

OFFICIAL – SENSITIVE

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Home Office

PREFACE TO INVESTIGATIONS

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Introduction

1. Brook House Immigration Removal Centre (IRC) was opened on 18 March 2009. It is a secure, purpose built centre at Gatwick Airport. Along with nearby Tinsley House, both centres are run by G4S Detention and Custody Services. In April 2017 an additional 60 beds being added, the capacity of the centre increased.
2. The focus of this introduction is to briefly outline the situation at Brook House IRC during the time of the Panorama undercover filming, April to July 2017, and to reflect any changes since. This is to give some context into the arrival of **D1538**, **D668**, **D191**, **D687**, **D1527** and **DX** and **D3434**, **D191** arrived on 12 February 2016 and **D1538** arrived on 1 June 2017. The majority of the above were initially resident on 'B' Wing, which is the induction wing for newly arrived detainees at the IRC.
3. The alleged incidents took place throughout the IRC. Specific allegations or complaints apart, the use of force day to day from April to July 2017 is detailed below and is based on statistics provided by G4S. These figures include any physical interventions by officers, not just the use of restraint.

Month	Planned	Unplanned	Handcuffs	Total
April 2017	4	26	5	30
May 2017	10	13	10	23
June	11	19	8	30
July 2017	3	17	3	20
Total	28	75	26	103

Detainee Accommodation Overview

4. Detainees are housed over five wings, A,C,D Wings are the main residential wings; B Wing is mainly used for induction and pre departure and E Wing for detainees requiring additional support. The Care and Separation Unit (CSU) used for Rule 40 and Rule 42 accommodation is an annex on this wing. The accommodation wings are over three floors housing over 120 men each. Access to the individual accommodation wings is restricted to wing residents but detainees are free to associate within the IRC's communal activity areas for example the gym and education rooms.

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5. Though the contract stipulates two DCOs per wing, G4S endeavour to have three DCOs per wing during the day, however it is recognised that normally it is two, with the third officer being redeployed on other duties.
6. B Wing is primarily the induction wing for new arrivals. Detainees are accommodated over two floors. On average detainees will remain here for 24 hours until they have been inducted into the IRC, and assessed for any risks. They will then move onto A,C or D Wings; or if assessed as vulnerable to E Wing where detainees are provided with additional support. B Wing is also used for the preparation of detainees for removal from the UK, although any detainee can be accommodated there if required.
7. Of note, is E Wing, which has a multi purpose function. It is the smallest wing situated on the ground floor under B Wing. There is a policy and criteria for detainees being accommodated here. E Wing is used to accommodate detainees who have been assessed as vulnerable or who have health issues. It has 20 beds over 13 bedrooms, which enable detainees to be more closely monitored; there is a higher ratio of staff on duty, typically three officers. The rooms include two single Safer Community Rooms, which have been modified to enable constant observations of detainees, and two Medical Rooms, which issued for detainees who on arrival may have a drug or alcohol dependency. Again any detainee maybe housed here if there are no other free beds on the other wings. E Wing is also used to accommodate detainees overnight where disruption is anticipated, for example when a removal is imminent and a detainee has a history of failed removals. Detainees on E wing have access to the same facilities as the other units, although individuals may be more closely monitored to manage any risks, for example, the use of razor blades is restricted and more closely monitored than on other wings.
8. The Care and Separation Unit (CSU used for Rule 40 and 42) adjoins, but is separate to E Wing. There are four rooms, which can be doubled up, and two rooms for single occupancy. Officers with the grade of Detainee Custody Managers and above can authorise the location of a detainee into CSU in response to a spontaneous incident, in all other cases relocation to CSU has to be authorised by the Home Office by an officer of at least SEO level. Any stay exceeding 24 hours must have been authorised by the Home Office and it cannot exceed 14 days. Detainees leaving CSU can be accommodated in E wing for 24-48 hours to allow for their integration back onto the residential wings
9. Outside of this area, all the rooms in Brook House IRC are similar. Rooms have two beds, a toilet and a small sink, a kettle and a television. Each detainee has a personal locker, a desk and chair. The rooms are all fitted with an emergency call bell to call for staff assistance. Sixty additional beds were added to A, C & D Wing, mainly in ground floor rooms with a couple on the first floor. This meant a third bed was added. The Shaw Review (published in 2016) and the HMIP in their inspection (November 2016) expressed reservations about the additional third beds but the changes were made to counter the loss of capacity across the detention estate from other centres closing.

