



Use of Force – DCF 2

DC RULE 41

The date on which force was used 27/05/2017

Log Number 134/17.

Time Use of Force Commenced 21:32 hrs Time Use of Force Completed 21:47 hrs

Detainees' details

Surname	D1914
Forename(s)	
Nationality	ROMANIAN
Port Ref	C1346228
CID Ref	11382233

Were ratchet handcuffs used?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
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The time that ratchet handcuffs were applied?	21:40
The time that ratchet handcuffs were removed?	21:46

Hand held camcorder used?	<input checked="" type="radio"/> Yes	<input type="radio"/> No
Body worn camera used?	<input checked="" type="radio"/> Yes	<input type="radio"/> No

FOOTAGE DOWNLOADED.

Reason for force being used

Tick

PS	Prevent Self Harm	<input checked="" type="checkbox"/>	Force used, was it?	<input checked="" type="radio"/> Planned	<input type="radio"/> Unplanned
MG	Maintain Good Order and Discipline	<input checked="" type="checkbox"/>	Did a member of healthcare attend to the detainee	<input checked="" type="radio"/> During incident	<input type="radio"/> After incident
PY	Protect Yourself	<input type="checkbox"/>	Is the detainee on ACDT / PEEP / Raised Concerns / other? Specify ()	ACDT	
PA	Protect a Third Party	<input type="checkbox"/>	Room Clearance and certification completed?	<input type="radio"/> Yes	<input type="radio"/> No
PD	Prevent Damage to Center Property	<input type="checkbox"/>	Location of incident?	C/O11 - TO - E/007	
PE	Prevent Escape	<input type="checkbox"/>	Detainee relocated too?	E/007	

	Time Informed	Your Name / Position	Name of Person that you Contacted?
Duty Director Informed	22:00	S. LOUGHTON	S. SKITT
Home Office informed	2200	S. LOUGHTON	R. GIBSON
Healthcare Informed	2200	S. LOUGHTON	JACKIE COLBARN
IMB Informed	2200	N. LONDON	EDDIE OMORAKA
Care Team Informed	2200	N. LONDON	ZEE SHAN

Search Conducted on arrival to unit by: (Name / Position) S. DIX (FULL SEARCH)

New Location of the detainees PROPERTY?

Reception

**USE OF FORCE REPORT FORM – DCF 02**

TO BE COMPLETED BY THE SUPERVISING OFFICER IN CHARGE AT THE SCENE OF THE INCIDENT

LOCAL REFERENCE NUMBER:

ESTABLISHMENT: BROOK HOUSE IRC

INCIDENT DETAILS

Date: 27/05/2017

Time: 21:30

DETAINEE DETAILS

CID Number: 11382233	Surname D1914	Forename(s) D1914
Gender: Male <input checked="" type="checkbox"/> Female <input type="checkbox"/> Transgender <input type="checkbox"/> Nationality: POLAND	The Use of Force was: Planned <input checked="" type="checkbox"/> Unplanned	Age group (please circle): Adult (age ...44.....) Minor (age)

STAFF INVOLVED

List below the grade / work area (i.e. Care & Separation Unit) and names of all the officers involved in the use of force incident

Grade:	Surname:	Forename(s):	Work Area:
DCO	WRAGG	Alice	Reception
DCO	PISCALI	Yan	Residential
DCO	WEBB	Dave	Residential
DCO	TULLEY	Callum	Activities
DCO	BROMLEY	Ryan	Residential
DCO	EDON	Jonathan	Residential
DCM	DIX	Steve	DCM
DCO	LAKE	Dan	Activities



LOCATION OF INCIDENT			
Wing		Education/Multi-Faith Area	
Own Room	X	Visits	
Care & Separation Unit		Association Area (please specify below)	
Other (please specify)			
.....			
.....			
.....			

EVENTS LEADING UP TO THE INCIDENT		THE CIRCUMSTANCES WHY FORCE WAS USED	
None known		Preventing injury to oneself	
Searches (Room/A/B/Full)		Preventing self-harm	X
IEP down grade		Preventing injury to a third party	
Failure to comply with removal	X	Preventing damage to property	
Fight with another detainee		Preventing an escape / abscond	
Serving of removal directions (RDs)		Other (please specify below)	
Assault on a member of staff		
Assault on another detainee		
Non-compliance	X	
Home Office interview		
Court appearance		
Video-link hearing		
Moving to another centre/unit/prison		
Others (please specify below)		
.....		
.....		
.....		
.....		
TYPE OF FORCE USED			
Verbal reasoning used to de-escalate the situation initially and/or during the incident?			
Yes X No <input type="checkbox"/>			
(Please expand with details in Annex A)			

Were Personal Safety Techniques Used?	<input type="checkbox"/>	Were C&R Techniques Used?	X	Were MMPR Techniques Used?	<input type="checkbox"/>
Defensive Options	<input type="checkbox"/>	Guiding Hold		Figure Four Arm Hold	<input type="checkbox"/>
Push	<input type="checkbox"/>	Isolating the Arm	X	Head Support	X
Knee Strike	<input type="checkbox"/>	Arm Hold/Lock	X	Mandibular Angle	<input type="checkbox"/>
Kick	<input type="checkbox"/>	Wrist Flexion/Lock	X	Detainee – Prone	<input type="checkbox"/>
Punch	<input type="checkbox"/>	Thumb Flexion/Lock	<input type="checkbox"/>	Detainee – Supine	<input type="checkbox"/>
		Inverted Wrist Hold		Detainee – Seated	<input type="checkbox"/>



				Restraint Recovery	<input type="checkbox"/>
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Were handcuffs applied?	Yes X	No
The time applied:...21:40 Approx The time removed: 21:46 Approx The duration applied:...6 minutes Name of the person(s) checking the application and that the handcuffs were double locked: S Dix Name of the Supervising Officer: ...S Dix (Provide reasoning in the Annex A)		
Was a Baton drawn?	Yes <input type="checkbox"/>	No X
If so, was it used?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
The Use of Force was authorised by (Supervising Officer): Name..... Steve Dix Grade..... DCM Reason(s... To facilitate Escorted Removal Directions		

RELOCATION	
The detainee was relocated to:	Type of relocation required:
Own Room	Compliant
Care & Separation Unit	X Passively Resistant X
Special Accommodation	Actively Resistant
Other (please specify below)	X Other (please specify below)
Eden Wing 007
If relocated to Special Accommodation, complete the relevant form. Authorised by:..... Grade:.....	

