

Rec 13/7/17 PSU
Goulder, Karen

From: Benson Stephanie (PSU) <[DPA]>
Sent: 13 July 2017 14:40
To: Goulder, Karen
Cc: Wilkinson Helen
Subject: Official Sensitive - [D2054] complaint
Attachments: [D2054] Complaint.pdf

Good Afternoon Karen,

The Professional Standards Unit are investigating a complaint made Mr [D2054]
a copy of the complaint is attached.

Mr [D2054] has alleged assault at Brook House IRC on 28 June 2017 in his room prior to be taken for removal scheduled for 29 June 2017

The Investigating Officer is Helen Wilkinson (copied into this email), please can you include him in all responses.

To help us with our investigation, please could you provide the following:

- CCTV showing Mr [D2054] room; please can you include all CCTV showing his journey to reception for his removal
- Any Use of Force reports
- Any Incident reports
- Details of the staff involved / on duty
- Any other relevant documentation
- Mr [D2054] was also on an Open ACDT log just prior to his removal; Please can you provide copies of these
-

If you have any questions; please do not hesitate to contact me.

Kind regards

Stephanie Benson | Assistant Investigating Officer | Professional Standards Unit –
Operational Support
Security, Science & Innovation Directorate
Part-time working pattern Wednesday to Friday

Home Office, Block C, 3rd floor, Soapworks, Ordsall Lane, Salford, M5 3LZ
T: [DPA] | F: [DPA] | www.homeoffice.gov.uk

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From: **D2054** [mailto:**DPA**]
Sent: 03 July 2017 21:53
To: Public Enquiries (CD)
Subject: Report

Dear Sir/Madam,

Please I am writing regarding the way they treat some people in detainment camp is very bad My name is **D2054** **DPA** detained at Brook House Gatwick Immigration Removal Centre I was in D wing room 015 prison number 11681272.

I was starved for 5 days without food the health care complained that I lost 3 kg within five days On the 28/6/2017 around 12:30 pm they locked every one inside their room then came to my own room around 1 pm and told me to come and take my food first before other prisoners will start coming for their own food they gave me boiled potatoes prepared in a private container which they have not served me food like that before and the potatoes look like they boiled it with chemicals I don't have any choice than to eat it and take my medication then one hour later they came and told me that I will be flying to Nigeria in a few hours later which I don't even know what happened to me I got angry and used a shaving stick blade and stabbed myself 3 times on my arms which I did not know why I did that then my room mate called **D1157** rushed and told them that I stabbed myself then they called the health care nurse and they came and treated me as I was bleeding seriously after that they moved me from my room to where mental people are staying and they put a security man on my door few hours later they gave me another food and I asked for my medication and they said they don't know about it then around 9 pm one of the security came and informed the one on my door that they are moving me to Nigeria in a few hours then I started crying because I am still bleeding a bit and lost some blood already then around 11 pm I saw a lot of security men some with video camera recording what was going on and they came to me that they are moving me to the airport I was trying to explain to them about my condition they rushed me and I hit my head on the floor and I became unconscious then I started shouting Jesus they helped me one of the security the hand was covered with blood from my injuries they gave me a long sleeve t shirt to cover where I was bleeding they put me on the van to the airport on the way to the airport I told me I can not remember things again because I lost my memories they said when I reach airport that there is health care there that they will treat me and give me my medication before I will fly to Nigeria then reaching at the airport there is no health care they just helped me to the flight when the flight took off they gave me one out of six of my medication and said they can't find the rest of my medication I am really depressed at least consideration should have been made for a high risk of bleeding while on the board had it been that I died from bleeding I have been asking myself where is the human right instead people are still being treated like this please I will like police to investigate on this matter is very bad there is CCTV around the premises. Then after the escort flying with me gave me two addresses and said they are charity organisations in Nigeria that is helping people that they will help me and treat me also support me with my medication check me if I have brain damage and get me a place to stay and get a job if I need one then I was a bit relieved. When I reached **DPA** I called the numbers one is off and one they said is a wrong number that there is nothing like that kind of charity in Nigeria then there my problems started as I left **DPA** 12 years ago can't remember any place again I came back with only 15 pounds I don't have any place to go as a result of my head I hit on the floor and lost my memory I started walking the whole street of **DPA** looking for help where I can be

treated but no hospital or clinic want to help me with out money instead they all feel sorry for me people I meet on the street help me by taking me from one hospital to another and one police station to the other some police people where asking me what do I want them to do that they are not a doctor and is only one police man that really feel sorry for me and gave me a police report and he did not take any money from me where I have family is in [DPA] and they cannot afford to treat me and there is not place I can get free treatment in Nigeria I was tortured in [DPA] and cannot go there also am homeless and don't have money for check up to know if I have brain damage or any other mental issues as it getting worst everyday I can't sleep I have already send a letter to British high commission in [DPA] with the police report they have me since Friday letting them know my present condition now but they have not said anything but now I am confused don't know what to do.

Thanks best regards

D2054

This email has been scanned by the Symantec Email Security.cloud service.
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To help us with our investigation, please could you provide the following:

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Goulder, Karen

From: Goulder, Karen
Sent: 13 July 2017 15:59
To: 'Benson Stephanie (PSU)'
Cc: Wilkinson Helen
Subject: RE: Official Sensitive - [D2054] complaint

Hi Stephanie,

I have sent your request onto our security department and asked our Safer Community team to look for any ACDT info.. We may not have the full file as he has left the centre, but I will see what I can get for you.

Are you also contacting Healthcare regarding this as some of it seems to be geared towards them, including how his cuts were dealt with etc?

Kind regards

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

Phone: [DPA]

Email: [DPA] or [DPA]

www.g4s.com/uk

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From: Benson Stephanie (PSU) [mailto:[DPA]]
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Goulder, Karen

From: Goulder, Karen
Sent: 13 July 2017 15:31
To: Saunders, Ben; Stephen Skitt
Cc: Haughton, Dan
Subject: FW: Official Sensitive - [D2054] complaint
Attachments: [D2054] Complaint.pdf

Importance: High

Hi Ben and Steve,

This has come in today from PSU. I did not know about this as a head's up and I am not sure if the Home Office are aware or Healthcare as it seems some of his issues are also linked to his treatment from them.

I will ask for info from Security as requested below, but should a copy of the complaint be sent to Home Office and Healthcare?

Kind regards

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

Phone: [DPA]

Email: [DPA] or [DPA]

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Home Office

HOME OFFICE

Home Office Security
Professional Standards Unit

A Home Office investigation into the circumstances surrounding the alleged instances of mistreatment of Mr D2054 during his detention in Brook House Immigration Removal Centre.

IMG Ref: 17/1557/1555/8

Investigating Officer Helen Wilkinson

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1. INTRODUCTION

- 1.1 Mr [D2054] sent his email complaint on 03 July 2017 alleging that on 28 June 2017, Detainee Custody Officers (DCO) at Brook House Immigration Removal Centre (IRC) had used excessive force when moving him from his room to the reception area and his handover to Tascor DCOs for his removal to Nigeria. He also alleged that whilst in Brook House IRC he had been starved for five days, had not been treated properly for his self harm injuries and had been given the incorrect medication. On his flight he had been given only one of his six medications and incorrect advice about support in Nigeria. He alleged that as a result of his treatment in Brook House IRC and on the way back to Nigeria, he had almost died from loss of blood from his self harm injuries, been rendered unconscious and banged his head during the use of force and now had memory loss, possible brain damage and nonstop serious headaches.
- 1.2 The case was received in the Professional Standards Unit (PSU) on 07 July 2017.

2. TERMS OF REFERENCE

- 2.1 To investigate the complaint allegation made by Mr [D2054] that:
- 2.1.1 He had been starved for five days and then on 28 June 2017 had been given food that he was 'very convinced that something might be wrong with that lunch food they gave to me on 28/6/2017 either because I told them they should kill me or they are trying now to move me to Nigeria without me knowing...It looked like it had been boiled in chemicals.'
- 2.1.2 He had not been provided with his medication prior to his removal from his room to reception and the medication provided to him on the flight to Nigeria was incomplete.
- 2.1.3 He had self harmed on 28 June 2017 because he had been told that he would be removed to Nigeria in a few hours, this had been the first time that he had been told that he was going to be removed to Nigeria and he was afraid for his life.
- 2.1.4 He had been 'bleeding seriously' from the three wounds he had caused in his arm and this had not been treated properly by Healthcare so he had continued to bleed before, during and after the use of force and his return to Nigeria that could have caused him to die from the amount of blood he lost.
- 2.1.5 The DCOs who entered his room and used force to move him to reception had 'rushed him when he was trying to explain about his condition and not given him chance to walk to reception.'
- 2.1.6 He had hit his head on the floor during the use of force, had been unconscious and the force used on him had continued regardless. Given this and the lack of treatment, he believed he had brain damage, loss of memory, could not sleep and 'none stop headaches.'
- 2.1.7 During the journey to the airport, Tascor DCOs had provided him with addresses for support organisations in Nigeria that were incorrect.

- 2.2 To consider and report on whether a disciplinary offence may have been committed by any officer involved in the incident and whether relevant local and national policies/guidelines were complied with.
- 2.3 To consider and report on whether there is any learning for any individual or organisational learning, including whether any change in policy or practice would help to prevent a recurrence of the event, incident or conduct investigated.
- 2.4 To consider and report on whether the incident highlights any good practice that should be disseminated.

3. HOME OFFICE POLICY & GUIDANCE

3.1 The Civil Service Code

There are values and standards expected of all Home Office employees. The Civil Service Code states that employees are expected to carry out their role with dedication and with commitment to the Civil Service and its core values of integrity, honesty, objectivity and impartiality. This report therefore looks to ensure that the standards of conduct laid down for Home Office employees have been observed.

3.2 Detention Service Order 03/2015 - Handling of Complaints

The Detention Services Complaints Guidance ensures that the investigation of complaints is dealt with effectively and efficiently. This investigation and report has been conducted in line with the formal investigation procedures set out in the Complaints Guidance.

3.3 Other guidance and policies

This investigation has also considered the Detention Centre Rules (Statutory Instrument 2001 number 238) paragraphs 7 regarding searching of detainees, 39 (1) to (3) regarding general security and safety in the centre, 40 regarding removal from association, 41 regarding use of force by DCOs and 42 regarding temporary confinement. The Operating Standards in IRCs Discharge paragraph 18 regarding discharge from the IRC specifically about medication, Catering paragraph 7 regarding healthcare and special dietary requirements., Removal from Association, Suicide and Self Harm Prevention, Temporary Confinement and Use of Force have been considered.

The Operating Standards for Escorting Custody of Detainees paragraph 7 regarding the recording of any existing injuries or complaints of injuries at handover, Medical Care paragraphs 1 and 2 regarding sufficient medication being provided for the duration of the escort and recording this, Security regarding the risk assessment and application of handcuffs and rub down search and Use of Force have also been considered.

Finally, the Detention Service Orders (DSO) on Use of Restraints (07/2016), Removal from Association and Temporary Confinement (02/2017), Detainee

Custody Officer Certification (10/2014), Service of Removal Directions (03-2014), Food and Fluid Refusal (03/2013), Person Escort Record (18/2012), Removal of Blades (10/2012), Searching Policy (09/2012), Assessment Care and Detention and Teamwork (06/2008) and Self Harm (04/2006) have also been considered when evaluating the actions and responses of DCOs from Brook House IRC and Tascor to the behaviours and actions of **D2054**.

4. OFFICERS SUBJECT TO INVESTIGATION

Detainee Custody Manager (DCM) Ben Shadbolt (Head and Left arm)
DCM Dave Aldis (Supervising Officer)
DCO Jonathan Martin (Right arm)
DCO Derek Murphy (Head / Shield and Left arm)

DCOs Daniella Di-Tella and Andrew Simmons were treated as witnesses given there was no direct allegation against them.

PSU do not investigate healthcare complaints so the evidence requested from healthcare (Clinical Lead Chrissie Williams) was as a witness only.

The complaints relating to the Tascor DCOs (inaccurate advice) were considered as none malicious based on the evidence of Mr **D2054**, so again the evidence was gathered as witness evidence only.

All DCOs were accredited and in date with their Control and Restraint (C & R) refresher training at the time of the alleged excessive use of force on 28 June 2017.

5. SUMMARY/CHRONOLOGY OF INVESTIGATION

- 5.1 The allegations made by Mr **D2054** fell into two categories. Given the allegations of excessive use of force causing injury to Mr **D2054**'s head and aggravating the self harm injuries to his left arm and the food tampering, these criminal matters were referred to Sussex police on 20 July 2017. They responded that they had created a report for this and their reference number was 47170107133. On 24 July 2017 their response was 'it is not clear that a crime has occurred from the limited details given, Mr **D2054** has banged his head as officers have entered his room following Mr **D2054** self-harming. Is this an allegation of excessive force / assault? Or was the injury sustained due to Mr **D2054** resisting officers? Is he also alleging any offences about his food being tampered with? Once your investigation is completed please inform Sussex police of any crimes to be recorded and investigated.'
- 5.2 Clarification was provided and Sussex police responded on 30 July 2017, 'it should be fine for you to proceed with your investigation, the officer in charge may need to contact you in due course to discuss you investigation as well.' The outcome of the investigation has been provided to Sussex police.
- 5.3 The other allegations relating to the lack of medication, provision of incorrect support advice and starvation for five days fall into unprofessional conduct of staff at Brook

House IRC.

- 5.4 A telephone interview was conducted with Mr **D2054** on 11 August 2017, given he had been removed to Nigeria on 28 June 2017. Mr **D2054** submitted additional email evidence prior to and post his interview. This included photographs of his self harm injuries. Mr **D2054** suggested a witness to his self harm, Mr **D1157** but HO and Brook House IRC records showed that Mr **D1157** left Brook House IRC on 30 June 2017 for a flight to Ireland. There was no contact address on either department's records. Given the limited evidence that Mr **D1157** could provide to the allegations, it was not felt detrimental to the investigation that his evidence could not be obtained.
- 5.5 Medical consent was obtained from Mr **D2054** on 14 July 2017 and his medical records were received on 21 July 2017.
- 5.6 HO records showed that Mr **D2054** was an overstayer who was encountered by Immigration Enforcement in May 2016 working illegally. He was detained and submitted various immigration claims and an asylum claim that were all refused. He was detained on 15 June 2017, served with the IS.91R advising him that his removal from the UK was imminent and taken to Brook House IRC. On 21 June 2017, Mr **D2054** was served with his removal directions (IS.151G) in the presence of both HO and Serco staff. When he stated on 21 June 2017 that he could not return to Nigeria and would kill himself, DCM Aldis opened an ACDT and recorded this. There are contemporaneous notes on his HO electronic record about this. This ADCT was completed from 21 June 2017 to the point of his removal to Nigerian authorities on 28 to 29 June 2017. A copy of this is with both Brook House IRC and Tascor evidence.
- 5.7 Evidence requests were issued to Brook House IRC Single Point of Contact (SPOC) Karen Goulder and Tascor SPOC Graham Autry on 13 July 2017.
- 5.8 A copy of the Person Escort Report (PER), Passive Restraint Report, Property Sheet and Manifest extract were received from SPOC Autry on 14 July 2017. Tascor's copy of the ACDT was received on 17 July 2017. Key Tascor DCOs were identified and submitted witness statements by 25 August 2017. These were Senior DCOs Gary Costin (applied handcuff as he took over from Brook House DCOs at 23:25 hrs on 28 June 2017 and obtained authorisation for the use of the WRB) and Neil Marchant (took control of Mr **D2054**'s property and person) and DCOs Matthew McGrath and Matthew Woods (applied the waist restraint belt – WRB in the restricted position and escorted on the right and left respectively), Murat Shabani (completed the PER and the ACDT) and Tom Chambers and Bhawandeep Chahal (provided addresses for contacts in Nigeria and sat beside Mr **D2054** in the vehicle to the airport).
- 5.9 On 23 August 2017, SPOC Autry confirmed that the Closed Circuit Television (CCTV) from the vehicle that transported Mr **D2054** from Brook House IRC to the airport was unavailable and the reasons for this were being explored.
- 5.10 Use of Force reports were completed contemporaneously by DCMs Ben Shadbolt, and Dave Aldis and DCOs Derek Murphy, Jonathan Martin, Daniella Di-Tella and

Andrew Simmons were received by 20 July 2017. Also received were the Injuries Sustained and Healthcare form and Report of Injury to a Detainee form completed by DCM Aldis and CL Williams on 28 June 2017 and the Incident Report completed by DCM Aldis regarding the self harm and the use of force. Body worn video (BWV) of the use of force and Closed Circuit Television (CCTV) of the move was received on 27 July 2017. The search documents post the self harm attempt were received on 06 September 2017.

- 5.11 Given the review of the BWV showed no bleeding, head banging on the floor during the use of force or excessive use of force, telephone interviews were conducted with the main use of force officers DCMs Aldis and Shadbolt and DCOs Murphy and Martin by 24 August 2017. Witness statements were received from DCOs Di-Tella and Simmons by 04 September 2017. DCO Chris Donnelly had been operating a second camera and he provided his witness statement by 16 August 2017. There was no BWV footage of the de-brief post the use of force.
- 5.12 CL Williams provided her witness statement on 12 September 2017. Aeromed Medic Robert Dobson provided his witness statement on 29 August 2017 and Aeromed In-Flight Medics Kamil Sliz and Michael Pugh on 18 September 2017.

