

BROOK HOUSE INQUIRY

Second Witness Statement of Paul Gasson

I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 3 February 2022.

I, **PAUL GASSON**, date of birth DPA, DES Litigation and Guidance Manager, employed by The Home Office at Apollo House, 36 Wellesley Road, Croydon CR9 3RR, **WILL SAY AS FOLLOWS:**

Introduction

1. I make this statement answering questions raised by the Brook House Inquiry.
2. In so far as the contents of this Statement are within my own personal knowledge, they are true, otherwise they are true to the best of my knowledge, information and belief.
3. The answers provided below are to the best of my knowledge and recollection, with reference to the documents noted in the Rule 9 request and to a limited set of documents drawn to my attention by those advising me in the period provided for drafting this statement. Should the Inquiry wish me to consult any other documents, I would of course be able to do so if given sufficient time.
4. The Rule 9 request contains 60 questions (though the numbering skips and hence goes to 71), many with detailed sub-questions. I have addressed these requests to the best of my ability within the limited time available. I will continue to give thought to the questions raised by the Inquiry in preparation for providing oral evidence.

5. My background and relevant experience is outlined at paragraph 4 of my first statement dated 9 November 2021.

Attendance at Brook House and my role at Brook House

6. I have been asked for clarification as to whether I held the positions of Immigration Manager and Contract Monitor at Brook House IRC, Handsworth IRC and Colnbrook IRC simultaneously. I did not. I held the position of Immigration Manager/Contract Monitor at Brook House IRC between May 2014 and January 2018.
7. In late 2016/ early 2017 Brook House was chosen to run a pilot to split the monitoring and detained person engagement functions. It is my recollection that this was recommended for Brook House following internal work (which I think itself followed the first 'Shaw Report', i.e. the 'Review into the Welfare in Detention of Vulnerable Persons. A report to the Home Office by Stephen Shaw January 2016').
8. Following the split of monitoring and detained person engagement (DES) functions, I was a member of the remaining DES team on-site, alongside two deputy immigration managers.
9. My role as Immigration Manager/Contract Monitor following the introduction of the pilot still required me to be involved in certain immigration-related functions, such as charter preparation, however I no longer had responsibility for the contact management functions of the immigration office. I was also able to focus more on the service being delivered by the supplier. I was also involved in the procurement process for a new contract at Gatwick IRC.
10. In the IMB Board Meeting on 19 July 2017 I stated that there would be no or limited notice removals for future charters [IMB000014_2]. As background, there was a change to immigration policy around this time. Chapter 60 of the General Instructions to Home Office caseworkers allowed a 3 month removal period to be served on those with certain case statuses. Individuals who had been served with

these notices were liable to be removed without any additional notice. This was a central change. I remember the supplier raising concerns about having to position people ready for collection without telling them why they were being moved. I cannot recall any other implications on the environment, treatment and/or welfare of detained persons at Brook House arising.

11. During my employment at Brook House IRC I acted as duty officer [CJS001288 and CJS001292, Shift Handover Notes]. The role of the duty officer was to be the Home Office person on-call for Brook House IRC for that period. Out of hours, that person would be informed by G4S of, for example, individuals being relocated under R40 or R42 (or updates of those already there), any use of force used, and medical incidents. The duty officer would also be the person that the supplier would inform initially of any amber or red incidents, as per the Detention Services Order 05/2015 Reporting, and Communicating Incidents that took place.

The Contract Review Meetings

12. In my First Witness Statement, I outlined that my duties included chairing the weekly, monthly and quarterly meetings with the contractor, with an aim of reviewing performances and challenging non- delivery. I have been asked to provide further detail.
13. The weekly meeting took place between myself and a number of supplier staff. We would discuss progress against ongoing issues and any new failures for consideration for performance measures. The monthly meetings had a set agenda and were chaired by me until the new post of a Home Office delivery service manager came in near the end of 2014. From then, it was no longer chaired by me. The quarterly meetings were chaired by Home Office Commercial.
14. The weekly meetings were effective in driving forward improvements to meet the contract requirements and remedy some of the outstanding issues. They were useful in keeping focus on areas that I wanted to see an improvement in.

15. The monthly meetings were where the agreed performance measures were discussed. The service provider monthly performance was shown. Operational updates and progress, and contractual changes were also discussed. Progress in these areas were made and recorded. Commercial colleagues also attended these.
16. The quarterly meetings were similar to the monthly meetings but led by Commercial with more of a focus on the contractual and financial elements.
17. Overall, my opinion is that the meetings were effective in achieving their purpose.
18. In the Verita Report [CJS0073709_32], it states that the primary concern of the monthly contract meetings was how G4S supported the immigration removal process to support the delivery of the Home Office immigration objectives. However, I consider that the primary concern in these meetings was to assess the performance of the service provider against the contract. This included how G4S were supporting the immigration removal process. Several areas of service delivery and operational improvements were discussed at the meetings. There wasn't a standard agenda item to discuss detained persons' welfare, but welfare generally or specifically could be raised by anyone at the meeting. The daily shift handover contained current welfare concerns.
19. I do not think it is correct to say that issues regarding the immigration removal process outweighed other issues such as contract compliance and detained person welfare.

Penalty Points, Fines, Mitigation

20. I have been referred to Monthly Performance Reports from throughout the Relevant Period [CJS004580, CJS004579, CJS004586, CJS004581 and CJS004585]. I am familiar with these documents, and would have considered these reports during weekly meetings with G4S. These reports were produced by G4S with input at the weekly meetings from both G4S and the Home Office, via myself or a colleague.

21. Whether a mitigation should be accepted was decided by myself (at times alongside my manager) and commercial colleagues, based on its nature and detail; it took some time to consistently receive the level of detail in the referenced documents. All mitigation would be discussed between myself and the 'contract manager' who was the commercial lead for the Brook House contract. It would initially be down to our joint discretion, requesting further information or details if necessary to fully consider the mitigation. G4S would be informed of the outcome of the review and the reasons why. G4S could then use the process to appeal further to the G7 Assistant Director for Commercial and/or raise at the monthly meeting. There was standard guidance as to process (including an appeal process) for the supplier to follow. I refer the Inquiry to [HOM0332146; HOM0332143] which is an email and the attached document sent to the G4S Audits & Compliance Manager at their request on Mon 6 June 2016. It is entitled 'Process and timings'. The second page gives an example where the supplier raises mitigation (and appeals), and it includes the following steps:

- a. "If required the Supplier will provide mitigation for each point, and send back to UKBA Manager and the Contract Manager";
- b. "Contract Manager and UKBA Manager review the report and challenge any mitigation provided by the contractor. (meet to agree)";
- c. "Mitigation of points with a value of more than £500 Area Manager and Senior Contract Manager to approve";
- d. "The Contract Manager will write to the Contractor to advise outcome, and as appropriate apply points."

