that the person remove any of their clothing, however can request that the person removes outer garments</li> <li>■ not use more force, or subject a person to greater indignity than is reasonably necessary in order to conduct the search.</li> </ul> <p>A screening procedure may involve:</p> <ul style="list-style-type: none"> <li>■ walking through a metal detector portal</li> <li>■ passing a piece of screening equipment (metal detector or similar device for detecting metal or substances) over the person or their possessions.</li> <li>■ passing a person's possessions through an x-ray machine.</li> </ul>
Common Law Duty of care	Searching premises	<p>Searches of detention premises conducted under duty of care include but are not limited to a search of all accommodation and common areas frequented by Detainees and any other area under Serco's control. (DSM Chapter 8)</p> <p>Current policy allows for routine searches without reasonable doubt in order to maintain the safety and control of detention property. Searching of the Detainee's 'personal effects' within the accommodation may only be done when 'the elements of duty of care are met'; Serco fulfils this requirement with the need to provide a safe and secure environment for all people who live or work in, or visit Immigration Detention Facilities.</p>

**Note**, while the Detention Services Manual states that a search must not include items of personal adornment, such as jewellery, DIBP accepts that Serco is obligated to search such items if there is a reasonable suspicion that they may contain items which satisfy the conditions of the Act. Given previous examples of this, it is accepted that such a suspicion exists.

## 4. Searching

Serco has a contractual obligation to conduct regular searches throughout facilities to detect and control the presence within the facility of illegal, excluded and controlled items. This will include searching all areas of the facility.

### 4.1 Frequency

#### 4.1.1 Detainee Accommodation

All Detainee accommodation will be searched as follows:

- Facilities with fewer than 200 Detainees will search each room every month on a random basis, according to a searching matrix.
- Facilities with greater than 200 Detainees will conduct the greater of the following number of non-duplicating random accommodation searches each month:

- 200; or
- 20% of the predicted total number of Detainees

In addition to these monthly searches, targeted room searches must be completed in the following circumstances:

- where a Detainee is assessed as having a high / extreme risk profile
- when intelligence supports this action. All intelligence needs to be appropriately recorded on a Security Intelligence Report (SIR) and logged within the facility's register.

Searches of accommodation will be carried out under the requirements of Duty of Care.

#### 4.1.2 Common Areas

Searches must be conducted on a regular basis throughout the facility to detect and control the presence within the facility of illegal, excluded and controlled items.

#### 4.2 Procedure

Prior to conducting a search of Detainee accommodation officers will refer to the Detainee's risk assessment to check the Detainee's risk rating and to ensure any required risk mitigation is in place prior to conducting the search.

The Detainee is to be present when their accommodation is searched. In exceptional circumstances where the Detainee is not able to be present and the search cannot be postponed, staff must:

- Seek Departmental permission/approval to conduct the search in the absence of the Detainee
- Record the name of the Departmental staff member sanctioning the search
- Provide the Detainee the opportunity to view the video footage after the search is completed.

The following points will be clarified with the Detainee, in a language they understand, using an interpreter if necessary:

- That they understand the process – why the search is being carried out, the legal authority for the search, what will happen during the search.

The searching officers must ensure:

- the Detainee understands the process (using an interpreter if necessary)
- a Search Form is completed for every search, using one form per Detainee's bed space i.e. staff searching a room occupied by three Detainees would require three Search Forms to enable accurate recording of information
- any controlled, excluded or illegal items removed from the Detainee's accommodation are recorded appropriately on the Search Form
- the digital recording of the search is provided to the DIBP Regional Manager within one hour of the completion of the search, in order to comply with contractual requirements

All officers taking part in the search are to be fully briefed by a CSM / Shift Supervisor or higher grade staff member, as to their roles and responsibilities during the search and any intelligence relating to the search.

All searches will be conducted in accordance with the techniques taught in the Searching training and will not be executed in a manner which may cause the Detainee undue distress. Staff will be mindful of the proposed timing of searches to ensure they are not conducted at a time likely to cause distress to the Detainee (such as during the night). If a Detainee is participating in an activity at the proposed time of the search, the search should be rescheduled without notifying the Detainee. Consideration will also be given to the timing of the searches of common areas in order to not cause undue distress to Detainees. If, in extreme circumstances, a search is required to be carried out overnight, Departmental approval must be sought.

Staff will carry, and where appropriate, use, evidence bags while conducting searches.

Searches of common areas do not require audio visual recording.

### 4.3 Staff Required for Conducting Searches

#### 4.3.1 Searching of Detainee Accommodation

For searches of accommodation to be conducted appropriately there must be a minimum of two staff, with at least one of the same sex as the Detainee. Their roles will be to:

- conduct a pat down search of the Detainee whose room is being searched, subject to clause 5.2 below, prior to the accommodation search (must be by the staff member of the same sex)
- digitally record the search (including the pat down)
- conduct the search
- complete the Search Form

#### 4.3.2 Target Searches of Accommodation

The staff required for target searches is the same as detailed above, however all target searches must be supervised by an Operations Manager. In facilities that do not have Operations Managers, target searches must be supervised by the shift supervisor.

Searches of common areas must be completed by two staff of either sex.

### 4.4 Quality Assurance of Searches

In addition to supervising target searches, a CSM or above must supervise 5% of the monthly planned searches, and sign the search form to this effect.

## 5. Searching / Screening Detainees

Adult Detainees will be subject to a pat search and screening procedure, conducted in accordance with SIS training, and the Migration Act as detailed above, in the following situations:

- when their accommodation is searched
- before and after a visit, in facilities which have designated visits areas to which Detainees not receiving a visit do not have access. Where there is no such designated area, searches / screening procedures will be conducted at the discretion of the duty manager.

- upon reception into a facility and prior to discharge, whether for a transport and escort task (including excursions), upon transfer, or reception to / discharge from detention  
NOTE see 5.2 Searching / screening minor Detainees for further information
- when there is intelligence to suggest a search of the individual is required

Only staff who have completed the appropriate training and received the appropriate certification will be utilised in any searching tasks.

### 5.1 Conducting Pat Searches

Staff members conducting pat down searches of Detainees must be of the same sex as the Detainee. If a transgender or intersex Detainee is to be searched, the Detainee may require that either a male or a female officer conduct the search. There must be a witness of the same sex as the Detainee being searched.

### 5.2 Searching / Screening Minor Detainees

Detainees under the age of 18 (minor Detainees) should only be subject to a pat search in the most exceptional of circumstances where there is the firm belief that there is on their person a weapon or other thing capable of being used to inflict bodily injury or to help the minor escape from immigration detention. Approval by the DIBP Regional Manager must be sought before a search is conducted on a minor who is under 12 years old.

Any search of a minor should be conducted in the presence of a parent or guardian. If the Detainee is an Unaccompanied Minor, the search must be conducted in the presences of a DIBP officer or an approved SRSS provider.

Minors must not be subject to a screening procedure prior to school attendance. Screening procedures should occur on return from school, prior to and after T&E tasks. These screening procedures must be conducted in the presence of a DIBP officer or an approved SRSS Provider employee, or the minor's parents, where applicable.

### 5.3 Location of Pat Down Searches / Screening Procedures

All reasonable efforts must be made to ensure that the search / screen is conducted away from the view of the public and persons not involved in the search.

### 5.4 Strip Searches

Strip searches will only be conducted in accordance with the processes and approvals outlined in the Detention Services Manual and the Migration Act. Strip searches will only be executed by appropriately trained and authorised officers. Strip searches must be approved by a Deputy Secretary or the Secretary of DIBP.

## 6. Illegal, Controlled and Excluded items

Certain categories of items that cannot be brought into IDFs include:

- items which are illegal under Australian law
- items that present a risk to the health of Detainees, visitors or staff
- items that present a risk to privacy, safety or security
- items that may be offensive to others.

The current list of excluded and controlled items is included below.

Unless otherwise notified by the DIPB Regional Manager, the Centre Manager will ensure that any Illegal, Excluded and Controlled Items that are detected will be recorded and retained, where appropriate.