6. SUMMARY OF EVIDENCE

- 6.1 Complainant: Mr [D2054] - Summary of Email complaint dated 03 July 2017, Telephone Interview dated 11 August 2017 and Emails submitted pre and post telephone interview dated 21 and 29 July and 7, 8, 11 and 13 August 2017 (Appendix A).
- 6.1.1 Mr [D2054] said that he had been starved for five days and Healthcare had raised concern because he had lost three kilograms in that period. He then said that he had eaten the food in Brook House IRC on the first day but it had given him diarrhoea so he had stopped eating. He had asked Healthcare to provide him with boiled potatoes and fish but this had not been arranged so he had gone hungry. Mr [D2054] said that officers had encouraged him to eat other food but he had only eaten when the boiled potatoes had been provided. These had been provided in the same pot as that served to the other detainees. He had also cooked his own boiled potatoes.
- 6.1.2 On 28 June 2017, the other detainees had been locked in their rooms at 12:30 hrs and at 13:00 hrs, Mr [D2054] had been given boiled potatoes in a separate container to the other detainees. This container had not previously been used and was in a Nylon bag. The food had looked "very dark" and "like gum." It had smelt "like chemicals" but had tasted the same as usual. He had had to eat the food because he had not eaten for five days and could not wait for dinner. It had made him feel "lazy and uncomfortable" and he had lain on his bed afterwards. Mr [D2054] said that the food had been "poisoned. Not to kill me but to make me go to Nigeria." He was inconsistent as to whether he had told his sister that he thought he had been poisoned during her visit later that afternoon.
- 6.1.3 After 45 minutes, Mr [D2054] had been told that he was being removed to Nigeria that day. This had been the first time that he had been told this and had been very

angry. Mr **D2054** had asked to speak to his solicitor when an officer had asked him if he was going to do as the officers asked and leave with them for Nigeria. He had thought to kill himself and had not had these thoughts before. Mr **D2054** had stabbed himself in the left arm three times, even though he did not even like needles or anything touching his skin. Healthcare had come to see him and had said that one of the wounds was very bad and very deep but they had not stitched or put a plaster on any of the wounds. The wounds had been left bleeding. They had also said that they would come back and check on him but had not done so. He had been taken to another room and had visited with his sister but had not told her how he was feeling.

- 6.1.4 Whilst in the new room, Mr **D2054** had asked about his medication but the officer had not been aware of this medication.
- 6.1.5 At 21:00 hrs, Mr **D2054** said that an officer had come to his room and told him that he was being moved to Nigeria in the next few hours. In his telephone interview Mr **D2054** said that he had told the officer on his door that Healthcare had not returned to check on him. He had asked for paracetamol for a headache but had not been given any. Another officer had been talking with the officer on his door and the officer on his door had said that it was a bad thing that "people were here to take me to Nigeria" but the other officer had said that Mr **D2054** was to be taken. Mr **D2054** said that he had been crying because he had still been losing blood from his wounds.
- 6.1.6 At 22:00 or 23:00 hrs, 15 officers had come to his room and he had been told that he was being removed to Nigeria. Mr **D2054** had "told him to look at me I can't go in my condition." The officers had "rushed in" and taken him onto the floor. He said that he had not been given the opportunity to leave voluntarily even when he was advised that the BWV footage showed that he had. Mr **D2054** had banged his head during this and had been losing his memory / unconscious and had been calling for Jesus. During the telephone interview, Mr **D2054** amended this to semi conscious and not unconscious. As a result of this head trauma, Mr **D2054** said that he thought he had brain damage and had "none stop headaches." Whilst he had had memory loss prior to the use of force, this had now worsened since. He had been unable to afford medical help in Nigeria.
- 6.1.7 Six officers had been on top of him, holding his legs and arms. One had handcuffed him causing him a lot of pain and an injury as the handcuff was squeezed as it was applied. Mr **D2054** said that one of the security officers was covered in blood from Mr **D2054**'s bleeding wounds. He said that when he was taken into the vehicle to the airport that he had been put in a long sleeve top to hide the fact that he was bleeding.
- 6.1.8 During the three to four hour journey to the airport, Mr **D2054** had been in the WRB. Mr **D2054** said that he had been told that he would be seen by medics when he arrived at his flight. He had been bleeding in the van. Mr **D2054** had spoken to his sister during the journey but not his solicitor because he could not recall the solicitor's number. An officer had also spoken to his sister. He had not told anyone that he had hurt his head during the use of force. He was not seen by medics.

6.1.9 On the flight to Nigeria, Mr **D2054** had only received one of his six tablets and this was the Metformin for his diabetes. His medication had been given to him when he had been handed over to the Nigerian authorities. Mr **D2054** had been given two charities to contact for assistance on his arrival in Nigeria. He provided the paper upon which the addresses and names were written. These were the International Organization of Migration (IOM) in Lagos and Abuja. He said that when he called the numbers, one was unavailable and the other was not a charity.

6.1.10 Mr **D2054** said that 'the health care should have been considered that I was not mean to injured myself and stitch the wounds but they did not that's why I lost a lots of blood on my way to Nigeria.' He said that he had been bleeding after Healthcare had treated the wounds and continued to do so before, during and after the use of force and his removal to Nigeria. He was that the amount of blood he lost could have killed him. Mr **D2054** said that during the use of force he had banged his head on the floor and this had directly caused him memory loss, possible brain damage and none stop headaches. He had not told the Brook House or Tascor DCOs that he had hurt his head and had had memory loss previously but it had worsened since the use of force. He had not sought treatment for this in Nigeria because he had no money to afford the medical costs.

6.2 Subjects: Summary of Rule 41 Use of Force reports, Incident Report and Report of Injury to Detainee dated 28 June 2017 and Telephone Interviews conducted with Detainee Custody Managers Dave Aldis and Ben Shadbolt and Detainee Custody Officers Derek Murphy and Jonathan Martin dated 18 and 24 August 2017 (Appendix B)

6.2.1 DCM Aldis said that he had been aware of Mr **D2054** prior to the planned use of force on 28 June 2017 because he had been present when Mr **D2054** had said that he could not return to Nigeria when served with his removal directions on 21 June 2017. He had opened the ACDT. Whilst he had been recorded as the case manager, DCM Aldis said that he was unaware of Mr **D2054**'s food refusal given they had 10 such cases at the moment. He said that whilst a DCM would be allocated as case manager and the intention was they would be present at any case review for consistency, given shift patterns and sickness this did not always occur.

6.2.2 On 28 June 2017, he had been the operations manager (Oscar 1) and had been asked to attend Mr **D2054** because he had made a couple of cuts to his upper left arm with a razor blade. DCO Murphy said that he had also attended this first response and both said that they had seen Healthcare attend to Mr **D2054**'s wounds and "patch him up." DCM Aldis said that wounds had been "small, superficial marks to his (Mr **D2054**)'s upper left arm." He said Healthcare had said that Mr **D2054** did not require hospital treatment. DCM Aldis and DCO Murphy were consistent that the wounds were clean and not bleeding once Healthcare had completed their less than 10 minute treatment.

6.2.3 DCM Aldis said that he had put Mr **D2054** under constant supervision following this self harm attempt and moved him to their safer custody rooms where Mr **D2054** could be observed through the glass door (E Wing). He said that Duty Director Michelle Brown had authorised a full search to ensure all blades had been

removed. DCOs Murphy and Luke Odey had completed this search and recovered one blade during and one subsequent to the search. DCO Murphy could not recall conducting the search.

- 6.2.4 Just after 21:00 hrs, DCM Aldis had gathered a team in personal protective clothing (PPE) to move Mr [D2054] from his room to the Tascor escorts waiting in reception to remove him to Nigeria. This had been a planned removal given Mr [D2054]'s self harm and refusal to leave for his flight. The team was there in case Mr [D2054] refused to walk to reception for his removal. He had held a briefing and CL Williams had been present and said that she had no medical concerns. DCM Shadbolt and DCOs Martin and Murphy confirmed that they had attended the briefing.
- 6.2.5 DCM Aldis and the other subject officers were consistent that DCM Aldis had spoken to Mr [D2054] and asked him "numerous", "several" and "three to five times" to leave with DCM Aldis and walk to reception to talk with the Tascor escorts. The officers in PPE had been unable to hear Mr [D2054]'s response because they wore helmets. DCM Aldis said that Mr [D2054] had responded that he was unwell and talked over DCM Aldis. All the officers were consistent saying that the team in PPE moved to the door so that Mr [D2054] could see they were prepared to enter and remove him by force and that DCM Aldis had told Mr [D2054] this and offered again for him to walk to reception voluntarily. DCMs Aldis and Shadbolt and DCO Murphy were stood at the door and had heard Mr [D2054] refuse. The team had entered as instructed by DCM Aldis. There was a slight inconsistency as to the time (between 23:10 and 23:20 hrs) officers arrived and entered Mr [D2054]'s room. All the officers said that Mr [D2054] had been sat up in bed when they had entered.
- 6.2.6 DCO Murphy said that he had been on the shield and was number one officer. He had used the shield as trained to do so and between him and Mr [D2054]'s upper body to prevent Mr [D2054] causing him or the team injuries and in case of any further blades. There had been no further blades. DCO Murphy had then discarded the shield, passing this to a support officer for removal from the room.
- 6.2.7 DCO Martin said that he had entered and taken control of Mr [D2054]'s left arm (clarified as right arm at his telephone interview). DCM Shadbolt said that he had entered and taken hold of Mr [D2054]'s left arm "isolating the arm by holding Mr [D2054]'s left arm with my left arm on his lower arm and my right arm under Mr [D2054]'s armpit."
- 6.2.8 DCO Murphy said that Mr [D2054] "had gone rigid" and resisted officers and had been assisted to the floor. DCO Murphy had taken hold of Mr [D2054]'s head (fingers under the chin and back of his head) to prevent Mr [D2054] from banging his head on the floor. DCM Murphy said "at no time did the gentleman's head touch the floor." He said his hand had been between the floor and Mr [D2054]'s head. DCM Shadbolt and DCO Martin both said that they had heard no noise to suggest that Mr [D2054] had banged his head on the floor.
- 6.2.9 DCO Martin said that Mr [D2054] had been assisted to the floor given Mr [D2054] had "wriggled off the bed" and had been moving his body to fight with

the officers. DCM Shadbolt said that they had tried to stand Mr **D2054** and he had "taken himself to the floor and officers had assisted him." They were consistent that they had reacted to Mr **D2054** moving to the floor to prevent him injury by assisting him to the floor.

- 6.2.10 Given the size of DCO Murphy and DCM Shadbolt and the restricted area, DCO Murphy said that he had swapped positions with DCM Shadbolt and he had taken control on the left arm and DCM Shadbolt had moved to restrain Mr **D2054**'s head. (This was inconsistent with his report that said that he had swapped positions with DCO Martin and took control of the left arm. He said that he had been mistaken in his report). DCM Shadbolt's account was consistent with this change in positions. He said that he had his knees either side of Mr **D2054**'s head. His left hand was behind Mr **D2054**'s head and his right was on his forehead. DCM Shadbolt had been asking Mr **D2054** to comply with the officers and that he was still going on his flight. DCM Shadbolt said "given Mr **D2054** was constantly shouting the dialogue was not great. He was not listening."
- 6.2.11 DCO Martin said that whilst on the floor he had tried to apply a "final lock / goose hold" and said he was near Mr **D2054**'s shoulder with Mr **D2054**'s elbow between his knees. He had one hand on Mr **D2054**'s elbow, with Mr **D2054**'s hand "cocked like a rooster's neck" with DCO Martin's hand under this. (This was the wrist flexion referred to in his report). DCO Martin said that he had struggled to get his hand under Mr **D2054**'s because Mr **D2054**'s arm had been "quite short, he was strong for such a small man and had been resisting." They all said that Mr **D2054** had been thrashing his legs about and a fourth officer, DCO Di-Tella had entered the room and held his legs. DCM Aldis said that he had advised DCO Di-Tella how to hold the legs because it had been her first use of force.
- 6.2.12 When sat up, DCO Murphy had placed Mr **D2054**'s left arm in the 'back hammer rest position' with Mr **D2054**'s wrist in the small of his back so that it could be presented for handcuffing. DCO Martin had presented Mr **D2054**'s arm in the same manner with his left hand on Mr **D2054**'s bicep and his thumb and fore finger wrapped around Mr **D2054**'s thumb and fore finger and held in the small of Mr **D2054**'s back.
- 6.2.13 DCM Aldis said that he had authorised the use of handcuffs because whilst the officers had control of Mr **D2054** he was not following their instructions and was being non compliant so it was for Mr **D2054**'s and the team's safety to protect them from Mr **D2054** lashing out. The distance from the room to reception was also a distance so handcuffs were more secure. DCO Andrew Simmons had applied the handcuffs to Mr **D2054**. DCM Shadbolt said that he had seen these applied and checked these were secure.
- 6.2.14 Neither he nor DCM Aldis had any concerns with how the handcuffs had been applied. All of the officers said that there had been no blood from Mr **D2054**'s self harm wounds on him or the officers and none had been present at all. Healthcare were directly behind DCM Aldis and he said they would have entered if they had seen any blood.

- 6.2.15 DCM Shadbolt said that his knee had been behind Mr **D2054** to support him and he had held Mr **D2054**'s head to prevent injury to Mr **D2054** from the corner of the bed and to the officers if Mr **D2054** thrashed his head. DCOs Murphy and Martin had then lifted Mr **D2054** to a standing position, holding him under his armpit and elbow. DCM Shadbolt had moved to hold Mr **D2054**'s head and the team had walked him from the room.
- 6.2.16 The officers holding Mr **D2054** (DCM Shadbolt and DCOs Murphy and Martin) all said how he had continued to shout "Jesus" when stood and walked to reception. They said that Mr **D2054** had also been non compliant by "digging his heels in" and "pushing back" to resist walking to reception. DCM Aldis said that he had routinely asked DCM Shadbolt on the head if Mr **D2054** could be stood upright and DCM Shadbolt had continued to hold Mr **D2054**'s head down. He said that he would not in contact with Mr **D2054** so it was the head officer's judgement if Mr **D2054** had stopped resisting and could be stood upright. DCM Shadbolt said that Mr **D2054** had continued to resist and shout and ignore his instructions so it was unsafe to raise Mr **D2054**'s head.
- 6.2.17 There had been a slight delay outside reception whilst the team waited for confirmation that Tascor were ready to receive Mr **D2054**. DCO Martin said that he had had his face wiped because he was sweating from the helmet and PPE equipment. All said that nothing had happened during that time and Mr **D2054** had just continued to shout Jesus.
- 6.2.18 All the officers were consistent that Mr **D2054** had not banged his head on the floor, been unconscious or been bleeding from his self harm cuts at any time. They all said that if any of this had occurred, Healthcare were present and would have stopped the removal. They all said that Mr **D2054** had been shouting "Jesus" and "where are you Jesus" throughout the planned removal. Mr **D2054** had not complained to any of the officers about hurting his head or bleeding. DCM Aldis, as the Supervising Officer, said that he had had no concerns with how the use of force had been conducted. It was "done quickly and efficiently and if I had had any concerns I would have spoken up at the time." He said that there had been no injuries recorded at the time.
- 6.3 Brook House IRC Witnesses: Detainee Custody Officers Luke Odey, Daniella Di-Tella, Andrew Simmons and Chris Donnelly and Clinical Lead Chrissie Williams – Summary of Incident Report, Use of Force reports and Reports of Injury to a Detainee dated 28 June 2017 and Witness Statements dated 16 and 22 August and 02 September 2017 (Appendix C)
- 6.3.1 DCO Odey completed an Incident Report following a medical emergency response that he called at 13:45 – 13:50 hrs on 28 June 2017 following the self harm attempt by Mr **D2054**. He had asked Mr **D2054** why he had cut his upper left arm and Mr **D2054** had said, "I do not wish to live this life anymore." He said that four nurses attended and asked why Mr **D2054** had cut himself but Mr **D2054** had not responded. He said that DCM Aldis and Healthcare had taken the decision to move Mr **D2054** to E Wing for constant supervision.
- 6.3.2 He said that Healthcare had bandaged the wounds and then Mr **D2054** had

walked to E Wing voluntarily. Mr **D2054** had been searched by DCO Murphy with DCO Odey and DCM Aldis present. Mr **D2054** had voluntarily handed a blade over. Following the search, Healthcare had taken Mr **D2054**'s blood pressure and heart rate. Mr **D2054** had been left in the room with an officer observing him outside the room.

