



Home Office

Removals, Enforcement and Detention Policy  
Immigration and Border Policy Directorate

K1352721

ANNEX A

DETENTION SERVICES ORDER 9/2016 – DETENTION CENTRE RULE 3

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):	D801		
Surname:			
Date of Birth:	DPA	HO reference number:	8253250
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.

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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.

#### 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).

I have assessed This patient and agree with the following assessment made by psychiatrist at Brook House.

He has a diagnosis of severe PTSD

Consultant psychiatrist Dr Belda notes are pasted below – Unedited from the computer records

23/3/17 History: Dr Belda

Examination: Seen with RMN. I have been informed that over the weekend he put a ligature around his neck, but the following day he did not want to talk about it. Today he said that it was due to believing that his medication had been stopped because it was not brought to him on time and he saw that the nurses had brought medication to others and not to him, but he denied any current intentions of self-harm.

D801 cannot bring himself to talk about the trauma that he was victim of although he is aware that trauma therapy is the only way forward.

He has been in contact with his solicitor but has not news about bail.

Diagnosis: PTSD

Plan: EMDR plus trauma therapy are evidence based interventions for the treatment of his condition but they cannot be applied at Brook House. He will continue to have regular sessions with RMN.

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30/3/17 History: Dr Belda

Examination: Seen at E Wing with RMN and Officer. No changes in clinical presentation from last week. Still feeling very anxious making very poor eye contact. Reporting no subjective changes. Today he could hardly spoke, maybe because there were 3 of us in the room.

He has been seen by Dr Iona Steen (no psychiatric qualifications) from Medical Justice who has stated that he suffers from a psychotic disorder. I disagree as this patient does not present with any psychotic symptoms. She has written an accurate risk assessment in terms of self-harm and suicide.

He has reported nocturnal nose bleeds and the officer has encouraged him to report it to staff if it happens again.

Diagnosis: Severe PTSD

Plan: D801 needs specific trauma therapy which cannot be provided within Brook House. I completed a section 48 transfer to Langley Green but when he was assessed by Langley Green staff deemed him to be unsuitable for them. He is not fit to be at Brook House

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

Specialist treatment cannot be provided at Brook House according to Psychiatrist assessment.

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

Yes an assessment has been done by the Psychiatrist at Brook House.

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### 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?

Continued deterioration in mental health without appropriate management.

- 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?

We have exhausted our resources from Brook House. Psychiatrist unable to offer any further help.

- 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)?

Possibly weeks.

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- 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?

Specialist PTSD treatment can be offered outside in the community.

- 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?

Not sure



Other comments:

At the time of this report the patient is not engaging fully with myself as he is withdrawn. He has engaged with me in the past and so this may be highlighting a deterioration. The psychiatric team assessment has been completed for this patient.

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Section 6: Signature

Signature

Signed:.....

Printed name:.....*Dr. Churchill*.....

Position and qualifications:  
.....

Date...03 Apr 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.....**FILE COPY**

Signed:.....

Printed name:.....

Position and qualifications:  
.....

Date.....

Signed:.....

Printed name:.....

Position and qualifications:  
.....

Date.....

NOTES – for the medical practitioner

Your report must be completed legibly, with all questions being completed fully. Consideration of the report will be delayed if Home Office officials have to return the report to seek clarification.

If the Home Office requests clarification of any point in this report, this must be provided promptly.

Once completed this report must be faxed to the Home Office IRC Team.

A signed copy of this report must be placed on the detainee's medical record and another signed copy provided to the detainee free of charge.

The Home Office response must on receipt be reviewed by the medical practitioner. If it is considered to unsatisfactorily address the original concerns, it must be escalated to the Home Office IRC Team.

NOTES – for the Home Office caseworker

You must consider and respond to this report in line with the guidance and instructions in:

Chapter 55b – Enforcement Instructions and Guidance – Adults at Risk in Immigration Detention

Detention Services Order (DSO) 9/2016 – Detention Centre Rule 35