Detected Excluded or Controlled Items should be

- removed and stored securely
- returned to the owner when the person leaves the facility

Illegal items detected or found should be removed, recorded and securely stored until collection by the relevant authority. Where appropriate, preservation of evidence principles should be followed. A Security Information Report (SIR)

Where appropriate, Incident Reporting procedures must be followed.

### 6.1 Excluded items

Excluded items include:

- any items which are illegal within Australia
- all mobile phones for IMAs
- alcohol
- non-prescribed pharmaceutical medication
- traditional medical remedies
- prescribed pharmaceutical medication not supported by a medical certificate and not cleared by the HSM for personal use by the Detainee
- travel and identity documents, including passports
- personal equipment such as cameras, mobile phones or other communication technology with Personal Internet Enabled Devices (PIED), internet, audio, photographic or videoing recording capabilities
- pornographic books, magazines or related material, and
- material that incites violence, racism or hatred.

### 6.2 Controlled items

Categories of controlled items that may present a risk to health and safety of people in immigration detention, visitors and staff, include, but are not limited to:

- perishable foods (such as cured, air-dried or fermented products, uncooked animal or fish products and eggs) brought in, or provided to Detainees for personal use by visitors: o these items are restricted to pre-packaged sealed containers with a use-by date for management of appropriate short-term storage and not resold or traded within IDFs
- subject to HSM advice, brand name non-prescribed complementary health care supplements (e.g. vitamin and minerals)
- sharp items, including syringes, knives, scissors or razor blades
- outside contractor tools and equipment
- glass items, including mirrors and picture frames
- electrical items may be brought in, with prior approval for use by Detainees, subject to space and safety considerations and, a current electrician's certificate stating compliance with relevant safety regulations
- aerosol and pressure propelled products
- professional, craft, sporting equipment and other tools used for programs and activities run by approved visitors must be removed at the end of the activity visit and items used in religious worship, such as sacramental wine, candles or religious instruments such as Sikh dagger/Kirpan, provided by an approved religious visitor must be consumed or removed (as appropriate) at the end of the visit.

Examples of controlled items that may present a risk to privacy, safety or security include, but are not limited to:

- computers with modem
- communication devices and PC peripherals - including, but not limited to USB storage devices, flash drives, disk drives, scanners, printers or MP players with audio recording capabilities
- cash, cheques and bank cards
- personal photographs, including photographic identification documents.

# T&E Approval Process and Operational Changes

## Serco Immigration Services

### Document Control

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## 1. Introduction

### 1.1 Policy

Procedures and processes have been implemented to ensure that all Transport and Escort (T&E) tasks are executed safely, securely and professionally while maintaining the rights, dignity and privacy of all detainees in accordance with the Immigration Detention Values and Serco Governing Principles.

The processes outlined within this document will ensure that all transport and escort tasks related to the management of detainees are conducted in line with agreed procedure and within the requirements of our contractual undertaking with the Department.

### 1.2 Related Documents

- Search and Fabric Check (SIS-OPS-PPM-0050)
- Operational Safety (SIS-OPS-PPM-0035)
- Incident Reporting (SIS-OPS-PPM-0019)
- Property Management (SIS-OPS-PPM-0012)
- Reception, Induction, Transfer and Discharge (SIS-OPS-PPM-0029)
- Intelligence and Operational Risk Management (SIS-OPS-PPM-0021)
- Task Process and Approval Framework – Local (SIS-TE-DOC-0001)
- T&E Task Process and Approval Framework – Domestic (SIS-TE-DOC-0002)
- T&E Task Process and Approval Framework – International (SIS-TE-DOC-0003)

### 1.3 Related Forms

- Escort Risk Assessment
- Site Risk Assessment
- Escort Operational Order (SIS-TE-FRM-0001)
- Security Risk and Threat Assessment (SIS-OPS-FRM-0062)

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, Department of Immigration and Border Protection (DIBP)

Table 1 – Abbreviations

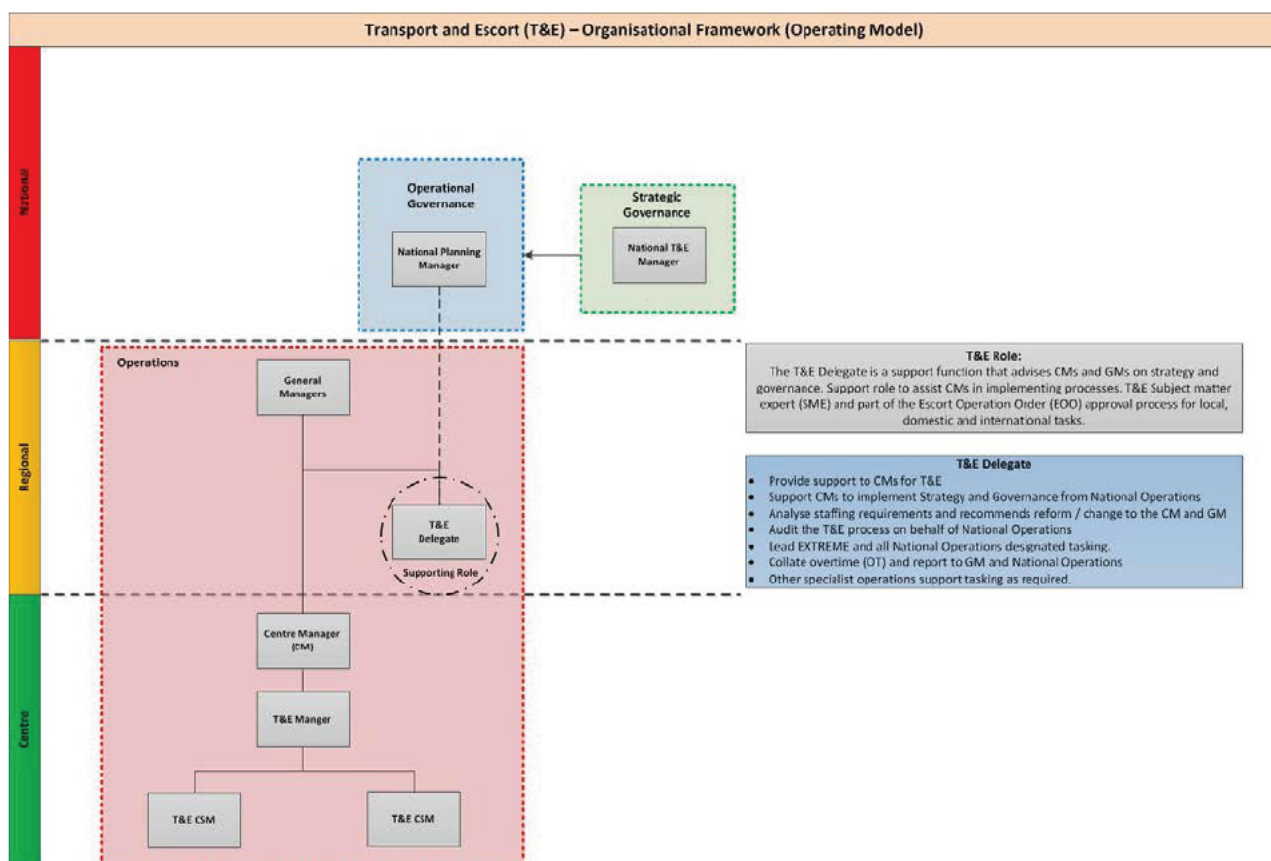
Abbreviation	Meaning
CM	Centre Manager
DHSP	Detention Health Service Provider
DIBP	Department of Immigration and Border Protection
DSP	Detention Service Provider
EEP	Enhanced Escort Position
EOO	Escort Operational Order
FDS	Facilities and Detainee Services
GM	General Manager
IA	Intelligence Analyst
NPM	National Planning Manager
GM	General Manager
RA	Risk Assessment
RFS	Request for Service
SOM	Senior Operations Manager
SRA	Site Risk Assessment
SRAT	Security Risk Assessment Template
T&E	Transport and Escort
TL	Team Leader
UoF	Use of Force

## 2. T&E Management Structure

The management structure of the Serco Immigration Services T&E function provides a level of amplification concerning reporting lines, escort approval processes and governance responsibilities at the facility, regional and national levels of the business.