- 6.3.3 DCM Aldis recorded the cuts to Mr **D2054**'s left upper arm on the Report of Injury to Detainee and stated all blades had been recovered. Healthcare Donna Batchelor completed the Healthcare's report at 13:30 hrs and stated that Mr **D2054** had 'active bleeding from cuts on left upper arm. Self inflicted wounds from using Razor blade. 1. 1cm x 0.2 cm laceration – steristrips and mepore dressing required. 2. A 2cm x 0.01cm laceration and B 1cm x 0.01 cm laceration cleaning, no dressing required.' The constant watch started post move at 16:00 hrs. DCO Di-Tella said that she had been stood at the door of the room with the rest of the PPE officers and had heard DCM Aldis ask Mr **D2054** three times to leave his room voluntarily and walk to reception. She had been asked to attend to assist if required. She said that she had seen no injuries or bleeding to Mr **D2054** and said that he had not banged his head or been unconscious at any time. She had had no concerns with the force used by the officers.
- 6.3.4 DCO Simmons said that he had been assisting with the charter and had been outside the room when the team had entered. He had entered the room to cover Mr **D2054**'s genitals with a towel and preserve his dignity. He had applied the handcuffs as requested by DCM Aldis and given he was spare in the room. He had then walked with the team and Mr **D2054** so that he could maintain a hold on the towel around Mr **D2054**. He had seen no injuries or bleeding from Mr **D2054**. He said that Mr **D2054** had been conscious when he had been in the room. He had no concerns with the use of force he had observed. He said that if he had commented "don't waste your breathe" in response to DCM Shadbolt trying to speak to Mr **D2054** at the door to reception (BWV) he said that would have been because Mr **D2054** had not 'interacted with any of the officers throughout the whole process.'
- 6.3.5 DCO Chris Donnelly had filmed the planned use of force in addition to the BWV worn by DCM Aldis. He said that he had been outside the room and Mr **D2054** had not been unconscious as he had been shouting all the time. He said that he could not remember turning the camera towards the wall whilst at the door to reception but said there was 'certainly nothing suspect.' He had had no concerns with the use of force he had witnessed but this had been minimal as he had been outside the room.
- 6.3.6 CL Williams had been aware that Mr **D2054** had not been eating the servery food given he did not like the food and not for any allergies. A nurse had sat and gone through the menu with Mr **D2054** and he had insisted all he would eat was potatoes. A request had been sent to the kitchen and she had had no feedback from the wing that Mr **D2054** was not eating.
- 6.3.7 CL Williams had been aware of Mr **D2054**'s self harm attempt earlier in the day and that Healthcare had applied a steristrips to one and the other two had been superficial. These had been cleaned and a bandage applied that covered all of the

cuts. On arriving for the use of force, she had been able to observe Mr **D2054** 's arm through the glass window. The dressing was intact and there was no bleeding on the dressing. She had viewed the use of force through the doorway and had not seen Mr **D2054** bang his head on the floor or lose consciousness and he was shouting all the time. Mr **D2054** had not said at any time that his head hurt. She had had no concerns with the force used by the officers.

6.3.8 When Mr **D2054** had been stood up, she had checked and there had been no injuries from the use of force, the dressing was intact, she could not see the wounds given the dressing covered these and there was no bleeding on the dressing. CL Williams had checked Mr **D2054** again at reception and there had been no blood or injuries. She had reported no injuries on the Report of Injuries to Detainee form that she completed on 28 June 2017.

6.4 Witnesses: Tascor Detainee Custody Officers and Aeromed Medics – Summary of Evidence from Witness Statements and Person Escort Record and Assessment Care in Detention and Teamwork completed 28 June 2017. (Appendix D)

6.4.1 Mr **D2054** 's removal was as part of a charter flight. Given this, there were a number of DCOs and detainees in the reception area and this is captured on the CCTV. Each DCO and the In-Country medic stated that they had dealt with upward of 10 detainees each that night so their recollection was hazy.

6.4.2 Nevertheless, from the manner that Mr **D2054** was presented (in handcuffs by Brook House DCOs in PPE) and his behaviour (distressed and shouting Jesus) consistent evidence was obtained from Tascor and Aeromed staff regarding there being no blood from the wounds to Mr **D2054** from his self harm attempt and no mention of any banging of the head or head pain from the use of force. Medic Dobson checked Mr **D2054** on handover from Brook House IRC and said that there were 'several dry, superficial wounds or scratches' on his left arm that he had no concerns with.

6.4.3 Medic Dobson said that given Mr **D2054** was diabetic that he may have told Mr **D2054** to speak to the In-Flight Medics if he had any concerns. He would not have told him he would be seen routinely. He had been provided with two boxes of Sensitive/Irrelevant and had given this medication to the In-Flight Medics in a plastic bag with Mr **D2054** 's notes.

6.4.4 The PER was completed by DCO Shabani and this showed that Mr **D2054** was handed to Tascor at 23:20 hrs. Mr **D2054** had been placed in a secure WRB at 23:25 hrs and remained in this until the flight left the UK and for 6 hrs 35 minutes. The Passive Restraints Report recorded SDCO Costin had asked for authority to apply this given the disruption noted pre handover (presented in locks and naked, saying he would not fly and with razor blade cuts on his left arm) and it was granted at 23:25 hrs. They had left Brook House at 12:00 hrs and arrived at Brize Norton at 01:58 hrs, boarding at 04:35 hrs with no issues. DCO Shabani had given Mr **D2054** his medication at 07:40 hrs. He had declined food and water until breakfast on the flight. He was handed over to Nigerian authorities at 12:40 hrs on 29 June 2017. The ACDT completed by DCO Shabani reflected the same information.

6.5 Body Worn Video and Closed Circuit Television (Appendix E)

- 6.5.1 The timings on the BWV are inconsistent with the contemporaneous records by an hour. The BWV commenced at 22:19:28 hrs with the briefing by DCM Aldis and DCM Shadbolt and DCOs Martin, Murphy and Di-Tella are present. CL Williams also introduces herself and says she has no concerns with the detainee.
- 6.5.2 The two other pieces of BWV are those worn by DC Aldis and DCO Connelly. These start at 22:21:58 hrs with DCM Aldis asking Mr **D2054** to leave his room or force will be used and end at 22:32:33 hrs with the handover of Mr **D2054** to Tascor in Brook House reception. A period of less than 11 minutes. The handcuffs were applied at 22:25:11 hrs and remain on for just over seven minutes. (The Use of Force form inaccurately records the time and the duration).
- 6.5.3 The CCTV showed the team arrive at Mr **D2054**'s room at 23:15 hrs (suggesting it is the BWV timings that are incorrect). This shows that there are a total of 11 people present at the room. There are the four DCOs in PPE, a grey haired male holding the towel around Mr **D2054** to reception, four male DCOs (one of whom is DCM Aldis), a female with a green bag (CL Williams) and a female nurse.
- 6.5.4 It also showed the Tascor van and coach externally and a number of people in the small reception area. The handover of Mr **D2054** is obscured. Mr **D2054** is taken to another room and returns fully dressed at 23:33:44 hrs in the WRB and escorted by Tascor DCOs.

6.6 Documents (Appendix F)

- 6.6.1 The majority of the documents have been included with the evidence of their authors in the sections above. The Assessment Care in Detention and Teamwork document captures events more than five days prior to the removal and incorporates the five days when Mr **D2054** alleged he was starved. His medical records start on 26 June and end on 28 June 2017. They show that he had consulted Healthcare about his food requirements and that they were aware that he had not eaten for five days and required boiled fish and potatoes. The only medication recorded was the Sensitive/irrelevant for Mr **D2054**'s diabetes.

7. CONSIDERATION OF EVIDENCE AND CONCLUSIONS

- 7.1 Allegation 1: that Mr **D2054** had been starved for five days and then on 28 June 2017 had been given food that he was 'very convinced that something might be wrong with that lunch food they gave to me on 28/6/2017 either because I told them they should kill me or they are trying now to move me to Nigeria without me knowing...It looked like it had been boiled in chemicals.'
- 7.1.1 Mr **D2054** initially said that he had been 'starved for five days and that Healthcare had been concerned because he had lost three kilograms in that period. He said that on 28 June 2017, around 12:30 hrs, the officers had locked every one inside their room then came to his room around 13:00 hrs and told him to come and

take his food first before other prisoners will start coming for their own food. The officers gave him boiled potatoes prepared in a private container which they had not served him food like that before. The potatoes looked like they were boiled with chemicals. He had no choice but to eat the food.'

- 7.1.2 In his telephone interview, he said that it had been his choice not to eat the serverly food because the food had caused him to have diarrhoea after the first day so he had stopped eating. So he had not been 'starved' he had chosen not to eat the food that was available. He was inconsistent with his accounts. Based on the evidence, I have found the allegation that Mr **D2054** was starved for five days **unsubstantiated**. It was his own choice not to eat the food that was available to him at mealtimes.
- 7.1.3 The Detention Centre Rules at 13 (3) states that the food served in detention centres should be 'wholesome, nutritious, well prepared and served reasonably varied and sufficient in quantity and meet all religious, dietary, cultural and medical needs.' The Operating Standards states 'In accordance with Rule 13 (1), the Centre must have procedures n place with the healthcare team to ensure that any special dietary needs on grounds of health are met.'
- 7.1.4 Mr **D2054** said that he had asked for boiled fish and potatoes but Healthcare had not arranged this so he had gone hungry. When it had been arranged, he had been offered only boiled potatoes which came in the same pot as for all the detainees. He said that he cooked his own food and the officers encouraged him to do so.
- 7.1.5 The ACDT recorded that he had told the Assessment Interviewer Ann Murrey on 22 June 2017 that he did not like the food and had been put on observations at mealtimes. He had been told to speak to Healthcare so that they could provide details of his special diet to the kitchen or he could cook food for himself in the culture kitchen. On 23 June 2017, he had told the DCO that he was not eating because he was meeting with Healthcare. At his ACDT review on 26 June 2017, Mr **D2054** said that he had been eating plain food and the observations confirmed that he had from 25 June 2017 so this entry on Mr **D2054**'s Care Map was closed. There was an issue with the food sent for him at lunch on 26 June 2017 (potatoes in tomato sauce) so Mr **D2054** did not eat again but the DCO had raised this so that this would be rectified with the kitchen.
- 7.1.6 On 27 June 2017, Mr **D2054** received his boiled potatoes but not fish and a DCO checked with Healthcare and the kitchen and was told only boiled potatoes were his special diet.
- 7.1.7 Mr **D2054**'s medical record showed that he had requested boiled potatoes prior to the start of the notes provided as there was reference to this on 27 June 2017. He had been to see them again on 27 June 2017 to request boiled fish because of mild pain after eating and was told that such a request was not Healthcare's remit. He later confirmed to a mental health nurse that he was eating and drinking normally.
- 7.1.8 The medical record and evidence of CL Williams showed that when Mr **D2054** said that he could not eat the food because it upset his stomach he was told to

speaking to Healthcare, went through the menu with a nurse and a special diet was arranged for him based on what he said that he required (boiled potatoes). It is noted that there was a problem with this on 27 June 2017 but the notes showed that the officers tried to rectify this. I'm unsure why Healthcare said a special diet was not in their remit regarding the boiled fish when they had agreed the boiled potatoes but this is not within the remit of this investigation and Mr **D2054** will be advised to take this up with Healthcare should he wish to pursue this.

- 7.1.9 In regards to his food refusal, DSO 03/2013 Food and Fluid Refusal guidance states that 'Under the Mental Capacity Act 2005 any individual over the age of 18 years has the legal right to refuse food and/or fluid. The Act assumes that a person has mental capacity to make their own decisions to refuse food and/or fluid unless it is established they lack that capacity.' There was nothing in Mr **D2054**'s medical notes to suggest that he lacked that mental capacity. The DSO states that 'at no time should coercion to eat or drink be applied to a detainee refusing food and/or fluid.' He was well within his rights to refuse food / fluid and there was nothing medically that staff could do to make him eat. Based on the evidence, and to a balance of probabilities, I have found that the Brook House staff did as much as they could to assist Mr **D2054** to eat (advice, checks on his behalf and observing and suggesting he eat) and there was nothing further they could or should do.
- 7.1.10 In his telephone interview, Mr **D2054** said that the food served to him on 28 June 2017 had been poisoned to make him leave the detention centre for his removal that day but not to kill him. He said that even though it looked and smelt differently that he had to eat it and it had made him feel lazy and uncomfortable.
- 7.1.11 I do not accept as credible that Mr **D2054** had either been served poisonous food or had had to eat food that looked very dark and smelt of chemicals on 28 June 2017. He had refused food previously and nothing had been done to make him eat it. If he had felt that there was something wrong with the food, I have no doubt that on his own evidence of not eating food because it made him feel ill that he would be more minded not to eat the food if it looked wrong and smelt of chemicals.
- 7.1.12 For completeness, I checked the ACDT for the food Mr **D2054** had had prior to the meal on 28 June 2017 and found that he had eaten from the servery at 18:10 hrs on 27 June 2017. So he had eaten within the previous 24 hours. It stated that at 13:00 hrs on 28 June 2017 that Mr **D2054** had been 'present for lunch (no issues) eaten' and this was before he had been told of his removal that day, his self harm attempt and his move to E Wing. There was nothing to suggest that he had been served separately as he was on his own wing. There was nothing to suggest any special food or treatment as Mr **D2054** suggested. In fact, it stated no issues and he had eaten. The evidence suggests that this was the meal Mr **D2054** was referring to given he said that he had eaten the food because he could not wait for dinner because he had not eaten for five days and he had seen his sister afterwards and had not mentioned his concerns about the food. The latter had been at 15:23 hrs. He had then been on the telephone and texting.
- 7.1.13 At 17:45 hrs, there was an issue with Mr **D2054**'s food being in his previous Wing and not on E Wing. Given he wanted his boiled potatoes and fish the DCO arranged for the meal to be brought over in a trolley a few minutes later. This had

been given to Mr [D2054] Even if this was the meal referred to by Mr [D2054] (which the timeline suggests it is not) the notes did not record anything peculiar about the food. Rather they showed a mistake had been made and this had been rectified as soon as the officer became aware.

7.1.14 On the evidence and to a balance of probabilities, I do not find that Mr [D2054] was served with food that contained chemicals and was poisonous to ensure his removal to Nigeria.

7.1.15 **On the evidence and to a balance of probabilities, I find the allegation that Mr [D2054] had been starved for five days and then on 28 June 2017 had been given food that was poisoned to ensure his removal to Nigeria unsubstantiated.**

7.2 **Allegation 2: that Mr [D2054] had not been provided with his medication prior to his removal from his room to reception and the medication provided to him on the flight to Nigeria was incomplete.**

7.2.1 Mr [D2054] said that after his move to E Wing that he was not provided with his medication and that the medication provided to him on his flight to Nigeria was incomplete and there was only one (Metformin for his diabetes) and not six medications.

7.2.2 The ACDT showed that Mr [D2054] had requested his medication at 17:55 hrs and DCO Jennings had contacted Healthcare because none had been provided when Mr [D2054] had been moved to E Wing. It then states that DCO Jennings collected a cup of water from the kitchen for a drink. The medical records showed that at 18:00 hrs an officer had spoken with Staff Nurse Donna Batchelor and asked about Mr [D2054] s medication. She had told him that Mr [D2054] kept his own medication (IP – In Person) and that it would be in his previous room. The DCO had said that he was arranging to collect this.

7.2.3 **On the evidence, Mr [D2054] was provided with his medication** when DCO Jennings had been informed by Mr [D2054] that he had medication he needed to take. DCO Jennings checked with Healthcare and arranged for the medication to be brought from Mr [D2054] s room. He collected a cup of water for Mr [D2054] to take the tablets with. **The allegation is unsubstantiated.**

7.2.4 Mr [D2054] s medical records showed that his medication was Metformin 500 mg and two tablets were to be taken twice a day. No other medication is listed. Medic Dobson said that he had been handed Mr [D2054] s medication as they left Brook House IRC. He had been given two boxes of Sensitive/Irrelevant tablets and had given these to the In-Flight Medics. DCO Shabani noted in the PER that Mr [D2054] had had his medication at 07:40 hrs on 29 June 2017.

7.2.5 According to the Operating Standards for the Escorting process 'where the healthcare team at the sending centre judge that it is appropriate for a detainee to have medication in possession sufficient medication will be prescribed for the duration of the escort. The Contractor will retain any remaining medication that the healthcare team provides and either hand it to the detainee at the point of removal

or to the receiving authority on arrival.'

- 7.2.6 On the evidence, Mr **D2054** was only on Metformin tablets for his diabetes at the time he left Brook House IRC and sufficient amounts of this was provided for his journey to Nigeria. **The allegation that he was only provided with one of his six medications is unsubstantiated** as he was only on one medication.
- 7.2.7 **On the evidence and to a balance of probability, the allegation that Mr **D2054** had not been provided with his medication prior to his removal from his room to reception and the medication provided to him on the flight to Nigeria was incomplete is unsubstantiated.**
- 7.3 **Allegation 3: that Mr **D2054** had self harmed on 28 June 2017 because he had been told that he would be removed to Nigeria in a few hours, this had been the first time that he had been told that he was going to be removed to Nigeria and he was afraid for his life.**
- 7.3.1 Mr **D2054** said that he had not been told about his removal to Nigeria until a few hours before his removal. Being afraid for his life he had become very angry and had cut himself three times in the left arm with a razor blade.
- 7.3.2 I have checked HO electronic records and these showed that Mr **D2054** had been served with an IS.91R at the time of his detention on 15 June 2017. This stated that his removal from the UK was imminent. On 21 June 2017, HO staff met with Mr **D2054** and served the IS.151G. This informed him that removal directions had been given for the carrier to remove him from the UK. DCM Aldis had been present during the service of the removal directions on 21 June 2017 and that was the reason Mr **D2054** was placed on the ACDT.
- 7.3.3 The ACDT stated that Mr **D2054** had been served with removal directions on 21 June 2017 at 15:30 hrs and had said that he cannot go back to Nigeria because of his previous torture there. In response to whether the detainee would comply with removal directions, DCM Aldis continued and stated no. He said that in response to the removal directions Mr **D2054** had said that he wanted to die but that he would not kill himself.
- 7.3.4 On the evidence, the first time that Mr **D2054** was told he was being removed to Nigeria was 15 June 2017 and he was aware the removal directions were in place for his removal on 28 June 2017 on the 21 June 2017 and his response had been sufficient to place him on the ACDT. It is reasonable therefore to assume that the reason Mr **D2054** self harmed on 28 June 2017 and just prior to his removal was an attempt to frustrate his removal.
- 7.3.5 **On the evidence and to a balance of probability, the allegation that Mr **D2054** had self harmed on 28 June 2017 because he had been told that he would be removed to Nigeria in a few hours and this had been the first time that he had been told that he was going to be removed to Nigeria is unsubstantiated.**
- 7.4 **Allegation 4: that Mr **D2054** had been 'bleeding seriously' from the three**

wounds he had caused in his arm and this had not been treated properly by Healthcare so he had continued to bleed before, during and after the use of force and his return to Nigeria that could have caused him to die from the amount of blood he lost.