**INJURIES SUSTAINED & HEALTHCARE INVOLVEMENT**

Was a member of Healthcare present throughout the incident (Doctor, Registered Nurse or Healthcare)? Yes ☒ No ☐

Name... E OMORAKA

Grade... RMN

An F213 or equivalent form (private sector) was completed by:

Name... E OMORAKA

Grade... RMN

Did the detainee sustain any injuries at the time? (If so, please provide details on the F213 or equivalent form) Yes ☒ No ☐

Did the detainee require outside hospitalisation at the time? Yes ☐ No ☒

Name of Healthcare member..... R Little

Grade..... RGN

Did a member of staff require medical attention at the time? Yes ☐ No ☒

Name.....

Grade.....

Treatment was provided:

By the centres healthcare staff (internally) ☐ By an outside hospital (externally) ☐

NOTE:

AN F213 (or equivalent form) MUST BE COMPLETED ON ALL DETAINEES, EVEN IF THEY APPEAR NOT TO HAVE SUSTAINED ANY INJURIES. A COPY OF THE F213 MUST BE ATTACHED TO THIS FORM. THIS FORM SHOULD THEN BE PLACED IN THE USE OF FORCE INCIDENT FILE. ANY INJURIES SUSTAINED BY STAFF MUST BE ENTERED IN THE ACCIDENT BOOK.

**EVIDENCE**

	Yes	No
Was the clothing bagged and tagged?	<input type="checkbox"/>	X
Were any photographs taken?	<input type="checkbox"/>	X
Was the incident video recorded?	X	
Was a Body Worn Camera Used?	X	

CERTIFICATION: (By Officer completing form)

I confirm that the details above are correct and that I have completed Annex A "Use of Force – Officer's Statement."

SIGNATURE

Signed.....

Name S Dix

Date...27/05/2017

*This form must now be passed to the Duty Operations Manager on duty.

ORDERLY OFFICER / DUTY OPERATIONS MANAGER (to complete):

I confirm that I have:

Contacted security to log the incident in the Use Of Force log,
Passed the reports to security to store the original copy securely,

Informed the Duty Governor / Duty Director. Name....S Skitt

Informed the Home Office Manager. Name..R Gibson

Informed the IMB. NameJ Colbran

Informed the Care Team. NameZ Qayum

I also confirm that all officers involved in the Use of Force have completed Annex A "Use of Force – Officer's Statement."

SIGNATURE

Signed.....

Name.... S Dix

Grade...DCM

Date...27/05/2017.

Briefing Script

Introduction:

I am S Dix

It is 27/05/2017

The current situation is that detainee: **D1914**

Is currently in: C 011

And is: Has Escorted RD's 28/05/2017 to Romania and is refusing to go and refusing to relocate onto Eden Wing. The estimated pick up time is 09:00 which is during the regime time, hence why the move needs to be done before

Despite extensive negotiations by: S Dix / S Sayers

It has not been possible to resolve the situation peacefully.

I have contacted the Duty Director: C Dance Jones / S Skitt and a full search has also been authorised

And it has been decided that a planned intervention is the only course of action left.

I have checked the detainee's **D1914** records and his history is as follows:

- Theft
- Attempted Murder
- Harassment
- Threatening / Abusive Behaviour

The Plan:

Entry will be facilitated by myself .

The Team will gain control of detainee **D1914** as quickly and safely as possible,

Once under control handcuffs will be applied by: Officer A Powell

The relocation point is: The Care and Separation Unit

The route is:

Is to come out of C 011 out of C Wing along the ground floor central corridor to Eden Wing and the Care and Separation unit

The Brief:

The plan is to go to C 011 and speak to **D1914** this is a disabled room and he is currently on the right bed and the view will be obstructed by the shower curtains. **D1914** also has a room mate a **D2401** who is a paid worker.

Due to **D1914** refusal and previous self harm the door will be opened the first team will go in and stand by **D1914** bed with myself behind talking to **D1914**

At this point the second team will instruct **D2401** to come out of the room supervised by DCM S Loughton / S Farrell

D2401 alerted us to the fact **D1914** has brought some Spice and his plan is to smoke it so that he dies or ends up in hospital to stop his removal directions another reason why this move cannot wait. **D2401** has been spoken to and he wants nothing to do with these issues and has stated he will not become involved, however we have 2 teams in PPE just in case one for Mr **D2401** and one for **D1914**

D1914 has a significant history of previous self harm. He also has medical issues to do with his heart. He has previously had a heart attack and a double heart bypass in November, he also has medical letters to say he is due another operation in August.

We have liaised closely with our onsite Healthcare and in particular Dr Hussain who has stated and written a letter

confirming **D1914** is fit to be detained, fit to fly and fit to have force used on him.

We will have Healthcare present throughout and also the medical evac chair, this will purely be for if **D1914** becomes complaint and requires medical assistance by way of the chair to Eden Wing.

D1914 will have a full search in CSU this will be done compliantly, however if not and he is unwilling to comply then this will also be done under force. Once completed and sterile then he will be placed into Eden Wing 007.