10. All rooms have a retrofit toilet, which is shielded for privacy by a curved wall. The wall is specifically designed this way as it is an anti ligature measure; a sheet of velcroed material across the doorway to the toilet allows for privacy. G4S acknowledged that some curtains were previously missing but have since been replaced. There are complaints from detainees about general facilities and services. This is expanded on later, but during a review of these focusing on April, May and June, only one formal complaint about sharing a room with two other detainees was identified, there were two complaints about the toilets that related to cleanliness and the other related to a problem with the drains. Notwithstanding this, both a DCM and a HO member of staff acknowledged some detainees do not like sharing a room with two others, while others like to share with two friends. It is possible that sharing a room with two detainees, with a toilet in the room, can cause discomfort and be unpleasant although the Home Office accepts this as an operating norm.
11. Each wing has washing machines that can be used throughout the day by detainees although clean bedding should be provided by G4S. Each wing has showers available for use throughout the day and a servery where meals are served to detainees on each wing. Detainees can get paid work cleaning, cooking and serving food. The wings have a courtyard which can be accessed during the day, but only when an officer is present for security reasons. Detainees on E Wing have access to B Wings courtyard in the mornings and CSU residents have access to the courtyard in the evenings and mornings, if not being used by E Wing residents.

Lock up

12. Concerns around 'Lock Up' feature in two of the seven complaints referred to the Department, concerning service they fall outside the Terms of Reference set. As a matter of record though, the current contract states G4S will operate a lockdown period between 21:00 hours at night and 08:00 hours the following morning, when detainees will be locked in their rooms. In addition to this detainees are locked in their rooms during the roll count of detainees which is held four times a day, before breakfast, at lunchtime, at teatime and at 20:45 hours. The purpose of the roll counts is to account for all of the detainees.

Healthcare

13. Detainees at Brook House IRC have access to 24 hour nursing care and by appointment to a General Practitioner seven days a week. On arrival at Brook House IRC and as part of the induction process detainees will see a nurse within 2 hours when they will be given a 1 hour appointment (R34) to see a doctor within 24 hours of arrival. The sufficiency of these facilities is outside the remit of the seven investigations tasked and PSU. Complaints relating to Healthcare service, are dealt by NHS England. However it is known to be a feature in five of the seven complaints submitted. In the course of the reports, where relevant, adherence against this regime is commented upon.
14. There is a daily 2 hour morning clinic with a nurse, which detainees can attend with no appointment necessary, and there is a 6 hour clinic with a GP every

afternoon. Detainees are given a 5 minute appointment. Head of Healthcare reports that detainees will have to wait between 3-5 days for a GP appointment, unless it is urgent. Both the IRC's doctor and one of the nurses have confirmed that the doctor visits E Wing and CSU daily to see all detainees who cannot visit the clinics. The Head of Health Care also advised that there is a mental health nurse based at Brook House IRC 7 days per week and a psychiatrist holds a mental health clinic once a week. All detainees who are identified as having taken drugs in the IRC are referred to the Forward Trust (previously known as RAPT) for support who attend Monday to Friday. In addition there is a weekly emotional health support group which any detainee can attend. Forward Trust advised that in any instances where a detainee is found to be taking Spice, their other prescribed medicines would be withdrawn because of potential side effects of mixing drugs. Detainees are made aware of this. According to the Head of Healthcare when a detainee is transferred into Brook House IRC from another Centre, there should be a healthcare to healthcare referral made. This process has enabled Brook House Healthcare Team to request that a detainee is not transferred for medical reasons, such as ongoing medical care at the first place of detention. If a detainee arrives without any prior consultation the Healthcare Team are required to manage the detainee as best they can within the healthcare provisions at Brook House IRC and the Healthcare Team are not able to refuse the admission of a detainee once he has arrived at Brook House IRC. If a detainee's mental health needs cannot be met then the Healthcare Team will refer the detainee to the appropriate local hospital. This has happened in two of the seven individuals who has complained. Since May 2015, IRCs have access and use NHS medical database, SystmONE, which enables the Healthcare Team to access a detainee's previous medical records.