22. Schedule G of the contract was followed in order to determine how many points should be incurred for a particular failure.

23. In my First Witness Statement, I stated that the measures utilised to assess G4S's performance included self-declaration. I have been asked for further information. Ultimately, the centre director was responsible for self-declaring any failures of the

contract. However, the agreed total on the monthly report came from the G4S audits manager.

24. Further questions would be raised to monitor self-declaration if clarification was required. If the mitigation was not clear, I would seek further detail or evidence.
25. If Brook House failed to make a self-declaration on failures that occurred, it would be retrospectively applied if appropriate.
26. I have been referred to CJS004581 page 2 which records that there were no “Self harm resulting in injury” events during July, and IMB000047, a Combined Report to the Independent Monitoring Board regarding Brook House July 2017, completed by the Home Office and G4S, which records at page 2 that there were 14 acts of self-harm during July 2017, by 11 individuals. 1 required treatment off-site and 2 required treatment on-site. The Inquiry has asked me to comment on the discrepancies between the two documents. The former is a performance management report pursuant to Schedule G and so records that there were zero instances of the KPI ‘Self-harm resulting in injury’, which is a performance KPI where the self-harm results from a failure of the supplier to follow laid down procedures for the safety of Detainees, as set out in Schedule D. The latter, the IMB document, sets out all instances of self harm. I do not believe that there are any discrepancies as they are different statistics.
27. I am asked what steps the Home Office took to determine whether any self-harm events requiring treatment on site occurred as a result of a failure to follow procedure. The related incident report/s would be reviewed, and a follow up discussion with G4S would sometimes highlight any areas that were missed in the lead up to a self-harm event requiring treatment. ACDTs plans would be reviewed to ensure they were being checked by G4S management and to note correct observation levels were being recorded.
28. I have been asked what the process was, who determined whether there had been a failure, and at what stage in relation to other KPIs where failure was a condition

precedent for incurring penalty points [HOM000921_9]). This is dealt with in under Significant Performance Failures in Schedule G. Incident reports relating to the event would be used to determine if there had been a failure and if performance measures could be applied. There would be commercial and senior management involvement in any significant performance failure discussion and decision.

29. I have been asked to comment on the Live Evidence Transcript of Owen Syred [INQ000101_44]. Mr Syred states that the Home Office would have been made aware of self-harm through Part C of IS91 risk assessment and ACDT notifications. He also states that considering the number of ACDT cases which documented evidence of self-harm, one would have expected more penalty points to be awarded.
30. I note that the Home Office were made aware (via a Part C) of self-harm, attempted self-harm, low-mood etc. and ACDTs being opened for these reasons. If an act of self-harm had happened following a previous self-harm event where an ACDT had not been opened, i.e. where there had been a failure by the supplier, then performance measures could arguably be applied.
31. I have been asked to refer to the interview transcript with Ben Saunders [VER000226_12] and explain why the Home Office required staff to get individuals to visits within 30 minutes. The contractual requirement was for individuals to be presented for interview within 15 minutes of the Home Office request. This was changed to 30 minutes. The purpose of this was for efficiency, so that the Home Office could update people on their immigration case and serve paperwork, including time sensitive paperwork, in good time.
32. I have been asked whether I agree that the Home Office was unreasonable with regard to requiring staff to take individuals to visits within 30 minutes. I do not think that the timeframe to bring individuals to visits was unreasonable. Further, the timeframe to present individuals was clear in the requirements of the contract when contract bidding was taking place.

33. I have been asked how the Home Office worked with Brook House to manage Official Visits. Prior to the pilot, an agreed process between the Home Office and G4S was in place whereby lists of those people required to be seen by the Home Office the following day (usually two morning lists and one afternoon list) would be passed to G4S the previous evening. A further list for later in the afternoon would be passed to G4S during the following day's lunch time period to give them ample time to notify those being asked to come to the interview corridor to see the Home Office. There would also be ad-hoc lists and people called up during the day due to release paperwork, urgent, time-sensitive paperwork or immigration queries.
34. Following the start of the pilot, a new G7 and SEO outside of DES were in place to oversee this area of the work. My understanding and recollection are that they had direct meetings with G4S about how the interview process would work. I was not involved in those meetings.
35. I have been asked to comment on whether there were any complaints from G4S regarding the penalty system. I do not recall any complaints being made about the performance management system.
36. I have been asked to provide my opinion as to whether the penalty system deterred G4S from accurately self-reporting any failures. I am not aware of any such deterrence.
37. I have also been asked to reflect on the advantages and disadvantages of the penalty system that was in place during the Relevant Period. The performance evaluation system was an incentive for the supplier to meet the expected contractual requirements. It was there to provide a mechanism, if required, for the Home Office to work with the supplier to improve performance of the supplier to meet the expected high standards of the service delivery. According to the contract, the expectation was that the supplier should meet every performance measure 100% every month. The downside of that was that there was a risk that the supplier spread themselves too thin trying to meet all the performance requirements and/or avoid performance measures. Operationally, 100% performance was unlikely to happen

due to the dynamic settings of the centre and the staffing requirements required to meet the running of the centre during business as normal. It may have been a better approach, contractually, to have a mechanism to allow certain regimes areas to dip below 100% if certain circumstances occurred, e.g. if staffing dipped, performance measures would be awarded for that failure but not the knock-on failure of being unable to have one of the IT rooms due to the staffing shortfall. Or if there were a high number of hospital escorts or constant supervisions in the centre, contractual allowances could be made. These factors were considered at the mitigation stage.

38. I have been asked to comment on the level of financial penalties. I am not aware of whether the financial penalties imposed were of a sufficient level that they discouraged non-compliance. I have also been asked whether the financial penalties in relation to staffing levels and the relationship between the levels of penalty for understaffing and any financial saving G4S would have made by having fewer staff than the contract required. There must have been a balance in the short term where there was financial benefit given the cost of employing an officer and the value of the points. However, the contract allowed an escalation process which included written improvement notices and revocation of contract.
39. I have been referred to G4S Gatwick IRC's Yearly Target and Activity Report [CJS000524_Slide Brk]. I do not recall seeing this document before. I have been asked why, in my view, Tinley House met their targets significantly more times than Brook House did. I believe this was due to the fact that it was a smaller centre with a smaller population.
40. I have been asked to explain the metric "Paid work hours completed" and why Brook House exceeded the target by a factor of around ten. Unfortunately I do not know the answer to either of these questions and am unable to assist the Inquiry in this regard.
41. I have been asked to explain the meaning of the following terms, and comment on the reasons for and results of the failure to meet targets in respect of each:

- a. “Provide an Available Detained person Place”: I believe that this was an incentive for a bedroom that was out of service to be put back in service as soon as possible. Results of the failure were performance measures for the supplier and potential limitation to IRC estate capacity.
- b. “Incident reports (UOF) within 24 hours”: It was a contractual requirement and ensured that UOF reports were taken seriously by the supplier and with efficiency, so that Home Office could receive this information.