The National Planning Manager (NPM) has overall management responsibility for all aviation tasks and is the T&E lead for the National Operations Team. The T&E Director will work with the NPM and National Operations Team to develop governance, policy and procedure for network implementation.

Figure 1 – Organisational Framework



### 2.1 T&E Director

The T&E Director has the following responsibilities:

- Strategic level governance
- Project management associated with the T&E scheduling tool
- Fleet management and asset procurement
- Commercial and financial management
- Strategic level operational governance and assurance

## 2.2 National Planning Manager (NPM)

The National Planning Manager has the following responsibilities:

- Operational level governance
- Operational planning & risk-assessment policy and procedure
- Operational training design and delivery
- Oversight of all aviation based operations
- Oversight of high and extreme risk operations
- Lead on all T&E governance projects / action plans
- Appoint T&E Delegates for approval and governance – The Delegate is a the T&E Manager who is the Lead for the T&E Operation within the precinct/region.

## 2.3 General Managers (GM)

General Managers have the following responsibilities:

- Line management of the T&E Delegates
- Planning oversight for regionally based activities
- Regional governance and assurance

## 2.4 Local T&E Delegates (As designated by the NPM)

Designated T&E Delegates have the following responsibilities:

- Operational oversight of regional activities on behalf of the GM
- Advice and provision of support to Centre Managers (CMs) around policy and procedure
- Conduct ongoing operational audits of the T&E processes within each detention facility
- Support the National Operations Team during projects, aviation, Extreme risk and other operations, as determined by the National Operations Team

## 2.5 Centre Managers (CMs)

Centre Managers have the following responsibilities:

- Operational oversight of localised activities
- Governance of local T&E processes (in consultation with the T&E Delegate)
- Line management of the T&E Managers Rostering and localised governance in accordance with regional and national direction
- Development of localised Tactical Plans and other associated planning and coordination

## 2.6 T&E Operations Managers (T&E OMs)

T&E Operations Managers have the following responsibilities:

- Responsible to the CM for day to day planning, resourcing and delivery of local T&E operations
- Line management of T&E staff within their facility
- Ensuring local processes are properly designed, implemented and maintained
- Ensure local compliance with T&E policies and procedures

## 3. Planning

### 3.1 Request for Service (RFS)

Local escort requirements can stem from one of the three main stakeholders to the detention network – DIBP, the Detention Health Service Provider (DHSP) and SIS.

The RFS is a document that is provided by DIBP as the authority to direct that the Detention Service Provider (DSP) undertake a T&E task. The RFS received from the Department will be generated on the DIBP Portal computer system. Requests received from the DHSP will be related to medical issues and those received internally from SIS will relate to escort support for Program and Activities (P&A). If an RFS cannot be provided during a pressing circumstance, such as a medical emergency, then verbal or email approval will suffice initially, however the T&E Manager is to ensure a RFS is submitted during or following the task.

The RFS will stipulate as a minimum, the date of the escort, the identity of the detainee(s), the location for collection, the required time of arrival and the point of delivery of the escort task. The RFS may contain information relating to any known risk factors associated with the task or the detainee(s), as are available to the stakeholders at that point.

### 3.2 Escort Risk Assessment

The T&E Client Services Manager (CSM) or appropriate T&E Manager will complete the Escort Risk Assessment (RA) in line with the assessment guidelines. If an individual is assessed as satisfying one of the following criteria, further consideration will be given to the resources required to ensure the safe and efficient execution of the escort task:

- presenting a Medium, High or an Extreme risk
- identified as meeting the s501 criteria
- compliance pickup
- member of a National Operations designated interest group

The Escort RA is approved by the local T&E OM in consultation with the facility Intel Analyst (IA). In detention facilities where there is no IA available then the assessment will be approved by the Senior Security Manager onsite.

### 3.3 Site Risk Assessment

Escort tasks will be undertaken to a wide range of locations, which may include but are not limited to the following:

- Community organisations
- Court buildings
- DIBP offices
- Medical facilities
- Recreational locations (parks, libraries, etc)
- Religious buildings/locations
- Residential properties (covered separately within the Special Purpose Visit policy)
- Schools and colleges
- Sport and leisure centres
- International removals
- Domestic transfers
- Offshore charters
- Compliance operations

Local T&E will conduct a Site RA (SRA) for the identified location prior to the escort task commencing, which will then be provided to DIBP. This Risk Assessment will identify recognised concerns that contribute to the risks associated with an escort involving a particular location. The SRA will inform the detailed planning of the task, including the resources that will be required for the conduct of the escort.

The Intel Analyst at each site will review the Risk Assessment with the T&E Manager to identify any other risk considerations.

In exceptional circumstances the Risk Assessment may indicate that the risks associated with a proposed location are too many to mitigate, in which case T&E Manager must liaise with DIBP to determine alternative courses of action or to seek cancellation of the escort task.

All assessments are to be reviewed by the relevant IA at each site before any escort takes place.

The site Risk Assessment includes the following information:-

- Description of site
- Hazards to and from site
- Site integrity (security of site, entry and egress points)
- Workplace Health and Safety (WHS) concerns
- Vehicular access
- Congestion points (vehicular and pedestrian traffic)
- Access to public transport in the event of an escape
- Additional resources available (police, medical services, etc)

SRAs are live documents and must be updated every three months or when an escort officer identifies that the SRA requires updating.



### 3.4 Escort Operational Order (EOO) Preparation and Approval

The site T&E CSM will prepare an EOO utilising the information available as determined by the RFS, escort Risk Assessment and Site Risk Assessment.

The EOO is required to identify the risk and risk mitigations required for the successful completion of the escort.

Escort staff will be allocated to the task guided by the risk assessment. Escort staff will be notified of all required information, as included within the EOO and supporting escort documentation (including relevant PPM and Contingencies), prior to the task as part of the escort briefing.

An Escort task is not to be conducted without a detailed briefing by the T&E Manager. When the T&E CSM is unable to provide a briefing the CM is to be notified immediately and will provide further advice.

When determining the proposed timings of the escort, local T&E Management will factor in time to ensure that the detainee(s) welfare needs are met, including but not limited to the provision of refreshments, access to bathroom facilities, and providing a rest break of at least 15 minutes for every two hours of surface travel.

All EEOs are to be approved by the relevant managers as per the relevant Review and Approval Framework:

- SIS-TE-DOC-0001 T&E Task Process and Approval Framework – Local
- SIS-TE-DOC-0002 T&E Task Process and Approval Framework – Domestic
- SIS-TE-DOC-0003 T&E Task Process and Approval Framework – International.

### 3.5 Recommenders and Approvers

Within the approval frameworks there are a number of Recommenders and Approvers dependant on the risk and type of T&E task.

When a manager is designated as the Recommender they are to ensure that the EOO meets the following requirements:

- There is appropriate staffing designated for the task
- Appropriate risk mitigations have been included
- Grammatically correct
- DIBP approvals have been received
- All relevant SRAs and SRATS are included and considered

When a manager is designated as the Approver they are to ensure that the T&E task meets the following requirements:

- There is appropriate staffing
- The risk for the task is appropriately mitigated

### 3.6 Local Escort Planning Responsibilities

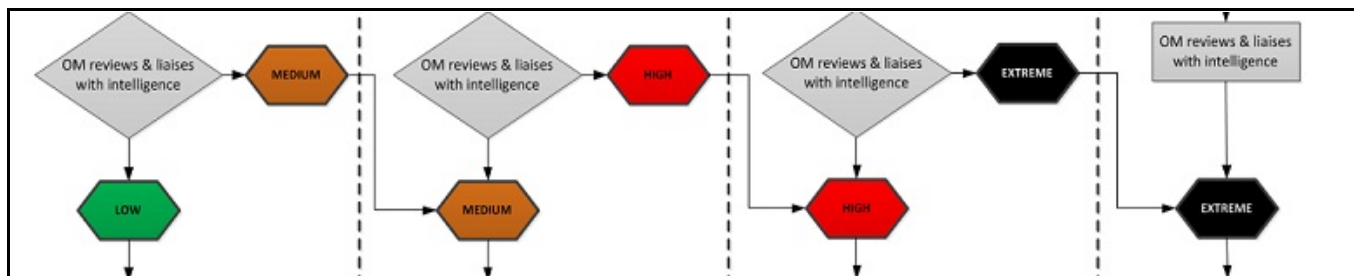
It is recognised that there exists a level of inherent risk associated with any local escort task. Accordingly all SIS T&E officers and managers will ensure that the ongoing detention security of the detainee or detainees is maintained.