Supported Living Plans

15. Support Living Plans are there to support detainees day to day whilst detained in the IRC. Supported Living Plans are generally opened by Healthcare. There are three levels of Supported Living which can lead to the setting up of a plan. Level 1 is self declared, Level 2 is evidence from staff that there is need for interventions and Level 3 concerns that the individual needs to be sectioned under mental health or other risks to the detainee. Healthcare will create a care plan so that all staff understand the support that is required for that detainee. Within a week the Unit Manager will review this plan along with Healthcare, Wing Officers, and other parties. If continued care is still required the Supported Living Plan is kept open and a review date is set. Between 2 April and the 14 July 2017, 37 Supported Living Plans were opened, the majority were for detainees with mental health issues.

Activities

16. Activities available to detainees centrally include IT, music, art, a gym and a library, as well as education where the IRC run a number of different courses including languages such as English and Italian. These are available on a first come first served basis and G4S reported there has not been any issues on access to these activities. However, there were a number of complaints

regarding the quality of the IT service. G4S reported that this has been addressed following a meeting with detainees and a simpler process for accessing IT has been introduced. Detainees also have access to the IRC Chaplaincy which covers all the major world faiths and detainees have access to a pool table and other leisure activities on their own wings.

Other Operating Factors

Staffing

17. The HO contract with G4S sets out the minimum staffing levels expected to run the IRC. There is a financial penalty system in place when G4S fail to achieve the contracted staffing hours. G4S self report breaches of the contract but HO contract monitoring staff additionally assure the information provided by G4S and have audit processes in place to identify staffing hour shortfalls. There are daily meetings between G4S and HO managers to discuss any issues in the IRC as they arise, including facilities or staffing but these discussions are not formally recorded. There is five Home Office staff on site responsible for Contract Compliance; the most senior is the Grade 7 Delivery Manager.
18. During April and May 2017 Tinsley House Centre remained closed for refurbishment which meant Brook House IRC was operating near capacity in terms of the number of detainees accommodated. G4S redeployed staff usually located at Tinsley House IRC into Brook House IRC to cover additional staffing requirements and this has meant that there were no contract breaches related to staffing levels during April and May 2017. However on 3 days in June and 6 days in July G4S did not satisfy the minimum contracted staffing hours and were penalised for this.
19. The increase in staffing hours for the additional 60 beds introduced in April 2017 has not yet been formally agreed between the Home Office and G4S and therefore the staffing performance levels were measured against the previous agreed level for a capacity of 448 detainees. In real terms the net effect was that the potential capacity rose from 448 to 508. During the investigation at least one officer reported they were often left alone on the wings to supervise over 100 detainees.

Training

20. All new G4S staff recruited to work at Brook House IRC are required to complete an 8 week Initial Training Course (ITC) including Safeguarding, Safer Custody, Control and Restraint (C&R), Security, First Aid and Health and Safety; also included is an introduction to mental health. Officers will also spend two weeks shadowing an experienced DCO.
21. There is no standard training programme that all suppliers follow, although they are all contractually required to cover the topics detailed above. There is no oversight by the Home Office or external assessment or verification of the quality of the training. G4S self audit by ensuring the training meets contractual

requirements. DCOs are contractually required to attend a yearly C&R refresher and they attend a one day refresher course which includes safer detention, safeguarding and security.