42. I have been asked to explain the purpose behind the strategy reported in the Verita report that penalties for understaffing under the Brook House contract were higher than the Tinsley House contract. I was not involved in the Tinsley House contract and am not aware of the purpose behind the strategy.

43. I have been referred to a spreadsheet of failures and mitigation (CJS004584) and asked to confirm whether I have seen this before. I confirm that I have seen this spreadsheet, or a version of it. I have been asked to summarise the role of Home Office Manager and set out how I determined whether a mitigation should be accepted or not. As stated at paragraph 21 of this statement, I (and at times with my manager) and commercial colleagues decided whether a mitigation should be accepted based on its nature and detail. This was standard guidance with an appeal process for the supplier to follow.

Contract Compliance

44. I have been referred to Monthly Performance Reports [CJS004579_1-2 and CJS004586_2]. I have been asked whether I challenged Brook House on the poor cleaning standards, and if so, how, how often, and the response. I would raise the standard of cleaning services with the supplier whenever they were an issue. This could be once a week or once a month depending on whether this was a live issue or I would note that the cleaning standards had improved. There was also a Brook House monthly audit visit report produced by the Maintenance Assurance Advisor (part of the MOJ Estate Directorate). The report included a RAG (Red, Amber,

Green) rated status of the cleaning standards amongst other, building maintenance audit elements. I would meet with them as part of their monthly visit and we would visit all areas of the centre. The details on the first referenced report were from myself, which I believe I had initially raised through an email and follow up at the next weekly meeting. I do not recall if they were discussed at the next monthly meeting.

45. I have been referred to the Verita Report where it states that Home Office managers acknowledged that the Home Office monitoring of the performance of the contract at Brook House tended to be based on consideration of individual elements of contract performance and compliance and that they had not taken an approach that examined the wider concerns of the care and welfare of detained persons at Brook House [CJS0073709_32]. I have been asked to comment in relation to this statement. Monitoring was based on how the contract was set out. Any concerns around the care of welfare of those detained should have been raised appropriately with the supplier at any time by any member of staff working in the IRC. If observed as part of the contract monitoring function, I am confident that any concern would have been appropriately raised. However, I accept that, as the changes in the new contract show, it is clear that improvements could be made.

Staffing Levels

46. I have been asked to comment on the consequences to G4S when they failed to meet the minimum staffing requirements: performance measures would be awarded at the end of each month.
47. I have been asked to comment on whether the Home Office were aware that Brook House were failing to consistently meet the minimum staffing requirements, and if so, whether the Home Office provided any support to Brook House to help them comply with the contract. The Home Office were aware as they received the figures daily, as well as the monthly staffing reports which we would cross reference against the raw data. In certain circumstances, I believe that there was an

understanding of the difficulties in recruiting in the area that Brook House was located and after an increase in bed capacity. Any understanding would have been agreed at a higher level, with commercial involvement.

48. I have been referred to the Verita Report [CJS0073709_102-103]. It states that Tinsley House reopened at the end of April 2017, which meant fewer staff at Brook House as they returned to Tinsley House. The report also states that extra beds were introduced in May 2017 after a request from the Home Office to increase the number of detained persons by 60. It is noted that the central detail manager said the Home Office agreed to pay for 17 extra members of staff to manage the extra detained persons. However, it is indicated that to save money, the centre was managed with fewer than the agreed number of 17 extra staff. I have been asked if I was aware of this at the time. I do not recall the details of any agreement, but it could be that I had been made aware of this.

49. I do not know whether the compliance team and/or the Home Office challenged Brook House for failing to recruit 17 extra members of staff. I do not recall being involved in any discussions around this point.

50. I have been asked to comment on whether I agree that the increase in detained persons made it more challenging for Brook House to meet the staffing levels contractual obligations [CJS000524_Slide Brk Row 16]. Recruitment for the Gatwick centres was challenging. I believe staff attrition was fairly high and recruitment was on-going, so with that in mind, it was likely that it did make it more difficult to meet the staffing contractual requirements.

Welfare of Detained Persons

51. I do not recall having any involvement or contribution with regards to the creation of the Adults at Risk (AAR) policy or its implementation.

52. I have been asked to refer to an email I sent on 30 March 2017 [HOM0331979_1] in which I stated that G4S were reviewing their policy and instruction on Supported

Living Plans (SLP) to include the AAR levels, and that the AAR policy would also be included on the care plan and ITCs. I have been further referred to [CJS000507], SLP which shows the amendments that were made, and asked to comment on why the AAR policy was included on the SLPs, care plans and ITCs. I do not recall the details, but I assume that it was to bring them in line with the requirements of the AAR policy and DSO.

53. I do not recall my involvement in the amendment to the SLP, care plan and ITCs to include AAR policy, and I do not remember receiving any training on the AAR policy.

Complaints

54. I have been referred to [CJS000651] Tab 1 Rows 63 and 66 and [CJS001558] Tab 1 Rows 50, 138 and 146, record of complaints, complaints which were referred to myself to deal with. I have been asked to summarise each of the complaints that were made and my involvement in the complaints.

- a. [CJS000651] Row 63: On receipt of the complaint from G4S, I asked that one of the deputy immigration managers log the complaint in the normal way and send it onto Detention Services as a complaint. The complaint has been provided to the Inquiry [HOM0332147].
- b. [CJS000651] Row 66: The original complaint from Duncan Lewis dated 21 August 2017 was forwarded to the DES Complaints team by a deputy immigration manager on 23 August 2017. Following the email on 28 September 2017 with the second letter attached, I asked DES Complaints for the status of the original complaint which had been sent to them. On review by DES Complaints, it was referred to the Professional Standards Unit to investigate. The complaint has been provided to the Inquiry [HOM0332148].

- c. [CJS001558] Row 50: The original complaint was sent to the DES Complaints team by a deputy immigration manager. DES Complaints team referred it to PSU. The rest of the information is detailed in the spreadsheet. The complaint has been provided to the Inquiry [HOM0332149].
- d. [CJS001558] Row 138: as per my response at (b) above.
- e. [CJS001558] Row 146 – as per my response at (b) above.

55. I did not carry out any investigations in relation to these complaints.

56. I have been asked about the Report by Prison and Probation Ombudsman on a complaint by D3498 dated 12 April 2017 [CJS001568]. The detail of the complaint is in the report. I have been asked to summarise my involvement in the complaint and the outcome that was achieved. I do not recall having had any involvement in the investigation of this complaint. The email attached to the reference [CJS001568] has an email from Ben Saunders stating that he had sent a letter of apology.