## 4. T&E Intelligence Review Meeting

The T&E OM will review every EOO with the Intel Analyst. During the Intelligence and Review meeting the SRA, SRAT and EOO are to be reviewed to ensure the overall risk is mitigated.

If the overall risk of the escort has changed then process detailed in Figure 1 Decision Flow Diagram is to apply; if the risk level has changed the T&E Manager is to review the EOO and augment the mitigations including but not limited to staffing, pre-planned use of force (UoF) and additional resources. If an agreement is not reached the Manager is to consult the Senior security Manager for guidance.

Figure 2 – Decision Flow Diagram



## 5. DIBP Approval

Approval is to be sought from DIBP for all High/Extreme risk detainee(s)/escorts or when a task requires the pre-planned use of force. This includes the Enhanced Escort Position (EEP) and the use of mechanical restraints / flexi-cuffs.

It is the responsibility of the T&E Manager to seek approval from the DIBP CM / DIBP RM (to be clarified by the Serco CM) at each facility. To ensure the Serco approval can progress in a timely manner the T&E Manager will progress the EOO for approval to the Serco CM as the next Approver / Recommender simultaneously.

If an EOO is not approved by the Department it is the responsibility of the T&E OM to notify the Recommender as per the relevant approval framework. The EOO is then to be redrafted to include additional mitigations, including additional staffing requirements.

### 5.1 DIBP Approval Request Considerations and Format

The contract with the Department allows SIS the opportunity to use force, including restraints, where necessary. As such, where the RA process indicates Use of Force (UoF) is appropriate, planning must consider this. It is incumbent on SIS to ensure that all relevant information, with as much detail and evidence, as possible is provided to the Department in order to seek due consideration and approval.

Approval requests are to clearly outline to the Department the following (which is not all inclusive but instead designed to provide direction):

- **What are the risks the detainee poses?**
  - Escape intent
  - Escape capability i.e. compliance detainee (prison or compliance pickup) and possible external assistance
  - All forms of violence
  - History of non-compliance (will the detainee follow direction?)
  - High profile risk detainee (media interest)
  - Possibility of self-harm
  
- **What capability has the detainee demonstrated?**
  - The physical capabilities of the detainee
  - Previous non-compliance
  - Escape intent intelligence holdings
  
- **Will the location of the escort and route attribute to the risk?**
  - The location may not be secure - is the location in a crowded shopping mall at a peak traffic flow time? Is the location in a secluded commercial/medical facility?
  - Route and length of the escort may contribute to the risk
  - Parking – how close can the escort team park to the entry/exit? Is there underground parking with lift access?
  
- **Will EEP and/ or restraints mitigate the risk? How so?**
  - To prevent escape
  - Prevent assaults to staff, stakeholder and the public
  - Prevent attempt of self-harm
  - To prevent the possibility of detainees with serious offences escaping into the community
  - Ensure the detainee is compliant
  
- **What are the possible consequences if the detainee is not restrained nor has EEP applied?**
  - Escape and risk to the community if detainee escaped
  - Safety of the staff, public and stakeholders would be compromised
  - Detainee may self-harm

## 6. Serco Approval Process

### 6.1 Approval Request Format

The subject line for each emailed approval request will need to include the following:

- Date of escort
- Risk
- Destination
- Surname or if multiple detainees, the number of detainees

*i.e. "21.07.14 – HIGH – Belmont Pathology – John NGUYEN" or "21.07.14 – HIGH – Domestic transfer to Curtin IDC – 6 Vietnamese detainees"*

When the Transport Scheduling Tool (TST) is in place at each Centre the approval process is as per the TST policy.

### 6.2 Submission to the Recommender

When the T&E Manager and Intel Analyst have reviewed the EOO and have agreed on the proposed mitigations, the T&E Manager is to progress all EOOs to the CM. The CM will review each EOO to ensure that each EOO is grammatically correct, risk is mitigated to an acceptable level and is within Serco policy procedure and guidelines. When the task is outside business hours the T&E Manager is to consult with the Recommender or the on duty National T&E Manager to ensure the risk is appropriately mitigated.

The EOO approval frameworks are to be communicated to all T&E staff and followed at all times. These documents are to be placed within facility escort offices for quick reference. The development of communication protocols at the local level is the responsibility of the CM at each site.

## 7. Daily High Risk Transport Update

The T&E Manager is to ensure all High and Extreme risk and compliance tasks involving more than 2 expected Detainees or those involving any individual, or group, that is identified as Special Interest are submitted to National Operations 24/48 hours prior to the task occurring (subject to notification of the task), through the Daily High Risk Transport Update spreadsheet. This ensures National Operations has appropriate oversight and governance of such tasks.

Spreadsheets are to be submitted to [DL\\_NationalPlanning@serco-ap.com.au](mailto:DL_NationalPlanning@serco-ap.com.au) and [DL\\_SISOpsApprovals@serco-ap.com.au](mailto:DL_SISOpsApprovals@serco-ap.com.au) daily prior to 1530hrs EST.

The following details are to be submitted:

- Region
- Date of proposed task
- Risk
- Nationality of detainee(s)
- Immigration Detention Facility (IDF) the detainee is accommodated
- Destination of task

- Name(s) of detainee(s) or number if multiple detainees
- Detainee age
- Number of escorts
- Mitigations i.e. EEP or restraints
- Approval status

## 8. After Hours Approvals (Urgent)

When escort activities that require approval outside regular business hours the approval for tasks will reside with the local duty manager. If the escort is related to a High or Extreme risk task then approval must be sought from the National Duty Manager.

## 9. Governance

### 9.1 General Manager

The General Manager is responsible for the operational level oversight and governance of T&E operations within their areas of responsibility. In achieving governance outcomes the GM should seek support from the National Operations Team.

### 9.2 Nominated T&E Delegate

The T&E Delegate is responsible to work with the Centre Managers and General Managers to ensure that the local governance is in line with policy and procedures and within our contractual obligations with the Department. The T&E Delegate is to work with the T&E Manager and develop localised procedures and their implementation.

### 9.3 Centre Manager/General Manager

CMs and relevant GMs are responsible for local management and governance of the T&E function. The CM will need to ensure that the approval processes are followed. The CM is to ensure all facility staff relevant to the process are fully aware of their responsibilities.

### 9.4 T&E Manager

The T&E OM is responsible to manage and review all site T&E processes on a daily basis to ensure that the localised T&E activities are operating within Serco policy and procedures.

## 10. Charter Operations

The National Operations Team is responsible for the planning and resourcing of all charter tasks. The Centre Manager is responsible for the planning and development of the facility to airport tactical plans (i.e. extraction, processing and ground escort). These plans are to be submitted for approval to the National Operations Team at least 48 hours prior to the operation taking place (subject to notification from the Department of the task occurring).

During the task the T&E Delegate are responsible for the ground coordination and oversight of these tasks on behalf of the National Operations Team.

### 10.1 Offshore Charters

The development and coordination of all tactical plans for offshore charters and other charter activities designated by the National Operations Team, is the responsibility of the Operational Planning Manager

# Transport and Escort Contingencies

## Serco Immigration Services

### Document Control

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# 1. Introduction

## 1.1 Policy

Serco Immigration Services (SIS) will have in place contingency plans to effectively facilitate all Transport and Escort (T&E) tasks. All Transport and Escort (T&E) tasks must be executed safely, securely and professionally while maintaining the rights, dignity and privacy of all detainees in accordance with the Immigration Detention Values and Serco Governing Principles. Escorting officers will ensure they act with compassion at all times, while maintaining the integrity of the escorting task.