22. G4S have recently reviewed all their custody training and have updated in line with HMPPS (POLETS), which led to some changes in the ITC including Inter Personal skills, Security and Act Inclusively (Equality).
23. With regard to the training of the new DCOs, G4S are to implement a more blended approach to the ITC. This includes getting the vetting process concluded prior to staff commencing their training which should have new DCOs working in the IRC earlier in their training than currently. In addition G4S are looking to put all of their staff involved in custodial functions through a 12 month apprenticeship in Custodial Services, which will be externally assessed. A pilot is currently being ran at one of their privately ran prisons.

Whistle blowing and G4S internal disciplinary cases

24. No staff on staff complaints were identified for the period April 2017 to July 2017. Such complaints would be dealt with under G4S HR policies. Staff interviewed during the investigations stated that they were aware that they could raise issues about colleagues with their managers, but they all stated that they had not done this, nor had they felt the need to do this.
25. G4S have a whistle blowing process, although this was not mentioned by the officers interviewed. Any whistle blowing complaint is handled and investigated externally and independently of Brook House IRC – a precise figure was requested of G4S but was not provided.
26. During the period of the Panorama programme, G4S conducted one internal disciplinary investigation into a member of staff, this member of staff resigned prior to their disciplinary hearing.

Complaints

27. Detainees are informed of the complaints process during their induction to the IRC. Their guidance booklet advises detainees to speak to a member of staff in the first instance and if this is not satisfactory to complete a complaint form (DCF9) and place it in one of the complaint boxes. There is a complaints box on every wing and guidance is available in 20 languages. G4S have no access to these complaint boxes which are opened by Home Office staff daily. All complaints received between April 2017 and the end of June 2017 were requested from Home Office staff and examined. 46 complaints were supplied which showed the majority of detainees had discussed their issue with a member of staff before submitting a formal complaint. G4S reported that each wing will have a 'help desk' open for one hour a day Monday to Fridays when detainees can speak to staff about any issues with a view to resolving them immediately, rather than a detainee needing to formally complain, however this facility is dependent on staff availability.

Assessment Care in Detention Teamwork (ACDT)

28. ACDT is the holistic approach to suicide prevention and self harming and is relevant to all staff working in the IRC including Home and Voluntary Sector staff and is about identifying detainees at risk and providing care and support to them.
29. ACDT is taught in initial training and on the yearly refresher courses. It covers the legislation and policies and teaches officers to recognise when an individual is distressed, through their behaviours, thoughts, words, risks and triggers that may lead to self-harm. In addition, the responsibilities of every individual who has concerns about the welfare of a detainee, and the ongoing process of how an individual is supported through a multiple discipline approach.
30. During the period of April to July a total of 153 plans were opened and 162 were closed. Concerns has been raised in one of the investigations that a detainee informed the investigator that he told a Home Office member of staff based at the IRC that he had thoughts of self harming which was not acted upon.

Anti Bullying

31. If there is suspicion that a detainee is being bullied by another detainee it must be reported to a DCM with a one page summary of who is involved and a chronology of events immediately. The Residential DCM will then review the report and other available evidence and decide on the appropriate course of action. For example, mediation between the parties involved, this would be recorded and then passed to the Safer Custody Manager. If mediation is not appropriate then anti bullying books are opened, including one on the victim to support him. These are checked daily by the Safer Custody Manager, Diversity Manager and the Duty Director and are reviewed every week to ensure that the level of support is appropriate.
32. With regard to the individual who is alleged to be conducting the bullying, their conduct is monitored, challenged and recorded through the Monitor-Support-Challenge booklet. There is a declaration that they are asked to sign, confirming that they recognise their behaviour has been inappropriate and will look to improve their behaviour. The booklet is reviewed weekly and stays open for a minimum of 2 weeks. There are three stages within the Monitor Challenge Support booklet. Stage 1: they have been identified as bullying, Stage 2: when they are not meeting their care plan objectives and Stage 3: when having been challenged for three weeks there is no improvement in their behaviour. At this stage the IRC would ask the Home Office to consider placing the individual in CSU (Rule 40) or transferred to another centre. In cases of bullying the individual who is conducting the bullying is moved off the wing.
33. During the April to June 2017 period the IRC conducted 20 Anti Bullying Investigations which led to five victim support plans being opened and six Monitor-Challenge-Support Plans. The highest month was April when 10 investigations were conducted leading to four Monitor-Challenge-Support Plans being opened.

