

<p>1 Wednesday, 23 March 2022</p> <p>2 (10.00 am)</p> <p>3 (Proceedings delayed)</p> <p>4 (10.10 am)</p> <p>5 MS MOORE: Good morning, chair. We start today with the</p> <p>6 evidence of Mr Schoenenberger.</p> <p>7 MR PHILIP ANDREW SCHOENENBERGER (sworn)</p> <p>8 Examination by MS MOORE</p> <p>9 MS MOORE: Good morning, Mr Schoenenberger.</p> <p>10 <b>A. Good morning.</b></p> <p>11 Q. Can you confirm your full name, please?</p> <p>12 <b>A. Philip Andrew Schoenenberger.</b></p> <p>13 Q. You should have a white folder of documents in front of</p> <p>14 you, so I may refer you to those, but I will also show</p> <p>15 them on the screen. At tab 1, which you might wish to</p> <p>16 have open, unless you want to refer to it, is your</p> <p>17 witness statement?</p> <p>18 <b>A. Yes.</b></p> <p>19 Q. You made that to the inquiry and signed it on</p> <p>20 25 February 2022, and, chair, I will ask for that to be</p> <p>21 adduced in full. The reference for that is</p> <p>22 &lt;HOM0332132&gt;. What that means, Mr Schoenenberger, is</p> <p>23 that we won't go through everything in your statement --</p> <p>24 that's already in your evidence. What I want to ask you</p> <p>25 about instead are some key issues which arise from that</p> <p style="text-align: center;">Page 1</p>	<p>1 includes the relevant period for our purposes, you were</p> <p>2 head of DEPMU, so that's the Detainee Escorting and</p> <p>3 Population Management Unit --</p> <p>4 <b>A. Indeed, yes.</b></p> <p>5 Q. -- which sits within detention operations and was led,</p> <p>6 ultimately, by Alan Gibson at the top of detention</p> <p>7 operations; is that right?</p> <p>8 <b>A. That's right, yes.</b></p> <p>9 Q. You left the Home Office in March 2018 for roles in the</p> <p>10 Ministry of Justice and then the Prison Service, but</p> <p>11 recently returned, I believe?</p> <p>12 <b>A. I did, yes.</b></p> <p>13 Q. Now within Detention Escorting Services?</p> <p>14 <b>A. Yes, the projects team.</b></p> <p>15 Q. Is that as an assistant director role?</p> <p>16 <b>A. Indeed, yes.</b></p> <p>17 Q. So the first thing I want to ask you about is the bid.</p> <p>18 So starting at page 3 of your witness statement, from</p> <p>19 paragraph 10 onwards, you discuss your role in</p> <p>20 evaluating one of the elements of the initial</p> <p>21 Brook House bid, so that was in 2007, and it was</p> <p>22 essentially the bid for who will win the tender to run</p> <p>23 Brook House.</p> <p>24 <b>A. Yes.</b></p> <p>25 Q. At the time, you were an SEO, and you say at</p> <p style="text-align: center;">Page 3</p>
<p>1 that you might be able to help us with.</p> <p>2 So, firstly, your background. You have been a civil</p> <p>3 servant since 1986, initially in the Prison Service?</p> <p>4 <b>A. Yes, that's right, yes.</b></p> <p>5 Q. You worked within the Home Office from 2005</p> <p>6 until March 2018, in a number of roles, which we may</p> <p>7 consider in more detail, but you set out in your</p> <p>8 statement at paragraph 6. In brief, from July 2005</p> <p>9 to March 2010, you were working as an SEO, and you say</p> <p>10 that was on HMIP recommendations, and also introducing</p> <p>11 the ACDT system into the immigration context.</p> <p>12 In March 2010 to September 2011, you were assistant</p> <p>13 director looking after Campsfield and Harmondsworth</p> <p>14 IRCs, and you say that was along with having an</p> <p>15 oversight of health issues?</p> <p>16 <b>A. Yes, that's correct.</b></p> <p>17 Q. Was that health issues just at those two centres or more</p> <p>18 generally?</p> <p>19 <b>A. No, across the estate. Things like the introduction --</b></p> <p>20 <b>well, the attempted introduction of SystmOne, the NHS</b></p> <p>21 <b>system for patient records.</b></p> <p>22 Q. The automated sort of online system?</p> <p>23 <b>A. Yes.</b></p> <p>24 Q. Yes, we have seen some entries from there.</p> <p>25 September 2011 to March 2018, so the period that</p> <p style="text-align: center;">Page 2</p>	<p>1 paragraph 10 that you were part of a three-person team</p> <p>2 that was tasked with looking at just the operational</p> <p>3 elements of the initial bids. We will come to see that</p> <p>4 operational matters were considered separately from</p> <p>5 financial ones, so your team wasn't looking at the cost</p> <p>6 or the value for money, you were looking at the plans,</p> <p>7 effectively, by various bidders, about how they proposed</p> <p>8 to run the centre. Is that about right?</p> <p>9 <b>A. Yes, that's right. I mean, the three of us had varying</b></p> <p>10 <b>degrees of experience of custodial environments. For</b></p> <p>11 <b>instance, I'd been the head of activities at a large --</b></p> <p>12 <b>well, largish, mixed prison. Other people had had a lot</b></p> <p>13 <b>of background in immigration and in working within an</b></p> <p>14 <b>immigration removal centre.</b></p> <p>15 Q. Had any of the three of you worked at an IRC?</p> <p>16 <b>A. Yes, Marina Enwright, yes.</b></p> <p>17 Q. As we will see, the team was to consider the six bids</p> <p>18 with a view to essentially assigning points and also</p> <p>19 ranking them in order of your preference or the quality,</p> <p>20 and you state at paragraph 12 at the end of that</p> <p>21 paragraph:</p> <p>22 "... any successful bidder would have to comply with</p> <p>23 all DSOs, operational instructions, et cetera."</p> <p>24 Do you remember whether it was your role at this</p> <p>25 stage, at the assessment stage, to apply, for example,</p> <p style="text-align: center;">Page 4</p>

<p>1 the framework of DSOs and to ensure that the bids</p> <p>2 complied with any legal requirements like the Detention</p> <p>3 Centre Rules or was it more that, once the bids were</p> <p>4 won, you'd expect them to be applied and to be in force?</p> <p>5 <b>A. I want to be really clear, this is a long, long time</b></p> <p>6 <b>ago.</b></p> <p>7 Q. Sure.</p> <p>8 <b>A. But, from my understanding, by the time bidders were</b></p> <p>9 <b>allowed to bid and they'd signed certain paperwork as</b></p> <p>10 <b>part of that bid process, they'd already agreed to</b></p> <p>11 <b>comply with DSOs, you know, the UK laws regarding</b></p> <p>12 <b>immigration detention and that sort of thing. But, as</b></p> <p>13 <b>I say, you know, I couldn't be more specific about what</b></p> <p>14 <b>bits they'd signed or how they'd signed or how that was</b></p> <p>15 <b>written, but my understanding was, by the time they'd</b></p> <p>16 <b>bid, they were allowed to bid, they had reached that</b></p> <p>17 <b>understanding with the Home Office.</b></p> <p>18 Q. I see. So there is no explicit reference, for example,</p> <p>19 in the comments that we will come to look at, about the</p> <p>20 application of DSOs, but we can assume that there was an</p> <p>21 understanding that they would undertake to comply with</p> <p>22 the DSOs?</p> <p>23 <b>A. I believe so, yes.</b></p> <p>24 Q. So you were there, as you say, along with two SEOs, and</p> <p>25 you have mentioned the varying degrees of -- types of</p> <p style="text-align: center;">Page 5</p>	<p>1 assessment, which, as we see from line 3 there, was</p> <p>2 between 20 August and 7 September 2007. There is</p> <p>3 a description, which follows, of the marking process,</p> <p>4 which indicates there is 22 areas of performance which</p> <p>5 were weighted, and I assume they were weighted with</p> <p>6 reference to importance, and indeed we see a little</p> <p>7 below, just above the subheading "Safety and Security"</p> <p>8 there, an indication of which of those elements were</p> <p>9 most critical -- so that's safety and security,</p> <p>10 admissions and discharge, contact Management,</p> <p>11 healthcare, catering, welfare and privileges,</p> <p>12 contingency planning, staffing commitments and staffing</p> <p>13 levels. So they were the nine most critical out of</p> <p>14 the 22 areas, from the looks of it.</p> <p>15 Within those 22 areas, aspects of performance were</p> <p>16 weighted as to the impact if they weren't delivered.</p> <p>17 That's the list at 4 to 1, by the looks of it. And then</p> <p>18 the assessment itself, each of the operational</p> <p>19 requirements, it says, was marked by an assessor on</p> <p>20 a scoring matrix of 0 to 5. And that seems to be 0 is</p> <p>21 a bare assertion that they will comply and 5 is</p> <p>22 effectively going above and beyond what's expected or</p> <p>23 what's required.</p> <p>24 So below we have the comments from the initial</p> <p>25 assessment made by your team. To be clear, you discuss</p> <p style="text-align: center;">Page 7</p>
<p>1 experience and degrees of experience?</p> <p>2 <b>A. Yes.</b></p> <p>3 Q. Was it the first detention centre bid, if you recall,</p> <p>4 that you had been involved in?</p> <p>5 <b>A. Absolutely, yes.</b></p> <p>6 Q. Had either of the others done it before, if you know?</p> <p>7 <b>A. I don't know, to be quite honest. I can't remember.</b></p> <p>8 Q. Did you ever take part in the same process again with</p> <p>9 another IRC?</p> <p>10 <b>A. No, but I have evaluated the bid, the current bid, for</b></p> <p>11 <b>Mitie Care &amp; Custody doing the escorting of detainees</b></p> <p>12 <b>around the UK.</b></p> <p>13 Q. I see.</p> <p>14 <b>A. I evaluated part of the bid in the Prison Service to run</b></p> <p>15 <b>Glen Parva Prison, and I have evaluated the mobilisation</b></p> <p>16 <b>part of the bid for the prison escort contract service.</b></p> <p>17 Q. And that was all since this one, so that was -- this</p> <p>18 was --</p> <p>19 <b>A. Yes, all since.</b></p> <p>20 Q. -- the first one and you've done --</p> <p>21 <b>A. That was the first time I'd done it, yes.</b></p> <p>22 Q. Can we have on screen &lt;DL0000140&gt;. You also have this</p> <p>23 behind tab 2. It is probably just easier to look at the</p> <p>24 screen. Page 62 of that document, please. Thank you.</p> <p>25 At the top here, we have the description of the initial</p> <p style="text-align: center;">Page 6</p>	<p>1 in your witness statement the G4S bid, but you will</p> <p>2 appreciate now, Mr Schoenenberger, that GSL, in fact,</p> <p>3 won the contract?</p> <p>4 <b>A. Yes, sorry, I mean, that's just an indication of my poor</b></p> <p>5 <b>memory, really.</b></p> <p>6 Q. Sure.</p> <p>7 <b>A. You know, I want to be completely honest about this. If</b></p> <p>8 <b>you had asked me all this three weeks ago, I'd have</b></p> <p>9 <b>probably -- not that I'm much of a gambler, being</b></p> <p>10 <b>a Methodist, but I'd have bet money that, you know, we'd</b></p> <p>11 <b>awarded the contract to G4S. I'd completely forgotten</b></p> <p>12 <b>that GSL and G4S were two separate entities at that</b></p> <p>13 <b>point.</b></p> <p>14 Q. Not a problem at all. So just to -- I'm just explaining</p> <p>15 that because, when we look at the comments you have</p> <p>16 made, we will look at GSL as well as G4S, because GSL</p> <p>17 were, in fact, awarded the contract.</p> <p>18 <b>A. Okay.</b></p> <p>19 Q. So staying on that same page, but moving down to under</p> <p>20 the subheading "Safety and Security", so the third</p> <p>21 paragraph down refers to GSL -- sorry, the second</p> <p>22 paragraph:</p> <p>23 "GSL proposed to lock up detainees between</p> <p>24 2100-0800 hours [9.00 pm until 8.00 am] but we have</p> <p>25 concerns about the impact this would have on the</p> <p style="text-align: center;">Page 8</p>

<p>1 availability of some services including visits."</p> <p>2 Then if you go to page 63, we see that for the G4S</p> <p>3 bid, lockdown time was -- the second paragraph there,</p> <p>4 2130 to 0800 hours, so 9.30 pm to 8.00 am. The last</p> <p>5 section on that page is "Healthcare", at the bottom of</p> <p>6 the page. I understand this was marked not by your</p> <p>7 three-person team, but by Dr Stuart Morgan, presumably</p> <p>8 because it required clinical expertise rather than the</p> <p>9 general views of your team?</p> <p>10 <b>A. Yes, that's right. It's the same as the fire safety and</b></p> <p>11 <b>the catering elements, because it requires a degree of</b></p> <p>12 <b>expertise.</b></p> <p>13 Q. I think, in fact, the areas that you went to experts for</p> <p>14 are listed earlier on, and we see, as you say, fire as</p> <p>15 well as healthcare there. So his view is recorded here:</p> <p>16 "GSL: generally a very detailed, thorough and high</p> <p>17 quality tender."</p> <p>18 And then overleaf, on 64 at the top, it says:</p> <p>19 "G4S: a generally satisfactory and good response,</p> <p>20 RMN cover is a concern."</p> <p>21 And we know that that stands for Registered Mental</p> <p>22 Health Nurse.</p> <p>23 Staying on that page, as to "Welfare and Regime", if</p> <p>24 you move down to below that subheading:</p> <p>25 "GSL: [it is noted that] the proposal for activities</p> <p style="text-align: center;">Page 9</p>	<p>1 would provide the facilities to admit and discharge 2.5k</p> <p>2 detainees each month. You see that is the second and</p> <p>3 the third paragraph under that heading.</p> <p>4 So, for the base of the bids, I suppose, from</p> <p>5 looking at this, it looks like the invitation to tender,</p> <p>6 as done in your assessment, was that the level of</p> <p>7 turnover would be about 2.5k, so 2,500 detainees each</p> <p>8 month. Do you recall that or do you agree that that's</p> <p>9 what's suggested by this document?</p> <p>10 <b>A. I agree that's what's suggested by this document.</b></p> <p>11 <b>I certainly have no recollection of that.</b></p> <p>12 Q. Fine. The capacity of Brook House, as we know, was, at</p> <p>13 maximum, about 426 beds, so if we have a turnover of</p> <p>14 2,500 a month with 46 beds, assuming that my maths is</p> <p>15 correct, it assumes a turnover of -- if every bed is</p> <p>16 filled every night -- about five nights on average per</p> <p>17 detainee. So a short stay, less than a week per</p> <p>18 detainee.</p> <p>19 <b>A. Yes.</b></p> <p>20 Q. You say you don't recall that that was the basis. Do</p> <p>21 you recall that it was intended to be a short-stay</p> <p>22 rather than a long-stay centre, in general terms?</p> <p>23 <b>A. I do. Yes, I do remember that, in general terms, yes.</b></p> <p>24 <b>I think, and that's reflected, in some ways, by the</b></p> <p>25 <b>design of the buildings.</b></p> <p style="text-align: center;">Page 11</p>
<p>1 was extremely poor, there was no programme, the</p> <p>2 incentive scheme lacked imagination, a proposal that</p> <p>3 detainees watch DVDs and videos was not matched by an</p> <p>4 undertaking to provide televisions. Unit based</p> <p>5 activities comprising table tennis, pool and computer</p> <p>6 games provided a modicum of comfort."</p> <p>7 And the second paragraph on the next page, the same</p> <p>8 metric is -- so the same issue, welfare and regime, but</p> <p>9 G4S's bid is commented on here -- notes, in the fourth</p> <p>10 line down:</p> <p>11 "Despite much of the bid reflecting that the</p> <p>12 turnaround time at Brook House would be very short, the</p> <p>13 proposal to provide qualified tutors for a largely</p> <p>14 education based programme seemed at odds with this.</p> <p>15 Whilst G4S have provided 100 work opportunities, these</p> <p>16 are at times aspirational with regard to length of</p> <p>17 stay ..."</p> <p>18 It mentions detainees being trained in food handling</p> <p>19 and relying on them to undertake cleaning duties with no</p> <p>20 back-up. Finally, it is noticeable that the cleaning</p> <p>21 schedule was poor. So we see some comments on the</p> <p>22 duration of the stay. On page 63, which is the previous</p> <p>23 page, we were just looking at, under "Admissions and</p> <p>24 Discharge", a criticism made of both GSL and one of</p> <p>25 the other bidders is that they failed to confirm they</p> <p style="text-align: center;">Page 10</p>	<p>1 Q. Would you agree that your assessment of the bid, in</p> <p>2 terms of things like activity provision and lock-in</p> <p>3 regime and staffing, would have relied on the assumption</p> <p>4 that it would be a short period of time and that your</p> <p>5 assessment might have been different if it was designed</p> <p>6 for a longer period holding?</p> <p>7 <b>A. That's very simple logic. I guess that would be the</b></p> <p>8 <b>case, but I can't say that I thought that at the time,</b></p> <p>9 <b>that if the stay is longer, this is going to have to be</b></p> <p>10 <b>very different. Is that --</b></p> <p>11 Q. No, that's fine, because you were proceeding,</p> <p>12 I understand, on the basis that it was a short stay.</p> <p>13 <b>A. Yes.</b></p> <p>14 Q. So you didn't turn your mind to a longer stay.</p> <p>15 <b>A. No.</b></p> <p>16 Q. What I'm asking is, the sort of regime that's</p> <p>17 appropriate for a population that's going to be there</p> <p>18 for five days might not be appropriate for people who</p> <p>19 are staying much longer?</p> <p>20 <b>A. No, I guess not, but I suppose you have to take -- you</b></p> <p>21 <b>know, averages can be quite deceptive, can't they?</b></p> <p>22 <b>There would be people that would be there longer, and</b></p> <p>23 <b>certainly -- I'm just picking out one element I saw on</b></p> <p>24 <b>a previous page. You know, food hygiene training. It</b></p> <p>25 <b>would be fairly straightforward to train somebody in,</b></p> <p style="text-align: center;">Page 12</p>

<p>1 you know, the basic food hygiene certificate and then to</p> <p>2 let them take part in some part of the cooking or food</p> <p>3 preparation itself or serving food, for instance. So</p> <p>4 I guess there is a little bit of a mix in that, that an</p> <p>5 average five days might betray the fact that some people</p> <p>6 could be there quite a bit longer.</p> <p>7 Q. We go to staffing commitments and levels. So this is</p> <p>8 back to page 65. The GSL entry:</p> <p>9 "We are seriously concerned at the GSL proposal to</p> <p>10 reduce DCO levels at 2100 hours through to 0800 hours</p> <p>11 which has clearly been done in order to accommodate the</p> <p>12 lockdown hours which are at the same time."</p> <p>13 It says that the centre, after 9.00 pm, will be</p> <p>14 staffed by -- it's been redacted -- a number of trained</p> <p>15 officers and a number of duty managers. Your team has</p> <p>16 written:</p> <p>17 "We do not consider this to be an adequate number of</p> <p>18 staff as the centre is still likely to be receiving</p> <p>19 detainees ... and discharging [them]."</p> <p>20 It says the ability to address standard operational</p> <p>21 functions such as constant watches and removal from</p> <p>22 association and TC has not been addressed during the</p> <p>23 night hours.</p> <p>24 Then at page 66, the penultimate paragraph, this is</p> <p>25 comments on G4S's bid. It looks like there was some</p> <p style="text-align: center;">Page 13</p>	<p>1 of a safe and orderly population. Then starting from,</p> <p>2 "That said", so the fourth line down in the middle:</p> <p>3 "That said, however we cannot ignore the fact that</p> <p>4 they share very tight staffing levels during the</p> <p>5 night-time period, a fact shared with four other bidders</p> <p>6 which border on the unsafe. The assessors are satisfied</p> <p>7 that only one bidder has proposed sufficient staffing</p> <p>8 levels for the night-time period. An ethos of cutting</p> <p>9 corners and meeting basic standards was evident from</p> <p>10 much of what we read and we are especially disappointed</p> <p>11 at the extended lockdown hours proposed by these four</p> <p>12 bidders. This appears to be a desperate attempt to</p> <p>13 reduce cost at the expense of welfare."</p> <p>14 The one bidder with adequate staffing levels is</p> <p>15 Reliance, which we see from the top of page 66. So we</p> <p>16 have discussed the DSOs which would apply and you</p> <p>17 understand that there was an undertaking to comply with</p> <p>18 the DSOs as well as there would have been with the legal</p> <p>19 requirements of the Detention Centre Rules. I'm sure</p> <p>20 you are familiar with the Detention Centre Rules</p> <p>21 generally, but I will read rule 3 which is entitled "The</p> <p>22 purpose of detention centres". Rule 3(1) reads:</p> <p>23 "The purpose of detention centres shall be to</p> <p>24 provide for the secure but humane accommodation of</p> <p>25 detained persons in a relaxed regime with as much</p> <p style="text-align: center;">Page 15</p>
<p>1 trouble in understanding the staffing proposals:</p> <p>2 "To capture contractual commitments would be a real</p> <p>3 challenge from this bid and nowhere more so than in the</p> <p>4 staffing levels where the assessors were seriously</p> <p>5 bamboozled."</p> <p>6 Then a bit later on, on the fifth line down:</p> <p>7 "... it is considered to be well nigh impossible to</p> <p>8 monitor their proposed staffing levels. We have sought</p> <p>9 a large number of clarifications regarding their</p> <p>10 staffing proposals, however given the complexity of</p> <p>11 their proposals we are not confident that this</p> <p>12 clarification is possible."</p> <p>13 Then the conclusions of the initial assessment of</p> <p>14 the bid are set out at the bottom of the page. Now,</p> <p>15 some have been redacted, but we can see, at least, the</p> <p>16 order going from top to bottom. So G4S there came</p> <p>17 second and GSL came fourth. So that's just the outcome</p> <p>18 of the first stage of assessment. Then I understand</p> <p>19 that there was a process of going back for more clarity.</p> <p>20 The first -- going to page 69 for comments on the</p> <p>21 first assessment, the first line refers to the best</p> <p>22 quality bid, and your team mentions in particular the</p> <p>23 activities, which, you say, although are small points in</p> <p>24 a grand scheme, mentioned that the benefits of having</p> <p>25 a content population cannot be underestimated in terms</p> <p style="text-align: center;">Page 14</p>	<p>1 freedom of movement and association as possible,</p> <p>2 consistent with maintaining a safe and secure</p> <p>3 environment and to encourage and assist detained persons</p> <p>4 to make the most productive use of their time whilst</p> <p>5 respecting in particular their dignity and right to</p> <p>6 individual expression."</p> <p>7 So a secure but humane accommodation with a relaxed</p> <p>8 regime with as much freedom of movement and association</p> <p>9 as possible. That stands, doesn't it, in quite stark</p> <p>10 contrast to your team's comments about the ethos seen in</p> <p>11 the bids of cutting corners and meeting only basic</p> <p>12 standards, and desperate attempts to reduce costs at the</p> <p>13 expense of welfare?</p> <p>14 <b>A. I guess there is some contradiction there, I guess, yes.</b></p> <p>15 Q. It stands in quite stark contrast to men spending nearly</p> <p>16 half of their time in the detention centre in locked</p> <p>17 rooms?</p> <p>18 <b>A. I'm sorry, would you mind just repeating what the actual</b></p> <p>19 <b>question is? Sorry.</b></p> <p>20 Q. Sure. So we looked at the lockdown times which were</p> <p>21 proposed, and most of them were from 9-ish pm until</p> <p>22 8.00 am --</p> <p>23 <b>A. Right, yes.</b></p> <p>24 Q. -- so that's almost half of the time --</p> <p>25 <b>A. Yes, yes, okay.</b></p> <p style="text-align: center;">Page 16</p>

4 (Pages 13 to 16)

<p>1 Q. -- in the centre in locked rooms. And that contrasts,</p> <p>2 doesn't it, with the idea of as much freedom of movement</p> <p>3 and association as possible?</p> <p>4 <b>A. Yes.</b></p> <p>5 Q. I appreciate that you were working on the basis of</p> <p>6 a short period of detention, as we've discussed, an</p> <p>7 average short turnover, but would you agree that the</p> <p>8 failure to provide a more -- a relaxed regime with as</p> <p>9 much freedom of movement and association as possible,</p> <p>10 which is required by the rules, would have even more</p> <p>11 serious repercussions if people are held for a prolonged</p> <p>12 period in a regime which, in fact, only meets basic</p> <p>13 standards and has compromised welfare in order to cut</p> <p>14 costs?</p> <p>15 <b>A. I think it would be fair to draw that conclusion, yes.</b></p> <p>16 Q. Can we turn now to the second assessment. So</p> <p>17 I discussed there was a two-stage process. This is</p> <p>18 page 70. It appears from the document that</p> <p>19 clarifications on various matters were sought from the</p> <p>20 bidders and then your team remarked the bids according</p> <p>21 to the further information. It appears concerns</p> <p>22 remained over night staffing. So the assessors, it</p> <p>23 says, looked at workloads at three existing IRCs and set</p> <p>24 out a table of staffing level options. That's been</p> <p>25 redacted, but it looks like -- and tell me if you can</p> <p style="text-align: center;">Page 17</p>	<p>1 <b>on, if that makes sense.</b></p> <p>2 Q. Sure. So when sort of considered together, you get more</p> <p>3 of a picture?</p> <p>4 <b>A. Yes.</b></p> <p>5 Q. Understood. Then, having considered staffing in</p> <p>6 relation to those three centres and their workload,</p> <p>7 staffing responses were reassessed. So we see this from</p> <p>8 page 71. So we have got another list of rankings, but</p> <p>9 this appears to be just in relation to the staffing</p> <p>10 levels, so I will let you have a look at that. Staffing</p> <p>11 figures at midnight from each bidder are as follows, and</p> <p>12 then there is a list. And then it says:</p> <p>13 "... the assessors have judged that the staffing</p> <p>14 responses are in the following order."</p> <p>15 So this is just about staffing. We see that GSL are</p> <p>16 tied third place and G4S are there in fifth place.</p> <p>17 There is a comment on the second line under</p> <p>18 "Conclusions" that the G4S explanations did not greatly</p> <p>19 improvement the clarity of their responses and in</p> <p>20 particular the staffing proposals are still shrouded in</p> <p>21 mystery.</p> <p>22 Turning to page 78, we have here a summary of</p> <p>23 the GSL bid, which we now know is the winning bid. The</p> <p>24 comments there are from the first assessment at the top,</p> <p>25 so it mentions the concern at the proposal to reduce DCO</p> <p style="text-align: center;">Page 19</p>
<p>1 recall or if you can't -- that you looked at the</p> <p>2 workload of Colnbrook, Campsfield and Oakington to see</p> <p>3 kind of how many people they had. Do you recall that</p> <p>4 happening?</p> <p>5 <b>A. No, I don't, no.</b></p> <p>6 Q. Do you remember whether you had any other way of</p> <p>7 assessing how many staff was adequate for the likely</p> <p>8 number of detainees?</p> <p>9 <b>A. No.</b></p> <p>10 Q. You mentioned that some of your team, although not you,</p> <p>11 had worked in an IRC before. So I suppose the member of</p> <p>12 your team who had worked in an IRC might have some</p> <p>13 knowledge of staffing levels in that IRC?</p> <p>14 <b>A. Yes. Sorry, the only reason I'm hesitating is because</b></p> <p>15 <b>they worked in a centre with women.</b></p> <p>16 Q. I see.</p> <p>17 <b>A. And given the percentage of our population as to women,</b></p> <p>18 <b>it may not have been representative of a centre. But,</b></p> <p>19 <b>to sort of expand on that a little bit, Oakington was</b></p> <p>20 <b>slightly different, in that we didn't hold people there</b></p> <p>21 <b>for charter flights and that sort of thing. So I'm --</b></p> <p>22 <b>you know, just an opinion, really, is that Colnbrook,</b></p> <p>23 <b>Campsfield and Oakington would give a fair spread of</b></p> <p>24 <b>the types of centres and the types of population that we</b></p> <p>25 <b>had and would give you a reasonable basis to form a view</b></p> <p style="text-align: center;">Page 18</p>	<p>1 levels between 9 am [sic] and 8 am. It says don't</p> <p>2 consider the number to be adequate, given the detainees</p> <p>3 coming and going in the night, in summary. Notes the</p> <p>4 concern about the ability to address constant watches</p> <p>5 and removal from association. It says:</p> <p>6 "GSL have proposed a lockdown period which we</p> <p>7 consider to be excessive and [this is under the heading</p> <p>8 'Lock Down'] not in keeping with the ethos of the rest</p> <p>9 of the estate: [9 pm to 8 am]. The proposals give no</p> <p>10 justification for such a lengthy period of</p> <p>11 non-association."</p> <p>12 And then, regarding activities, in the paragraph</p> <p>13 starting "We need clarification", of how detainees will</p> <p>14 access activity areas and the activities that will</p> <p>15 actually be available. Their proposal for activities is</p> <p>16 extremely poor. No programme of activities was</p> <p>17 provided. Then there is a list of bullet points that</p> <p>18 starts there. If we turn to 79, a list of some bullet</p> <p>19 points, the last being that cleaning proposals were</p> <p>20 poor. Underneath that list, in summary:</p> <p>21 "To summarise, certain aspects of this bid require</p> <p>22 no improvement or clarification, however we remain very</p> <p>23 concerned about certain areas. With opportunities to</p> <p>24 clarify, GSL could improve the overall quality of this</p> <p>25 bid but the lock down proposal is rather harsh."</p> <p style="text-align: center;">Page 20</p>

<p>1 Then we have the post-clarification comments which</p> <p>2 followed further information from GSL, by the looks of</p> <p>3 it:</p> <p>4 "GSL provided confirmation of a number of</p> <p>5 operational aspects, however in certain areas this still</p> <p>6 left us with some concerns."</p> <p>7 Going down to the fifth line:</p> <p>8 "Perhaps the issue of most concern in clarification</p> <p>9 is that the detainees not in the visits hall would be</p> <p>10 secured in their room at 2045 hours each day."</p> <p>11 The last line of that paragraph:</p> <p>12 "We now believe GSL lock down hours to be</p> <p>13 2045-0800hrs."</p> <p>14 Then it says the failure to provide a shift pattern</p> <p>15 also remains a concern. So adjustments to all of</p> <p>16 the scores were made on the basis of the second level of</p> <p>17 information, and also one of the metrics, which was</p> <p>18 contact management, was removed entirely. It says here</p> <p>19 that you now understood lockdown to be 8.45 pm until</p> <p>20 8.00 am. So you have considered on the page we just</p> <p>21 looked at that 9.00 pm till 8.00 am was excessive. Now</p> <p>22 it is even slightly longer. So these are adult men</p> <p>23 being locked in their rooms at 8.45 each night according</p> <p>24 to the bid. Could you, Mr Schoenenberger, if you</p> <p>25 recall, at this stage, or any stage, say that some issue</p> <p style="text-align: center;">Page 21</p>	<p>1 inappropriate and not in keeping with what should be</p> <p>2 provided at detention centres, would that have been</p> <p>3 something you could have communicated? So not "I'm</p> <p>4 going to give this some points", but, "This just isn't</p> <p>5 okay"?</p> <p>6 <b>A. I think we have reflected that we were very concerned.</b></p> <p>7 <b>I don't -- sorry, I'm trying not to hide behind</b></p> <p>8 <b>anything, but I think we did our best to make sure that</b></p> <p>9 <b>people understood that this wasn't what we thought was</b></p> <p>10 <b>acceptable. Sorry, I can't think what else to say,</b></p> <p>11 <b>really.</b></p> <p>12 Q. The way by which you passed on those comments was just</p> <p>13 within this document alone?</p> <p>14 <b>A. Yes.</b></p> <p>15 Q. And by making your points assessments?</p> <p>16 <b>A. Yes.</b></p> <p>17 Q. We see then the remarked scores at 73. So this is the</p> <p>18 final assessment after clarification has been sought in</p> <p>19 the second stage and we see there the order. That's all</p> <p>20 we have. But we can see the order. GSL there have</p> <p>21 moved to second place and that's despite the</p> <p>22 clarification that lockdown hours are, in fact, longer</p> <p>23 and it is possibly because of improvements in other</p> <p>24 points. So they are listed at page 73, which we didn't</p> <p>25 go to, but it looks like, at the second stage, there</p> <p style="text-align: center;">Page 23</p>
<p>1 you have identified simply isn't acceptable? Not</p> <p>2 necessarily this, but let's use it as an example. We</p> <p>3 understand that you can award points and you can write</p> <p>4 comments that go to the next stage, more or less points</p> <p>5 depending on your view and your team's view. But can</p> <p>6 you simply say to anyone with the power to make the</p> <p>7 final decision, "This is not sufficient and we can't</p> <p>8 proceed on this basis"? For example, "These lockdown</p> <p>9 hours are too long"?</p> <p>10 <b>A. I guess the evidence I'm looking at would suggest that</b></p> <p>11 <b>we did our best in reflecting our comments. The</b></p> <p>12 <b>decision to award the contract was -- clearly wasn't</b></p> <p>13 <b>ours, and, as I have seen in the evidence pack, you</b></p> <p>14 <b>know, there was a massive amount of weight given to --</b></p> <p>15 <b>no, perhaps not massive, a significant amount of weight</b></p> <p>16 <b>given to the financial aspects of that.</b></p> <p>17 Q. Yes.</p> <p>18 <b>A. But I suppose -- sorry, to try and answer your question</b></p> <p>19 <b>completely openly, I guess what you're trying to ask is,</b></p> <p>20 <b>did we think that the bids were actually deficient, and</b></p> <p>21 <b>I don't think we did think that. I think we just</b></p> <p>22 <b>thought it was concerning, rather than actually</b></p> <p>23 <b>deficient.</b></p> <p>24 Q. So if you had thought that some aspect -- let's just</p> <p>25 say, for example, lockdown hours -- was just</p> <p style="text-align: center;">Page 22</p>	<p>1 were improvements in cleaning, fire prevention and</p> <p>2 contingency. Of course it might also be because other</p> <p>3 bidders' points went down following clarification. In</p> <p>4 any event, there's been a sort of shuffling around.</p> <p>5 There is a summary on that page:</p> <p>6 "The assessors are satisfied that GEO ..."</p> <p>7 Sorry, we see G4S there at fourth, I should say.</p> <p>8 The comment says:</p> <p>9 "The assessors are satisfied that GEO offers the</p> <p>10 best all-round response. However, the long lockdown</p> <p>11 period which is shared with other bidders and tight</p> <p>12 staffing levels remain a concern."</p> <p>13 I suppose this is what you are saying: from your</p> <p>14 team's perspective, this is how you communicated the</p> <p>15 concerns that remained at the end of the process; is</p> <p>16 that fair?</p> <p>17 <b>A. Yes, I think it's fair to say that.</b></p> <p>18 Q. You have already alluded to what happened next. It is</p> <p>19 behind your tab 3, but it's the same document. If we go</p> <p>20 to page 40. This is the only page that is sideways,</p> <p>21 I think. This is the front page of the presentation on</p> <p>22 the bids, and it is dated 7 December 2007. Page 44 of</p> <p>23 the same presentation, but a little later on, which now</p> <p>24 is sideways, is the evaluation weighting which you</p> <p>25 alluded to and we can now see there. So quality is</p> <p style="text-align: center;">Page 24</p>

6 (Pages 21 to 24)