## 1.2 Related Documents

- Operational Safety (SIS-OPS-PPM-0035)

## 1.3 Related Forms

- Escort Operational Order

## 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- AS/NZS 9001:2008 – Quality Management Systems - Requirements

## 2. International Removals

### 2.1 Self-Harm

If the Detainee attempts or commits self-harm during the escort, the escort officers will use minimum amount of force necessary to ensure the safety of the Detainee. Staff are to remove or secure any items that may cause any further injuries and provide immediate first aid assistance. The Team Leader will contact the triage line and seek/follow advice from the on-call DHSP medical professional whilst the escort team is within Australia. The escort team is to seek medical assistance from the airport staff when overseas during a transit point.

Once on the plane, the escort Team Leader will liaise with the cabin crew to triage the Detainee while the escorts maintain the wellbeing and security of the Detainee.

If the Detainee self-harms prior to the aircraft taking off the T&E Manager and DIBP Removals Manager are to be contacted for further instructions.

### 2.2 Aborted Removal

At any point prior to take off, the removal may be cancelled or aborted. This may be, for example, as a result of the Detainee seeking a Court injunction, non-compliance, delayed or cancelled flights or by lodging a visa application or Ministerial Intervention request. Serco must do everything in its power to manage a Detainee behaviour in order that it does not cause the removal to be aborted, however it is acknowledged that on occasion, situations beyond Serco's control will occur.

If the removal is cancelled prior to departure, the Team Leader will be notified by telephone from the T&E Manager. The T&E Manager will then notify the National Duty Manager. If the escort has not boarded the aeroplane, the Team Leader must follow instruction from DIBP where to secure the Detainee. The team will then:

- inform an airline representative of the cancellation, arranging for checked luggage to be offloaded and passengers to be removed from the manifest
- ensure all documentation relating to the Detainee is returned to the point from which it was collected

If the escort group has boarded the aircraft when cancellation notification is received, the Team Leader must notify cabin crew immediately and arrange for the Detainee and escorts to disembark from the aeroplane prior to its departure.

Should the Detainee's behaviour cause the Team Leader to consider the continuation of the escort to be likely to jeopardise the safety and security of any person or the flight, consideration must be given to aborting the removal. The Team Leader must liaise with the Removal Liaison Officer (RLO) if present, the T&E on call manager and the cabin crew. If the Team Leader decides to abort the removal, full justification for this must be recorded in the EOO and provided to all parties verbally. The Team Leader should follow the steps outlined above regarding disembarkation, luggage and liaise with DIBP to make appropriate placement options for continued detention.

## 2.3 Accident/Injury/Illness

Should a Detainee require medical attention on a flight the airline staff will need to be notified. When requested by the airline staff Serco Officers will assist within the guidelines of their current first aid training. When the aircraft lands the National Duty Manager and the DIBP on call officer are to be notified immediately. If the Detainee is required to be hospitalised at a transit point then the captain will need to be notified and requested to notify local authorities that escort officers will need to accompany the Detainee. If the escort staff are prevented from accompanying the Detainee further advice will need to be sought from the DIBP and the National Duty Manager.

If an officer requires medical attention and is unable to continue escorting the Detainee, the officers must notify the captain and request the policing authority to meet the escort at the aerobridge to assist with the security of the Detainee. The DIBP on call manager must be notified immediately on arrival to liaise with the local authorities to assist until a replacement team arrives to take over the security of the Detainee.

## 2.4 Control of Detainee(s) within the Aircraft prior to Departure

The Captain of the aircraft has ultimate responsibility for the safety and security of everyone travelling on the flight. Should the behaviour of the Detainee(s) be deemed unsafe by the Captain, he/she has the authority to refuse boarding or carriage.

If the Captain refuses carriage, the Team Leader must contact the National Duty Manager and DIBP immediately for further instruction.

The escorting team has a responsibility for the safety and welfare of all persons on board the flight and must remain vigilant at all times. In the event of any incident on board the Team Leader must advise senior cabin crew and DIBP.

## 2.5 Vehicle Breakdown

When there is a vehicle breakdown while transiting between the Centre and the airport, the following principles will apply:

- Prevent Escape
- Immediately notify T&E Manager and request replacement vehicle
- Notify the RLO Officer or DIBP removals as per the ODP
- Maintain control of Detainee(s) being mindful of the situation
- Ensure Detainee(s) are offered water regularly
- Where possible make Detainee(s) as comfortable as possible until a replacement vehicle arrives
- When replacement vehicle arrives transfer Detainee(s) and continue the removal

On conclusion of incident, the escort staff must complete an incident report for submission to the T&E Manager.

## 2.6 Detainee Indiscipline

If a Detainee(s) actively resisted or impedes his/her removal, staff are to engage with the Detainee(s). The escort staff will attempt to de-escalate situation by talking to the Detainee(s). They are to ensure the safety and well-being of themselves and general public from commencement to end of any incident. If a situation escalates and the use of force is likely, the Team Leader is to contact the T&E OM for further instructions, who will then liaise with DIBP. If indiscipline continues, staff are to consider the use of force. If use of force is to be used, staff are also to consider the effect that use of force may have on members of the public; if in the public eye.

## 2.7 Active Non-Compliance

If the Detainee resists removal by becoming physically and/or verbally aggressive whilst on the aircraft, the escort staff will attempt to gain the Detainee's cooperation through negotiations. If this was unsuccessful, the escort staff may use reasonable force for the minimum duration needed to protect the safety of the detainee, staff, and other passengers.

## 2.8 Any other Contingency

When a situation arises that requires further guidance, the Team Leader is to ensure the safety and security of the Detainee is maintained and seek guidance from the National Duty Manager.

# 3. Cautions when Travelling Through Overseas Countries

Travel advisories are graded across four different levels by the Department of Foreign Affairs and Trade. The level given to a specific country reflects our overall assessment of the security situation in the destination and is designed to help people assess the level of risk which may be faced in that country.

The particular level for each country can be found on the Australian Government travel advisory website: <http://smartraveller.gov.au/>

When the Escort is transiting or staying overnight the following precautions are recommended.

### Level 1 – Exercise Normal Safety Precautions

Staff must exercise common sense and look out for suspicious behaviour, as they would in Australia.

- When there are signs of unrest or possible risks staff must ensure that they return to the hotel or nearest police station
- When possible travel with other staff especially in non-populated areas or ensure others are aware of proposed movements if travelling alone

## Level 2 – Exercise a High Degree of Caution

Staff must pay close attention to personal security at all times and monitor the media about possible new safety or security risks.

- When possible staff should travel in a pairs and ensure to remain alert when travelling, especially at night
- Avoid approaching any areas where there are crowds massing to protest
- Seek advice from the hotel which areas are safe for tourists to travel
- When there are signs of unrest or possible risks staff must ensure that they return to the hotel or nearest police station
- Ensure passports and travel documents are kept secure at all times

## Level 3 – Reconsider Your Need to Travel

There is a high level of risk in the country/area. This may be due to a very high threat of terrorist attack or a volatile and unpredictable security situation.

- When you leave the hotel, travel with other staff members especially in non-populated areas and ensure others are aware of your proposed movements
- Seek advice from the hotel which areas are safe for tourists to travel
- Avoid non populated areas and at any sign of unrest return to the hotel or nearest Police Station
- Ensure you keep your passport and travel documents secure at all times

## Level 4 – Do Not Travel

The security situation is extremely dangerous. This may be due to a very high threat of terrorist attack, widespread-armed conflict and or dangerous levels of violent crime.

- Restrict movements from the hotel to only essential travel
- When you leave the hotel ensure you travel with other members of the escort team
- Contact the duty Manager of all movements outside of the hotel
- When you are overnigheted due to an unscheduled stop, ensure that you are accommodated at a hotel nearest to the airport
- Avoid drinking alcohol as it is recommended that you are alert at all times
- Ensure you keep your passport and travel documents secure at all times
- Do not disclose personal information or potential movements to members of the public or anyone that is not known unless they are working in an official capacity

## 4. Domestic and Charter Transfer Contingencies

### 4.1 Vehicle Breakdown

When there is a vehicle breakdown when transiting between the Centre and the airport the following principles will apply:

- Prevent Escape
- Immediately notify the T&E Manager and request replacement vehicle
- Maintain control of Detainee(s) being mindful of the situation
- Ensure Detainee(s) security and welfare is maintained
- Where possible make Detainee(s) as comfortable as possible until a replacement vehicle arrives
- When replacement vehicle arrives transfer Detainee(s) and continue the transfer

On conclusion of incident, the escort staff must complete an incident report for submission to the T&E Manager.

