

ANNEX A

DETENTION SERVICES ORDER 9/2016 – DETENTION CENTRE RULE 35

Rule 35(1) report – a detainee whose health is likely to be injuriously affected by continued detention or the conditions of detention

Section 1: Detainee's details

Forename(s):	D643		
Surname:	D643		
Date of Birth:	DPA	HO reference number:	7187809
Immigration Removal Centre:	Gatwick Immigration Removal Centre		

Section 2: Detainee's authority to release medical information

The detainee named above has authorised the release of the medical information in this report in line with the guidance in DSO 1/2016 – The Protection, Use and Sharing of Medical Information Relating to People Detained Under Immigration Powers.

Section 3: Medical practitioner's report  
(Please read the notes at the end of this form)

I write in respect of the detainee named above in my capacity as an immigration removal centre medical practitioner. I hereby report that this detainee's health is likely to be injuriously affected by continued detention or the conditions of detention.

The above named detainee suffers from Post traumatic stress disorder. The cause of this disorder is the suffering he witnessed [ eg bodys being blown apart by land mines and other horrific scenes] when he was serving as a front line soldier in Basra ,Iraq in the years 2004-2005 and 2007-2008 . He was medically discharged from the army . He has deep rooted depression and flash backs of the trauma he witnessed .Through this trauma he experienced he indulged in alcohol and lost his wife and child .

Detention is bringing to home, all those tragic scenes. He states that at night, when every has been locked up in their rooms, he often hears other detainees banging on the doors and this reminds him of when he was on duty in Iraq. It makes him bundle himself up on the bed and cry. Also in detention there are refugees from Iraq and the sounds of their speech also brings to home the painful scenes in Iraq. He says he does not talk to anyone since he believes no one would understand, so he shuts himself in his room and waits there but this is no good for his PTSD

#### Section 4: Relevant clinical information

i) Why is the detainee's physical and/or mental health likely to be injuriously affected by continued detention or the conditions of detention? Please include as much detail as possible to aid in the consideration of this report. This must include an outline of the detainee's relevant physical and/or mental health condition(s).

Continued detention will only make him lose his confidence, as it is, he talks to no one, thinking they will not understand. He is constantly reminded of the traumatic scenes he witnessed in Iraq. It makes him anxious, agitated and depressed. On going detention would only perpetuate these problems.

ii) What treatment is the detainee receiving? Is specialist input being provided, either within the IRC or as a hospital outpatient or inpatient?

The detainee was seeing a psychologist in Devon for his PTSD – this was arranged by the prison authorities when he was serving a sentence in prison. This was found to be very helpful. Here in Brook House he is under the mental health team. He is also on powerful antipsychotic medication and antidepressants.

iii) In the case of mental health problems, has there been a detailed mental health assessment and, if so, carried out by whom and with what result/recommendation? If not, is an assessment scheduled to take place and, if so, when? Please attach the report of any assessment or give a brief overview. I will be referring to a psychiatrist who attends Brook house weekly.

## Section 5: Assessment

i) What impact is detention or the conditions of detention having (or likely to have) on the detainee's health and why?

It will make him depressed and anxious

ii) Can remedial action be taken to minimise the risks to the detainee's health whilst in detention? If so, what action and in what timeframe?

I would think that the best cure, would be to take him out this environment, by releasing him, so that he can return to his family. He would also need to continue with his antipsychotic medication and antidepressants and needs to have counselling

iii) If the risks to the detainee's health are not yet serious, are they assessed as likely to become so in a particular timeframe (ie in a matter of days or weeks, or only if detention continued for an appreciably longer period)?

The risks to the detainee's health is already very serious

iv) How would release from detention affect the detainee's health? What alternative care and/or treatment might be available in the community that is not available in detention?

Release would enable him to access combat psychotherapy, which is a form of psychotherapy which is very beneficial. He would also be able to see his daughter whom he misses and who is being affected by not seeing her father

v) Are there any special considerations that need to be taken into account if the detainee were to be released? Can the detainee travel independently to a release address?

The detainee is able to travel independently to a release address and there are no further special considerations that need to be taken except to bear in mind that he has deep rooted depression. He is not at risk of harming himself

**Other comments**

Even talking to me about his experiences was very difficult for him and I could easily see he was getting anxious and perturbed

**Section 6: Signature**

Signed: Signature  
Printed name: DR. PRITHA PUVANENDRAN  
Position and qualifications: MBLHB / DFFP / section 12 approval  
Date: 29 Jan 2017

If other healthcare professionals have supported you in examining the detainee and/or in producing this report their details must be given below:

Signed: .....  
Printed name: .....  
Position and qualifications: .....  
Date: .....

Signed: .....  
Printed name: .....  
Position and qualifications: .....  
Date: .....

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Position and qualifications: .....  
Date: .....