A full search has been authorised by: S Skitt

I have selected a team of officers who are currently certificated in the Use of Force to carry out the intervention and I have identified them for their roles. They are:

Number One Officer: DCO I Piscalli

Number Two Officer: DCO D Webb

Number Three Officer: DCO C Tulley

Support Officer(s) DCO A Wragg

Support Officer(s) DCO S Sayers

Support Officer(s) DCO J Edon

Support Officer(s) DCO R Bromley

Support Officer(s) DCO D Lake

They will now introduce themselves to the camera stating their rank, name and that they have no injuries and are currently certificated in the use of force.

The camera operator for this intervention is: ~~SD S Loughton~~ W Riwa

(Camera to film selected officers at this point)

Healthcare, have been informed of the planned intervention and have stated there are no medical concerns.

The healthcare official attending the intervention will now confirm to the camera their name, qualification and any medical concerns relevant to the detainee.

(Camera to film the healthcare at this point)

Questions:

Does anyone present have anything they wish to add to this briefing?

Does anyone have any questions regarding this intervention?

Does everyone present understand what is required of them with regards to this intervention?

()

That concludes this briefing.



Gatwick Immigration Removal Centre
Perimeter Road South
London Gatwick Airport
Gatwick
W Sussex
RH6 0PQ

27 May 2017

Dear G4S and Home Office

RE:

D1914

25 May 1973

The above detainee is fit to fly and fit for detention. He will need a medical escort due to the nature of his medical condition. I am happy for reasonable force to be used (C and R) in order to facilitate the removal.

Yours Sincerely

SIGNATURE

Dr Husein Oozeerally



ANNEX A USE OF FORCE

Local
Reference No.

STAFF STATEMENT

ESTABLISHMENT:... Brook House IRC

DATE... 27/05/2017

DETAINEE

NAME... **D1914**

CID NUMBER... 11382233

OFFICER

NAME S Dix

GRADE..... DCM

The use of force must only be used when it is:

Reasonable in the circumstance

An absolute necessity

No more force than necessary

Proportionate to the seriousness of the situation

Your statement must set out what happened; give details of your part in the use of force, any restraints/locks you applied and how the incident was finally resolved. It must give details of who authorised the use of force, as well as attempts made to de-escalate throughout the incident.

Your statement must be completed independently of other staff involved in the incident.

If C&R or MPR was used, please tick your primary role:

Supervising Officer ☒

Head / Number 1 ☐

Right arm

Left arm ☐

Leg Officer ☐

Have you been C&R basic refreshed in the last 12 months?

Yes X

No ☐



Have you attended a MMPR refresher in the last 6 months?

Yes ☐

No ☒ X

The Type of Force Used:

Were Personal Safety Techniques Used?	<input type="checkbox"/>	Were C&R Techniques Used?	<input checked="" type="checkbox"/> X	Were MMPR Techniques Used?	<input type="checkbox"/>
Defensive Options	<input type="checkbox"/>	Guiding Hold	<input checked="" type="checkbox"/> X	Figure Four Arm Hold	<input type="checkbox"/>
Push	<input type="checkbox"/>	Isolating the Arm	<input checked="" type="checkbox"/> X	Head Support	<input checked="" type="checkbox"/> X
Knee Strike	<input type="checkbox"/>	Arm Hold/Lock	<input checked="" type="checkbox"/> X	Mandibular Angle	<input type="checkbox"/>
Kick	<input type="checkbox"/>	Wrist Flexion/Lock	<input checked="" type="checkbox"/> X	Detainee – Prone	<input type="checkbox"/>
Punch	<input type="checkbox"/>	Thumb Flexion/Lock	<input type="checkbox"/>	Detainee – Supine	<input type="checkbox"/>
		Inverted Wrist Hold		Detainee – Seated	<input type="checkbox"/>
				Restraint Recovery	<input type="checkbox"/>
Were any additional restraints used?		<input checked="" type="checkbox"/> X	Who authorised their use?		
Hand Cuffs		<input checked="" type="checkbox"/> X			
Baton		<input type="checkbox"/>			

Please provide as much detail as possible below, including:

Before the incident (i.e. what led to the incident, any de-escalation techniques used), during the incident (i.e. what types of force were employed and why), and after the incident (i.e. where the detainee(s) were relocated to and any injuries sustained).

I Detention Custody Manager { DCM } S Dix was working at Brook House IRC on Saturday 27/05/2017 when a planned intervention was required on **D1914** 11382233 due to his non-compliance due to co-operate with his Escorted Removal Directions 28/05/2017. Despite negotiations by myself and DCO S Sayers during the daytime **D1914** refused to comply and walk compliantly, please see attached briefing script for further details.

The plan was to go to **D1914** room C Wing 011 and one team of officers and Personal Protective Equipment {PPE} went in to stand in front of **D1914** and the second team of officers went in to secure his room mate **D2401**

The door was opened and this is what happened **D2401** left the room compliantly and as this was going on **D1914** held his chest and laid on his side on the bed, due to his ongoing medical concerns I requested healthcare to check him over they did this and were happy with his medical observations and for the removal to continue. The removal continued and **D1914** stood off the bed and then dropped his body weight as he went to the floor the officers supported him, but he was refusing to stand up again when officers tried to assist him as well as verbally refusing to comply.

It was explained to him if he continued this way then handcuffs would be applied and potentially he would be carried down to Eden Wing. **D1914** refused to engage or comply so I DCM S Dix made the decision for handcuffs to be applied. At this point Mr **D1914** became resistant and non-compliant and resisted against officers, once officers gained control of **D1914** handcuffs were applied by DCO A Wrang and checked and secured by myself.