#### 4.2 Detainee(s) Indiscipline

When a Detainee(s) has actively resisted or impeded his/her transfer, staff are to engage with the Detainee(s). The escort staff will attempt to de-escalate situation by talking to the Detainee(s). They are to ensure the safety and well-being of themselves and general public from commencement to end of incident. When the situation has escalated when use of force is likely the Team Leader is to contact the T&E Manager for further instructions, who will then liaise with DIBP. If indiscipline continues, staff are to consider the use of force. If use of force is to be used, staff are also to consider the effect that use of force may have on members of the public; if in a public area.

#### 4.3 Active Non-Compliance

If the Detainee(s) resists the transfer by becoming physically and/or verbally aggressive whilst on the aircraft, the escort staff will attempt to gain the Detainee(s) cooperation by negotiations. If this was unsuccessful, the escort staff may use reasonable force for the minimum duration needed to protect the safety of the detainee and staff.

#### 4.4 Unexpected Delay

When there is an unexpected delay the T&E Manager and DIBP must be notified. Staff are not to change flights without direction from the DIBP and the National Duty Manager. A decision will be made by DIBP to accommodate the Detainee(s) in a holding room if this is a prolonged delay. If there is a short delay (within 2 hours) and the Detainee(s) is not required to go into a holding room, staff are to escort the Detainee(s) to the next departure gate lounge.

#### 4.5 Escape

Where safe to do so and where the action will not further compromise the escort, staff must pursue and detain the escapee. If detainment is possible, ensure only lawful and reasonable use of force is applied. Staff must immediately notify DIBP and the National Duty Manager. The Team Leader is to ensure that assistance from the relevant authority such as the Australian Federal Police.

Staff are to provide to the local authorities a detailed description of the Detainee(s) to include:

- Name

- Nationality
- Height
- Build
- Description of clothing
- Direction the Detainee(s) was last seen
- Description of anyone that assisted the escape of the Detainee(s)
- Any other relevant information

Staff must cooperate fully with local authorities and ensure that document all the events are documented within the EOO, and to remain at the airport until instructed by the National Duty Manager.

If the Detainee(s) are recovered they should be placed in an interview room or,holding room or as per directed by airport policing authorities until further advice is sought from the DIBP and the National Duty Manager.

#### 4.6 Any Other Contingency

When a situation arises that requires further guidance, the Team leader is to ensure the safety and security of the Detainee(s) is maintained and seek guidance from the National Duty Manager.

## 5. Local Escort Contingencies

### 5.1 Vehicle Breakdown

In the event of a breakdown the Team Leader should notify the T&E Manager immediately. All escort staff and Detainee(s) should remain in the vehicle, unless it is unsafe to do so. An alternative escort vehicle will be dispatched from the Centre for the escort to continue. The driver will remain with the vehicle until vehicle recovery is completed.

### 5.2 Vehicle Accident

In the event of an accident the Team Leader should notify the T&E Manager immediately. All escort and staff are to remain in the vehicle unless it is dangerous to do so. The Team Leader is to identify any medical injuries and when there is an injury identified that requires immediate medical attention and when required call an ambulance.

A full account of occurrences and symptoms will need to be conveyed over the telephone to the DHSP. The DHSP will contact the hospital with further medical history to assist medical staff.

An alternate vehicle is to be dispatched from the Centre to pick up any non-injured Detainee(s) and staff. If a Detainee is injured then additional staff are to be dispatched to the hospital to remain static guard. The driver will remain with the vehicle until it is recovered.



### 5.3 Escape

Where safe to do so and where the action will not further compromise the escort, staff must pursue and detain the escapee. If detainment is possible, ensure only lawful and reasonable use of force is applied. Staff must immediately notify DIBP and the T&E Manager. Police are to be notified and to be given all pertinent details to include:

- Detainee age
- Hair colour
- Height
- Build
- Ethnicity
- Description of clothing

The Escort Team is then to contact the T&E Manager immediately. Staff are to ensure that any other Detainees on the escort are secured within the vehicle and their security and welfare are maintained. Staff must not compromise other Detainees when another Detainee attempts to escape.

### 5.4 Medical Emergency

The immediate response to any medical emergency is to preserve life and administer emergency first aid as required utilising the first aid kits within the T&E vehicle. An officer not involved in the immediate application of first aid is to contact 000 by phone and advise of the situation, location and to be provided further triage advice.

A full account of occurrences and symptoms will need to be conveyed over the telephone to the DHSP. The DHSP will contact the hospital with further medical history to assist medical staff. The T&E Manager and DIBP are then to be notified.

### 5.5 Media Public

No member of staff employed by Serco in any capacity will make unauthorised statements or comments to the media at any time. All media questions and enquiries should be directed to the Serco Media Team in North Sydney on 02 9409 8700.

Staff could be approached by media at reception, going to and from work, on escort or the media could film from outside the facility.

Detainees and staff may be approached by media while on T&E tasks outside a facility.

- Staff should remain calm and polite at all times and walk at normal pace and act, as far as possible, as though the cameras were not there. Staff behaviour should be passive and respectful.
- If reporters approach staff or make comments, it is in staff's best interest to simply remain silent and continue their job.
- Staff should not try to avoid being filmed or photographed by running or trying to cover their face. It is far better for the TV stations to have extended vision of staff performing their responsibilities professionally rather than a short shaky shot which makes it appear they are trying to avoid being filmed.

- Regardless of the behaviour of bystanders or any members of the media, staff should not react to any provocation, and should remain calm and polite at all times.
- Staff must decline any requests by media to speak with detainees.
- If media attempt to film activities without prior approval from DIBP, staff should terminate the escort and immediately inform local management who will notify the Department as to the circumstance of the termination.
- Staff must be aware of and comply with the requirements contained in the Employee Media Awareness and Responsibilities PPM (SIS-OPS-PPM-0041).

## 5.6 Death on Escort

Escort staff are not authorised to pronounce death and are to immediately contact the State ambulance service.

Following this, immediately notify the T&E Manager with the following information:

- Name/age/gender/ethnic category of Detainee
- Location of incident
- How incident happened
- Was the Detainee classified as “at risk”
- Any medical conditions noted

Request alternate transport for any other Detainees on the escort to be returned to the facility.

On conclusion of incident, the escort staff must complete an incident report for submission to the T&E Manager.

All escort associated documents to be returned to T&E Manager for inclusion in post incident investigation. All escort staff must attend a post incident briefing.

## 5.7 Barricade at an APOD

Staff are to engage with the Detainee and attempt to gauge the possible reason for the disturbance. Staff are to ensure they maintain control of the security and welfare of all Detainees including those not involved in the incident.

Immediately notify T&E Manager to request additional assistance including a Negotiator, then provide the following information:

- Name/age/gender/ethnic category of Detainee(s)
- Location of incident
- Detainee actions and demeanour
- Any demands

## 5.8 Fire in Vehicle

Stop the vehicle in a safe place and evacuate the Detainee(s). The Team Leader is to immediately notify emergency service and then the T&E Manager for a replacement vehicle. Staff are to ensure the safety and security of Detainee(s) is maintained.

If safe to do so, when a replacement vehicle arrives continue escort task. If there are any signs of distress from the Detainees the escort is to return to the Centre and a medical assessment to be completed by the Detention Health Service Provider (DHSP).

## 5.9 Detainee Illness

If the illness appears to be serious, the Team Leader is to contact the ambulance service. If the illness does not appear to be serious, the Team Leader is to immediately contact DHSP triage line and return to the IDF.