Drug and Alcohol Strategy

34. G4S Head of Security reported that Spice related incidents increased in December 2016 and into January 2017 then it fell, but rose again in June 2017. The cause of the increases was not known and may be due to an increased use of Spice or it may be equally because there was a batch of drugs causing a bad reaction in the detainees making the use of Spice more obvious. Other officers reported that the rate of Spice related incidents occurred in waves. It is known, in common with other establishments across the UK, the drug is in use at the IRC.

35. As well as concerns on Spice coming into the IRC, Forward Trust advised that the detainees could make Spice themselves [REDACTED] Sensitive/Irrelevant

Sensitive/Irrelevant

Sensitive/Irrelevant

The IRC's

Drug and Alcohol Strategy was updated in December 2017. There will be a multi agency approach with key input from Healthcare, NHS England, Forward Trust Substance Misuse Services and the police.

Context

36. In this context seven serious representations were submitted to the Department concerning [REDACTED] D1538 [REDACTED] D668 [REDACTED] D191 [REDACTED] D687 [REDACTED] D1527 [REDACTED] DX and [REDACTED] D3434 to which PSU would, within the confines of the DSO, be asked to examine. The terms of reference for this work were agreed on the 22 November 2017. It is worth noting, in advance of this, following the BBC Panorama Programme all allegations which became known, G4S passed to Sussex Police, at the time of writing a live criminal investigation into the events surrounding [REDACTED] D1527 is outstanding. Notwithstanding this the claims of each have been examined according to the Terms of Reference set. Altogether over 70 witnesses have been interviewed and or statements taken from; in addition hundreds of documents have been reviewed and considered as part of these enquires and where relevant produced in evidence this includes Use of Force reports, Removal from Association paper work, Healthcare reports, Solicitor representations and policy and guidance issued both by the Home Office and G4S. One issue worthy of note here is relates to Body Worn Cameras (BWC).

37. BWC were introduced by G4S at Brook House IRC in January 2016 for use by DCMs. The instructions at that time stated that DCMs should not record detainees indiscriminately but they should record all incidents (including the use of force), from beginning to end without stopping. The Panorama programme and CCTV footage showed that DCMs were present during incidents involving the use of force and self-harm but the BWCs were not used. There are no logs or records related to BWCs at the time of the Panorama recording for review to show which officers were using BWC and who was not. Any footage which related directly to a security report, i.e. the use of force or a self harm incident, was saved by the G4S Security Team and stored with the associated reports

and all other footage was deleted as there was no method to record and retain it. It was also possible for anyone to delete the camera footage by plugging it into a computer with an easily obtained camera lead. In the context of investigations and evidence, this has been clearly unhelpful. The issue of the non-use of BWCs has been highlighted in two of the investigations

38. Each investigation report that follows contains the same basic outlines; an Introduction, Terms of Reference, Policy and Guidance summary of evidence and Consideration and Conclusion. The reviews of Kate Lampard and Sir Stephen Shaw, the use of the Police Force and, any appeal right on the outcome of specific complaints to the Prisons and Probation Ombudsman are considered by the Department sufficient to allow consideration of the matters raised. Some matters remain out of scope of the tasked investigations these have been highlighted to Immigration Enforcement from the outset and end of the investigations.