<p>1 subdivided into three categories. Operational delivery</p> <p>2 is given 25 per cent weighting; staff, 15; maintenance,</p> <p>3 10; and commercial is given 50. It is noted:</p> <p>4 "This split was agreed with the procurement board</p> <p>5 and ensures a balance between the costs and quality</p> <p>6 elements of the bids."</p> <p>7 <b>A. Yes.</b></p> <p>8 Q. Do you know, and you might not, is your assessment just</p> <p>9 operational delivery 25 per cent or is your assessment</p> <p>10 the whole of quality, 50 per cent?</p> <p>11 <b>A. My memory about this isn't brilliant, to be honest. But</b></p> <p>12 <b>I would have thought that our bid would have been</b></p> <p>13 <b>reflected in operational delivery at 25 per cent and</b></p> <p>14 <b>staff at 15 per cent. Maintenance is almost, I would</b></p> <p>15 <b>have thought, falling into the category of commercial,</b></p> <p>16 <b>because -- sorry, I'm not sure how much detail you want.</b></p> <p>17 Q. No, that's fine.</p> <p>18 <b>A. I would guess that some companies have an in-house FM</b></p> <p>19 <b>service and some companies outsource their FM.</b></p> <p>20 Q. What's FM?</p> <p>21 <b>A. Sorry, facilities management.</b></p> <p>22 Q. Right.</p> <p>23 <b>A. So I'm guessing there's an element -- you know, that</b></p> <p>24 <b>10 per cent is quite a significant part of the bid.</b></p> <p>25 Q. Fine. What we can say, I think, is that your assessment</p> <p style="text-align: center;">Page 25</p>	<p>1 Home Office. So the text there above the graph:</p> <p>2 "The Brook House tender has delivered significant</p> <p>3 (35 per cent) cost savings compared to the original</p> <p>4 budget and is below the current average cost per bed</p> <p>5 when compared like for like on 2009 projections."</p> <p>6 So were you involved at this stage? Did you attend</p> <p>7 the meeting where this presentation was discussed, for</p> <p>8 example?</p> <p>9 <b>A. I have no recollection of attending it, but if you</b></p> <p>10 <b>wanted an honest answer, I guess I probably did go, but</b></p> <p>11 <b>I just don't remember going.</b></p> <p>12 Q. Do you recall, now that you're seeing it, that the</p> <p>13 tender had come out at a 35 per cent cost saving</p> <p>14 compared to the original budget?</p> <p>15 <b>A. Sorry, could you repeat the question?</b></p> <p>16 Q. Do you now recall that you knew that the tender</p> <p>17 delivered a 35 per cent cost saving?</p> <p>18 <b>A. I had no memory of that at all. I'm not -- to be</b></p> <p>19 <b>honest, I'm not even sure what that means.</b></p> <p>20 Q. Well, I presume what it means is that the original</p> <p>21 budget was X amount and that the bid that was chosen was</p> <p>22 X times 0.65?</p> <p>23 <b>A. All right, okay.</b></p> <p>24 Q. Delivering a 35 per cent cost saving?</p> <p>25 <b>A. Yes.</b></p> <p style="text-align: center;">Page 27</p>
<p>1 fell into the top of the two elements there, so quality</p> <p>2 and commercial are the two elements. Your assessment</p> <p>3 fell within quality. It might have been the whole</p> <p>4 50 per cent, it might have been 40 per cent, it might</p> <p>5 have been the 25 per cent. But, in any event, you</p> <p>6 weren't involved in the commercial assessment of</p> <p>7 the bid?</p> <p>8 <b>A. No, not at all, no.</b></p> <p>9 Q. You say in your statement that you presume that the</p> <p>10 split, so the decision to give the various weightings,</p> <p>11 was determined by the Home Office commercial arm.</p> <p>12 <b>A. Yes.</b></p> <p>13 Q. You say that the split is now much more heavily weighted</p> <p>14 towards operational delivery and welfare.</p> <p>15 <b>A. That's my understanding.</b></p> <p>16 Q. Do you know what the split is now?</p> <p>17 <b>A. I don't, I'm sorry.</b></p> <p>18 Q. You just know that it's more heavily weighted?</p> <p>19 <b>A. I do -- well, that's my understanding, yes.</b></p> <p>20 Q. You say in your statement that G4S won the bid, despite</p> <p>21 not being your top choice, because of the finances of</p> <p>22 their bid, and now, as we have clarified, it's GSL who</p> <p>23 won the contract. If we go to page 47, we can see that</p> <p>24 it appears that all of the bids, or at least certainly</p> <p>25 the one that won, was financially attractive to the</p> <p style="text-align: center;">Page 26</p>	<p>1 Q. That's my assumption. Do you know whether you were</p> <p>2 aware of the budget at the time of your assessment? Did</p> <p>3 you know how much money the Home Office had to spend?</p> <p>4 <b>A. Not at all, no. I'm sure we wouldn't have known, to be</b></p> <p>5 <b>honest.</b></p> <p>6 Q. Do you think that if you had been aware of it, it would</p> <p>7 have been a relevant consideration when you were looking</p> <p>8 at the proposals, particularly given your team's</p> <p>9 comments about an ethos of cutting corners and desperate</p> <p>10 attempts to reduce costs at the expense of welfare? In</p> <p>11 short, would you have known that there was more money</p> <p>12 available for these services? Would that have been</p> <p>13 relevant to know?</p> <p>14 <b>A. I don't think it would, no.</b></p> <p>15 Q. Why not?</p> <p>16 <b>A. Because I think that the bid is marked on what we feel</b></p> <p>17 <b>their operational capability is. As soon as you get</b></p> <p>18 <b>into the bit where you're talking about staff and</b></p> <p>19 <b>costs -- I mean, just, for instance, how many middle</b></p> <p>20 <b>managers they have got, how much they are paying them,</b></p> <p>21 <b>there is all sorts of elements that would be hard to</b></p> <p>22 <b>grasp from an operational perspective. But as to, you</b></p> <p>23 <b>know, whether a bid -- the staffing proposal and all</b></p> <p>24 <b>that was just purely down to money.</b></p> <p>25 Q. So you just have the operational points system in mind</p> <p style="text-align: center;">Page 28</p>

<p>1 and not how much is actually available for these 2 services?</p> <p>3 <b>A. Yes, very much so. I think that's how we were 4 encouraged to look at it.</b></p> <p>5 Q. I appreciate your answer might be that you can't 6 remember, because you're not sure whether you went to 7 this meeting, but the comments that you made in the 8 document, that you said were your way of communicating 9 your concerns to the next level, do you know whether 10 they would have been taken into account when 11 considering -- when considering -- when considering the 12 operational provision in light of the financial 13 projection? So would they have fed into the ultimate 14 decision? Presumably so, because that's the purpose of 15 making the assessment.</p> <p>16 <b>A. I think they would have fed into the decision, but 17 I think also the weighting would have been -- I mean, 18 that's why there's a weighting, isn't there?</b></p> <p>19 Q. Yes.</p> <p>20 <b>A. It's because they want 50 per cent of the marks -- well, 21 in reality, at least 60 per cent of the marks, to be 22 based on a cost element.</b></p> <p>23 Q. Can you help us with, if you can remember, when you made 24 those comments, what audience did you have in mind? Who 25 did you think would be reading them?</p> <p style="text-align: right;">Page 29</p>	<p>1 bid and which, from your operational assessment, came 2 fourth out of six, in fact, ended up running 3 Brook House, so G4S ended up running Brook House.</p> <p>4 Were you, or was anyone on your team, if you recall, 5 contacted to provide a view on your operational 6 assessment of G4S when the transfer of ownership became 7 known?</p> <p>8 <b>A. I have absolutely no memory of that. I would be 9 inclined to say no. But the honest answer would be 10 I have no memory.</b></p> <p>11 Q. Fine. Do you know whether your comment that you made in 12 relation to G4S's operational bid within the assessment 13 that we looked at would have been taken into account 14 when the Home Office became aware that it would, in 15 fact, be G4S rather than GSL running the centre?</p> <p>16 <b>A. I'm really sorry. I can't answer that question. 17 I don't know.</b></p> <p>18 Q. We appreciate it was 15 years ago. So you can help us 19 as far as you can, but if you can't remember, fine.</p> <p>20 <b>A. Absolutely.</b></p> <p>21 Q. You may be able to help us with this. Your team in this 22 case or other similar teams tasked with evaluating 23 similar bids for other IRCs make decisions, as we have 24 seen, based on written proposals about how the centre 25 will be run. Obviously you don't know, in fact, know</p> <p style="text-align: right;">Page 31</p>
<p>1 <b>A. The whole team involved with the -- awarding the bid, 2 I presume.</b></p> <p>3 Q. So the Home Office Border and Immigration Agency 4 Division that dealt with the assessment --</p> <p>5 <b>A. Yes.</b></p> <p>6 Q. -- and made this presentation? Okay. We see at page 52 7 of the same document that the recommendation was to sign 8 a five-year contract with GSL on the fixed variable 9 price option, despite, as we have seen, that they are 10 not the preferred option from your team's perspective 11 and that you'd raised these concerns about staffing and 12 other elements of operational delivery and the long 13 lockdown period, but they were evidently the best option 14 when both commercial and operational aspects were 15 considered, and they provided, from what we have seen, 16 a significant cost saving on the original budget. So 17 GSL duly signed the contract and then G4S, as we know, 18 bought GSL in May 2008, prior to the centre opening. So 19 I don't suggest, unless you tell me otherwise, that you 20 were involved in that stage. I imagine the contract 21 between GSL and the Home Office was handled by the 22 commercial arm of the Home Office, and then, obviously, 23 GSL's procurement -- sorry, G4S's procurement of GSL 24 would have been handled by their respective companies. 25 But the result was that a company that hadn't won the</p> <p style="text-align: right;">Page 30</p>	<p>1 how it is going to play out. You try your best to look 2 at a paper-based delivery, kind of, programme to raise 3 concerns and try to understand how that will translate 4 into real life. Is there any later process, that you 5 are aware of, of reflecting or learning from the 6 evaluation once the centre is up and running? So, say, 7 for example, the evaluation team raised a certain 8 concern and it turned out that it was a significant 9 problem or the evaluation team weren't satisfied by the 10 response but, in fact, it was fine in practice. Is that 11 ever done?</p> <p>12 <b>A. I can't honestly say because I have no memory of that 13 happening. Obviously, you would hope so, wouldn't you? 14 But I can't say that I know of that happening. So I'm 15 sorry, I just can't --</b></p> <p>16 Q. You mention that you were involved in the evaluation of 17 further contracts later, so after this, so Mitie, for 18 example, and with another prison, I think, as well. 19 When you were doing those evaluations, did you ever 20 receive any kind of feedback from previous evaluations 21 as to how things on paper play out in real life?</p> <p>22 <b>A. No. Having said that, when I evaluated the escort 23 contract, it's a very different thing. There is no 24 regime --</b></p> <p>25 Q. Yes.</p> <p style="text-align: right;">Page 32</p>



<p>1 <b>A. -- the healthcare is at the short-term holding</b>  2 <b>facilities. You know, there is no night stay. You</b>  3 <b>know, it is a 24/7 operation.</b>  4 Q. I asked you whether you received such feedback and you'd  5 say you would hope so, wouldn't you? So you think it  6 should be done, if it is not done, with regard to new  7 teams of assessors being able to look at what old teams  8 of assessors have thought and what, in fact, played out?  9 <b>A. Yes, I think that's a perfectly reasonable thing to</b>  10 <b>suggest. Isn't it? I think, you know, in your own</b>  11 <b>life, if you, I don't know, have a painter and decorator</b>  12 <b>in and you thought, "I wish I'd asked them to do this",</b>  13 <b>the next time you did it, you'd kind of ...</b>  14 Q. Yes, raise the same point.  15 <b>A. Absolutely, thank you.</b>  16 Q. No problem. Okay. I want to move on now to increasing  17 capacity. So we have heard about a project in other  18 stages of the inquiry by which 60 extra beds were added  19 to rooms at Brook House. We have heard some witnesses  20 from the inquiry speak about that and its effect on  21 staff and detainees. Can I ask you to turn up, please,  22 &lt;DL0000202&gt;. You have this at tab 12, but it will come  23 up on screen as before. We will look at, firstly, the  24 first page. This is the FBC, which I think stands for  25 "full business case", documenting the increase of that</p> <p style="text-align: center;">Page 33</p>	<p>1 and it would have been nothing to do with your role. Do  2 you remember now being involved or did something change  3 after this document?  4 <b>A. I absolutely don't remember being involved at all, to be</b>  5 <b>quite honest. I just ...</b>  6 Q. Don't remember?  7 <b>A. No, not at all, no.</b>  8 Q. Do you remember whether somebody else attended these  9 meetings from your department, or it might have been you  10 and you just don't remember?  11 <b>A. By the looks of this, it was me. But I have no actual</b>  12 <b>memory of it being me.</b>  13 Q. Fine. We want to turn, then, to page 12. So you were  14 obviously, at this period, the head of DEPMU; is that  15 right?  16 <b>A. Sorry, what date was this?</b>  17 Q. The project is dated December 2015.  18 <b>A. I would have been, yes, yes, absolutely.</b>  19 Q. DEPMU involved the placement of detainees within the  20 estate. Your description of your role at paragraph 6(c)  21 says:  22 "DEPMU control the movement of detainees around the  23 IRC estate, effectively managing the availability of  24 beds."  25 We are talking about beds and capacity, so it is</p> <p style="text-align: center;">Page 35</p>
<p>1 capacity. It is dated December 2015. We see at page 7  2 what the project is trying to achieve. So question 2:  3 "What is the project trying to achieve?"  4 And the answer is:  5 "Additional bed space capacity at Brook (60 beds)  6 and Tinsley House (47 beds)."  7 Can I ask you to turn to page 30, please, on the  8 screen. This is a page headed "Governance". We will  9 see from this page the project has established a project  10 board which generally meets monthly and it is called the  11 Brook House and Tinsley House Increase Capacity Project  12 Board. We see, at the top right there, Alan Gibson is  13 listed as the senior user, and then, just overleaf, at  14 page 31, there is the role of colleagues table, which  15 we -- just at the bottom, and it is continued there:  16 "Senior business user. Effective coordination with  17 operational needs. Alan Gibson represented at the  18 project board by Phil Schoenenberger."  19 And the role is given there, which is:  20 "Definition of the end-product -- compliance with  21 operating standards/rules, other statutory  22 recommendations, effective outcomes."  23 Now, you were asked about this, and you say in your  24 statement, at paragraph 16, that you had nothing to do  25 with the increase in capacity or this policy document</p> <p style="text-align: center;">Page 34</p>	<p>1 something that potentially would have been relevant to  2 your role?  3 <b>A. Yes.</b>  4 Q. Looking at page 12, matters which would affect your  5 department, the bottom of the page are listed benefits  6 and the benefits include -- redacted again -- but  7 savings to the Home Office and government. Facilities,  8 it says, will be enhanced, thereby improving the  9 detainee experience, under the subheading "Improves  10 services" and:  11 "This increased capacity can assist our enforcement  12 activity nationally."  13 Then overleaf, at 13, the risks are rated in red, so  14 they are the most serious ones, I assume. The risks  15 given are:  16 "Addressing healthcare needs.  17 "... the ventilation system at Tinsley.  18 "The potential impact on operations.  19 "Coordination of work across both sites.  20 "Programme slippage."  21 There is no consideration here of the impact on  22 detainees, is there?  23 <b>A. No, clearly that isn't one of the bullet points, no.</b>  24 Q. Do you know why that might not have been part of this  25 consideration?</p> <p style="text-align: center;">Page 36</p>

<p>1 <b>A. I don't know, no. Sorry.</b></p> <p>2 Q. You can take that from the screen now. I won't ask for</p> <p>3 this to be shown, but we have at the tab 43 of your</p> <p>4 bundle -- and it is &lt;INQ000060&gt;, Stephen Shaw's review</p> <p>5 into the welfare and detention of vulnerable persons,</p> <p>6 January 2016. So I believe that you met Mr Shaw in</p> <p>7 preparation for his report because your name is listed</p> <p>8 at page 341 as one of the individuals he met with. He</p> <p>9 says at 3.5, which is page 45 of that document, that</p> <p>10 consideration was being given to installing a third bunk</p> <p>11 which would be positioned above one of the existing</p> <p>12 bunks in each room in order to increase the IRC's</p> <p>13 capacity. And he says:</p> <p>14 "Given the pressure on other facilities, I do not</p> <p>15 believe this should go ahead."</p> <p>16 The consideration which is being given to it appears</p> <p>17 to be consideration by this project board and maybe</p> <p>18 other departments. Do you remember talking to Mr Shaw</p> <p>19 about the increasing capacity at the time of his report,</p> <p>20 2016?</p> <p>21 <b>A. I'm sorry, I don't, no.</b></p> <p>22 Q. Presumably, you read his report?</p> <p>23 <b>A. In part, yes.</b></p> <p>24 Q. Do you remember anyone raising with you or anyone in</p> <p>25 DEPMU that Mr Shaw had said that capacity shouldn't be</p> <p style="text-align: center;">Page 37</p>	<p>1 at tab 24. Again, I don't need to turn it up because</p> <p>2 I'm just going to read a couple of sentences from it.</p> <p>3 It's the assessment of progress and implementing the</p> <p>4 2016 report. So he is looking back at his report from</p> <p>5 two years ago and saying this is what's happened. He</p> <p>6 said at page 32, paragraph 2.75:</p> <p>7 "I was disappointed that the suggestion in my</p> <p>8 previous review that the Home Office should stop the</p> <p>9 planned introduction of the third bunk in some rooms at</p> <p>10 Brook House had been rejected. I do not find conditions</p> <p>11 in those rooms remotely acceptable or decent."</p> <p>12 So he clearly thinks it was a mistake. He said this</p> <p>13 before and he said it again after. The project plan</p> <p>14 document, which I won't ask to be shown again, because</p> <p>15 it's gone from the screen, but it says a lessons learned</p> <p>16 exercise would be conducted post completion, and that</p> <p>17 that would feed into the ongoing development of</p> <p>18 a detention estate strategy and future projects. Do you</p> <p>19 remember being part of a lessons learned discussion or</p> <p>20 exercise after the completion of the introduction of new</p> <p>21 beds?</p> <p>22 <b>A. No, I don't, no. But just -- I'm not sure, did the</b></p> <p>23 <b>third bunk get removed eventually?</b></p> <p>24 Q. Yes. So we know now that the Secretary of State,</p> <p>25 Mr Sajid Javid, at the time, in a speech he made to the</p> <p style="text-align: center;">Page 39</p>
<p>1 increased at Brook House?</p> <p>2 <b>A. No, I don't, but, to be fair, it wouldn't necessarily</b></p> <p>3 <b>have been something that would have been DEPMU's area of</b></p> <p>4 <b>responsibility. We focused very much on moving people</b></p> <p>5 <b>around the United Kingdom and ready for departure, as</b></p> <p>6 <b>opposed to getting involved in the day-to-day running of</b></p> <p>7 <b>an IRC.</b></p> <p>8 Q. The availability of beds across the whole estate would</p> <p>9 have been DEPMU's area, wouldn't it?</p> <p>10 <b>A. Absolutely.</b></p> <p>11 Q. So the introduction of new beds anywhere in the estate</p> <p>12 would have been, to some extent, part of DEPMU's remit?</p> <p>13 <b>A. Part of our remit, absolutely, but not necessarily for</b></p> <p>14 <b>us to be involved in as to whether that was a good idea</b></p> <p>15 <b>or a bad idea.</b></p> <p>16 Q. Then we have -- sorry, who would have made the decision</p> <p>17 on whether that was a good idea or a bad idea? Who</p> <p>18 would you have expected, within the Home Office</p> <p>19 structure, to read and react to Mr Shaw's comments and</p> <p>20 concerns?</p> <p>21 <b>A. The director and the senior management team.</b></p> <p>22 Q. Of Brook House?</p> <p>23 <b>A. No, of the estate.</b></p> <p>24 Q. Of the whole estate. Then we have Stephen Shaw's</p> <p>25 assessment, which is dated July 2018, and you have this</p> <p style="text-align: center;">Page 38</p>	<p>1 Commons in July 2018, announced the removal of the extra</p> <p>2 beds -- I think as the fallout from Stephen Shaw's</p> <p>3 second report, because it came quite soon after.</p> <p>4 Mr Javid said:</p> <p>5 "Fourth and finally, I also want to see a new drive</p> <p>6 on dignity in detention. I want to see an improvement</p> <p>7 to the basic provision available to detainees. The</p> <p>8 practice in some immigration removal centres of having</p> <p>9 three detainees in rooms designed for two will stop</p> <p>10 immediately."</p> <p>11 Do you have any view on whether, with regard to the</p> <p>12 extra bed plan, there was a failure to ensure dignity in</p> <p>13 detention?</p> <p>14 <b>A. Sorry, could you just ...?</b></p> <p>15 Q. Do you have a view on whether, with regard to the plan</p> <p>16 to place extra beds in rooms designed for two, was</p> <p>17 a failure to ensure dignity in detention?</p> <p>18 <b>A. I'm not sure it's a failure to -- around the dignity</b></p> <p>19 <b>issue, but I think -- obviously in hindsight, it's been</b></p> <p>20 <b>agreed to take them out. So I think you could say it</b></p> <p>21 <b>wasn't the best thing to do.</b></p> <p>22 Q. Was it, again, an attempt to reduce cost at the expense</p> <p>23 of welfare, in your view?</p> <p>24 <b>A. I'm not sure it would have reduced costs that much, to</b></p> <p>25 <b>be quite honest. I don't think -- I'm not sure there's</b></p> <p style="text-align: center;">Page 40</p>

<p>1 <b>a direct correlation.</b></p> <p>2 Q. If the Home Office has made a decision that it needs to</p> <p>3 increase capacity, which it seems to have done, the only</p> <p>4 options in order to increase capacity are, presumably,</p> <p>5 build new centres or extend existing centres, renovate</p> <p>6 rooms within existing centres at some cost, or simply</p> <p>7 put a bunk bed in extra rooms, and it is clear that the</p> <p>8 cheapest option out of them is the bunk beds option,</p> <p>9 isn't it?</p> <p>10 <b>A. Yes, I get that. Sorry, I was more thinking about the</b></p> <p>11 <b>actual reducing costs thing, because the actual daily</b></p> <p>12 <b>cost is a small part of the whole cost of an IRC. So an</b></p> <p>13 <b>extra bed wouldn't necessarily save much cost.</b></p> <p>14 Q. It is more the way of introducing extra beds in a cheap</p> <p>15 way as opposed to a building new bedrooms way that I was</p> <p>16 alluding to.</p> <p>17 <b>A. Oh, okay. Yes, I guess there's a correlation there,</b></p> <p>18 <b>I suppose.</b></p> <p>19 Q. Can I ask you next about DEPMU's role about placement in</p> <p>20 the estate. So you said DEPMU was more involved in</p> <p>21 moving people from one centre to another. So I'd like</p> <p>22 to ask about that, if I may. We have a DSO -- we don't</p> <p>23 need to turn it up, but you have it at tab 7 -- which is</p> <p>24 entitled "Consideration of detainee placement in the</p> <p>25 detention estate". You said you're not the author but</p> <p style="text-align: right;">Page 41</p>	<p>1 <b>work on the provision of Subutex and methadone --</b></p> <p>2 Q. "Subutex"?</p> <p>3 <b>A. Oh, sorry, they're --</b></p> <p>4 Q. You mention it in your statement.</p> <p>5 <b>A. -- opiate replacement therapies.</b></p> <p>6 Q. Mmm-hmm.</p> <p>7 <b>A. And, again, I genuinely can't remember which centres</b></p> <p>8 <b>delivered it most effectively and which centres didn't,</b></p> <p>9 <b>but that would be something that you would talk to</b></p> <p>10 <b>healthcare and say, "Mr X has come from the</b></p> <p>11 <b>Prison Service. He's taking 20/40 mil of methadone</b></p> <p>12 <b>a day or Subutex. Can you do that? Can you deliver</b></p> <p>13 <b>that service for him? It's crucial", and they might</b></p> <p>14 <b>say, "Yes, we can, we can arrange that prescription and</b></p> <p>15 <b>sort that out" or, no, they can't, and then Mr X would</b></p> <p>16 <b>have gone to a different centre where they can maintain</b></p> <p>17 <b>that. That's only --</b></p> <p>18 Q. An example?</p> <p>19 <b>A. It could be a low mobility bed. There might be one</b></p> <p>20 <b>available. You know, there's a whole range of things</b></p> <p>21 <b>that, at that point in time, may have been more or less</b></p> <p>22 <b>able to be catered at a particular centre.</b></p> <p>23 Q. So "referral to healthcare", as far as you understand it</p> <p>24 from this document, is calling ahead, potentially, to</p> <p>25 healthcare at the centre that the intention to transfer</p> <p style="text-align: right;">Page 43</p>
<p>1 it's within DEPMU's remit, obviously, isn't it, because</p> <p>2 it is about moving people around?</p> <p>3 <b>A. Mmm-hmm.</b></p> <p>4 Q. Can I ask instead to be shown on screen &lt;DL0000239&gt;,</p> <p>5 page 2. This is a document which sets out IRC criteria</p> <p>6 and it looks like there is one every year that gives</p> <p>7 a kind of overview of the IRCs and their criteria. So</p> <p>8 this is Brook House's from 2017. It gives</p> <p>9 a description. It gives an occupancy. It discusses</p> <p>10 usability. And under the "Allocation" it says:</p> <p>11 "Brook House will take all categories of detainees,</p> <p>12 including where appropriate, MAPPA cases ..."</p> <p>13 It says in the first bullet point:</p> <p>14 "Most cases accepted however complex medical cases</p> <p>15 or where detainees hold limited/no medication the cases</p> <p>16 should be referred to healthcare."</p> <p>17 Can you help us with what does that mean? Does it</p> <p>18 mean they should be referred to healthcare before the</p> <p>19 decision to place them in Brook House or does it mean</p> <p>20 they should be referred to healthcare on arrival in</p> <p>21 Brook House?</p> <p>22 <b>A. My staff would often speak to healthcare direct and say,</b></p> <p>23 <b>"Person X has this issue. Can you manage them?"</b></p> <p>24 <b>I don't know -- I can't remember how this work panned</b></p> <p>25 <b>out, but we did some -- in my earlier role, I did some</b></p> <p style="text-align: right;">Page 42</p>	<p>1 them to and saying, "Here are the issues. Be warned and</p> <p>2 can you deal with it?" Is that what's meant by</p> <p>3 "referral to healthcare" in this document?</p> <p>4 <b>A. Yes, as such. What I don't want to give you the</b></p> <p>5 <b>impression is that it means that every single time. But</b></p> <p>6 <b>I think we did our best to make sure that everybody</b></p> <p>7 <b>going to a centre with any medical need, that had been</b></p> <p>8 <b>discussed with the centre. It may be somebody had</b></p> <p>9 <b>arrived at a centre with an unknown medical need and it</b></p> <p>10 <b>would almost be a reverse process. The healthcare team</b></p> <p>11 <b>would phone us and say, "Look, Mr X has this wrong with</b></p> <p>12 <b>him. We can't really cope with it", and then we might</b></p> <p>13 <b>move him again.</b></p> <p>14 Q. That's the case when, for example, you are in prison and</p> <p>15 looking to be moved to an immigration removal centre.</p> <p>16 The prison knows about your background. The prison can</p> <p>17 ring healthcare or DEPMU can ring healthcare. What</p> <p>18 about when you come from the community with</p> <p>19 a potentially complex mental [sic] condition?</p> <p>20 <b>A. We would act on as much information as we had. I mean,</b></p> <p>21 <b>if the information isn't there -- sorry, I hope I don't</b></p> <p>22 <b>sound facetious, but if the information isn't there,</b></p> <p>23 <b>it's very hard to fully take it on board. But</b></p> <p>24 <b>obviously, we relied on the medical assessment they had</b></p> <p>25 <b>when they arrived at whichever centre they were going</b></p> <p style="text-align: right;">Page 44</p>

<p>1 <b>to.</b></p> <p>2 Q. Is that the rule 34 assessment?</p> <p>3 <b>A. Yes.</b></p> <p>4 Q. So there is a potential filtering out or checking of</p> <p>5 people who have complex healthcare at the level before</p> <p>6 they are moved to Brook House based on the information</p> <p>7 you have, and then there is a second, as you see it,</p> <p>8 assessment or safeguard, which is the rule 35 --</p> <p>9 rule 34, sorry, assessment on arrival. Is that fair?</p> <p>10 <b>A. Yes. I do remember, for instance, with some prisons,</b></p> <p>11 <b>getting the medical information out was more difficult</b></p> <p>12 <b>than others, and occasionally I intervened because</b></p> <p>13 <b>I have a few connections in the Prison Service, so</b></p> <p>14 <b>I could say, "Look, can you help me do this because we</b></p> <p>15 <b>need to know this bit of information", but yeah.</b></p> <p>16 Q. Can I just ask you quickly about the IRC criteria from</p> <p>17 the following year, so January 2018. This is at</p> <p>18 &lt;DL0000240&gt;. If we go to page 2, it is quite a similar</p> <p>19 document, it is just from the following year, but it is</p> <p>20 kind of formatted in the same way, about Brook House.</p> <p>21 If we go to "Allocation", where the bullet points are.</p> <p>22 So Brook House, again, will take all categories of</p> <p>23 detainees. It says, again, "Most cases accepted however</p> <p>24 complex medical cases or where detainees hold limited/no</p> <p>25 medication the cases should be referred". It says:</p> <p style="text-align: center;">Page 45</p>	<p>1 <b>A. -- capacity?</b></p> <p>2 Q. Would that fall within people requiring social care or</p> <p>3 would that fall within the complex medical cases?</p> <p>4 <b>A. I think that would be a complex medical case.</b></p> <p>5 Q. It says at the bottom of the list there:</p> <p>6 "Disabilities to be assessed by healthcare prior to</p> <p>7 arrival."</p> <p>8 It looks like that's new from the last document. Do</p> <p>9 you know whether that would include mental disabilities,</p> <p>10 so things like PTSD, for example?</p> <p>11 <b>A. I don't know. I couldn't comment.</b></p> <p>12 Q. Again, healthcare prior to arrival. It sounds like the</p> <p>13 same sort of process you described where healthcare get</p> <p>14 a call and they have a description given?</p> <p>15 <b>A. Mmm.</b></p> <p>16 Q. So page 12. There is a chart which isn't on the 2017</p> <p>17 document and it gives an overview of all of</p> <p>18 the different centres. And the top one, which is the</p> <p>19 only one I want to look at, is Brook House, and the</p> <p>20 facilities and then a description. So it discusses, for</p> <p>21 example, that Brook House might be a poor layout for</p> <p>22 people with mobility problems, and then, under the</p> <p>23 column just under the title "Official",:</p> <p>24 "Mental health illness."</p> <p>25 Brook House says "Yes, if stable". Do you know what</p> <p style="text-align: center;">Page 47</p>
<p>1 "Cannot accept:</p> <p>2 "Those requiring social care."</p> <p>3 What's the meaning of those requiring social care in</p> <p>4 this document?</p> <p>5 <b>A. Well, social care -- I mean, I can't really say in</b></p> <p>6 <b>relation to this document. My memory is not good, about</b></p> <p>7 <b>what that actually meant, but social care is things like</b></p> <p>8 <b>people with bariatric care, who, if they were in the</b></p> <p>9 <b>community, even local councils would take responsibility</b></p> <p>10 <b>for their care.</b></p> <p>11 Q. So not, kind of, social welfare issues, but you're</p> <p>12 looking at more --</p> <p>13 <b>A. Yes, welfare issues. People who were, you know,</b></p> <p>14 <b>struggling to dress themselves, you know, wash</b></p> <p>15 <b>themselves, that sort of thing. So not directly</b></p> <p>16 <b>requiring medical intervention --</b></p> <p>17 Q. Right.</p> <p>18 <b>A. -- but requiring some assistance.</b></p> <p>19 Q. In things like self-care?</p> <p>20 <b>A. Yes.</b></p> <p>21 Q. What about capacity? People who lacked capacity? Would</p> <p>22 that be classed as somebody requiring social care? An</p> <p>23 adult who lacks capacity, for example?</p> <p>24 <b>A. No, that's a health issue, isn't it --</b></p> <p>25 Q. It might be a health issue, yes.</p> <p style="text-align: center;">Page 46</p>	<p>1 the meaning of "Yes, if stable" is here?</p> <p>2 <b>A. No, sorry, I don't, no.</b></p> <p>3 Q. Do you know who would judge whether somebody was stable</p> <p>4 for the purposes of Brook House being appropriate place</p> <p>5 to transfer them?</p> <p>6 <b>A. I'm guessing. It's the sort of thing we would rely on</b></p> <p>7 <b>the initial medical assessment and any assessment of</b></p> <p>8 <b>records coming in from the community or from a prison.</b></p> <p>9 Q. So the initial medical assessment being the one after</p> <p>10 they have arrived, so the rule 34 within 24 hours, and</p> <p>11 then a combination of that and the records that come in?</p> <p>12 <b>A. Yes.</b></p> <p>13 Q. Thank you. We can take that down now, thank you. We</p> <p>14 are going to rewind a little in time now,</p> <p>15 Mr Schoenenberger, and talk about rule 35. Now, I don't</p> <p>16 need to bring it up on screen, but you have been</p> <p>17 provided with DSO1/2007 which is called allegation of</p> <p>18 torture forms, and I see that you are listed there as</p> <p>19 the contact. Do you remember whether you developed that</p> <p>20 DSO, whether you wrote the DSO?</p> <p>21 <b>A. I remember I think I added bits to it. I did some</b></p> <p>22 <b>initial work on how rule 35 forms were working around</b></p> <p>23 <b>the estate.</b></p> <p>24 Q. We have seen previously in the inquiry a 2016 DSO that</p> <p>25 came in, that was very detailed about rule 35, which</p> <p style="text-align: center;">Page 48</p>

<p>1 I assume overtook previous ones. You were asked about</p> <p>2 that and you confirmed that you didn't have a role in</p> <p>3 the development of the 2016 DSO; is that right?</p> <p>4 <b>A. That would have been right, yes.</b></p> <p>5 Q. At the time of the former -- so around that time,</p> <p>6 2009 -- you mention that you were involved in rule 35,</p> <p>7 so I want to ask about that involvement. Did it come</p> <p>8 under your SEO role that you discuss at paragraph 6,</p> <p>9 where you looked at HMIP and ACDT? How did rule 35 play</p> <p>10 into that role?</p> <p>11 <b>A. I think concerns were raised from various sources, so</b></p> <p>12 <b>I was just asked to go and have a look at how it worked,</b></p> <p>13 <b>the application of it. I remember discussing it with</b></p> <p>14 <b>asylum colleagues who -- you know, bearing in mind</b></p> <p>15 <b>Detention Services, you know, given their name, detain</b></p> <p>16 <b>people, but case owners, you know, own the beds, and how</b></p> <p>17 <b>they use them is relevant. So I did some initial work</b></p> <p>18 <b>on, you know, if you find out that -- I keep saying</b></p> <p>19 <b>Mr X, but you get the point. You know, if Mr X makes an</b></p> <p>20 <b>allegation under rule 35(2), part 2 --</b></p> <p>21 Q. Torture?</p> <p>22 <b>A. Yes.</b></p> <p>23 Q. (3). Rule 35(3).</p> <p>24 <b>A. Sorry, yes, that consideration would be given to his</b></p> <p>25 <b>case and how that allegation affected his case and his</b></p> <p style="text-align: center;">Page 49</p>	<p>1 "... it is their responsibility to identify [when]</p> <p>2 rule 35 is not being implemented and to correct it."</p> <p>3 It says, in essence, UKBA retains that</p> <p>4 responsibility even when health services have been</p> <p>5 subcontracted.</p> <p>6 Under the heading "First UKBA audit", which I think</p> <p>7 is a bit further down on that same page, the report</p> <p>8 discusses an audit of rule 35 which followed a judgment</p> <p>9 about the application of rule 34 and rule 35. I don't</p> <p>10 think that you were involved in the first UKBA audit.</p> <p>11 Your name is not mentioned here. Do you recall whether</p> <p>12 you are involved in this? You are involved in the</p> <p>13 second one?</p> <p>14 <b>A. I remember being involved at one point. I honestly</b></p> <p>15 <b>wouldn't want to say it was the first or second one, to</b></p> <p>16 <b>be quite honest.</b></p> <p>17 Q. Let's look at page 258 overleaf. It says the results of</p> <p>18 the first audit were never published. Indeed, it states</p> <p>19 the results were lost. Under the heading "Second UKBA</p> <p>20 audit", you were confirmed, you see your name there on</p> <p>21 the second line down, to be overseeing an audit of</p> <p>22 rule 35 in October 2009. So you say you remember being</p> <p>23 involved in one, but you don't remember which one it</p> <p>24 was, and you have explained generally why that was part</p> <p>25 of your remit. It also states that the results of that</p> <p style="text-align: center;">Page 51</p>
<p>1 <b>continued detention.</b></p> <p>2 Q. We have heard from Theresa Schleicher, who works for</p> <p>3 Medical Justice. She gave evidence to the inquiry on</p> <p>4 Monday, 14 March. She discussed rule 35 audits, so</p> <p>5 a process by which the Home Office looks at the rule 35s</p> <p>6 it's received and the outcomes of those. It's covered</p> <p>7 in a report which you have in your tab 6. If we could</p> <p>8 just have one page of that on the screen. It's</p> <p>9 &lt;BHM000043&gt;. This is a Medical Justice publication or</p> <p>10 article called "The Second Torture". I will quote from</p> <p>11 the internal page of that report, but if we have 257 on</p> <p>12 the screen, please. It is a very long document so it is</p> <p>13 probably going to take a while to load. It is 257.</p> <p>14 Subheading 9. So it is noted there -- and I won't read</p> <p>15 the whole thing out, but it's noted:</p> <p>16 "... quality control for implementing</p> <p>17 rule 35(3) ..."</p> <p>18 So that's the one that involves allegation of</p> <p>19 torture, as you have noted:</p> <p>20 "... was lacking in most IRCs."</p> <p>21 Quoting HMIP, it says in this document that there</p> <p>22 was a lack of caseworker wrongs. It said:</p> <p>23 "... UKBA [was] responsible for monitoring</p> <p>24 subcontracted health services ..."</p> <p>25 And that:</p> <p style="text-align: center;">Page 50</p>	<p>1 audit were published after a Freedom of Information</p> <p>2 request which included that -- and the results are at</p> <p>3 the top of the page on the second column -- 65 per cent</p> <p>4 of cases failed to receive a response within 48 hours</p> <p>5 time limit; one third got no response at all; and</p> <p>6 9 per cent of the cases resulted in release. However,</p> <p>7 in these cases, the reason for release was not detailed.</p> <p>8 It says, at the first paragraph of text that's picked up</p> <p>9 after those boxes, that the data presented didn't</p> <p>10 include any reasons, so the 9 per cent release figure</p> <p>11 was supplemented by the statement that release may not</p> <p>12 have been on the basis of torture. There was no</p> <p>13 analysis of the content of the reports or the quality of</p> <p>14 the detention review or the assessment of medical</p> <p>15 evidence, and it says that, without this information,</p> <p>16 the audit is essentially redundant. Do you accept those</p> <p>17 limitations on the data that was published, for example,</p> <p>18 that it didn't give the reason for release?</p> <p>19 <b>A. I suppose, being sensible, the conclusion where, "The</b></p> <p>20 <b>exact reasons for release were not examined. It is</b></p> <p>21 <b>therefore possible that none of the individuals were</b></p> <p>22 <b>released through the rule 35 process", you could exactly</b></p> <p>23 <b>say the opposite, couldn't you?</b></p> <p>24 Q. How do you mean?</p> <p>25 <b>A. You could say the reason for release was a rule 35</b></p> <p style="text-align: center;">Page 52</p>

<p>1 <b>report. It's just not possible to find that out.</b></p> <p>2 Q. It's not possible to find out, yes.</p> <p>3 <b>A. But I was asked to produce an audit, which I did. I was</b></p> <p>4 <b>fairly open about the results. I think, you know,</b></p> <p>5 <b>trying to dig into the data to find the reason was</b></p> <p>6 <b>difficult.</b></p> <p>7 Q. Do you know whether -- and you might not know this</p> <p>8 because it might not have been a stage you were involved</p> <p>9 in. Did your audit look at the reasons for release but</p> <p>10 they weren't published or did your audit not look at the</p> <p>11 reasons for release and simply look at the numbers of</p> <p>12 releases?</p> <p>13 <b>A. I genuinely don't remember, but I do know interrogating</b></p> <p>14 <b>CID at the time, because it is quite an old programme,</b></p> <p>15 <b>is very, very difficult.</b></p> <p>16 Q. I see. So CID is the electronic programme by which</p> <p>17 detention records are recorded?</p> <p>18 <b>A. The "[something] immigration database".</b></p> <p>19 Q. Don't worry. We will see GCID as well. We will come to</p> <p>20 that a bit later. So this is February 2011 when the</p> <p>21 data were published. I want to ask next about the</p> <p>22 stakeholder meetings that occurred around the same</p> <p>23 period. You can take this down now, thank you, and if</p> <p>24 you bring up instead, please, Zaynab, &lt;BHM000041&gt;. If</p> <p>25 you just leave this up for now. This is the statement</p> <p style="text-align: center;">Page 53</p>	<p>1 <b>allegation, but I do -- it's not in my nature to be</b></p> <p>2 <b>dismissive of serious issues, and one concern I have</b></p> <p>3 <b>over this is I know -- I can't remember when -- that at</b></p> <p>4 <b>some point the detention user group was disbanded</b></p> <p>5 <b>because it was almost impossible to have meaningful</b></p> <p>6 <b>collaborative discussions with the people present</b></p> <p>7 <b>because of a determined, sort of, almost aggressive</b></p> <p>8 <b>stance against us.</b></p> <p>9 Q. It was disbanded in 2013 and replaced by The National</p> <p>10 Asylum Stakeholder Forum Detention Subgroup. Were you</p> <p>11 part of the NASF?</p> <p>12 <b>A. No, I don't recall ever going to one. I may have gone</b></p> <p>13 <b>to one for Alan Gibson at one point, but I have no</b></p> <p>14 <b>actual recollection of it.</b></p> <p>15 Q. Ms Ginn says on to say, at 61, that Mr Barrett accepted</p> <p>16 that there was a disconnect between the medical</p> <p>17 professionals completing a rule 35 and those at the</p> <p>18 Home Office when assessing whether it would lead to</p> <p>19 release. Do you recognise anything about that sort of</p> <p>20 disconnect?</p> <p>21 <b>A. Not specifically. But I do think it's a kind of thing</b></p> <p>22 <b>that I found when I did the audit and talked to asylum</b></p> <p>23 <b>caseworkers. Yeah, there was a disconnect, yes.</b></p> <p>24 Q. What sort of disconnect?</p> <p>25 <b>A. Well, I think because it's -- you've got some person in</b></p> <p style="text-align: center;">Page 55</p>
<p>1 of -- an excerpt from the statement of Ms Emma Ginn of</p> <p>2 Medical Justice. If you turn to page 21. You have been</p> <p>3 given this, so you have this at your tab 5. It is just</p> <p>4 this excerpt and a couple of paragraphs later I want to</p> <p>5 ask you about. She says that, "Over the years,</p> <p>6 Medical Justice has ... been involved in stakeholder</p> <p>7 forums convened by the Home Office, including between</p> <p>8 2008 and 2013 the Detention User Group's ... medical</p> <p>9 subgroup". She says that, "This was convened by</p> <p>10 Simon Barrett and also attended by Phil Schoenenberger".</p> <p>11 She says, "many of the concerns raised", concerns about</p> <p>12 the rule 35 process, "were batted off or simply ignored.</p> <p>13 Their attitude at times was even dismissive". She said,</p> <p>14 "When we asked ... [about] Home Office statistics ...</p> <p>15 they were not collated. There appeared to be no real</p> <p>16 interest in monitoring what was happening in IRCs even</p> <p>17 in respect of self-harm and deaths. It was said that</p> <p>18 the British public didn't want Home Office officials</p> <p>19 spending their time collating statistics ..."</p> <p>20 Do you accept that the attitude of yourself and</p> <p>21 Mr Barrett during these meetings was dismissive?</p> <p>22 <b>A. No, I absolutely don't.</b></p> <p>23 Q. Do you accept that there was no real interest in</p> <p>24 monitoring what was happening in IRCs?</p> <p>25 <b>A. I can't say that I specifically remember that</b></p> <p style="text-align: center;">Page 54</p>	<p>1 <b>an IRC looking at somebody, hearing something, reporting</b></p> <p>2 <b>it, it going on to CID, et cetera, et cetera, and, in</b></p> <p>3 <b>between all of that, a disconnect between all the</b></p> <p>4 <b>processes tying up together.</b></p> <p>5 Q. What did that disconnect lead to?</p> <p>6 <b>A. Well, I think my audit showed we hadn't released lots of</b></p> <p>7 <b>people, but I think, without knowing all the individual</b></p> <p>8 <b>details again and everything, I couldn't really comment</b></p> <p>9 <b>on the nature of the disconnect.</b></p> <p>10 Q. Might it be that, while medical professionals or staff</p> <p>11 at the centre felt that somebody should be released, the</p> <p>12 decision was that they shouldn't be released? Is that,</p> <p>13 in essence, the disconnect?</p> <p>14 <b>A. It could be, but there could be a lot more serious</b></p> <p>15 <b>issues around that. I mean, I can only speculate here</b></p> <p>16 <b>and I don't really think you want me to speculate. But</b></p> <p>17 <b>it could be that somebody's -- the nature of their</b></p> <p>18 <b>offence, if they were an FNO, could be that their</b></p> <p>19 <b>release into the community poses as strong a risk to the</b></p> <p>20 <b>community as addressing their torture allegation, for</b></p> <p>21 <b>instance.</b></p> <p>22 Q. So countervailing factors considered by, maybe, people</p> <p>23 at the centre to be in favour of release but considered</p> <p>24 by the caseworkers not to be so?</p> <p>25 <b>A. Please be clear about this, I can't say that happened</b></p> <p style="text-align: center;">Page 56</p>

<p>1 <b>but I would imagine, in the case of somebody with a very</b></p> <p>2 <b>serious criminal past, that, for instance, wouldn't have</b></p> <p>3 <b>been released if it was a criminal case.</b></p> <p>4 Q. Ms Schleicher, as I mentioned, gave evidence to the</p> <p>5 inquiry and she discussed attending these meetings. She</p> <p>6 said -- and you have her evidence behind tab 20; again,</p> <p>7 I won't pick it up, but the transcript from the hearing</p> <p>8 was the transcript from 14 March -- that she attended</p> <p>9 the DUGs, she said that Medical Justice repeatedly</p> <p>10 raised concerns about rule 35 and the quality of reports</p> <p>11 and also the quality of the subsequent detention</p> <p>12 reviews. She said that Medical Justice wrote papers --</p> <p>13 so I just mentioned one, "The Second Torture" -- and</p> <p>14 also brought examples of failures in the rule 35 system</p> <p>15 and she said, when asked by counsel to the inquiry what</p> <p>16 the Home Office response was, that:</p> <p>17 "Answer: When we bring examples, often we get told</p> <p>18 it's not possible to comment on things like that in such</p> <p>19 detail and that [they] are just individual cases and it</p> <p>20 wouldn't be appropriate to discuss them. When we bring</p> <p>21 general concerns, we are often told that these are too</p> <p>22 general and that specific examples are required. At one</p> <p>23 point, there was an admission that there had been</p> <p>24 a disconnect between the doctor writing the report and</p> <p>25 the Home Office receiving them. But then no action was</p> <p style="text-align: center;">Page 57</p>	<p>1 a possibility that having these three forms may deter</p> <p>2 doctors from filling them in.</p> <p>3 "Question: ...</p> <p>4 "Answer: Which seems to have happened. We were</p> <p>5 also worried that the questions that were being asked</p> <p>6 may mislead the doctors into thinking [that] the</p> <p>7 thresholds were higher than they actually were, which,</p> <p>8 again, is something that appears to have happened."</p> <p>9 She said:</p> <p>10 "Answer: ... we saw some of the training slides,</p> <p>11 [although] not all of them. We were concerned about the</p> <p>12 content of that and we recommended audit and monitoring</p> <p>13 and that wasn't put in place."</p> <p>14 Do you remember whether you considered at the time</p> <p>15 that these were legitimate concerns?</p> <p>16 <b>A. I have no memory of that, no.</b></p> <p>17 Q. Let me put it this way, then: if these concerns had been</p> <p>18 raised in the meeting -- for example, that people aren't</p> <p>19 going to fill in three separate forms or that the</p> <p>20 questions asked on the forms might improperly lead</p> <p>21 people to misunderstand the rules -- would they have</p> <p>22 been considered legitimate concerns?</p> <p>23 <b>A. I think they would have been, and I think we used a lot</b></p> <p>24 <b>of medical advice from our doctors when introducing</b></p> <p>25 <b>these sort of systems. So I can't evidence this or say</b></p> <p style="text-align: center;">Page 59</p>
<p>1 taken to address that [point]."</p> <p>2 Does that sound familiar, of being told that general</p> <p>3 concerns were too general but specific concerns couldn't</p> <p>4 be addressed specifically?</p> <p>5 <b>A. No, I genuinely have no memory of that. I think, if my</b></p> <p>6 <b>memory serves me rightly, some time after I did my</b></p> <p>7 <b>examination of the process, the process was tightened up</b></p> <p>8 <b>considerably.</b></p> <p>9 Q. Yes.</p> <p>10 <b>A. And there was a recording of when a rule 35 report went</b></p> <p>11 <b>to a case owner, when they responded. So we were</b></p> <p>12 <b>building up a good picture of all the information. So</b></p> <p>13 <b>I don't think that reflects either a dismissive approach</b></p> <p>14 <b>or an uncaring approach. I think it was being</b></p> <p>15 <b>addressed. I genuinely can't remember the outcome of</b></p> <p>16 <b>all of that or whether there was more releases under</b></p> <p>17 <b>rule 35. But I do think it shows that the Home Office</b></p> <p>18 <b>took this matter very seriously.</b></p> <p>19 Q. Ms Schleicher, in her evidence, then discussed changes</p> <p>20 that were made to the form. So, previously, there was</p> <p>21 one form with three tick boxes to say which element of</p> <p>22 the rule it fell under and this was replaced with three</p> <p>23 separate forms for each of the limbs of rule 35. On</p> <p>24 this, she said:</p> <p>25 "Answer: ... We were worried there was</p> <p style="text-align: center;">Page 58</p>	<p>1 <b>that I have a firm recollection of this, but my -- I'm</b></p> <p>2 <b>fairly confident that we would have discussed the forms</b></p> <p>3 <b>with some of our doctors before we issued them.</b></p> <p>4 Q. Which doctors are they? People who work for the</p> <p>5 Home Office and give clinical advice?</p> <p>6 <b>A. Yes, indeed, yes. But we had, for instance, at the</b></p> <p>7 <b>time, Dover, Haslar and Lindholme or -- and/or</b></p> <p>8 <b>the Verne, which would have had prison medical officers</b></p> <p>9 <b>in. Certainly some of those prison doctors would have</b></p> <p>10 <b>had practices in the community as well. So they were</b></p> <p>11 <b>established community doctors. And in some areas they</b></p> <p>12 <b>would have had a good understanding of issues around</b></p> <p>13 <b>immigration and healthcare.</b></p> <p>14 Q. Do you recall going to those doctors generally to seek</p> <p>15 information and advice on stuff like changes to the</p> <p>16 rule 35 forms process (overspeaking)?</p> <p>17 <b>A. I don't know about the rule 35 form but I can remember</b></p> <p>18 <b>having discussions with them about a whole host of</b></p> <p>19 <b>issues. You know, everything from scabies to</b></p> <p>20 <b>chickenpox, you know, it was quite common to have -- and</b></p> <p>21 <b>we did healthcare audits using one of the doctors and</b></p> <p>22 <b>I can remember discussing that with them and spending</b></p> <p>23 <b>time at a centre where they were auditing. I think --</b></p> <p>24 <b>I am concerned that people are using words like</b></p> <p>25 <b>"dismissive of genuine concerns" because I really don't</b></p> <p style="text-align: center;">Page 60</p>

<p>1 <b>think that reflects the Home Office that I've been part</b></p> <p>2 <b>of.</b></p> <p>3 Q. As I mentioned the changes to the rule 35 forms, you may</p> <p>4 have been following the evidence in the hearing which</p> <p>5 covers the period where there were three separate forms</p> <p>6 in existence, and we have certainly heard during the</p> <p>7 hearing that rule 35(1) was rarely used, rule 35(2) was</p> <p>8 effectively not used at all during the period that we</p> <p>9 are looking at --</p> <p>10 <b>A. Sorry --</b></p> <p>11 Q. Rule 35 --</p> <p>12 <b>A. Sorry, (1) is people whose health is injurious to</b></p> <p>13 <b>further detention?</b></p> <p>14 Q. Yes, correct, and 35(2) is a concern about suicidal</p> <p>15 ideation or intent. So rule 35(1) forms were rarely</p> <p>16 used. Rule 35(2) forms were effectively not used at all</p> <p>17 during the period we are looking at, or years before and</p> <p>18 after. And at least one of the doctors we heard from</p> <p>19 believed that the questions on the form did, in fact,</p> <p>20 qualify and change the requirements of the rules. And</p> <p>21 others at Brook House within healthcare, even people</p> <p>22 still working there today, told the inquiry in general</p> <p>23 terms that rule 35 was not properly understood or</p> <p>24 applied. So with the benefit of hindsight, perhaps, you</p> <p>25 would, and you have already accepted, agree that the</p> <p style="text-align: center;">Page 61</p>	<p>1 <b>A. Oh, right, okay.</b></p> <p>2 Q. I have a couple more questions on the rule 35 issue, and</p> <p>3 then maybe we will take a break after then, because it</p> <p>4 will be a natural place to stop, and obviously we</p> <p>5 started a bit late.</p> <p>6 Returning to the statement of Ms Ginn, which is</p> <p>7 still on the screen here, page 22, paragraph 63.</p> <p>8 Ms Ginn refers to two article 3 decisions which are</p> <p>9 S and BA. They both relate to men detained at</p> <p>10 Harmondsworth at various points. These decisions came</p> <p>11 to be summarised in Mr Shaw's 2016 report. I won't</p> <p>12 bring it up, but, for the note, they are summarised from</p> <p>13 page 276 onwards. Where I summarise them now, for the</p> <p>14 purpose of giving a background, I will either be quoting</p> <p>15 or paraphrasing the summary that's given in the Shaw</p> <p>16 report.</p> <p>17 So the case of S involved a detainee who was</p> <p>18 detained despite a wealth of medical evidence that he</p> <p>19 had PTSD and other illnesses, and despite the fact that</p> <p>20 continued detention would result in a deterioration.</p> <p>21 A rule 35 report was submitted to the Home Office, but</p> <p>22 the court found that the subsequent decision to maintain</p> <p>23 detention didn't properly address the effect of</p> <p>24 detention on him or properly weigh up the countervailing</p> <p>25 factors. There were subsequent decisions to maintain</p> <p style="text-align: center;">Page 63</p>
<p>1 concerns that were raised about those issues at the DUG</p> <p>2 meetings were well founded?</p> <p>3 <b>A. I think there's concerns that need to be examined. I'm</b></p> <p>4 <b>not sure I agree they were well founded.</b></p> <p>5 Q. Well, what we found -- what we have seen in the inquiry</p> <p>6 is that nobody used rule 35(2) forms at all. No</p> <p>7 rule 35(2) reports were made at all during the relevant</p> <p>8 period --</p> <p>9 <b>A. Okay.</b></p> <p>10 Q. -- or from 2016 to 2021, if I remember correctly, and we</p> <p>11 also heard evidence from a clinician, Dr Chaudhary, who</p> <p>12 believed that the questions that were asked on the form</p> <p>13 glossed or changed the requirements of the rule. So he</p> <p>14 believed that the questions were part of the rule,</p> <p>15 which, of course, they are not. They are questions on</p> <p>16 the form. So it is true, then, isn't it, that the</p> <p>17 concerns that were raised by Medical Justice, if they</p> <p>18 were raised at the time, bore out and caused problems at</p> <p>19 Brook House?</p> <p>20 <b>A. It was -- as you know from my witness statement, that</b></p> <p>21 <b>was at a time when I was at DEPMU and I can't comment on</b></p> <p>22 <b>that, to be quite honest.</b></p> <p>23 Q. You did attend the DUG meetings, though?</p> <p>24 <b>A. In 2016, I'm not sure I did.</b></p> <p>25 Q. No, but the concerns were raised before 2016.</p> <p style="text-align: center;">Page 62</p>	<p>1 his detention, which suffered, the court found, from the</p> <p>2 same defects and the result of all that was that the</p> <p>3 court found that S's detention was unlawful and,</p> <p>4 moreover, that it amounted to a breach of article 3.</p> <p>5 BA's case is summarised also in the Shaw report from</p> <p>6 278 onwards. He was detained under immigration powers</p> <p>7 following release from prison where his mental illness</p> <p>8 had been recorded and was known about. He was diagnosed</p> <p>9 while in detention with stress-induced psychosis and</p> <p>10 depression. He was admitted twice to hospital, he was</p> <p>11 assessed as unfit for detention and a rule 35 was sent.</p> <p>12 Two days after that rule 35, a doctor noted that</p> <p>13 continued detention posed a real risk he could die. He</p> <p>14 was refusing food and drink and, given that he was not</p> <p>15 going to be released, an end-of-life plan was made.</p> <p>16 Shaw's summary refers to eight reviews maintaining his</p> <p>17 detention. As with S, the court found that detention of</p> <p>18 this man in these circumstances was unlawful and in</p> <p>19 breach of article 3.</p> <p>20 As I have said, Ms Ginn mentions these two cases at</p> <p>21 paragraph 63 and says they were discussed at the</p> <p>22 meetings and that there was an action point for</p> <p>23 Mr Barrett to check the details of these cases and to</p> <p>24 confirm how lessons learned are disseminated to the UKBA</p> <p>25 staff.</p> <p style="text-align: center;">Page 64</p>



<p>1 The statement goes on to say that, at the next</p> <p>2 meeting, Mr Barrett said he had not had time to read the</p> <p>3 judgments and didn't know if any lessons needed</p> <p>4 learning, and then, after that, there was no follow-up.</p> <p>5 Now, the cases have been litigated and they are not</p> <p>6 about Brook House and I'm not going to go behind or ask</p> <p>7 you about the decisions themselves in the cases,</p> <p>8 obviously, which are a matter for the judges. But what</p> <p>9 I do want to ask you is whether you were aware of these</p> <p>10 two particular judgments which had found article 3</p> <p>11 breaches in the context of people detained in</p> <p>12 immigration centres with health concerns and rule 35</p> <p>13 reports?</p> <p>14 <b>A. I have no memory of them at all. I'm only aware of them</b></p> <p>15 <b>now because they are in my evidence pack.</b></p> <p>16 Q. Your awareness, I would suggest, is even more relevant</p> <p>17 because -- than the question of whether you are aware,</p> <p>18 because you are mentioned in the case of BA. So the</p> <p>19 judge referred to you by name. You weren't a detention</p> <p>20 decision maker, I understand it. You were described in</p> <p>21 the judgment as assistant director of Detention Services</p> <p>22 and you are noted in the judgment to have, in</p> <p>23 correspondence found out about BA's case, expressed</p> <p>24 surprise that BA was still detained and, in the judge's</p> <p>25 words, chillingly to have stated that there would be</p> <p style="text-align: center;">Page 65</p>	<p>1 bureaucratic inertia and lack of communication and</p> <p>2 coordination between those who were responsible for his</p> <p>3 welfare. The documents disclosed by the</p> <p>4 Secretary of State have also shown on one occasion</p> <p>5 a callous indifference to BA's plight."</p> <p>6 So those involved in decision making need to know</p> <p>7 that this is how their actions have been independently</p> <p>8 assessed by a judge, don't they? Would you agree with</p> <p>9 that?</p> <p>10 <b>A. Sorry, what -- can you repeat the question?</b></p> <p>11 Q. The judgment stated that, while nobody deliberately set</p> <p>12 out to cause harm or distress to this individual, BA,</p> <p>13 that there had been a combination of bureaucratic</p> <p>14 inertia and a lack of communication and coordination</p> <p>15 between those who were responsible for his welfare. And</p> <p>16 says that the documents disclosed by the</p> <p>17 Secretary of State have also shown, on one occasion,</p> <p>18 a callous indifference to BA's plight. So the judge is</p> <p>19 saying there is a combination of bureaucratic inertia,</p> <p>20 lack of communication and coordination, and that this</p> <p>21 all came to result in an article 3 breach.</p> <p>22 Would you agree that the people who were involved in</p> <p>23 the decision making, and who the judge has described in</p> <p>24 this way, should be told that that's how a judge has</p> <p>25 described their actions?</p> <p style="text-align: center;">Page 67</p>
<p>1 significant press interest if he does die and to have</p> <p>2 said that healthcare records and details of his care</p> <p>3 would need to be in order so that they can be made</p> <p>4 available to the PPO if he does die.</p> <p>5 So even if the Home Office aren't informed in</p> <p>6 general terms about judgments that involve article 3</p> <p>7 breaches, which is seemingly what Mr Barret suggested to</p> <p>8 Ms Ginn about S and HA, is this any different if</p> <p>9 judgments relate to cases that individuals are</p> <p>10 specifically involved in or named in? So were you told</p> <p>11 about the judgment that named you at the time?</p> <p>12 <b>A. No, I wasn't, no.</b></p> <p>13 Q. Was there any kind of follow-up to the decisions that</p> <p>14 were made by anyone in your department or by you in this</p> <p>15 case at all? Presumably not, if you weren't told about</p> <p>16 the judgment.</p> <p>17 <b>A. No, but obviously I was at DEPMU at the time and</b></p> <p>18 <b>maintaining detention wasn't part of my remit.</b></p> <p>19 Q. So you were mentioned, though, in the judgment, and you</p> <p>20 say that nobody kind of informed you of the fact that</p> <p>21 you'd been mentioned?</p> <p>22 <b>A. No.</b></p> <p>23 Q. The judgment says that nobody set out deliberately to</p> <p>24 cause harm or distress to BA, but states:</p> <p>25 "I do consider that there has been a combination of</p> <p style="text-align: center;">Page 66</p>	<p>1 <b>A. Sorry, I'm not quite sure I grasp the question.</b></p> <p>2 Q. Should a judge [sic] be told if a judgment criticises</p> <p>3 the department?</p> <p>4 <b>A. "Should a judge be told"?</b></p> <p>5 Q. Should a department be told if a judgment criticises the</p> <p>6 department?</p> <p>7 <b>A. I presume so.</b></p> <p>8 Q. Because, if they are not, how can they learn from the</p> <p>9 mistakes that the judge has identified?</p> <p>10 <b>A. I'm not really sure I'm quite grasping what you are</b></p> <p>11 <b>trying to ask. I only know this exists because I have</b></p> <p>12 <b>seen it. It is on the internet.</b></p> <p>13 Q. Yes.</p> <p>14 <b>A. But if the question is, was I ever told officially that</b></p> <p>15 <b>this had happened? No, I've never been told officially</b></p> <p>16 <b>that happened.</b></p> <p>17 Q. Fine, we take that -- and I'm sorry, it is probably the</p> <p>18 way I'm asking the question. But if people like you and</p> <p>19 the decision makers in this case are assessed in this</p> <p>20 way by a judge, do you think that you should be told</p> <p>21 that that's happened?</p> <p>22 <b>A. I -- yeah, I don't know -- as I have just said, yes,</b></p> <p>23 <b>they should. But the only thing I don't quite follow</b></p> <p>24 <b>with this thing is, because I had no involvement in</b></p> <p>25 <b>whether the chap was detained or not --</b></p> <p style="text-align: center;">Page 68</p>

<p>1 Q. Yes.</p> <p>2 <b>A. -- I'm not absolutely sure where that line comes from.</b></p> <p>3 <b>I'm not sure how my involvement got reported as being</b></p> <p>4 <b>callous or otherwise, and God forbid it was callous,</b></p> <p>5 <b>because I don't quite understand how my involvement --</b></p> <p>6 <b>I mean, I would have had no part in maintaining or not</b></p> <p>7 <b>maintaining his detention as head of DEPMU.</b></p> <p>8 Q. As I said, Mr Schoenenberger, you weren't one of</p> <p>9 the detention decision makers. I want to be careful to</p> <p>10 explain that we are not going to look at the decision,</p> <p>11 and the judge's determination is the judge's</p> <p>12 determination, so please don't worry about the decisions</p> <p>13 that were made. The simple point, I suppose, is, you're</p> <p>14 named in a judgment. The Home Office decision maker's</p> <p>15 decisions are said to be unlawful and in breach of</p> <p>16 article 3. People should be told if that's how a judge</p> <p>17 assesses their behaviour, shouldn't they?</p> <p>18 <b>A. Yes -- no, sorry, sorry, I thought I'd already answered</b></p> <p>19 <b>that affirmatively, yes. Yes, somebody should have told</b></p> <p>20 <b>me that was the case. I am genuinely struggling to</b></p> <p>21 <b>understand how my name got involved in that, to be quite</b></p> <p>22 <b>honest.</b></p> <p>23 Q. Isn't this -- the judge's, for example, indication that</p> <p>24 there is bureaucratic inertia, a lack of communication,</p> <p>25 et cetera -- exactly the sort of thing that should be</p> <p style="text-align: center;">Page 69</p>	<p>1 decided to maintain detention? Would they be told</p> <p>2 there's a judgment that says they should have been</p> <p>3 released?</p> <p>4 <b>A. I don't know if there was or not. It would strike me as</b></p> <p>5 <b>being pertinent to the --</b></p> <p>6 Q. I want to ask about two other cases before we have</p> <p>7 a break and we move on from article 3. You have them at</p> <p>8 tabs 16 and 17. They are both decided in 2012, so the</p> <p>9 year after the judgments we just discussed. The first</p> <p>10 is HA. I don't need it on the screen, but the full</p> <p>11 judgment we have at &lt;DL0000178&gt;, just for the note.</p> <p>12 This is a detainee who was first detained in Brook House</p> <p>13 then at Harmondsworth. He suffered from a psychotic</p> <p>14 illness. Again, I won't ask about decisions that were</p> <p>15 made or the facts, but, again, your judgment -- name</p> <p>16 comes up in this judgment five times in relation to</p> <p>17 correspondence and, as we are told, he needed a rule 35</p> <p>18 assessment and, on two occasions within a week of that,</p> <p>19 when you and others were told it would take up to</p> <p>20 45 days to get him sectioned, Mr Partridge says that HA</p> <p>21 needed to leave Brook House, needed to be sectioned. He</p> <p>22 wasn't sectioned, though, and, six weeks later, he was</p> <p>23 transferred to Harmondsworth and into rule 40</p> <p>24 segregation. Your name comes up again, as you</p> <p>25 authorised this, according to the judgment. Shortly</p> <p style="text-align: center;">Page 71</p>
<p>1 feeding into the Home Office's meetings with bodies like</p> <p>2 Medical Justice and considered when issues like the</p> <p>3 detention of mentally ill people and the efficacy of</p> <p>4 rule 35 are being considered?</p> <p>5 <b>A. I'm sorry, I'm not quite -- the question -- the actual</b></p> <p>6 <b>question is ...?</b></p> <p>7 Q. So you have meetings with stakeholders like</p> <p>8 Medical Justice.</p> <p>9 <b>A. Yes.</b></p> <p>10 Q. Would you agree that considering a judgment like this,</p> <p>11 which says that there is a lack of communication and</p> <p>12 article 3 breach and someone with a rule 35 report,</p> <p>13 that's a relevant thing to discuss in those meetings,</p> <p>14 isn't it?</p> <p>15 <b>A. It is, but I guess it is of more relevance to case</b></p> <p>16 <b>owners than members of detention staff.</b></p> <p>17 Q. Well, it is of relevance, though, to the people who are</p> <p>18 having meetings that discuss the efficacy of rule 35 as</p> <p>19 well, isn't it?</p> <p>20 <b>A. Yes, I guess so, but I'm just trying to think in the</b></p> <p>21 <b>context with that sort of detention case, it's more</b></p> <p>22 <b>relevant to the person maintaining the detention.</b></p> <p>23 Q. You might not know the answer to this one way or</p> <p>24 another, which is fine, but do you know whether</p> <p>25 a decision like that would go back to the person who</p> <p style="text-align: center;">Page 70</p>	<p>1 after, he was put on to rule 42 confinement and force</p> <p>2 was used, and then he remained in segregation for about</p> <p>3 four months.</p> <p>4 So the court found in this case that the</p> <p>5 Secretary of State's decision to authorise his continued</p> <p>6 detention was flawed from when she first had the</p> <p>7 opportunity to consider the matter more fully and that</p> <p>8 was, according to the judge, a week after the rule 35</p> <p>9 report was received. In particular, after she had the</p> <p>10 opportunity to digest the implications of</p> <p>11 the psychiatrist's report and the rule 35 report, and</p> <p>12 she found that the way that the UKBA responded to the</p> <p>13 rule 35 report was flawed as a matter of public law.</p> <p>14 She said -- the judge said that, from the date of</p> <p>15 the psychiatrist's recommendation, the</p> <p>16 Secretary of State had a duty to take reasonable steps</p> <p>17 to secure transfer to hospital and that the delay of</p> <p>18 over five months was manifestly unreasonable, and that,</p> <p>19 therefore, and for other reasons, HA's original and</p> <p>20 subsequent detention were in breach of article 3.</p> <p>21 Again, then, it is a judgment that you are named in</p> <p>22 with rule 35 reports, the response to which the court</p> <p>23 found was unlawful and a breach of article 3. Did you</p> <p>24 learn about this judgment at the time it was promulgated</p> <p>25 or at any time before you were given it in your pack?</p> <p style="text-align: center;">Page 72</p>

<p>1 <b>A. No.</b></p> <p>2 Q. Do you know whether anything was done to ensure that</p> <p>3 this didn't happen again?</p> <p>4 <b>A. I think -- if the question is about getting people</b></p> <p>5 <b>sectioned, in my previous role, I managed to make</b></p> <p>6 <b>contact with the people in the MoJ that issue warrants</b></p> <p>7 <b>on mental health and transfers under a section, and it</b></p> <p>8 <b>worked pretty well. I am surprised that somebody was</b></p> <p>9 <b>deemed to be sectionable for that amount of time and</b></p> <p>10 <b>weren't sectioned --</b></p> <p>11 Q. Yes.</p> <p>12 <b>A. -- but I have no immediate recollection of the actual</b></p> <p>13 <b>case. But it's something I genuinely felt we'd got</b></p> <p>14 <b>better at.</b></p> <p>15 Q. When did you think you got better at it?</p> <p>16 <b>A. Because --</b></p> <p>17 Q. When?</p> <p>18 <b>A. I can't say a specific date. Before I was at DEPMU.</b></p> <p>19 <b>But, as I say, I managed to make contact with the MoJ</b></p> <p>20 <b>people that issued the warrants. Again, if this is</b></p> <p>21 <b>slightly inaccurate, I'm sorry, it is just a recollection</b></p> <p>22 <b>thing, but my understanding is, as long as you got two</b></p> <p>23 <b>psychiatrists trained -- medics trained with</b></p> <p>24 <b>a psychiatric qualification to sign the sectionable</b></p> <p>25 <b>paperwork, that then the NHS had a duty to find them</b></p> <p style="text-align: center;">Page 73</p>	<p>1 was handed down. He was detained in Brook House,</p> <p>2 in February 2011, for five and a half months, and then,</p> <p>3 subsequently, at Harmondsworth and Colnbrook. And the</p> <p>4 decision of D refers to the HA decision by the now</p> <p>5 Lord Justice Singh. Again, there is no need for it to</p> <p>6 be on the screen, but you have it at tab 17.</p> <p>7 B had a psychotic illness, had been diagnosed with</p> <p>8 paranoid schizophrenia. Successive detention reviews</p> <p>9 said he could be detained. It seems he was transferred</p> <p>10 to Harmondsworth because of a belated realisation he</p> <p>11 needed to see a psychiatrist -- that's what the judge</p> <p>12 said. He was assessed by a psychiatrist but he wasn't</p> <p>13 treated. And then, the second time the psychiatrist saw</p> <p>14 him, he said he should be transferred under section to</p> <p>15 a psychiatric unit, and he wasn't, and the court found</p> <p>16 that the absence of proper psychiatric treatment</p> <p>17 provided to D at Brook House and Harmondsworth, which</p> <p>18 lasted for many months, led to neglect, in that he was</p> <p>19 denied appropriate medication and access to</p> <p>20 a psychiatrist and subjected instead to disciplinary</p> <p>21 sanctions under rule 40 and 42. And the judgment says</p> <p>22 that, as a result of this, his condition deteriorated</p> <p>23 and the court found that the acts and omissions at</p> <p>24 Brook House and Harmondsworth again breached his</p> <p>25 article 3 rights. This, I understand, according to your</p> <p style="text-align: center;">Page 75</p>
<p>1 <b>a medium-term secure bed within 14 days, and we did that</b></p> <p>2 <b>on a number of occasions, even at some point eliciting</b></p> <p>3 <b>the help of private providers. So I saw that as an</b></p> <p>4 <b>improvement in the situation.</b></p> <p>5 Q. As I said, I'm not going to ask you about the decisions</p> <p>6 in this case or the durations or any of that because</p> <p>7 it's been determined by a judge. But you have confirmed</p> <p>8 that this is another case where, as far as you know, you</p> <p>9 weren't made aware of the judge's determination on</p> <p>10 article 3. Is that what you said?</p> <p>11 <b>A. If the question is --</b></p> <p>12 Q. Were you made aware of the judgment?</p> <p>13 <b>A. -- specifically, was I made aware of the judgment?</b></p> <p>14 <b>Officially, no, I wasn't, no.</b></p> <p>15 Q. Unofficially?</p> <p>16 <b>A. Oh, I don't know. No, sorry, I wasn't trying to be</b></p> <p>17 <b>disingenuous. I have no memory at all. But I certainly</b></p> <p>18 <b>wasn't told officially.</b></p> <p>19 Q. You don't get a, sort of, like, a round robin saying</p> <p>20 "There has been a judgment on article 3 involving the</p> <p>21 department"?</p> <p>22 <b>A. No.</b></p> <p>23 Q. Okay, fine. Then, just turning to the last of those</p> <p>24 article 3 judgments, the case of HA was followed by the</p> <p>25 decision in the case of D about four months later. It</p> <p style="text-align: center;">Page 74</p>	<p>1 statement that you were looking after Harmondsworth</p> <p>2 from March 2010 to September 2011 and the claimant in</p> <p>3 this case was there from 4 August to 29 November 2011,</p> <p>4 so with a month or so's crossover with you. Obviously</p> <p>5 it involved the transfer around the immigration estate</p> <p>6 of someone with known healthcare issues. And the</p> <p>7 judgment referred to and involved some of the issues in</p> <p>8 HA. Were you made aware of this judgment?</p> <p>9 <b>A. No, I wasn't, no.</b></p> <p>10 Q. So in two years, we have three High Court judgments</p> <p>11 handed down with findings of article 3 breaches either</p> <p>12 mentioning you directly or relating to detention centres</p> <p>13 where you held responsibility. I think your evidence is</p> <p>14 that you weren't told about the judgments themselves.</p> <p>15 Were you told about adverse judicial findings generally,</p> <p>16 even if you weren't directed to, you know, "Here is the</p> <p>17 wording of the judgment"? Were you told "Article 3</p> <p>18 breaches have been found in these centres" around this</p> <p>19 time?</p> <p>20 <b>A. I have no memory of that happening.</b></p> <p>21 Q. Was anyone in your department, as far as you're aware,</p> <p>22 made aware of any of these?</p> <p>23 <b>A. I have no memory of that happening.</b></p> <p>24 Q. You have at your tab 4, and we have it -- I'm not going</p> <p>25 to ask for it to be on stage -- at &lt;DL0000141&gt; the</p> <p style="text-align: center;">Page 76</p>

<p>1 statement of Nathan Ward. He mentions these findings.  2 He says that the findings of those he's mentioned in the  3 last two decisions I mentioned were not followed up with  4 anyone at Brook House in 2022 or during his time or  5 employment there. Do you know whether the centres would  6 have been informed, so, you know, whether the  7 Home Office were then also contracted when an article 3  8 breach, or indeed any unlawfulness, was found in  9 relation to someone in their care?  10 <b>A. I can't say that it -- I have no memory, so I can't</b>  11 <b>honestly answer that affirmatively because I don't know,</b>  12 <b>to be quite honest.</b>  13 Q. You would accept, wouldn't you, that decisions of this  14 nature about fundamental failings that amounted to  15 breaches of article 3, if they are not fed back, can't  16 give rise to learning and change?  17 <b>A. Yeah, obviously I would accept that. But having said</b>  18 <b>that, I'm not saying it wasn't. I'm just saying I have</b>  19 <b>no memory of it.</b>  20 Q. As far as you're aware, these cases which show, as the  21 judges have found, very serious failings, particularly  22 in the management of vulnerable people, and particularly  23 with regard to the rule 35 process, show serious  24 failings, and I want to ask you whether, if they didn't  25 set off alarm bells at the Home Office, as far as you're</p> <p style="text-align: right;">Page 77</p>	<p>1 example. So we have provided you already with excerpts  2 from the records of a detained person called D801. To  3 be clear, there is no suggestion that you were involved  4 personally in his case and I'm not going to ask you  5 about the factors that played into decisions in his  6 case. What I hope you can help us with, though, is the  7 process, so just from DEPMU's point of view, when you  8 get a Part C. Correct me if this isn't right, but  9 I understand that Part C is a process for notification  10 of either further information in addition to what's  11 recorded on an IS91 Part A or notification of a possible  12 alteration to a detainee's risk factor. It is  13 effectively a form that's completed at the detention  14 centre and then is distributed to a list of recipients.  15 If we could see on screen, please, &lt;HOM032190&gt;, and  16 page 1 of that document, please. We talked about CID  17 and this is GCID. The entries, as I understand them,  18 from experience, are signed off by the person in the  19 department and it is the line in italics below each  20 entry that is the person who made the entry, isn't it,  21 rather than above? That's how GCID works? So, for  22 example, we can see under "Detention Minute" there is an  23 entry made by a person at Brook House and then their  24 name in italics there in "Unit: Brook House". Do you  25 see that at the bottom of the screen? So the italics</p> <p style="text-align: right;">Page 79</p>
<p>1 aware, should they have done?  2 <b>A. I would guess -- I would have to say yes.</b>  3 MS MOORE: I don't have too much more to ask you but I'm  4 going to ask for a break now of 15 minutes. It is just  5 before quarter to. So if we return at just before  6 midday, for the last part of your evidence. Thank you,  7 chair.  8 THE CHAIR: Thank you. See you at 12 o'clock.  9 (11.44 am)  10 (A short break)  11 (12.02 pm)  12 MS MOORE: We continue with the evidence of  13 Mr Schoenenberger.  14 Mr Schoenenberger, before we move on to the last  15 topic, I was asking before the break about your  16 awareness of a number of specific judgments that  17 discussed article 3 breaches. You may or may not be  18 able to help us with this. But do you know whether  19 there was, in more general terms, a process by which the  20 Home Office were made aware of the outcomes of  21 litigation involving the Home Office?  22 <b>A. No awareness at all, sorry.</b>  23 Q. That's fine. I want to turn, then, to ask you about  24 Part C. This is the final matter I want to ask you  25 about. Perhaps we can do this best by reference to an</p> <p style="text-align: right;">Page 78</p>	<p>1 relates to the entry immediately above?  2 <b>A. Okay.</b>  3 Q. What I hope you can help us with, as I say, is that --  4 DEPMU's part in the process of Part C. We see, if we  5 move up a little bit below the initial entry by the "ICE  6 Arrest Team", it says:  7 "Part C [received] from D Killick at Brook House  8 ACDT open at reception, hourly obs, open due to risk to  9 himself."  10 It looks like here, 1 March, DEPMU has been informed  11 about the opening of an ACDT and they have been made  12 aware of that by way of a Part C. So can you help us  13 with why that Part C would have come to DEPMU?  14 <b>A. Yes, I think I can. Although, obviously, it was</b>  15 <b>something my staff did, the key point here is that --</b>  16 <b>and if this is wrong, it's not me being disingenuous,</b>  17 <b>it's just that I don't fully understand the system, but</b>  18 <b>I'm fairly sure this is right. DEPMU is one of the few</b>  19 <b>departments with complete access to CID, so they can see</b>  20 <b>all the fields, they can enter data and everything. So</b>  21 <b>the Part C is really by way of an update so that they</b>  22 <b>have got a method for receiving information, recording</b>  23 <b>information and making it available to everybody -- the</b>  24 <b>case owners, whoever the case owners are, and updating</b>  25 <b>CID. It's a part of the department where -- I'm trying</b></p> <p style="text-align: right;">Page 80</p>

<p>1 to make this sound really sensible. They actually owned</p> <p>2 that part of CID. So, you know, they perform a function</p> <p>3 that nobody else can perform because nobody else can</p> <p>4 access all the necessary fields to update that</p> <p>5 information. So their role is in making sure that</p> <p>6 they're taking information flagged up at a centre, that</p> <p>7 they're amending that person's record, and it means that</p> <p>8 the case owner can then see that record.</p> <p>9 Q. I see.</p> <p>10 A. And it's been updated like that.</p> <p>11 Q. So DEPMU have certain data entry permissions --</p> <p>12 A. Yes.</p> <p>13 Q. -- that other departments might not have?</p> <p>14 A. Yes.</p> <p>15 Q. I see. So that's why it comes to DEPMU; is your</p> <p>16 understanding of it?</p> <p>17 A. Indeed.</p> <p>18 Q. Do DEPMU have to do anything on receipt of a Part C</p> <p>19 other than enter it onto GCID?</p> <p>20 A. I'm presuming now, because I can't quite remember</p> <p>21 exactly what happens, but I'm presuming they update CID</p> <p>22 and they know -- it's via the case owner -- that they</p> <p>23 have updated CID. But that second bit is my</p> <p>24 presumption, not my actual knowledge.</p> <p>25 Q. Can we turn to &lt;HOM028624&gt;, page 35 of that document,</p> <p style="text-align: right;">Page 81</p>	<p>1 people around the estate?</p> <p>2 A. For a variety of reasons, yes, indeed.</p> <p>3 Q. Can you help us with whether the meaning of changing</p> <p>4 a location can include release, or is it just changing</p> <p>5 from one location to another?</p> <p>6 A. Certainly not release. That's not part of DEPMU's</p> <p>7 function to release. That is only a case owner's</p> <p>8 decision.</p> <p>9 Q. It is just, do they need to be moved to a different --</p> <p>10 A. Sorry, do you mind if I, just for clarification --</p> <p>11 Q. Please do.</p> <p>12 A. I'm struggling to remember this. MODCU: Management of</p> <p>13 Detained Cases Unit?</p> <p>14 Q. I don't know, I'm afraid. Go with that as the guess.</p> <p>15 But it is completed potentially by DEPMU or whoever</p> <p>16 MODCU are. It has not been completed, but, as I said,</p> <p>17 that might just be because we have the version from his</p> <p>18 records and you have helped us with changing location</p> <p>19 can't be released because that's a decision for the case</p> <p>20 owner not for DEPMU you say. There is a distribution</p> <p>21 list there, including DEPMU, detention location and the</p> <p>22 UKBA office or unit dealing with the case.</p> <p>23 A. Yes.</p> <p>24 Q. If we can go back to the GCID notes, please, Zaynab,</p> <p>25 &lt;HOM032190&gt;. This is the document we were just looking</p> <p style="text-align: right;">Page 83</p>
<p>1 which you also have in hard copy at tab 21, but we will</p> <p>2 see it on the screen. It is not a great scan, but you</p> <p>3 should be able to read it, and I will read it out.</p> <p>4 Page 35, please. Thanks. This is a scanned entry from</p> <p>5 D801's medical records. This is a full Part C form.</p> <p>6 Not this. If we go to page 35, you will see it. This</p> <p>7 is a completed Part C form. We will see there it is</p> <p>8 dated and signed by Sandra Calver on 13 March 2017, and</p> <p>9 it explains the purpose of the form, which we have been</p> <p>10 over already, so it should be completed as soon as</p> <p>11 further information is available or statements indicate</p> <p>12 a possible alteration to risk. It says D801 has had his</p> <p>13 mental health section revoked and is no longer under</p> <p>14 a section 48. He remains under the psychiatric care at</p> <p>15 Brook House or, if released, under the care of</p> <p>16 the community. He remains an Adult at Risk level 2 or</p> <p>17 3. There is a section there, if we go down, for</p> <p>18 completion by DEPMU and MODCU. Obviously, the reason it</p> <p>19 might not be completed is because this is the version</p> <p>20 that's in his medical records rather than one that's</p> <p>21 gone later, but there is a bullet point there:</p> <p>22 "This detainee's location does or does not need to</p> <p>23 be changed."</p> <p>24 So DEPMU are in charge of potentially changing</p> <p>25 people's location. That's right, isn't it? Moving</p> <p style="text-align: right;">Page 82</p>	<p>1 at, which is the record. If we go to page 3, we were</p> <p>2 just looking at a Part C which was dated 13 March 2017</p> <p>3 in respect of this person. There is no corresponding</p> <p>4 entry in the GCID records for that date. You can't</p> <p>5 answer whether or not -- why there isn't one, but do you</p> <p>6 think that there should be one if the Part C is received</p> <p>7 by DEPMU?</p> <p>8 A. I'm really sorry. Can you repeat the question?</p> <p>9 Q. We saw the Part C that was dated 13 March 2017.</p> <p>10 A. Yes.</p> <p>11 Q. If it was received by DEPMU, should there be</p> <p>12 a corresponding entry with the same date here that says</p> <p>13 "Part C received"? Would you expect that?</p> <p>14 A. Sorry, I'm really sorry, I'm not sure what I'm</p> <p>15 accepting. Sorry.</p> <p>16 Q. Part C is dated 13 March 2017, the one we just looked</p> <p>17 at?</p> <p>18 A. Yes.</p> <p>19 Q. Would that normally, if it is received at DEPMU, give</p> <p>20 rise to an entry that says "We have received a Part C"?</p> <p>21 A. Yes, I would have thought so, yes.</p> <p>22 Q. We don't know whether it reached DEPMU or --</p> <p>23 A. Sorry, I'm just --</p> <p>24 Q. But if it had --</p> <p>25 A. Yes.</p> <p style="text-align: right;">Page 84</p>

<p>1 Q. -- it gives rise to an entry. Fine. There is a DEPMU 2 entry on 19 March, which we see halfway down the page 3 that we have got on the screen there, that says: 4 "Part C received from Brook House. ACDT reviewed 5 and now ACDT constant supervision after act of self-harm 6 by ligature." 7 There is no record of any action taken. It is just 8 noted that a Part C has arrived and it is summarised. 9 It doesn't seem, from any of these notes, that any other 10 department of the Home Office received the Part C 11 because there is no other GCID entry about the Part C, 12 just the one by DEPMU. I think your evidence is, well, 13 DEPMU complete GCID when they receive a Part C but 14 action to be taken is to be taken by someone else. Is 15 that right? 16 <b>A. I think -- I'm not sure if you're asking about process 17 or --</b> 18 Q. Yes, process. 19 <b>A. I mean, DEPMU's role is to update the Part C. It's -- 20 I have said that my understanding would be they would 21 inform the case owner. But actual action would very 22 much be the remit of the case owner, yes.</b> 23 Q. That was going to be my next question: who does the 24 action? And you said it is the case owner. There we 25 have, on 31 March, another Part C received from</p> <p style="text-align: right;">Page 85</p>	<p>1 Q. Are you able to help us with whether Part Cs require 2 a response? So is there something in Part C that says, 3 "You need to respond to it one way or another"? 4 <b>A. I genuinely can't remember. I don't know. And I don't 5 want to mislead you.</b> 6 Q. Part Cs were used in this example, we can see, as 7 a mechanism for telling the Home Office that somebody 8 was unfit to be in detention, and also to raise concerns 9 about suicidal intentions. Well, we see that somebody 10 has self-harmed with a ligature, which we can only 11 assume is potentially indicative of suicidal intention. 12 Would you agree, if you are able to say from your 13 knowledge, that the proper mechanism for raising those 14 concerns is actually a part -- a rule 35 report rather 15 than a Part C? 16 <b>A. I'm not sure I fully understand the question, but --</b> 17 Q. Do you want me to rephrase? 18 <b>A. Mmm.</b> 19 Q. We see that Part Cs have been used here to tell the 20 Home Office -- 21 <b>A. Yes.</b> 22 Q. -- that this person, firstly, self-harmed with 23 a ligature -- we can see at the top of the form -- and, 24 secondly, that a consultant psychiatrist think he's not 25 fit to be at Brook House. In your view, if you know, is</p> <p style="text-align: right;">Page 87</p>
<p>1 Michael Wells, healthcare practice manager at 2 Brook House, and it says that there's been a review by 3 a consultant psychiatrist and, eventually, he is not fit 4 to be at Brook House either as he cannot receive 5 appropriate treatment. Again, this is a Part C entry 6 made by DEPMU. You said DEPMU wouldn't have been in 7 charge of releasing him. They would have just logged 8 the receipt of the Part C form. Is that right? 9 <b>A. Absolutely. I mean, I really want to be unambiguous 10 about this: DEPMU have nothing to do with maintaining 11 detention. That is purely the remit of the case owner 12 and the head of that caseworking office. So DEPMU could 13 have a feeling about, you know, a multitude of things, 14 but the care -- you know, the actual continued detention 15 of that detainee is fundamentally the responsibility of 16 the case owner that is maintaining detention.</b> 17 Q. I appreciate that you are not aware of the exact 18 process, but you expect that somehow, when GCID is 19 updated to say that a Part C has been received that says 20 whatever, you know, in this case that he's not fit to be 21 at Brook House, that filters through to the case 22 owner -- 23 <b>A. Yes.</b> 24 Q. -- who then is required to make a decision? 25 <b>A. Mmm-hmm.</b></p> <p style="text-align: right;">Page 86</p>	<p>1 it, in fact, properly within the remit of rule 35 to 2 pass on these concerns rather than Part C? 3 <b>A. It would seem, on the face of it, to be, but I'm not 4 quite -- I'm genuinely not sure if the only way 5 a rule 35 would have happened is if there'd been an 6 interview under that sort of process and the person 7 raised it with the medical person and started the 8 process again. I'm just thinking that that could be an 9 issue of the -- around the medical people dealing with 10 it.</b> 11 Q. Yes. So we have heard, in fact -- 12 <b>A. Does that make sense?</b> 13 Q. Yes. 14 <b>A. What I'm trying to say is, a doctor might be dealing 15 with something and doing his or her job properly, but 16 not really thinking that, "Oh, yes, I should have 17 restarted the rule 35 process", is what I'm trying to 18 say. But that might be my lack of knowledge of 19 caseworking, more than anything, to be quite honest.</b> 20 Q. You say that entering, as we see here, the receipt of 21 a Part C on the system is basically all that DEPMU do 22 when they receive one? They don't have to take any 23 action about decisions to maintain detention, for 24 example? 25 <b>A. No, no, absolutely not, no. No. But I did say that --</b></p> <p style="text-align: right;">Page 88</p>

<p>1 <b>my understanding was that they would update the case</b></p> <p>2 <b>owner to say, you know, this situation has changed.</b></p> <p>3 Q. Again, you might not be able to help us. But if the</p> <p>4 case owner has been updated, would you not expect to see</p> <p>5 on GCID "We have updated the case owner" and then maybe</p> <p>6 their name? Is that something that would be pertinent</p> <p>7 to record?</p> <p>8 <b>A. I don't know. Sorry, I can't answer the question. I'm</b></p> <p>9 <b>not sure if that is part of the process or not.</b></p> <p>10 Q. We have provided you with transcripts of the evidence of</p> <p>11 some doctors who gave evidence to the inquiry, and you</p> <p>12 have mentioned that the rule 35 consideration might fall</p> <p>13 from a medical assessment.</p> <p>14 <b>A. Yes, you have, but could I just say that a lot of</b></p> <p>15 <b>this -- I don't know what you're going to ask me, but</b></p> <p>16 <b>I do think this is an appropriate point to raise the</b></p> <p>17 <b>fact that I have had -- I was getting evidence this</b></p> <p>18 <b>morning at 10 to 9, so that I --</b></p> <p>19 Q. Don't worry.</p> <p>20 <b>A. I have had a massive amount of evidence that, you know,</b></p> <p>21 <b>late at night, early in the morning, when I was at --</b></p> <p>22 <b>you know, in the middle of a meeting yesterday at work.</b></p> <p>23 <b>So I am a bit dubious about putting my name to a lot of</b></p> <p>24 <b>evidence that I -- yes, you're absolutely right, I have</b></p> <p>25 <b>been sent it. But I'm not absolutely sure that I've had</b></p> <p style="text-align: center;">Page 89</p>	<p>1 I say:</p> <p>2 "Question: In the relevant period?"</p> <p>3 He says:</p> <p>4 "Answer: Yes."</p> <p>5 I ask:</p> <p>6 "Question: Or before or immediately after?"</p> <p>7 If we go to his answer in the top right, he</p> <p>8 discusses reading the rule, he discusses the threshold</p> <p>9 that forms -- that's formed in the form itself, and</p> <p>10 then, at line 10, he says:</p> <p>11 "Answer: ... Plus we would do Part Cs."</p> <p>12 Then he mentions:</p> <p>13 "Deterioration is one of those things. If it is</p> <p>14 immediate, I want an immediate response. I wouldn't</p> <p>15 want to necessarily wait two days or three days or even</p> <p>16 possibly a week at times to get a response from the</p> <p>17 Home Office regarding a patient ..."</p> <p>18 I asked him about his answer, and if we see from</p> <p>19 line 25, I first asked him about the relevance of</p> <p>20 the questions within the form and we see from his</p> <p>21 answer, at line 5:</p> <p>22 "Answer: ... the thresholds are set within the</p> <p>23 questions."</p> <p>24 Which is something I mentioned earlier in relation</p> <p>25 to Theresa Schleicher's concerns. Then, more</p> <p style="text-align: center;">Page 91</p>
<p>1 <b>adequate time to look at it and everything.</b></p> <p>2 Q. Before I ask you to comment on it, then, I will make</p> <p>3 sure that you are both looking at it and that I read it</p> <p>4 and summarise the relevant part for you. If you feel,</p> <p>5 from that, that you can't give an appropriate answer,</p> <p>6 you can say "I don't think I've had time to consider</p> <p>7 it". Is that fair?</p> <p>8 <b>A. It is at this juncture, yes.</b></p> <p>9 Q. Can I put on screen &lt;INQ000169&gt;. And you will</p> <p>10 appreciate that, during the course of the inquiry,</p> <p>11 there's always new evidence being provided because</p> <p>12 people say things and this is one of the things that was</p> <p>13 said in relation to a question I asked. This is</p> <p>14 page 50, please. This is Dr Chaudhary, who is one of</p> <p>15 the clinicians at Brook House. It is obviously much too</p> <p>16 small to be able to see there. Can we go to page 50 of</p> <p>17 the document, please. On 11 March, Mr Schoenenberger,</p> <p>18 I asked Dr Chaudhary about the fact that there were no</p> <p>19 rule 35(2) reports during the relevant period at</p> <p>20 Brook House. My question to him is in the bottom left</p> <p>21 quadrant where I'm talking about the rule -- this is</p> <p>22 line 20. I'm talking about rule 35(2):</p> <p>23 "Question: ... None of them were done?"</p> <p>24 He says:</p> <p>25 "Answer: Yes."</p> <p style="text-align: center;">Page 90</p>	<p>1 importantly, if you look at line 17, he says:</p> <p>2 "So rule 35 -- so doing, for example, a Part C is</p> <p>3 a definite mechanism of communication to the Home Office</p> <p>4 and that would be coming from multiple sources and we</p> <p>5 would see patients released after a Part C, and we would</p> <p>6 see patients released ..."</p> <p>7 He goes on to talk about where a medico-legal report</p> <p>8 might be sent to the Home Office.</p> <p>9 If you have finished reading the relevant parts,</p> <p>10 which are the parts I have read out, Mr Schoenenberger,</p> <p>11 it can be taken from the screen. It is simply to say we</p> <p>12 have had evidence from a doctor who worked at</p> <p>13 Brook House, and still works there and now and worked</p> <p>14 there during the relevant period, and his view was that</p> <p>15 Part C was used as a mechanism for telling the</p> <p>16 Home Office about concerns and his view was also that</p> <p>17 that could sometimes supplant the need to do</p> <p>18 a rule 35(2) report. Okay?</p> <p>19 <b>A. Sorry, just the second part of that?</b></p> <p>20 Q. It could also sometimes supplant the need to do</p> <p>21 a rule 35(2) report?</p> <p>22 <b>A. Supplant the need, okay.</b></p> <p>23 Q. Instead of a rule 35(2), he could do a Part C?</p> <p>24 <b>A. Okay.</b></p> <p>25 Q. He said that wasn't just at Brook House, but this was</p> <p style="text-align: center;">Page 92</p>

<p>1 practice, as he understood it, across multiple</p> <p>2 immigration centres?</p> <p>3 <b>A. Okay.</b></p> <p>4 Q. Did you know of that while in charge of DEPMU, of that</p> <p>5 being the case, Part Cs being used as a method of</p> <p>6 communicating such concerns?</p> <p>7 <b>A. I think I've explained what -- my understanding of</b></p> <p>8 <b>a Part C. I think I've explained my understanding of</b></p> <p>9 <b>a rule 35 report. I'm not quite sure -- I'm really</b></p> <p>10 <b>sorry, it's probably me being dim, but I'm just not</b></p> <p>11 <b>really following the correlation between the two.</b></p> <p>12 Q. Dr Chaudhary, and other witnesses to the inquiry, say</p> <p>13 that, rather than sending rule 35s in certain</p> <p>14 circumstances, they'd send Part Cs.</p> <p>15 <b>A. Okay.</b></p> <p>16 Q. DEPMU, as we know, received the Part Cs.</p> <p>17 <b>A. Yes.</b></p> <p>18 Q. We have seen them being logged.</p> <p>19 <b>A. Yes.</b></p> <p>20 Q. Did you know, as the person who was in charge of DEPMU,</p> <p>21 that Part Cs were being received instead of rule 35s?</p> <p>22 <b>A. No.</b></p> <p>23 Q. Despite that it's the wrong process, if DEPMU receives</p> <p>24 a Part C which says, for example, in D801's case with</p> <p>25 the entry I showed you, he is at risk of self-harm or he</p> <p style="text-align: center;">Page 93</p>	<p>1 document, paragraph 57. It says:</p> <p>2 "Additionally, centre suppliers must notify the</p> <p>3 DEPMU via a Part C of any instance of a detainee being</p> <p>4 managed under rule 40 or 42."</p> <p>5 It says they should be notified also if it turns out</p> <p>6 that the use of those rules was, in fact, not</p> <p>7 appropriate. Finally, it says that this DSO is to be</p> <p>8 read with the Adults at Risk policy and should be clear</p> <p>9 in all correspondence when someone is being managed with</p> <p>10 40 or 42 under Adults at Risk. So this is just DEPMU</p> <p>11 get notified of a rule 40/42. And then, at page 25, top</p> <p>12 of paragraph 88, we see -- the first paragraph on</p> <p>13 page 25 tells us that DEPMU is told by way of a Part C</p> <p>14 when healthcare recommends return to association on</p> <p>15 medical grounds and DEPMU inform the case handler. So</p> <p>16 DEPMU receive some information according to this DSO</p> <p>17 about the use of rule 40. Is that your recollection of</p> <p>18 when you worked there, that DEPMU were told about</p> <p>19 rule 40 and 42 being used and entered it onto the</p> <p>20 system?</p> <p>21 <b>A. As far as I'm aware, yes.</b></p> <p>22 Q. During the relevant period, the vast majority, I believe</p> <p>23 87 per cent or so, of rule 40s which were made at</p> <p>24 Brook House were being approved by G4S rather than the</p> <p>25 Secretary of State under the urgent procedure under</p> <p style="text-align: center;">Page 95</p>
<p>1 has suicidal thoughts, does DEPMU take any step other</p> <p>2 than either notifying or assuming that the case owner</p> <p>3 will see the entry on the GCID records? Is there</p> <p>4 anything at DEPMU when you receive a Part C that has</p> <p>5 a concern like this that flags something up and says,</p> <p>6 "I need to take some step. Tell them they need to do</p> <p>7 a part 35 -- rule 35, ring someone up, or do you simply</p> <p>8 log it as far as you're aware?</p> <p>9 <b>A. Sorry, I thought I covered this. They would enter the</b></p> <p>10 <b>information. As far as I'm aware, they would make the</b></p> <p>11 <b>case owner aware, and it is the case owner that then</b></p> <p>12 <b>needs to deal with that case.</b></p> <p>13 Q. That's not any different, as far as you understand it,</p> <p>14 if there's, like, a particular concern about an</p> <p>15 immediate risk of suicide or something? They are all</p> <p>16 dealt with, as you understand it, in the same way, by</p> <p>17 whatever process it is?</p> <p>18 <b>A. Yes.</b></p> <p>19 Q. Fine. The final topic I want to ask you about, which is</p> <p>20 still about DEPMU's role and notifications during --</p> <p>21 that the department receives is about rule 40 and</p> <p>22 rule 42. At tab 22, I will bring it up, &lt;CJS000676&gt;.</p> <p>23 This is the rule 40 and 42 DSO that came into force</p> <p>24 in July 2017. I will just ask you about DEPMU's</p> <p>25 involvement on notifications. This is page 18 of that</p> <p style="text-align: center;">Page 94</p>	<p>1 rule 40(2). So you will know the normal procedure under</p> <p>2 rule 40(1) is the Secretary of State authorises rule 40.</p> <p>3 The other procedure, in cases of urgency, is G4S can,</p> <p>4 and they can inform the Home Office. So, as we see --</p> <p>5 <b>A. I can't say I remember that being the case.</b></p> <p>6 Q. DEPMU would have been aware of each indication of</p> <p>7 rule 40 at Brook House. All I wanted to ask --</p> <p>8 <b>A. As long as they were informed, obviously, yes.</b></p> <p>9 Q. As long as they were informed, indeed. What I wanted to</p> <p>10 ask was whether DEPMU look at the way in which rule 40</p> <p>11 has been made and would have been able to spot any</p> <p>12 trends about the way it was being used. Is that</p> <p>13 something DEPMU would have done?</p> <p>14 <b>A. No, absolutely not.</b></p> <p>15 Q. Absolutely not?</p> <p>16 <b>A. No, because there's a very sensible thing for that.</b></p> <p>17 <b>I mean, I had around about 70 staff, about 40 or 50 of</b></p> <p>18 <b>which were AOs inputting data overseen by an EO, but, if</b></p> <p>19 <b>you think about it, how many rule 40/42 updates each</b></p> <p>20 <b>individual would have done, which shift they were on,</b></p> <p>21 <b>you know, it would have -- I mean, not that we ever</b></p> <p>22 <b>thought about collating it, or anything like that.</b></p> <p>23 <b>I'm just trying to explain that, you know, one</b></p> <p>24 <b>individual might be doing two a week, another one could</b></p> <p>25 <b>be doing one, another one might have not done one for</b></p> <p style="text-align: center;">Page 96</p>



<p>1 <b>three weeks. So there's no --</b></p> <p>2 Q. It would have been difficult --</p> <p>3 <b>A. There is no mechanism in which to collate. Unless CID</b></p> <p>4 <b>was set up to say, "Do you realise there's been an</b></p> <p>5 <b>upsurge in rule 40/42 notifications by X per cent", you</b></p> <p>6 <b>know, there's no -- I'm not explaining that very well.</b></p> <p>7 Q. No, no, I understand. So there was no kind of analysis</p> <p>8 of trends; it was just individual entries.</p> <p>9 <b>A. No, because, you know, the whole system doesn't set</b></p> <p>10 <b>itself up to analyse trends.</b></p> <p>11 Q. Lastly, Part Cs, which we know do come to DEPMU, contain</p> <p>12 information about things that are pertinent to risks of</p> <p>13 individuals. So use of rule 40/42, they might</p> <p>14 contain -- we can take that from the screen now --</p> <p>15 potentially information about things like self-harm,</p> <p>16 suicide attempts, use of force. They contain relevant</p> <p>17 information about people's risk profiles.</p> <p>18 Did DEPMU have any process of analysing the trends</p> <p>19 in the sort of information that was being received by</p> <p>20 a Part C? You said you didn't look, for example, at the</p> <p>21 number of rule 40s, but was there any overarching</p> <p>22 consideration of the type of things that were coming in</p> <p>23 on Part C forms that would allow you --</p> <p>24 <b>A. No, not at all. I want to be really clear about that.</b></p> <p>25 <b>Not in any dimension. Because, as I have explained, it</b></p> <p style="text-align: center;">Page 97</p>	<p>1 that data off that we have been talking about, patterns</p> <p>2 around certain types of things that were coming through.</p> <p>3 <b>A. No. Absolutely not, no.</b></p> <p>4 THE CHAIR: Thank you. I have no other questions. Thank</p> <p>5 you very much for coming today.</p> <p>6 <b>A. Thank you.</b></p> <p>7 THE CHAIR: I know it is not an easy experience, but it's</p> <p>8 been important to hear from you. Thank you for your</p> <p>9 time.</p> <p>10 <b>A. Thank you.</b></p> <p>11 <b>(The witness withdrew)</b></p> <p>12 MS MOORE: We are going to have a very short break now,</p> <p>13 until 12.30 pm, to switch witnesses and then we will</p> <p>14 hear from Ms Smith.</p> <p>15 THE CHAIR: Thank you very much.</p> <p>16 (12.28 pm)</p> <p>17 (A short break)</p> <p>18 (12.34 pm)</p> <p>19 MS SIMCOCK: The next witness is Michelle Smith.</p> <p>20 MS MICHELLE SMITH (sworn)</p> <p>21 Examination by MS SIMCOCK</p> <p>22 MS SIMCOCK: Can you give you full name to the inquiry,</p> <p>23 please.</p> <p>24 <b>A. Yes, Michelle Smith.</b></p> <p>25 Q. You have provided two witness statements to the inquiry.</p> <p style="text-align: center;">Page 99</p>
<p>1 <b>would have taken some way of the system flagging up</b></p> <p>2 <b>numbers or something, because to each individual person</b></p> <p>3 <b>inputting the information, they could be the only person</b></p> <p>4 <b>inputting that information for a week, a month; they</b></p> <p>5 <b>wouldn't know.</b></p> <p>6 Q. So it would take either the system being designed in</p> <p>7 a way to collate it, or, I suppose, like an audit</p> <p>8 process --</p> <p>9 <b>A. An audit, yeah.</b></p> <p>10 Q. -- by which one person looks through, and neither of</p> <p>11 those took place?</p> <p>12 <b>A. No.</b></p> <p>13 MS MOORE: That was all the questions I had for you,</p> <p>14 Mr Schoenenberger. The chair might have a couple of</p> <p>15 questions for you.</p> <p>16 THE CHAIR: Thank you very much, Ms Moore.</p> <p>17 Questions from THE CHAIR</p> <p>18 THE CHAIR: I do just have one question for you,</p> <p>19 Mr Schoenenberger, in relation to the discussion that</p> <p>20 you have just been having with Ms Moore, and it relates</p> <p>21 to, you told us that, actually, the department had some</p> <p>22 function around the actual database itself and that you</p> <p>23 had some permissions to be able to do certain things to</p> <p>24 it. Did you, at any point, do anything about whether</p> <p>25 you could make changes to enable you to pull some of</p> <p style="text-align: center;">Page 98</p>	<p>1 They are &lt;INQ000057&gt; and &lt;HOM0332121&gt;. I am going to</p> <p>2 ask you about some aspects of those witness statements,</p> <p>3 but because I'm going to ask for them both to be adduced</p> <p>4 in full, which means they stand as your evidence, I'm</p> <p>5 not going to take you through every line of both of</p> <p>6 those statements.</p> <p>7 Could you give your current job title, please?</p> <p>8 <b>A. Yes. My current job title is head of detention</b></p> <p>9 <b>operations.</b></p> <p>10 Q. You say in your first statement that you joined the</p> <p>11 Home Office in 2000, you were promoted to executive</p> <p>12 officer and then next promoted to senior executive</p> <p>13 officer in 2005; is that right?</p> <p>14 <b>A. Yes.</b></p> <p>15 Q. You were thereafter promoted to a grade 7 manager,</p> <p>16 I think in around 2013; is that right?</p> <p>17 <b>A. No. So I was promoted to a grade 7 manager in 2009.</b></p> <p>18 Q. What does a grade 7 manager mean, what level of</p> <p>19 management is that?</p> <p>20 <b>A. So you're an assistant director, so you have, I suppose,</b></p> <p>21 <b>oversight and responsibility for a given area.</b></p> <p>22 Q. What was your particular role when you became a G7?</p> <p>23 <b>A. Initially, on temporary promotion, I was responsible for</b></p> <p>24 <b>charter operations and public expense returns, so the</b></p> <p>25 <b>contract for scheduled flight returns.</b></p> <p style="text-align: center;">Page 100</p>

<p>1 Q. You joined Detention and Escorting Services in 2014; is 2 that right?</p> <p>3 <b>A. Yes, that's correct.</b></p> <p>4 Q. You say as a service delivery manager. Was that when 5 you first became responsible for Brook House?</p> <p>6 <b>A. Yes, that's correct.</b></p> <p>7 Q. What does the service delivery manager role entail?</p> <p>8 <b>A. Oversight of the supplier contract and the performance 9 management, ensuring the contract is performing as it 10 should do, is one aspect; stakeholder engagement 11 responsibility for kind of partners on site; and then, 12 during and around the relevant period, I had 13 responsibility for the Gatwick IRC re-procurement -- the 14 welfare services contract procurement, following the 15 movement of the predeparture accommodation from Cedars 16 to Tinsley House; and then we were also refurbishing 17 Tinsley House and putting in the additional beds at 18 Brook House, so I had responsibility for -- as business 19 lead, operational business lead, for the Home Office in 20 relation to those works.</b></p> <p>21 Q. At paragraph 13 of your first witness statement, you 22 deal with your attendance in the relevant period at 23 Brook House. How often would you be onsite at 24 Brook House during that period of time?</p> <p>25 <b>A. It varied week to week, but I would say, in the main,</b></p> <p style="text-align: center;">Page 101</p>	<p>1 Q. What was your interaction with G4S senior management?</p> <p>2 <b>A. Through sort of ad hoc meetings but more formally as 3 part of the monthly contract review meeting.</b></p> <p>4 Q. What about more lower level management, the DCMs?</p> <p>5 <b>A. I'd have very limited contact. Most of that contact 6 would be between sort of DCMs and then the deputy 7 immigration manager and the immigration manager.</b></p> <p>8 Q. In terms of the management structure, then, the line 9 management, who reported directly to you? Was that 10 Ian Castle?</p> <p>11 <b>A. Yes, Ian Castle reported to me.</b></p> <p>12 Q. He was senior executive officer level?</p> <p>13 <b>A. Yes.</b></p> <p>14 Q. His role was area manager of the Gatwick estate?</p> <p>15 <b>A. Yes, that's correct.</b></p> <p>16 Q. He was based at Brook House. Was he based at 17 Brook House during the entire week?</p> <p>18 <b>A. No. So he split his responsibilities across the three 19 facilities: so Brook House, and then around half a mile 20 down the road is another facility, Tinsley House, and 21 within the -- so, after Tinsley House, there's the 22 immigration removal centre and the predeparture 23 accommodation.</b></p> <p>24 Q. In terms of who reported to Ian Castle, was that 25 Paul Gasson?</p> <p style="text-align: center;">Page 103</p>
<p>1 <b>a couple of days a week.</b></p> <p>2 Q. Did you go on to the residential wings to speak to 3 detainees?</p> <p>4 <b>A. No, that wasn't really part of my role.</b></p> <p>5 Q. You say that you were based in the main IRC office when 6 you were at Brook House. Whereabouts is that located?</p> <p>7 <b>A. It is on the third floor above the visits area.</b></p> <p>8 Q. Was access obtained with keys through locked doors?</p> <p>9 <b>A. Yes, it was -- yes, it was, yes.</b></p> <p>10 Q. So detainees wouldn't have had access to that office?</p> <p>11 <b>A. No.</b></p> <p>12 Q. Did all staff members have access to that office, or was 13 it only more senior management?</p> <p>14 <b>A. No, all staff officers.</b></p> <p>15 Q. Would that include DCMs and DCOs?</p> <p>16 <b>A. Yes, it would.</b></p> <p>17 Q. Who else worked with you in that office during the 18 relevant period?</p> <p>19 <b>A. So the office was specific to my team, so the higher 20 executive officer -- referred to, I think, in my 21 statement as the immigration manager or contract 22 manager -- would have been Paul Gasson, the area manager 23 and the executive officers and admin officers 24 responsible for either detainee engagement and any 25 contract activity.</b></p> <p style="text-align: center;">Page 102</p>	<p>1 <b>A. Paul Gasson, yes.</b></p> <p>2 Q. He was higher executive officer level?</p> <p>3 <b>A. Yes, that's correct.</b></p> <p>4 Q. He was the immigration manager or contract monitor at 5 Brook House; is that right?</p> <p>6 <b>A. Yes, that's correct.</b></p> <p>7 Q. Who did you report to?</p> <p>8 <b>A. I reported to Alan Gibson.</b></p> <p>9 Q. Was he head of detention operations?</p> <p>10 <b>A. Yes, he was, yes.</b></p> <p>11 Q. He was responsible for overseeing the day-to-day 12 operations of the detention estate?</p> <p>13 <b>A. Yes.</b></p> <p>14 Q. He wasn't based at Brook House?</p> <p>15 <b>A. No, he wasn't, no. He was based in Croydon.</b></p> <p>16 Q. For completeness, then, he reported to 17 Clare Checksfield; is that right?</p> <p>18 <b>A. Yes, that's correct.</b></p> <p>19 Q. She was a director level, head of Detention and 20 Escorting Services, and she wasn't based at Brook House 21 during the relevant period either?</p> <p>22 <b>A. No, she wasn't, no.</b></p> <p>23 Q. You deal with the configuration of the Home Office team 24 at Brook House at paragraphs 8 to 10 of your first 25 witness statement. What's the current configuration of</p> <p style="text-align: center;">Page 104</p>

<p>1 the team at Gatwick? What's the management structure</p> <p>2 like now?</p> <p>3 <b>A. So the current configuration, there is a grade 7 service</b></p> <p>4 <b>delivery manager, there is an SEO area manager, and then</b></p> <p>5 <b>across both sites, the three facilities, there are three</b></p> <p>6 <b>higher executive officers, and --</b></p> <p>7 Q. Seven executive officers?</p> <p>8 <b>A. Yes, I'm just trying to sort my maths out. Yes, seven</b></p> <p>9 <b>executive officers.</b></p> <p>10 Q. Who is the service delivery manager currently?</p> <p>11 <b>A. The service delivery manager is Simon Murrell.</b></p> <p>12 Q. Who is the SEO area manager?</p> <p>13 <b>A. Recently appointed, Natasha Barber.</b></p> <p>14 Q. You say that the team is split into three groups, which</p> <p>15 cover operations, performance and assurance; is that</p> <p>16 right?</p> <p>17 <b>A. Yes.</b></p> <p>18 Q. Can you just briefly describe what those three cover?</p> <p>19 <b>A. Yes. So the operations team are quite a reactive team,</b></p> <p>20 <b>so they deal with any requests on a day-to-day basis</b></p> <p>21 <b>from who is currently Serco, the service provider. They</b></p> <p>22 <b>will deal with things like rule 40 reviews, where we</b></p> <p>23 <b>have a requirement to see anybody who is in rule 40 or</b></p> <p>24 <b>42 on a daily basis; they will sign off risk assessments</b></p> <p>25 <b>for outside escorts, that kind of operational activity.</b></p> <p style="text-align: center;">Page 105</p>	<p>1 <b>A. So you had an area manager, you had an immigration</b></p> <p>2 <b>manager and then there were two deputy immigration</b></p> <p>3 <b>managers and a group -- I don't think I included the</b></p> <p>4 <b>group of admin officers within my statement, but I think</b></p> <p>5 <b>there were nine admin officers in total.</b></p> <p>6 Q. There was then a review carried out in 2016. What was</p> <p>7 the review looking into?</p> <p>8 <b>A. So -- well, there were a number of things. There was</b></p> <p>9 <b>a review into disruption, removal disruption, and then</b></p> <p>10 <b>there were also some recommendations -- I'm trying to do</b></p> <p>11 <b>this from memory -- relating to -- from Stephen Shaw and</b></p> <p>12 <b>I think HMIP as well, and both said there needed to be</b></p> <p>13 <b>more engagement with individuals in our care around</b></p> <p>14 <b>their immigration case, and then the review into</b></p> <p>15 <b>disruption concluded that more interaction with people</b></p> <p>16 <b>in our care in detention would allow us to identify</b></p> <p>17 <b>whether there were any particular barriers ahead of</b></p> <p>18 <b>that -- ahead of the scheduled return, to make sure they</b></p> <p>19 <b>could be resolved for the individual, and that would</b></p> <p>20 <b>have a positive consequence on disruptions.</b></p> <p>21 Q. So the review recommended introduction of pre-departure</p> <p>22 teams?</p> <p>23 <b>A. Yes.</b></p> <p>24 Q. Now referred to as detainee engagement teams.</p> <p>25 <b>A. Yes, that's correct.</b></p> <p style="text-align: center;">Page 107</p>
<p>1 <b>The performance team will carry out the compliance</b></p> <p>2 <b>activity, so it's a small dedicated team of people who</b></p> <p>3 <b>undertake reviews of different aspects of the contract.</b></p> <p>4 <b>And then the assurance team are responsible for</b></p> <p>5 <b>third party recommendations and reviewing and self</b></p> <p>6 <b>audits carried out.</b></p> <p>7 Q. Are those groups based across all three of the Gatwick</p> <p>8 facilities?</p> <p>9 <b>A. Yes.</b></p> <p>10 Q. I think that's a more recent change from March 2021?</p> <p>11 <b>A. Yes, it is.</b></p> <p>12 Q. What happened prior to that?</p> <p>13 <b>A. Prior to that, there was an HEO responsible for each of</b></p> <p>14 <b>the different facilities, and then, underneath that,</b></p> <p>15 <b>there was a group of executive officers, deputy</b></p> <p>16 <b>compliance managers, who had responsibility for dealing</b></p> <p>17 <b>with the operational aspects that occurred in that</b></p> <p>18 <b>facility, and a thematic area for compliance, monitoring</b></p> <p>19 <b>that across the three facilities.</b></p> <p>20 Q. You refer in your statement to a pilot that was carried</p> <p>21 out in 2017 --</p> <p>22 <b>A. Yes.</b></p> <p>23 Q. -- of a new arrangement. Before we deal with the pilot,</p> <p>24 what was the configuration of the team in 2016 prior to</p> <p>25 that pilot taking place?</p> <p style="text-align: center;">Page 106</p>	<p>1 Q. Focusing on enhanced engagement with detained persons,</p> <p>2 and the intention behind that was to minimise disruption</p> <p>3 in terms of removals, was it?</p> <p>4 <b>A. Minimise disruption, but then you had the other two</b></p> <p>5 <b>drivers from Shaw and HMIP around that being a positive</b></p> <p>6 <b>thing for the individual as well.</b></p> <p>7 Q. So that resulted in the pilot in 2017 of a new approach</p> <p>8 for the Home Office team on site at Brook House. So</p> <p>9 what was the pilot designed to do?</p> <p>10 <b>A. So the pilot -- the initial focus of the pilot was about</b></p> <p>11 <b>the detainee engagement, because that was the driver.</b></p> <p>12 <b>So that sought to increase the number of officers and</b></p> <p>13 <b>the grading of the officers so that there would be</b></p> <p>14 <b>a support team underneath, but more executive officers</b></p> <p>15 <b>to go and have, I suppose, a more thorough conversation</b></p> <p>16 <b>with the individuals, a revamped induction, more kind of</b></p> <p>17 <b>case ownership, so that there was a rapport built</b></p> <p>18 <b>between the individual and the engagement officer so</b></p> <p>19 <b>they could really understand the challenges that were</b></p> <p>20 <b>facing that individual, but also as an opportunity to</b></p> <p>21 <b>work with that individual to not only -- the individual</b></p> <p>22 <b>will be in a position, in the main, where their efforts</b></p> <p>23 <b>will be focusing on how to get out of detention and</b></p> <p>24 <b>prevent their removal.</b></p> <p>25 <b>So whilst accepting that, and needing to support</b></p> <p style="text-align: center;">Page 108</p>

27 (Pages 105 to 108)

<p>1 that, there's also an opportunity to have -- and a need</p> <p>2 to have a conversation with those individuals to help</p> <p>3 them plan for what could be the inevitable, so it was</p> <p>4 kind of -- that was the vision initially.</p> <p>5 Q. So the pilot tested splitting the team out into two --</p> <p>6 A. Yes.</p> <p>7 Q. -- with detainee engagement being one focus and</p> <p>8 compliance being the other?</p> <p>9 A. Yes.</p> <p>10 Q. So that those two roles were split; is that right?</p> <p>11 A. Yes.</p> <p>12 Q. It operated for four months from November 2016. So were</p> <p>13 additional staff brought in in order to run the pilot?</p> <p>14 A. Yes. So there was, from -- there were some officers</p> <p>15 that transferred down from Tinsley House, because</p> <p>16 Tinsley House was closed at the time for refurbishment.</p> <p>17 So some of those officers, very competent officers,</p> <p>18 stepped up to executive officer level, and then there</p> <p>19 was an expression of interest to bring additional people</p> <p>20 in.</p> <p>21 Q. What were the main roles that those staff were carrying</p> <p>22 out during the pilot, other than detainee engagement?</p> <p>23 A. They were focusing entirely on detainee engagement. So</p> <p>24 we didn't increase our compliance team.</p> <p>25 Q. What were the roles that the compliance team were</p> <p style="text-align: center;">Page 109</p>	<p>1 and recruitment was under way to recruit the additional</p> <p>2 permanent resource into those roles, ready so that the</p> <p>3 team was in a good position to go live in the October.</p> <p>4 Q. Did the implementation of the pilot concern only</p> <p>5 Home Office staff, or did it include any G4S staff as</p> <p>6 well?</p> <p>7 A. No, it was only Home Office staff.</p> <p>8 Q. So after the pilot was implemented fully</p> <p>9 in October 2017, the team remained split into those</p> <p>10 two areas, did it: compliance and detainee engagement?</p> <p>11 A. Yes.</p> <p>12 Q. The purpose of splitting the team was to ensure that</p> <p>13 there was a dedicated focus on compliance activity by</p> <p>14 one particular team and transfer the responsibility</p> <p>15 entirely for detainee engagement to a different team; is</p> <p>16 that right?</p> <p>17 A. Yes, and to a totally different directorate, yes.</p> <p>18 Q. What was the benefit to monitoring the contract of</p> <p>19 having those separate teams?</p> <p>20 A. So, historically, as a combined team, the focus had been</p> <p>21 on the engagement aspect. The main reason for that was</p> <p>22 that they carried out quite a reactive function: so they</p> <p>23 were tasked by case owners to serve paperwork on</p> <p>24 a detainee; they had KPIs around inducting detainees</p> <p>25 within 72 hours; and KPIs around ensuring that any</p> <p style="text-align: center;">Page 111</p>
<p>1 carrying out during that time?</p> <p>2 A. I think I provided in my evidence what the kind of split</p> <p>3 was between the two teams and the responsibilities that</p> <p>4 sat under each team, but the kind of -- it's, I suppose,</p> <p>5 the "everything else", but attending the meetings on</p> <p>6 site, IMB clerking, compliance activity.</p> <p>7 Q. Contract monitoring?</p> <p>8 A. Yeah.</p> <p>9 Q. Contractual meetings?</p> <p>10 A. Yep.</p> <p>11 Q. And interactions for the purpose of reviewing, as you</p> <p>12 have said, rule 40/42?</p> <p>13 A. Yes, Secretary of State type obligations.</p> <p>14 Q. The result of the pilot was a decision to roll out that</p> <p>15 model in 2017; is that right?</p> <p>16 A. Yes, that's correct.</p> <p>17 Q. What happened in the period of time between the pilot</p> <p>18 ending and the rollout in October 2017?</p> <p>19 A. So whilst the go-live date was October 2017, the</p> <p>20 decision to proceed I think happened in May 2017. So</p> <p>21 during that period, we maintained more engagement -- not</p> <p>22 the full model, because we didn't have the resource to</p> <p>23 be able to do that, not at this time -- I can't remember</p> <p>24 whether it sat under my area or not. But, yeah, so we</p> <p>25 maintained the model, but on a kind of reduced scale,</p> <p style="text-align: center;">Page 110</p>	<p>1 detainee who requested to see the Home Office was seen</p> <p>2 within 24 hours, and they couldn't control any of those</p> <p>3 inputs.</p> <p>4 So what, in the main, happened was that the team</p> <p>5 were incredibly busy doing that work and had limited</p> <p>6 time to focus on the compliance activity.</p> <p>7 Q. So it was --</p> <p>8 A. Or no control over their time to focus on the compliance</p> <p>9 activity.</p> <p>10 Q. So it was to increase the levels of resource in order to</p> <p>11 meet the compliance tasks?</p> <p>12 A. Yes, and to ensure they had control over.</p> <p>13 Q. Moving on, then, to the contract between the Home Office</p> <p>14 and G4S, you say in your statement that G4S were</p> <p>15 contracted to provide welfare, security, catering,</p> <p>16 cleaning and maintenance services at Brook House; is</p> <p>17 that right?</p> <p>18 A. Yes, that's right.</p> <p>19 Q. At paragraph 6 of your first witness statement, you say</p> <p>20 that you are responsible for oversight of the supplier</p> <p>21 contract, supplier performance and contract compliance;</p> <p>22 is that right?</p> <p>23 A. Mmm.</p> <p>24 Q. Does the contract include a requirement for G4S to</p> <p>25 comply with Home Office DSOs, the Detention Centre Rules</p> <p style="text-align: center;">Page 112</p>

<p>1 and Home Office policies?</p> <p>2 <b>A. So the current contract does. I don't think the</b></p> <p>3 <b>contract did at the time.</b></p> <p>4 Q. Why not?</p> <p>5 <b>A. I can't answer that.</b></p> <p>6 Q. Was it understood that part of your team's role was to</p> <p>7 ensure that DSOs, the Detention Centre Rules and</p> <p>8 Home Office policies were being complied with, even</p> <p>9 though it wasn't in the contract?</p> <p>10 <b>A. Yeah -- what, that G4S needed to ensure compliance?</b></p> <p>11 <b>Yes.</b></p> <p>12 Q. Well, you're the Home Office monitoring the contract.</p> <p>13 <b>A. Yes.</b></p> <p>14 Q. Did that monitoring and compliance role also include</p> <p>15 ensuring that G4S were complying with Home Office</p> <p>16 policies, DSOs and the Detention Centre Rules?</p> <p>17 <b>A. Sorry, yes, I understand. So, to the extent that I had</b></p> <p>18 <b>the time to be able to do that, yes.</b></p> <p>19 Q. Was that part of your and your team's responsibility?</p> <p>20 <b>A. Yeah, I think it -- yeah, I would say it is part of that</b></p> <p>21 <b>responsibility. I wouldn't say we were the only people</b></p> <p>22 <b>that did that.</b></p> <p>23 Q. Who else did?</p> <p>24 <b>A. There was an assurance team who also had responsibility</b></p> <p>25 <b>for doing things like assuring self audits, carrying out</b></p> <p style="text-align: center;">Page 113</p>	<p>1 <b>some time calculating how many hours different people</b></p> <p>2 <b>had spent on site, and the contract measure was around</b></p> <p>3 <b>number of hours of DCO time in a 24-hour period, and</b></p> <p>4 <b>that was calculated using that data set.</b></p> <p>5 Q. How did it come about that -- what was the reason for</p> <p>6 the staffing levels to be assessed by number of hours</p> <p>7 rather than by number of actual people, DCOs and DCMs?</p> <p>8 <b>A. So that predated me, so I don't know what the rationale</b></p> <p>9 <b>was for that, but that was certainly the process when</b></p> <p>10 <b>I arrived at the centre, as was explained to me.</b></p> <p>11 Q. Did you think that was the appropriate way for staffing</p> <p>12 levels to be assessed?</p> <p>13 <b>A. No, because when I was part of the team drafting the new</b></p> <p>14 <b>contract, we didn't do that because -- I think for</b></p> <p>15 <b>the -- some of the things that we have heard during</b></p> <p>16 <b>Panorama, it doesn't really give you any control over</b></p> <p>17 <b>where people are at any given time.</b></p> <p>18 Q. So did you raise that as a concern at the time?</p> <p>19 <b>A. Yes.</b></p> <p>20 Q. In terms of local performance assessment, there were</p> <p>21 physical checks of the centre itself; is that right?</p> <p>22 <b>A. Yes, on an ad hoc basis, yes, there were.</b></p> <p>23 Q. Was that by Paul Gasson?</p> <p>24 <b>A. Yes, and the team. So, on a daily basis, the team</b></p> <p>25 <b>responsible for emptying complaints boxes on each of</b></p> <p style="text-align: center;">Page 115</p>
<p>1 <b>thematic reviews on particular areas, and so where</b></p> <p>2 <b>a thematic review involved a detention centre rule, they</b></p> <p>3 <b>would have included that in their consideration.</b></p> <p>4 Q. How did you and your team know that -- check that G4S</p> <p>5 were fulfilling those obligations in relation to</p> <p>6 Home Office policies, implementation, DSOs and</p> <p>7 compliance with Detention Centre Rules?</p> <p>8 <b>A. We would have looked at the DESAAT review of self audits</b></p> <p>9 <b>and, where we had sufficient time to do so, we would</b></p> <p>10 <b>have dip sampled self audits ourselves.</b></p> <p>11 Q. Did you have sufficient time to do so?</p> <p>12 <b>A. Not routinely, no, and we weren't necessarily expected</b></p> <p>13 <b>to. So there was a KPI within the business plan in</b></p> <p>14 <b>detention that required the onsite team to carry out</b></p> <p>15 <b>seven hours' contract monitoring per week, that was the</b></p> <p>16 <b>expectation, and an acceptance that, in the main, that</b></p> <p>17 <b>didn't really stretch further than being able to have --</b></p> <p>18 <b>attend meetings.</b></p> <p>19 Q. I want to look at staffing levels. How were staffing</p> <p>20 levels assessed by the Home Office?</p> <p>21 <b>A. So there was a quite convoluted process to do with</b></p> <p>22 <b>clocked hours. So there was a tracker gate system,</b></p> <p>23 <b>biometric system, when you entered the building that</b></p> <p>24 <b>registered your time of arrival and your time of</b></p> <p>25 <b>departure, which produced a report that someone spent</b></p> <p style="text-align: center;">Page 114</p>	<p>1 <b>the residential units, so as part of that, they will</b></p> <p>2 <b>have gone onto each of the units and checked to, you</b></p> <p>3 <b>know, make sure things were looking clean, and there</b></p> <p>4 <b>were some cleaning checks carried out. I think they</b></p> <p>5 <b>might have checked three times a week at that point.</b></p> <p>6 <b>But there have been so many different changes, it's hard</b></p> <p>7 <b>to pinpoint what happened at what time.</b></p> <p>8 Q. Were those assessments recorded?</p> <p>9 <b>A. I couldn't answer. Paul would have dealt with that.</b></p> <p>10 Q. The contract contained KPIs, as you have said, key</p> <p>11 performance indicators; is that right?</p> <p>12 <b>A. Yes.</b></p> <p>13 Q. What happened if failures were identified that resulted</p> <p>14 in a KPI failure?</p> <p>15 <b>A. So they would have been -- if they were identified by my</b></p> <p>16 <b>team, they would have been put on an issues log, and</b></p> <p>17 <b>then if they were identified by G4S, they would have</b></p> <p>18 <b>been put on what they termed as a mitigation log. And</b></p> <p>19 <b>so -- then there was a weekly operational review meeting</b></p> <p>20 <b>attended by Paul Gasson, and I think either Ben or</b></p> <p>21 <b>Steve Skitt used to attend from G4S, where they would</b></p> <p>22 <b>review and discuss whether there was any appropriate</b></p> <p>23 <b>mitigation or whether it was appropriate to apply the</b></p> <p>24 <b>penalty points, and then that formed the basis for the</b></p> <p>25 <b>performance report that was produced at the end of</b></p> <p style="text-align: center;">Page 116</p>

<p>1     <b>the month.</b></p> <p>2     Q. So there was a monthly performance management report?</p> <p>3     <b>A. Correct.</b></p> <p>4     Q. And if the Home Office had determined that there had</p> <p>5       been a KPI failure, that would be recorded in that</p> <p>6       monthly performance report; is that right?</p> <p>7     <b>A. Yes, that's correct.</b></p> <p>8     Q. Can we just have a look at a blank one of those. It is</p> <p>9       &lt;HOM002040&gt;, please.</p> <p>10    <b>A. Where would I ...</b></p> <p>11    Q. It will come up on screen.</p> <p>12    <b>A. Thanks.</b></p> <p>13    Q. Is that the performance management report that was</p> <p>14       completed monthly in relation to KPI failures?</p> <p>15    <b>A. Yes, that's the report completed by G4S.</b></p> <p>16    Q. Who decides whether a failure falls within a particular</p> <p>17       category in there? Is it G4S or is it the Home Office?</p> <p>18    <b>A. So it's decided as part of the weekly operational review</b></p> <p>19       <b>meeting. That would have been discussed at that point,</b></p> <p>20       <b>and a decision made -- I mean, Home Office would have</b></p> <p>21       <b>the overriding decision, but usually it was</b></p> <p>22       <b>a collaboration between both partners.</b></p> <p>23    Q. So it was the G4S audits and compliance manager who</p> <p>24       completed this form?</p> <p>25    <b>A. Yes.</b></p> <p style="text-align: center;">Page 117</p>	<p>1     Q. -- by your staff?</p> <p>2     <b>A. Yes.</b></p> <p>3     Q. What was the focus of those interviews? What sort of</p> <p>4       things were they designed to elicit from detainees?</p> <p>5     <b>A. So things like making sure -- so some of it was about us</b></p> <p>6       <b>providing information, so making sure they understood</b></p> <p>7       <b>why they were there in detention, asking them if they</b></p> <p>8       <b>had any concerns, access to solicitors, bail, you know,</b></p> <p>9       <b>various different details, and then asking them if they</b></p> <p>10      <b>were okay.</b></p> <p>11    Q. Were any questions asked about G4S's performance or the</p> <p>12       staff's behaviour in those type of --</p> <p>13    <b>A. No, not explicitly, no.</b></p> <p>14    Q. Why not?</p> <p>15    <b>A. Just wasn't part of the induction process, or the</b></p> <p>16       <b>interview process.</b></p> <p>17    Q. The second you describe as assurance. What did that</p> <p>18       mean?</p> <p>19    <b>A. Can I turn to where that is?</b></p> <p>20    Q. Yes, of course. It is paragraph 23 of your first</p> <p>21       witness statement.</p> <p>22    THE CHAIR: In the first tab.</p> <p>23    MS SIMCOCK: Tab 1 should have your first witness statement,</p> <p>24       and it is paragraph 23.</p> <p>25    <b>A. Okay, yes. So I describe this in my statement as being</b></p> <p style="text-align: center;">Page 119</p>
<p>1     Q. Who at the Home Office would attend those meetings to</p> <p>2       have those discussions and have the final say?</p> <p>3     <b>A. Paul Gasson, Ian Castle. I attended a couple. I tried</b></p> <p>4       <b>not to attend because there was an appeals process, and</b></p> <p>5       <b>obviously if I'm part of the initial decision making,</b></p> <p>6       <b>then the appeal escalates further, so the general rule</b></p> <p>7       <b>of thumb would be that Ian, the area manager and the</b></p> <p>8       <b>immigration manager would have those discussions and</b></p> <p>9       <b>then, if there was a need for escalation, the escalation</b></p> <p>10      <b>would then come to me.</b></p> <p>11    Q. At paragraph 23, you say that in 2017 measures used to</p> <p>12       assess the G4S performance fell into three categories;</p> <p>13       is that right? We can go through them. The first is</p> <p>14       detainee engagement.</p> <p>15    <b>A. Yes, that's correct.</b></p> <p>16    Q. What did that mean?</p> <p>17    <b>A. So there were detainee engagement forums, there was</b></p> <p>18       <b>a consultative committee and a -- I think it was a food</b></p> <p>19       <b>committee, and then the detainee engagement that</b></p> <p>20       <b>happened between the engagement officers and the</b></p> <p>21       <b>individuals as part of their kind of immigration-related</b></p> <p>22       <b>engagement.</b></p> <p>23    Q. So there were effectively interviews carried out with</p> <p>24       detainees --</p> <p>25    <b>A. Yes.</b></p> <p style="text-align: center;">Page 118</p>	<p>1     <b>about sort of analysing data.</b></p> <p>2     Q. So staff attendance data on a monthly basis to assure</p> <p>3       contracted operational working hours were achieved,</p> <p>4       reviewing contract service delivery as issues emerge,</p> <p>5       which you decide as being ad hoc, through observing</p> <p>6       processes and assessing these against the contract</p> <p>7       requirements, and then reviewing evidence such as</p> <p>8       suicide and self-harm booklets -- that's the ACDT forms?</p> <p>9     <b>A. Yes.</b></p> <p>10    Q. And rule 40 and 42 documents?</p> <p>11    <b>A. Yes.</b></p> <p>12    Q. And engaging with staff. Again, was that something that</p> <p>13       your team was carrying out?</p> <p>14    <b>A. Yes, it was, yes.</b></p> <p>15    Q. What levels of staff would they engage with at G4S?</p> <p>16    <b>A. Routinely, I would say DCMs and DCOs.</b></p> <p>17    Q. The third you describe as information sources. What</p> <p>18       sort of information sources were reviewed?</p> <p>19    <b>A. So things like IMB reports, the Safer Community reports,</b></p> <p>20       <b>security reports, surveys.</b></p> <p>21    Q. There were meetings with the IMB. How often did they</p> <p>22       take place?</p> <p>23    <b>A. Formal IMB board meetings were on a monthly basis.</b></p> <p>24    Q. Who attended from the Home Office those meetings?</p> <p>25    <b>A. In the main, it would have been the immigration manager</b></p> <p style="text-align: center;">Page 120</p>

<p>1 or the area manager.</p> <p>2 Q. So Ian Castle or Paul Gasson?</p> <p>3 A. Or Paul Gasson, yes.</p> <p>4 Q. If action was necessary to be taken forward from those</p> <p>5 meetings, how was that progressed forward? How was</p> <p>6 action taken?</p> <p>7 A. So the role of the IMB clerk was to produce minutes of</p> <p>8 the meeting, and there was -- I think there was an</p> <p>9 action table as part of those minutes, or certainly all</p> <p>10 the actions were captured within the minutes, and then</p> <p>11 they were tracked through to the kind of regular</p> <p>12 meetings that happened.</p> <p>13 Q. In relation to the weekly issues log that you mentioned,</p> <p>14 what sort of thing would be recorded in the weekly</p> <p>15 issues log?</p> <p>16 A. So it might be failure -- you know, failure to clean the</p> <p>17 yard or rule 40 paperwork not being completed correctly,</p> <p>18 reception process not completed within the (inaudible)</p> <p>19 hour period. Those sorts of KPI-related issues.</p> <p>20 Q. Where they constituted a performance failure, they were</p> <p>21 also added to the performance log, which you have said</p> <p>22 G4S referred to as a mitigation log; is that right?</p> <p>23 A. Yes.</p> <p>24 Q. Then, if they constituted a KPI failure, as you have</p> <p>25 said, they would be progressed to the document we looked</p> <p style="text-align: right;">Page 121</p>	<p>1 Q. What sort of action would then be taken?</p> <p>2 A. We would have a discussion about it at the monthly</p> <p>3 operational review meeting.</p> <p>4 Q. How was that followed up? How did you ensure they</p> <p>5 weren't continually repeated?</p> <p>6 A. It depends on the particular situation and how easy they</p> <p>7 were to resolve. So an example of that during the</p> <p>8 period was repeat failures around visits and people</p> <p>9 being provided to the visits area on time. So that had</p> <p>10 become a repeat failure.</p> <p>11 It was raised at the operational review meeting</p> <p>12 I think it was either in June or July, and then,</p> <p>13 following that, an action was taken for there to be</p> <p>14 a meeting between both Home Office teams on site and G4S</p> <p>15 to work through what the issues were in relation to the</p> <p>16 delivery in that area; so were we unreasonably expecting</p> <p>17 G4S to produce people with very limited notice or was it</p> <p>18 an issue with G4S and their ability to produce people on</p> <p>19 time, was it a procedural issue on their part.</p> <p>20 So that then followed through and then we were able</p> <p>21 to track that through to the next monthly operational</p> <p>22 review meeting, where we would either conclude that it</p> <p>23 was something that was closed or it was an ongoing issue</p> <p>24 that still needed some follow-up.</p> <p>25 MS SIMCOCK: I see.</p> <p style="text-align: right;">Page 123</p>
<p>1 at on screen?</p> <p>2 A. Yes.</p> <p>3 Q. What sort of thing would constitute a performance</p> <p>4 failure?</p> <p>5 A. Same things as I have just described, but without --</p> <p>6 that hadn't been mitigated through it being part of an</p> <p>7 extraordinary event or, you know, something outside of</p> <p>8 the supplier's control or something that they hadn't</p> <p>9 been able to demonstrate they'd put in place procedures</p> <p>10 to prevent it reoccurring. They were generally the two</p> <p>11 areas that we would consider for mitigation.</p> <p>12 Q. So where there was mitigation, a performance failure</p> <p>13 wouldn't be recorded?</p> <p>14 A. Yes, but would have remained on the log. So it was</p> <p>15 recorded in that respect, but not presented in the</p> <p>16 performance report at the end of the month.</p> <p>17 Q. I see. So G4S produced that performance report for the</p> <p>18 Home Office monthly. Who was it sent to?</p> <p>19 A. So it was sent to commercial and I believe to</p> <p>20 Paul Gasson and Ian Castle. I didn't receive it.</p> <p>21 Q. What would happen if there were repeated failures?</p> <p>22 A. So repeat failures, so for the monthly operational</p> <p>23 review meeting we had a pre-meet, and during that</p> <p>24 meeting we'd discuss whether there were any emerging</p> <p>25 repeat failures.</p> <p style="text-align: right;">Page 122</p>	<p>1 Chair, that's an appropriate moment for a lunch</p> <p>2 break. Can I say 2.00 pm?</p> <p>3 THE CHAIR: Thank you very much. See you at 2.00 pm.</p> <p>4 (1.10 pm)</p> <p>5 (The short adjournment)</p> <p>6 (2.00 pm)</p> <p>7 MS SIMCOCK: I'd like to look at some of the schedules to</p> <p>8 the contract now. Could we have on screen, please,</p> <p>9 &lt;HOM000798&gt;. This is the front page of schedule D,</p> <p>10 which is the operational specification. I want to just</p> <p>11 look at a couple of things that are covered by the</p> <p>12 operational specification in schedule G. Welfare and</p> <p>13 facilities are dealt with from page 79 onwards. Can we</p> <p>14 look at page 79, please. We can see that some of</p> <p>15 the things that are covered under the welfare of</p> <p>16 detainees relate to the provision of clothing by the</p> <p>17 contractor. Is that right?</p> <p>18 A. Yes, that's correct.</p> <p>19 Q. We can also see, over the page to page 80, and moving</p> <p>20 down, that matters of hygiene are also covered,</p> <p>21 including providing living conditions that are hygienic</p> <p>22 and at least equivalent to those in the community. How</p> <p>23 was that monitored?</p> <p>24 A. We wouldn't have routinely monitored that.</p> <p>25 Q. In relation --</p> <p style="text-align: right;">Page 124</p>

<p>1 <b>A. Not to my knowledge.</b></p> <p>2 Q. -- to activities, if we can look at page 84, please --</p> <p>3 <b>A. Sorry, can I just go back to the hygienic point?</b></p> <p>4 Q. Yes.</p> <p>5 <b>A. There was an MoJ subject matter expert who was</b></p> <p>6 <b>responsible for auditing maintenance and cleaning, so he</b></p> <p>7 <b>would have provided a report on a monthly basis that</b></p> <p>8 <b>would have told us whether the living conditions were</b></p> <p>9 <b>hygienic. So whilst it wasn't something necessarily</b></p> <p>10 <b>done by my team, apart from kind of, like, visual</b></p> <p>11 <b>observation through daily walk-arounds, it would have</b></p> <p>12 <b>been something that would have been scrutinised by him</b></p> <p>13 <b>and a report would have been produced that would have</b></p> <p>14 <b>been sent to myself and Paul Gasson within the team for</b></p> <p>15 <b>consideration, but it would also have been shared with</b></p> <p>16 <b>G4S. It was something that we picked up as part of</b></p> <p>17 <b>the monthly operational review meetings, whether there</b></p> <p>18 <b>were any learning points from the audits provided.</b></p> <p>19 Q. In relation to activities, then, page 84:</p> <p>20 "The contractor shall encourage and provide</p> <p>21 a detainee with an opportunity to participate in</p> <p>22 activities which will be part of a regime designed to</p> <p>23 provide for their recreational and intellectual needs</p> <p>24 and the relief of boredom and which reflect the age,</p> <p>25 gender, cultural and ethnic needs of a diverse</p> <p style="text-align: center;">Page 125</p>	<p>1 aware of that at the time?</p> <p>2 <b>A. No, I wasn't, no.</b></p> <p>3 Q. What's the explanation for that, given what you have</p> <p>4 just told me about monitoring?</p> <p>5 <b>A. That it either hadn't been identified by the Independent</b></p> <p>6 <b>Monitoring Board or by our team, and certainly, in my</b></p> <p>7 <b>experience walking around, from an education</b></p> <p>8 <b>perspective, I saw the -- Sebastian, the educational</b></p> <p>9 <b>lead, on a regular basis carrying out -- so from my own</b></p> <p>10 <b>observation, I hadn't observed there being a problem.</b></p> <p>11 <b>It hadn't come out through the detainee consultative</b></p> <p>12 <b>meetings either, so there were various different methods</b></p> <p>13 <b>of ensuring and gathering information, and, through</b></p> <p>14 <b>that, those different methods, it hadn't arisen that</b></p> <p>15 <b>there was a problem.</b></p> <p>16 Q. Schedule C, you tell us in your statement, concerned</p> <p>17 maintenance management. That covered the physical</p> <p>18 maintenance of buildings and facilities; is that right?</p> <p>19 <b>A. Yes, and possibly cleaning as well. I can't remember</b></p> <p>20 <b>whether that was in that schedule or in a separate</b></p> <p>21 <b>schedule.</b></p> <p>22 Q. If we look at schedule G, this concerned performance</p> <p>23 evaluation; is that right?</p> <p>24 <b>A. Yes, that's correct.</b></p> <p>25 Q. So the KPIs that we have talked about, the ones that</p> <p style="text-align: center;">Page 127</p>
<p>1 population."</p> <p>2 It goes on to provide:</p> <p>3 "The contractor shall ensure that:</p> <p>4 "A detainee will have access to activities, under</p> <p>5 proper supervision that ensures safety and good order."</p> <p>6 Then over the page, please:</p> <p>7 "There is a range of education, recreation and PE</p> <p>8 activities for detainees."</p> <p>9 How was that monitored?</p> <p>10 <b>A. So as part of the monthly operational review meeting,</b></p> <p>11 <b>there were aspects of the regime that were covered in</b></p> <p>12 <b>the KPI. So there was a pack of information, a report,</b></p> <p>13 <b>provided, produced by G4S and they would have reported,</b></p> <p>14 <b>self-reported, against that. And then IMB would have</b></p> <p>15 <b>checked our specs off that. And we, if we had any</b></p> <p>16 <b>inkling, or anything coming out of the weekly IMB</b></p> <p>17 <b>reports where they had any concerns, or any concerns</b></p> <p>18 <b>that we'd identified in any of our ad hoc walk-arounds,</b></p> <p>19 <b>then we would have followed that up with more systematic</b></p> <p>20 <b>reviews over a period to satisfy ourselves that there</b></p> <p>21 <b>was or wasn't an issue.</b></p> <p>22 Q. The inquiry has heard some evidence that there were</p> <p>23 issues with the provision of activities related to</p> <p>24 understaffing, that there often weren't enough staff to</p> <p>25 provide activities during the relevant period. Were you</p> <p style="text-align: center;">Page 126</p>	<p>1 were relevant to the welfare of detainees would have</p> <p>2 been contained within schedule G; is that right?</p> <p>3 <b>A. Yes, that's correct.</b></p> <p>4 Q. If we show on screen &lt;HOM000921&gt;, please, at page 1,</p> <p>5 here we find schedule G, "Performance evaluation". If</p> <p>6 we look at page 2, please. The performance measures</p> <p>7 that were relevant to the welfare of detainees fell</p> <p>8 under (ii) "Failure to provide available services".</p> <p>9 There are listed five headings: failure to make</p> <p>10 available full detainee communication service; failure</p> <p>11 to make available full healthcare service; failure to</p> <p>12 make available full establishment cleaning services;</p> <p>13 availability of regime opportunity; and availability of</p> <p>14 maintenance. How were those matters monitored or</p> <p>15 checked in order to assess whether performance points</p> <p>16 should be applied?</p> <p>17 <b>A. In the same way as I've already described, either on an</b></p> <p>18 <b>ad hoc basis or through emerging issues identified in</b></p> <p>19 <b>various different forums of reports, sort of linked to</b></p> <p>20 <b>the seven-hour KPI target for contract monitoring.</b></p> <p>21 Q. Other performance indicators relevant to welfare were at</p> <p>22 (iii), "Untoward events", which we see at the bottom of</p> <p>23 the screen there, and we see there self-harm resulting</p> <p>24 in injury. Over the page, there were, at (i) and (j),</p> <p>25 a failure to admit and failure to release. And that</p> <p style="text-align: center;">Page 128</p>



<p>1 related to the processing time for both of those</p> <p>2 procedures in relation to detainees, did it, to ensure</p> <p>3 that delays were identified and rectified?</p> <p>4 <b>A. Yes, that's correct.</b></p> <p>5 Q. There was a KPI related to staffing also on this page at</p> <p>6 (o). What did the KPI require, in terms of staffing?</p> <p>7 <b>A. That a particular number of hours, operational hours,</b></p> <p>8 <b>detainee custody officer hours, were delivered within</b></p> <p>9 <b>a 24-hour period.</b></p> <p>10 Q. Was there any requirement on you or your team to report</p> <p>11 on the overall welfare of detained persons outside of</p> <p>12 these processes?</p> <p>13 <b>A. No, there wasn't, no.</b></p> <p>14 Q. Why not?</p> <p>15 <b>A. I can't speak for why that wasn't requested.</b></p> <p>16 Q. Do you have any understanding of why that wouldn't be</p> <p>17 included?</p> <p>18 <b>A. No, I don't.</b></p> <p>19 Q. Was there any requirement by anyone else in the</p> <p>20 Home Office team to report on the overall welfare of</p> <p>21 detained persons outside of these processes?</p> <p>22 <b>A. Not within the Home Office team, but I would have</b></p> <p>23 <b>expected the Independent Monitoring Board and HMIP,</b></p> <p>24 <b>other bodies, to have reported on that.</b></p> <p>25 Q. Penalties. As we see here, penalty points can be</p> <p style="text-align: center;">Page 129</p>	<p>1 Q. So this is the monthly performance management report.</p> <p>2 We see that it is for the month ending June '17. At</p> <p>3 page 2, please, we see there that the report lists</p> <p>4 various failures, and in the columns to the right-hand</p> <p>5 side, you see the penalty points applied. Is that</p> <p>6 right?</p> <p>7 <b>A. Yes.</b></p> <p>8 Q. At page 3, those deal with complaints and we can see</p> <p>9 there the heading -- it comes under "Untoward events".</p> <p>10 At page 13, please, there, at the bottom, do we see the</p> <p>11 total number of incidents, the total number of points</p> <p>12 incurred in that particular month, and then the total</p> <p>13 mitigated points submitted to the Home Office, so what</p> <p>14 G4S were submitting, is that right --</p> <p>15 <b>A. Yes.</b></p> <p>16 Q. -- in the fourth column? Then in the far right, the</p> <p>17 agreed total number of points that were applied?</p> <p>18 <b>A. Yes.</b></p> <p>19 Q. That process of mitigation and agreeing the total number</p> <p>20 of points was carried out between the Home Office and</p> <p>21 G4S, as you've explained in the --</p> <p>22 <b>A. Part of the weekly operational review meetings, yes.</b></p> <p>23 Q. If we look at page 14, please, there we see the staffing</p> <p>24 levels. Is that right? We see DCO hours in the box at</p> <p>25 the bottom, and the number of points incurred and the</p> <p style="text-align: center;">Page 131</p>
<p>1 applied under schedule G for failures in performance; is</p> <p>2 that right? Those are the numbers we see in the</p> <p>3 right-hand column?</p> <p>4 <b>A. That's correct.</b></p> <p>5 Q. The more serious the failure, the higher the number of</p> <p>6 points; would that broadly be correct?</p> <p>7 <b>A. Yes.</b></p> <p>8 Q. Those points translated into a deduction the Home Office</p> <p>9 made to G4S's monthly fee for carrying out the contract;</p> <p>10 is that right?</p> <p>11 <b>A. So I think that was the process. It was either deducted</b></p> <p>12 <b>or a separate invoice, a refund note, was issued.</b></p> <p>13 <b>I can't remember which way they did it, but it was</b></p> <p>14 <b>offset against the monthly fee, yes.</b></p> <p>15 Q. So, effectively, they were paid less for the contract</p> <p>16 because they'd incurred penalty points?</p> <p>17 <b>A. Yes, correct.</b></p> <p>18 Q. That provided a financial incentive to keep to the terms</p> <p>19 of the contract?</p> <p>20 <b>A. Yes. Yes, it did. Sorry.</b></p> <p>21 Q. Can we look, then, at one of the monthly performance</p> <p>22 management reports. This one is from June 2017. It is</p> <p>23 &lt;CJS004586&gt;, please. If we just look at the first page</p> <p>24 first. Does this look familiar, as a document, to you?</p> <p>25 <b>A. Yes, it does.</b></p> <p style="text-align: center;">Page 130</p>	<p>1 total at the bottom in red. Is that right?</p> <p>2 <b>A. Yes.</b></p> <p>3 Q. So in this particular month, there were 300 points</p> <p>4 incurred. We see the contracted hours were 668, 655 and</p> <p>5 655. And the hours worked, in the second column, show</p> <p>6 how far below the contracted hours that were actually</p> <p>7 worked; is that right?</p> <p>8 <b>A. That's correct.</b></p> <p>9 Q. At page 15, we look at there the statistics for the end</p> <p>10 of the month; is that right? How were those statistics</p> <p>11 used by the Home Office?</p> <p>12 <b>A. I can't speak for how -- sorry, I'm just having a quick</b></p> <p>13 <b>read through the form. So I can't speak for whether</b></p> <p>14 <b>this was done routinely, but there was some reviewing to</b></p> <p>15 <b>make sure we had the use of force reports for the number</b></p> <p>16 <b>of use of forces. So light touch kind of</b></p> <p>17 <b>reconciliation.</b></p> <p>18 Q. At page 16, that contains the distribution list. Do we</p> <p>19 see you on there?</p> <p>20 <b>A. Yes.</b></p> <p>21 Q. So you would have received this report along with all of</p> <p>22 those roles listed there at the bottom?</p> <p>23 <b>A. Yes, for that report, I did. I don't know whether that</b></p> <p>24 <b>was routinely -- I do recall seeing some reports.</b></p> <p>25 <b>Whether I got every single one of them, I don't know.</b></p> <p style="text-align: center;">Page 132</p>

33 (Pages 129 to 132)

<p>1 <b>It wasn't something that I paid particular attention to.</b></p> <p>2 Q. Was this the main recording of the monitoring of</p> <p>3 the performance of the contract, these monthly reports?</p> <p>4 <b>A. So this was the presentation of G4S, and then there was</b></p> <p>5 <b>a document that went from commercial back to G4S</b></p> <p>6 <b>confirming the contractual position.</b></p> <p>7 Q. Just looking at staffing levels a bit further, then,</p> <p>8 they're drawn from the performance measures of</p> <p>9 the contract in schedule G, as we looked at.</p> <p>10 <b>A. Yes.</b></p> <p>11 Q. During April to June 2017, you have already said that</p> <p>12 Tinsley House was closed and the staff there redeployed</p> <p>13 over to Brook House; is that right?</p> <p>14 <b>A. Yes, in the main, yes.</b></p> <p>15 Q. Were staffing levels at Brook House higher than they</p> <p>16 would otherwise have been?</p> <p>17 <b>A. Yes, you would expect that to be the case if staff were</b></p> <p>18 <b>deployed, yes.</b></p> <p>19 Q. At paragraph 61 of your first witness statement, you</p> <p>20 refer to a staffing uplift, and you say that Brook House</p> <p>21 was operating below the staffing levels agreed as part</p> <p>22 of the staffing uplift for the additional 60 beds</p> <p>23 in January 2017. Can you just explain what the staffing</p> <p>24 uplift was?</p> <p>25 <b>A. So, as part of the additional beds, the refurbishment at</b></p> <p style="text-align: center;">Page 133</p>	<p>1 represents, and it says 82.54, 79.18, 77.63 and 73.54.</p> <p>2 What's the significance of staffing levels falling below</p> <p>3 95 per cent?</p> <p>4 <b>A. So 95 per cent was the contracted minimum staffing level</b></p> <p>5 <b>for the contract.</b></p> <p>6 Q. So it was to do with whether penalties would be --</p> <p>7 <b>A. Yes.</b></p> <p>8 Q. -- applied at that stage?</p> <p>9 <b>A. Yes.</b></p> <p>10 Q. Were greater penalties applied the more it fell below</p> <p>11 95 per cent, or was it just that trigger point?</p> <p>12 <b>A. It was a combination of -- so, no. In answer to your</b></p> <p>13 <b>question, no.</b></p> <p>14 Q. We have just established that because staff had moved</p> <p>15 over from Tinsley House to Brook House, there were more</p> <p>16 staff at Brook House, but there were a number of</p> <p>17 occasions when the operational hours fell below the</p> <p>18 contracted terms in this period, is that right, even</p> <p>19 though staff had moved over?</p> <p>20 <b>A. So Tinsley re-opened in May, so from my analysis of that</b></p> <p>21 <b>period of time, the staffing levels were sufficient</b></p> <p>22 <b>while Tinsley was closed, and it was only on the</b></p> <p>23 <b>re-opening of Tinsley House did the staffing hours</b></p> <p>24 <b>become a problem.</b></p> <p>25 Q. I see. You deal in your statement with the measurement</p> <p style="text-align: center;">Page 135</p>
<p>1 <b>Tinsley House and the works undertaken at Brook House,</b></p> <p>2 <b>there were -- I think it was a total of 17 additional</b></p> <p>3 <b>staff agreed for both centres, and I think that was</b></p> <p>4 <b>split with 13 for Brook House and the remainder for</b></p> <p>5 <b>Tinsley House.</b></p> <p>6 Q. That was in relation to the 60 beds that had been added?</p> <p>7 <b>A. 60 beds and the additional beds that were as part of</b></p> <p>8 <b>the refit of Tinsley House.</b></p> <p>9 Q. Looking, then, at May to August, you deal in your</p> <p>10 statement with what the staffing levels were. We can</p> <p>11 see from that that the staffing level fell below</p> <p>12 95 per cent in May, June, July and August on several</p> <p>13 days where staffing levels were between 73.54 and</p> <p>14 82.54 per cent. What's the significance of measuring</p> <p>15 staffing levels falling below 95 per cent?</p> <p>16 <b>A. Can I turn to that part of ...</b></p> <p>17 Q. Yes, of course, it is paragraph 61.</p> <p>18 <b>A. That's in 1, is it?</b></p> <p>19 Q. Tab 1, yes. Do you see the table there? So there were</p> <p>20 days when the new staffing levels minimum number of</p> <p>21 operational hours fell below 95 per cent. In May there</p> <p>22 were five, in June there were 22, in July there were 24</p> <p>23 and in August there were 29.</p> <p>24 <b>A. Yes.</b></p> <p>25 Q. Then the percentage of days in the month this</p> <p style="text-align: center;">Page 134</p>	<p>1 of performance in relation to the figures that were</p> <p>2 applied. Were, during this time -- was, during this</p> <p>3 time, performance being measured against too low</p> <p>4 a figure so that performance was easier to achieve?</p> <p>5 <b>A. I don't think the intention was that the performance was</b></p> <p>6 <b>easier to achieve. The contractual -- a contracted</b></p> <p>7 <b>number of hours hadn't been changed within the contract</b></p> <p>8 <b>to match the uplift. That didn't happen at the time</b></p> <p>9 <b>that the notice of change was agreed between G4S and</b></p> <p>10 <b>commercial. So, therefore, because the calculation</b></p> <p>11 <b>hadn't been done, it was -- no-one kind of had</b></p> <p>12 <b>a definitive number to measure against. So</b></p> <p>13 <b>contractually, until that was changed, the contractor,</b></p> <p>14 <b>the supplier, was only required to deliver against what</b></p> <p>15 <b>was in the contract.</b></p> <p>16 Q. And that figure was lower than it should have been?</p> <p>17 <b>A. Lower than -- yes, lower than it should have been.</b></p> <p>18 Q. Whose responsibility was it for updating that? Why</p> <p>19 wasn't it done at the time it should have been?</p> <p>20 <b>A. I mean, I think it was a combination of G4S and</b></p> <p>21 <b>commercial, both should have taken steps when they were</b></p> <p>22 <b>working through that notice of change to make sure that</b></p> <p>23 <b>was done in totality to include the detailed staffing</b></p> <p>24 <b>table and how that resulted in X number of hours within</b></p> <p>25 <b>a 24-hour period, if that was still to be maintained as</b></p> <p style="text-align: center;">Page 136</p>

<p>1 the measure.</p> <p>2 Q. How did that discrepancy come to light eventually?</p> <p>3 A. Sorry, and it is from memory, because I didn't really</p> <p>4 have detailed records, I recall Simon Levitt, the deputy</p> <p>5 immigration manager, raising this with me, I would</p> <p>6 probably say around June/July time, which was possibly</p> <p>7 following the Tinsley House staff going back. I'm only</p> <p>8 making that correlation because of the timing that</p> <p>9 I think it happened and when the Tinsley House -- when</p> <p>10 Tinsley House re-opened. I believe that was following</p> <p>11 a discussion between him and Michelle Brown. They</p> <p>12 routinely met to talk about the sort of analysis around</p> <p>13 clocked hours, et cetera, and the performance and</p> <p>14 management of that particular aspect of the contract.</p> <p>15 Then I raised that with commercial as being an</p> <p>16 outstanding issue that urgently needed to be resolved.</p> <p>17 Q. We know that the penalty charged in relation to not</p> <p>18 meeting staffing levels from June to August 2017 was</p> <p>19 £2,250. Do you think that's an adequate disincentive</p> <p>20 for understaffing?</p> <p>21 A. Sorry, can you repeat the question? Sorry.</p> <p>22 Q. We know that the penalty charged in relation to not</p> <p>23 meeting staffing levels for the three-month period</p> <p>24 between June and August 2017 was £2,250. Do you think</p> <p>25 that that's an adequate disincentive for understaffing?</p> <p style="text-align: center;">Page 137</p>	<p>1 internal motives, I can't speak to that, I'm afraid.</p> <p>2 I wasn't aware of it being about money.</p> <p>3 Q. Sarah Newland and Nathan Ward also gave evidence that</p> <p>4 G4S received monthly fixed fees for salaries even on</p> <p>5 unfilled staff vacancies, and that G4S would not fill</p> <p>6 those roles to save the cost and would thus profit from</p> <p>7 not properly staffing. Penalty points for understaffing</p> <p>8 were much less than the fixed fees for unfilled staff</p> <p>9 vacancies. Were you aware of that practice at the time?</p> <p>10 A. No, and the data doesn't suggest large gaps in between</p> <p>11 what we were funding and the number of staff in post.</p> <p>12 So in August, there were 130 DCOs in post against the</p> <p>13 uplifted amount of 145, and they had continued to</p> <p>14 recruit. Attrition levels were roughly sort of five or</p> <p>15 six per month around that period of time. So in order</p> <p>16 to sustain that, they had continued to recruit. And</p> <p>17 I remember having conversations with Ben during the</p> <p>18 period of time about recruiting to meet the uplift in</p> <p>19 staff and the challenges around onboarding staff with as</p> <p>20 many staff leaving as there were, people being</p> <p>21 recruited, so you were never kind of getting the net</p> <p>22 gain. So I certainly -- from the conversations that</p> <p>23 I had and the MI that I'd looked at, I haven't --</p> <p>24 I never drew that conclusion, no.</p> <p>25 Q. If we look then at schedule D, section 14 is headed</p> <p style="text-align: center;">Page 139</p>
<p>1 A. So can I clarify whether that related to the amount at</p> <p>2 the time? Because there was work undertaken, once the</p> <p>3 contract change had been rectified, to retrospectively</p> <p>4 apply the performance measures, and I -- from memory, it</p> <p>5 was far greater sums than that.</p> <p>6 Q. I see. So you think that the sum, eventually, charged</p> <p>7 was greater and that that --</p> <p>8 A. Far greater, yes.</p> <p>9 Q. -- did provide a disincentive? In relation to staffing</p> <p>10 as between Tinsley House and Brook House, three members</p> <p>11 of the senior management team -- Michelle Brown,</p> <p>12 Sarah Newland and Nathan Ward -- had recorded a practice</p> <p>13 of staff being moved from Tinsley House to Brook House</p> <p>14 when there were short staffing issues because the</p> <p>15 penalty points were cheaper at Tinsley House and their</p> <p>16 collective evidence suggests that that was a practice</p> <p>17 that was ongoing for a period of time. Were you aware</p> <p>18 of that practice happening in 2017?</p> <p>19 A. So I was aware of the deployment from Tinsley to</p> <p>20 Brook House and the rationale presented to me was an</p> <p>21 operational one. So if there were lower numbers of</p> <p>22 individuals being accommodated at Tinsley House and more</p> <p>23 risk to be managed at Brook House, then the deployment,</p> <p>24 from an operational perspective, seemed like a -- the</p> <p>25 redeployment seemed like a good rationale. For their</p> <p style="text-align: center;">Page 138</p>	<p>1 "Detainees at risk". Is that, which we can look at, at</p> <p>2 &lt;HOM000798&gt;, at page 148, please -- oh, I think it is</p> <p>3 internal page -- maybe it is internal page 146. Thank</p> <p>4 you. So this is headed "Detainees at risk". This is in</p> <p>5 the operational specification. Is this what there is in</p> <p>6 the contract about operational requirements to safeguard</p> <p>7 detainees at risk in detention?</p> <p>8 A. Yeah, I think this is the extent -- I think there are</p> <p>9 a couple more pages to it. I think it goes on to talk</p> <p>10 about training --</p> <p>11 Q. Yes, 147 --</p> <p>12 A. Yes.</p> <p>13 Q. We know there is one KPI in schedule G in relation to</p> <p>14 self-harm. We looked at it before on the screen:</p> <p>15 "An incident of self-harm is a KPI failure when it</p> <p>16 results in injury and involves a failure by G4S to</p> <p>17 follow procedures for the safety of detainees."</p> <p>18 Is that right?</p> <p>19 A. Yes.</p> <p>20 Q. Who decided when it involved a failure by G4S to follow</p> <p>21 procedures for the safety of detainees?</p> <p>22 A. In the main, that would have been G4S, albeit issues may</p> <p>23 have come to light. So there was a Safer Community</p> <p>24 meeting that took place on a monthly basis that reviewed</p> <p>25 the list of self-harm incidents and looked at some trend</p> <p style="text-align: center;">Page 140</p>

<p>1 activity, attended by healthcare, Samaritans,</p> <p>2 Forward Trust, or the equivalent at the time, supplier</p> <p>3 and Home Office. But, in the main, it would have been</p> <p>4 G4S, unless anything emerged as a result of those</p> <p>5 enquiries.</p> <p>6 Q. Under "Untoward events", there are no other KPIs, other</p> <p>7 than the self-harm one that concern at-risk detainees,</p> <p>8 and there is nothing in the KPIs or schedule G that</p> <p>9 addresses rules 34 and 35; is that right?</p> <p>10 A. No, there wouldn't be within this contract, because</p> <p>11 rules 34 are about healthcare appointments and</p> <p>12 healthcare isn't covered. It's provided as a separately</p> <p>13 contracted-out service through NHS England.</p> <p>14 Q. Is that your understanding of the reason why rules 34</p> <p>15 and 35 aren't in this contract?</p> <p>16 A. I wouldn't expect to see them in this contract.</p> <p>17 Q. There is nothing about the use or misuse --</p> <p>18 A. Sorry, can I correct that? That doesn't relate to 35.</p> <p>19 That was particular to rule 34.</p> <p>20 Q. There's nothing in the contract about the use or misuse</p> <p>21 of rules 40 or 42, is there?</p> <p>22 A. Not that I can recall.</p> <p>23 Q. Or the use or misuse of use of force?</p> <p>24 A. Not that I can recall, no.</p> <p>25 Q. There is nothing about the Adults at Risk policy?</p> <p style="text-align: center;">Page 141</p>	<p>1 for G4S to report to the Home Office more broadly about</p> <p>2 the overall welfare of detainees and overall quality of</p> <p>3 life, and you have accepted that you didn't think there</p> <p>4 was any obligation on you to do so. Is that right?</p> <p>5 A. Yes, I was never asked to, I think. You asked me ...</p> <p>6 Q. Mr Gasson said in evidence that the structure of</p> <p>7 the contract prioritised security over welfare. Would</p> <p>8 you agree with that?</p> <p>9 A. I think there's a balance between the two in the</p> <p>10 contract.</p> <p>11 Q. How did you and your team monitor contractor compliance</p> <p>12 with DSOs, such as the DSO on rule 35?</p> <p>13 A. As I've described, our general approach to compliance</p> <p>14 activity at the time, limited by resource, was ad hoc.</p> <p>15 Sorry, just to add to that, the assurance team that</p> <p>16 I mentioned earlier on did do thematic reviews around</p> <p>17 particular DSOs. So they reviewed room sharing risk</p> <p>18 assessment, they carried out a review on rule 40/42</p> <p>19 implementation. So they had a programme for the year on</p> <p>20 the different thematic areas that they were going to</p> <p>21 look at.</p> <p>22 Q. We know that there were 60 incidents of self-harm over</p> <p>23 the five months of the relevant period, but there were</p> <p>24 no reports on this under "Untoward events" under the</p> <p>25 contract. What's the explanation for that, in your</p> <p style="text-align: center;">Page 143</p>
<p>1 A. It didn't exist when this contract was written.</p> <p>2 Q. Agreed. But certainly there was no amendment to the</p> <p>3 contract --</p> <p>4 A. No.</p> <p>5 Q. -- when it came in?</p> <p>6 A. No.</p> <p>7 Q. Was it the expectation that G4S and Home Office staff on</p> <p>8 the ground would ensure that the Adults at Risk policy</p> <p>9 was implemented effectively?</p> <p>10 A. Yes.</p> <p>11 Q. How was that expectation communicated?</p> <p>12 A. So the Adults at Risk policy was introduced, sorry, from</p> <p>13 memory, I think around September '16, around then, and</p> <p>14 I think there were various questions asked of</p> <p>15 the service delivery managers about how processes were</p> <p>16 working. I can't remember there being a kind of direct</p> <p>17 instruction in relation to that.</p> <p>18 Q. How was the implementation of that policy overseen on</p> <p>19 the ground?</p> <p>20 A. So, from my perspective, I carried out a review</p> <p>21 during March and documented my findings of the review</p> <p>22 and sent that to Clare Checkfield, who was the director</p> <p>23 at the time.</p> <p>24 Q. We will come to that in a bit more detail in a moment.</p> <p>25 Mr Gasson gave evidence that there was no requirement</p> <p style="text-align: center;">Page 142</p>	<p>1 view?</p> <p>2 A. Contractually, you would need to -- the supplier would</p> <p>3 need to have failed procedurally in order for points to</p> <p>4 be applied.</p> <p>5 Q. So none of those 60 involved any failure to follow</p> <p>6 procedures, do you think?</p> <p>7 A. That resulted in the self-harm occurring, that would be</p> <p>8 the declaration from G4S, and presumably during the</p> <p>9 Safer Community meetings, no issues were raised by any</p> <p>10 of the multi-disciplinary teams that would have been</p> <p>11 involved in that event.</p> <p>12 Q. How did the Home Office check that that was right, that</p> <p>13 that was the case?</p> <p>14 A. We wouldn't have checked, but in a multi-disciplinary</p> <p>15 environment, the Safer Community teams were attended by</p> <p>16 healthcare, who would have been part of a response to</p> <p>17 a self-harm incident, the supplier, the Home Office</p> <p>18 team, you know, there's a number of people involved, the</p> <p>19 IMB. If there had been an issue, you would have</p> <p>20 expected -- a procedural issue, you would have expected</p> <p>21 someone to have raised that. It's also worth saying</p> <p>22 that, for a lot of the self-harm incidents, that's the</p> <p>23 first occurrence of any suicidal or self-harm attempts.</p> <p>24 So if you look at the data set, the majority of ACDT</p> <p>25 booklets were opened as a result of that initial</p> <p style="text-align: center;">Page 144</p>

<p>1 self-harm.</p> <p>2 Q. Mr Gasson accepted that there was a reliance on G4S</p> <p>3 self-reporting a failure to follow procedures. Would</p> <p>4 you agree with that?</p> <p>5 <b>A. Yeah, I would agree with that but, as I said, there is</b></p> <p>6 <b>scrutiny as part of the Safer Community meeting as well.</b></p> <p>7 Q. Do you think that's sufficient?</p> <p>8 <b>A. I think the right people are at those meetings. I, on</b></p> <p>9 <b>reflection, wonder whether the right questions are being</b></p> <p>10 <b>asked of the people.</b></p> <p>11 Q. Ian Castle gave some evidence that dependency on</p> <p>12 self-reporting can be problematic because G4S were</p> <p>13 effectively disincentivised from reporting contractual</p> <p>14 failures because, effectively, it would cost them money.</p> <p>15 Would you agree with that?</p> <p>16 <b>A. I mean, there's an element of trust in that contractual</b></p> <p>17 <b>relationship, that people do report properly, and where</b></p> <p>18 <b>things hadn't been reported, I know that Paul had</b></p> <p>19 <b>applied measures around failure to report as</b></p> <p>20 <b>a performance measure linked to failure to report</b></p> <p>21 <b>a performance failure. So, you know, incentivised not</b></p> <p>22 <b>to report. It's a matter of trust, I think.</b></p> <p>23 Q. Do you think that the KPI is sufficient to safeguard</p> <p>24 detainees at risk of self-harm, given it focuses on</p> <p>25 procedure, as opposed to the incidents of self-harm</p> <p style="text-align: right;">Page 145</p>	<p>1 <b>A. To an extent, yes. Or making sure that at least</b></p> <p>2 <b>they're -- there's a consideration given to that.</b></p> <p>3 Q. Isn't part of the monitoring of performance to do with</p> <p>4 the implementation of those policies on the ground, such</p> <p>5 as the Adults at Risk policy, which was part of your</p> <p>6 team, you and your team's responsibility, how was the</p> <p>7 contract ensuring the safeguarding of those at risk when</p> <p>8 the -- in relation to self-harm, it was really only</p> <p>9 about procedure?</p> <p>10 <b>A. I don't -- that suggests there wasn't any care or</b></p> <p>11 <b>consideration to the individuals, and I don't think that</b></p> <p>12 <b>was the case for the people who were working on the</b></p> <p>13 <b>ground.</b></p> <p>14 Q. You deal with the Adults at Risk policy at paragraph 28</p> <p>15 of your statement, and you say:</p> <p>16 "I did not have a direct role in relation to</p> <p>17 applying the Adults at Risk policy. Responsibility for</p> <p>18 applying aspects of the policy sat with my team. I was</p> <p>19 responsible for ensuring that these were met."</p> <p>20 What did you -- what aspects of the Adults at Risk</p> <p>21 policy were you responsible for, in your view?</p> <p>22 <b>A. So there was a register of Adults at Risk and making</b></p> <p>23 <b>sure the right people received that register. There was</b></p> <p>24 <b>a distribution -- I can't recall who -- who it had to be</b></p> <p>25 <b>sent to, but there was a register that had to be sent to</b></p> <p style="text-align: right;">Page 147</p>
<p>1 themselves?</p> <p>2 <b>A. Yes, I don't think you can hold a supplier to account</b></p> <p>3 <b>for somebody self-harming. But the bit that they are in</b></p> <p>4 <b>control of, you can hold them to account for, which is</b></p> <p>5 <b>their procedures and how they carried those out, and</b></p> <p>6 <b>that follows through into our current contract, albeit</b></p> <p>7 <b>there's three different levels -- hospitalisation,</b></p> <p>8 <b>injury or death -- with different severity of penalty</b></p> <p>9 <b>around the three, but it is failure to follow any agreed</b></p> <p>10 <b>procedures within the contract.</b></p> <p>11 Q. Was there any consideration to exploring the reasons why</p> <p>12 so many people were self-harming?</p> <p>13 <b>A. As part of the Safer Community meeting, there was quite</b></p> <p>14 <b>a lot of trend analysis, but, as I said, on reflection,</b></p> <p>15 <b>I think it's about -- I think the right people were at</b></p> <p>16 <b>those meetings that took place each month, but</b></p> <p>17 <b>potentially reviewing the questions that that forum</b></p> <p>18 <b>seeks to answer is what's -- what needs to be changed.</b></p> <p>19 Q. Yes. Because a large number of people self-harming may</p> <p>20 be indicative of people being in detention at risk when</p> <p>21 they shouldn't be; would you agree with that?</p> <p>22 <b>A. Not necessarily when they shouldn't be.</b></p> <p>23 Q. Well, isn't the effective implementation of the Adults</p> <p>24 at Risk policy aimed at routing those who are at risk of</p> <p>25 harm in detention out of detention?</p> <p style="text-align: right;">Page 146</p>	<p>1 <b>a group of people, and making sure that the Part C risk</b></p> <p>2 <b>assessment or risk notification document was shared with</b></p> <p>3 <b>the case owner.</b></p> <p>4 Q. The Adults at Risk policy was closely linked to the</p> <p>5 safeguards under rule 35. Do you agree with that?</p> <p>6 <b>A. Retrospectively, I have reflected on that, and, yes,</b></p> <p>7 <b>I can see that it does, yes.</b></p> <p>8 Q. You didn't appreciate that at the time?</p> <p>9 <b>A. No, I didn't, no.</b></p> <p>10 Q. Because rule 35 is the statutory mechanism for the</p> <p>11 Home Office caseworkers to be informed and for detention</p> <p>12 to be reviewed when someone has been identified as an</p> <p>13 Adult at Risk. Do you understand that now?</p> <p>14 <b>A. Yes.</b></p> <p>15 Q. But you didn't at the time?</p> <p>16 <b>A. I wouldn't say that I didn't at the time, but I hadn't,</b></p> <p>17 <b>I suppose, thought about the correlation between the</b></p> <p>18 <b>number of people on an ACDT, for example, and the</b></p> <p>19 <b>expectation that there should then be a matching number</b></p> <p>20 <b>of people with a rule 35(2).</b></p> <p>21 Q. Did you appreciate the lack of reports under rule 35(2)</p> <p>22 and the very low numbers under rule 35(1) at the time?</p> <p>23 <b>A. No, I didn't.</b></p> <p>24 Q. Were you aware of the practice of completing Part Cs</p> <p>25 instead of rule 35 reports at the time?</p> <p style="text-align: right;">Page 148</p>

<p>1 <b>A. No.</b></p> <p>2 Q. Why not, if part of the monitoring role and oversight</p> <p>3 that your team -- you and your team performs is the</p> <p>4 implementation on the ground of the Detention Centre</p> <p>5 Rules and the DSOs?</p> <p>6 <b>A. I just don't think it had ever been looked at. I'd</b></p> <p>7 <b>certainly not looked at it in that way. You know, we</b></p> <p>8 <b>processed the things that we received and, you know, in</b></p> <p>9 <b>hindsight, taking a step back and looking across the</b></p> <p>10 <b>board at how these three procedures interlinked would</b></p> <p>11 <b>have been of value, and, potentially, the procedures</b></p> <p>12 <b>signposting the other procedures to make sure that that</b></p> <p>13 <b>link wasn't left down to somebody drawing the</b></p> <p>14 <b>connection.</b></p> <p>15 Q. Did you receive -- as service delivery manager at the</p> <p>16 time, did you receive those types of statistics about</p> <p>17 rule 35 reports, rule 40 --</p> <p>18 <b>A. I don't recall receiving anything about rule 35 reports.</b></p> <p>19 <b>The Adults at Risk register I received, yes.</b></p> <p>20 Q. Does that type of monitoring of those type of statistics</p> <p>21 now form part of the contract, or is there still nothing</p> <p>22 about rule 35 within it?</p> <p>23 <b>A. My team don't deal with rule 35 anymore at all. So</b></p> <p>24 <b>that's dealt with by the detainee engagement team</b></p> <p>25 <b>because it's a kind of -- a communication between the</b></p> <p style="text-align: center;">Page 149</p>	<p>1 <b>detention, as there would be on receipt of a 35 report</b></p> <p>2 <b>as well.</b></p> <p>3 Q. Just looking, then, you have mentioned the Adults at</p> <p>4 Risk detention review that you carried out.</p> <p>5 <b>A. Yes.</b></p> <p>6 Q. Who else was involved in that review?</p> <p>7 <b>A. From memory, it was Ben Saunders and Michelle Brown from</b></p> <p>8 <b>G4S, healthcare, I think we involved IMB, but I can't</b></p> <p>9 <b>recall 100 per cent whether that was the case, and then</b></p> <p>10 <b>my team.</b></p> <p>11 Q. Why was the review carried out?</p> <p>12 <b>A. So there was quite a complex case, prior -- I think</b></p> <p>13 <b>around February 2017, that we did a lessons learnt.</b></p> <p>14 <b>I can't remember the details of the case, but it was</b></p> <p>15 <b>quite complex, and of course some frustrations between</b></p> <p>16 <b>the different partners. So we'd carried out a lessons</b></p> <p>17 <b>learned exercise after the event and, through that</b></p> <p>18 <b>lessons learned exercise, it became clear that aspects</b></p> <p>19 <b>of the Adults at Risk policy didn't feel like they were</b></p> <p>20 <b>in place. So from that, we then carried out a review of</b></p> <p>21 <b>our implementation of the Adults at Risk policy.</b></p> <p>22 Q. What came out of the review? Were there any concerns</p> <p>23 raised?</p> <p>24 <b>A. Yeah, there were a few; more to do with kind of how we</b></p> <p>25 <b>were recording -- so we didn't have a register of Adults</b></p> <p style="text-align: center;">Page 151</p>
<p>1 <b>engagement team and the case owner. It's the case owner</b></p> <p>2 <b>you want to make the consideration about detention, so</b></p> <p>3 <b>it's the avenue for how that information gets to them.</b></p> <p>4 Q. We know, though, that there are still very few</p> <p>5 rule 35(1) reports being completed and no rule 35(2)</p> <p>6 reports being completed. How is the Home Office</p> <p>7 ensuring monitoring and oversight of those rules and</p> <p>8 policies on the ground?</p> <p>9 <b>A. So there is, within the compliance team -- one of</b></p> <p>10 <b>the thematic areas is around vulnerability, and I know</b></p> <p>11 <b>there is consideration given to Adults at Risk, food and</b></p> <p>12 <b>fluid refusal, et cetera, et cetera, but potentially one</b></p> <p>13 <b>of the learning points from this is that we need to go</b></p> <p>14 <b>away and reflect on how we do that better.</b></p> <p>15 Q. The important reason for that is that, again, if</p> <p>16 vulnerable people aren't being drawn to the attention of</p> <p>17 the Home Office in making detention decisions, then they</p> <p>18 potentially are being detained and at risk of harm and</p> <p>19 the safeguards not operating?</p> <p>20 <b>A. Yes. So the Adults at Risk policy, even with a Part C</b></p> <p>21 <b>submission, does require the case owner to review the</b></p> <p>22 <b>ongoing detention. So there is some -- I mean, it's not</b></p> <p>23 <b>a defensive point because it's not complete, but</b></p> <p>24 <b>certainly, as part of the Adults at Risk policy, there</b></p> <p>25 <b>is a requirement for the case owner now to consider</b></p> <p style="text-align: center;">Page 150</p>	<p>1 <b>at Risk. So we didn't all have a shared view of who was</b></p> <p>2 <b>at risk within our care. I provide, I think, in my</b></p> <p>3 <b>witness statement, the complete list of points that</b></p> <p>4 <b>I'd raised with Claire.</b></p> <p>5 Q. What did you do as a result of those concerns? What</p> <p>6 action was taken?</p> <p>7 <b>A. So I tasked the area manager at the time,</b></p> <p>8 <b>Carl Knightley(?) and Paul Gasson, with a follow-up, and</b></p> <p>9 <b>then I met with Ben, myself, beginning of May, 3 or</b></p> <p>10 <b>4 May, to have a follow-up meeting with him and health.</b></p> <p>11 <b>I can't remember if Michelle Brown was there. I'd have</b></p> <p>12 <b>to go back and look at my meeting appointment. And then</b></p> <p>13 <b>I attended the first few Adults at Risk meetings. So</b></p> <p>14 <b>weekly Adults at Risk meetings were established as</b></p> <p>15 <b>a result of that review so that we could review the</b></p> <p>16 <b>supported living plans for anybody who was on</b></p> <p>17 <b>a supported living plan, which was part of</b></p> <p>18 <b>the requirement of the policy, and that we could review</b></p> <p>19 <b>anybody who was considered to be an Adult at Risk in</b></p> <p>20 <b>more detail, and I wanted to, I suppose, kind of set the</b></p> <p>21 <b>direction as to how those meetings should take place, or</b></p> <p>22 <b>I attended the first couple and then I stepped away and</b></p> <p>23 <b>left that to the rest of the team.</b></p> <p>24 Q. Moving on to complaints, this is complaints by</p> <p>25 detainees, did you have any particular role in the</p> <p style="text-align: center;">Page 152</p>

1 complaint system?

2 **A. Not on a direct level, no.**

3 Q. Were complaints centrally recorded?

4 **A. Yes, they were, yes, by G4S, yes, and by the**

5 **Home Office, sorry, there is a separate team that**

6 **records the complaints for the Home Office.**

7 Q. Is that in a complaints register?

8 **A. Yes.**

9 Q. Complaints were categorised on the complaints register

10 according to what they related to. So, for example,

11 missing property, unfair treatment, assault, minor

12 misconduct, those types of things. Is that your

13 understanding?

14 **A. Yes.**

15 Q. Who was responsible for categorising of the complaints?

16 Is that the Home Office or G4S?

17 **A. If it's the G4S register, it would have been G4S.**

18 Q. And the Home Office in relation to the Home Office one?

19 **A. It would have been the complaints team within the**

20 **Home Office.**

21 Q. Was the categorisation of the complaints reviewed or

22 audited in any way after the initial categorising?

23 **A. I don't believe so.**

24 Q. Why not?

25 **A. I don't think it would have probably occurred to anybody**

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1 **that it would have been a concern.**

2 Q. You didn't hold any concerns about the categorising of

3 complaints at the time in 2017?

4 **A. No, I didn't, no.**

5 Q. Just dealing, then, with the increase in beds in

6 Brook House, the 60 beds added. You say at paragraph 14

7 of your first statement that one aspect of your role was

8 to review and monitor the three-men room policy; is that

9 right?

10 **A. To monitor the building of the beds, the reconstruction**

11 **of the rooms.**

12 Q. You said, with regards to the additional beds placed in

13 rooms at Brook House:

14 "I felt that careful thought was given to the

15 configuration of the rooms. I don't recall having any

16 concerns regards the welfare of individuals."

17 Is that right?

18 **A. Yes.**

19 Q. Were you aware that prior to its introduction, HMIP, in

20 its 2016 report, had raised concerns about the use of

21 three-men rooms and had noted concerns raised by staff

22 and detainees?

23 **A. I was aware of that, and Stephen Shaw had also made**

24 **a comment in relation to those rooms.**

25 Q. The IMB had also raised concerns with the Home Office

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1 prior to 2016. Were you aware of that?

2 **A. I don't recall the IMB raising concerns, no.**

3 Q. That's certainly what Jackie Colbran from the IMB says

4 in her statement. You weren't aware of that at the

5 time?

6 **A. No, because I think that she related to the -- an**

7 **initial configuration of these rooms which predated my**

8 **arrival at -- well, that was my understanding when**

9 **I read that aspect of her statement.**

10 Q. Was a risk assessment done in advance of

11 the introduction of those three-men rooms?

12 **A. I believe so, and I think Clare Checksfield also**

13 **believed that there'd been a risk assessment carried**

14 **out.**

15 Q. Who by?

16 **A. By G4S.**

17 Q. Were you aware that, prior to the three-men room

18 introduction, HMIP had described poor physical

19 conditions in Brook House in terms of stark residential

20 units, cells lacking curtains so that toilets were

21 unscreened, lack of cleanliness and lack of ventilation?

22 **A. Yes. So -- yes.**

23 Q. What was the driver behind the introduction of the 60

24 extra beds?

25 **A. So there was a detention strategy -- a detention-based**

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1 **strategy document that was drawn up prior to my arrival**

2 **that was owned by Claire, and the 60 additional beds**

3 **were part of that. I can't speak for why. But I would**

4 **hazard a guess it was something to do with the closure**

5 **of the two IRCs and the need to offset the reduction in**

6 **beds somehow.**

7 Q. Was it cost driven?

8 **A. I don't think it would have been cost driven. It would**

9 **have been a need for capacity.**

10 Q. At paragraph 94(d) of your second statement, you say G4S

11 were meeting contracted targeted hours prior to the

12 increase in beds. The performance report

13 for December 2016 shows zero failures for staffing

14 for December 2016. Do you know what the number of

15 contracted failures for staffing were in

16 September, October and November 2016?

17 **A. Yes, I do. So it was 900 in September and zero**

18 **in October and November.**

19 Q. You say that the increase of 60 beds didn't make it more

20 challenging to meet staffing levels, but you have set

21 out that there were problems with staffing levels that

22 we went through in your first statement in that table.

23 What was the basis for saying that the increase in beds

24 didn't cause any staffing difficulties?

25 **A. Can I just turn to where I said that, sorry?**

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39 (Pages 153 to 156)

<p>1 Q. It is paragraph 94-your second statement.</p> <p>2 <b>A. Is that tab 2?</b></p> <p>3 Q. Yes, tab 2:</p> <p>4 "It didn't make it more challenging to meet staffing</p> <p>5 levels."</p> <p>6 <b>A. I think the point -- I may have misinterpreted your</b></p> <p>7 <b>question. I think the point I was trying to make there</b></p> <p>8 <b>was that having 60 additional people in the centre</b></p> <p>9 <b>wouldn't have been any more or less attractive to a new</b></p> <p>10 <b>recruit applying for the job because they wouldn't have</b></p> <p>11 <b>known any different.</b></p> <p>12 Q. I see. So not relating to --</p> <p>13 <b>A. It might have been my interpretation, yeah, sorry.</b></p> <p>14 Q. -- understaffing overall? I see. Did the increase in</p> <p>15 beds, of 60 additional beds, mean that there were</p> <p>16 understaffing problems in Brook House following their</p> <p>17 introduction?</p> <p>18 <b>A. I think, given my comment about attrition and</b></p> <p>19 <b>recruitment and challenges in making a net gain in</b></p> <p>20 <b>staff, I think yes. I think there were opportunities</b></p> <p>21 <b>maybe to manage that issue in a more controlled way, as</b></p> <p>22 <b>G4S actually demonstrated after Panorama, where they had</b></p> <p>23 <b>a shortfall in staff, they operated a contracted hours</b></p> <p>24 <b>scheme which asked everyone to commit to doing a small</b></p> <p>25 <b>amount of overtime on a weekly basis for a package of --</b></p> <p style="text-align: center;">Page 157</p>	<p>1 Q. Including you and your team?</p> <p>2 <b>A. Yes, including me and my team and IMB and the supplier.</b></p> <p>3 Q. In October 2020, the IMB issued a notice under rule 61</p> <p>4 of the Detention Centre Rules stating that the use of</p> <p>5 charter flights to effect enforced removals indicates</p> <p>6 a series of issues collectively and cumulatively having</p> <p>7 an unnecessary, severe and continuing impact on detained</p> <p>8 persons, particularly those facing removal on charter</p> <p>9 flights, as well as across the detained person</p> <p>10 population as a whole, and that they believe that the</p> <p>11 cumulative effect of those concerns amounted to inhumane</p> <p>12 treatment. Were you aware of that notice issued</p> <p>13 in October 2020?</p> <p>14 <b>A. Yes, I do have a recollection of that.</b></p> <p>15 Q. The seriousness of the situation, they said, was</p> <p>16 evidenced by the statistics of self-harm and suicide, so</p> <p>17 striking that the board and the IMB charter flight</p> <p>18 monitoring team jointly wrote to the Home Office</p> <p>19 Minister for Immigration Compliance and the courts on</p> <p>20 2 October, and the board expressed the view that</p> <p>21 circumstances in the centre amounted to inhumane</p> <p>22 treatment of the whole detained person population. Were</p> <p>23 you aware of that?</p> <p>24 <b>A. I have some recollection of it and have obviously read</b></p> <p>25 <b>the points in the evidence proposal.</b></p> <p style="text-align: center;">Page 159</p>
<p>1 <b>you know, a financial package as a result of that, which</b></p> <p>2 <b>meant that you weren't getting individuals burnt out and</b></p> <p>3 <b>you were kind of managing, in a controlled way, what</b></p> <p>4 <b>your need for additional hours were.</b></p> <p>5 Q. In relation to the Panorama programme, did you watch the</p> <p>6 Panorama programme?</p> <p>7 <b>A. Yes, I did.</b></p> <p>8 Q. You have said in your statement that you didn't think</p> <p>9 that use of force was being used excessively in</p> <p>10 Brook House. Given what we see on the Panorama</p> <p>11 programme, do you agree that force was occasionally</p> <p>12 being used excessively in Brook House?</p> <p>13 <b>A. I had taken "excessive" as being about numbers, not</b></p> <p>14 <b>about the --</b></p> <p>15 Q. Manner in which force was used?</p> <p>16 <b>A. Yes.</b></p> <p>17 Q. You say you didn't have any specific concerns at the</p> <p>18 time in relation to the abuse of detained persons at</p> <p>19 Brook House. How do you think it is that you were</p> <p>20 unaware of the type of behaviour seen in the programme</p> <p>21 by staff towards detainees?</p> <p>22 <b>A. I think we were all unaware, all partners on site, and</b></p> <p>23 <b>I think that was because of the covert nature. I don't</b></p> <p>24 <b>think people were behaving -- staff were behaving like</b></p> <p>25 <b>that openly in front of people that cared.</b></p> <p style="text-align: center;">Page 158</p>	<p>1 Q. Do you have any comment on how that situation came</p> <p>2 about, given the responsibility of the Home Office to</p> <p>3 monitor contractual compliance with the Detention Centre</p> <p>4 Rules, DSOs and Home Office policies?</p> <p>5 <b>A. So I note that the IMB stated that it wasn't a criticism</b></p> <p>6 <b>of any staff on site. So my read of that note was</b></p> <p>7 <b>a critique on Home Office policy to continue to pursue</b></p> <p>8 <b>these -- pursue the charter flights out of Brook House.</b></p> <p>9 MS SIMCOCK: Chair, those are all my questions for this</p> <p>10 witness. Do you have any questions?</p> <p>11 THE CHAIR: Thank you. I don't actually have any questions</p> <p>12 for you, Ms Smith. Thank you very much for coming</p> <p>13 today. I know it has been a long session and I'm</p> <p>14 grateful for your time and your evidence. Thank you</p> <p>15 very much.</p> <p>16 <b>A. Thank you.</b></p> <p>17 MS SIMCOCK: I suggest we take our afternoon break until</p> <p>18 3.15, and then I believe we are going to hear some</p> <p>19 evidence read in this afternoon.</p> <p>20 THE CHAIR: Thank you very much, Ms Simcock. Thank you.</p> <p>21 (2.59 pm)</p> <p>22 (A short break)</p> <p>23 (3.18 pm)</p> <p>24 MS TOWNSHEND: Good afternoon, chair. We will now be</p> <p>25 hearing from Ms Morris who represents three detained</p> <p style="text-align: center;">Page 160</p>



<p>1 persons who will be doing some reading in summaries.</p> <p>2 The order is D393, D180 and D1876.</p> <p>3 THE CHAIR: Thank you very much.</p> <p>4 Statement of D393 (read)</p> <p>5 MS MORRIS: Chair, D393's witness statement to the inquiry,</p> <p>6 dated 25 February 2022, is at &lt;DPG000023&gt; and his second</p> <p>7 witness statement, dated 9 March 2022, is at</p> <p>8 &lt;DPG000041&gt;.</p> <p>9 D393 is a national of Sierra Leone. He was detained</p> <p>10 at Brook House on two occasions. D393 was first</p> <p>11 detained at Brook House in 2015, before being moved to</p> <p>12 the Verne. D393 was then detained at Brook House for</p> <p>13 a second time, between around 16 and 24 August 2017,</p> <p>14 although he is unsure of the exact dates after which he</p> <p>15 was forcibly removed to Sierra Leone.</p> <p>16 He says:</p> <p>17 "I was born a premature baby, which has caused me</p> <p>18 health problems throughout my life. I have always</p> <p>19 needed more healthcare than others. I have suffered</p> <p>20 from physical and mental health issues as well as</p> <p>21 learning disability. I was diagnosed with ADHD as</p> <p>22 a child and I also suffer from depressive disorders with</p> <p>23 psychotic features, anxiety and auditory hallucinations.</p> <p>24 I also have epilepsy, a condition that causes me</p> <p>25 frequent seizures. These were all ongoing conditions</p> <p style="text-align: center;">Page 161</p>	<p>1 fact that the windows in the cell did not open. He</p> <p>2 describes it as degrading and states that there was no</p> <p>3 freedom or dignity at all in Brook House.</p> <p>4 D393 notes that, although a record dated</p> <p>5 18 August 2017 -- found at &lt;CJS001303&gt; -- states that he</p> <p>6 was on a supported living plan due to his epilepsy, he</p> <p>7 does not recall what the plan did for him. He says that</p> <p>8 it may have been made due to his learning disability,</p> <p>9 but he doesn't recall being given any support for</p> <p>10 epilepsy or his learning disability at Brook House.</p> <p>11 D393 describes that having ADHD made him restless</p> <p>12 and unable to sustain attention and concentration on</p> <p>13 tasks. He also states that his impulsive behaviour can</p> <p>14 often be misunderstood as rudeness, which makes him very</p> <p>15 easily agitated. D393 states that he did not receive</p> <p>16 appropriate support, advice or medication for ADHD while</p> <p>17 at Brook House. He also states that he does not think</p> <p>18 the staff at Brook House had awareness of ADHD and the</p> <p>19 difficulties it causes.</p> <p>20 D393 describes healthcare at Brook House as</p> <p>21 inadequate. He states he did not receive treatment from</p> <p>22 the mental health team and they did not try to</p> <p>23 understand his issues and help him. D393 describes only</p> <p>24 being given tablets and even those were not always</p> <p>25 given. Despite having had in-possession medication at</p> <p style="text-align: center;">Page 163</p>
<p>1 during my detention at Brook House, both in 2015 and</p> <p>2 2017.</p> <p>3 "I remember I had one epileptic seizure while at</p> <p>4 Brook House. I basically went into a fit and started</p> <p>5 having auditory hallucinations, hearing voices. I was</p> <p>6 in my cell on my own when I had the fit and I passed out</p> <p>7 for a little while. When I came to, I went into</p> <p>8 recovery position until I started feeling better.</p> <p>9 I tried to see healthcare on the same day to let them</p> <p>10 know, but I couldn't get an appointment on the same day.</p> <p>11 I think I only got an appointment the next day. I told</p> <p>12 them about my epileptic seizure and they wrote it in</p> <p>13 their notes. I believe it wasn't until a few weeks</p> <p>14 later when I was taken to a hospital where I saw</p> <p>15 a doctor."</p> <p>16 D393 believes he stayed on all of the wings, at one</p> <p>17 point or another, during the two periods of detention at</p> <p>18 Brook House but remembers mostly being held on E wing,</p> <p>19 although he is not sure whether that was in 2015 or 2017</p> <p>20 or both. Records indicate that D393 was held on B wing</p> <p>21 in 2017.</p> <p>22 D393 remembers sharing cells with others and also</p> <p>23 being placed on his own. He found it claustrophobic,</p> <p>24 due to the small size of the cells. D393 describes</p> <p>25 a lack of privacy in relation to the toilets and the</p> <p style="text-align: center;">Page 162</p>	<p>1 the Verne, D393 was denied this at Brook House. He</p> <p>2 states that this was demeaning and meant that, on</p> <p>3 occasion, he was denied his medication. For example, on</p> <p>4 one occasion, he was late to collect his medication due</p> <p>5 to being on the phone to his solicitor and healthcare</p> <p>6 refused to provide it to him. He also recalls an</p> <p>7 occasion when he was given the wrong medication, which</p> <p>8 made him feel dizzy and sick. He was given no apology</p> <p>9 and was simply switched back to the correct medication.</p> <p>10 He says:</p> <p>11 "During night-time lockdowns when I felt unwell,</p> <p>12 I would knock on my door and ask for a doctor, but</p> <p>13 I would usually be met by aggression from officers who</p> <p>14 either told me to stop banging on the door and get back</p> <p>15 to whatever I was doing, or that they were understaffed</p> <p>16 and there wasn't anyone onsite to help me. There was</p> <p>17 a bell in my cell which was supposedly there to alert</p> <p>18 the officers if we needed anything during lockdown.</p> <p>19 However, in my case, they always ignored my calls, which</p> <p>20 meant that I had to resort to knocking the door to get</p> <p>21 their attention. On some occasions, after I had knocked</p> <p>22 on the door for a while, the officers would eventually</p> <p>23 come, but they were very annoyed that I had been</p> <p>24 insisting on getting their attention. On other</p> <p>25 occasions, they would just ignore me and never come, so</p> <p style="text-align: center;">Page 164</p>

<p>1 I would have to wait until the end of the lock-in to get 2 medical help.</p> <p>3 "The lock-ins were 10 to 11 hours long and this was 4 particularly difficult for me due to my ADHD. Having 5 ADHD means that I generally experience restlessness, 6 I am unable to relax, I feel very fidgety and I become 7 irritable very easily. All these feelings became worse 8 during lockdowns. I remember I had very intense, 9 intrusive thoughts and was hearing voices during 10 lockdowns."</p> <p>11 D393 describes a decline in his mental health during 12 his detention at Brook House in 2017. He talks about an 13 occasion when, alone in his cell, he self-harmed by 14 cutting his arm with a razorblade. At a later stage, 15 officers saw the blood on his bedsheets but made no 16 enquiries about it and did not ask if he needed 17 healthcare. At some point while D393 was in immigration 18 detention, he was placed on ACDT -- he thinks because of 19 his epilepsy -- which meant he was checked on every 20 10 to 15 minutes or so. He found this intrusive at 21 times because he could be using the toilet when an 22 officer would walk in.</p> <p>23 He says: 24 "I did not feel safe at Brook House, mostly due to 25 the levels of violence there."</p> <p style="text-align: center;">Page 165</p>	<p>1 incident. I do not recall what healthcare treatment 2 I was provided after that.</p> <p>3 "On another occasion, while being placed in 4 handcuffs to be taken to hospital for treatment related 5 to kidney problems I was having, the handcuffs were put 6 on too tightly, causing me pain. I asked for the 7 handcuffs to be loosened several times, but I was 8 refused every time. They said I would have to wait 9 until we got back to the centre as they did not have the 10 keys to loosen the handcuffs, even though it was the 11 same officers who had put the handcuffs on me.</p> <p>12 "I also experienced excessive force being used by 13 Brook House staff when they arrived at my cell in the 14 middle of the night to remove me from the UK without 15 warning. They used shields to restrain me, which 16 I thought was excessive force since I was not resisting. 17 This experience was petrifying. They did not cause me 18 any new injuries, but I remember that they re-opened 19 some old arm injuries they had caused me during the 20 incident described above, when they twisted my arm and 21 restrained me after I had been attacked by the other 22 detained people in my cell.</p> <p>23 "I have also been threatened with violence by 24 a detention officer. I was trying to get together 25 paperwork for my solicitor, rushing between the office</p> <p style="text-align: center;">Page 167</p>
<p>1 D393 describes an incident he thinks was during his 2 detention at Brook House, where he was attacked in his 3 cell by other detained individuals. He states that 4 officers attended his cell and saw what was happening, 5 but they left, closing the cell door behind them and 6 leaving D393 to receive further violence from the other 7 detainees. After some time, a number of officers 8 entered again and restrained D393, twisting his arm 9 behind his back and punching him in the back several 10 times. D393 cannot recall whether it was during this 11 incident or another that officers smashed his head 12 against a wall.</p> <p>13 Following the incident, D393 was punished in various 14 ways. He was taken to segregation. He was placed on 15 closed visits because of the incident, which meant he 16 could not hug his family when they visited. He says: 17 "Being punished for something that was not [his] 18 fault made [him] very frustrated and [he] felt 19 helpless."</p> <p>20 He says: 21 "The officers were also physically abusive towards 22 me and towards other detainees on other occasions. 23 Once, the officers hurt my shoulder so badly while they 24 were restraining me that it felt as though they had 25 broken it. I still suffer pain to my shoulder from this</p> <p style="text-align: center;">Page 166</p>	<p>1 where the fax machine was and the library with the 2 computers, when an officer told me that he would 'pound 3 me in'. I don't know why he spoke to me like this, but 4 I did not respond as I knew he was trying to provoke me 5 and I wanted to avoid the conflict.</p> <p>6 "On other occasions, I have witnessed officers being 7 physically abusive towards other detainees, by punching 8 them and twisting their arms. I believe staff took 9 individuals to segregation, where they used excessive 10 force where others could not witness it."</p> <p>11 Verbal and racist abuse: 12 "I also experienced a lot of verbal and racist abuse 13 from Brook House officers during the time I was detained 14 there. One incident of racist abuse I can remember 15 clearly is that officers at Brook House would regularly 16 call me the name of a famous black African footballer 17 who has a similar name to me. I do not bear any 18 resemblance to this footballer, other than that we are 19 both black Africans. I believe I was identified in that 20 way on account of my race and I found it insulting and 21 dehumanising."</p> <p>22 D393 talks about receiving snide comments from 23 staff, who would point and laugh. This made him feel 24 humiliated and scared for his safety. He regularly 25 witnessed staff bullying detainees and in particular</p> <p style="text-align: center;">Page 168</p>

<p>1 those who did not speak English well. He states that</p> <p>2 staff would mock them, laugh at them and refuse to help</p> <p>3 them.</p> <p>4 He says:</p> <p>5 "During my time at Brook House, I was often</p> <p>6 subjected to strip searches. I was frequently woken up</p> <p>7 in the middle of the night to be strip searched,</p> <p>8 sometimes up to five times a week. The searches</p> <p>9 happened so regularly that I believed, and still</p> <p>10 believe, they were part of a routine targeted at me.</p> <p>11 They sometimes turned violent. On one of these</p> <p>12 occasions, officers twisted my arm while strip searching</p> <p>13 me.</p> <p>14 "I was not usually given a reason for these</p> <p>15 searches. Once I was told the staff thought I had</p> <p>16 a smartphone, which I did not. No smartphone was ever</p> <p>17 found during their searches. Other times I was told</p> <p>18 that it was just a random search. I was never given</p> <p>19 a valid justification. They never said they were</p> <p>20 looking for drugs and they never found any drugs while</p> <p>21 conducting their search.</p> <p>22 "The strip searches were not only disruptive but</p> <p>23 also very humiliating and degrading. The staff would</p> <p>24 ask me to take my trousers and pants off and make me</p> <p>25 squat and bend over. I do not remember there being</p> <p style="text-align: center;">Page 169</p>	<p>1 to see me while I was held at Brook House and assess</p> <p>2 whether I had any needs. If I had needs they could not</p> <p>3 help with, they would refer me on to someone else who</p> <p>4 could. I found their support very useful, especially</p> <p>5 given I was not receiving any other welfare support."</p> <p>6 D393 describes problems with access to the internet</p> <p>7 and difficulties in accessing a working computer. He</p> <p>8 also describes problems with the mobile phone signal,</p> <p>9 leading to him feeling isolated. D393 also discusses</p> <p>10 problems with getting documents to his solicitors and</p> <p>11 the stress this caused.</p> <p>12 He says:</p> <p>13 "I remember being very scared to make any complaints</p> <p>14 whilst detained at Brook House. When you are detained</p> <p>15 there, you do not know what you are facing. If you made</p> <p>16 any complaints at all, you needed to be very careful of</p> <p>17 what kind of complaints these were. I was very careful</p> <p>18 not to make any type of complaints against the people</p> <p>19 making decisions about my immigration status. This is</p> <p>20 because we all feared repercussions, mainly from the</p> <p>21 Home Office staff who were deciding our immigration</p> <p>22 cases. We were also cautious of Brook House officers</p> <p>23 finding out we had complained about them and</p> <p>24 retaliating. I don't remember if I actually ever knew</p> <p>25 for sure that someone had suffered retaliation because</p> <p style="text-align: center;">Page 171</p>
<p>1 a towel placed in front of me during this process to</p> <p>2 protect my dignity. I was mortified."</p> <p>3 D393 describes spice being openly used at</p> <p>4 Brook House. He states that the staff did not care.</p> <p>5 D393 states that he once heard other detained people</p> <p>6 talking about staff supplying spice to them, so he</p> <p>7 believed that staff were bringing spice into</p> <p>8 Brook House.</p> <p>9 He says:</p> <p>10 "The welfare service at Brook House during my</p> <p>11 detention there was inadequate. I thought welfare would</p> <p>12 be a service providing support and assessing the</p> <p>13 detainees' welfare needs. The reality was that welfare</p> <p>14 was overcrowded. Every time I went to welfare, they</p> <p>15 would turn me away and tell me to come back another</p> <p>16 time. Given my declining mental health, I found the</p> <p>17 inability to access welfare when I needed it very</p> <p>18 stressful and it made my situation at Brook House worse.</p> <p>19 I believe the majority of welfare support I received</p> <p>20 while detained at Brook House came from an external</p> <p>21 organisation called Gatwick Detainees Welfare Group.</p> <p>22 "The Gatwick Detainees Welfare Group provided me</p> <p>23 with emotional support by arranging to visit me. They</p> <p>24 paid for credit top-up on my phone card so I could make</p> <p>25 calls to my solicitors and my family. They would come</p> <p style="text-align: center;">Page 170</p>	<p>1 they had made a complaint, but I was using my</p> <p>2 commonsense. They control the whole system so you</p> <p>3 really don't want to mess with them."</p> <p>4 D393 states that the only complaint he felt</p> <p>5 comfortable making to IMB was in relation to some of his</p> <p>6 possessions that had gone missing, including clothes and</p> <p>7 a watch. When the IMB said there was nothing they could</p> <p>8 do about it, D393 felt that his complaint had not been</p> <p>9 taken seriously.</p> <p>10 He says:</p> <p>11 "I remember I went on a hunger strike while detained</p> <p>12 at Brook House. I have very little memory of what that</p> <p>13 was about, but I remember that no-one cared. The</p> <p>14 officers and healthcare simply ignored it and left me to</p> <p>15 starve for a while. I have no memory how long it went</p> <p>16 on for, but I eventually went back to eating.</p> <p>17 "Being detained at Brook House was a scary period in</p> <p>18 my life. The treatment I received was very bad and</p> <p>19 I would not wish it on anyone else."</p> <p>20 D393 then provides a statement of truth and the</p> <p>21 statement is signed and dated 25 February 2022 and his</p> <p>22 second statement is dated 9 March 2022.</p> <p>23 THE CHAIR: Thank you, Ms Morris.</p> <p>24</p> <p>25</p> <p style="text-align: center;">Page 172</p>

<p>1 Statement of D180 (read)</p> <p>2 MS MORRIS: D180.</p> <p>3 D180's witness statement to the inquiry dated</p> <p>4 8 March 2022 is at &lt;DPG000040&gt;.</p> <p>5 D180 states that he is Jamaican and he is with the</p> <p>6 Church of England. He is now 62 years old. He was</p> <p>7 detained at Brook House between 8 May 2015 and</p> <p>8 16 May 2017, when he was returned to Jamaica as</p> <p>9 a voluntary return. For more than half of D180's time</p> <p>10 at Brook House, he was disabled by poor vision. When he</p> <p>11 arrived at Brook House, he was suffering from cataracts</p> <p>12 in both eyes which made him almost blind. He had been</p> <p>13 under the care of Moorfields Eye Hospital and had been</p> <p>14 due to have cataract surgery but was detained.</p> <p>15 In September 2015, whilst detained, he underwent an</p> <p>16 operation for cataracts. He had a second operation</p> <p>17 11 months later, in August 2016. D180 states that,</p> <p>18 before the first operation, his near-blindness made</p> <p>19 things very difficult at Brook House and, between the</p> <p>20 two operations, he could only see out of one eye.</p> <p>21 During his detention, he was also suffering from intense</p> <p>22 pain to his hip and leg due to sciatica and shoulder</p> <p>23 pain. The pain worsened in detention and made the</p> <p>24 experience of detention even more difficult.</p> <p>25 D180 describes his arrival at Brook House. He</p> <p>Page 173</p>	<p>1 intimidated and very vulnerable.</p> <p>2 "In the beginning at Brook House, I was really</p> <p>3 struggling by myself to survive. At first, I had a cell</p> <p>4 upstairs. Then I was given a cell on the ground floor</p> <p>5 because of my sight, but the canteen was upstairs on the</p> <p>6 second floor. The showers were upstairs too. I had to</p> <p>7 hold on to the railings in the corridor to make sure</p> <p>8 that I did not trip up or fall over. Where there were</p> <p>9 stairs, I would hold the railings and make sure that</p> <p>10 I stepped very carefully. When I wanted to sit down or</p> <p>11 use the toilet, I had to feel my way with my hands to</p> <p>12 find where to sit down. To get to the canteen or the</p> <p>13 shower, I had to find another detainee to accompany me</p> <p>14 up the stairs.</p> <p>15 "Trying to get around Brook House without eyesight</p> <p>16 was really challenging. One time I walked into the wall</p> <p>17 and another time I hit my knee on a wall and it felt</p> <p>18 very sore for a few days. I went to the medical centre</p> <p>19 to ask for painkillers but my request was rejected.</p> <p>20 I am not sure why they rejected my request. I had to</p> <p>21 keep going back until eventually I got painkillers."</p> <p>22 D180 describes difficulties at meal times carrying</p> <p>23 hot food and navigating to a table. No adjustments were</p> <p>24 made for his disability.</p> <p>25 He says:</p> <p>Page 175</p>
<p>1 waited a long time to be allocated to a wing and to</p> <p>2 a cell where he could rest. He explains that he told</p> <p>3 detention staff that he was virtually blind and he was</p> <p>4 wearing dark glasses, so it would have been obvious to</p> <p>5 anyone that he was having problems getting around. His</p> <p>6 medical records, &lt;HOM028147&gt;, page 3, show he was seen</p> <p>7 by a healthcare assistant at 23:05 on the day of his</p> <p>8 arrival, who noted that he was partially sighted, stated</p> <p>9 that he would stumble and fall in unfamiliar places,</p> <p>10 that a supported living plan was to be completed and</p> <p>11 a disability form was read aloud to him as he could not</p> <p>12 see to read. It was also noted that he had pain to his</p> <p>13 left hip.</p> <p>14 D180 describes the induction as very basic. He was</p> <p>15 "shown" where things were, but as he was almost blind,</p> <p>16 it was not sufficient to orientate him. D180 had to</p> <p>17 learn to navigate himself around Brook House by counting</p> <p>18 steps and using his very limited eyesight.</p> <p>19 He says:</p> <p>20 "It was very difficult and often frightening for me</p> <p>21 at Brook House being almost blind. I didn't know anyone</p> <p>22 there and I couldn't see other detainees properly.</p> <p>23 I didn't know my way around and couldn't see how to get</p> <p>24 around. The place was extremely noisy, with loud</p> <p>25 banging of doors and shouting. I felt scared,</p> <p>Page 174</p>	<p>1 "Washing and having a shower were also hard because</p> <p>2 of my very poor eyesight. I had to go up a flight of</p> <p>3 stairs to get to the shower. I had to make sure that</p> <p>4 I held on properly to the railings. One time I had</p> <p>5 a fall, but fortunately I was not injured. The shower</p> <p>6 room had a little door, but it was not very private as</p> <p>7 you could be seen over the top of the door. I would</p> <p>8 have to hold onto the wall to find my way into the</p> <p>9 shower and, once inside the shower, I would lean on the</p> <p>10 wall for support. This felt dangerous because the floor</p> <p>11 was wet. There was no changing room so you would take</p> <p>12 your towel in with you and change in the room. Normally</p> <p>13 there was a queue for the shower."</p> <p>14 D180 states that he wore dark glasses because the</p> <p>15 light hurt his eyes. Other detained people called him</p> <p>16 "Stevie Wonder". He didn't like to stand out. He could</p> <p>17 not use computers or the library without the assistance</p> <p>18 of another detained person until after his first</p> <p>19 cataracts operation. He had to ask other detained</p> <p>20 people to read and write his correspondence. He didn't</p> <p>21 have a choice about keeping his correspondence private.</p> <p>22 After a while, he made friends with other detained</p> <p>23 people, who would help him get around Brook House. It</p> <p>24 was easier and safer to ask a friend than to ask the</p> <p>25 officers for help, as there was a risk officers would</p> <p>Page 176</p>

<p>1 say no or make a big deal out of it. He wasn't offered</p> <p>2 any help by detention staff. They didn't ask about his</p> <p>3 impairment, how he was coping or about his needs. He</p> <p>4 wasn't given any visual aids or walking stick. It</p> <p>5 wasn't suggested that he see an optician. He had to</p> <p>6 work out for himself how to get an optician's</p> <p>7 appointment.</p> <p>8 D180 was seen by a senior nurse on 11 May 2015, who</p> <p>9 noted that he was requesting to be seen by an optician.</p> <p>10 On 18 May 2015, ten days after he arrived at</p> <p>11 Brook House, he was seen by a Dr Husein Oozeerally who</p> <p>12 noted that D180 complained of "bilateral cataracts</p> <p>13 diagnosed at Moorfields" and that "cataracts operation</p> <p>14 would be subject to residency". &lt;DPG000037&gt;.</p> <p>15 Dr Oozeerally also noted that D180 was experiencing</p> <p>16 "left hip pain radiating to the knee" and advised that</p> <p>17 D180 should have exercise. However, D180 explains that</p> <p>18 he could not exercise his hip because he could not see</p> <p>19 well enough to use the gym or the small crowded</p> <p>20 courtyards. He states that he does not remember</p> <p>21 Dr Oozeerally asking him much, if anything, about his</p> <p>22 vision or how he was coping at Brook House.</p> <p>23 D180 was seen by an optometrist, about a month after</p> <p>24 arriving at Brook House, who reported to healthcare that</p> <p>25 D180 had "bilateral mature cataracts" and was "severely</p> <p style="text-align: center;">Page 177</p>	<p>1 referred to hospital. The only adjustments Brook House</p> <p>2 made for his disability was to move him to</p> <p>3 a ground-floor room, but that was of limited help as he</p> <p>4 still had to climb stairs to get to the servery and the</p> <p>5 showers. Officers came to check on him once in the</p> <p>6 morning and once at night to ask if he needed anything.</p> <p>7 He found this "a bit of a token tick-box exercise" and</p> <p>8 between these two checks he had to rely on other</p> <p>9 detained people to help him get around the centre and to</p> <p>10 undertake daily tasks.</p> <p>11 In August 2015, D180's eyesight was deteriorating</p> <p>12 further. He felt increasingly stressed and scared. It</p> <p>13 was not until 21 September 2015, four months after</p> <p>14 arriving at Brook House, that D180 had his first</p> <p>15 operation. He was handcuffed on the way to the hospital</p> <p>16 and even handcuffed to the operating table and an</p> <p>17 officer during the operation. The operation on D180's</p> <p>18 other eye was supposed to be two or three weeks later,</p> <p>19 but it was 11 months before it took place. Lack of</p> <p>20 communication between healthcare at Brook House and the</p> <p>21 hospital led to delays and postponements, causing D180</p> <p>22 to feel extremely stressed and scared. In May 2016,</p> <p>23 D180 could not attend an eye appointment due to</p> <p>24 a chickenpox quarantine at Brook House. As a result, he</p> <p>25 was removed from the hospital waiting list. D180</p> <p style="text-align: center;">Page 179</p>
<p>1 sight impaired". &lt;DPG000037&gt;. A healthcare assistant</p> <p>2 noted in D180's records "optician stated he is blind".</p> <p>3 On 19 June 2015, D180's solicitors wrote to</p> <p>4 Brook House explaining that he was falling and stumbling</p> <p>5 because of his eyesight. D180 describes becoming</p> <p>6 depressed and frustrated and he was referred for</p> <p>7 a mental health assessment. A psychiatrist assessed him</p> <p>8 and referred him for group therapy. He describes</p> <p>9 continuing to feel extremely low, went back to</p> <p>10 healthcare and was prescribed antidepressants. He went</p> <p>11 to a drop-in session with GDWG and their caseworker</p> <p>12 noted on 24 June 2015 that D180 was "not really</p> <p>13 receiving enough support" in Brook House, "has to count</p> <p>14 steps to get to the shower to work out where everything</p> <p>15 is", "keeps walking into things", and was "feeling down"</p> <p>16 and "intimidated". &lt;DPG000024&gt;</p> <p>17 GDWG records show they rang the Brook House welfare</p> <p>18 office and were told D180 was on a supported living plan</p> <p>19 and was being monitored and had been moved from the</p> <p>20 first to the ground floor. A welfare officer was to</p> <p>21 speak to the diversity department and healthcare about</p> <p>22 a walking stick.</p> <p>23 However, D180 explains that he was never given</p> <p>24 a walking stick or any other disability aid. Healthcare</p> <p>25 declined to provide a walking stick because he had been</p> <p style="text-align: center;">Page 178</p>	<p>1 regularly went to healthcare to chase up his treatment</p> <p>2 but got nowhere. He described finding it difficult to</p> <p>3 get healthcare to take him seriously. It was only after</p> <p>4 D180's GDWG volunteer visitor contacted the hospital</p> <p>5 directly that D180 was referred back to the hospital.</p> <p>6 The volunteer visitor also made a complaint on D180's</p> <p>7 behalf. He was placed back on the hospital list on</p> <p>8 7 July 2016 and had his surgery on 10 August 2016,</p> <p>9 15 months after arriving at Brook House. D180 was again</p> <p>10 handcuffed to an officer and the operating table.</p> <p>11 D180 explains that he didn't ask for a rule 35</p> <p>12 report because, although he had heard of rule 35 reports</p> <p>13 being prepared for other detained people, he thought it</p> <p>14 was just for victims of torture or people who</p> <p>15 self-harmed. Although he became depressed at</p> <p>16 Brook House, he never tried to harm himself.</p> <p>17 He says:</p> <p>18 "The detention and healthcare staff knew as soon as</p> <p>19 I arrived at Brook House that I had problems with my</p> <p>20 eyesight and they could see the difficulties I had in</p> <p>21 coping with detention. They should have told the</p> <p>22 Home Office, but I don't think they did. No detention</p> <p>23 officer, member of healthcare staff or Home Office</p> <p>24 caseworker suggested I could ask for a rule 35 report.</p> <p>25 The optician told healthcare that I was blind in both</p> <p style="text-align: center;">Page 180</p>