57. I have been asked to refer to the response to complaint by D3718 dated 9 March 2017 [HOM005239]. The first paragraph summarises the complaint. I do not specifically recall, but at a minimum, I would have reviewed all the relevant paperwork related to the incident leading up to the relocation and all the Rule 40 paperwork. I would likely have spoken to the officers responsible for updating the records to find out why no offer of a shower was recorded. The response letter sets out the outcome of this investigation.

58. I have been referred to a chronology of matters relating to David Waldock [CJS0073634]. The email I received from Vanessa Smith, a member of the pre-departure team (pilot to the DET) stated:

Hi Paul

Today when I went in the morning for my interviews, I notice that there were 5 G4S staff present. Two were working and three were just standing and chatting for the duration of my interviews. They didn't even bother assisting me with getting the detainees out from the waiting room as it was crowding the visit area. Two of them were new faces and one was D. Wadlock.

G. Mehraa asked D. Wadlock a reasonable request to look for the detainees for the Moroccan Embassy. She was alone working as N. Chowdhury was getting people. He was really rude to her and replied that he will not do it as he is not November one.

When extra staff are placed in visits, I believe that there are they to assist us and help each other out.

59. I sent an email to Caz Dance-Jones with the content of the email from Vanessa asking if she could give some reassurance regarding this area [HOM0332144]. I cannot find a response to this email.

Security Information Reports

60. I have been referred to a Security Information Report concerning an incident that occurred on 16 May 2017 involving D613 [CJS004868_6]. The Security Collator, Kelly Harris, emailed me on 17 May 2017 summarising the incident. The email near the bottom of the attachment summarises the incident. As per the email, Caz Dance-Jones requested that the information be passed to me. This was normal practice if threats against the Home Office had been made.

61. I had no involvement in this matter. A Part C had been sent with an updated risk assessment and a member of the pre-departure team (DET pilot) had updated CID with the information to make other Home Office staff members aware.

62. I have also been referred to a Security Information Report concerning an incident that occurred on 5 July 2017 when a door was not secured [CJS005407_6]. The report summarises the incident. I cannot find any email correspondence relating to

this incident. I can see in [CJS005407] that an email was sent to me, but I cannot locate it. My actions in a case like this would have been to identify the officer or team that they were attached to, make them aware of the incident and set out the importance of checking that doors in IRCs were left secure after they had used them.

Contact With Detained Persons

63. I have been asked about the case reviews of D1077 and D2034 [CJS003567_3-4, CJS003945_7]. I do not know who these individuals are. I appeared to have attended the first two case reviews for D1077, both of which were led by G4S with healthcare input, but I do not now recall this.

64. It appears from the document that I attempted to engage with D2034 during the case review, but D2034 did not respond.

65. I have been asked to provide a response to the comment from Ben Saunders that I would not talk with the detained persons and would shy away from that type of interaction [VER000226_40 para 570]. I have not previously received that type of feedback. Although he compares my approach to the immigration manager at Tinsley House, Tinsley House is a different centre to Brook House. The assessment criteria for people detained there was different to Brook House. It was easy to go out in Tinsley House and speak to people as a member of the Home Office. Brook House had approximately four times the population size of Tinsley House and held challenging individuals – it was a very different environment. When the immigration manager for Tinsley House was at Brook House, if she went into the centre, she would take a male member staff with her. That said, I have had many interactions with detained individuals in various centres. I did not shy away from interaction with people. I often walked around the different areas of the centre: reception and waiting rooms; main centre and E wing. When I went into the centre, I would always take a pad and pencil with me to note down names and references of people who I had spoken to in case follow up was required.

66. I have further been asked to respond to the statement from Nathan Ward that I was “purely functional and clinical” about my tasks, and that I did not show any signs of compassion towards human situations [DL0000141_64 para 181]. I do not really know what to say about that. I do not remember seeing Nathan Ward when I returned to Brook House in May 2014, but I do remember that he used to call me Simon when I was previously at Brook House (there were three people named Simon in the same immigration office at Brook House at one point – one was the substantive immigration manager when Brook opened; one covered the immigration manager role for approximately a year before I took over in May 2014; and the other was part of the contact management team).
67. Regarding the CSU reviews, which is really the only area that I would have seen Nathan Ward, I would see every person on that unit each time I visited, and if not already introduced by either the duty operations manager (Oscar 1) or the duty director, who would lead the visit, I would introduce myself. Home Office presence was not always conducive to the visit, especially if self-harming had taken place due to immigration decisions. Experience and the situation would dictate how much interaction I would have with the individual. It would not be unusual to be told by the officers that the person did not want to see the Home Office. However, I ensured welfare checks were completed in every case and that the person knew that they could speak to the Home Office at a later time if they changed their mind about not wanting to see or speak to them at that moment. Any decision to extend the duration of someone who had been removed from association was a serious decision and needed considered input from the various disciplines, as it would be me authorising this extension.
68. Regarding the paragraph where Nathan Ward says that I had refused national assistance, as a duty director, he should have completed the command suite training and therefore known that I would not have been the decision maker for the Home Office. It would have been the duty director on-call for detention operations. I would have relayed the request up to the director, via the Home Office senior on-call manager, who would have made that decision based on the information they

had received. It appears that the Gold commander for G4S spoke directly to the director and persuaded him that national assistance was the best course of action in this case.

Oversight, Monitoring and Outside Involvement

IMB

69. In my First Witness Statement I stated that I would see the IMB Board on a monthly basis at their meeting. In Michelle Smith's interview with Verita on 1 May 2018 the interviewers suggested that the monthly meetings were gossipy and cozy [VER000251_23]. I would not say that the IMB monthly meetings were gossipy or cosy during the time that I attended when Jackie Colbran chaired. She chaired the meetings well - moving the agenda forward but allowing people to finish what they wanted to say, she raised issues and also held G4S to account on issues that had been raised in the IMB rota visit reports and were still open or ongoing.

70. In my First Witness Statement, I also stated that the Chair of the IMB would regularly see me in the immigration office. I have been asked to comment on the concerns/ issues the Chair of the IMB raised with me, and whether these issues were also communicated with all members of the IMB, Brook House managers and the Home Office. I do not remember what issues or concerns were raised by Jackie during the time we met in the immigration office. Jackie would come in to see me usually on her way to see the centre director. It might be about someone in the centre who had raised a concern around their immigration case and she would follow up that concern with a member of the immigration team. I do not know if any issues were communicated more widely.

71. I have been asked to refer to the Verita Report [CJS0073709_31]. It refers to the report published by the IMB at Brook House in May 2018 which covers the year to the end of December 2017 [see IMB000135]. I have been asked to comment on whether I agree that the IMB members had a tendency in the IMB meetings to over empathise with the G4S management team and the Home Office. I did not get that impression.