- 7.4.1 Mr [D2054]’s evidence was that he had been told that the self inflicted wounds were deep and yet Healthcare had not stitched the wounds or checked up on him after the initial treatment. He said this lack of treatment had caused him to bleed throughout the rest of the day and this was evident during the use of force because there had been blood on the officers who had used force on him, especially the one on his left arm. He said that Tascor had masked the fact that he continued to bleed by placing him in a long sleeve top to cover his arms and the bleeding wounds. He said that he had been told that he would be seen by Healthcare at the flight and was not. Mr [D2054] said that he had continued to bleed during the flight, his t-shirt was soaked with blood when he removed it and he could have died from the amount of blood that he lost that day. I have considered the photographs of his injuries that were submitted 08 August 2017 and a month and a half after the incident.
- 7.4.2 There are three darker cuts that are not as deep or old as other scarring on Mr [D2054]’s upper left arm. The top one is in two cuts. I am satisfied these are the cuts that Mr [D2054] and Healthcare records (and body diagram) are referring to from the self harm attempt. There is no dispute that Mr [D2054] self harmed and required medical treatment for his cuts. What is in dispute is whether the wounds were treated properly, given Mr [D2054] said that they continued to bleed for the next 24 hours.
- 7.4.3 I have considered the evidence of the officers and Healthcare staff who attended the medical emergency response called by DCO Odey at 13:15 – 13:20 hrs. I note that the timing of the medical response in DCO Odey’s report is inconsistent by half an hour with those of the other officers who attended and Healthcare and indeed his own note in the ACDT. Given that the majority of the timings suggest the medical response was at 13:15 – 13:20 hrs and Mr [D2054] was moved to E Wing at 13:45 hrs, I am satisfied that the time stated by the majority of the contemporaneous records is correct. (Feedback on accurate recording in reports is raised as a recommendation).
- 7.4.4 The Healthcare Report and note on Mr [D2054]’s medical notes completed by Staff Nurse (SN) Batchelor contemporaneously noted that treatment was administered at 13:30 hrs and Mr [D2054] had ‘active bleeding from cuts on left upper arm. Self inflicted wounds from using a razor blade.’ She noted the size of the lacerations and that she had applied steristrips to the largest of the three and a Mepore dressing. She said that the other two required no dressing.
- 7.4.5 The evidence of the officers present during the treatment by Healthcare (DCM Aldis and DCOs Odey and Murphy) was consistent. All said that they had seen Healthcare treat Mr [D2054] for the three “small, superficial marks to his left upper arm.” They were consistent that once Healthcare had completed the less than 10 minute treatment that there had been no further bleeding. I am satisfied, on the evidence that the wounds were not bleeding soon after the treatment had been administered by Healthcare.

- 7.4.6 DCM Aldis and SN Batchelor said that Mr [D2054] had been moved to a safer custody room with glass doors so that he could be observed by an officer for his own safety given he had self harmed and was refusing to leave for his removal. DCO Odey's report confirmed that this had been a joint decision by DCM Aldis and Healthcare. A search was conducted prior to this to remove any remaining blades and one was found and removed.
- 7.4.7 The ACDT showed that by 13:45 hrs Mr [D2054] had been relocated to this safer custody room and observation began by DCO Jennings at 13:55 hrs. I was satisfied that swift action was taken to ensure that Mr [D2054] had no blade to further self harm and was monitored post the self harm attempt.
- 7.4.8 The ACDT showed that Healthcare had observed Mr [D2054] post his move to E Wing and the DCOs observing Mr [D2054] were checking him regularly. The Medical notes showed that at 18:00 hrs, DCO Jennings had spoken to SN Batchelor to update her on Mr [D2054]'s demeanour. I was satisfied, on the evidence, Mr [D2054] was checked on post his self harm attempt and treatment.
- 7.4.9 I have considered the next 24 hours and what evidence there was that the wounds continued to bleed as alleged by Mr [D2054] and found none.
- 7.4.10 The ACDT notes are very regular and detailed and make no mention of any bleeding or requirement to call Healthcare to administer to the wounds. I would expect to see mention of bleeding if there had been any. Likewise, the medical notes make no mention of any further requirement to see Mr [D2054] for additional treatment for his wounds.
- 7.4.11 The use of force took place at around 23:15 hrs. None of the officers who were involved in the use of force saw any blood or bleeding from the wounds or on them as alleged. They were consistent that if there had been any blood or bleeding that Healthcare would have halted the use of force and examined Mr [D2054] and had not done so.
- 7.4.12 CL Williams was present and she said that prior to the use of force the dressing remained in place and there was no bleeding. She had examined Mr [D2054] just after the use of force and the dressing had been intact and there had been no bleeding. In reception, she had checked again and there had been no bleeding from the self harm wounds.
- 7.4.13 Mr [D2054] was handed over to the Tascor DCOs and examined by Medic Dobson. None saw any bleeding to Mr [D2054]'s left arm (or anywhere) and they said that post search Mr [D2054] had dressed himself. Medic Dobson was clear that the wounds had been 'dry.' In the vehicle to the airport, they said Mr [D2054] had not told them that the wounds were bleeding. Mr [D2054] had spoken to his sister, as had the DCOs. If he had been bleeding as alleged, I would have expected him to raise this with his sister and she in turn with the DCOs. The fact he did not is telling.
- 7.4.14 I viewed the BWV of two cameras that were in use during the planned use of force.

One of these was worn by DCM Aldis who was in the room during the use of force and application of handcuffs. When Mr **D2054** was sat up in bed talking to DCM Aldis prior to the use of force there was no blood on the white quilt that was over Mr **D2054**'s lower body or on his arm that could be clearly observed.

- 7.4.15 There was no blood or bleeding observed during the use of force or after as Mr **D2054** was walked to reception. Whilst there were periods when I could not observe the arm, I had clear views of the left arm at various points and if there had been continuous bleeding, there would have been evidence of blood and there was not.
- 7.4.16 I viewed the CCTV and this showed no evidence of any bleeding whilst Mr **D2054** was walked from his room to reception or in reception. There was a clear shot of his left arm as the handcuffs were changed from Brook House to Tascor handcuffs and there was no blood. It was unfortunate that there was no CCTV from the Tascor vehicle. However, the evidence of the DCOs beside Mr **D2054** throughout the journey to the flight was consistent that there was no blood and Mr **D2054** raised no health concerns with them.
- 7.4.17 I am satisfied, on the evidence and to a balance of probabilities that once the wounds were treated by Healthcare at 13:30 hrs on 28 June 2017 that there was no further bleeding from the self inflicted wounds and that the wounds were minimal and of little concern to Healthcare who used steristrips (a form of stitching) on one wound and cleaned the other two as no dressing was required.
- 7.4.18 On this basis, it is highly improbable that a wound bleeding for, at most, 15 minutes before treatment could cause sufficient loss to be a danger to health. **I find the allegation that Mr **D2054** had been 'bleeding seriously' from the three wounds he had caused in his arm and this had not been treated properly by Healthcare so he had continued to bleed before, during and after the use of force and his return to Nigeria that could have caused him to die from the amount of blood he lost unsubstantiated.** He received prompt medical care and the fact that he was closely monitored post this showed a genuine concern by both Healthcare and Brook House staff.
- 7.5 Allegation 5: that the DCOs who had entered Mr **D2054**'s room and used force to move him to reception had 'rushed him when he was trying to explain about his condition and not given him chance to walk to reception.'**

- 7.5.1 Mr **D2054** said that he had tried to explain that he could not be moved in his condition and instead of listening the officers had rushed into his room and used force to move him to reception. He added to his original complaint that the officer on his room had questioned another officer as to whether it was right to move Mr **D2054** in his condition a couple of hours earlier at 21:00 hrs.
- 7.5.2 The ACDT was checked to identify who these officers might have been. The ACDT notes stopped at 18:50 hrs and Tascor took over the ADCT at 23:20 hrs. (It is questionable why after such detailed notes previously there was a gap of over four hours. This has been raised with Brook House IRC). I was unable to establish from the ACDT who these officers might have been. I was unable to check CCTV for

21:00 hrs as this CCTV was now unavailable. (It would have been available if Mr **D2054** had raised this in his original complaint or emails). However, regardless of whether or not a DCO made this comment, prior to the removal and at the briefing at 23:19 hrs Mr **D2054** had been assessed as medically fit to fly on 27 June 2017 and on 28 June 2017 at the briefing by CL Williams who was fully aware of the self harm attempt and the general medical condition of Mr **D2054**. I am satisfied that regardless of the comment, Mr **D2054** was medically fit to be removed. Given this, I have concentrated on the initial allegation that Mr **D2054** had not had the opportunity to leave his room voluntarily and without the use of force.

- 7.5.3 Mr **D2054** was insistent that he had not had the chance to walk from his room to reception even after it was explained at telephone interview that the BWV had shown the opposite and that he had been given every opportunity to leave the room voluntarily and walk to reception.
- 7.5.4 All the staff present at Mr **D2054**'s room (four officers in PPE, DCM Aldis, DCO Simmons and CL Williams) all said that Mr **D2054** had had more than one opportunity to leave his room voluntarily and refused to do so.
- 7.5.5 The BWV footage from the two cameras showed that DCM Aldis spoke with Mr **D2054** for two minutes and asked him six times to comply and leave his room voluntarily for reception for his removal to Nigeria by the Tascor escorts. He told Mr **D2054** that Healthcare were present. He showed Mr **D2054** the officers in PPE who would remove him by force if he refused to leave voluntarily and said twice that he did not want to send the officers in and use force but would if Mr **D2054** did not leave voluntarily.
- 7.5.6 Mr **D2054** said that "it was not ok" and says something but this is muffled. When asked if he will leave voluntarily the final time, Mr **D2054** says "no ok boss" and the officers in PPE enter and use force. I was satisfied that Mr **D2054** was given ample opportunity to leave his room voluntarily, understood what would happen if he did not and refused to leave voluntarily even so.
- 7.5.7 The Detention Centre Rules state 'A detainee custody officer dealing with a detained person shall not use force unnecessarily and, when the application of force to a detained person is necessary, no more force than is necessary shall be used.' The Detention Centre Rule 41 authorises the use of force by a detainee custody officer (DCO) when dealing with a detained person. Force must only be used when it is:
- reasonable in the circumstances;
 - necessary in the circumstances;
 - the minimum amount of force which is necessary; and
 - proportionate to the seriousness of the circumstances
- 7.5.8 The Operating Standards manual for IRCs states, 'The Centre will ensure that force is used only when necessary to keep a detainee in custody, to prevent violence, to prevent destruction of the property of the removal centre or of others and to prevent detainees from seeking to prevent their own removal physically or physically interfering with the lawful removal of another detainee. Force will only be used as a

measure of last resort and strictly within the terms of Rule 41 of the Detention Centre Rules 2001. If handcuffs are used as part of use of force Detention Services Order 1/2002 must be adhered to (this has been replaced by DSO 07/2016 Use of Restraints). The Centre will use and purchase training for control and restraint techniques from the Prison Service for England and Wales. Use of force must only be applied by members of staff who have undertaken necessary training. In the event of force being used, the Centre must ensure that detainees are seen by a member of the healthcare team as soon as practicable. The Centre must have a system for recording all incidents where use of force is applied and to monitor that use.'

- 7.5.9 DCM Aldis made the decision to use force and this was a planned use of force, given Mr **D2054** had previously self harmed and said he could not return to Nigeria. He was entitled to do so because Mr **D2054** was 'seeking to prevent his own removal.' He gave Mr **D2054** ample opportunity to leave his room voluntarily and I am satisfied that the force used was 'as a last resort' and when all other avenues of persuasion had been exhausted. **I found that the use of force was reasonable and necessary in the circumstances.**
- 7.5.10 I explored with the DCOs who used force what force they had used based on the evidence in their use of force reports and the BWV and found this mainly consistent. (There were minor inconsistencies such as which arm an officer was on and who an officer took over from but I was satisfied this was an oversight and there was nothing of concern in this as the actions were the same). I asked them to justified the force they had used at the various points throughout the use of force and explain the techniques they used and these were all HO approved techniques. All the officers were trained in these techniques and in date to use these. **I found that the use of force was the minimum amount of force which was necessary.**
- 7.5.11 I considered that the use of force had taken two minutes to the control and application of handcuffs and in total, including the handover to Tascor, 10 minutes. I considered that Mr **D2054** was shouting "Jesus" throughout, resisting the officers by moving his arms and legs about pre the application of the handcuffs and pushing back and shouting whilst walking to reception. **I found the use of force was proportionate to the seriousness of the circumstances.**
- 7.5.12 **On the evidence and to a balance of probabilities, I find that the allegation that the DCOs who had entered Mr **D2054**'s room and used force to move him to reception had 'rushed him when he was trying to explain about his condition and not given him chance to walk to reception' unsubstantiated.** Mr **D2054** had ample opportunity to leave voluntarily and chose not to do so. The use of force was a result of his attempt to frustrate his removal by physically refusing to leave his room for his removal.
- 7.6 **Allegation 6: that Mr **D2054** had hit his head on the floor during the use of force, had been unconscious and the force used on him had continued regardless. Given this and the lack of treatment, he believed he had brain damage, loss of memory, could not sleep and 'non stop headaches.'**
- 7.6.1 Mr **D2054** said that he had hit the back of his head on the floor when the

officers had come into the room to remove him by force to the reception area. He was adamant that he had been unconscious after the bang to the back of his head as he hit the floor and that he had had a lump, even after it was explained to him at interview that the BWV showed him continue to shout and move about straight after he was on the floor. Mr **D2054** had not told Brook House, Tascor or any of the medical staff about his injuries. He had been unable to afford medical assistance in Nigeria to support the injuries he alleged.

- 7.6.2 The officers present during the use of force (DCMs Aldis and Shadbolt and DCOs Martin, Murphy, Di-Tella, Simmons and CL Williams) were all consistent that at no point had Mr **D2054**'s head hit the floor. DCO Murphy described how he was the head officer and how he had held Mr **D2054**'s head as he was assisted to the floor. This was using an approved HO technique.
- 7.6.3 I observed the BWV and this showed that as Mr **D2054** went to the floor, the duvet that had covered him was now underneath him on the floor. I deduced from this that even if DCO Murphy had not had his hand in place, which he assured me he had and I accept, then the duvet would have softened the fall and prevented a bump to the back of the head sufficient to cause a lump as alleged by Mr **D2054**. Listening to the footage, there was no change in the shouting of "Jesus" as Mr **D2054** went to the floor. It is reasonable to assume that if he had hit his head that he would have cried out or at least had a break in the chanting of Jesus. This was not the case.
- 7.6.4 The same for the allegation that the bump to the head had caused him to be unconscious. All the officers restraining him said that he was tensioning his body throughout and fighting them and at no point had he become limp or non responsive. The BWV showed Mr **D2054** cycling his legs and shouting "Jesus" throughout the time he was on the floor. Whilst he was assisted to reception by the DCOs, Mr **D2054** did have his feet on the floor and was walking.
- 7.6.5 The fact that he alleged to have been unconscious after a bump to the head large enough to cause a bump and did not raise this with the DCOs during the use of force, CL Williams on two occasions after when she checked him, Medic Dobson when he reached reception and was checked by Medic Dobson or any of the Tascor DCOs who accompanied him for the next 24 hours is not credible. It is reasonable to assume that given the alleged injury one would do so at the earliest opportunity and at least within the next 24 hours. There were two In-Flight Medics Mr **D2054** could have referred to.
- 7.6.6 **On the evidence and to a balance of probabilities, I find the allegation that Mr **D2054** had hit his head on the floor during the use of force, had been unconscious and the force used on him had continued regardless. Given this and the lack of treatment, he believed he had brain damage, loss of memory, could not sleep and 'non stop headaches' unsubstantiated.**
- 7.7 **Allegation 7: that during the journey to the airport, Tascor DCOs had provided Mr **D2054** with addresses for support organisations in Nigeria that were incorrect.**

- 7.7.1 Mr [D2054] produced copies of the noted down addresses that he had been provided with. These were the Abuja and Lagos offices of the IOM (International Organization for Migration). He clarified at interview that the Tascor officers on the flight had provided him with these addresses to assist him when he returned to Nigeria.
- 7.7.2 DCO Shabani was the officer sat beside Mr [D2054] on the flight to Nigeria. He said that he had not provided contact details but the officers beside Mr [D2054] in the vehicle, DCOs Chambers and Chahal may have done so from a list of IOM offices that is routinely provided.
- 7.7.3 Checks were made with the DCOs sat beside Mr [D2054] in the vehicle to the airport, given there was a note on the ACDT by DCO Shabani that at 03:00 hrs Mr [D2054] had been calm and planning his return. The DCO sat beside Mr [D2054] in the vehicle to the airport (DCO Chambers) said that he may have given Mr [D2054] the contact number for the IOM from a list that the Tascor DCO are provided with and he provided the list. This was last updated in March 2016. DCO Chambers said that he had given Mr [D2054] the details 'in good faith to help him with his return and repatriation in Nigeria.' DCO Chahal said that they had checked the contact details on the internet and these were the most recent information they had and if it was unsuccessful then he was sorry about this.
- 7.7.4 It is unfortunate that the contact details provided to Mr [D2054] by the DCOs were incorrect and Tascor may wish to check how accurate their list is and whether the IOM would be in a position to assist persons removed from the UK rather than those leaving voluntarily. Often providing no rather than some inaccurate information is preferable. I do not find though that there was any maliciousness (as suggested in the allegation) by the DCOs and they were in fact only trying to assist Mr [D2054]
- 7.7.5 **On the evidence and to a balance of probabilities, I find the allegation that during the flight, Tascor DCOs had provided Mr [D2054] with addresses for support organisations in Nigeria that were incorrect unsubstantiated.** It is acknowledged though that some alleged incorrect information was provided by Tascor DCOs and it is recommended that Tascor may wish to review this.