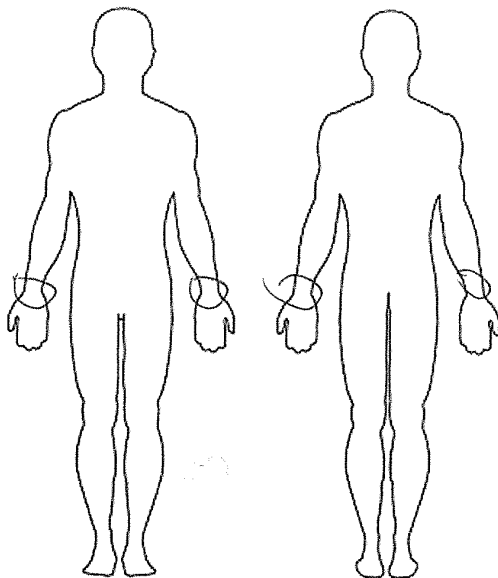
Once they were secured [D1914] stated he would comply so he stood up and was assisted by officers to his feet and left compliantly and walked compliantly to Eden Wing. Once we arrived to Eden wing he walked into room 007 where the handcuffs were removed by myself. I DCM S Dix took the left handcuff off followed by his right one.

As this was done [D1914] was aware he would need to comply with a full search to which he agreed. [D1914] removed his flip flops which were searched, he then removed his shorts and boxers which were searched and he placed his boxers back on and nothing was found. Healthcare then checked him over following the removal and stated they were happy, officers left the room and he was placed onto DC Rule 40 due to his non-compliance and to facilitate his removal directions. An ACDT was also opened and he was placed onto a Constant Supervision due to his previous self-harm history.

This concludes my report.



Please draw a circle around the part of the body that you held, supported, controlled or applied pressure to during the incident.



Front of body

Back of body

CERTIFICATION: (By Officer completing form)

I confirm that the details above are correct

SIGNATURE

Signed.....

Name..... *S.D.P.*

(BLOCK CAPITALS)

Date..... *27/5/17*

*This form must now be passed to the Supervising Officer.



ANNEX A USE OF FORCE

Local
Reference No.

STAFF STATEMENT

ESTABLISHMENT Brook House IRC

DATE

DETAINEE : **D1914**

CID NUMBER : 11382233

NAME:

GRADE: DCO Alice Wragg

The use of force must only be used when it is:

Reasonable in the circumstance**An absolute necessity****No more force than necessary****Proportionate to the seriousness of the situation**

Your statement must set out what happened; give details of your part in the use of force, Any restraints/locks you applied and how the incident was finally resolved. It must give details of who authorised the use of force, as well as attempts made to de-escalate Throughout the incident.

Your statement must be completed independently of other staff involved in the incident.

If C&R or MMPR was used, please tick your primary role:

Supervising Officer

Head / Number ☐

Right arm

Left arm

Leg Officer

Have you been C&R basic refreshed in the last 12 months?

Yes X No ☐

Have you been attended an MMPR refresher in the last 6

Yes ☐ No

The Type of Force Used:

Were Personal Safety Techniques Used?	<input type="checkbox"/>	Were C&R Techniques Used?	x	Were MMPR Techniques Used?	<input type="checkbox"/>
Defensive Options	<input type="checkbox"/>	Guiding Hold	<input type="checkbox"/>	Figure Four Arm Hold	
Push	<input type="checkbox"/>	Isolating the Arm	<input type="checkbox"/>	Head Support	<input type="checkbox"/>

OFFICIAL – SENSITIVE



Please draw a circle around the part of the body that you held, supported, controlled or applied pressure to during the incident.



ANNEX A USE OF FORCE

Local
Reference No.

STAFF STATEMENT

ESTABLISHMENT

DATE 27/05/2017

DETAINEE : **D1914**

CID NUMBER : 11382233

OFFICER

NAME: Dave Webb

GRADE: Detainee Custody Officer (DCO)

The use of force must only be used when it is:

Reasonable in the circumstance

An absolute necessity

No more force than necessary

Proportionate to the seriousness of the situation

Your statement must set out what happened; give details of your part in the use of force, Any restraints/locks you applied and how the incident was finally resolved. It must give details of who authorised the use of force, as well as attempts made to de-escalate Throughout the incident.

Your statement must be completed independently of other staff involved in the incident.

If C&R or MMPR was used, please tick your primary role:

Supervising Officer

Head / Number

Right arm

Left arm X

Leg Officer

Have you been C&R basic refreshed in the last 12 months?

Yes

Have you been attended an MMPR refresher in the last 6

No



The Type of Force Used:

Were Personal Safety Techniques Used?	<input type="checkbox"/>	Were C&R Techniques Used?	X	Were MMPR Techniques Used?	<input type="checkbox"/>
Defensive Options	<input type="checkbox"/>	Guiding Hold	X	Figure Four Arm Hold	
Push	<input type="checkbox"/>	Isolating the Arm	<input type="checkbox"/>	Head Support	<input type="checkbox"/>
Knee Strike	<input type="checkbox"/>	Arm Hold/Lock	X	Mandibular Angle	<input type="checkbox"/>
Kick	<input type="checkbox"/>	Wrist Flexion/Lock		Detainee – Prone	<input type="checkbox"/>
Punch	<input type="checkbox"/>	Thumb Flexion/Lock		Detainee – Supine	<input type="checkbox"/>
		Inverted Wrist Hold		Detainee – Seated	<input type="checkbox"/>
				Restraint Recovery	<input type="checkbox"/>
Were any additional restraints used?		Who authorised their use?			
Hand Cuffs		Detainee Custody Manager (DCM) Steve Dix			
Baton					

Please provide as much detail as possible below, including:

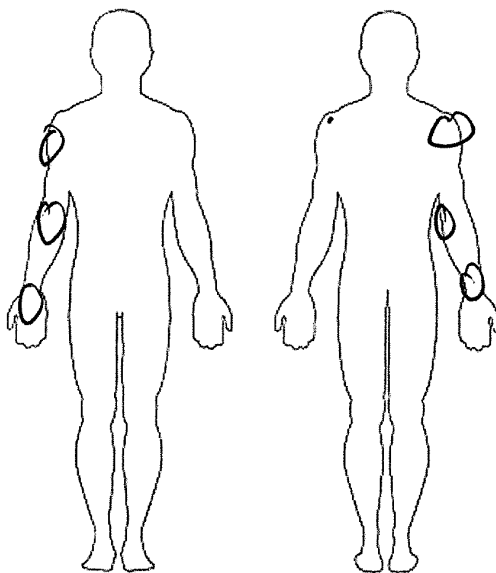
Before the incident (i.e. what led to the incident, any de-escalation techniques used), during the incident (i.e. what types of force were employed and why), and after the incident (i.e. where the detainee(s) were relocated to and any injuries sustained).

On the 27th May 2017 I Dco Dave Webb Whilst working at Brook House IRC on Eden Wing was contacted by Dcm Steve Loughton via the telephone and informed that I would be taking part in a planned intervention that involved moving Detainee **D1914** from Charlie wing room C011 to Eden Wing Room E007 I was asked to get my PPE and meet in the staff room for 20:50hrs for the briefing prior to the intervention. On arrival at the staff when the team and healthcare representatives had arrived Dcm Steve Dix gave the briefing stating that two teams where to enter room C011 and that Detainee **D1914** was in the right hand bed and that the team that I was part of was to enter the room once Dcm Dix had opened the door and we were to move to a position in front of the bed blocking Detainee **D1914** exit from the room whilst a second team entered directly behind us to remove Detainee **D1914** room mate from the left hand bed leaving my team to escort **D1914** from his room and relocate him into room E007 where we were told that he would be having a full search due to intelligence received about Detainee **D1914**. We were also informed that **D1914** had history of a previous heart attack and had undergone a heart operation in the past we were also shown a signed letter from the Doctor that stated that **D1914** Was fit to fly and that C&R techniques could be used on the Detainee. When the briefing was completed we made our way to Charlie wing and formed up outside room C011 at approximately 21.15 hrs Dcm Dix opened the door and the teams entered the room as we stood in front of Detainee **D1914** who was sitting on his bed he placed his right arm to his chest and collapsed side ways onto the bed into the recovery position we immediately called in healthcare and they entered the room to examine the detainee as soon as they started communicating with him he became responsive and sat up at this point I held his left arm in a guiding hold holding his arm away from his chest so that the healthcare team could continue to examine him unimpeded by myself once healthcare confirmed that they were happy with us to carry on Dcm Dix tried to explained to **D1914** that we needed him to walk with us to Eden wing **D1914** became more agitated at this and started to become more volatile I then moved his arm into a final lock position and we tried to stand him up



as we did this [D1914] dropped his whole body weight to the floor and became more resistant after a short time of period of time Dcm Dix gave the order to use handcuffs due to the level of resistance from [D1914] as I moved his arm round into a loose back hammer so that the handcuffs could be applied the level of resistance from the detainee escalated and I moved his arm into a straight arm lock to maintain better control of his arm and the handcuffs were applied to his right wrist first then I repositioned his arm into a loose back hammer in the small of back straight into the handcuffs. Once the handcuffs were applied Dcm Dix continued to converse with [D1914] and deescalate the situation after a short period of time [D1914] had Deescalated enough that we could get him to his feet and we then escorted him out of the room and walked him of the wing through the sterile area and into Eden wing stopping in room E007 all the time supporting the detainee for his own safety as he was in handcuffs. As we walked [D1914] was continually shouting abuse at the officers and also racial abuse directed at the healthcare nurses. Once we were in room E007 I was replaced by Dco Edon and I took no further part in the C&R or in the searching of the Detainee. It is my honestly held belief that at the time that the use of force was necessary to move Detainee [D1914] to Eden wing reasonable amount of force proportionate to the level of aggression shown by the detainee and that no more force than necessary was used. This concludes my report.

**SIGNATURE**



Front of body

Back of body

CERTIFICATION: (By Officer completing form)

I confirm that the details above are correct

Signed.....

SIGNATURE

Name (BLOCK CAPITALS):...Dave Webb.....

Date...28/05/2017.....

*This form must now be passed to the Supervising Officer.



ANNEX A USE OF FORCE

Local
Reference No.

STAFF STATEMENT

ESTABLISHMENT: BROOKHOUSE IRC

DATE 27.5.17

DETAINEE

NAME

D1914

CID NUMBER 11382233

OFFICER

NAME YAN PASCHALI

GRADE PCO

The use of force must only be used when it is:

Reasonable in the circumstance

An absolute necessity

No more force than necessary

Proportionate to the seriousness of the situation

Your statement must set out what happened; give details of your part in the use of force, Any restraints/locks you applied and how the incident was finally resolved. It must give details of who authorised the use of force, as well as attempts made to de-escalate Throughout the incident.

Your statement must be completed independently of other staff involved in the incident.

If C&R or MMPR was used, please tick your primary role:

Supervising Officer ☐

Head / Number 1 ☐

Right arm ☐

Left arm ☒

Leg Officer ☐

Have you been C&R basic refreshed in the last 12 months?

Yes

Have you attended a MMPR refresher in the last 6 months?