72. I have also been asked to describe the general stance taken by the IMB in the meetings with regards to Brook House and the safety and wellbeing of the individuals detained, including whether the IMB scrutinised and challenged G4S and the Home Office in respect of any welfare concerns. From memory, G4S would take the details of any concern or incident that the IMB raised which they were not aware of and gave assurance that they would report back. G4S might give an update on any other concerns that they were aware of and explain any actions they had taken in relation to it. I would do the same.

Gatwick Detained Person Welfare Group (GDWG)

73. I have been referred to [CJS0073709_31]. The Verita Report states that GDWG managers reported that relations with centre managers and the Home Office had become strained in 2017 because of concerns that GDWG were over-identifying with detained persons and that they were trying to advance their immigration cases or campaign on their behalf. I have been asked to comment on the relationship between GDWG and the compliance team / Home Office as well as the relationship between GDWG and the managers at Brook House during and after the Relevant Period.

74. The extent of my relationship with GDWG was four or five meetings over a two or three year period and a few emails. Along with G4S, I met with the James Wilson of GDWG on three occasions. From memory, the meetings were amenable but there were a number of concerns which were raised during two of the meetings which were listened to and promised that they would be looked into. Clarification around the surgeries was requested, following their initial concept in 2015. Prior to James Wilson, Nic Eadie was the director at GDWG. G4S led the relationship on that, worked with him to introduce the GDWG surgeries, initially as a trial, and offered a tour of Brook House for Nic and his colleagues, which was taken up. Looking at emails from that time, this seemed like a positive relationship.

75. I have been asked to comment on any concerns regarding GDWG's relationship with individuals detained at Brook House. I do not remember there being any concerns raised about GDWG and their relationship with individuals at Brook House.

Memorandum of Understanding

76. I have been asked about the draft Memorandum of Understanding ('MOU') [GDW000003_1]. It was introduced in February 2016, and was agreed and finalised with GDWG that same month. My understanding of its purpose was that it was introduced following a trial of GDWG surgeries, and this was a way of formalising them.

77. I have been asked whether the MOU was introduced in response to the statement provided by Naomi Blackwell in October 2015. It was not as far as I can recall. The referenced MOU was signed in February 2016.

78. I have been asked about bullet point 3 in the MOU which states that on occasion it may be in the interest of a detained person to have a further follow up meeting in private with GDWG staff. It states that these will be exceptional circumstances requiring agreement with G4S and Home Office Management. The factors that would fall into the category of "exceptional circumstances" would have been for G4S to agree.

79. I have been asked why exceptional circumstances and agreement was required. It may help to explain here that there was a difference between GDWG's drop in surgeries, and their volunteers' attendance at social visits.

80. As set out below, initially, the surgeries were introduced so that GDWG could better match individuals with volunteers. The role of the surgeries was intended to assess the detainee's needs and any applicable special requirements (languages, personality etc.) with a view to identifying the appropriate volunteer to attend during future social visits. Once this was done, there would usually be no need for repeat visits to the surgery by a specific individual – GDWG did not have any sort

Witness Name: Paul Gasson
Statement No: Second
Exhibits: [0]

of casework or clinic function that I was aware of, and its volunteers were not qualified to provide advice to detainees. Access to legal representatives via the legal aid agency funded surgeries was provided four times a week during the Relevant Period. This was Monday to Thursday. Ten 30-minute slots were available each day, so there were forty appointments per week [HOM0332145]. Notification of how to access this service would have been provided to all people entering the IRC during the G4S reception process and the Home Office induction.

81. There was no issue at all with a volunteer visiting a detainee as many times as they wanted to – via social visits. As I understood it, GWDG provided a befriender service and as with any family or friends, there were no restrictions on repeat social visits. A volunteer GDWG member, or any GDWG member, could meet with an individual as many times as they wished to in the social lounge; there were no restrictions (bar the normal security processes for all visitors). Social visits happened every day of the week 2pm until 9pm. Should volunteers have any concerns about the people they were visiting they could (and did) raise these via the GWDG office, or could always speak to centre staff.
82. The conversation around the MOU at the time would have covered this point, and as per the email, Nic appeared happy with this. As far as I was aware, the reason for the surgeries had not changed.

Meeting on 25 July 2016

83. I have been asked to comment on the witness statement of James Wilson dated 13 September 2018 [GDW000001_7] in which he states that I was present in the meeting led by Neil Davies who was keen that the work of GDWG was centred on social visits. I do not recall this meeting but emails indicate that this seems to be the first meeting that James Wilson attended at Brook House as the new director of GDWG. There was emphasis on GDWG's work being confined to social visits as per the original MOU.

84. The attendance of local Home Office staff in some GDWG meetings with G4S had been happening from the opening of the centre as far as I am aware. Previous immigration managers and Home Office Area managers had attended meetings with them and G4S prior to me attending. Whether this was because G4S had asked for Home Office presence I cannot be certain.

Meeting on 9 March 2017

85. James Wilson also stated that in March 2017 he received an email from me requesting a meeting to discuss concerns regarding staff/volunteers at GDWG and that I would like to clarify the role that GDWG carried out in the centre, and whether it needed to be revisited. I do not recall why I considered that GDWG's role needed to be clarified, but something must have prompted this, either information from G4S or perhaps it was because there was a case where a member of GDWG had referred a detained individual who they deemed as vulnerable to an outside agency without informing anyone at Brook House (which obviously would mean that those responsible for their wellbeing would not have been aware of the concern).

86. I have been asked what I considered GDWG's role should have been at Brook House. I considered its role as per the initial MOU and as a befriender service. I do not remember there being any changes to this and both Brook House and GDWG were happy with this arrangement.

87. I have also been referred to James Wilson confirming that the meeting took place on 9 March 2017 with myself, Mr Haughton and Mr Skitt. He states that I referred to the witness statement Ms Blackwell gave in October 2015 and the volunteer acting as surety and complained that GDWG were not always obtaining consent from management for detained persons to visit their drop-in surgeries for a second occasion, that one of GDWG's staff members had given legal advice to a detained person and that one of their volunteers had written to G4S criticising how they handled visits.

88. I do not recall mentioning the Naomi Blackwell statement, however I do recall that Home Office senior management were aware of the witness statement and there was a request for clarification over the role of GDWG given, presumably, because of the level of detail contained in the statement. I have never seen the statement. It was possible that this was the reason it was raised. I vaguely recall my manager mentioning it. I do not know whether the statement was a concern for the Home Office and G4S.

89. I have been asked why GDWG were required to obtain consent from management for detained persons to visit their drop-in surgeries for a second occasion. This was part of the MOU following the trial in 2015, but I do not recall the reason for this initially or if I was present during this agreement. Following a later agreement between GDWG and G4S as stated in the email response from James Wilson dated 29 March 2017, a process was agreed whereby GDWG would email G4S directly to request a second drop-in with an individual.

90. Following that meeting, James Wilson emailed as follows [GDW000003_0011]:

“Thank you very much for the meeting last week. I really appreciated your, Dan and Steve’s time, the chance to catch-up and the opportunity to address some current concerns. I particularly appreciated the honest and positive conversation we were able to have; we continue to value highly our good working relationship with the Home Office and with G4S.

I am investigating the concerns you raised regarding our staff and volunteers. I will respond to you in detail and in writing by Wednesday 29th March. I apologise that this is over 2 weeks away, but it will take me a little while to speak to all the relevant parties.

When I write to you, I will endeavour to send you a revised MOU draft at the same time for your comments and consideration.

I would welcome quarterly meetings with you if this is possible – hopefully this would not normally take much of your time, but would allow a regular chance to catch-up. Could we pencil in the below dates, if convenient for you (and Dan and Steve)? I appreciate that we will need to arrange a time to sign a revised MOU when this is agreed. We can arrange in due course – if necessary perhaps we can bring the first proposed date below forward.”

91. I responded:

“Thanks James,

I have sent a calendar invite for the June meeting.

Quarterly meetings sound appropriate to me.

I look forward to receiving your response and any draft amendments to the MOU

Regards”

92. James Wilson sent a substantive response on 29 March 2017 [GDW000003_0010].

He said that they were happy with an arrangement whereby they would email when they wanted to arrange a second drop-in slot, provided reassurance that staff and volunteers receive training on the point that they do not provide immigration advice, and finally he said that their policy was that GDWG prefer visitors to raise any concerns with the GWDG office first.

Meeting on 06 June 2017

93. In reference to James Wilson’s statement, I have been asked why it was an issue for GDWG staff to request a repeat meeting with detained person if their purpose was to improve the welfare of them. I do not recall this, but presumably this was part of the clarification that was being sought, and still not received, against concerns raised

by G4S about the use of the drop in surgery specifically. The befriender service and emotional support they provided was very valuable to the individuals at Brook House. If they wanted to offer more than that, I think it was reasonable to clarify what was required, and if this was already happening. The befriender service took place in social visits, as set out above, and was not limited.

94. I have been asked what I consider GDWG should have been using the drop-in surgeries for. In my view, it should have been as per the MOU and to share details of an individual they had concerns about with Brook House. See for example the G4S email on 6 April 2017 which states “*drop in clinics are not the place to maintain regular contacts with detainees. This should be taking place in the context of social visits*” – i.e. the issue was not whether repeat social visits took place, but where [GDW000003_0015]. The response from G4S thanks GDWG for raising their concerns, acknowledges the concerns in their email and makes and/or checks that the appropriate referrals were in place for the individual. They also maintain the agreement in place.

95. I have also been asked to comment on Ms Pincus’ evidence that her sense was that the restriction on drop-ins was done to reduce, not encourage, safeguarding concerns from being raised, and that this was because I considered that GDWG work interfered with the Home Office's purpose of removing people [DPG000002 paragraph 39 and INQ000105_6]. On the contrary, safeguarding concerns were welcome so that properly trained areas could review the concern and put in place the correct follow-up action or plan/s if required.

96. I have been asked about the transcript of an interview with members of GDWG on 13 February 2018 [VER000249_12-13], in which Ms Pincus described a time when she sent an email suggesting that a detained person should be transferred to Tinsley House and Mr Wilson described a concern with regards to the delay in providing a detained person with crutches. He stated that I expressed the concerns they raised were insulting.

97. I vaguely recall the transfer request. I believe that GDWG referred to the person as 'a 14 year old boy' even though there was evidence at the time to show that he was over 18, a passport I believe which was produced during an asylum interview with the Home Office. Regarding the crutches, if I recall correctly, GDWG had referred their concerns to healthcare on-site and received a response from them noting their concerns and confirming that they (healthcare) were aware of this person's needs. GDWG offered to provide some crutches if G4S were not able to. This was not appropriate as any healthcare aids would need to come via the healthcare supplier or secondary care (to state the obvious, if the crutches had been faulty and the detainee had been injured using them, they could rightly have complained about that, so we had to ensure healthcare aids came from a proper source). There was no issue with GDWG raising concerns. Once the concerns had been acknowledged and assurance given that the relevant specialist area were aware, it seemed on occasion that this was not enough for GDWG though I am not sure why.

98. With respect to the specialised support available to individuals detained if GDWG referred them to Brook House management, it would depend on the reason they were referred. There were healthcare related services, along with many members of trained centre staff available to take forward concerns related to welfare and vulnerability.

99. I note that there was a meeting with James Wilson on 25 July 2016, after which he emailed on 27 July 2016 to say "*Many thanks for the meeting on Monday. I really appreciated your time and thoughts, and I hope we can build a strong working relationship. Please do raise any questions or concerns you have re GDWG's work, as we go on, and I will likewise contact with any questions as we go, if that's ok with you.*" [GDW000003_0004].

Meeting on 18 August 2017

100. I have been asked to respond to James Wilson's statement in which he states that he met with myself and Mr Skitt on 18 August 2017, where we both mentioned that we were considering ending drop in surgeries [GDW000001_14-15].

101. My recollection of this meeting, and from reading an email [HOM0332150] where James Wilson states that he and his board of trustees are happy with the MOU, saying “*they are happy for me to sign on behalf of GDWG*”, is that this meeting was to sign the updated MOU.
102. Before that was done, James Wilson was asked to clarify his vision for the surgeries and the role of GDWG at these surgeries given the concerns raised over the last few months (see above paragraphs) I think it was important to have clarification as we were all due to sign the MOU and we would need to know whether it needed amending to reflect the role of GDWG in the centre. I don’t recall James Wilson proposing anything new to the original MOU or setting out at that point anything further that he felt GDWG wanted to do. I recall that the meeting was rather short because it was meant to be for signing the MOU. As James Wilson was not able to provide clarification, it was left that he would be happy to provide an overview of the role of GDWG in the next few days.
103. James Wilson also stated that with the benefit of hindsight, he felt that the approach towards GDWG became increasingly one that was tantamount to bullying. I have been asked to comment on this. There was no sense from his emails at the time that he felt under undue pressure or treated unfairly. The requests for clarification of what GDWG did in the surgeries had not been forthcoming and this had been asked for on at least two occasions. This was a reasonable request, given the concerns that had been raised by both G4S and the IMB. I do not think that asking for clarification of the role of a visitor group who had private one-to-one meetings with detained individuals who were in the care of G4S was unreasonable or tantamount to bullying. I can now see from the evidence that at least in hindsight there has obviously been a difference of opinion as to the conduct and outcomes of the meetings. I did not understand that I was being (or would be perceived as being), hostile, and certainly would not intentionally act in that way.

104. I have been asked to comment on Ms Pincus' view that there was a "culture of disbelief" within the Home Office and that this reflected the Home Office's attitude towards GDWG [see INQ000105_13]. This is the first time that I have heard this. As far as I knew, this did not reflect the attitude towards GDWG. The local Home Office immigration team at Brook House had very little contact with GDWG.
105. I have been asked to comment in relation to Mr Skitt telling James Wilson that it was inappropriate for GDWG to refer detained persons to other agencies such as IMB and RAPT, and whether the Home Office shared the same sentiment as Mr Skitt. I believe that it would depend on what they were referring to and what arrangements G4S had in place with GDWG. I have also been asked why it was an issue when GDWG took it on themselves to refer individuals to outside agencies – this would be an issue if they were not also passing all information on to G4S and/or healthcare. As mentioned earlier, there was a risk that a vulnerable individual could be missed if any new or relevant information was not being passed to G4S and/or healthcare. Passing on any concerns to a G4S officer following an interaction with an individual was the expectation for all people in the IRC. I do not know whether it was within GDWG's remit to refer individuals to outside agencies.
106. I have been referred to James Wilson's witness statement in which he states that I suggested they should have a standardised form for drop-in sessions so that I could monitor what staff said in the interview room. It also states that I was minded to say that they do not need a private interview room. I have been asked what the standardised form would have looked like for the drop-in sessions. The previous GDWG director provided a copy of the standardised form they used in their surgery sessions. I probably wanted to know if anything had changed or needed updating. I very much doubt I was asking for a copy of completed forms. I have also been asked whether I agree that there would have been a lack of independence and confidentiality if the Home Office and G4S staff were permitted to monitor the conversations with GDWG. I do agree. It was important that GDWG had their own space. I did not consider removing the private interview room for GDWG.

107. I have been asked to respond to James Wilson's comment that he was left with no doubt that Brook House management might end the drop-in surgeries or refuse them permission to hold them in private rooms if they raised any further concerns with G4S [GDW00000_18]) I do not know how he has come to that conclusion. At the last meeting (in August 2017) I remember with G4S and James Wilson it was left that he would provide clarification over the role of GDWG in their surgeries before the reviewed MOU was finalised and signed. The original MOU (signed in Feb 2016) was still in place and remained so.

108. I have been asked whether I explicitly expressed that a key issue for the Home Office was that concerns were being raised by GDWG *and* not shared with the IRC or the Home Office [see INQ000104_14]. I remember raising the point with GDWG that it was important that they raised welfare concerns with the IRC for reasons already outlined above.

Post-Panorama

109. I have been asked to confirm whether there was any change in stance towards GDWG's role after Panorama aired compared to the meeting on 1 August 2017. There was not as far as I recall. I do not remember meeting with James Wilson again after the programme. To my knowledge, I never received the letter sent by James Wilson which was copied to me on 25 September 2017 [GDW000003_41-44], however having now read it, it is similar to what the original MOU was based on with some helpful clarification around the drop-in sessions.

Security

110. I have been asked about the Gatwick IRC Security Meeting dated 23 June 2017 [CJS000911]. It was a G4S organised and chaired meeting, so the exact purpose would be something they would be able to address better than me, though I attended. In my view it was about having an awareness of security related issues in the centre - a chance to discuss these in more detail, any mitigating actions to prevent a reoccurrence and an opportunity for any lessons learned. With respect to my

involvement and contribution, I would raise any relevant security related issues or related matters.

111. I have been referred to page 2 of [CJS000911] where it is noted that I provided an update that an aggressive letter had been received from a solicitor regarding an alleged sexual assault which the Home Office were not aware of. I asked that the Home Office managers are made aware of any sexual assaults and violent occurrences. I have been asked why it was requisite that the Home Office managers were made aware of any sexual assaults and violent occurrences. This was so that this information could be passed to the appropriate Home Office team. In this case, it was a serious complaint that DES would likely have wanted to pass on to the Professional Standards Unit to investigate and/or ensure this allegation was properly investigated.

Training

112. I have been referred to a transcript of interview with Jane Shannon dated 28 February 2018 [VER000246_7], in which Jane confirmed that I was one of the controllers she offered to meet with. I do not recall a discussion with Jane Shannon.

113. In my interview with Verita on 22 January 2018 I stated that on-the-job training was missing and I raised this with G4S [VER000256_13]. I have been asked to comment further. I do not recall when I raised this issue with G4S. It was possibly in the weekly meetings. I am not sure that I spoke about how the candidates were disadvantaged. The interview script provides the context why I felt that on-the-job training was missing due to officers not knowing how the interview area operated.

114. I have been asked to refer to a transcript of interview with Michelle Smith dated 1 May 2018 [VER000251_13] in which she states that there was a time when there were colleagues who were out of ticket because they did not have their C&R training. She states that Lee Hanford agreed with me that this would be okay until they got things sorted out. I have been asked why staff were 'out of ticket'. DCOs would have been out of ticket if they had not completed their 12 month C&R

training refresher course. I did not agree for the staff not to have the C&R training. The reference to 'out of ticket' is an informal reference to the consequences set out in what is now Detention Services Order 02/2018, Detainee Custody Officer and Detainee Custody Officer (Escort) Certification, August 2018 [HOM0331984]. The DSO during the Relevant Period was Detention services order 10/2014, Detainee custody officer (DCO) certification, November 2014 [VER000050].

115. Section 5.2 of DSO 10/2014 [VER000050_0015] sets out the requirements during the Relevant Period for refresher control and restraint training, as follows:

“If the Certification Team do not receive confirmation that Control and Restraint refresher training has been completed before it expires, the DCO will have a further six months grace period in which to complete the Control and Restraint refresher course. During this period their certificate will be invalid and they cannot work as a DCO, be used in any planned use of restraint or have any contact with detainees.

If the DCO completes the Control and Restraint refresher training within this six month period the Certification Team must be notified immediately at which point the certificate will become valid and the DCO will be able to return to full duties.

If the DCO fails to undertake Control and Restraint refresher training in this period, their certificate will become invalid until such time as they complete the refresher training.

During this time the individual cannot work as a DCO or have contact with the detainees.”

116. Paragraphs 47-55 of the current version, DSO 02/2018, set out the requirement for refresher training, and the consequence if a DCO is not up to date with training

requirements. In relation to control and restraint training in particular, paragraphs 47 to 55 [HOM0331984_0015] include that:

“47. DCOs are required to undergo a minimum of 8 hours annual refresher training in control and restraint, delivered by approved Control and Restraint instructors. DCO instructors are required to complete refresher training every 3 years. DCOs whose Control and Restraint training has expired must not work as DCOs, or be used in any planned use of force until they have undergone and passed their refresher training.”