The Team Leader is then to advise the T&E Manager and provide the following information:

- Name/age/gender/ethnic category of Detainee(s)
- Location of incident
- Detainee symptoms
- Any medical conditions noted
- Request authority to abort the escort

## 5.10 Hostage

Staff are to remain calm and maintain dialogue with the Detainee(s) ensure the safety and welfare of the Detainee(s) not involved in the incident is maintained. Call the Police immediately and advise of the situation, then the T&E Manager.

If possible raise the alarm to the T&E Manager with the following information:

- Location
- Number of persons involved (names if known)
- Any weapons visible
- Demands
- Any assistance from external parties (description of persons, vehicle registrations)

Where possible the escorting officer driving the vehicle will keep moving the vehicle to a secure area unless the Detainee(s) demands otherwise, in which case they will drive as slowly as possible along planned route.

Do not attempt to overpower Detainee(s) unless confident of success and the vehicle is stationary. Where possible avoid making concessions to the Detainee.

### 5.11 Rooftop Protest at an APOD

Staff are to maintain and cordon off the area and immediately contact the Police. If safe to do so, remove any objects that could cause potential harm to the Detainee if he/she were to fall or jumped from the building.

Ensure the security and welfare of Detainee(s) not involved in the incident is maintained.

Provide the Police and T&E Manager with the following information:

- Name/age/gender/ethnic category of the Detainee
- Location of incident
- Detainee actions
- Any demands
- Continue dialogue with Detainee(s)
- Establish where possible the reason for the Rooftop protest
- Maintain control of other Detainee(s) being mindful of the situation
- Ensure Detainee(s) are offered water regularly

### 5.12 Any Other Contingency

When a situation arises that requires further guidance, the Team leader is to ensure the safety and security of the Detainee is maintained, then the Team Leader is to seek guidance from the T&E Manager.

# Transport and Escort Management of Detainees in Short term APOD

## Serco Immigration Services

### Document Control

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## 1. Introduction

Procedures and processes will be in place and implemented to ensure that all transport and escort tasks are executed safely, securely and professionally while maintaining the rights, dignity and privacy of all People in Detention in accordance with the Immigration Detention Values and Serco Governing Principles.

The processes outlined within this document, will ensure that all transport and escort tasks related to the management of Detainees while within Short Term Alternative Places of Detention (APODs) are conducted in line with agreed procedure and within the requirements of our contractual undertaking with the Department.

### 1.1 Related Documents

- Operational Safety (SIS-OPS-PPM-0035)
- Incident Reporting (SIS-OPS-PPM-0019)
- Property Management (SIS-OPS-PPM-0012)

### 1.2 Related Forms

- Escort Risk Assessment
- Escort Operational Order

### 1.3 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP
- AS/NZS 9001:2008 – Quality Management Systems Requirements



## 2. Procedure

### 2.1 Definition - Short Term Alternative Place of Detention (APOD)

An Alternative Place of Detention (APOD) is defined as a location that the Department (DIBP) has agreed can be used for the purposes of detaining an individual outside of the identified Immigration Detention Centres (IDC), Immigration Residential Houses (IRH) and Immigration Transit Accommodation (ITA) that exist within the Detention Network.

This procedure is provided to support the management of Detainees in short term APODs, being those designed to house Detainees for periods less than seven days in duration, and does not relate to identified long term APODs that currently form part of the Immigration Detention estate.

### 2.2 Identification and Agreement on Short Term APOD Use

It is the responsibility of Serco Immigration Services to identify whether facilities and properties may be suitable to be used as short term APODs. The locations that are identified as suitable fall into three main categories:-

- Residential accommodation – Hotel or Motel rooms or suites
- Medical facilities – Hospital wards and private rooms within a Hospital or Institution
- Agency offices – DIBP offices, Police Stations, Airport Holding areas, etc

All potential short term APOD locations must be risk assessed by Serco Immigration Services to ensure suitability for use. Please refer to separate National Policy on Site Risk Assessments for instruction in this regard.

DIBP must formally approve all locations that are presented as potential short term APODs. The request for approval will be submitted by National Transport & Escort. An agreed listing of such sites will be maintained centrally by National Transport & Escort. A summary of locations, and the requisite Site Risk Assessment, will be provided to the local Transport & Escort Management teams on a State basis.

### 2.3 Transport & Escort Short Term APOD Responsibilities

The local Transport & Escort Management team will ensure that any Detainee, whom is to be managed within a short term APOD, is afforded the same level of decency and respect as that of an individual managed in any Immigration Detention Facility.

It is recognised that the level of inherent security within certain identified short term APODs will not be of the standard presented by an Immigration Detention Facility. Accordingly all Serco Immigration Services Transport & Escort Officers and Managers will ensure that the ongoing detention security of the Detainee whom is managed within the short term APOD is prioritised.

It is the responsibility of local Transport & Escort Management to:

- ensure that an adequate and effective risk assessment has been prepared in respect of the management of the individual, on the basis of information available and in line with the National risk assessment policy;
- ensure that this risk assessment has been agreed with DIBP and is reflected in the Request for Service (RFS);

- ensure that an Escort Operational Order is prepared related to the task;
- ensure that the escort is staffed appropriately, at all times, following consideration of all pertinent risk management factors and that an officer within the escort team is designated as Team Leader;
- ensure that the staff involved in the escort task are provided with the resources necessary to manage the escort effectively, which will include, but not be limited to, the provision of escort documentation, an escort pack and a mobile telephone;
- ensure that all staff are briefed on the expectations of management in respect of the escort task and to confirm that they understand clearly said requirements;
- ensure that regular communication is maintained with the on site team and to undertake site visits as may be determined by the Detainee risk rating, the duration of the escort or the location of the APOD. A site visit must be undertaken at least once in the first 48 hours of any period of detention.

It is the responsibility of the Transport & Escort team assigned to the escort task to:-

- remain focussed and alert during the escort task, ensuring that the Detainee remains within their control at all times;
- prioritise the safety, security and welfare of the Detainee;
- undertake a continuous review and assessment of the risks that arise during the escort task, taking immediate action to mitigate any identified risk;
- be mindful that immigration detention may cause distress and interact with the Detainee during their period of detention in a supportive manner, ensuring their needs are catered for;
- take appropriate steps immediately to protect the Detainee and any others from harm;
- ensure the Detainee remains in 'line of sight' of the escort team at all times apart from circumstances in which this would undermine the Detainee's privacy and dignity, unless the risk assessment indicates the need for a higher level of monitoring;
- ensure under those circumstances when the Detainee is not in direct 'line of sight' that no barriers to engagement are placed between the escort team and the Detainee. For example, ensuring that the Detainee is not able to close a door between themselves and the security escort;
- ensure that they are provided with all necessary resources to undertake the escort;
- confirm that they understand and will comply with the directions provided as part of the escort task briefing;
- complete all necessary escort documentation that arises during the task;
- maintain contact with the local Transport & Escort Management team to provide regular communications on the conduct of the escort and to advise of any concerns or questions that arise during the course of the escort;
- maintain a safe working environment, ensuring that the short term APOD accommodation is kept clean and tidy and that all local rules are observed, e.g. non-smoking, noise, etc;
- inform local Transport & Escort Management of any incidents as appropriate.

## 2.4 Detainee Management Responsibilities

While detained in a short term APOD, it is the aim that the Detainee will be afforded the opportunities available to any Detainee whom is detained within the Immigration Detention Network; however, it is accepted that these opportunities may be restricted due to the facility resources available at the short term APOD, the proposed duration of the escort task or the risk factors pertinent to the management of the individual.

The Detainee will be provided culturally appropriate food and refreshment while under Serco Immigration Services care. The escort team will ensure that the security of the escort is not compromised when providing these refreshments through any reduction in the escort team staffing compliment below minimum staffing levels. While in Residential accommodation all refreshments for the Detainee will be ordered via room service, unless the provision of meals does not meet the Detainee's cultural or religious requirements. In such situations, refreshments will be provided by alternative means following discussion and agreement with DIBP.

The Detainee will be permitted access to a telephone to make calls while within the short term APOD. All calls will be dialled by Serco Immigration Services staff. Only numbers provided and, therefore, agreed via DIBP will be permitted to be called. The duration and frequency of such calls will be agreed with DIBP prior to such calls being made. Each instance of a telephone call will be recorded within the occurrence log.

The Detainee will not be permitted visitors while located at the short term APOD, unless said location is a Medical Facility. Should a visit be requested then it must be agreed by DIBP. Any visit that is permitted will be undertaken at the nearest Immigration Detention Facility or DIBP office. Each visitor's identification will be vouched by the escort team before being permitted to attend the visit.

Visits and appointments organised by other Agencies will only be permitted following prior notification from DIBP to local Transport & Escort Management that the Agency is allowed to engage with the Detainee and that they are required to attend the short term APOD location.

The escort team may prevent any visitor from entering the short term APOD location, or attempting to engage with the Detainee, if their presence has not previously been agreed by DIBP. In such instances, the escort Team Leader will immediately contact local Transport & Escort Management to advise of the occurrence.

All visit details, whether undertaken or refused, will be recorded in the APOD Occurrence Log (see annex).

The Media will not be permitted access to the short term APOD to converse with the Detainee unless specific direction and approval is provided by DIBP. Any approaches by the Media must be recorded in the APOD Occurrence Log and communicated immediately to Local Transport & Escort Management.

## 2.5 Maintaining Detainee Dignity and Privacy

Serco Immigration Services will make every effort to maintain the dignity and privacy of the individual whom is being detained; however, the physical and structural restrictions of the short term APOD location, and the identified risk factors, may affect the security presence.

When managing the Detainee while they are using toileting facilities or when changing clothes the escort team will operate in a manner that does not unnecessarily intrude on the privacy of the individual unless the risk assessment relevant to the Detainee determines that this would not support the overarching security needs.

Regardless of the risk level that the escort is determined at, the Detainee will not be permitted to fully close the door to a separate room, e.g. separate bathroom, bedroom or dressing room. The Escort Operational Order will clearly stipulate the supervision requirements of the escort team when the Detainee is engaged in the above activities. This will include the positioning of individual escort team members and the ongoing engagement with the Detainee at this time.

Every effort will be made to allow the Detainee to engage in cultural and religious practices while they are located within the short term APOD.

## 2.6 Escorting within a Medical Facility

Serco Immigration Services understands the complexities associated with the management of a Detainee while within a Medical Facility, noting the potential close proximity to members of the public and the interaction with Medical staff.

Every effort will be made to accommodate the Detainee in a private room; however, if this is not possible the escort team will maintain a discrete security presence while undertaking the escort task unless the risk factors relevant to the Detainee's ongoing management prevent this.

The escort team will consider the following in respect of the management of the Detainee while an in-patient:-

- the privacy afforded the Detainee when receiving medical attention and/ or consultation;
- the positioning of the staff member during these circumstances;
- the routes to be taken when the Detainee is moved within the Medical Facility; and
- the interaction that is allowed between the Detainee and other patients within the facility.

The escort Team Leader will conduct a briefing with Medical Facility staff at each shift stage and following any Medical staff shift change. This briefing will cover the role of the escort team during the escort and the interaction with Medical staff.

The escort team will be provided guidance in respect of their Occupational Health & Safety in terms of infectious diseases and the precautionary measures that may be taken by local Transport & Escort Management prior to the commencement of the escort task.

Visits will only be permitted at these locations following the agreement of DIBP and in line with the Medical Facility visiting protocols. In such circumstances the duration of the visit and the number of visitors will be strictly controlled. Each visitor will have his or her identification vouched by the escort team before the visit commences. Each visit will be recorded in the APOD Occurrence Log and will be prior confirmed by telephone with local Transport & Escort Management.

Staff involved in the escort task will ensure that they maintain the medical confidentiality of the Detainee at all times, and also that of any patients with whom they come into contact during the course of the escort.

## 2.7 Occurrence & Incident Reporting

The escort team will record all occurrences within the Escort Operational Order Occurrence Log or separate APOD Occurrence Log during the course of the escort task. The APOD Occurrence Log will start at the point the escort is identified as a static guarding task.

The escort Team Leader will notify local Transport & Escort Management immediately of any incident as it arises during the escort task.

Local Transport & Escort Management will ensure that the escort team has followed all instructions in relevant PPMs, including Evidence Management where appropriate, and contingency plans. The local Transport & Escort Management team will ensure all relevant parties are informed in line with the Incident Reporting PPM.

Local Transport & Escort Management will ensure that the Escort Operational Order has been correctly completed during the course of the escort task and that all entries are made within the DIBP Portal system.

# Use and Security of Rescue Tools

## Serco Immigration Services

### Document Control

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## 1. Introduction

### 1.1 Policy

The wellbeing, safety and security of all Detainees is of paramount importance. As such, Serco Immigration Services staff will have the appropriate training and equipment to cut through ligatures. While preservation of life is the utmost priority, staff will also be mindful of preserving evidence in their actions.

Any attempted or actual act of self harm by a Detainee will prompt action as per the Keep SAFE / PSP Policy.

### 1.2 Related Documents

- Keep SAFE / PSP PPM (SIS-OPS-PPM-0001)

### 1.3 Related Forms

- Keep SAFE / PSP documentation (SIS-OPS-FRM-0001 to SIS-OPS-FRM-0009 inclusive)

### 1.4 Legislative and Standards Framework

- Migration Act 1958
- Detention Services Manual, DIBP

## 2. Procedures

### 2.1 Authorised Tools

The only rescue tool authorised for use within Serco Immigration Services is the Rescue 911 knife, or tool of similar design, such as depicted in the image below.



### 2.2 Storage

All rescue tools will be numbered on the blade and locked in secure storage when not issued to a staff member.

### 2.3 Issue

Rescue tools will be issued to staff members when appropriate for their rostered post, at the point of issue of radios and / or keys. All Transport and Escort officers rostered to take part in an escort will be issued with a rescue tool.

All rescue tools will be signed out of their secure storage, noting in a register:

- the date
- the number of the rescue tool
- the post and name of the staff member to whom the tool is issued
- the post and name of the individual signing out the equipment

All staff must check that the tool with which they have been issued is sharp.

### 2.4 Security Once Issued

Rescue tools must be stored in a pouch on the staff member's belt, unless drawn for use. They must not be kept in pockets or left on desks, in desk drawers, or in escort vehicles.

Rescue tools found unaccounted for should be returned to storage, and the staff member to whom the tool was issued must complete an Officer's Report for submission to the Duty Operations Manager / Shift Supervisor, explaining why the tool was not in their possession, as their actions may lead to disciplinary action.

Rescue tools must not be passed from one staff member to another without the issue register being amended.

## 2.5 Use

### 2.5.1 Appropriate Use

Rescue tools must only be used to cut ligatures in times of emergency, and must be used in accordance with training provided.

### 2.5.2 Unauthorised Use / Misuse

Rescue tools have sharp blades which may result in accident or injury when improperly used. Furthermore, improper use may blunt the blade, rendering the tool ineffective for its intended purpose.

Any staff member found to have misused a rescue tool may face disciplinary action.

Where tools are found to be blunt, they must be passed to the Security Manager who will arrange for the tools to be sharpened.

### 2.5.3 Processes After Use

Rescue tools will only be used once. The tool must be secured in an appropriate forensic evidence bag, with a copy of the responsible officer's report attached, and passed to the Security department following use as it may require forensic examination or be considered evidence. Where appropriate, the Police may take custody of the used tool.

A new tool should be numbered and be introduced for issue.

The processes outlined in the Debriefing PPM should be followed in the event a staff member is required to use a cut down tool. Staff involved in the incident must be offered the support of the Employee Assistance Program.

## 2.6 Return

All rescue tools must be signed back into storage before staff leave the site, at the end of their shift, or on completion of an escort. Upon return the tool must be checked to ensure it remains in good condition. Any tool showing signs of use will be flagged with the Duty Operations Manager / Shift Supervisor, and the staff member to whom the tool was issued will be required to complete an Officer's Report on the matter.

## 2.7 Audit

Duty Operations Managers / Shift Supervisors will conduct irregular audits of the rescue tools to ensure they are being stored, carried & accounted for appropriately.