No



The Type of Force Used:

Were Personal Safety Techniques Used?	<input type="checkbox"/>	Were C&R Techniques Used?	<input checked="" type="checkbox"/>	Were MMPR Techniques Used?	<input type="checkbox"/>
Defensive Options	<input type="checkbox"/>	Guiding Hold	<input checked="" type="checkbox"/>	Figure Four Arm Hold	<input type="checkbox"/>
Push	<input type="checkbox"/>	Isolating the Arm	<input type="checkbox"/>	Head Support	<input type="checkbox"/>
Knee Strike	<input type="checkbox"/>	Arm Hold/Lock	<input checked="" type="checkbox"/>	Mandibular Angle	<input type="checkbox"/>
Kick	<input type="checkbox"/>	Wrist Flexion/Lock	<input type="checkbox"/>	Detainee – Prone	<input type="checkbox"/>
Punch	<input type="checkbox"/>	Thumb Flexion/Lock	<input type="checkbox"/>	Detainee – Supine	<input type="checkbox"/>
		Inverted Wrist Hold	<input type="checkbox"/>	Detainee – Seated	<input type="checkbox"/>
				Restraint Recovery	<input type="checkbox"/>
Were any additional restraints used?			<input checked="" type="checkbox"/>	Who authorised their use? Dcm Dix	
Hand Cuffs			<input checked="" type="checkbox"/>		
Baton			<input type="checkbox"/>		

Please provide as much detail as possible below, including:

Before the incident (i.e. what led to the incident, any de-escalation techniques used), during the incident (i.e. what types of force were employed and why), and after the incident (i.e. where the detainee(s) were relocated to and any injuries sustained).

Sir, On the 27.5.17 at approx 21:15 I was part of a team of DCOs to facilitate the removal of detainee **D1914**. I was told that due to his violent history and the fact that he stated to managers he would obstruct and intended to fight staff this is why a team was put together. I was also told that detainee **D1914** had a history of heart problems, therefore health care was present to monitor his heart. Also a doctor had seen detainee **D1914** and wrote a letter to state he was fit and well and if C and R was needed it could be carried out.

On entering the room with the team detainee **D1914** was sitting on his bed, he was instructed to walk with us to E-wing. He then lay down

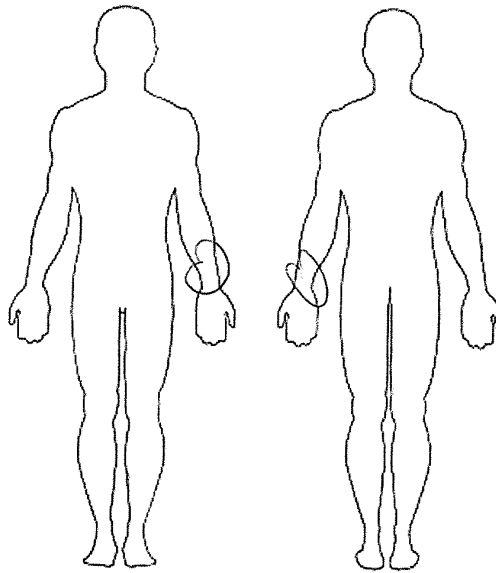


On his bed. Health care immediately checked his blood pressure and carried out checks. Health care told us he was fine. We once again explained to detainee **D1914** he had to walk to E-wing. He refused and sat on the floor. At this point I took control of his left arm, and placed him under restraint with the team. Hand cuffs were applied and detainee **D1914** walked to E-wing with guiding hold technique. Detainee **D1914** was verbally and racially abusive to all staff and the health care team.

On arrival to E-wing detainee **D1914** walked into room 007. I was then relieved by DCO Bromley and I left the room. Force was only used when necessary and no more force was used than necessary at all times. Only home office approved techniques were used. This concludes my report DCO Paschall.

**SIGNATURE**

Please draw a circle around the part of the body that you held, supported, controlled or applied pressure to during the incident.



Front of body

Back of body

CERTIFICATION: (By Officer completing form)

I confirm that the details above are correct

Signed

SIGNATURE

Name

YAN PASCHALI

(BLOCK CAPITALS)

Date. 27.5.17

*This form must now be passed to the Supervising Officer.



ANNEX A USE OF FORCE

Local
Reference No.

STAFF STATEMENT

ESTABLISHMENT: BROOKHOUSE IRC

DATE: 27.05.17

DETAINEE

NAME: **D1914**

CID NUMBER: 11382233

OFFICER

NAME: Jonathan Edon

GRADE: DCO

The use of force must only be used when it is:

Reasonable in the circumstance

An absolute necessity

No more force than necessary

Proportionate to the seriousness of the situation

Your statement must set out what happened; give details of your part in the use of force, any restraints/locks you applied and how the incident was finally resolved. It must give details of who authorised the use of force, as well as attempts made to de-escalate throughout the incident.

Your statement must be completed independently of other staff involved in the incident.

If C&R or MMPR was used, please tick your primary role:

Supervising Officer

Head / Number 1

Right arm ☐

Left arm

Leg Officer ☐

Have you been C&R basic refreshed in the last 12 months?

Yes x

No ☐

Have you attended a MMPR refresher in the last 6 months?

Yes ☐

No x



The Type of Force Used:

Were Personal Safety Techniques Used?	<input type="checkbox"/>	Were C&R Techniques Used?	<input type="checkbox"/>	Were MMPR Techniques Used?	<input type="checkbox"/>
Defensive Options <input type="text"/>	<input type="checkbox"/>	Guiding Hold	<input type="checkbox"/>	Figure Four Arm Hold	<input type="checkbox"/>
Push	<input type="checkbox"/>	Isolating the Arm	<input type="checkbox"/>	Head Support	<input type="checkbox"/>
Knee Strike	<input type="checkbox"/>	Arm Hold/Lock	<input type="checkbox"/>	Mandibular Angle	<input type="checkbox"/>
Kick	<input type="checkbox"/>	Wrist Flexion/Lock	<input type="checkbox"/>	Detainee – Prone	<input type="checkbox"/>
Punch	<input type="checkbox"/>	Thumb Flexion/Lock	<input type="checkbox"/>	Detainee – Supine	<input type="checkbox"/>
	<input type="checkbox"/>	Inverted Wrist Hold	<input type="checkbox"/>	Detainee – Seated	<input type="checkbox"/>
	<input type="checkbox"/>		<input type="checkbox"/>	Restraint Recovery	<input type="checkbox"/>
Were any additional restraints used?		Who authorised their use?			
Hand Cuffs					
Baton					
I					

Please provide as much detail as possible below, including:

Before the incident (i.e. what led to the incident, any de-escalation techniques used), during the incident (i.e. what types of force were employed and why), and after the incident

I

(i.e. where the detainee(s) were relocated to and any injuries sustained).