“53. If the Certification Team do not receive confirmation that Control and Restraint/HOMES refresher training has been completed by a DCO before it expires, the DCO certificate will become invalid and the officer cannot work as a DCO or be used in any planned use of force.”

54. When the DCO completes the Control and Restraint/HOMES refresher training the Certification Team must be notified immediately, at which point the certificate will become valid and the DCO will be able to return to full duties.”

117. An email from Lee Hanford dated 5 October 2017 [HOM0332151] to me (in my position at that time as contract monitor) sets out his intention to deploy staff in line with a Use of Force policy he had obtained from a Prison Service Instruction. He said that places had been obtained for refresher training and that meanwhile:

“As per our discussion it is my intention to deploy staff in line with the Use of Force policy, as I do believe that we are operating in exceptional circumstances. The assurance that I give is that they will not take part in any planned use of force.

From my perspective this is a pragmatic approach and is in accordance with the Use of Force policy.”

118. I forwarded this email the next morning to my manager and senior manager. I also copied in the DES Certification manager. I do not know what, if any, agreement was made between G4S and the Home Office regarding these officers following the email. I don't recall any earlier discussion but it is likely that Lee spoke to me either as part of another meeting (he used to attend the weekly meetings at this point and these took place on a Thursday) or because there was no senior Home Office staff onsite. I would have asked that he send through his intentions so I could discuss with the relevant people.

Relationship with G4S

119. I have been asked to comment in response to Michelle Smith's statement that I found Steve Skitt frustrating [VER000251_19]. I found it frustrating that I had to raise the same performance failures on numerous occasions at the weekly meetings when I felt that Steve was in a position to do something about it. Steve and I had a good working relationship. He was approachable and he would listen to what I was asking. However, as I said in my interview with Verita, I would request that Ben Saunders attend the weekly meetings at least once a month as I felt that he better understood what the HO was trying to achieve.

Use of Force (UOF)

120. In my First Witness Statement, I stated that the Home Office Team were informed of and provided with copies of all recorded UOF incidents and a monthly detailed summary of all UOF incidents. UOF paperwork also show that you were personally informed of specific UOF incidents that took place [HOM002496_6, CJS005622_6 and CJS005650_6]. DC Rules 2001 Rule 41 (3) instructed that all UOF incidents had to be reported to the Home Office. The deputy immigration managers and I would read through the reports to ensure there was nothing of concern. When I was informed of specific UOF incidents, I would ask the background to the UOF if not forthcoming. I would ask if there had been any injuries to either the person or staff and if healthcare had been present.

Rule 40

121. I have been asked to refer to [CJS001648_6, CJS001688_7, CJS001719_4] which show that I was notified when a detained person was placed on Rule 40. I have been asked why I was notified when a detained person was placed on Rule 40 and how I used this information. The Home Office was notified of all occasions as per Detention Centre Rule 40. The paperwork would be reviewed to ensure it was completed correctly.

122. I have been referred to documents relating to Removal from Association [CJS001662_2, CJS001707_2, CJS001720_4, CJS001733_4, CJS001743_4, CJS001743_4, CJS001797_4, CJS001826_4, CJS001835_4 and CJS001843_4]. I have been asked to comment on the information I considered to determine whether an individual was suitable to be placed under Rule 40. Most of the referenced documents show that I was notified of the removal from association, not that I authorised it. For the cases where I did authorise removal from association, the information I considered would have been what was presented by G4S and consideration of any alternatives to the relocation. For the remainder, they show that the removal from association had been authorised by the G4S manager, which was the correct process.

123. I do not remember seeing a pattern of detained persons who suffered from mental health issues being placed under Rule 40. If there were any indication that mental health issues were present during the daily welfare check, we would ask G4S (or healthcare if they were present) if he had been seen by a registered mental health nurse and if not, ask that a visit was arranged.

124. In my First Witness Statement I stated that when I held the role of Deputy Manager I was responsible for conducting Rule 40 and Rule 42 visits every day. I have been asked to explain the purpose behind these visits. This was requirement in line with Detention Centre Rule 40. This was primarily a welfare check to ensure

the person understood why they had been relocated; an opportunity for them to speak to a Home Office representative and raise any concerns that they may have. Soon after the centre opened, the Home Office put in a process whereby the G4S Duty Director, Duty Manager, Healthcare and the Home Office would meet every day at 10am in the CSU to complete the daily visits to those held under Rule 40 and Rule 42. It was an opportunity to review the case, obtain information from the officers working on the unit and discuss afterwards whether G4S would be asking for an extension beyond 24 hours. Notes would also be added to the paperwork by each visitor.

Violence Reduction

125. I have been referred to G4S's Gatwick IRC's Violence Reduction Strategy dated 19 August 2015 [CJS000721]. I have been asked whether this strategy was used during the Relevant Period. Unless there was an updated version, this policy would have been in place. I do not know the purpose of the strategy and whether it was effective in protecting individuals detained at Brook House. It was not a Home Office document. I don't recall signing it, though it says it was approved by me. I would likely have gone through it with G4S at the time if I did sign it. However, I note that the dates for those who produced and approved it in G4S are full dates (day, month, year). When it comes to the entry suggesting that I approved it, the date is not filled in – there is a blank before '2015'. I do not know if this is because someone added my name in the expectation that I *would* review it, but I never did, or whether I did but the date was just not filled in.

Disciplinary Action Post-Panorama

126. I have been referred to letters to DCOs and DCMs regarding revocation or suspension of their certificates following the Panorama documentary.

127. Detention services order 02/2018 (from paragraph 68) sets out the process at present [HOM0331984_0018], and Detention services order 10/2014 (section 6) sets out the process at the Relevant Period [VER000050_0016-18].

128. The referenced letters are a combination of DCO certification being suspended, signed by me (pursuant to page 16 of the previous DSO and paragraph 68 of the new DSO); and DCO certification being revoked, signed by the senior certification manager (pursuant to page 18 of the previous DSO, and paragraph 82 of the new DSO). I was not part of the Detention Services Certification Team. I am aware in general that the decision as to when a DCO/DCM's certificate should be revoked or suspended was taken pursuant to the Detention Services Order Detainee Custody Officer and Detainee Custody Officer (Escort) Certification.

129. I have been asked to refer to an Appeal Response to Derek Murphy, where I was copied in [HOM005818]. I have been asked to comment on my involvement in the appeal process. I do not recall having any involvement in the appeal process and I do not know why I was cc'd. Appeals would have been addressed to the DES Director at the time (see paragraph 88 of the DSO).

<u>Statement of Truth</u>	
I believe that the facts stated in this witness statement are true. I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.	
I am content for this witness statement to form part of the evidence before the Brook House Inquiry and to be published on the Inquiry's website.	
Name	Paul Gasson
Signature	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Signature</div>
Date	8 March 2022

Witness Name: Paul Gasson
Statement No: Second
Exhibits: [0]