



Annual Report of the Independent Monitoring Board at Brook House IRC

**For reporting year 1 January – 31 December
2020**

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Contents

Introductory sections 1 – 3	Page
1. Statutory role of the IMB	3
2. Description of the establishment	4
3. Executive summary	5
Evidence sections 4 – 7	
4. Safety	8
5. Fair and humane treatment	18
6. Health and wellbeing	25
7. Preparation for return or release	29
The work of the IMB	33
Applications to the IMB	33

Introductory sections 1 – 3

1. Statutory role of the IMB

The Immigration and Asylum Act 1999 requires every immigration removal centre (IRC) to be monitored by an independent Board, appointed by the Secretary of State from members of the community in which the IRC is situated.

Under the Detention Centre Rules, the Board is required to:

- monitor the state of the premises, its administration, the food and the treatment of detainees
- inform the Secretary of State of any abuse that comes to their knowledge
- report on any aspect of the consideration of the immigration status of any detainee that causes them concern as it affects that person's continued detention
- visit detainees who are removed from association, in temporary confinement or subject to special control or restraint
- report on any aspect of a detainee's mental or physical health that is likely to be injuriously affected by any condition of detention
- inform promptly the Secretary of State, or any official to whom authority has been delegated, as it judges appropriate, any concern it has
- report annually to the Secretary of State on how well the IRC has met the standards and requirements placed on it and what impact these have on those in its custody.

To enable the Board to carry out these duties effectively, its members have right of access to every detainee and every part of the IRC, and all of its records.

The Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights treaty designed to strengthen protection for people deprived of their liberty. The protocol recognises that such people are particularly vulnerable and aims to prevent their ill-treatment through establishing a system of visits or inspections to all places of detention. OPCAT requires that states designate a National Preventive Mechanism to carry out visits to places of detention, to monitor the treatment of and conditions for detainees and to make recommendations for the prevention of ill-treatment. The Independent Monitoring Board (IMB) is part of the United Kingdom's National Preventive Mechanism.

2. Description of the establishment

Brook House opened in 2009 as a purpose-built IRC for adult males. It is located about 200 metres from the main runway at Gatwick Airport and was built to prison category B standard.

The maximum capacity is 448, but the centre usually operates at no greater than 358 (80%) capacity and this was reduced to 209 (47%) for most of 2020 due to COVID-19 pandemic restrictions.

Once again, and mainly due to the impact of the pandemic this year, detainee numbers were lower than in previous years. The average month-end detainee population was 95 in 2020, with a low of four in December. By comparison, the average month-end populations in 2019 and 2018 were 242 and 292, respectively.

Serco Ltd ('Serco') took on a new contract for running the centre and Tinsley House IRC for the Home Office on 21 May, after expiry of G4S's contract. Serco also took over the provision of catering, cleaning and running a shop for detainees – previously done by Aramark as a subcontractor of G4S. G4S and Aramark staff were transferred to Serco under the Transfer of Undertakings (Protection of Employment) regulations (TUPE).

NHS England commissions G4S Health Services Ltd ('G4S Health') to provide medical services. This contract remains in place, although it will expire on 31 August 2021 and a new tender process is currently under way. A small healthcare centre provides 24-hour cover, but not inpatient treatment. G4S Health provides primary mental healthcare and Elysium Healthcare is subcontracted to provide secondary mental health services. The Forward Trust provides psychosocial substance misuse services.

The Samaritans, Gatwick Detainee Welfare Group (GDWG), the Bail for Immigration Detainees (BID) charity, the Red Cross, Migrant Welfare and Music in Detention provide support to detainees – although all had to discontinue on-site visits for most of 2020 due to pandemic restrictions.

The Home Office has two teams on site. One covers contract compliance by G4S and Serco, while the other, the detainee engagement team (DET), liaises between detainees and their case workers.

Her Majesty's Inspectorate of Prisons (HMIP) undertook a short scrutiny visit of Brook House and three other IRCs in May 2020 to assess aspects of their responses to the pandemic. HMIP also visited the centre as part of its inspections of charter flights in the second half of 2020.

In September 2017, BBC 'Panorama' aired a programme showing mistreatment of detainees in Brook House. A public inquiry, chaired by Kate Eves, has been set up to investigate. The inquiry is not expected to start taking evidence from witnesses before November 2021.

3. Executive summary

3.1 Background to the report

Three events each had a significant impact on detainees at Brook House in 2020: the COVID-19 pandemic, Serco taking on the contract to operate the centre from 21 May and the Home Office running a compressed programme of charter flights to European countries in the latter part of the year.

- Impact of the pandemic – as the wider community was subject to restrictions following the March national lockdown, so too was the centre, its detainees and staff. In particular, throughout most of 2020 there was less free association and mixing off the wings; accommodation moved to single occupancy; and in-person social and legal visits were stopped or restricted. In addition, pressure on temporary accommodation provided by the government often meant long delays for some detainees between being granted bail and their release. The centre was declared a pandemic outbreak site in December, leading to the release or transfer of all detainees.
- Change of contract provider from G4S to Serco – the most noticeable change to date has been a welcome increase in the number of staff.
- Charter flights to European countries – from late July, the centre's detainee population shifted to detainees who had arrived in the UK after crossing the Channel in small boats. The Home Office used Brook House as the base for its plans to remove these detainees to European Union (EU) countries party to the Dublin Convention before 31 December 2020.
- The combination of the compressed nature of the charter flight programme, with Brook House as its sole base for Dublin Convention flights, and the fundamental changes in the centre's population and nationalities, their different vulnerabilities and their needs, put the centre's systems, detainees and staff under great stress and raised some serious concerns for the Board. Most notably, there was a dramatic increase in levels of self-harm and suicidal ideation, deficiencies in the induction process and increased needs for legal support and Detention Centre Rule 35 assessments.

The issues are discussed in detail in the different sections of this annual report.

3.2 Main judgements

How safe is the IRC?

- The Board's view is that, due to circumstances related to the Dublin Convention charter programme, in the latter months of 2020 Brook House was not a safe place for vulnerable detainees who had crossed the Channel in small boats (see section 4).
- This is evidenced by the high levels of self-harm and suicidal ideation in that time (see section 4.2).

How fairly and humanely are detainees treated?

From our monitoring and observations, the Board's view is that detainees are generally treated humanely at Brook House. However:

- The Board's view is that circumstances in Brook House related to the Dublin Convention charter programme amounted to inhumane treatment of the whole detainee population by the Home Office in the latter months of 2020 (see section 4).
- Large numbers of detainees were detained for removal but were later released, having been exposed to the harmful effects of detention in the interim: 53% of those detained in 2020 were released, with the level rising to 72% between August and December, when the charter programme was being run (see section 7.2).
- Some detainees who were granted bail were then not released for a considerable time due to a lack of suitable accommodation, which the government is required to provide (see section 7.4).

How well are detainees' health and wellbeing needs met?

- There do not appear to have been any formal arrangements in place for briefing receiving authorities about the vulnerabilities or needs of the most vulnerable detainees removed to EU countries (see section 4.2).
- There were serious delays in access to Rule 35 assessments during August through December (see sections 4.4 and 6.3).

How well are detainees prepared for return or release?

- Detainees were not given advance information about what would happen to them in receiving countries if they were removed under the Dublin Convention (section 7.4).

3.3 Recommendations

TO THE MINISTER

- Introduce a time limit for immigration detention (repeated from 2018 and 2019).

TO HOME OFFICE IMMIGRATION ENFORCEMENT

- Review systems and processes in the detention journey, to ensure that vulnerabilities such as age, modern slavery and Rule 35 torture claims are identified and assessed at earliest stages (see section 4.1).
- The Board repeats all of its recommendations from 2019 relating to reviews of adults at risk; and assessment, care in detention and teamwork (ACDT) and Rule 35 policies and processes (sections 4.2 and 4.4).

- There should be a requirement for systematic and ongoing review of vulnerable detainees, to monitor the effect of continued detention on their wellbeing (see sections 4.2, 4.4, 6.3 and 7.2, and repeated from 2019).
- Review arrangements for the provision of suitable accommodation for detainees granted bail to reduce waiting times (see section 7.4).