<p>1 eyes and it is in my medical records, but the doctors 2 did not do a rule 35 report. My blindness and the pain 3 to my hip, leg and shoulder made detention very hard for 4 me and I became depressed. I went often to healthcare 5 about these health problems but, as far as I know, 6 a rule 35 report was never done."</p> <p>7 D180 describes that he was detained on A wing and 8 B wing whilst at Brook House. He was never detained on 9 E wing and he had heard stories that people sent to 10 E wing were restrained badly and handcuffed. He always 11 had to share a cell, which was disorientating and 12 uncomfortable because he was locked in for long periods 13 of time with someone he could not see and often could 14 not communicate with due to a language barrier. Just as 15 he was beginning to adjust to a new cellmate, they would 16 be moved. D180 describes the stress people in detention 17 were under, due to the potential for removal from the UK 18 and the dangers they would be facing if they were 19 returned. D180 discusses the conditions at Brook House, 20 including limited bedding, cold temperatures and lack of 21 privacy in relation to the toilet. He describes feeling 22 isolated and scared during periods being locked in his 23 cell. D180 also describes activities being limited and 24 staff shortages limiting access to computers, the gym 25 and the library. He mentions support he had from GDWG</p> <p style="text-align: center;">Page 181</p>	<p>1 D180 recognised Darren Tomsett from the Panorama 2 documentary as an officer who was particularly racist 3 and abusive towards people. He says: 4 "Darren Tomsett was extremely nasty to detainees. 5 He was very confrontational and appeared to really enjoy 6 using force and restraining detainees. He was racist 7 towards the detainees. For example, he would tell 8 people who were applying to stay in the UK that they 9 should just leave and go back to 'their country'. He 10 did not care about our well-being whatsoever and 11 detainees disliked him. Darren was one of the wing 12 officers who would let people out in the morning and 13 lock people up at night. He also worked in the wing 14 office where detainees could go to request toiletries 15 like soap or a toothbrush, toothpaste or apply for 16 clothing. You could buy these things at the shop but 17 the detention centre also provided them for free. You 18 would have to go to the wing office to ask for them. 19 Everyone spoke about how sometimes they would ask Darren 20 for toothpaste and he would say that there was none but 21 another officer would find it. I began buying 22 toiletries with money which friends and family sent me, 23 and later, after my operations, with money I made 24 working the laundry room, just so that I did not have to 25 go to the office to ask Darren for anything. Life was</p> <p style="text-align: center;">Page 183</p>
<p>1 and that one of their visitors came to see him most 2 weeks. He found it difficult to make bail applications 3 because of his blindness. He tried to get help from the 4 welfare officers but there was always a queue and, as it 5 took him longer than others to reach the welfare office, 6 he was often at the back of the queue. 7 He says: 8 "There was a big problem with the staff in 9 Brook House and the way they treated the people in 10 detention. I witnessed them mistreating detainees -- 11 being aggressive, hostile or racist towards individuals. 12 I found this really distressing because everyone in 13 detention is really vulnerable. 14 "I would not say that all of the officers were 15 racists, but some of them were. It wasn't only racism 16 towards black people, as some of the officers also had 17 serious prejudices towards other detainees. There were 18 people of so many different nationalities in 19 Brook House. There was a lot of discrimination towards 20 people who were from Iraq, Iran and other places. The 21 kind of abuse officers would give to individuals 22 included slurs like, 'Fuck off back to your own 23 country', 'Why do you come to this country?' and 'Why 24 don't you go back to your own country? You're wasting 25 taxpayers' money'."</p> <p style="text-align: center;">Page 182</p>	<p>1 less distressing if I avoided him." 2 D180 describes cell searches which happened on at 3 least two occasions while he was at Brook House. Three 4 or four officers would enter and say "Cell search" and 5 he would have to leave and stand by the door. He could 6 hear them inside searching the cell and talking to each 7 other. They would throw excess bedding into the 8 corridor, which other detained people would take. 9 Clothes would be thrown over the bed and D180's 10 possessions scattered everywhere. The officers would 11 then leave without clearing up the mess. D180 would be 12 left feeling very low and as though he was not being 13 treated with any respect; like he was not human in some 14 way. 15 He says: 16 "I frequently saw officers using physical force 17 against detainees. Often, this was to try and restrain 18 detainees because, for example, a fight had broken out 19 in the detention centre or someone did not want to be 20 removed. The officers would frequently use far too much 21 force. Sometimes five or six officers would restrain 22 a detainee and then send him to E wing for a week or two 23 and then bring him back. This felt wrong. In my 24 opinion, if detainees were aggressive, this was often 25 because they were extremely frustrated or had mental</p> <p style="text-align: center;">Page 184</p>

<p>1 health difficulties and needed longer-term support."</p> <p>2 D180 describes a conversation with another Jamaican</p> <p>3 man, he thinks in 2016, after a failed attempt at</p> <p>4 deporting the man. The man described force being used</p> <p>5 against him and restraint. D180 saw the man's wrists</p> <p>6 were cut up and swollen. He was shocked.</p> <p>7 D180 also heard about officers punching a detained</p> <p>8 person, which he thinks happened on E wing.</p> <p>9 D180 explains he did everything he could to stay out</p> <p>10 of trouble and keep his head down, so he was never</p> <p>11 himself placed on rule 40. He was also never placed on</p> <p>12 ACDT.</p> <p>13 D180 describes officers being aware that detained</p> <p>14 people were smoking spice but that they did not care.</p> <p>15 He describes that spice, as well as the stress of</p> <p>16 detention, caused fights between detained people. D180</p> <p>17 states that those using spice would frequently collapse</p> <p>18 in Brook House and that officers and healthcare would</p> <p>19 usually try to deal with it themselves. D180's</p> <p>20 impression is that staff were trying to avoid people</p> <p>21 from outside of Brook House realising the severity of</p> <p>22 the problem. D180 had heard that a black male and</p> <p>23 a white female member of staff were involved in</p> <p>24 supplying spice and that the female member of staff</p> <p>25 underwent disciplinary procedures in relation to it. He</p> <p style="text-align: center;">Page 185</p>	<p>1 and he did not trust them but had nowhere else to go.</p> <p>2 D180 describes the difficulties he had in completing</p> <p>3 the voluntary return process. On 13 January 2017, he</p> <p>4 informed the Home Office he wanted to return. A flight</p> <p>5 was booked for March 2017 but he was informed his flight</p> <p>6 was cancelled, without explanation. Another flight was</p> <p>7 arranged for 28 April 2017 but that flight was also</p> <p>8 cancelled without explanation. D180 had a conversation</p> <p>9 with Callum Tulley about that cancellation, which was</p> <p>10 recounted in his video diaries at &lt;TRN000039&gt;. D180</p> <p>11 made a complaint but he does not recall receiving any</p> <p>12 response. D180 describes later discovering that the</p> <p>13 flight had been cancelled because the Home Office had</p> <p>14 recorded his date of birth incorrectly on the booking</p> <p>15 form.</p> <p>16 D180 explains that he didn't complain about</p> <p>17 detention staff because he believed they would stick up</p> <p>18 for each other. He heard that complaints made by others</p> <p>19 fell on deaf ears and he saw officers ganging up on</p> <p>20 people who had complained or ignoring them. He says,</p> <p>21 "All the officers would stick together. I felt really</p> <p>22 intimidated by the officers so I did my best to distance</p> <p>23 myself and stay out of trouble by not making any</p> <p>24 complaints".</p> <p>25 He describes hearing that officers would claim that</p> <p style="text-align: center;">Page 187</p>
<p>1 heard a lot of people say that officers were being paid</p> <p>2 for bringing spice into Brook House.</p> <p>3 D180 describes a protest carried out by another</p> <p>4 Jamaican man, who went onto the netting in the</p> <p>5 stairwell. The same man was forcibly deported. D180</p> <p>6 later saw on the news that the man had been shot and</p> <p>7 killed in Jamaica.</p> <p>8 D180 describes problems and pain he had with his</p> <p>9 hip, leg and shoulder. He states that he was prescribed</p> <p>10 ibuprofen each time he went to healthcare and felt that</p> <p>11 he was not being taken seriously. He describes delay in</p> <p>12 investigations to his shoulder. He was told to do</p> <p>13 exercises, but they did not work. It was not until D180</p> <p>14 returned to Jamaica that the pain went away; he thinks</p> <p>15 it was due to the stress of being detained.</p> <p>16 D180 explains that he developed depression whilst at</p> <p>17 Brook House, which he reported to healthcare and he was</p> <p>18 prescribed medication. However, there were</p> <p>19 discrepancies between what was recorded in</p> <p>20 fitness-to-fly assessments undertaken for the</p> <p>21 Home Office, which said that he did not have any mental</p> <p>22 health issues, and the assessment of him as a level 2</p> <p>23 Adult at Risk.</p> <p>24 He comments that nurses and other healthcare staff</p> <p>25 were often rude or unhelpful, did not take him seriously</p> <p style="text-align: center;">Page 186</p>	<p>1 complaints had been lost and that detainees believed</p> <p>2 officers would shred complaints. People could not</p> <p>3 complain about racism of staff because they felt</p> <p>4 intimidated.</p> <p>5 He says:</p> <p>6 "The officers did not care. They just wanted the</p> <p>7 detainees to go away. It felt as though we were just</p> <p>8 a nuisance and really it was just their job -- they were</p> <p>9 there to get paid, pay their bills and not to make</p> <p>10 anyone more comfortable or help the detainees if it was</p> <p>11 not necessary for their job."</p> <p>12 He says:</p> <p>13 "I was at Brook House for two years. It was</p> <p>14 a terrifying place. Everyone in the centre was there to</p> <p>15 be removed so everyone was scared and vulnerable. It</p> <p>16 was very frightening, and I felt so vulnerable,</p> <p>17 especially when I was blind. Brook House was also</p> <p>18 always understaffed which created a lot of problems.</p> <p>19 I didn't get enough support at Brook House to help with</p> <p>20 my disability and it seems healthcare didn't tell the</p> <p>21 Home Office about my health problems when they should</p> <p>22 have.</p> <p>23 "There wasn't enough support for people with mental</p> <p>24 health problems, spice was everywhere, and a lot of</p> <p>25 the Brook House officers were really intimidating and</p> <p style="text-align: center;">Page 188</p>

<p>1 racist. If immigration detention is going to continue, 2 far more should be done to look after the welfare of 3 detainees. People shouldn't be detained for so long 4 because that's when the depression kicks in." 5 D180 then provides a statement of truth and the 6 statement is signed and dated 8 March 2022. 7 THE CHAIR: Thank you. 8 Statement of D1876 (read) 9 MS MORRIS: D1876. 10 D1876's witness statement to the inquiry dated 11 2 March 2022 is at &lt;DPG000039&gt;. 12 D1867 is a Ukrainian national with Christian belief. 13 He speaks Ukrainian and Russian. Records show that he 14 was detained under immigration powers from 15 15 March 2016. He was moved to Brook House on 16 5 October 2016 and held there until 25 April 2017, when 17 he was granted immigration bail. D1876 was detained 18 again under immigration powers on 27 December 2018. He 19 was returned to Brook House on 15 January 2019 and 20 detained there until 3 September 2019, when, again, he 21 was released on bail. When he was detained in 2016, 22 D1876 spoke no English. 23 D1876 is recognised by the Home Office as a victim 24 of trafficking. He describes being deceived into coming 25 to the UK in 2015 for what he thought was legitimate</p> <p style="text-align: center;">Page 189</p>	<p>1 I immediately feel fear because they make me think about 2 authorities and power and remind me of immigration 3 detention. Sometimes, when I see a G4S minibus, I get 4 a panic attack. I have traumatic memories of 5 Brook House which are difficult to deal with and I still 6 suffer nightmares about my time at Brook House. I am 7 prescribed antidepressants and medication for my 8 depression and to help me sleep, but this does not 9 always work. I now work with a psychologist. 10 "Providing instructions for this witness statement 11 was very difficult for me and frequently brought me to 12 tears as I recalled events and memories that I have 13 tried to forget." 14 D1876 states that it was other detainees who 15 explained how things worked at Brook House. He 16 describes that when he was first detained at 17 Brook House, he felt very lost and confused as there was 18 only one other person on the wing who spoke Ukrainian, 19 but that person did not speak English. He describes how 20 he was often detained on wings where no-one spoke his 21 languages and how he once paid another detained person 22 to write a request for a transfer to a different wing so 23 that he could be with people who spoke one of his 24 languages. 25 D1876 describes spending some of his time in cells</p> <p style="text-align: center;">Page 191</p>
<p>1 employment. Instead, he was forced to work for little 2 to no money and had to live in inhumane and crowded 3 conditions with others who had also been trafficked for 4 similar purposes. D1876's claim to be a victim of 5 trafficking was initially refused by the Home Office. 6 However, the claim was reconsidered, supported by 7 medical evidence which warned that detention was not an 8 appropriate environment for a victim of trafficking who 9 suffers from psychological trauma and, in August 2019, 10 the Home Office made a decision that there were 11 reasonable grounds to believe that D1876 was a victim of 12 trafficking and he was released from detention. Later 13 a decision was made that D1876 is conclusively a victim 14 of trafficking. 15 He says: 16 "As I will explain, I found detention at Brook House 17 during both periods of detention to be very traumatic. 18 The living conditions were very bad and I experienced 19 awful treatment. 20 "Since leaving Brook House, I continue to live with 21 a sense of fear and anxiety that I did not have before 22 I entered Brook House. I suffer from anxiety and 23 depression and get bad headaches in a way I never did 24 before immigration detention. Whenever I see flashing 25 police vehicle lights and hear police sirens,</p> <p style="text-align: center;">Page 190</p>	<p>1 with two beds and some in cells with three beds. He 2 states that he found it difficult to stay in the cells 3 for the long periods of lock-up. He describes 4 difficulties with cramped conditions, lack of privacy, 5 especially when using the toilet, and how this made him 6 feel humiliated, and issues with cleanliness, hygiene, 7 drinking water and poor ventilation in the cells. D1876 8 also describes lack of bedding and being extremely cold 9 at night. 10 D1876 describes the period locked in the cells and 11 says: 12 "During these long periods spent in my cell, I just 13 remember wanting freedom so much." 14 He recalls that facilities and activities were 15 limited. He describes problems with the phone signal at 16 Brook House. It was difficult for D1876 to access 17 healthcare. He describes having no opportunity to have 18 letters from the hospital or his solicitors translated. 19 He states that he was rarely provided with a translator 20 or interpreter and describes how, on the limited 21 occasions when an interpreter was provided, he was only 22 permitted by the interpreter to reply "yes" or "no". He 23 describes feeling like he didn't really have a voice. 24 He says: 25 "The lack of translators made it hard to communicate</p> <p style="text-align: center;">Page 192</p>



<p>1 my needs to immigration officers, doctors and nurses.</p> <p>2 If I wanted to say something, I needed to find</p> <p>3 a detainee to interpret for me. This meant I had no</p> <p>4 privacy when it came to my medical concerns, immigration</p> <p>5 concerns or complaints."</p> <p>6 He describes how some officers were frequently rude</p> <p>7 and hostile about his inability to communicate in</p> <p>8 English. He recalls one female officer yelling at him,</p> <p>9 "Where is your fucking English?". He explains that he</p> <p>10 usually had to pay other detainees to interpret for him.</p> <p>11 He says:</p> <p>12 "Communicating medical problems was the most</p> <p>13 difficult part. If I wanted to say something, I needed</p> <p>14 to pay a detainee with items from the shop to interpret</p> <p>15 for me. If you wanted to speak with a GP, first you</p> <p>16 needed to speak to a nurse, and to speak to the nurse,</p> <p>17 there was a queue. This meant that just to make an</p> <p>18 appointment with the doctor, I needed to pay someone to</p> <p>19 queue with me and explain my medical problems to the</p> <p>20 nurse. As mentioned, this meant that I had no privacy</p> <p>21 around my medical problems.</p> <p>22 "Not having access to interpreters could also be</p> <p>23 very scary. Often officers would be attempting to</p> <p>24 communicate something very important and I would have no</p> <p>25 idea what they were asking. I was once accused of</p> <p style="text-align: center;">Page 193</p>	<p>1 painkillers for his stomach in the night but officers</p> <p>2 did not attend for about 30 minutes. When an officer</p> <p>3 did attend, he promised to call a nurse, but no nurse</p> <p>4 came. D1876 had to use the cell call button twice more</p> <p>5 and eventually a nurse came, but no medication was</p> <p>6 prescribed. He thought of cutting himself with his</p> <p>7 razor and a manager attended to calm him down and</p> <p>8 confiscate the razor. He describes feeling so sick that</p> <p>9 night and the psychological pressure from the noise</p> <p>10 being all too much.</p> <p>11 D1876 states that he often felt scared at</p> <p>12 Brook House. He describes feeling targeted by some</p> <p>13 members of staff. He discusses the ways in which he</p> <p>14 felt members of staff targeted and tried to intimidate</p> <p>15 him, including slamming the metal flap on the cell door</p> <p>16 at night and laughing at his scared reactions.</p> <p>17 D1876 describes receiving assistance from GDWG,</p> <p>18 including credit for phone calls, clothing and talking</p> <p>19 to lawyers on his behalf. He found it difficult to</p> <p>20 contact his solicitors because of the poor signal at</p> <p>21 Brook House and he usually had to send a fax, after</p> <p>22 paying someone to translate a message into English.</p> <p>23 He says:</p> <p>24 "In general, the detention officers at Brook House</p> <p>25 treated the detainees extremely badly. The officers had</p> <p style="text-align: center;">Page 195</p>
<p>1 having drugs in my cell and officers were telling me</p> <p>2 they had an order to check the room. With the help of</p> <p>3 another Ukrainian, I told them that I do not smoke, that</p> <p>4 they could check the room, but that if they found any</p> <p>5 drugs, they would not be mine. When asked, the manager</p> <p>6 told me there were orders from top management to do the</p> <p>7 check. I was very lucky that, on that occasion, there</p> <p>8 was another detainee who could help me but that was down</p> <p>9 to luck."</p> <p>10 D1876 describes working as a kitchen porter, which</p> <p>11 he was very good at. However, some of the kitchen staff</p> <p>12 treated detained people unfairly, such as by eating lots</p> <p>13 of food in front of them when detained people would be</p> <p>14 allowed very little. D1876 also describes kitchen staff</p> <p>15 stealing food to take home.</p> <p>16 D1876 describes sleeping at Brook House being very</p> <p>17 difficult due to the noise. He talks about the loud</p> <p>18 noise from the cell call buttons, which would not be</p> <p>19 picked up by officers for five minutes or more. In</p> <p>20 turn, this would cause detained people to bang on their</p> <p>21 cell doors. There would also be noise from officers</p> <p>22 slamming doors and whistling and detained people would</p> <p>23 shout too. D1876 at times thought the officers were</p> <p>24 making loud noises deliberately to disturb detained</p> <p>25 people. On an occasion recalled by D1876, he needed</p> <p style="text-align: center;">Page 194</p>	<p>1 absolutely no respect for the detainees and would use</p> <p>2 abusive or bullying techniques. For example, when they</p> <p>3 conducted body searches, they would be very</p> <p>4 disrespectful and forceful.</p> <p>5 "The officers would frequently create situations</p> <p>6 which would lead to conflict between the detainees or</p> <p>7 place a lot of psychological pressure on us. For</p> <p>8 example, I remember one period when the Russian and</p> <p>9 Ukrainian detainees were moved so that they would be</p> <p>10 sharing cells and this was exactly when there was a lot</p> <p>11 of tension between the two nations. It did not feel</p> <p>12 like a coincidence. I really think that the officers</p> <p>13 knew that this would spark conflict and tension. I was</p> <p>14 moved into a cell with a Russian detainee who started</p> <p>15 swearing at me and would try to start a fight with me.</p> <p>16 Sometimes I would refuse to go into my cell to avoid</p> <p>17 him, but this always involved a risk that the officers</p> <p>18 would forcibly return me to my cell. I remember that</p> <p>19 when I was in that cell, I felt afraid of my cellmate.</p> <p>20 There was also another Russian on the same wing who was</p> <p>21 friends with my cellmate. I was frightened of him too.</p> <p>22 I am not sure now, but I think Naomi [of GDWG] helped me</p> <p>23 with this situation."</p> <p>24 D1876 describes that some detainees were treated</p> <p>25 worse than others and describes a young man who didn't</p> <p style="text-align: center;">Page 196</p>

<p>1 speak to anyone being treated particularly badly and</p> <p>2 being told off aggressively. On one occasion, D1876 saw</p> <p>3 force being used on the man -- officers twisting his arm</p> <p>4 and forcing him into his cell. He also saw the man</p> <p>5 being taken off to isolation where he was kept for two</p> <p>6 months. D1876 was himself later taken to E wing and the</p> <p>7 man was still there -- screaming and banging his head or</p> <p>8 something.</p> <p>9 He says:</p> <p>10 "In general, I felt very bullied and threatened</p> <p>11 while I was in Brook House. Sometimes bullying came</p> <p>12 from other detainees, for example, the Russian speaker</p> <p>13 I had to share a cell with and the cellmate who tried to</p> <p>14 suffocate me (which I explain later in this statement).</p> <p>15 Other times, it came from interpreters who were not</p> <p>16 properly translating for me or kitchen staff who treated</p> <p>17 me unfairly. Often this bullying or threatening</p> <p>18 behaviour came from the officers themselves. As far as</p> <p>19 my treatment by officers was concerned, this was worse</p> <p>20 after force was used against me because then I felt that</p> <p>21 the officers involved were particularly intimidating</p> <p>22 towards me. I was very scared and did not feel safe.</p> <p>23 "I found the use of force in Brook House shocking.</p> <p>24 The detention officers were physically abusive towards</p> <p>25 me and other detainees."</p> <p style="text-align: center;">Page 197</p>	<p>1 the incident, feeling bullied and threatened, and afraid</p> <p>2 of some of the staff, particularly the manager, Adam.</p> <p>3 He describes a further incident, when he discovered the</p> <p>4 manager Adam in his cell, interfering with his personal</p> <p>5 items. On 3 June 2019, and then again on 22 June 2019,</p> <p>6 D1876 was placed on to ACDT, which he explains was</p> <p>7 because he had been in pain to his shoulder for many</p> <p>8 weeks and was starting to think about hurting himself.</p> <p>9 D1876 describes having ongoing physical and mental</p> <p>10 health problems as a result of this use of force.</p> <p>11 D1876 also describes a use of force on him on</p> <p>12 31 August 2019 to effect his removal to Morton Hall IRC.</p> <p>13 He says that his solicitors have explained that the</p> <p>14 decision to move him to Morton Hall and to use force to</p> <p>15 do so was made, even though the Home Office had, three</p> <p>16 days earlier, made a positive reasonable grounds</p> <p>17 decision that he might be a victim of trafficking and</p> <p>18 were intending to release him once a release address was</p> <p>19 found. D1876 describes that he was told to speak to an</p> <p>20 immigration officer on the visits corridor and, when he</p> <p>21 attended, he was told to sign a document but that he</p> <p>22 refused because there was no interpreter present and he</p> <p>23 did not know what the document said.</p> <p>24 D1876 describes a male nurse appearing with five</p> <p>25 officers who were wearing helmets and carrying shields.</p> <p style="text-align: center;">Page 199</p>
<p>1 D1876 describes officers using force on him on</p> <p>2 11 March 2019 after he refused to return to his cell</p> <p>3 because the heating was not working. He had been moved</p> <p>4 to the cell three days earlier and had complained</p> <p>5 several times to the wing manager about the lack of</p> <p>6 heating. He had developed a cold, earache and a bad</p> <p>7 headache from the long hours spent in the cold cell.</p> <p>8 D1876 describes that when he refused to go into the cell</p> <p>9 for lock-in on the fourth night, he was restrained.</p> <p>10 D1876 states that his left arm was twisted back behind</p> <p>11 his body by a manager called Adam, so forcefully that he</p> <p>12 felt a strong click in his left shoulder and extreme</p> <p>13 pain. The officers then pulled D1876's right arm back</p> <p>14 too and his head felt like it was being twisted. He</p> <p>15 states that he was left with marks on his neck. He was</p> <p>16 handcuffed and taken to isolation in E wing.</p> <p>17 It was not until the next day that D1876 was taken</p> <p>18 to hospital. There he was diagnosed with a left arm</p> <p>19 clavicle injury. He was not taken to hospital for his</p> <p>20 follow-up appointment or to several appointments for an</p> <p>21 MRI scan. D1876 describes his arm being in a sling for</p> <p>22 a period, being in pain to his left arm and shoulder,</p> <p>23 sleep problems due to the pain and finding it stressful</p> <p>24 and upsetting not being taken for hospital appointments.</p> <p>25 He describes feeling even less safe in detention after</p> <p style="text-align: center;">Page 198</p>	<p>1 D1876 states that the nurse told the officers that his</p> <p>2 health was okay and that they could do what they wanted</p> <p>3 with him. D1876 recalls ending up on the floor, holding</p> <p>4 on to the table leg, and an officer smiling and laughing</p> <p>5 in a really evil and vicious way, before grabbing</p> <p>6 D1876's left hand and twisting it. D1876 describes that</p> <p>7 it hurt so much that he cried. The officers then</p> <p>8 carried him to E wing, where he was placed on rule 40</p> <p>9 for around two days.</p> <p>10 He describes feeling really, really scared of</p> <p>11 the officers whilst in isolation. An ACDT was opened</p> <p>12 the same day and he was placed on constant supervision</p> <p>13 as he was having suicidal thoughts. For several days</p> <p>14 after the incident, D1876 refused to eat. He also</p> <p>15 called the police to report his fears that the officers</p> <p>16 would use force on him again. He remained on E wing</p> <p>17 until his release three days later. He says he does not</p> <p>18 understand why the Home Office were trying to move him</p> <p>19 to another detention centre when they were considering</p> <p>20 release, nor why force was used when the Home Office had</p> <p>21 made a decision that he might be a victim of</p> <p>22 trafficking. He says he has photos of the injuries</p> <p>23 caused by the officers and comments, "I don't think the</p> <p>24 officers saw detainees as people".</p> <p>25 D1876 describes seeing force used by detention</p> <p style="text-align: center;">Page 200</p>

<p>1 officers on other detainees. He describes that, whilst</p> <p>2 detained at Brook House in 2017, he saw a Polish</p> <p>3 detainee sitting on the netting for hours and hearing</p> <p>4 a lot of noise and commotion when officers removed him</p> <p>5 from the netting. He says another detainee told him</p> <p>6 that officers had put tape around the Polish man's legs</p> <p>7 and some kind of balloon or ball in his mouth to prevent</p> <p>8 him from screaming before being dragged away.</p> <p>9 D1876 also describes another occasion, he thinks in</p> <p>10 2019, when he saw officers twisting the hand of another</p> <p>11 Ukrainian detainee before taking him away -- he thinks</p> <p>12 to E wing -- by force. The man was placed into</p> <p>13 handcuffs, with a belt around his body. D1876 says:</p> <p>14 "When I saw detainees being transported like this,</p> <p>15 I felt like we were treated like cattle."</p> <p>16 He says that the man later returned to Brook House</p> <p>17 after the pilot had refused to fly with him on the</p> <p>18 plane. He says he saw the man had bad bruising to his</p> <p>19 wrist, which the man told him was from the force used.</p> <p>20 He says:</p> <p>21 "On 3 February 2017, whilst I was held on A wing,</p> <p>22 I was attacked by my Russian cellmate. From the</p> <p>23 beginning, there was tension between us, and I felt</p> <p>24 unsafe sharing a room with him. He blamed Ukrainians</p> <p>25 for the war between our countries. I had been annoyed</p> <p style="text-align: center;">Page 201</p>	<p>1 the incident, he could no longer work as a kitchen</p> <p>2 porter. D1876 complained. Eventually his work was</p> <p>3 reinstated.</p> <p>4 D1876 states that according to his records,</p> <p>5 a rule 35 report was completed on 5 February 2019, which</p> <p>6 confirmed that he may be a victim of torture, but the</p> <p>7 Home Office decided not to release him.</p> <p>8 He describes refusing to eat on several occasions,</p> <p>9 sometimes for two or three days and other times for</p> <p>10 longer. Sometimes it was a protest about a lack of</p> <p>11 adequate healthcare.</p> <p>12 D1876 describes there being a lot of drug use in</p> <p>13 Brook House, particularly spice, which was used openly</p> <p>14 and that people were frequently overdosing on spice.</p> <p>15 While some members of staff would stop detained people</p> <p>16 using spice, others would not respond or do anything</p> <p>17 about it. D1876 also talks about having to share a cell</p> <p>18 with someone who was using drugs heavily, the conflict</p> <p>19 this created and it taking time to get moved to another</p> <p>20 cell. D1876 also describes seeing officers enter and</p> <p>21 leave the cell of a detained person who would then have</p> <p>22 other detained people visit his cell and how D1876</p> <p>23 suspected that officers were bringing drugs to the</p> <p>24 detained person.</p> <p>25 He says:</p> <p style="text-align: center;">Page 203</p>
<p>1 with him for not returning my mobile phone charger which</p> <p>2 he had borrowed. He became very aggressive and called</p> <p>3 me abusive names. He said I was racist and knocked me</p> <p>4 to the bed and started to suffocate me and push his</p> <p>5 fingers into my eyes. I was terrified. Since my arms</p> <p>6 were pinned down, I bit his cheek. He pushed his</p> <p>7 fingers into my mouth so I bit his fingers in defence.</p> <p>8 Another detainee ran into my room and dragged him from</p> <p>9 me, though he continued to threaten to kill me and</p> <p>10 managed to hit me in the chest. Eventually, the other</p> <p>11 detainee managed to pull my cellmate away. At the time,</p> <p>12 I was so scared of my cellmate and so confused that</p> <p>13 I did not report the incident or my injuries to anyone.</p> <p>14 I had told officers before the attack that there was</p> <p>15 a war between our countries and I did not want to share</p> <p>16 a cell with him, but nobody listened. Later,</p> <p>17 a detention officer saw my injuries and called me into</p> <p>18 his office to look at them and asked me what had</p> <p>19 happened. Initially, I was reluctant to tell him</p> <p>20 because I was frightened my cellmate would kill me but</p> <p>21 eventually I told the officer what had happened."</p> <p>22 D1876 states that instead of receiving support and</p> <p>23 protection from officers, he was placed on rule 40</p> <p>24 segregation for a day. On 6 February 2017, the</p> <p>25 Home Office wrote to him to say that, because of</p> <p style="text-align: center;">Page 202</p>	<p>1 "The healthcare was awful in Brook House. There was</p> <p>2 no mental health support and interpreters were rarely</p> <p>3 used, making it very hard for me to explain any physical</p> <p>4 or mental health problems that I was experiencing."</p> <p>5 D1876 describes making a complaint to the IMB on</p> <p>6 14 January 2017. He felt that the treatment he received</p> <p>7 from a doctor, who did not provide adequate pain relief,</p> <p>8 was racist, as he had not been listened to or taken</p> <p>9 seriously.</p> <p>10 He then describes further issues with healthcare and</p> <p>11 difficulties accessing hospital treatment in 2019.</p> <p>12 D1876 describes the complaints he made while</p> <p>13 detained at Brook House: the complaint to the IMB</p> <p>14 mentioned earlier about racist treatment by a doctor,</p> <p>15 a complaint to Brook House on 8 February 2017 after he</p> <p>16 had been attacked, placed in segregation and not</p> <p>17 permitted to work, and a complaint to the IMB about the</p> <p>18 same issue on 22 February 2017. He says:</p> <p>19 "I found the two periods I was detained at</p> <p>20 Brook House awful. I was treated by officers and</p> <p>21 healthcare staff as though I was not human and without</p> <p>22 any respect.</p> <p>23 "It is hard to remember all the instances of</p> <p>24 intolerance, unfairness and violence. Problems seemed</p> <p>25 to manifest in new ways every day so that suffering by</p> <p style="text-align: center;">Page 204</p>

<p>1 detainees -- in whatever form it took -- was the norm.</p> <p>2 The process of writing this statement has brought to the</p> <p>3 surface many incidents I did not previously remember.</p> <p>4 "My experience of detention continues to haunt me.</p> <p>5 I still experience many problems as a result of my</p> <p>6 treatment in detention. My body reminds me of</p> <p>7 Brook House through its constant pains. My hand still</p> <p>8 makes crackling noises when I use it, because of the use</p> <p>9 of force against me on 31 August 2019, and sometimes it</p> <p>10 still hurts. My left shoulder injured by officers on</p> <p>11 11 March 2019 still flares up frequently. I still take</p> <p>12 medications (Diclac and Nimesil) for pain in my hand and</p> <p>13 shoulder, as I could not cope otherwise.</p> <p>14 "I also have mental health problems as a result of</p> <p>15 my detention at Brook House. In the past, I feared for</p> <p>16 my mother's safety when she was being threatened by my</p> <p>17 traffickers. I also feared for my own safety,</p> <p>18 especially after being followed and stabbed by the</p> <p>19 organisation that trafficked me. These experiences gave</p> <p>20 me severe anxiety, but everything became much worse at</p> <p>21 Brook House. After force was used against me</p> <p>22 in March 2019, I began to have thoughts of self-harm and</p> <p>23 suicide. I had never had such thoughts before.</p> <p>24 "I am still dealing with the impact of my health</p> <p>25 deteriorating the way it did. I still get headaches and</p> <p style="text-align: center;">Page 205</p>	<p>1 statement is signed and dated 2 March 2022.</p> <p>2 THE CHAIR: Thank you very much, Ms Morris. I would like to</p> <p>3 pass on my thanks to D393, D180 and D1876 for all of</p> <p>4 their statements. Thank you very much. Ms Townshend?</p> <p>5 MS TOWNSHEND: Chair, we will return tomorrow at 10.00 am,</p> <p>6 please, when we will hear from Helen Wilkinson from the</p> <p>7 PSU.</p> <p>8 THE CHAIR: Thank you very much. See you at 10.00 am.</p> <p>9 (4.30 pm)</p> <p>10 (The hearing was adjourned to</p> <p>11 Thursday, 24 March 2022 at 10.00 am)</p> <p>12</p> <p>13</p> <p>14 I N D E X</p> <p>15</p> <p>16 MR PHILIP ANDREW SCHOENENBERGER .....1</p> <p>17 (sworn)</p> <p>18</p> <p>19 Examination by MS MOORE .....1</p> <p>20</p> <p>21 Questions from THE CHAIR .....98</p> <p>22</p> <p>23 MS MICHELLE SMITH (sworn) .....99</p> <p>24</p> <p>25 Examination by MS SIMCOCK .....99</p> <p style="text-align: center;">Page 207</p>
<p>1 anxiety to an extent that I did not experience before</p> <p>2 I was detained. The headaches become worse when</p> <p>3 something triggers memories of my detention -- for</p> <p>4 example, when a G4S vehicle drives by, or when I had</p> <p>5 meetings with my solicitors to make this statement.</p> <p>6 I also suffer from depression which I did not have</p> <p>7 before I was detained at Brook House.</p> <p>8 "I take medication to help me sleep and to cope with</p> <p>9 my anxiety and depression. I did not need this</p> <p>10 medication before my detention in Brook House. For</p> <p>11 sleep, I take Phenergan and for my depression I take</p> <p>12 Sertraline.</p> <p>13 "I began having problems with my stomach while I was</p> <p>14 held at Brook House, which healthcare had to give me</p> <p>15 strong painkillers for. I also developed problems in my</p> <p>16 ear and my heart. Sometimes I still feel like there is</p> <p>17 a needle going into my heart. For this, I now take</p> <p>18 a drug called Corvalmen, which I get from the Ukraine.</p> <p>19 "I think detainees at Brook House were treated like</p> <p>20 dirt. I will probably never forget my awful time in</p> <p>21 that place. It's been two and a half years since I was</p> <p>22 released but I am still in the shadow of Brook House.</p> <p>23 I relive my traumatic experiences in Brook House every</p> <p>24 day."</p> <p>25 D1876 then provides a statement of truth and the</p> <p style="text-align: center;">Page 206</p>	<p>1</p> <p>2 Statement of D393 (read) .....161</p> <p>3</p> <p>4 Statement of D180 (read) .....173</p> <p>5</p> <p>6 Statement of D1876 (read) .....189</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p> <p style="text-align: center;">Page 208</p>

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