I Jonathan Edon work as a DCO (Detainee Custody Officer) at Brook House Gatwick Immigration Removal Centre, a position that I have held since January 2017.

On Saturday 27th May I was asked by Oscar 1 DCM Steve Loughton to be part of a control and Restraint team to assist in the relocation of Detainee **D1914** (CID: 11382233) from Charlie Wing room C011 to Echo Wing room E007 as he was due to be removed from Brook House the following day.

I was tasked on being part of the second of two teams along with DCO Sean Sayers, DCO Ryan Bromley and DCO Daniel Lake to ensure that Detainee **D1914** roommate Detainee **D2401** (CID: 12117070) did not get involved in any way and become an obstruction.

At approximately 2130hrs both teams entered room C011. Detainee **D2401** was compliant and was walked immediately by the second team to the Delta Wing office where here remained with us until Detainee **D1914** had been relocated to Echo Wing.

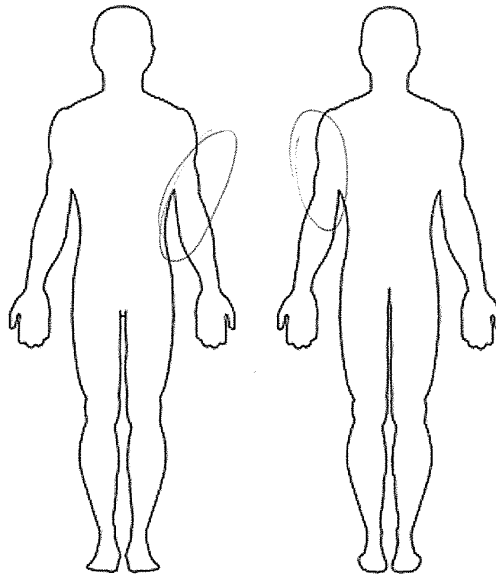
I was then asked to go to Echo Wing where I was instructed to enter room E007 with DCO Ryan Bromley whilst **D1914** handcuffs were being removed by DCM Steve Dix. During this time I supported **D1914** right arm while his handcuffs were being removed without issue.

On the removal of the cuffs **D1914** was given a full search with a towel being used to cover his lower half. His shorts were searched by myself and found to contain nothing. With the search complete DCM Dix, DCO Bromley and I exited the room.

This concludes my report



Please draw a circle around the part of the body that you held, supported, controlled or applied pressure to during the incident.



Front of body

Back of body

CERTIFICATION: (By Officer completing form)

I confirm that the details above are correct

SIGNATURE

Signed.....

Name..... JONATHAN EDON

(BLOCK CAPITALS)

Date..... 28.05.17

*This form must now be passed to the Supervising Officer.



ANNEX A USE OF FORCE

Local
Reference No.

STAFF STATEMENT

ESTABLISHMENT: BROOKHOUSE IRC

DATE: 28th May 2017DETAINEE : **D1914**

NAME CID NUMBER: 11382233

OFFICER: Callum Tulley

NAME: Callum Tulley

GRADE: DCO

The use of force must only be used when it is:

Reasonable in the circumstance**An absolute necessity****No more force than necessary****Proportionate to the seriousness of the situation**

Your statement must set out what happened; give details of your part in the use of force, any restraints/locks you applied and how the incident was finally resolved. It must give details of who authorised the use of force, as well as attempts made to de-escalate throughout the incident.

Your statement must be completed independently of other staff involved in the incident.

If C&R or MPR was used, please tick your primary role:

Supervising Officer ☐ NHead / Number 1 ☐ YRight arm ☐ NLeft arm ☐ NLeg Officer ☐ N

Have you been C&R basic refreshed in the last 12 months?

YES

Have you attended a MPR refresher in the last 6 months?

YES

The Type of Force Used:



Were Personal Safety Techniques Used?	N	Were C&R Techniques Used?	Y	Were MMPR Techniques Used?	N
Defensive Options	N	Guiding Hold	N	Figure Four Arm Hold	N
Push	N	Isolating the Arm	N	Head Support	Y
Knee Strike	N	Arm Hold/Lock	Y	Mandibular Angle	N
Kick	N	Wrist Flexion/Lock	N	Detainee – Prone	N
Punch	N	Thumb Flexion/Lock	N	Detainee – Supine	N
		Inverted Wrist Hold	N	Detainee – Seated	N
		Legs	N	Restraint Recovery	N
Were any additional restraints used?		N			
Hand Cuffs		Y			
Baton		N			

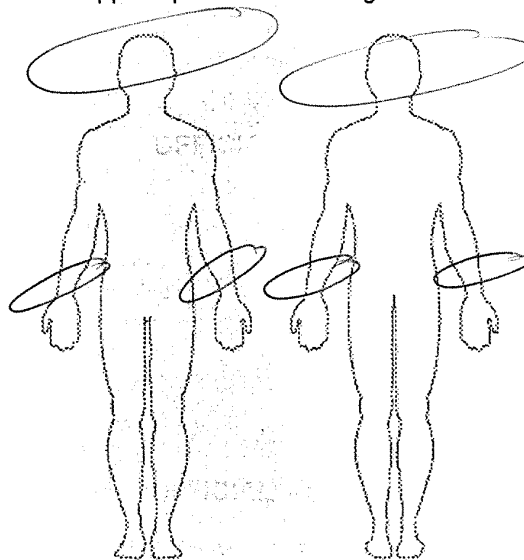
Please provide as much detail as possible below, including:

Before the incident (i.e. what led to the incident, any de-escalation techniques used), during the incident (i.e. what types of force were employed and why), and after the incident (i.e. where the detainee(s) were relocated to and any injuries sustained).