TO THE DIRECTOR/CENTRE MANAGER

- Ensure that inductions for new arrivals are consistent in delivery and content, and backed up by written information in the languages of detainees in the centre (see section 4.1).
- Continue assessments for escorted visits, to see if the use of handcuffs can be reduced further (see section 5.1, and repeated from 2019).
- The Board recognises early improvements made but is of the view that more needs to be done in the offer and consistent delivery of a wide programme of organised and purposeful activities for detainees (see sections 6.5 and 6.6).
- Design and deliver a range of vocational training to prepare detainees for their release (see section 7.1).

TO NHS ENGLAND

- Keep staff recruitment and retention as a priority (see section 6.2, and repeated from 2018 and 2019).
- There should be a requirement for systematic and ongoing review of vulnerable detainees, to monitor the effect of continued detention on their wellbeing (see sections 4.2, 4.4, 6.3 and 7.2).

3.4 Progress since the last report

- The Board welcomes the increase in staffing numbers evident since Serco took on a contract to run the centre on 21 May. The adoption of other recommendations, such as the delivery of purposeful activities and vocational training for detainees, may follow from this but it is too soon to tell, and these recommendations are repeated.
- The Board also welcomes investment made by Serco in the information technology (IT) system used by detainees, the opening of education rooms on weekends and the fixing of defects in rooms for detainees with disabilities.

Evidence sections 4 – 7

4. Safety

Overview

Section 3.1 above summarises the shift in the second half of the year to a population of almost exclusively detainees who had crossed the Channel on small boats and who were later held at Brook House pending removal under the Dublin Convention. The characteristics of these detainees made them especially vulnerable, including trauma experienced in their countries of origin and/or during their journeys, limited English-language skills, and their limited awareness of systems in the UK and how to access their rights and entitlements. Section 4 therefore focuses heavily on this part of the year and on the safety of this group of detainees.

The Board's view is that some systems at Brook House or in the Home Office detention estate did not adapt quickly enough to the needs of this population. Issues we observed included:

- Induction and related information provision were ad hoc and inadequate.
- Interpretation was not always readily available.
- There were difficulties in maintaining access to solicitors.
- There was a failure to identify vulnerabilities such as age and torture claims at an early stage.
- There were serious delays in access to Rule 35 assessments.
- Mobile phones were confiscated by the Home Office, sometimes resulting in loss of family contact.
- There were problems in Home Office communication to detainees about changes in their removal plans.
- The healthcare service was over-stretched.
- There was an absence of information for detainees being removed to EU countries about what would happen on arrival.

These issues are considered in detail below or in sections 5, 6 and 7.

To Board members, detainees often seemed fearful and anxious about their removal and what might await them; they were sometimes bewildered about their detention, and they were also affected by the hopelessness and anxiety of those around them. This was the environment in which the compressed Dublin Convention programme of removals was run by the Home Office.

The seriousness of this situation was evidenced in statistics of self-harm and suicide concern so striking that the Board and the IMB charter flight monitoring team jointly wrote to the Home Office minister for immigration compliance and courts on 2 October.¹ The Board expressed the view that circumstances in the centre amounted

¹ <https://s3-eu-west-2.amazonaws.com/imb-prod-storage-1ocod6bqky0vo/uploads/2020/12/Letter-to-Minister-Charter-Flights-EU-Impact.pdf>

to inhumane treatment of the whole detainee population, and this was repeated in evidence submitted by IMBs in November to the home affairs select committee inquiry into Channel crossings, migration and asylum-seeking routes through the EU.²

As has been made clear in the letter to the minister and to the home affairs select committee, our criticisms are not of staff treatment of detainees, but rather of the circumstances in the centre.

4.1 Reception and induction

The Board is concerned about apparent failures in identifying risk and vulnerabilities at different stages in the overall Home Office detention system. Many detainees brought to Brook House for removal on Dublin Convention charters did not have age disputes, national referral mechanism (NRM) claims of modern slavery or trafficking, or Rule 35 torture claims identified or assessed before reaching the centre, and often this did not occur until some time after arrival. Yet, many of these detainees would already have been in Home Office care from their arrival in Kent, sometimes through a short-term holding facility such as Yarl's Wood, and then the reception process at Brook House.

It is the Board's view that, as the IMBs noted in their evidence to the home affairs select committee, rapid moves between facilities and the compressed timelines and processes for removal for the Dublin Convention charters meant that there was sometimes insufficient time for any one centre to carry out thorough assessments of risk and vulnerability.

The Board's reports on induction processes at the beginning of the year were positive, with a system in place that we felt worked well. There was a dedicated induction wing for new arrivals, the induction took place at a time allowing all new arrivals on the induction wing to participate, and it involved a good mix of representation from different departments.

Later in 2020, however, the Board observed a number of problems with the induction process. Following pandemic guidance from Public Health England, wing arrangements were changed so that new arrivals were accommodated together, remaining in a 'bubble' (or a 'reverse cohort') for a 14-day quarantine, and the designated arrivals wing rotated.

Inductions became ad hoc and were no longer delivered by specialists trained in inductions. Moreover, the process could be very confusing, with an enormous amount of information delivered to perhaps a single detainee, sometimes immediately on arrival following a long journey and having gone through the reception process. In addition, the quality of the induction could vary from officer to officer, and not all officers were familiar with providing them.

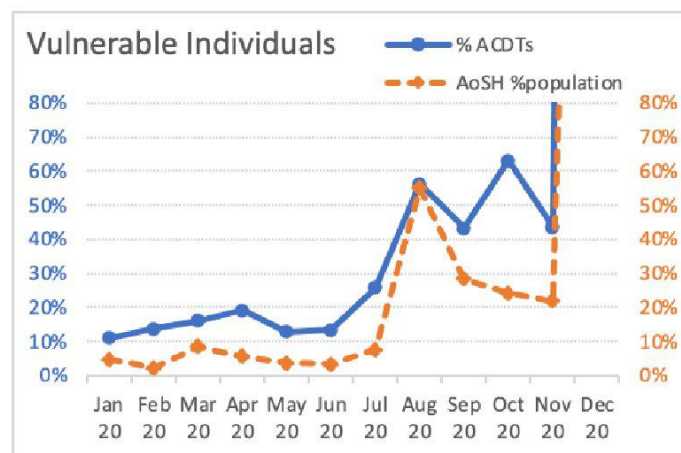
The Board's view is that there is a lot of information to absorb on arrival, and that induction should be supported, as it has been in the past, with written information, available in multiple languages. At the time of writing, Serco has now introduced a multi-language handout or booklet for new arrivals.

² <https://committees.parliament.uk/writtenevidence/14811/pdf/> and <https://committees.parliament.uk/writtenevidence/18348/pdf/>

Given the shift in population to predominantly detainees who had crossed the Channel in small boats, the Board is concerned that induction processes were not more rapidly adapted. Typically, approximately half of the centre's population have previous experience of a prison environment in the UK and are likely to find a detention setting somewhat familiar. Former prisoners and people brought to the centre from the community have both usually been in the UK longer and may have a better command of English and understanding of their rights, and of the country's systems. This new population, however, was not accustomed to UK institutions and had limited spoken English (see also section 5.5).

4.2 Suicide and self-harm

While Brook House is accustomed to distress among detainees, the substantial number of cases of self-harm and threats of suicide by detainees in the latter part of 2020 has been a major concern for the Board and everyone in the centre. This is clearly illustrated in the chart below, which shows the considerable increase in the proportion of ACDTs and acts of self-harm in the centre from August onwards.³



ACDTs are used to monitor the welfare of detainees when there is a concern that they are at risk, typically of suicide or self-harm or from a medical condition. Summary information prepared by the Serco safer community team for the months of August to December showed that out of 205 ACDTs, 51 were opened on the basis of actual self-harm, 64 on the threat of self-harm and 59 on the basis of suicidal thoughts.

Statistics from the second half of the year show a strong correlation of increased incidence of ACDTs, acts of self-harm and suicidal ideation with the change in population and the concentrated charter flight programme. Incidents of self-harm increased sharply in August and only reduced in December, with the wind-down of charter flights and subsequent release of most detainees.

³ This shows acts of self-harm and ACDT plans as percentages of the population at month-ends. The chart includes December 2020, during which the number of ACDTs and acts of self-harm were lower than in previous months (at 42 and 18, respectively), but because the month-end population was very small (four men), the percentages are off the scale.

It is the Board's view that the significant increase in self-harm and suicide risk is directly linked to the higher level of vulnerability of the small-boat population and the intensive programme of Dublin Convention charter flights.

The response to serious incidents of self-harm and threats of suicide was often constant supervision by officers to prevent further harm. The table below shows numbers of detainees placed on constant supervision in the months of the charter programme.

Month	Average daily population ⁴	Number of detainees on constant supervision during the month
August	93	32
September	115	33
October	107	31
November	122	34
December	80	23

In writing this report, the Board struggles to convey how disturbing these numbers of detainees on constant supervision are. Concern about a detainee's state of mind must be very high indeed to justify assigning staff to watch them at all times. Moreover, these are only the most extreme cases; more detainees were, at the same time, on hourly, overnight or less frequent watch.

The numbers were so high that one member of the mental health team said that he was spending almost all his time on constant supervision reviews, and struggled to find time to provide other care. In September, the Board asked the Home Office if there would be provision for extra mental health resource which could allow focus on preventative measures to alleviate stress and anxiety. The response was that healthcare staff had not requested any additional resource.

In addition, the highly visible nature of these constant supervisions, which took place on all wings, itself contributes to an increase in anxiety in the centre. They serve as a constant reminder to other detainees – and staff – of the levels of despair that detainees were suffering.

The statistics are distressing, and so too was the Board's experience of monitoring in the latter part of 2020. On our visits to the centre and from conversations with detainees and staff during that time, we felt that there was usually an atmosphere of tension, fear and despair pervasive among detainees, and great stress on staff caring for them. On frequent occasions, Board members heard detainees in ACDT reviews say plainly that they would kill themselves if served removal directions. In conversations, we heard detainees talk of being subject to racism, homelessness and hunger in the countries to which they were to be removed.

Triggers for self-harm incidents and threats of suicide that the Board has observed over the course of the year include bad news, poor information flow about immigration cases and last-minute changes to removal plans (see also section 5.1).

The Board has been particularly concerned about detainees being removed while in a state of distress or injury following self-harm, which we feel is inhumane and puts them

⁴ Average calculations made by the Board based on population numbers taken from Serco daily operations report.

at further risk. We have noted examples of a detainee being taken to a plane directly from having attended hospital for his injuries, another being removed after being stuck in the netting following what was believed by officers present to be a suicide or self-harm attempt, and another being presented for a charter flight bleeding from self-harm and in a state of partial undress.

From the Board's records, at least 26 detainees were removed on the charter flights while on ACDTs, and yet there appear to have been no formal arrangements in place for briefings to the receiving authorities about these most vulnerable of detainees, some of whom were on constant supervision when collected from Brook House.

As set out more fully below (see sections 5.4, 5.5, 5.6 and 6.1), the Board acknowledges the impact of this extremely challenging time not only on detainees, but also on Serco and healthcare staff working in the centre.

4.3 Violence and violence reduction

Trends in incidents of violence changed substantially in Brook House in 2020 from previous years. In 2020, there have been 45 recorded assaults on staff, as compared with 82 in the previous year, and 11 assaults on other detainees, as compared with 20 in 2019. This drop in numbers is welcome, but is likely to be attributable to the lower number of detainees and the different character of the detainee population, and a number of these incidents are attributable to a few particularly volatile individuals.

There have been eight fights recorded this year, compared with 24 in 2019, with seven taking place in the first three months of the year. These occurred prior to pandemic-related restrictions on movement and free association between detainees from different wings in the centre.

Serco introduced a new system to monitor bullying. However, there was no use of this system in 2020, and at the monthly safer community governance meeting in January 2021, staff acknowledged that it was not yet being used effectively. Serco has informed the Board that it does not believe that there have been any situations where the new process could have been used.

There was no survey of detainee safety in 2020.

4.4 Vulnerable detainees, safeguarding

In our annual report for 2019, the Board pressed for a review of adults at risk (AAR), ACDT and Rule 35 policy and procedure. In his response to our report, the minister for immigration compliance and the courts said that these were all under review and that the intention was to implement changes resulting from the reviews by the end of summer 2020. We are disappointed that the Home Office appears to have 'paused' these reviews. The concerns that led to our recommendation in 2019 have been heightened by our monitoring this year, and the Board still believes that a full review should be conducted.

Adults at Risk

In accordance with Detention Services Order (DSO) 08/2016 and the 'Adults at Risk in Immigration Detention' guidance of 6 March 2019 for Home Office staff, detainees at Brook House are logged as level 1, 2 or 3 AAR. In our report of 2019, the Board expressed concern about this system, noting that it did not adequately capture an individual's level of vulnerability or any deterioration in his situation. This was, in part, because the system's levels actually relate to the amount of evidence that the detainee is able to provide rather than their assessed level of vulnerability.

These issues were not resolved in 2020 and, indeed, were arguably worsened with the large numbers of detainees with vulnerable mental health status on ACDTs and self-harming, but not all being added to the AAR log. We noted last year that the system should make more recognition of the impact of continued detention on vulnerable detainees, but in two prolonged cases of detention this year (six and nine months, respectively), the Board saw no evidence that this was either factored into the existing assessment of these detainees' situations or that it triggered any additional assessment.

Given the characteristics of the population at Brook House in the second half of the year, it is perhaps unsurprising that a substantial number of detainees submitted claims of trafficking and modern slavery to the NRM. However, it took some time for these cases to be categorised as AAR by the Home Office. This was remedied only on 26 October, when these individuals began being routinely placed on level 1 and reviewed in the weekly multidisciplinary meeting. In the initial weeks after 26 October, 32 individuals were added to the log.

Rule 35 claims

A large proportion of the detainees who arrived at Brook House from early August made Rule 35 claims of torture. On occasions, nearly half of the detainees in the centre had a claim under Rule 35.⁵

For a while, the increase in Rule 35 claims overwhelmed the capacity for GP appointments, and the waiting time for a Rule 35 appointment lengthened. A Board duty member reported waiting times of 21 days in mid-August, and on 11 September 60 detainees were awaiting appointments. In September, the Home Office made provision for an additional 12 Rule 35 GP appointments per week, which brought the waiting time down; Board member rota reports indicate waits of about 16 days in early September, 12 days in October and five days or less in mid-November.

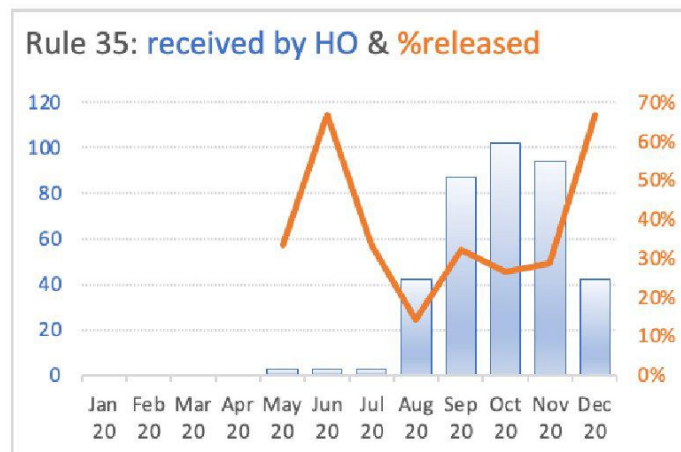
Given the frequency of charter flights and these long delays, there were instances of detainees being removed before they had seen the GP (for example, seven detainees removed on a charter to Spain on 3 September). In the Board's view, these backlogs and delays for appointments contributed to high levels of anxiety and unease among all detainees in the centre.

From early in October, the Home Office started to use a 'Red 3' form for collection of final representations from detainees on the manifest who might not by then have had a Rule 35 appointment. However, on an inspection on 13 October, HMIP was critical

⁵ For example, on 22 September 48% (59 detainees) of the population had a claim under Rule 35, while on both 7 and 14 October and on 11 November 44% and 46% of the population, respectively, had claims.

of the practice as then in place, after which processes were strengthened by the Home Office. This form is reviewed by a Home Office central unit for charter flights, and this has led to some detainees being taken off the manifest, and to some releases.

The chart below⁶ shows the dramatic increase in the number of reports from GPs received by the Home Office in the months when the charter programme was operating. By way of comparison, over the first nine months of 2019 (the period for which the Board had data), the Home Office received, on average, 17 Rule 35 reports per month – at a time when the average population was near twice that of this year.



Of detainees who were able to access a GP assessment before their flight, a significant number had their assessed claims accepted by the Home Office. For example, on 20 October, 49% of the detainees on the AAR log had had torture claims accepted by the Home Office and were moved up to AAR level 2 or level 3. The chart above also shows the average percentage of detainees who were released each month with accepted Rule 35 claims.

Under the Home Office's AAR framework, the higher the risk level, the stronger the presumption that a person should not be in detention, and an accepted Rule 35 claim implies a presumption against continued detention. In 2020, an average of 32% of detainees with an accepted Rule 35 report were released; for the remaining 68%, detention was maintained – although, in the end, all but four of these detainees were removed or released before the end of the year as the charter programme wound down. Given the substantial differences in the characteristics of detainees in 2020 and their much shorter average stay, it is difficult to judge whether the larger proportion released (32%) actually reflects a more appropriate application of the intention of Rule 35 than in recent years (when 25% were released in 2019 and 17% in 2018).

It is notable that, over August to December, 99.4% of Rule 35 GP assessment reports were made under Rule 35(3): where the detainee 'may have been the victim of torture'. Only two reports (0.6%) were made under Rule 35(1): 'likely to be injuriously affected by continued detention'; and none under Rule 35(2): 'suspect[ed] of having suicidal intentions'. The Board finds this puzzling, in the light of the scale of self-harm and suicide threats made by the population of Channel-crossing detainees resident during

⁶ Drawn from monthly combined Home Office/Serco reports and from monthly Home Office Rule 35 database summaries.

this period. We cannot reconcile the evidence of frequent suicide ideation with there being absolutely no Rule 35(2) reports.

Age disputes

As set out in evidence from IMBs to the home affairs select committee's inquiry, the Board has been concerned, in the latter part of 2020, that a significant number of detainees have been identified as under-age only after their arrival at Brook House. Details are shown in the table below, prepared by the Serco safer community team, where it can be seen that the majority (70%) of the 20 age dispute cases between September and December were released to social services.

Month	Number of age disputes	Outcome
September	4	3 released to social services 1 maintained in detention
October	8	7 released to social services 1 maintained in detention
November	6	3 released to social services 3 maintained in detention
December	2	1 released to social services 1 maintained in detention

We note that, while the age of 18 has important legal implications, it is less important when looking more generally at an individual's vulnerability and safety. On several occasions, the vulnerability of individuals whose age dispute case was rejected has been recognised at Brook House by putting them on supported living plans, which we consider a good practice. The Board also commends the decision taken by the Home Office in the latter part of the year to give 'the benefit of the doubt' to age dispute cases who also made NRM claims, and treat them as minors.

Finally, the Board notes the beneficial impact of additional support provided by a Serco social worker based at Brook House this year, particularly in addressing concerns relating to age disputes, but also for supporting other vulnerable detainees.

Safeguarding governance

Safer community meetings run by Serco are held monthly, although the rhythm of these meetings and their documentation has been interrupted. A new assistant director of safeguarding was appointed on 20 September, and in the latter part of the year the meetings seem to be settling, and the Board finds them to be generally useful and productive.

The change of service provider has meant a welcome refresh of training, with a strong emphasis on safeguarding, and the Board has been pleased to see a ramping up of staff support, with more proactive measures to help them manage stress and vicarious trauma, which can have knock-on benefits for detainees.

4.5 Use of force

Set out below are the number of occasions when force was used in 2020, compared with recent years.

	2020	2019	2018
Total use of force incidents in year	197	223	257
Average month end detainee population	95	242	292

The number of incidents involving the use of force continued to fall. However, the prevalence of use of force in 2020 is double what it was in 2019 and 2018 when looked at by reference to the average proportion of detainees having force used on them each month. An average of about 17% of detainees had force used on them in each month in 2020, compared with between 7% and 8% in 2019 and 2018.

The Board is concerned by the increased prevalence of use of force this year, and our analysis of underlying data shows that it was higher in both the first half of 2020 and the latter part of the year, after the shift to a more vulnerable population.

The following is a summary of the reasons given by G4S/Serco for the use of force.

	Maintain good order	Protect third party ⁷	Prevent self-harm	Other	Total use of force
2020	76 (39%)	35 (18%)	72 (37%)	14 (7%)	197
2019	132 (59%)	46 (21%)	20 (9%)	25 (11%)	223
2018	164 (64%)	38 (15%)	36 (14%)	19 (7%)	257

There is a noticeable increase in prevention of self-harm being given as the reason for use of force in 2020 compared with previous years and, at 37%, it was the main reason given this year. Looking at the underlying data, a monthly breakdown shows that this increase is coincident with the higher levels of self-harm and suicidal ideation seen among the small-boat population brought to the centre for removal on Dublin Convention charter flights (see also section 4.2).

The category 'Other' comprises use of force for self-protection and uses to prevent damage to property or escape.

⁷ Protect third party includes use of force interventions to prevent assault on detainees by other detainees, or to protect third parties such as healthcare staff or contractors.

There has been a slight reduction in use of force to facilitate the removal of detainees. This is reported as a sub-set in the category 'Maintain good order':

2020	2019	2018
32 out of 197 (16%)	41 out of 223 (18%)	48 out of 257 (19%)

The monthly use of force governance meetings run by Serco are generally well attended by a multidisciplinary team, with representatives from the Home Office and healthcare team. The Board has a standing invitation, and a member usually attends.

Based on our observations, these meetings continue to be run in an open, transparent and constructive manner. The presentation at each meeting is informative, and a selection of film footages are reviewed, where lessons from both good and bad examples are discussed.

Under the terms of Serco's contract, a new procedure has been introduced to help monitor staff culture and mitigate risks of unfair treatment/force used on individuals: a review is to be conducted on any member of staff who has been involved in three or more uses of force within a three-month period, and where concerns are raised an internal investigation will follow.

The Board should be informed of all use of force incidents without delay (taken as within two hours). The Board believes that it is usually informed in a timely manner, but there were some rare occasions this year when incidents were only brought to the Board's attention after a longer period of time.

4.6 Substance misuse

There were 25 drug finds and 16 'hooch' finds during the course of the year, in comparison with 45 drug finds and 11 'hooch' finds in 2019, although we note that the population last year was about half that in 2019. In April, we noted continued evidence that drugs were coming into the centre despite the lack of visitors due to pandemic restrictions, but this decreased over the course of the year.

Substance misuse support is provided by the Forward Trust (see section 6.2)

5. Fair and humane treatment

5.1 Escorts, transport, transfers

The table below shows 'raw' data for the proportion of detainees handcuffed on escorts for hospital visits during 2020. An average of just over seven detainees per month were handcuffed on escorts.

2020	Total Escorts	Handcuffed
January	29	15
February	22	14
March	13	8
April	3	3
May	1	1
June	2	2
July	9	8
August	12	9
September	23	4
October	14	5
November	33	13
December	7	1

Due to the substantial changes in detainee population during 2020, it is difficult to draw conclusions from comparison with data for 2019 (when the monthly average of detainees handcuffed was nearly 20). However, during April to August 2020, virtually all the (few) escorted detainees were handcuffed in advance of the move. We are pleased to see that the proportion handcuffed from September has dropped.

There have been issues with information provision to detainees who were on the manifests for Dublin Convention charter flights, when delayed communication between caseworkers, the local DET and Serco officers has led to some detainees believing that they were to be removed, when in fact it had been known for a while that they would not be. This caused unnecessary distress and there were a few instances of detainees self-harming during this period.

In one instance, reported in the national press in August, force was used to take Mr A from his room and place him in a van to be taken to the airport – although his removal directions had been cancelled some time before. Mr A knew this, but the Home Office, Serco, and Mitie Care & Custody (Mitie), the immigration escort provider for the Home Office, had conflicting information.

Although there are now no more Dublin Convention flights, this potential issue of timeliness and clarity of communications is relevant for any future charter flights.

5.2 Accommodation, clothing, food

Accommodation at Brook House is in five wings over three floors, with connecting communal corridors where facilities such as healthcare, visits, welfare and educational and recreation activities are located. Pandemic restrictions have required G4S and Serco to be flexible in use of the wings – for example, to keep detainees segregated to reduce the risk of spreading COVID-19. In response to the pandemic, accommodation moved to single occupancy of rooms.

Early in 2019, the Board raised with the Home Office and G4S that water from the showers in rooms for disabled detainees would flood out into the room. This issue was not dealt with during 2019, nor as part of the 'dilapidation works' as G4S came to the end of its contract in May 2020. By the end of January 2021, a solution had been designed and tested, and installed in all three of these rooms.

Board members' rota reports have generally commented that the accommodation and facilities have been kept clean and in working order.

A food survey was conducted in early December. Thirty-eight responses were received, from the population of approximately 160 detainees at the time. Eighteen per cent thought the food was 'very bad' or 'bad', while 45% were 'happy' or 'very happy'. The survey respondents were overwhelmingly happy with the portion sizes (79%), the diversity of food offered (84%) and the approachability of the serving staff (84%).

From 21 May to the end of December, there have been four complaints against Serco about food (13% of the total of 32 complaints). All four were unsubstantiated. For comparison, during 2019, 14 complaints from a total of 156 (9%) were about food.

5.3 Separation

The care and separation unit is a small separate unit of six rooms at the end of E wing which is normally used for detainees who have been placed on either Rule 40 (removal from association) or Rule 42 (temporary confinement) of the Detention Centre Rules. Detainees on Rule 40 may be located on E wing as well.

Rule 40 separation has been used 160 times during 2020. While this appears to be a reduction from 187 instances last year, it should be noted that the average population during 2020 has been less than half that in 2019.⁸

Data on Rule 40 during the first part of 2020 (while the centre was run by G4S) was considerably distorted by its simultaneous use on 45 detainees to manage removals for a charter flight to Jamaica in February. This included detainees not scheduled to fly and detainees who were on the charter but had not given any indication that they would resist removal. While understanding the desire of both the Home Office and G4S to ensure that removals for the charter were conducted with the minimum of disruption, the Board questioned whether this pre-emptive use of Rule 40 was justified and unnecessarily inclusive. Both G4S and the Home Office acknowledged that there had been difficulties in communication and planning for the charter.

⁸ 1 January to 20 May (contractor = G4S): average population at month end = 103.8.

21 May to 31 December (contractor = Serco): average population at month end = 85.0.

2019 January to December: average population at month end = 242.3.

	2020		2019	2018	2017	2016	2015
	21 May – 31 Dec	1 Jan – 20 May					
Rule 40 events	54	106	187	259	503	358	293
R40 events per 1,000 man-days in detention ⁹	2.68	7.24	2.11				
Average time on Rule 40	35.3 hours		46.5 hours	59.3 hours	32.0 hours	34.8 hours	36.0 hours
Rule 42 events	3	3	3	12	2	14	37
Average time on Rule 42	<24 hours		4.2 hours	16.8 hours			

Apart from the instance relating to the Jamaica charter, the Board believes that Rule 40 and Rule 42 have generally been used appropriately, and for suitable lengths of time. Members have attended Rule 40 reviews when these have occurred during their visits; they have not reported any concerns with the way they were conducted other than occasional problems with the use of interpreters, and have on occasion praised the sensitivity with which the reviews were conducted.

While, from information available, the average time on Rule 40 (in the period since 21 May) has been a little under 36 hours, one individual was maintained on Rule 40 for a total of 12 consecutive days in November. This detainee had been violent during his initial reception, and later caused injury to a member of staff. Although scheduled for a charter removal, he was in fact taken into police custody.

5.4 Serco and Home Office relationships with detainees

Change of contract provider

Serco took over operation of Brook House on 21 May. The transition and settling-in period has been considerably affected by pandemic measures and the change in August to charter-only operation. Serco has made a number of changes to the management of the centre – for example, in running Brook House and Tinsley House IRCs together and restructuring the senior management team. From the Board's observations, the mechanics of changing operators did not have a negative impact on detainees.

There has been a substantial increase in staffing numbers as Serco has recruited and trained officers to meet their contractual commitments. This has inevitably led to significant proportions of inexperienced officers on duty – for example, by the end of the year some 50% of detainee custody officers and 23% of detention operations managers (DOMs) were newly recruited or promoted – but the Board has not noted inappropriate behaviour or difficulties caused by this to relationships with, and care for, detainees.

⁹ Calculation made by the Board to show prevalence, using following formula: Number of R40 events * 1,000 / (days in period * average month-end population in period).

The previous low ratio of staff to detainees has been flagged as a key concern for the Board in our annual reports for the past three years, and we welcome the ongoing increase in staff numbers.

Changes to staff shift patterns has been a major source of discontent among some staff. Although hearing occasional negative comments from officers, the Board has not detected any impact on detainees.

Serco staff and detainee relationships

The Board's observation is that relationships between officers and the detainees appear generally positive. On numerous occasions throughout the year, Board members have recorded in rota reports observations of detainees being treated with dignity and respect, and we have witnessed good interactions and relationships. Members have also recorded examples of detainees telling us that they feel they are treated well. These observations must, however, be contrasted with the relatively high levels of formal complaints about staff behaviour (see below).

We have witnessed a few instances in which staff have expressed what appear to be desensitised points of view. This has included comments like, 'he can't be allowed to show that self-harm will stop deportation' (referring to a man who had just made a determined attempt to self-harm), or 'he's just spoilt' (referring to a man who was thought to be demanding). Although these are rare, the Board believes that DOMs and duty directors should send an immediate message when they are detected, particularly in light of historical problems with staff culture at Brook House.

The Board has also noted that attitudes of some staff towards self-harm and food and fluid refusals can at times lean towards a culture of disbelief – for example, sometimes referring to these as techniques for avoiding removal. While there is no evidence that these attitudes have had a negative impact on the care provided for detainees, it is the Board's view that self-harm and threats of suicide should be treated as signs of mental distress and treated with care and empathy. Again, we believe that any instances should be called out by DOMs and duty directors.

Soon after taking over operating the centre, Serco began a long-term programme of work around staff culture and developing a positive culture for all in the detention setting.

Complaints about staff behaviour

During the period of Serco's operation, since 21 May, 17 complaints have been made about staff behaviour (54% of the total of 31 complaints). Three of these complaints were dealt with by the Home Office professional standards unit (PSU). All three were for alleged assault: one was partially substantiated, another substantiated and one is ongoing.

Of the balance of 14 complaints about staff behaviour which were addressed by Serco, two related to alleged assault and the remainder to rudeness, unfair treatment and other unprofessional behaviour. Examples include complaints about the manner in which detainees have been spoken to, a complaint about loss of paid work and

complaints about an officer's appearance. Eleven of these 14 complaints have been completed, only one was partially upheld.¹⁰

The Board is not aware of any particular reason for the increased prevalence of complaints made about staff behaviour, and we will monitor this area in more detail in 2021.

In their response to a complaint made by a man about his treatment during an attempted removal, the PSU made recommendations about retraining a DOM involved in the incident, and being advised of their apparent confrontational and aggressive demeanour.

Home Office and detainee relationships

On 28 April, a serious incident was declared after over 20 detainees refused to lock up. Deep frustration about a lack of information from the Home Office about their cases and dissatisfaction with their continued detention appeared to be the key issues for the detainees involved.

Pandemic precautions have affected the Home Office's engagement with detainees. From September, DET engagement with detainees on reverse cohort wings was changed to being by telephone rather than face-to-face, until the detainees had completed their period of quarantine. In-person engagement with this cohort of detainees was resumed in visiting rooms after the fitting of COVID-19 protective screens in mid-December.

In late September, there was a pause in other face-to-face engagement as standard practice, after some new circumstances in the centre were identified as exposing DET staff to COVID-19 risks. After these were resolved in mid-December, there was a mix of telephone and in-person engagement with detainees.

On some occasions from September, these changes in work practices meant that Home Office staff would call in advance to a detainee to explain that removal directions were being served and that a Serco officer would bring the paperwork.

These practices are understandable for health and safety reasons, and the Board makes no criticism of individual DET members who were also subject to exceptional pressures caused by the pandemic and the charter programme. However, our focus is outcomes for detainees, and the Board raised concerns at the lack of Home Office personal contact on delivery of removal directions, which is an emotionally difficult time for most detainees. Serco and healthcare staff continued to have personal engagement with detainees throughout this period.

The Board also questioned the absence of Home Office personnel in ACDT or constant supervision reviews, being of the view that it would be fair and respectful to detainees to have a presence, given the impact of Home Office decisions on their lives. We have been told by the Home Office that it is the decision of the Serco manager to request Home Office presence if they wish, as their presence may have

¹⁰ In 2019, by comparison, 44 (26%) of 156 complaints against G4S were about staff behaviour; four of these were upheld or partially upheld. During the period of G4S's operation to 21 May 2020, there were nine complaints made about staff 'misconduct', from a total of 26 complaints (35%).

the effect of causing more distress to detainees, and that Home Office staff will attend reviews if they can be available.

The Board's view is that Home Office attendance at these reviews would have the added benefit of providing a direct line of information back to caseworkers who are making decisions about the future of affected detainees.

The detainee voice

Overall, this year the Board has noted that there have been fewer opportunities for detainees to be consulted or engaged – for example, in detainee forums. Unlike in previous years, no survey was conducted of detainee perceptions of safety, and there has been a lack of detainee representation in meetings. Starting on 6 March, through the early months of the pandemic, there were 'COVID forums' involving detainees, which may have helped their understanding of the measures being put into place.

The Board hopes that, going forward, the resumption of detainee consultation and involvement will be prioritised, and welcomes Serco's reintroduction of detainee consultation forums late in the year.

5.5 Equality and diversity

The Dublin Convention charter flight programme led to a fundamental change in the make-up of the detainee population, with the main nationalities affected being Iranian, Iraqi, Kuwaiti, Sudanese, Syrian and Yemeni. These are nationalities not usually seen in significant numbers in the centre.

At times, there was a high demand for professional telephone interpreting for Arabic and Farsi speakers especially, combined with delays in getting interpreters on the line or poor-quality connections with the interpreting service. As a result, Serco staff with language skills were deployed – particularly on constant supervision and ACDT reviews. While the Board would usually recommend the use of independent interpreters, from our observations it helped detainees in these extremely stressful circumstances to have someone they were familiar with interpreting for them. The Board acknowledges the work done by Serco staff here, in circumstances which were often deeply distressing for detainees and the staff supporting them.

Serco has introduced translation tablets for simpler and more utilitarian communication. The Board welcomes this, but there have been issues due to weak Wi-Fi signals on the wings. Wi-Fi boosters were to be installed late in the year but the Board has not yet had the chance to see if this has improved things.

The Board welcomes the plans by Serco to separate safer community and equality/diversity governance meetings, with the first diversity governance meeting having been held in February 2021.

5.6 Faith and religious affairs

The first national lockdown of the pandemic led to the cancellation of faith services for four months from late March. Services resumed with distancing and other limits, consistent with those in the wider community. For the Muslim population, there was

some innovation aimed at maximising participation in Friday prayers: they were held outdoors in warmer months and then, as the weather changed later in the year, the three imams each went to different wings.

Meal arrangements for Ramadan seem to have gone smoothly last year, and special meals and celebrations were put on for detainees and staff for both Eid and Christmas.

The Board acknowledges the spiritual support and comfort provided by members of the religious affairs team to many of the detainees, particularly those who were on ACDTs with constant supervision.

5.7 Complaints

During the period from 21 May, 31 complaints were made against Serco. Three relating to staff behaviour were dealt with by the PSU (see section 5.4). Of the balance of 28 complaints, 24 have been completed, with three (13%) being upheld or partially upheld, 16 (66%) being unsubstantiated and the remaining five (21%) withdrawn.¹¹ Complaints relating to food and property are dealt with in sections 5.2 and 5.8, respectively.

The Board's view is that the small number of complaints is likely to be the result of a combination of reduced detainee numbers and the shift in population in the latter part of the year. From our observations, it was not clear that this group of detainees were as familiar with, or confident about, the complaints process.

The Board does not see replies to complaints made against the Home Office, or those made against either G4S healthcare or Mitie staff. Complaints related to healthcare are covered in more detail in section 6.1.

As in previous years, the Board's view is that complaints are generally taken seriously and thoroughly investigated, although we still have the reservations expressed in last year's annual report about the overall process and its inherent barriers to a detainee being able to make a case.

5.8 Property

There have been some issues with detainees' mobile phones being confiscated on arrival at Dover or property being left behind when detainees have been picked up by immigration enforcement staff from hostels or hotels. In some instances, this property appears to have gone missing or taken an inordinate time to arrive at Brook House. Detainees have been particularly distressed by the confiscation of their mobile phones, as this is sometimes the only place that they store family telephone numbers.

To have their property returned, detainees have been told to contact a Home Office email address or telephone number but they complain that the telephone is never picked up and emails are not answered. The Board can confirm that this is the case.

¹¹ For comparison, a total of 156 complaints were made against G4S in 2019. Twenty were upheld or partially upheld (13%), and four were withdrawn. Ten complaints were dealt with by the PSU, with one being partially upheld. During the period of G4S's operations to 21 May 2020, there were 54 complaints against them.

It is not reasonable or fair that detainees are expected to be calling and chasing – the Home Office should implement a system to relocate confiscated or lost property.

While the local DET was able to help in recovering and returning some mobile phones to their owners by year-end, at the time of writing it is not clear that Border Force has yet implemented a system to address the problem.

During the period of Serco's operation from 21 May, two complaints were made about missing property (6% of the total of 32 complaints). One was upheld and the other upheld but withdrawn. For comparison, in 2019 42 out of 156 complaints made were about property (27%) – lost, stolen, withheld or damaged.

6. Health and wellbeing

6.1 Healthcare: general

G4S Health is commissioned by NHS England to supply healthcare services. Healthcare staff are available 24 hours a day, seven days a week. There is no in-patient facility.

The facilities at the centre include two consultation rooms plus waiting area, a dedicated mental health interview room and two rooms within the centre's main arrivals area for preadmission screening. The Board's annual reports for 2018 and 2019 commented on the inadequate flooring in the consultation rooms. This was resolved in 2020.

From March 2020, restrictions in place around the centre changed the provision of healthcare services from a drop-in/triage/proactive arrangement to an appointment-based system, with medication being delivered to the wings rather than collected from the healthcare team. At the end of March, Tinsley House IRC was closed for detainees and this allowed G4S Health to consolidate its resources at Brook House. There were no significant issues in securing personal protective equipment for staff and detainees during the year. NHS England held supportive quarterly meetings during the pandemic which have been attended by representatives from the healthcare team, the Forward Trust, Home Office and Serco, and a member of the Board.

The already heavy demands on healthcare staff due to the pandemic were significantly increased from July onwards with the arrival of large numbers of very vulnerable detainees. High levels of both mental health and physical health issues appear to have been exacerbated by the stress and anxiety resulting from their detention in the centre and the prospect of removal to EU countries. In addition, many of these detainees presented at Brook House with no medical records, and detailed medical assessment of some conditions resulted in hospital appointments and delays in the prescription of appropriate medications.

Meeting the complex needs of this population included responding to emergency calls for incidents of self-harm, attending ACDT, constant supervision, and food and fluid refusal reviews, and responding to the huge increase in Rule 35 appointments and requests from solicitors for information. The result was a more reactive service based on the complex medical needs of this population, rather than a proactive and precautionary healthcare service.

There were 24 formal complaints received by the healthcare team during 2020, 15 related to medical care and two to staff attitude; none were upheld. While these are all much lower than numbers in 2019 (when 60 formal complaints were received, 28 relating to medical care and eight to staff attitudes), the average population in 2020 was much lower too.

Complaints are discussed at the quarterly quality meetings, which are attended by a member of the Board. The Board does not see healthcare complaints, but we understand that lessons learnt principally involve appropriate communication with detainees.

The Board received 13 healthcare-related applications from detainees last year, down from 19 in 2019, although, again, we note the lower population this year.

Despite the challenges presented by the pandemic, the Board considers that detainees were able to access an appropriate service for their physical health, equivalent to that available to the community during the year. The Board recognises the great pressures that healthcare staff were under in 2020, as was the case in the wider community, and acknowledges the services and support they provided to detainees.

6.2 Physical healthcare

All arriving detainees see a nurse at reception for an initial health screening within the first two hours of their detention and are offered an appointment with a GP within the first 24 hours, although not all choose to take this up.

With the onset of the pandemic, healthcare staff carried out a preliminary screening, in the transporting vehicle, of all new arrivals before they entered the centre. From late October, this preliminary screening was followed up with a lateral flow test for COVID-19. This test was not mandatory and, of the 290 tests offered before year-end, 82 were declined.

In March, consistent with changes in the wider community, detainees with underlying health conditions making them vulnerable to COVID-19 were advised that they should be located together in a separate quarantine wing. All 19 affected detainees declined, preferring to stay with a wider group of detainees than be more isolated. The Board understands that they signed acknowledgements of the advice given. There were no detainees in the centre who were required to 'shield' for COVID-19 reasons.

Isolation areas were established in case any detainees show symptoms of the virus. One detainee tested positive in April and although a further 22 were isolated at different times during the year because of symptoms, none proved positive until December. At that time, four detainees tested positive and most of the centre was put into outbreak status as a result. A significant number of Serco staff also tested positive in December.

Access to healthcare for a detainee is initially via a nurse, who, if necessary, will refer the patient on to a doctor. The waiting time to see a GP has generally been less than three days during the year and emergency appointments are always available. From March onwards, procedures were in place for nurses to visit the wings daily or staff could contact the healthcare team to arrange a medical appointment on behalf of a detainee.

Care that cannot be provided at the centre involves a visit to hospital. There were 133 off-site hospital appointments during the year, with two emergencies requiring an ambulance in the period from January to June, and nine emergencies from July to December. All hospital visits involve Serco staff acting as escorts.

Healthcare staffing levels continue to be a concern, but agency staff have been used to fill vacancies. We understand that recruitment efforts have continued throughout the year.

G4S Health's provision of 'wellman' clinics stopped from March and these were not restarted, which we understand is comparable to care in the community. Smoking cessation clinics stopped from March and, although they restarted in September, they stopped again from November due to pandemic restrictions.

The Forward Trust continued to provide psychosocial substance misuse services to detainees throughout the year by being present on the wings to support detainees individually, but groupwork ceased. Demand for their services appeared to drop significantly with the change in population.

Monthly visits to the centre by an optician stopped from March and could have restarted but their services were not required. Weekly visits by Boots the chemist, which focuses on long-term medication issues, did return from September but ceased when the centre went into outbreak status in December.

The Board is disappointed that the agreed provision of a mobile dental unit was delayed by the pandemic. We understand that the provision of a dental suite is covered under the new healthcare provider contract due to start on 1 September 2021.

6.3 Mental healthcare

G4S Health provides the primary mental healthcare and subcontract Elysium Healthcare to provide secondary care.

There are four registered mental health nurses on the team (3.6 full-time equivalents), and there is a mental health nurse on site seven days a week. Psychiatrists visited weekly and we are told that the waiting time for an appointment is a maximum of seven days.

Group talking therapy sessions were suspended in March but restarted in June and continued until the pandemic outbreak status in December.

The mental health team was extremely stretched in attending to the complex needs of the population and the Board questioned whether there should be additional resource, but no staff were added (see also section 4.2).

Given the recognition of the harmful effects of isolation on mental health in the wider community during the pandemic, the Board is disappointed that there was no additional funding or resource to focus on the impact of isolation on the mental health of detainees in detention in Brook House in 2020.

No detainees were placed under section 48 of the Mental Health Act in 2020.

There was a huge increase in the need for Rule 35 appointments from September. G4S Health and the Home Office responded to this by increasing available

appointments with the GPs from 14 to 26 per week from September. Despite the increase in appointments, there were still long delays and backlogs, contributing to high levels of anxiety in the centre (see also section 4.4).

G4S Health report that, during the period January to July, a total of 85 Rule 35 assessments were conducted, with a typical waiting time of three days. Forty-five were conducted in August, and then 85 in September, 112 in October, 101 in November and 49 in December.

6.4 Welfare and social care

The Board has found that the welfare team continues to be supportive and sympathetic to the needs of detainees. There have been times during the year when they have been extremely stretched but we are pleased to note that Serco has plans to boost the team by an additional 18 staff across both Brook House and Tinsley House in 2021.

The welfare team provided support to detainees in contacting their lawyers and other organisations, such as Gatwick Detainees Welfare Group (GDWG) and Bail for Immigration Detainees (BID). During the times of restricted movement around the centre, welfare staff made daily visits to each wing to meet newly arrived detainees, and attended induction sessions to ensure that detainees were aware of the assistance they could offer.

6.5 Exercise, time out of room

Under the terms of the new contract with Serco, from 1 October, unlocked time out of rooms was extended by two hours between 7am and 10pm each day. Pandemic restrictions required a rota system to be put in place to prevent association between detainees from different wings. This resulted in reduced access to usually free association areas such as the gym and some courtyards, and generally reduced opportunities for social interaction between detainees. Detainees were still given access to fresh air on yards directly connected to their wings, and a limited amount of gym equipment was provided on most wings during this time.

In our annual reports for 2018 and 2019, the Board has been critical of what we consider to be inadequate and inconsistently delivered programmes of organised and purposeful activities for detainees. It is too soon to assess whether Serco has made the necessary changes but there are positive signs, with an increase in the number of activities staff and investment in gym and other equipment, such as pool tables and football posts.

6.6 Soft skills

Art classes were suspended due to the pandemic but, after a request from detainees, the art room reopened on a restricted basis early in May. Staff ran ad hoc sessions on the wings when the centre was under further pandemic restrictions. The cultural kitchen, which has been extremely popular in recent years, was closed during most of the year from March, following pandemic guidance relating to the size and capacity of the room and concerns around the sharing of food prepared there.

7. Preparation for return or release

7.1 Activities including education and training

Pandemic social distancing restrictions introduced in March meant the suspension of classes and activities in the education rooms and closure of the library. Overall, in 2020 there was a major reduction in the range and frequency of scheduled education classes, although there was some adaptation, with some materials moved online and teachers running small informal classes on the wings.

The library remained closed until February 2021.

As has been the case for many years, the centre did not offer any vocational training programmes of note for detainees.

Access to IT rooms was continued through the year, although on a reduced basis from March. Internet access was made available on wings where detainees were required to remain while reverse cohorting.

These different arrangements for IT access, combined with small numbers in the centre, generally appeared to meet the needs of detainees. There was a noticeable drop in the use of the IT rooms with the shift in detainee population. It is not clear to the Board whether this was due to a lack of need or lack of information about the IT facilities on induction.

In our annual report for 2019, the Board's view was that the overall provision of IT for detainees was barely adequate, with difficulties in printing certain documents, slowness of internet connections and some websites unnecessarily blocked. The Board understands that Serco has made investment in both IT hardware and infrastructure, and we are told that there should no longer be long delays in dealing with requests to unblock sites. It is too soon to tell the impact of this, but it is welcome news.

7.2 Case management

Access to legal advice

Pandemic restrictions had an impact on in-person legal visits at different times in 2020 but, from our monitoring, there was generally no significant impact on the ability to get legal aid appointments – albeit usually remotely by telephone or Skype. COVID-19 protective screens were put up in some rooms in the visits area in July, but there was little uptake for on-site visits by solicitors (see also section 7.3).

BID ceased on-site surgeries from March but continued to provide a telephone service, and it had a high success rate in getting bail for the detainees it represented.

There was especially high demand for legal support from detainees brought in for Dublin Convention flights, and almost all seemed eligible for legal aid. In early September, a number of detainees refused to lock up for several hours, with one of their issues being about solicitors not returning calls. In response, the number of legal aid firms was increased, to provide appointments five days a week. Wait times for legal aid appointments were generally shorter than in previous years – often being available within 72 hours and sometimes the next day, although at one point in late November there was an 11-day wait.

Whether or not a detainee was removed on a charter often depended on work done by his lawyer, and, understandably, many detainees were very anxious about contacts. As well as the frustration and anxiety of detainees demonstrated by the incident in September, there were some informal complaints about problems with telephone connections, both for lawyers and detainees, in October and November.

Some detainees told us that they preferred to stay on their wings or yards, where they knew there was mobile reception, rather than risk going to other areas of the centre, in case they miss a call. There were also informal complaints about some calls not being returned by lawyers. The welfare team was regularly deployed to help detainees with their legal contacts.

Length of time in detention

Detention at Brook House is intended to be short term. Below is a snapshot on length of stay in the centre, from information provided by the Home Office.

	Jan 2020	July 2020	Nov 2020	Dec 2020
Total number of detainees at month end	197	78	161	4
Less than 1 week	85	32	39	0
1 week – 1 month	28	1	111	1
1 – 2 months	30	14	9	2
2 – 6 months	42	19	1	1
6 – 12 months	10	9	1	0
1 – 2 years	1	3	0	0
Over 2 years	1	0	0	0

The drop in total population by July 2020 was due to the large number of releases that the Home Office made after the onset of the pandemic meant that there was no reasonable prospect of removing detainees on international flights. Those who remained the longest were primarily time-served foreign national prisoners (TSFNOs) who the Home Office determined to be high risk to release, but by August only four TSFNOs remained and they were transferred to another IRC.

Detainees who remained often expressed frustration with the Home Office and what they regarded as unfairness about their continued detention when seeing so many other detainees released. There was a sense that detainees felt they had been left behind. This was exacerbated for those who were granted bail but then subjected to long delays before release while the Home Office found suitable accommodation for them (see also section 7.4).

The acceleration of releases after March due to the pandemic, and the high level of turnover of detainees for the Dublin Convention charter programme later in the year make it difficult to draw meaningful comparisons between figures for 2020 and those for earlier years.

Removal and release rates

In 2020, an average of 53% of all detainees leaving Brook House each month were released into the community, while an average of 39% were removed from the UK. The balance of 8% were transfers to other detention centres or to prisons. This release rate is even higher than in 2019 (44% monthly average) and, even allowing for increased releases in the first half of the year due to the pandemic, raises again the question of whether so many detainees should have been in detention at all. The only basis for detention should be to facilitate removal, and yet 53% of detainees leaving Brook House in 2020 were released rather than removed, and in the interim had been exposed to the potentially harmful effects of detention on their physical and mental health.

The question is even more pertinent in the period from August to December, when the Home Office ran its programme of Dublin Convention charter removals. In this time, releases actually rose to 72% of all leavers and the rate of removal dropped to 21%. From the Board's estimates, between August and December, over 600 detainees who were detained for varying lengths of time in Brook House to prepare them for removal from the UK were eventually released instead. This sits beside data for the same months which shows that significant numbers of detainees were either on constant supervision or ACDTs and with high levels of actual or threatened self-harm or suicide risk in circumstances of great stress and anxiety for all detainees in the centre.

Twenty-six flights were originally planned for the charter programme. Some of the flights had to be cancelled or were junctured. The Board estimates that fewer than 120 detainees were removed from the centre under the Dublin Convention programme.

7.3 Family and other contact

Social visits were not permitted at different times in 2020 due to national lockdowns or local pandemic rules. From March, the Home Office gave an extra £10 per week phone credit to each detainee, to help with continued contact with family, solicitors and others.

From the Board's observations, both G4S and Serco made it a priority to give detainees access to the usual visits area rooms for use of Skype or Facetime, and a room was also set up on each wing by early September to allow video calls. There were connectivity issues with Skype from time to time, but the Board did not receive any complaints from detainees.

There was a significant drop in demand for social visits from August onwards, presumably because the population, consisting largely of detainees who had crossed the Channel on small boats, had fewer family and friends in the UK. GDWG suspended on-site visits in March but continued to provide telephone-based support for detainees. Throughout the year, the Board continued to recommend detainees to GDWG, including those who appeared affected by isolation.

While detainees could have telephone or video access in place of visits, the loss of in-person contact from social and legal visits, and from others such as BID, GDWG and other non-governmental organisations, is likely to have contributed to the sense of isolation and being left behind (see also section 7.2). There was also reduced contact

with other detainees due to pandemic restrictions, especially for socialising on the yards with those from other wings.

7.4 Planning for return or release

Home Office delays in finding suitable bail accommodation was a major source of frustration for larger than usual numbers of detainees from early April to August, when the last TSFNOs were transferred from the centre.

The situation was often worsened by the fact that a grant of bail could lapse after 28 days and, if accommodation had not been found, the detainee might have to make a fresh application and go through the process again. While recognising the 'competition' for accommodation during the pandemic, the Board noted a sense among the detainees that their Home Office caseworkers were not motivated to persist on their behalf. The local DET members regularly chased caseworkers for updates.

Many of the detainees affected were level 2 or 3 on the AAR log. For example, on 29 April, 12 detainees (nearly 20% of the centre's total population) were waiting for bail accommodation and just under half of them were level 2 AAR. One man first granted bail in March was still waiting for accommodation in August, when he was transferred to another IRC.

There appeared to be a complete absence of meaningful information provided to detainees about what would happen to them in receiving countries if they were removed under the Dublin Convention charter programme. The Board's view is that this poor level of engagement by the Home Office exacerbated the anxieties and distress of detainees in the centre.

In early September, 28 detainees started refusing food after hearing from former detainees removed to Spain that they had just been left at the airport without any assistance from Spanish authorities and been told that they must leave Spain. Subsequent press reports showed the detainees to be homeless. As far as the Board is aware, the Home Office did not reply to a formal complaint by 23 detainees asking that their cases be considered in light of this. The next charter to Spain was injunctioned.

8. The work of the IMB

The pandemic has had an impact on the Board's monitoring. While we were able to continue on-site visits in all but three weeks in 2020, we made fewer total visits than we typically would.

The Board adopted two wider IMB national initiatives to aid accessibility for detainees. In April, we introduced an email address and in May we added an 0800 telephone number voice message service. Only 12 calls were received for the Board on the 0800 voicemail and less than a handful of emails were received.

Despite repeated requests made to both Serco and the Home Office, the Board has not had access to the centre's database of detainee information (CMS) since 21 May. At the time of writing, steps are under way to give access. The Board has a right to access the records of the centre under Detention Centre Rule 63(3).

Effective from 1 January 2021, Brook House IMB and Tinsley House IMB have merged and will operate as a single Gatwick IRC IMB going forward. This will be the last report from the Brook House Board.

Board statistics

Recommended complement of Board members	12
Number of Board members at the start of the reporting period	9
Number of Board members at the end of the reporting period	9
Total number of visits to the establishment	123

Applications to the IMB

Code	Subject	Previous reporting year	Current reporting year
A	Accommodation, including laundry, showers	8	0
B	Use of force, removal from association	n/a	1
C	Equality	1	0
D	Purposeful activity, including education, paid work, training, library, other activities	5	0
E 1	Letters, faxes, visits, telephones, internet access	10	1
E 2	Finance, including detainees' centre accounts	2	0
F	Food and kitchens	1	1
G	Health, including physical, mental, social care	19	13
H 1	Property within centre	2	0
H 2	Property during transfer or in another establishment or location	4	3
I	Issues relating to detainees' immigration case, including access to legal advice	53	14
J	Staff/detainee conduct, including bullying	5	1
K	Escorts	1	1
L	Other	7	1
	Total number of applications	118	36