8. SUMMARY AND RECOMMENDATIONS

The Recommendations have been separated into those for Brook House IRC (Serco) and Tascor.

8.1 Tascor – Policy and Procedure and Health and Safety

- 8.1.1 Mr [D2054] was removed from Brook House IRC to the airport in a Tascor vehicle. This was fitted with CCTV but this CCTV was unavailable to the investigation. The vehicle registration was MA62 VFB. SPOC Autry has already referred this to Maple to follow up.

Action 1

- 8.1.2 SPOC Autry should review the response from Maple and feed any concerns to the Detention Stakeholder lead SEO Tony Lennon.

8.2 Tascor and Detention Policy – Health and Safety and Policy and Procedure

- 8.2.1 The PER form mentioned that there had been medication and that this was IP (In Person i.e. Mr [D2054] had control of this). Aeromed Medic Dobson said that this was not the case. The main issue was that there was no record of what medication Mr [D2054] was provided with from Brook House IRC or what was provided to him at his handover to Nigerian authorities.

Action

- 8.2.2 Tascor and Detention Policy should review the PER specifically around the issue of medication and make it clear on the form what medication the detainee left the IRC with and what was handed over to the detainee once the escort was concluded. There needs to be a clear audit trail.

8.3 Tascor – Policy and Procedure

- 8.3.1 The DCOs tried to assist Mr [D2054] with his return to Nigeria by providing him with the contact details for the International Organization for Migration (IOM). Whilst they did this in good faith the information provided was allegedly inaccurate.

Action

- 8.3.2 Tascor management may wish to review whether they should provide unchecked contact information to detainees.

8.4 Brook House IRC – Policy and Procedure and Health and Safety

- 8.4.1 There were some issues with accuracy in the use of force and incident reports completed by DCM Aldis, DCOs Derek Murphy, Jonathan Martin and Luke Odey. These inaccuracies were in relation to the length of time the handcuffs were applied and the timings for this, who the officer took over a hold from and the date on his use of force report, which arm an officer was holding and the timings for the medical emergency that was inconsistent with the ACDT and medical records.

- 8.4.2 There was also an issue with the ACDT that was either only completed to 18:50 hrs on 28 June 2017 or there were pages missing for the following four hours. This incomplete copy was handed over to Tascor so it suggests that the final entry was 18:50 hrs and this detainee had been on constant watch.

Actions:

- 8.4.3 Managers should remind staff of the importance of completing accurate records.
- 8.4.4 A review of Mr [D2054]'s ACDT should be conducted to establish what happened to the completion of the ACDT post 18:50 hrs on 28 June 2017.

8.5 Brook House IRC – Health and Safety

8.5.1 The timings on the BWV were out by an hour and the debrief was not recorded.

Action

8.5.2 Brook House IRC should check that any video equipment is set to the correct time and ensure that all debriefs are recorded for completeness.

8.6 Brook House IRC and Healthcare – Health and Safety

8.6.1 Mr [D2054] was refusing to eat because he required a special diet. It seemed unclear from the documentation who was responsible for agreeing the special diet and putting this in place. There was also an issue with this special diet being communicated to other wings when a detainee was moved.

Action

8.6.2 Brook House and Healthcare should review who is responsible for agreeing special diets in a process that is prompt so there is no delay to the detainee in being able to obtain the special diet.

Appendices

A Complainant Evidence:

Email of original complaint dated 03 July 2017 and subsequent additional emails including self harm injury photographs and contacts for IOM

Telephone Interview with Mr [D2054] 11 August 2017

B Subject Evidence:

DCM Dave Aldis, DCM Ben Shadbolt, DCOs Derek Murphy and Jonathan Martin Telephone Interviews, Use of Force and Incident Reports, Report of Injury to Detainee Form.

C Witness Evidence: Brook House IRC Witnesses

DCOs Luke Odey, Daniella Di-Tella, Andrew Simmons, Chris Donnelly and Clinical Lead Chrissie Williams – Witness Statements, Incident Reports and Report of Injury to Detainee Form

D Witness Evidence: Tascor and Aeromed Witnesses

SDCO Gary Costin, SDCO Matthew Wood, DCOs Mathew McGrath, Murat Shabani, Tom Chambers, Bhawandeep Chahal and Aeromed Medic Robert Dobson – Witness Statements, PER, Passive Restraint Report and Property Form

E Notes from Body Worn Video and CCTV

F ACDT and Mr [D2054]'s Medical Notes

G Policies listed in paragraph 3.3

<u>Name:</u> Helen Wilkinson	<u>Name:</u> Jonathan Wyatt
<u>Grade:</u> HEO	<u>Grade:</u> SEO
<u>Signed:</u>	<u>Signed:</u>
<u>Date:</u> 15/09/17	<u>Date:</u> 15/09/17



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Security, Science and Innovation
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Salford
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Mr

Dated: 15 September 2017

Sent by email to:

Dear Mr

I am writing in response to your complaint email of 03 July 2017 regarding the alleged instances of mistreatment during your detention at Brook House Immigration Removal Centre (IRC) in June this year.

I was sorry to learn of your concerns and would like to assure you that the Home Office is committed to providing a courteous and professional service and any complaint about the way in which officers, or other staff, carry out their duties is viewed most seriously and independently investigated.

Your correspondence was passed to the Professional Standards Unit (PSU) which has responsibility for the investigation of allegations of misconduct or inefficiency against members of the Home Office or those acting on behalf of the Home Office, across the United Kingdom.

I investigated your complaint and advised you that I could only deal with your complaint and no immigration / health related matters. When you sent these to me, I asked that you refer these to your caseworker and not to me. Likewise, the response you sent me from UKVI Complaints. This response letter is regarding the investigation into your complaint only.

Since the matters you raised included allegations of a potential criminal nature, the matter was reported to Sussex Police for investigation. The police recorded your complaint under reference number 47170107133 and informed the Home Office to continue with the investigation and update them at the conclusion. I have updated Sussex police on the outcome of my investigation.

I would like to thank you for speaking to my colleague Ms Sherrington on 11 August 2017 and the additional evidence you provided in emails both prior to and post your

telephone interview and including photographs of your self harm injuries, contact information you were provided with by the escorting officers and access to your medical records.

As the investigating officer, I have carefully considered your complaint in accordance with the Home Office complaints procedures. In considering your complaint, I have examined all the relevant documents and records pertaining to your complaint. You have been interviewed, staff at Brook House IRC, healthcare professionals and the escorts. I have reviewed the Closed Circuit Television (CCTV) and Body Worn Video (BWV) from the use of force in your room and up to your removal from Brook House IRC.

Having examined matters carefully and having considered all the information available to me, I have found insufficient evidence to prove that these officers behaved in the unprofessional way that has been alleged.

Turning to your specific complaints, I have looked carefully at each. My findings are set out below.

Allegation 1: that you were starved for five days and then on 28 June 2017 had been given food that you were 'very convinced that something might be wrong with that lunch food they gave to me on 28/6/2017 either because I told them they should kill me or they are trying now to move me to Nigeria without me knowing...It looked like it had been boiled in chemicals.'

In your initial email complaint of 03 July 2017, you said that you had been 'starved for five days and Healthcare had been concerned because you lost three kilograms in that period. You said that on 28 June 2017, around 12:30 hrs, the officers locked every one inside their room, came to your room around 13:00 hrs and told you to take your food before other prisoners will start coming for their own food. The officers gave you boiled potatoes in a private container which they had not served you food like that before. The potatoes looked like they were boiled with chemicals. You had no choice but to eat the food.'

In your telephone interview, you said that it had been your choice not to eat the server food because the food caused you diarrhea after the first day so you had stopped eating. You had not been 'starved' but had chosen not to eat the food that was available. I found this was inconsistent with your original allegation that you had been 'starved.' You could have eaten the food served to everyone at mealtimes and chose not to.

The Detention Centre Rules at 13 (3) states that the food served in detention centres should be 'wholesome, nutritious, well prepared and served reasonably varied and sufficient in quantity and meet all religious, dietary, cultural and medical needs.' The Operating Standards states 'In accordance with Rule 13 (1), the Centre must have procedures in place with the healthcare team to ensure that any special dietary needs on grounds of health are met.'

You said that you had asked for boiled fish and potatoes but Healthcare had not arranged this so you had gone hungry. When it had been arranged, you had been offered only boiled potatoes which came in the same pot as for all the detainees. you said that you cooked your own food and the officers encouraged you to do so.

Records showed that you told a member of staff on 22 June 2017 that you did not like the food and had been put on observations at mealtimes. You had been told to speak to Healthcare so that they could provide details of your special diet to the kitchen or you could cook food for yourself in the culture kitchen. On 23 June 2017, you told the officers that you were not eating because you were meeting with Healthcare. At a review on 26 June 2017, you said that you had been eating plain food and the observations confirmed that you had from 25 June 2017 so this entry on your Care Map was closed. There was an issue with the food sent for you at lunch on 26 June 2017 (potatoes in tomato sauce) so you did not eat again but the officer had raised this so that it would be rectified with the kitchen.

On 27 June 2017, you received boiled potatoes but not fish and an officer checked with Healthcare and the kitchen and was told only boiled potatoes were your special diet.

Your medical record showed you requested boiled potatoes prior to the start of the notes provided as there was reference to this on 27 June 2017. You had been to see them again on 27 June 2017 to request boiled fish because of mild pain after eating and was told that such a request was not Healthcare's remit. You later confirmed to a mental health nurse that you were eating and drinking normally. The medical record and evidence of Healthcare showed that when you said that you could not eat the food because it upset your stomach you were told to speak to Healthcare, went through the menu with a nurse and a special diet was arranged for you based on what you said you required (boiled potatoes). It is noted that there was a problem with this on 27 June 2017 but the notes showed that the officers tried to rectify this. Healthcare said a special diet was not in their remit regarding the boiled fish when they had agreed the boiled potatoes but this is not within the remit of this investigation and you should to take this up with Healthcare should you wish to pursue this.

You were well within your rights to refuse food and there was nothing medically that staff could do to make you eat. Based on the evidence, and to a balance of probabilities, **I have found that the Brook House staff did as much as they could to assist you to eat (advice, checks on your behalf and observing and suggesting you eat) and there was nothing further they could or should do.**

In your telephone interview, you said that the food served to you on 28 June 2017 had been poisoned to make you leave the detention centre for your removal that day but not to kill you. You said that even though it looked and smelt differently that you had to eat it and it had made you feel lazy and uncomfortable. You said that this food had been served to you before you were told that you were being removed. I did not find it credible that you had been served poisonous food by the centre to make you leave for your flight. I also believe that if you were confident to refuse food previously because you did not like the food offered that you would be more than

confident to refuse the food if you thought that it had been mixed with chemicals and might be poisoned.

For completeness, I checked the records of what food you had eaten from the server and you had eaten the previous evening and within 24 hours of this meal. I was satisfied that the meal you referred to was the lunchtime meal, given it was before you visited with your sister and that was at 15:23 hrs. The note made of this meal was that you had been present for lunch on your wing and you had eaten and there had been no issues. There was no mention of any special treatment.

At 17:45 hrs, there was an issue with your food being in your previous wing and not on E Wing. Given you wanted boiled potatoes and fish the officer arranged for the meal to be brought over in a trolley a few minutes later. This had been given to you. Even if this was the meal referred to by you (which the timeline suggests it is not) the notes did not record anything peculiar about the food. Rather they showed a mistake had been made and this had been rectified as soon as the officer became aware.

On the evidence and to a balance of probabilities, I do not find that you were served with food that contained chemicals and was poisonous to ensure your removal to Nigeria. **On the evidence and to a balance of probabilities, I find the allegation that you had been starved for five days and then on 28 June 2017 had been given food that was poisoned to ensure your removal to Nigeria unsubstantiated.**

Allegation 2: that you had not been provided with your medication prior to your removal from your room to reception and the medication provided to you on the flight to Nigeria was incomplete.

You said that after your move to E Wing that you were not provided with your medication and that the medication provided to you on your flight to Nigeria was incomplete and there was only one (Sensitive/irrelevant for your diabetes) and not six medications. Records showed that you had requested your medication at 17:55 hrs and an officer had contacted Healthcare because none had been provided when you had been moved to E Wing. It then states that this officer collected a cup of water from the kitchen for a drink. The medical records showed that at 18:00 hrs this officer had spoken with Healthcare and asked about your medication. She had told him that you kept your own medication and that it would be in your previous room. The officer had said that he was arranging to collect this. **On the evidence, you were provided with your medication** when you informed the officer that you had medication you needed to take. The officer checked with Healthcare and arranged for the medication to be brought from your room. He collected a cup of water for you to take the tablets with. **The allegation is unsubstantiated.**

Your medical records showed that your medication was (Sensitive/irrelevant) and two tablets were to be taken twice a day. No other medication is listed. The Medic with the escorts said that he had been handed your medication as they left Brook House IRC. He had been given two boxes of (Sensitive/irrelevant) tablets and had given these to the In-Flight Medics. The escort who sat with you on the flight noted records that you had your medication at 07:40 hrs on 29 June 2017. According to the Operating

Standards for the Escorting process 'where the healthcare team at the sending centre judge that it is appropriate for a detainee to have medication in possession sufficient medication will be prescribed for the duration of the escort. The Contractor will retain any remaining medication that the healthcare team provides and either hand it to the detainee at the point of removal or to the receiving authority on arrival.' On the evidence, you were only on [Sensitive/Irrelevant] at the time you left Brook House IRC and sufficient amounts of this was provided for your journey to Nigeria. **The allegation that you were only provided with one of your six medications is unsubstantiated** as you were only on one medication.

On the evidence and to a balance of probability, the allegation that you had not been provided with your medication prior to your removal from your room to reception and the medication provided to you on the flight to Nigeria was incomplete is unsubstantiated.

Allegation 3: that you had self harmed on 28 June 2017 because you had been told that you would be removed to Nigeria in a few hours, this had been the first time that you had been told that you were going to be removed to Nigeria and you were afraid for your life.

You said that you had not been told about your removal to Nigeria until a few hours before your removal. Being afraid for your life, you had become very angry and had cut yourself three times in the left arm with a razor blade. I have checked HO electronic records and these showed that you had been served with an IS.91R at the time of your detention on 15 June 2017. This stated that your removal from the UK was imminent. On 21 June 2017, HO staff met with you and served the IS.151G. This informed you that removal directions had been given for the carrier to remove you from the UK. DCM 01 (a manager at Brook House IRC) had been present during the service of the removal directions on 21 June 2017 and that was the reason you were placed under observation. Records stated that you had been served with removal directions on 21 June 2017 at 15:30 hrs and had said that you cannot go back to Nigeria because of your previous torture there.

In response to whether the detainee would comply with removal directions, DCM 01 continued and stated no. He said that in response to the removal directions you had said that you wanted to die but would not kill yourself. On the evidence, the first time that you were told you were being removed to Nigeria was 15 June 2017 and you were aware the removal directions were in place for your removal on 28 June 2017 on the 21 June 2017 and your response had been sufficient to place you under observation. It is reasonable therefore to assume that the reason you self harmed on 28 June 2017 and just prior to your removal was an attempt to prevent your removal.

On the evidence and to a balance of probability, the allegation that you had self harmed on 28 June 2017 because you had been told that you would be removed to Nigeria in a few hours and this had been the first time that you had been told that you were going to be removed to Nigeria is unsubstantiated.

Allegation 4: that you had been 'bleeding seriously' from the three wounds you had caused in your arm and this had not been treated properly by

Healthcare so you had continued to bleed before, during and after the use of force and your return to Nigeria that could have caused you to die from the amount of blood you lost.

Your evidence was that you had been told that the self inflicted wounds were deep and yet Healthcare had not stitched the wounds or checked up on you after the initial treatment. You said this lack of treatment had caused you to bleed throughout the rest of the day and this was evident during the use of force because there had been blood on the officers who had used force on you, especially the one on your left arm. You said that the escorts had masked the fact that you continued to bleed by placing you in a long sleeve top to cover your arms and the bleeding wounds. You said that you had been told that you would be seen by Healthcare at the flight and was not. You said that you had continued to bleed during the flight, your t-shirt was soaked with blood when you removed it and you could have died from the amount of blood that you lost that day.

I have considered the photographs of your injuries that were submitted 08 August 2017 and a month and a half after the incident. There are three darker cuts that are not as deep or old as other scarring on your upper left arm. The top one is in two cuts. I am satisfied these are the cuts that you and Healthcare records (and body diagram) are referring to from the self harm attempt. There is no dispute that you self harmed and required medical treatment for your cuts. What is in dispute is whether the wounds were treated properly, given you said that they continued to bleed for the next 24 hours. I have considered the evidence of the officers and Healthcare staff who attended the medical emergency response called by the officer on E Wing who your roommate told of your self harm at 13:15 – 13:20 hrs.

The Healthcare Report and note on your medical notes completed Healthcare noted that treatment was administered at 13:30 hrs and you had 'active bleeding from cuts on left upper arm. Self inflicted wounds from using a razor blade.' She noted the size of the lacerations and that she had applied steristrips to the largest of the three and a Mepore dressing. She said that the other two required no dressing.

The evidence of the officers present during the treatment by Healthcare (DCM 01 and DCO 01 and 02) was consistent. All said that they had seen Healthcare treat you for the three "small, superficial marks to his left upper arm." They were consistent that once Healthcare had completed the less than 10 minute treatment that there had been no further bleeding. I am satisfied, on the evidence that the wounds were not bleeding soon after the treatment had been administered by Healthcare. DCM 01 and Healthcare said that you had been moved to a safer custody room with glass doors so that you could be observed by an officer for your own safety given you had self harmed and were refusing to leave for your removal. DCO 01's report confirmed that this had been a joint decision by DCM 01 and Healthcare. A search was conducted prior to this to remove any remaining blades and one was found and removed.

Records showed that by 13:45 hrs you had been relocated to this safer custody room and observation began by DCO 03 at 13:55 hrs. I was satisfied that swift action was taken to ensure that you had no blade to further self harm and was

monitored post the self harm attempt. Records showed that Healthcare had observed you post your move to E Wing and the DCO 03 and other officers were observing you and were checking you regularly. The Medical notes showed that at 18:00 hrs, DCO 03 had spoken to Healthcare to update on your demeanour. I was satisfied, on the evidence, you were checked post your self harm attempt and treatment.

I have considered the next 24 hours and what evidence there was that the wounds continued to bleed and found none. Records are very regular and detailed and make no mention of any bleeding or requirement to call Healthcare to administer to the wounds. I would expect to see mention of bleeding if there had been any. Likewise, the medical notes make no mention of any further requirement to see you for additional treatment for your wounds. The use of force took place at around 23:15 hrs. None of the officers who were involved in the use of force saw any blood or bleeding from the wounds or on them as alleged. They were consistent that if there had been any blood or bleeding that Healthcare would have halted the use of force and examined you and had not done so. Healthcare were present and said that prior to the use of force the dressing remained in place and there was no bleeding. You were examined just after the use of force and the dressing had been intact and there had been no bleeding. In reception, you were checked again and there had been no bleeding from the self harm wounds.

You were handed over to the escorts and examined by Medic 01. None of the DCOs or Medic 01 saw any bleeding to your left arm (or anywhere) and they said that post search you dressed yourself. Medic 01 was clear that the wounds had been 'dry.' In the vehicle to the airport, they said you had not told them that the wounds were bleeding. You had spoken to your sister, as had the DCOs. If you had been bleeding as alleged, I would have expected you to raise this with your sister and she in turn with the DCOs.

I viewed the BWV of two cameras that were in use during the planned use of force. One of these was worn by DCM 01 who was in the room during the use of force and application of handcuffs. When you were sat up in bed talking to DCM 01 prior to the use of force there was no blood on the white quilt that was over your lower body or on your arm and that could be clearly observed. There was no blood or bleeding observed during the use of force or after as you walked to reception. Whilst there were periods when I could not observe the arm, I had clear views of the left arm at various points and if there had been continuous bleeding, there would have been evidence of blood and there was not.

I viewed the CCTV and this showed no evidence of any bleeding whilst you walked from your room to reception or in reception. There was a clear shot of your left arm as the handcuffs were changed from Brook House to escort's handcuffs and there was no blood. I was unable to view the CCTV in the vehicle, given I had been unaware that you had been in the vehicle until you spoke to Ms Sherrington and this was post the time CCTV footage is retained. However, the evidence of the DCOs beside you throughout the journey to the flight was consistent that there was no blood and you raised no health concerns with them. I am satisfied, on the evidence and to a balance of probabilities that once the wounds were treated by Healthcare at

13:30 hrs on 28 June 2017 that there was no further bleeding from the self inflicted wounds and that the wounds were minimal and of little concern to Healthcare who used steristrips (a form of stitching) on one wound and cleaned the other two as no dressing was required.

On this basis, it is highly improbable that a wound bleeding for, at most, 15 minutes before treatment could cause sufficient loss to be a danger to health. **I find the allegation that you had been 'bleeding seriously' from the three wounds you had caused in your arm and this had not been treated properly by Healthcare so you had continued to bleed before, during and after the use of force and your return to Nigeria that could have caused you to die from the amount of blood you lost unsubstantiated.** You received prompt medical care and the fact that you were closely monitored post this showed a genuine concern by both Healthcare and Brook House staff.

Allegation 5: that the DCOs who had entered your room and used force to move you to reception had 'rushed you when you were trying to explain about your condition and not given you chance to walk to reception.'

You said that you had tried to explain that you could not be moved in your condition and instead of listening the officers had rushed into your room and used force to move you to reception. You added to your original complaint that the officer on your room had questioned another officer as to whether it was right to move you in your condition a couple of hours earlier at 21:00 hrs. I was unable to establish from the records who these officers might have been. I was unable to check CCTV for 21:00 hrs as this CCTV was now unavailable. However, regardless of whether or not a DCO made this comment, prior to the removal and at the briefing at 23:19 hrs you had been assessed as medically fit to fly on 27 June 2017 and on 28 June 2017 at the briefing by Healthcare who were fully aware of the self harm attempt and your general medical condition. I am satisfied that regardless of the comment, you were medically fit to be removed. Given this, I have concentrated on the initial allegation that you had not had the opportunity to leave your room voluntarily and without the use of force.

You were insistent that you had not had the chance to walk from your room to reception even after it was explained at our telephone interview that the BWV had shown the opposite and that you had been given every opportunity to leave the room voluntarily and walk to reception. All the staff present at your room (four officers in PPE, DCM 01, DCO 04 and Healthcare) all said that you had had more than one opportunity to leave your room voluntarily and refused to do so. The BWV footage from the two cameras showed that DCM 01 spoke with you for two minutes and asked you six times to comply and leave your room voluntarily for reception for your removal to Nigeria by the escorts. He told you that Healthcare were present. He showed you the officers in Personal Protective Equipment (PPE) who would remove you by force if you refused to leave voluntarily and said twice that he did not want to send the officers in and use force but would if you did not leave voluntarily.

You replied that "it was not ok" and said something but this is muffled. When asked if you will leave voluntarily the final time, you said "no ok boss" and the officers in PPE

entered and used force. I was satisfied that you were given ample opportunity to leave your room voluntarily, understood what would happen if you did not and refused to leave voluntarily even so.

The Detention Centre Rules state 'A detainee custody officer dealing with a detained person shall not use force unnecessarily and, when the application of force to a detained person is necessary, no more force than is necessary shall be used.' The Detention Centre Rule 41 authorises the use of force by a detainee custody officer (DCO) when dealing with a detained person. Force must only be used when it is:

- reasonable in the circumstances;
- necessary in the circumstances;
- the minimum amount of force which is necessary; and
- proportionate to the seriousness of the circumstances

The Operating Standards manual for IRCs states, 'The Centre will ensure that force is used only when necessary to keep a detainee in custody, to prevent violence, to prevent destruction of the property of the removal centre or of others and to prevent detainees from seeking to prevent their own removal physically or physically interfering with the lawful removal of another detainee. Force will only be used as a measure of last resort and strictly within the terms of Rule 41 of the Detention Centre Rules 2001. If handcuffs are used as part of use of force Detention Services Order 1/2002 must be adhered to (this has been replaced by DSO 07/2016 Use of Restraints). The Centre will use and purchase training for control and restraint techniques from the Prison Service for England and Wales. Use of force must only be applied by members of staff who have undertaken necessary training. In the event of force being used, the Centre must ensure that detainees are seen by a member of the healthcare team as soon as practicable. The Centre must have a system for recording all incidents where use of force is applied and to monitor that use.'

DCM 01 made the decision to use force and this was a planned use of force, given you had previously self harmed and said you could not return to Nigeria. He was entitled to do so because you were 'seeking to prevent your own removal.' He gave you ample opportunity to leave your room voluntarily and I am satisfied that the force used was 'as a last resort' and when all other avenues of persuasion had been exhausted. **I found that the use of force was reasonable and necessary in the circumstances.**

I explored with the DCOs who used force what force they had used based on the evidence in their use of force reports and the BWV and found this mainly consistent. I asked them to justified the force they had used at the various points throughout the use of force and explain the techniques they used and these were all HO approved techniques. All the officers were trained in these techniques and in date to use these. **I found that the use of force was the minimum amount of force which was necessary.**

I considered that the use of force had taken two minutes to the control and application of handcuffs and in total, including the handover to the escorts, 10 minutes. I considered that you were shouting "Jesus" throughout, resisting the

officers by moving your arms and legs about pre the application of the handcuffs and pushing back and shouting whilst walking to reception. **I found the use of force was proportionate to the seriousness of the circumstances.**

On the evidence and to a balance of probabilities, I find that the allegation that the DCOs who had entered your room and used force to move you to reception had 'rushed you when you were trying to explain about your condition and not given you chance to walk to reception' unsubstantiated. You had ample opportunity to leave voluntarily and chose not to do so. The use of force was a result of your attempt to prevent your removal by physically refusing to leave your room for your removal.

Allegation 6: that you hit your head on the floor during the use of force, had been unconscious and the force used on you had continued regardless. Given this and the lack of treatment, you believed you had brain damage, loss of memory, could not sleep and 'non-stop headaches.'

You said that you hit the back of your head on the floor when the officers had come into the room to remove you by force to the reception area. You were adamant that you had been unconscious after the bang to the back of your head as you hit the floor and that you had had a lump, even after it was explained to you at interview that the BWV showed you continue to shout and move about straight after you were on the floor. You had not told Brook House, the escorts or any of the medical staff about your injuries. You had been unable to afford medical assistance in Nigeria to support the injuries you claimed. The officers present during the use of force (DCMs 01, those in PPE and who applied the handcuffs and Healthcare) were all consistent that at no point had your head hit the floor. DCO 02 described how he was the head officer and how he had held your head as you were assisted to the floor. This was using an approved HO technique.

I observed the BWV and this showed that as you went to the floor, the duvet that had covered you was now underneath you on the floor. I deduced from this that even if DCO 02 had not had his hand in place, which he assured me he had and I accept, then the duvet would have softened the fall and prevented a bump to the back of the head sufficient to cause a lump as alleged by you. Listening to the footage, there was no change in the shouting of "Jesus" as you went to the floor. It is reasonable to assume that if you had hit your head that you would have cried out or at least had a break in the chanting of Jesus. This was not the case.

The same for the allegation that the bump to the head had caused you to be unconscious. All the officers restraining you said that you were tensioning your body throughout and fighting them and at no point had you become limp or non responsive. The BWV showed you cycling your legs and shouting "Jesus" throughout the time you were on the floor. Whilst you were assisted to reception by the DCOs, you did have feet on the floor and was walking.

The fact that you alleged to have been unconscious after a bump to the head large enough to cause a bump and did not raise this with the DCOs during the use of force, Healthcare on two occasions after when you were checked, Medic 01 when

you reached reception and was checked by Medic D01 or any of the escorts who accompanied you for the next 24 hours is not credible. It is reasonable to assume that given the alleged injury one would do so at the earliest opportunity and at least within the next 24 hours. There were two In-Flight Medics you could have referred to and you did not do so.

On the evidence and to a balance of probabilities, I find the allegation that you hit your head on the floor during the use of force, had been unconscious and the force used on you had continued regardless. Given this and the lack of treatment, you believed you had brain damage, loss of memory, could not sleep and 'nonstop headaches' unsubstantiated.

Allegation 7: that during the journey to the airport, escorts provided you with addresses for support organisations in Nigeria that were incorrect.

You produced a copy of the noted down addresses that you had been provided with. These were the Abuja and Lagos offices of the IOM (International Organization for Migration). You clarified at interview that the escorts on the flight had provided you with these addresses to assist you when you returned to Nigeria.

Escort 01 was the officer sat beside you on the flight to Nigeria. He said that he had not provided contact details but the officers beside you in the vehicle, Escorts 02 and 03 may have done so from a list of IOM offices that is routinely provided.

Checks were made with Escorts 02 and 03, sat beside you in the vehicle to the airport, given there was a note by Escort 01 that at 03:00 hrs you had been calm and planning your return. Escort 02 said that he may have given you the contact number for the IOM from a list that the escorts are provided with and he provided the list. This was last updated in March 2016. Escort 02 said that he had given you the details 'in good faith to help you with your return and repatriation in Nigeria.' Escort 03 said that they had checked the contact details on the internet and these were the most recent information they had and if it was unsuccessful then he was sorry about this.

It is unfortunate that the contact details provided to you by the escorts were allegedly incorrect. I do not find though that there was any maliciousness by the escorts and rather that they were in fact only trying to assist you.

On the evidence and to a balance of probabilities, I find the allegation that during the flight, escorts provided you with addresses for support organisations in Nigeria that were incorrect unsubstantiated.

After considering all of your concerns and based on the balance of probability I have found that none of the officers acted in an unprofessional manner and they did follow Home Office procedures and guidelines.

I recognise that you feel that you had cause to complain about events during your detention and removal. All Home Office employees are fully aware of the emotional effects their job can have on members of the public. I can assure you that officers

are trained to conduct themselves in a professional and courteous manner at all times making every effort to ease the situation for everyone concerned.

It is always regrettable when someone has cause for complaint; however I hope that you will be assured that your concerns have been viewed seriously and properly addressed. We are constantly striving to improve customer service standards within the Home Office and it may also be of interest to you to know that the Prisons and Probation Ombudsman (PPO) provides an independent oversight of detention complaints. The PPO will consider the quality of our decision making and review ongoing cases; the PPO also identifies strengths and weaknesses and resolves process issues. All complainants have the right to appeal investigations decisions regarding their complaint to the PPO. I am enclosing for your information a leaflet which explains the role of the PPO in our complaints procedures. Further information can also be obtained from their website: www.ppo.gov.uk

Yours sincerely

Helen Wilkinson
Investigating Officer
Professional Standards Unit
Enc: PPO leaflet

Goulder, Karen

From: Gatwick Enquiries
Sent: 29 September 2017 13:29
To: 'Wilkinson Helen'
Subject: RE: Official Sensitive - [D2054] Complaint

Hi Helen,

I have had the below reply from Security about the Derek Murphy query.

I am awaiting a final check regarding the ACDT as one of the safeguarding team checked and found the same as what I had sent onto you, but we have asked another member of the team in case there is a chance that a page/pages missed being scanned before being given to Tascor.

If I don't catch you before, have a fab weekend.

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

Phone: + [DPA]

Email: [DPA] or [DPA]

www.g4s.com/uk

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From: Harris, Kelly
Sent: 29 September 2017 13:20
To: Gatwick Enquiries; Dance-Jones, Carrie; Daniel Robinson; Nick Jones; Goulder, Karen
Subject: RE: Search documentation - [D2054] Complaint
Sensitivity: Confidential

Karen

I have had a look and there is no statement from Derek Murphy

From: Wilkinson Helen [mailto:[DPA]]
Sent: 27 September 2017 13:12
To: Goulder, Karen
Subject: RE: Official Sensitive - [D2054] Complaint

Thanks ☺

Goulder, Karen

From: Goulder, Karen
Sent: 27 September 2017 12:38
To: 'Wilkinson Helen'
Subject: RE: Official Sensitive - **D2054** Complaint

Hi Helen,

That is fine, and yes I have a lovely holiday thank you!

I have sent the search check to Security about Mr Murphy and I have sent the ACDT bit to our Safer Community team to check for you.

Kind regards

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

Phone:

DPA

Email:

or

DPA

www.g4s.com/uk

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INNOVATION AND
TEAMWORK

From: Wilkinson Helen [mailto:**DPA**]
Sent: 26 September 2017 12:58
To: Goulder, Karen
Subject: RE: Official Sensitive - **D2054** Complaint

Hi Karen,

I hope you had a good holiday. Thought you might be so sorry for the emails.

Thanks for the nurse's details.

I have not had anything back on the other two.

Kind Regards

Helen

Helen Wilkinson
Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: **DPA**
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From: Goulder, Karen [mailto:**DPA**]
Sent: 25 September 2017 10:45
To: Wilkinson Helen
Subject: Official Sensitive - **D2054** Complaint
Importance: High

Hi Helen,

I hope you are well?

I have just returned from holiday today and playing catch up! I will get copies of these to the relevant peeps for you, no problems!

With regards to the 3 other emails you sent over.....I have found out from Michael Wells who is our Healthcare Practice Manager that the nurse is Edward Omoraka (he is an RMN nurse).

Regarding the email you sent on the 11th about there not being anything from Derek Murphy who conducted the search – have you had an answer on this from anyone? I was not sure if you contacted Loraine in my absence?

And with reference to the email below about the ACDT entries, again, I wondered if you had got the info you needed on this too?

Sorry, it is always the way when you get back – trawling through emails!!!

Kind regards as always

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

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From: Wilkinson Helen [mailto:**DPA**]
Sent: 15 September 2017 11:09

To: Goulder, Karen
Subject: acdt
Sensitivity: Confidential

Hi Karen,

Not sure if you are back off leave yet but I would be grateful if you would check something for me when you are please.

I'm just finalising the report and noted the ACDT for Mr [D2054] was completed regularly until 18:50 hrs when DCO Jennings made the last entry. It was taken over at 23:20 hrs by Tascor. I would just like a check why the ACDT was not completed in the intervening four hours, given Mr [D2054] was on constant watch? DCO Jennings entry ends a page and Tascor's starts one so it just could be the pages have been overlooked.

Kind Regards

Helen

Helen Wilkinson
Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: **DPA** (e-fax)
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www.gov.uk/homeoffice

From: Wilkinson Helen [mailto: [DPA]
Sent: 12 September 2017 16:52
To: Goulder, Karen
Subject: FW: Official Sensitive - [D2054] Complaint

Hi Karen,

Could you let me know if there is a nurse at Brook House called Edward (see below) as this seems to be the person who provided Mr [D2054] with his medication.

Thanks

Helen

Helen Wilkinson
Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: **DPA** (e-fax)
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From: Wilkinson Helen [mailto: [DPA]
Sent: 11 September 2017 11:22
To: Goulder, Karen
Subject: RE: Search documentation
Sensitivity: Confidential

Hi Karen,

Thanks for locating these documents for me. There is nothing from Derek Murphy who conducted the search, is this correct?

I hope things have settled down at Brook House now.

Kind Regards

Helen

Helen Wilkinson

Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate

Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

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Goulder, Karen

From: Goulder, Karen
Sent: 27 September 2017 12:31
To: [REDACTED] **DPA**
Subject: Interview notes
Attachments: Telephone Interview with DCO Jonathan Martin on 26 July 2017.pdf

Hi Jonny,

Here are your interview notes from Helen Wilkinson (PSU).

Kind regards

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

Phone:

[REDACTED] **DPA**

Email:

or

[REDACTED] **DPA**

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**INNOVATION AND
TEAMWORK**

Telephone Interview with DCO Jonathan Martin on 24 August 2017

Start: 10:00 hrs

End: 10:53 hrs

Present on the telephone:

Jonathan Martin, Detainee Custody Officer, Brook House IRC

Helen Wilkinson, Investigating Officer, Professional Standards Unit

The briefing document was covered. DCO Martin consented to the interview being recorded and that he was happy to proceed without a trade union representative or work place colleague. He had sight of his use of force report and was told that he could refer to this. He had seen his letter and the extract of the complaint.

DCO Martin had been a DCO since January 2015 and always based at Brook House IRC. He had advanced C & R as well as the usual C & R refresher. He had been in ticket on 28 June 2017.

He said that he had not had contact with Mr **D2054** until he was outside his room in full PPE. He had been asked to stay on that night to assist with the charter. He had formed a team with three colleagues and at 11:00 hrs he had gone to Eden wing (room 7). Mr **D2054** had been on constant watch because of an earlier self harm attempt when he had cut his arm with a razor blade because Mr **D2054** had not wanted to be removed. DCO Martin had been told this at the briefing that was also on BWV.

DCM Aldis had opened the door and asked Mr **D2054** several times (3-5 times) if he would walk down and speak to the Tascor escorts. DCO Martin had a helmet on and could not hear the response.

When he did not leave the room, DCO Martin was told by DCM Aldis to go into the room and use force to move Mr **D2054** for his removal. He had been the number two officer (arm) and he restrained the left arm by taking control of the wrist to isolate the arm. The shield was large and made contact with Mr **D2054**. It was used on the body.

DCO Martin had taken control of Mr **D2054**'s arm as they were at either side of the shield. He could not remember if they had assisted Mr **D2054** off the bed or if Mr **D2054** had wriggled off the bed onto the floor. Mr **D2054** had been shouting and he had moving his body to fight with the officers. They ended up on the ground and Mr **D2054** was on his back. DCMs Murphy or Shadbolt would have controlled Mr **D2054**'s head as he went to the floor. He had not seen or heard Mr **D2054** bang his head on the floor or hear Mr **D2054** yelp. Mr **D2054** had not been unconscious at any time. He was shouting all the time. DCO Martin had tried to apply a final lock (goose, cocking the hand). He explained that this Home Office technique was an officer be near the detainee's shoulder and would put the detainee's elbow between their knees. One hand would be on the elbow and the hand would be "cocked like a rooster's neck" (wrist flexion) and the

officer's hand would go under this. DCO Martin had struggled to get his hand under as Mr **D2054**'s was quite short and Mr **D2054** was strong for such a small man and had been resisting. DCO Martin could feel this in Mr **D2054**'s arm.

DCO Martin had assisted Mr **D2054** up and placed Mr **D2054**'s hand in the small of his back (back hammer position). He was in a final lock (left hand on bicep and right hand on Mr **D2054**'s hand with his thumb and fore finger wrapped around Mr **D2054**'s thumb and fore finger) in the small of Mr **D2054**'s back, considering the pressure on the shoulder.

D2054 was placed in handcuffs. **D2054** had been naked and DCO Andy Simmons (not in PPE) had entered and covered his dignity with a towel. Holding this all the way to reception. **D2054** was under control with officers on his head, arms and legs. He was assisted to stand up. DCO Martin said he would have been sat on one knee and then one foot with one arm under **D2054**'s armpit and one on the elbow. He would not lift in final lock as this could break the wrist.

D2054 had been shouting "Jesus and Jesus help me" all the way on the way to reception. DCO Martin was holding **D2054** with one hand under **D2054**'s armpit and the other on his elbow or in the final lock position still (finger and thumb hold). Even though **D2054** had the handcuffs on, DCO Martin said that this final lock hold (not tight) had been the way that he had been taught in DCO training in 2014. **D2054** had been almost lifted down the hallway. **D2054** had been "very distraught" throughout the use of force shouting "Jesus." DCO Martin said that he did not like using force on anyone but was required to do so as part of his job.

Whilst stood at the door, the BWV had shown him grimacing his face and an officer wipe his face. DCO Martin said that he sweat a lot. With PPE and the helmet it would not take a lot to make him sweat. He may have asked someone to wipe his eyes as the sweat was going in his eyes and that was why he had his eyes screwed up.

D2054 was then handed over to Tascor. Healthcare had been present throughout but DCO Martin had been focused on his role. They had not entered the room or had any concerns about any medical condition, given they had not stopped the use of force and could have done if they had any medical concerns.

He had not completed the body drawing for his use of force report. This could have been because he had included a digital signature. DCO Martin said that he may have been mistaken about the arm he had control of. Whichever arm it was, he had hold of the same arm throughout. DCO Martin said that there had been no blood from **D2054** or on officers at any time. Mr **D2054** had not said that he arm was hurting or bleeding. If he had then DCO Martin would have changed his hold. **D2054** had not said that his head was hurting.

DCO Martin said that there was no formal debrief. They were just asked if everyone was ok. It had not been captured on BWV. He had had one hot debrief (bitten) but no cold debrief in BH.

In response to the allegations, DCO Martin said that officers had not rushed in, [D2054] had been asked several times to come out. He had the opportunity to leave 3-5 times. It was a legal removal. DCO Martin said that he had not seen or heard [D2054] hit the floor and was focused on his arm. [D2054] had not been unconscious given how he was tensing his arm and struggling. He was not limp and was shouting and screaming throughout. DCO Martin said that there was no blood from any cuts. He had not seen a spot of blood on the floor, towel or on him or other officers.

DCO Martin said the force used was not excessive and appreciated that it could be scary for someone. He was doing his job. He had no concerns with the use of force used by his colleagues and the use of force had been on camera.

He had been happy with how the interview was conducted. He asked for a copy of the interview notes to be sent to Karen Goulder for her to forward to him.

Goulder, Karen

From: Goulder, Karen
Sent: 25 September 2017 10:45
To: 'Wilkinson Helen'
Subject: Official Sensitive [D2054] Complaint
Attachments: FW: Interview notes; Interview Notes
Importance: High

Hi Helen,

I hope you are well?

I have just returned from holiday today and playing catch up! I will get copies of these to the relevant peeps for you, no problems!

With regards to the 3 other emails you sent over..... I have found out from Michael Wells who is our Healthcare Practice Manager that the nurse is Edward Omoraka (he is an RMN nurse).

Regarding the email you sent on the 11th about there not being anything from Derek Murphy who conducted the search – have you had an answer on this from anyone? I was not sure if you contacted Loraine in my absence?

And with reference to the email below about the ACDT entries, again, I wondered if you had got the info you needed on this too?

Sorry, it is always the way when you get back – trawling through emails!!!

Kind regards as always

Karen

Karen Goulder
Administrator
Gatwick IRCs
Custodial & Detention Services
G4S Care and Justice Services (UK) Ltd

Phone:

DPA

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or

DPA

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TEAMWORK

From: Wilkinson Helen [mailto:
Sent: 15 September 2017 11:0
To: Goulder, Karen
Subject: acdt
Sensitivity: Confidential

DPA

Hi Karen,

Not sure if you are back off leave yet but I would be grateful if you would check something for me when you are please.

I'm just finalising the report and noted the ACDT for [D2054] was completed regularly until 18:50 hrs when DCO Jennings made the last entry. It was taken over at 23:20 hrs by Tascor. I would just like a check why the ACDT was not completed in the intervening four hours, given Mr [D2054] was on constant watch? DCO Jennings's entry ends a page and Tascor's starts one so it just could be the pages have been overlooked.

Kind Regards

Helen

Helen Wilkinson
Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: [DPA]
F: [DPA] (e-fax)
M: [DPA]
www.gov.uk/homeoffice

From: Wilkinson Helen [mailto:[DPA]]
Sent: 12 September 2017 16:52
To: Goulder, Karen
Subject: FW: Official Sensitive - [D2054] Complaint

Hi Karen,

Could you let me know if there is a nurse at Brook House called Edward (see below) as this seems to be the person who provided [D2054] with his medication.

Thanks

Helen

Helen Wilkinson
Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: [DPA]
F: [DPA] (e-fax)
M: [DPA]
www.gov.uk/homeoffice

From: Wilkinson Helen [mailto:[DPA]]
Sent: 11 September 2017 11:22
To: Goulder, Karen
Subject: RE: Search documentation
Sensitivity: Confidential

Hi Karen,

Thanks for locating these documents for me. There is nothing from Derek Murphy who conducted the search, is this correct?

I hope things have settled down at Brook House now.

Kind Regards

Helen

Helen Wilkinson

Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate

Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: **DPA**
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Goulder, Karen

From: Wilkinson Helen <[redacted] DPA>
Sent: 19 September 2017 09:00
To: Goulder, Karen
Subject: FW: Interview notes
Attachments: Telephone Interview with DCM Dave Aldis 24 August 2017.pdf
Sensitivity: Confidential

Hi Karen,

The email Dave gave me is undeliverable. Please would you also pass his telephone interview notes to him.

Thank you,

Helen

Helen Wilkinson

Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: [redacted] DPA
F: [redacted] (e-fax)
M: [redacted]
www.gov.uk/homeoffice

From: Wilkinson Helen
Sent: 19 September 2017 08:59
To: [redacted] DPA
Subject: FW: Interview notes
Sensitivity: Confidential

Official - Sensitive

Hi Dave,

As promised at our telephone interview on 24 August 2017, please find attached a copy of the notes from the interview.

Kind Regards

Helen

Helen Wilkinson

Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford , M5 3LZ

T: [redacted] DPA
F: [redacted] (e-fax)
M: [redacted]

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Telephone Interview with DCM Dave Aldis on 24 August 2017

Start: 13:02 hrs

End: 13:50 hrs

Present on the telephone:

Dave Aldis, Detainee Custody Manager, Brook House IRC

Helen Wilkinson, Investigating Officer, Professional Standards Unit

The briefing document was covered. DCM Aldis consented to the interview being recorded and that he was happy to proceed without a trade union representative or work place colleague. He had sight of his documentation regarding the use of force and was told that he could refer to this. He had seen his letter and the extract of the complaint.

DCM Aldis had been a DCM for three years and DCO accredited for 8.5 years, based throughout at BH. He was supervising the use of force team. He would advise on the removal job and direct during the use of force given the helmets restricted views and he could see everything that was happening. If anything wrong he could stop the use of force. He ensured the safety of everyone involved.

He said that he had known **D2054** prior to the use of force because Mr **D2054** had been on an ACDT. This may have been regarding the service of removal directions and **D2054** saying he would not leave. The local Home Office team would have served these. He said a case manager from each shift was assigned to each detainee on an ACDT. That person would attend the case reviews. Sometimes other managers would cover if the case manager listed was not available. He said that they had 10 food refusals at the moment and he could not remember **D2054**'s food issues. He said that the care plan 'encourage him to eat' meant that DCOs would check why **D2054** was not eating and note down any interactions. When the ACDT said 'made it clear he would not take his own life' DCM Aldis said that he would have asked direct questions about if he would and why. Mr **D2054** must have said he would not take his own life.

He had been the operations manager (responsible for the centre) and had been called to attend Mr **D2054** because he had made a couple of cuts to his left upper arm with a razor blade. Healthcare had attended and "patched him up" and decided that Mr **D2054** did not need hospital treatment. DCM Aldis said these had been "small, superficial marks to his left upper arm." He had seen worse and had not been worried. A healthcare nurse had spent less than 10 minutes treating him and then **D2054** had been moved.

DCM Aldis had put **D2054** under constant supervision because of the self harm and his refusal to leave the UK. **D2054** had been moved to their smaller unit (Echo wing, safer custody rooms with glass doors so they can be watched by an officer). Duty Director Michelle Brown authorised a full search to ensure that all the blades used had been removed. DCM Murphy and DCO Luke O'Dade completed the search. DCM Aldis had been in the

room with his back towards [D2054] during the search. One blade was covered before and one after the search.

Just after 21:00 hrs, DCM Aldis had gathered a team in PPE given Mr [D2054] had self harmed and refused to leave for his flight. They were prepared in case [D2054] had refused to walk to reception. He said that there was a tight timescale as the Tascor escort's were collecting and leaving for flights and DCM Aldis wanted the team ready in case. He said that the clinical lead (Chrissy Williams) had been present at the briefing and said that she had no medical concerns.

DCM Aldis had tried to speak to [D2054] again and in response he had been saying that he was not well and talking over DCM Aldis and not engaging with DCM Aldis. He had told [D2054] that he would have to send a team in and remove him by force if he would not leave and walk to reception. DCM Aldis had briefed the team prior and then sent the team in. DCM Aldis said that team would always use a shield to protect themselves as they entered the room. He said that little force would have been used given [D2054] had been in bed at the time. He had not seen the contact.

DCM Aldis said that [D2054] had been struggling so the team had assisted [D2054] to the floor. He said that the head officer would have had full control of the head. If he had seen [D2054] hit his head on the floor, DCM Aldis would have stepped in. He did not see [D2054] hit his head on the floor as he was assisted to the floor.

[D2054] had been "shouting and screaming - Jesus" and "his body was rigid (officers were struggling to apply locks and he was kicking his legs) and not complying with their requests." After a short time the team had control of [D2054] after the initial struggle. DCM Aldis had no concerns with how the use of force was conducted. It was done "quickly and efficiently and if I had had any concerns I would have spoken up at the time." He said that he had demonstrated to DCO Di-Tella how to hold [D2054]'s legs because this had been her first experience of use of force and adrenaline could affect actions and she may have forgotten the exact position she needed to be in. It was to assist her.

DCM Aldis had authorised handcuffs because of none compliance and the original outburst. Although the officers had control of [D2054] he was not following their instructions and was being none compliant so it was for his safety and the officers' safety to protect them from him lashing out that the handcuffs were applied. The room to the discharge area was a distance and handcuffs would be more secure. DCM Aldis had no concerns with how the handcuffs had been applied. There had been no blood on [D2054] or on the officers. If there had been any blood he would have asked healthcare to come in. Healthcare had been directly behind DCM Aldis and raised no concerns.

He was walked to discharge. [D2054] was shouting and being none compliant during this walk. DCM Aldis had asked DCM Shadbolt about

standing [D2054] upright but he took direction from the head officer because DCM Shadbolt could feel the resistance the detainee was giving. Mr [D2054] had not complained about his head hurting or bleeding. If there had been any blood, healthcare would have stopped the removal. Healthcare had been as close to the team as he was. No checks had been conducted by healthcare. The Tascor medic would take over and conduct checks.

[D2054] was handed over to Tascor. They had put on their handcuffs and he had removed his. Healthcare had been present throughout the move. DCM Aldis had asked a couple of times if they had any concerns and they had said no.

The team had returned to where they had got ready and they had a chat as a group about how the use of force had been, how it had gone (good and bad) and what could be done differently. He had told them "good job" because he had had no concerns with the use of force and thought it "a job well done." It was normally recorded (not in this case). If a detainee remained in the centre, they would have a debrief with the detainee about why the force had been used (within 24 hours) and what the team could have done differently. They could not in this case because [D2054] had left. A form would be completed.

In response to the complaint that officers had rushed [D2054] when he had been trying to explain why he could not return to Nigeria, DCM Aldis said he was not rushed and was given the opportunity to talk with DCM Aldis and not talk over him and to walk. DCM Aldis had told [D2054] what would happen if he did not comply. He said everything was proportionate and justified and the team's role was to hand him to Tascor for lawful removal. He had been given the chance to walk to reception. DCM Aldis said that Mr [D2054] had been assisted to the floor and an officer would have held his head and the officer's forearm would be between the floor and Mr [D2054]'s head. DCM Aldis said that he had been shouting and moving the whole time. He had been rigid and would have been loose if he was unconscious. He was not unconscious. DCM Aldis said that there was no blood from the self harm cuts. These had not been deep or serious when he had done this.

DCM Aldis had been happy with how the interview had been conducted. He asked for a copy of the interview notes to be sent to him at

DPA

Goulder, Karen

From:
Sent:
To:
Subject:
Attachments:

Wilkinson Helen
19 September 2017 08:57
Goulder, Karen
Interview Notes
Telephone Interview with DCM Ben Shadbolt dated 18 August 2017.pdf; Telephone Interview with
DCM Derek Murphy dated 18 August 2017.pdf; Telephone Interview with DCO Jonathan Martin on
26 July 2017.pdf

DPA
DPA

Sensitivity:

Confidential

Official – Sensitive

Hi Karen,

When I spoke to the officers by telephone they wanted copies of their telephone interviews. I sent Dave Aldis his direct given he had a secure company email. The others did not and I agreed to send them to you for distribution if that is ok?

I've attached interviews for Derek Murphy, Jonathan Martin and Ben Shadbolt and would be grateful if you would pass these to them securely.

I'm just finishing the report so you should receive the recommendations shortly. I have found all complaints by **D2054** unsubstantiated.

Many thanks for your help during the investigation and speak to you soon.

Kind Regards

Helen

Helen Wilkinson

Investigating Officer, Professional Standards Unit

Home Office Security, Security, Science and Innovation Directorate
Home Office, Block C, 3rd floor, Soapworks, Ordsall lane, Salford, M5 3LZ

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Telephone Interview with DCM Ben Shadbolt dated 18 August 2017

Start: 08:52 hrs
End: 09:43 hrs

Present on the telephone:

Ben Shadbolt, Acting Detainee Custody Manager, Brook House Immigration Removal Centre

Gary Siggins, POA representative and Detainee Custody Officer, BH

Helen Wilkinson, Investigating Officer, Professional Standards Unit

The briefing document was covered and the role of the POA representative explained. DCM Shadbolt consented to the digital recorder. He had had sight of and had his use of force report and was advised that he could refer to this and was aware that this was a complaint investigation following a complaint by **D2054** regarding his removal from his room to reception in 28 June 2017. He confirmed he had seen the extract of the complaint. He said that he wanted a copy of the interview notes and was happy for these to be sent back via Karen Goulder as he did not have a work's secure email address.

DCM Shadbolt had been seconded as a DCM since May 2017. He had been a DCO since August 2011 and based at Brook House and Tinsley IRC. He was usually Tinsley staff other than during seconded roles.

He had been part of a team in PPE escorting detainees from their rooms to reception for handover to Tascor. The detainees could not refuse the removal. **D2054** had been on constant supervision because of a self harm incident earlier. DCM Shadbolt had been informed of this at the briefing. He had not been present during the day and had been brought in on overtime for that evening. He had been asked by DCM Aldis numerous times to leave his room and talk to Tascor as he was leaving Brook House for his flight. Mr **D2054** refused. The team stood at the door so **D2054** could see them and was asked again and refused again. DCM Aldis gave him a last chance and said that the team would remove him by force if he refused. Mr **D2054** had been lying in bed, had not moved and refused again (said no) so the team had been sent in. **D2054** had been sat up in bed when they entered. The quilt would have been removed.

DCM Shadbolt had taken hold of **D2054**'s left arm and stopped him from thrashing his arm about by securing it (near the centre table). He had isolated **D2054**'s arm by holding **D2054**'s left arm with his left arm on **D2054**'s lower arm and his right arm under **D2054**'s armpit area. As they had tried to stand **D2054**, **D2054** had taken himself to the floor and the officers had assisted him. DCM Shadbolt had still been holding **D2054** in the same position. Isolated to stop Mr **D2054** thrashing his arm around and held in the same way to take the weight as **D2054** went to the floor. The officer on his head (DCM Murphy) supported his head as he was assisted to the floor. **D2054**

was taking himself to the floor and the officers were managing this so he did not hurt himself.

Once [D2054] was on his back on the floor, he was still shouting Jesus. Given the restricted space and the size of the officers and as DCM Shadbolt had been at the top end of [D2054]'s body, he and DCM Murphy had swapped positions and DCM Shadbolt had taken control of the head and DCM Murphy the left arm. It was a confined space and they had changed based on their positions. DCM Shadbolt had his knees either side of Mr [D2054]'s head and his left hand was behind his head at the back and his right hand was on his forehead. His ears had not been covered. DCM Shadbolt had been saying telling him to comply and that he would still be going on his flight. DCM Shadbolt had been giving Mr [D2054] instructions (coming to door, stop) but "given Mr [D2054] was constantly shouting the dialogue was not great. He was not listening."

Healthcare had been present throughout and had no concerns. [D2054] had been kicking out and a leg officer had assisted. [D2054] was sat up and DCM Shadbolt had been stood behind and used his knee for Mr [D2054] to lean against. He had his hands on [D2054]'s head to stop him from thrashing around and harming himself or the officers. DCM Shadbolt had placed his hand on his forehead to prevent [D2054] from hitting his head on the bed. DCM Shadbolt said that [D2054] had not hit his head on the side of the bed. The ratchet handcuffs were applied to the small of Mr [D2054]'s back. DCM Shadbolt had checked these and made sure that they were secure. DCM Shadbolt

After this, Mr [D2054] was assisted to his feet. DCM Shadbolt had moved to the front and held his head as he was walked to reception. [D2054] continually shouted "Jesus" and DCM Shadbolt had tried to talk to Mr [D2054] ([D2054] calm down) but he was not listening and kept saying "Jesus." He had held Mr [D2054] by the head and [D2054]'s head had down and been on DCM Shadbolt's chest. DCM Shadbolt's arm and body was between Mr [D2054] and any door frame. DCM Aldis had asked if Mr [D2054] could be stood up and he had not been. DCM Shadbolt said that if [D2054] had complied he would have been allowed to stand as a form of de-escalation. [D2054] had kept saying Jesus and not listening so he had remained bent forward. He said that healthcare were present and behind and were watching. They could have stopped the use of force by shouting medical emergency. They did not. They were asked part way through if they had any concerns and they had confirmed no. If they had said yes healthcare would have checked him.

[D2054] was shouting all the time repeating Jesus. He had resisted by trying to push back and digging his heels in. DCM Shadbolt was experienced and the C & R would continue unless the team were told to stop. Hearing his shouting had not effected DCM Shadbolt. It had showed DCM Shadbolt that [D2054] could breathe.

They had had to wait at the discharge door for paperwork and prepare the vehicle given [D2054] was none compliant. DCM Shadbolt had tried to deescalate him but [D2054] would not. DCM Shadbolt had not heard an officer saying "don't waste your breathe." He could only hear [D2054]'s shouting Jesus.

In reception, the head of Tascor team asked for the handcuffs to be released and [D2054] was handed over and DCM Shadbolt stepped back.

He said that the complaint extract indicated that [D2054] was saying that he was bleeding. DCM Shadbolt said that there was no sign of blood and healthcare had been present throughout. They had been asked if they had any concerns and they said no. They had attended the briefing and had not raised any issue with force being used. [D2054] had not been unconscious at any time and had been continually shouting Jesus. If he had been unconscious he would not have been able to shout.

In the debrief, healthcare had confirmed that there were no concerns with the use of force. DCM Shadbolt said that the debrief should have been captured on the BWV. It should have raised any concerns and injuries.

In response to the complaint extract, DCM Shadbolt said he had only been involved from where he accused the team of rushing him. DCM Shadbolt said all he had heard [D2054] said was no. DM Aldis had given numerous chances to walk. He refused to get out of bed and follow instructions. Mr [D2054] had not hit his head. He had been shouting Jesus throughout without pause. He was not unconscious. DCM Shadbolt said that there was no blood. He was stood behind [D2054] when he sat up and the handcuffs applied and there was no blood. He had not said that he was bleeding only Jesus. He had not said that he had hurt his head. All he said was Jesus.

Both said that PPE would cause officers to sweat.

DCM Shadbolt was happy with how the interview had been conducted.

Telephone Interview with DCM Derek Murphy dated 18 August 2017

Start: 09:57 hrs

End: 10:25 hrs

Present on the telephone:

Derek Murphy, Detainee Custody Manager, Brook House Immigration Removal Centre

Helen Wilkinson, Investigating Officer, Professional Standards Unit

The briefing document was covered. DCM Murphy said that he would like to proceed with the interview today. He said he was happy to proceed without a trade union representative or workplace colleague. DCM Murphy consented to the digital recorder. He had had sight of and had his use of force report. He was aware that this was a complaint investigation following a complaint by Mr **D2054** regarding his removal from his room to reception in 28 June 2017. He confirmed he had seen the extract of the complaint. He said that he wanted a copy of the interview notes and was happy for these to be sent back via Karen Goulder as he did not have a work's secure email address.

DCM Murphy had been a DCM for two week and had been a DCO for 4 years. He had been based at BH for 1.5 yrs. Previously he had been at Colnbrook IRC.

In response to his being present at 13:45 hrs when **D2054** had self harmed and what treatment he had seen **D2054** receive, DCM Murphy said he had been present when healthcare had cleaned the wounds. There had been no bleeding after this treatment.

He said that he was part of a four man team to conduct a planned removal. He was known to be none compliant and had had a history of using razor blades. DCM Murphy had been informed earlier on in the day that he had made cuts to the top of his arm.

DCM Murphy had been number one and was on the shield. The C & R training covered use of the shield. The DCM had asked **D2054** several times (not sure how many) to leave the room for the Tascor crew. Mr **D2054** had said no and he had heard this. The DCM instructed the team to enter the room and take control of **D2054**. DCM Murphy had used the shield between himself and **D2054** (upper body) to prevent Mr **D2054** causing himself or team injuries and in case he still had any blades. DCM Murphy had not seen this touch **D2054**'s head. He had not seen any weapons. The red item he had removed from **D2054** was a mobile phone.

DCM Murphy had discarded the shield (handed it to a supporting office who would take this from the room). DCM Murphy had taken hold of Mr **D2054**'s head. He had his fingers under his chin and on the back of his head to stop him banging this on the floor. He said "at no time did the gentleman's head touch the floor." His hand had been between the floor and

D2054's head. **D2054** had "gone rigid" and resisted officers and had been assisted to the floor by the team.

Given the size of DCM Murphy and DCM Shadbolt and the restricted area they had swapped positions. His report had been incorrect when he said that he had assisted DCO Martin because he had assisted DCM Shadbolt. He had taken hold of the left arm and DCM Shadbolt had taken his head.

The head officer would have sat **D2054** up. He would not have used his arm as a lever. The head officer would have lifted him up.

DCM Murphy had taken control of **D2054**'s left arm and had placed this in the back hammer rest position in **D2054**'s small of his back so that he could present **D2054**'s wrist so that the handcuff could be applied. **D2054** kept shouting "Jesus, where are you Jesus" and was never quiet. He was always conscious. DCM Murphy had not seen any blood. If there had been then healthcare would have stopped the use of force.

They assisted **D2054** to departures and **D2054** continued to shout and was none compliant (digging his heels in and trying to stop walking). Whilst stood waiting to enter reception the officer on the other arm was grimacing and someone wiped his face. DCM Murphy said that they did sweat in PPE as it was very hot wearing this, especially with the helmets.

The delay at the door had been waiting for Tascor to take control. They handed **D2054** to Tascor and stood back.

The date on the use of force report was incorrect and would have been a template he had not changed. It should have been 28 June and not 17 May 2017.

The debrief would cover any injuries and concerns. This had taken place but he could not remember how long afterwards.

D2054 had not complained of his arm bleeding or his hurting his head.

In response to the complaint allegations, DCM Murphy said that officers had not rushed him. He had shouted no and that was why the team had entered the room. **D2054** was given opportunity to walk himself. Mr **D2054** had not hit his head when taken to the floor, he was not unconscious (shouting Jesus all the time) and there was no blood at all at any time.

He had been happy with how the interview had been conducted. He asked for a copy of the interview notes to be sent via Karen Goulder as he had no works email.

Telephone Interview with DCO Jonathan Martin on 24 August 2017

Start: 10:00 hrs

End: 10:53 hrs

Present on the telephone:

Jonathan Martin, Detainee Custody Officer, Brook House IRC

Helen Wilkinson, Investigating Officer, Professional Standards Unit

The briefing document was covered. DCO Martin consented to the interview being recorded and that he was happy to proceed without a trade union representative or work place colleague. He had sight of his use of force report and was told that he could refer to this. He had seen his letter and the extract of the complaint.

DCO Martin had been a DCO since January 2015 and always based at Brook House IRC. He had advanced C & R as well as the usual C & R refresher. He had been in ticket on 28 June 2017.

He said that he had not had contact with [D2054] until he was outside his room in full PPE. He had been asked to stay on that night to assist with the charter. He had formed a team with three colleagues and at 11:00 hrs he had gone to Eden wing (room 7). [D2054] had been on constant watch because of an earlier self harm attempt when he had cut his arm with a razor blade because [D2054] had not wanted to be removed. DCO Martin had been told this at the briefing that was also on BWV.

DCM Aldis had opened the door and asked [D2054] several times (3-5 times) if he would walk down and speak to the Tascor escorts. DCO Martin had a helmet on and could not hear the response.

When he did not leave the room, DCO Martin was told by DCM Aldis to go into the room and use force to move [D2054] for his removal. He had been the number two officer (arm) and he restrained the left arm by taking control of the wrist to isolate the arm. The shield was large and made contact with [D2054]. It was used on the body.

DCO Martin had taken control of [D2054]'s arm as they were at either side of the shield. He could not remember if they had assisted [D2054] off the bed or if [D2054] had wriggled off the bed onto the floor. Mr [D2054] had been shouting and he had moving his body to fight with the officers. They ended up on the ground and [D2054] was on his back. DCMs Murphy or Shadbolt would have controlled [D2054]'s head as he went to the floor. He had not seen or heard [D2054] bang his head on the floor or hear [D2054] yelp. [D2054] had not been unconscious at any time. He was shouting all the time. DCO Martin had tried to apply a final lock (goose, cocking the hand). He explained that this Home Office technique was an officer be near the detainee's shoulder and would put the detainee's elbow between their knees. One hand would be on the elbow and the hand would be "cocked like a rooster's neck" (wrist flexion) and the

officer's hand would go under this. DCO Martin had struggled to get his hand under as Mr **D2054**'s was quite short and **D2054** was strong for such a small man and had been resisting. DCO Martin could feel this in Mr **D2054**'s arm.

DCO Martin had assisted **D2054** up and placed **D2054**'s hand in the small of his back (back hammer position). He was in a final lock (left hand on bicep and right hand on **D2054**'s hand with his thumb and fore finger wrapped around **D2054**'s thumb and fore finger) in the small of **D2054**'s back, considering the pressure on the shoulder.

D2054 was placed in handcuffs. **D2054** had been naked and DCO Andy Simmons (not in PPE) had entered and covered his dignity with a towel. Holding this all the way to reception. **D2054** was under control with officers on his head, arms and legs. He was assisted to stand up. DCO Martin said he would have been sat on one knee and then one foot with one arm under **D2054**'s armpit and one on the elbow. He would not lift in final lock as this could break the wrist.

D2054 had been shouting "Jesus and Jesus help me" all the way on the way to reception. DCO Martin was holding **D2054** with one hand under **D2054**'s armpit and the other on his elbow or in the final lock position still (finger and thumb hold). Even though **D2054** had the handcuffs on, DCO Martin said that this final lock hold (not tight) had been the way that he had been taught in DCO training in 2014. **D2054** had been almost lifted down the hallway. **D2054** had been "very distraught" throughout the use of force shouting "Jesus." DCO Martin said that he did not like using force on anyone but was required to do so as part of his job.

Whilst stood at the door, the BWV had shown him grimacing his face and an officer wipe his face. DCO Martin said that he sweat a lot. With PPE and the helmet it would not take a lot to make him sweat. He may have asked someone to wipe his eyes as the sweat was going in his eyes and that was why he had his eyes screwed up.

D2054 was then handed over to Tascor. Healthcare had been present throughout but DCO Martin had been focused on his role. They had not entered the room or had any concerns about any medical condition, given they had not stopped the use of force and could have done if they had any medical concerns.

He had not completed the body drawing for his use of force report. This could have been because he had included a digital signature. DCO Martin said that he may have been mistaken about the arm he had control of. Whichever arm it was, he had hold of the same arm throughout. DCO Martin said that there had been no blood from **D2054** or on officers at any time. Mr **D2054** had not said that he arm was hurting or bleeding. If he had then DCO Martin would have changed his hold. **D2054** had not said that his head was hurting.

DCO Martin said that there was no formal debrief. They were just asked if everyone was ok. It had not been captured on BWV. He had had one hot debrief (bitten) but no cold debrief in BH.

In response to the allegations, DCO Martin said that officers had not rushed in, **D2054** had been asked several times to come out. He had the opportunity to leave 3-5 times. It was a legal removal. DCO Martin said that he had not seen or heard **D2054** hit the floor and was focused on his arm. **D2054** had not been unconscious given how he was tensing his arm and struggling. He was not limp and was shouting and screaming throughout. DCO Martin said that there was no blood from any cuts. He had not seen a spot of blood on the floor, towel or on him or other officers.

DCO Martin said the force used was not excessive and appreciated that it could be scary for someone. He was doing his job. He had no concerns with the use of force used by his colleagues and the use of force had been on camera.

He had been happy with how the interview was conducted. He asked for a copy of the interview notes to be sent to Karen Goulder for her to forward to him.