My name is Detainee Custody Officer (DCO) Callum Tulley and I have been working live at Brook House Immigration Removal Centre, Perimeter Road South, RH6 OPQ live since the 15th of June 2015.

At approximately 2100 I was told to get into my Control and Restraint (C&R) kit in the downstairs staff room. I was told during the briefing by Detainee Custody Manager (DCM) Steve Dix that DCO Paschali, DCO Dave Webb, DCO Alice Wragg and I would be ensuring that detainee **D1914** was moved from his room on C wing to E wing room 7. DCM Dix informed us of the detainees medical and criminal history during the brief. I was allocated as the shield officer, Paschali as an arm officer, Webb as an arm officer and Wragg as the handcuff officer. Following the briefing we made our way to the room of Mr **D1914**. Steve Dix opened the detainees room door and I immediately entered with the aforementioned team as per my instructions. **D1914** was sat on his bed and did not pose a risk to himself or the team. As a result I did not use the shield and engage the team in a restraint. **D1914** quickly held his chest and appeared limp, falling to his side. DCO Paschali and DCO Webb put the detainee in the recovery position. Healthcare then assessed him and deemed him fit to be moved to E wing. DCM Steve Dix gave the detainee numerous opportunities to walk compliantly to the room on E wing. He did not take these opportunities so DCO Webb and DCO Paschali tried to assist him. The detainee resisted and became non-compliant so we engaged in a restraint. I took control of the detainees head while DCO Webb and DCO Paschali took control of the detainees arms. Once the detainees hands were securely behind his back DCO Alice Wragg applied handcuffs to him. At this point I was able to release control of the detainees head. I only supported the detainees head when it was absolutely necessary, and when it was necessary I used the minimal amount of force required. In handcuffs the detainee began to comply. He was walked to E wing room 7. He entered compliantly. He then underwent a full search. I was instructed to leave the room before the full search took place. This concludes my report.

Please draw a circle around the part of the body that you held, supported, controlled or applied pressure to during the incident.



Front of body

Back of body

CERTIFICATION: (By Officer completing form)

I confirm that the details above are correct

Signed.....

SIGNATURE

Name..... CALLUM TULLEY

(BLOCK CAPITALS)

Date..... 28/05/2017

*This form must now be passed to the Supervising Officer.



REPORT OF INJURY TO DETAINEE

Geburk IRC

Section 1 – Detail of Detainee (To be completed by the Incident Reporting Officer)

Surname: D1914	First Names: D1914
CID Ref: 11382233	Date of Birth: DPA

Section 2 (a) Details of incident (To be completed by the Incident Reporting Officer)

Time and date of incident: 21.30 27/5/17
Place of incident: Clyde Wing 011
Incident reported by: S.O.V
Incident Witnessed by: Don Lake, John Eden
Nature of injury: No injury sustained

Section 2 (b) Brief report of circumstances in which injury was sustained (To be completed by the Incident Reporting Officer)

<p>Planned intervention on D1914 due to facilitate his escorted removal directions on 28/5/17. Hand cuffs were applied to relocate him onto Eden Wing. Healthcare were present at all times and carried out physical observations after intervention.</p>
--

Name (Block capitals): **Steve Heston**

Signature: **SIGNATURE**

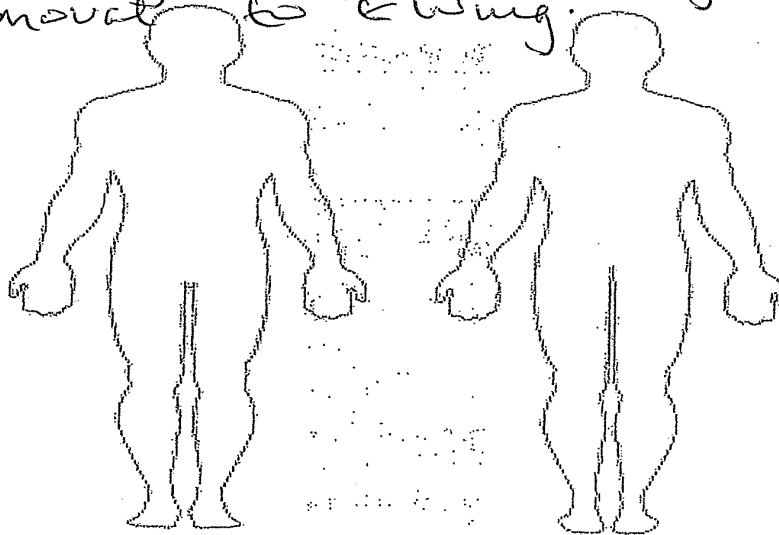
Date: **27/5/17**

Section 3 Healthcare's report (To be completed by medical staff)

Time and date of examination... 21:30 27/5/17

Report: BP 142/70 PR 85 SAT 96

Detainee have a removal directives he was moved from C wing (his room) to E wing. He was not cooperative initially and handcuff was safely applied. He later agreed to comply and walk escorted by officers to E wing. His handcuffs were removed and his body were assessed, there was no injuries sustained and no injuries reported by detainee during and after the removal to E wing.



Front of Body

Back of Body

Healthcare:

Medical Staff - Name:

(Block capitals)

SIGNATURE

Signature:

Date: