

Report on an unannounced inspection of

Brook House Immigration Removal Centre

by HM Chief Inspector of Prisons

20 May – 7 June 2019

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Glossary of terms

We try to make our reports as clear as possible, but if you find terms that you do not know, please see the glossary in our 'Guide for writing inspection reports' on our website at: <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Introduction

Brook House is an immigration removal centre on the perimeter road of Gatwick Airport. It was last inspected in November 2016. It is operated by G4S, and holds adult male detainees. Since the last inspection the number of detainees held in the centre has reduced from nearly 400 to around 240.

About 10 months after the last inspection a BBC *Panorama* programme was broadcast which showed members of staff at Brook House acting in what seemed to be a violent and inappropriate manner towards detainees. A subsequent police enquiry submitted case papers to the Crown Prosecution Service, but no prosecutions were brought as a result of the criminal investigation. A further enquiry was carried out at the behest of G4S by Kate Lampard QC, and this found a number of failings in the culture and management of the establishment. At the time of this inspection a further enquiry had been commissioned by the Home Office, which is to be carried out by the Prisons and Probation Ombudsman, but at the time of writing it had been delayed pending the legal action.

Following the *Panorama* disclosures, we wanted to establish whether we had missed indications of abuse or poor behaviour during our inspection in 2016. There was no evidence that the inspection could or should have found anything similar to what was exposed by the programme; we nevertheless decided to implement what we have termed an 'enhanced methodology' at IRCs. This has involved deploying additional inspection staff to conduct extensive interviews with detainees and staff at the centre. Every detainee is now offered the opportunity to speak privately to an inspector, using interpretation where needed. With the help of community support groups, this offer is also extended to detainees who have left the centre. Inspectors undertake confidential interviews with a proportion of staff from all disciplines working in the centre, and issue a survey to all staff. This methodology provides multiple opportunities to identify potential concerns.

We found no evidence that the abusive culture shown by the *Panorama* programme was present among the current staff group at Brook House. On the contrary, our detainee survey and interviews found that most detainees were positive about the way they were treated by staff. We found improved training of staff employed in the centre, whistleblowing procedures that staff members had confidence in, and a much-improved ratio of staff numbers to detainees.

This inspection found that the judgements we made in each of the four healthy establishment tests were exactly the same as at the last inspection. We found that the appropriate assessment was of 'reasonably good' in all areas. However, the judgements themselves mask some distinct and positive developments, brought about by a determination to address the issues raised by the TV programme, to change and to improve. Nevertheless, the managers of the centre are very aware that there is still much to do.

In terms of safety, levels of violence were low. However, there was a need to understand why instances of self-harm had significantly increased and respond to our survey finding that 40% of detainees said they had felt suicidal at some point while in the centre. We also found that detainees spent too much time locked in their cells, and some aspects of security were unnecessarily stringent. The detainees who told us they did not feel safe tended to cite the uncertainty of their position and what the future held for them as the reason for this. At the last inspection we commented that the average length of detention had increased, and that not enough had been done to understand why. On this occasion we found that the average length of detention had markedly declined. However, as before, the precise reasons for this were far from clear, although where people were held for lengthy periods, our findings suggested this was due to delays in casework, as well as problems in finding suitable accommodation and in obtaining travel documents. We have commented before that when detainees have served a prison sentence before entering immigration detention, it would be beneficial if the removal process could be started in good time, while they were still serving their sentence. With nearly half of the detainees at Brook House having served prison sentences, the opportunities to speed up processes should be clear.

As noted above, relationships between staff and detainees were generally very positive, and this was undoubtedly helped by the increase in staff numbers and the decline in the number of detainees. The living accommodation still resembled a prison, but it was in good condition and kept very clean. We were concerned by the way complaints were dealt with. Although responses were prompt, we found that only one out of 95 complaints had been upheld, and we saw clear examples where a complaint should have been upheld. We also found, surprisingly for an establishment such as Brook House, that insufficient attention was paid to matters of equality and diversity. The approach the centre takes to this needs to be reinvigorated and senior management attention properly focused.

Many detainees told us they did not have enough to do to fill their time. While it is true that most detainees do not spend long at the centre, the uncertainty that many of them face is such that they should receive more encouragement to take part in work, education or other activities. While some of the provision was good, we were of the view that Brook House should carry out a review of the overall provision of activities, to see which are underused, and whether new activities could be introduced. Detainees were often understandably anxious and preoccupied by their cases, yet there were not enough activities to promote well-being, relaxation or stress relief.

We found that welfare provision was a strength of the centre and generally met the needs of detainees. However, there were still some unnecessary obstructions for detainees preparing either for their release or removal from the UK. For instance, it was still the case that far too many websites were needlessly blocked for detainees. This included, for instance, sites offering advice on immigration matters or legal advice. Some daily newspaper sites were also blocked, for unfathomable reasons. This has been a longstanding issue and resolution is well overdue.

Brook House has faced some very serious problems over the past two years, with investigations and legal actions following the *Panorama* revelations. Nevertheless, it is to the credit of the leadership and staff that they have been determined to prevent any recurrence of poor behaviour or abuse, and to inject an appropriately respectful culture into the centre, supported by improved training, better supervision of staff and positive relationships with the detainees.

Peter Clarke CVO OBE QPM
HM Chief Inspector of Prisons

July 2019

Fact page

Task of the establishment

The detention, care and welfare of adult detainees subject to immigration control.

Certified normal accommodation and operational capacity

Detainees held at the time of inspection: 239

Baseline certified normal capacity: 454

In-use certified normal capacity: 454

Operational capacity: 448

Notable features from this inspection

In our survey, nearly half the detainees said they had little or no understanding of spoken or written English.

Fewer detainees were held and for shorter periods than at our last inspection, but 11 detainees were held for more than six months and two for more than a year. The longest consecutive detention was one year eight months.

Staff numbers had increased and the number of detainees had decreased by about 40% (from 391 to 239) compared to the last inspection.

The residential units were built to the specification of category B prison wings with two or three landings, and the rooms were identical to prison cells.

Ninety-five complaints had been received in the previous six months, only one of which had been fully upheld.

During the period from October 2018 to March 2019, 54% of detainees leaving Brook House were released into the community.

Name of contractor

G4S

Key providers

Escort provider: Mitie Care and Custody

Health service commissioner and providers: NHS England, G4S Health Services (UK) Ltd

Learning and skills providers: G4S

Location

Gatwick Airport

Brief history

Brook House opened in March 2009 and is a purpose-built immigration removal centre with a prison design. It holds a mix of detainees, including a number who are regarded as too challenging or difficult to manage in less secure centres and those waiting to be removed from the UK on organised charter flights. Operational capacity increased in April 2013 by 22 bed spaces, certified as normal accommodation but predominantly used as pre-departure accommodation. In 2016 the operational capacity increased by a further 60 beds, but these have since been removed.

Short description of residential units

The centre has four main wings (A, B, C and D). Three wings have three landings and the fourth, the induction wing, has two landings. The ground floor of the induction wing is a discrete unit (E wing) used to manage detainees with complex needs and for removal from association/temporary confinement.

Name of centre manager

Phil Wragg

Independent Monitoring Board chair

Mary Molyneux

Last inspection

October-November 2016

About this inspection and report

- A1 Her Majesty's Inspectorate of Prisons is an independent, statutory organisation which reports on the treatment and conditions of those detained in prisons, young offender institutions, immigration detention facilities and police custody.
- A2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT). OPCAT requires that all places of detention are visited regularly by independent bodies – known as the National Preventive Mechanism (NPM) – which monitor the treatment of and conditions for detainees. HM Inspectorate of Prisons is one of several bodies making up the NPM in the UK.
- A3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy establishment. The four tests of a healthy establishment are:
- | | |
|--|--|
| Safety | that detainees are held in safety and with due regard to the insecurity of their position |
| Respect | that detainees are treated with respect for their human dignity and the circumstances of their detention |
| Activities | that the centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees |
| Preparation for removal and release | that detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their destination country and be prepared for their release, transfer or removal. Detainees are able to retain or recover their property. |
- A4 Under each test, we make an assessment of outcomes for detainees and therefore of the establishment's overall performance against the test. In some cases, this performance will be affected by matters outside the establishment's direct control, which need to be addressed by the Home Office.
- **outcomes for detainees are good against this healthy establishment test.**
There is no evidence that outcomes for detainees are being adversely affected in any significant areas.
 - **outcomes for detainees are reasonably good against this healthy establishment test.**
There is evidence of adverse outcomes for detainees in only a small number of areas. For the majority, there are no significant concerns. Procedures to safeguard outcomes are in place.
 - **outcomes for detainees are not sufficiently good against this healthy establishment test.**
There is evidence that outcomes for detainees are being adversely affected in many areas or particularly in those areas of greatest importance to the well-being of detainees. Problems/concerns, if left unattended, are likely to become areas of serious concern.

- **outcomes for detainees are poor against this healthy establishment test.** There is evidence that the outcomes for detainees are seriously affected by current practice. There is a failure to ensure even adequate treatment of and/or conditions for detainees. Immediate remedial action is required.

A5 Although this was a custodial establishment, we were mindful that detainees were not held because they had been charged with a criminal offence and had not been detained through normal judicial processes. In addition to our own independent *Expectations*, the inspection was conducted against the background of the Detention Centre Rules 2001, the statutory instrument that applies to the running of immigration removal centres. Rule 3 sets out the purpose of centres (now immigration removal centres) as being to provide for the secure but humane accommodation of detainees:

- in a relaxed regime
- with as much freedom of movement and association as possible consistent with maintaining a safe and secure environment
- to encourage and assist detainees to make the most productive use of their time
- respecting in particular their dignity and the right to individual expression.

A6 The statutory instrument also states that due recognition will be given at immigration removal centres to the need for awareness of:

- the particular anxieties to which detainees may be subject and
- the sensitivity that this will require, especially when handling issues of cultural diversity.

A7 Our assessments might result in one of the following:

- **recommendations:** will require significant change and/or new or redirected resources, so are not immediately achievable, and will be reviewed for implementation at future inspections
- **examples of good practice:** impressive practice that not only meets or exceeds our expectations, but could be followed by other similar establishments to achieve positive outcomes for detainees.

A8 Five key sources of evidence are used by inspectors: observation; detainee surveys; discussions with detainees; discussions with staff and relevant third parties; and documentation. During inspections we use a mixed-method approach to data gathering and analysis, applying both qualitative and quantitative methodologies. Evidence from different sources is triangulated to strengthen the validity of our assessments.

A9 We also offer every detainee a confidential interview with an inspector (see Appendix V). In Brook House, 65 detainees took up this offer. Professional interpreting was used whenever necessary and 12 of those detainees were interviewed with an interpreter. We issued an invitation to recent ex-detainees to speak to us through various groups, and a further two detainees took up this offer. The total number of detainees interviewed was therefore 67.

A10 We interviewed 37 centre staff working in operational roles. They included detainee custody officers, health services staff and staff in the Home Office teams. In addition, we issued an electronic staff survey over the same period, which elicited 43 responses. All responses were anonymous and some of the survey respondents and interviewees might have been the same

people. The staff survey responses and interview responses are reported together in Appendix VI.

- A11 The interviews with both detainees and staff were semi-structured, and took place from 21 to 29 May 2019. The main objective of this methodology is to give detainees and staff an opportunity to tell inspectors confidentially about concerns over safety and the treatment of detainees. We follow up serious allegations whenever there is sufficient information to do so, and report on relevant outcomes in the main body of the report. The results of these further interviews and survey are used as sources of evidence to inform the rounded judgements made by inspectors in the body of this report.
- A12 Since April 2013, all our inspections have been unannounced, other than in exceptional circumstances. This replaces the previous system of announced and unannounced full main inspections with full or short follow-ups to review progress. All our inspections now follow up recommendations from the last full inspection.
- A13 All inspections of immigration removal centres are conducted jointly with Ofsted or Education Scotland, the Care Quality Commission and the General Pharmaceutical Council (GPhC). This joint work ensures expert knowledge is deployed in inspections and avoids multiple inspection visits.

This report

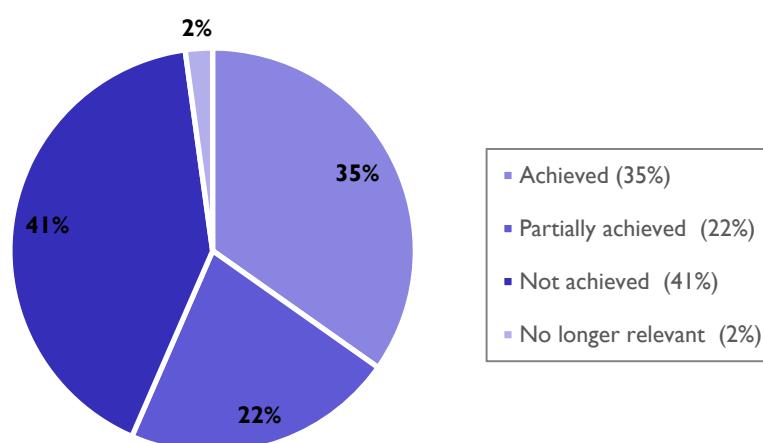
- A14 This explanation of our approach is followed by a summary of our inspection findings against the four healthy establishment tests. There then follow four sections each containing a detailed account of our findings against our *Expectations. Criteria for assessing the conditions for and treatment of immigration detainees*. The reference numbers at the end of some recommendations indicate that they are repeated, and provide the paragraph location of the previous recommendation in the last report. Section 5 collates all recommendations, housekeeping points and examples of good practice arising from the inspection. Appendix II lists the recommendations from the previous inspection, and our assessment of whether they have been achieved.
- A15 Details of the inspection team and the detainee population profile can be found in Appendices I and IV respectively.
- A16 Findings from the survey of detainees and a detailed description of the survey methodology can be found in Appendix V of this report. Please note that we only refer to comparisons with other comparable establishments or previous inspections when these are statistically significant.¹ Appendices V and VI contain results of confidential one-to-one interviews with detainees and staff, and a staff survey.
- A17 This report is the first on an IRC since HMI Prisons moved to a model of having a smaller number of recommendations overall, but more 'key concerns and recommendations'. This is to identify more clearly the issues of greatest importance in achieving positive outcomes for detainees.

¹ The significance level is set at 0.01, which means that there is only a 1% chance that the difference in results is due to chance.

Summary

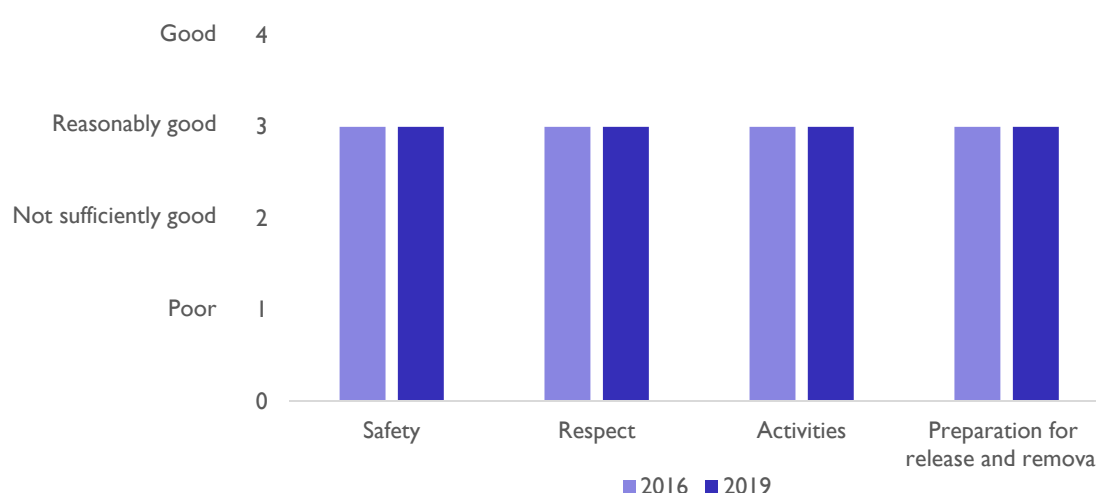
- S1 We last inspected Brook House IRC in 2016 and made 46 recommendations overall. The centre fully accepted 31 of the recommendations and partially accepted or accepted, subject to resources, nine recommendations. It rejected six of the recommendations.
- S2 At this follow-up inspection we found that the centre had achieved 16 of those recommendations, partially achieved 10 recommendations and not achieved 19 recommendations. One recommendation was no longer relevant.

Figure 1: Brook House IRC progress on recommendations from last inspection (n=46)



- S3 Since our last inspection outcomes for detainees stayed the same in all healthy establishment tests; outcomes were reasonably good in each healthy establishment test.

Figure 2: Brook House IRC healthy establishment outcomes 2016 and 2019²



² Please note that the criteria assessed under each healthy establishment test were amended in January 2018. Healthy establishment outcomes reflect the expectations in place at the time of each inspection.

Safety

- S4 *Arrival and early days arrangements were generally good, but initial risk assessment was not sufficiently thorough or confidential. Detainees reported good personal physical safety and there were few recorded assaults on detainees. Self-harm had increased significantly and ACDT procedures were not consistently applied. Some aspects of security were disproportionate and detainees spent long periods locked behind their doors. Procedural security was sound and anti-corruption measures were good. Rule 35 reports gave clear judgements but were not submitted for suicidal ideation. Whistleblowing procedures were understood by staff and they were willing to report concerns. Use of force was generally proportionate and governance was good. The use of separation was high but adequately justified in the cases we reviewed. The average length of detention had reduced markedly, but the lack of a detention time limit was often cited by detainees as affecting their feelings of wellbeing. There were enough legal advice surgeries and waiting times were short. **Outcomes for detainees were reasonably good against this healthy establishment test.***
- S5 *At the last inspection in 2016, we found that outcomes for detainees in Brook House IRC were reasonably good against this healthy establishment test. We made 20 recommendations about safety. At this follow-up inspection we found that four of the recommendations had been achieved, five had been partially achieved and 11 had not been achieved.*
- S6 Over a third of detainees continued to be transported to the centre overnight, many from other centres or after long waits in police stations. The reception environment and facilities were good. Most detainees spoke positively of their treatment on arrival. Detainee interviews were not conducted in private and did not cover enough areas of possible vulnerability and risk. There was not enough use by reception staff of professional interpreting. The induction unit was clean and in a good state of repair, with suitably equipped cells. The induction process was reasonably informative.
- S7 At the start of our inspection, the centre held 46 adults at risk of harm: 30 at level two, 16 at level one and none at level three. Joint working between the Home Office, G4S and health care to identify vulnerable adults was good. Supported living plans used to care for the most vulnerable cases were good in theory but plans were not completed well enough to be a helpful tool for staff to care for detainees. Attendance at the weekly adults at risk meeting was reasonably good but only a few cases were discussed in detail.
- S8 G4S whistleblowing procedures were promoted widely throughout the centre, and a reporting line had been used seven times in the previous six months. All staff in our survey said that they would report inappropriate behaviour, usually to managers, and most thought they would be taken seriously if they raised concerns. Security information reports showed that staff were alert to the potential for corruption and inappropriate behaviour by other staff.
- S9 Rule 35 reports gave clear judgements but the reasoning behind the judgements was not always clear. Many commented on mental health issues in general but lacked specific consideration of post-traumatic stress disorder. Responses were largely timely. In the six months from October 2018 to March 2019, 14% of responses had led to release. In our sample, case owners often accepted the report as evidence of torture but maintained detention. Despite a higher level of self-harm than at the last inspection, and nearly a hundred constant watches in the previous six months, no Rule 35 reports had been completed on suicidal ideation.
- S10 In our survey, 40% of detainees said they had felt suicidal while in the centre, reflecting a high level of distress among the population. The number of self-harm incidents had risen

substantially since the previous inspection. The quality of ACDT³ documentation was not good enough. Assessments and reviews were timely but care maps frequently lacked detail, case reviews were not sufficiently multidisciplinary and some post-closure reviews were not completed. ACDT observations were regular but did not always demonstrate enough meaningful engagement. Not all key departments attended the safer community meetings and there was little evidence of actions being taken in response to the very useful data that were gathered and presented. Food refusal was common and was monitored well.

- S11 In the previous six months, six detainees at Brook House had claimed to be children but none was subsequently found to be a child. Two detainees were held during our inspection following a Chief Immigration Officer age assessment. The centre correctly referred these detainees to social services, who confirmed the detainees to be adult. The G4S child protection training package was good. Arrangements to protect children in visits were sound.
- S12 In our survey, a third of detainees said they felt unsafe, which was similar to the last inspection. In our confidential interviews, detainees who said they did not feel safe often cited concerns such as indefinite detention and anxiety about possible removal. No detainees said they had been assaulted by staff or other detainees. The level of detainee-on-detainee violence was low and no serious assaults had been recorded in the previous six months. The level of assaults on staff was much higher than in other immigration removal centres (IRCs). However, reported incidents were generally minor and none had resulted in serious injury. All incidents were investigated, but in some cases there was insufficient inquiry into the causes of violence. There was a good system for supporting perpetrators and victims of violence, but it was undermined by poor implementation.
- S13 Some security arrangements remained disproportionate to the risks posed by the population: detainees were confined to cells overnight and for two roll counts a day. In the previous six months, 82% of detainees were handcuffed during escorts to external appointments, which was high. We did not find sufficient individual justification for handcuffing in several of the cases we reviewed. The volume, quality and analysis of security reports were good. There had been some good corruption prevention work. The number of strip-searches had reduced from the last inspection but was still high and some were not justified by the paperwork. There was some limited evidence of drug availability in the centre. There had been good work to interrupt the supply of drugs into the centre.
- S14 The number of incidents involving force was high. There was nearly always good justification in the reviewed cases, and many incidents involved relatively little application of force. However, in a small number of cases more could have been done to resolve incidents before use of force. In our confidential interviews and survey, no staff said they had seen unjustified use of force. Records justifying force were generally completed to a good standard. Briefings before planned use of force were usually thorough and good attempts were made to de-escalate situations. All incidents were reviewed by a senior manager and there was evidence of them identifying and addressing deficiencies.
- S15 There had been 130 instances of separation in the previous six months, which was similar to our last inspection but higher than in other IRCs. Separation paperwork was generally good and management reviews were thorough. Paperwork demonstrated a staged approach to testing compliance before reintegration. We saw very good efforts to engage with a particularly challenging man. Although detainees were assessed for access to the regime, there was little evidence in documentation of this happening. Conditions in the unit were reasonable.

³ Assessment, care in detention and teamwork case management of detainees at risk of suicide or self-harm.

- S16 Fewer detainees were held, and for shorter periods, than at our last inspection. In our casework analysis, where we saw lengthy detentions, they were a result of sluggish casework, delays in finding suitable accommodation and/or in obtaining travel documents. There was evidence that lengthy and open-ended detention affected detainees' feelings of safety and wellbeing. The quality of on-site Home Office engagement with detainees had improved since our last inspection and was now more frequent and informed. However, the level of contact remained a concern, with only 20% of detainees in our survey saying that it was easy to see Home Office immigration staff. Waits for the detention advice surgery were short and arrangements for legal visits were good. There were regular Bail for Immigration Detainees workshops and bail information was available in the welfare office. The library contained few up-to-date legal text books and some important websites that could help detainees with their cases were blocked.

Respect

- S17 *Detainees were generally positive about staff. Increased and consistent staffing and lower numbers of detainees had supported better relationships between detainees and staff. The living accommodation remained prison-like but was in good condition and clean. Equality and diversity work was underdeveloped. Faith provision was good. Replies to complaints were quick and courteous, but too defensive and almost none were upheld, even where justified. Most detainees were critical of the food. The cultural kitchen remained a very good resource but was small. Health care provision was reasonably good. Many detainees complained about the attitude of health care staff, and managers had been working on improving communication with detainees. **Outcomes for detainees were reasonably good against this healthy establishment test.***

- S18 *At the last inspection in 2016, we found that outcomes for detainees in Brook House IRC were reasonably good against this healthy establishment test. We made 11 recommendations about respect. At this follow-up inspection we found that six of the recommendations had been achieved, four had been partially achieved and one had not been achieved.*

- S19 Most detainees in our survey and interviews were positive about staff. Increased staffing levels, improved staff training and mentoring, and lower detainee numbers all supported positive and supportive relationships. Detainees said that a few officers were less helpful, but most complaints about staff treatment had been about the way that some health care staff related to detainees. There was regular but limited one-to-one structured support for detainees. Weekly consultation meetings helped to identify detainee concerns but did not systematically lead to actions. In our staff survey and interviews, most staff were positive about the culture of the centre and many said it had improved significantly over the previous 18 months. Staff consistently mentioned helping people, having a caring role, and learning about people from different countries as making them feel satisfied about their work.
- S20 The centre's prison-like design was an intractable problem, although the units had been improved through refurbishment and redecoration. There was almost no graffiti and cells were in good condition throughout. Screening of toilets and showers had improved. While toilet screening was still flimsy, there were advanced plans to improve the quality of the screens. Despite improvements to the air-conditioning system, detainees were still affected by the lack of any opening windows and some rooms were hot and stuffy. Arrangements for clean bedlinen and laundry were good. The standard of cleanliness was high.
- S21 The complaints system had several layers of quality checking. However, while courteous, replies often took an unhelpfully defensive and legalistic approach. Almost no complaints were upheld, and in some cases, that had clearly been the wrong decision. In both our survey

and interviews, nearly half the detainees suggested that they did not have confidence in the complaints system.

- S22 There was a reasonable range of food choices, but we received many complaints about the food not meeting the diverse needs of the population, both in our detainee interviews and survey, where 68% of detainees said the food was quite or very bad. The centre was aware that some groups of detainees were dissatisfied with the food but had not succeeded in addressing these concerns. The cultural kitchen was used very well and provided a high-quality communal activity for a wide range of detainees. However, the facility was still restricted by insufficient space. The shop was open for long hours and stocked a wide range, especially of culturally specific foods and products. The staff displayed a good customer service ethos.
- S23 A reasonable management framework for equality and diversity was in place, but monitoring was poor, with limited identification of trends and issues. There were monthly diversity meetings and it was positive that detainees and representatives of the Home Office and support services participated. However, they were poorly attended by G4S managers and staff. With the exception of those with a disability, there was no systematic approach to the identification of individuals' protected characteristics. Those with disabilities were given support through supported living plans. There were forums for older and younger detainees, but they had resulted in few outcomes to date. There were currently no forums for other protected characteristics and no nationality forums. There was good knowledge and use of the telephone interpreting service, although we saw examples of the inappropriate use of detainees for interpreting.
- S24 Faith provision was generally good, with a range of services, events and activities available and an active and busy chaplaincy. There had been no religious affairs manager since March 2019 and the chaplaincy office was usually empty, which undermined the efficacy of the well-advertised 'drop-in' service.
- S25 Health care provision was reasonably good and responsive overall. Most detainees were positive about health care, but a significant minority complained about their treatment and especially about the attitude of health care staff, often citing dismissive behaviour. We found some evidence of concerns about the approach of a few health care staff, but the majority of the work we saw was good. Governance arrangements were robust, but some staff had not received regular managerial supervision. A daily walk-in nurse triage session meant that access to health care was prompt and waiting times to see the GP for a routine appointment and for Rule 35 assessments were short. A recent initiative of offering a well-man drop-in session on each wing had been popular, increasing patient engagement.
- S26 Professional telephone interpreting was used regularly for health care consultations, but we found a few cases where another detainee was allowed to interpret, which undermined the quality of the assessment and compromised confidentiality. There was prompt access to individual mental health support, including a psychiatrist, and a weekly emotional health group was run by a psychologist. Self-help translated material was poorly promoted. The demand for clinical prescribing for drug and alcohol dependence was low and detainees were given suitable support. Access to psychosocial interventions was good, with effective use of peer supporters.
- S27 The management of medicines was robust. The allocation of an officer to supervise the health care waiting area had increased security and improved the oversight of medicine administration. There was prompt access to a community dental service, including for urgent care.

Activities

S28 *There was a reasonable range of activities and detainees had good access to them. There was enough work for the population. Education was valued and teaching was good, although outcomes were mixed. Only a third of detainees in our survey said they could fill their time and not enough was done to encourage participation. The library was poorly managed and did not meet the needs of most detainees. Fitness provision was reasonably good. **Outcomes for detainees were reasonably good against this healthy establishment test.***

S29 *At the last inspection in 2016, we found that outcomes for detainees in Brook House IRC were reasonably good against this healthy establishment test. We made seven recommendations about activities. At this follow-up inspection we found that three of the recommendations had been achieved, one had been partially achieved and three had not been achieved.*

S30 Managers were developing strategies to improve the range and quality of provision. The range of provision for detainees was reasonably good and included sufficient work, a range of education classes and recreational activity. A quarter of detainees in our survey said that they attended education, and 45% were in paid work. Classes were available in English, Spanish and Italian, and there was a range of short personal and social development courses such as anger management. However, attendance at some classes – particularly English – remained low despite almost half the detainees reporting that they did not understand spoken English well. Nearly all those who attended education said that they found it useful.

S31 Teaching was lively, enthusiastic and engaging, but its effectiveness was reduced because very diverse groups followed different subjects in the same room. Outcomes for learners were mixed, and not enough was done to encourage detainees to engage with education and improve learning and skills development. No externally accredited qualifications were available. Managers had not developed policies to incentivise consistent attendance and had yet to implement aspects of the published quality assurance policy, such as observation of teaching.

S32 Access to paid work was good. The number of jobs had increased since the previous inspection and was sufficient for the population. Management of paid work was effective. Managers had introduced clear role descriptions and workers were supervised appropriately. New job roles, such as race relations and diversity orderlies, gave detainees responsibility and enabled them to assist their peers.

S33 However, in our survey, only 33% said they had enough to do to fill their time. Detainees were often preoccupied by their cases and there were not enough activities to promote wellbeing, relaxation or stress relief. The cultural kitchen was a popular but small facility where up to four detainees could prepare meals each session. Access to internet-enabled computers was good, but machines could run slowly. Since the last inspection, astrotrurf had been laid on one wing yard, improving facilities for football. Two compounds were in use in the afternoons, one for football and one for cricket. Both were well used.

S34 Access to the library was good, but the facility was poorly managed and unattractive. In our survey, only 28% of detainees said that the library contained what they needed.

S35 Access to PE provision was reasonably good. The gym was equipped with a good range of exercise equipment. The facility was small but appeared to be adequate for the current population. Instructors and orderlies organised regular football and cricket tournaments on the exercise yards, which were popular with detainees. Five officers were currently enrolled on a level 2 gym instructor course, which would enable them to deliver gym induction and

advice on fitness training programmes. There were no links to the health care department, and no specialist support for detainees recovering from injuries.

Preparation for removal and release

- S36 *Welfare support was good and we were pleased to see that staff had qualifications accredited by the Office of the Immigration Services Commissioner (OISC). The visits experience was well managed and had improved, but visitors found it difficult to book over the phone. Access to communications was generally good but the blocking of legitimate internet sites was a significant problem, which could have affected detainees' ability to prepare for their release or removal. Not all detainees leaving the centre were systematically seen by welfare staff. All currently had sufficient notice of removal. **Outcomes for detainees were reasonably good against this healthy establishment test.***
- S37 *At the last inspection in 2016, we found that outcomes for detainees in Brook House IRC were reasonably good against this healthy establishment test. We made eight recommendations about preparation for removal and release. At this follow-up inspection we found that three of the recommendations had been achieved, four had not been achieved and one was no longer relevant.*
- S38 The experienced welfare team provided a valuable service to detainees and helped to relieve some of the stress and tension that many detainees experienced. Having welfare officers trained to OISC level one was good practice given the impact that uncertainty about immigration status had on detainees' wellbeing. Welfare appointments were now more confidential than in the past, but the welfare needs of detainees were not systematically assessed on arrival.
- S39 There were difficulties in booking visits by telephone but booking by e-mail generally worked well. The visits hall was bright and suitably furnished, with a well-resourced play area for younger children. The visits that we observed were well facilitated and respectfully overseen by staff. Appropriate physical contact between visitors and detainees was now allowed. There was good co-operation between the welfare team and Gatwick Detainee Welfare Group, which facilitated visits and befriending of isolated detainees.
- S40 Access to telephones was good and there was timely distribution of incoming mail and faxes. Detainees had reasonable access to email and internet. However, some immigration support and humanitarian websites were blocked and the process for unblocking legitimate sites took too long. Only 16% of detainees said it was easy to access what they wanted on the internet. Detainees still could not use social networks or video calling, which was an unnecessary restriction.
- S41 About half the detainees leaving the detention estate from Brook House in the previous six months had been released. Not all detainees leaving the centre were systematically seen to ensure their welfare needs were met. In some cases, detainees had not been released because of a lack of accommodation or had been released homeless. Ad hoc meetings were held for complex removals, resulting in some helpful release plans. At the time of inspection, due to a legal challenge, all detainees were being given at least 72 hours' notice of removal and all charter flights had been suspended. Departure processes that we observed were orderly and efficient. Released detainees were routinely given a summary of their medical records and at least a week's supply of medication.

Key concerns and recommendations

- S42 Concern: Detainee interviews were not conducted in private and did not cover enough areas of possible vulnerability and risk. There was not enough use of professional interpreting by reception staff.

Recommendation: Reception interviews for new arrivals should be held in private using telephone interpreting wherever detainees are not fluent in English, and should consider a broad range of potential risks and vulnerabilities.

- S43 Concern: During the previous six months, the centre doctors had not submitted any rule 35 reports notifying the Home Office that a detainee may be suffering suicidal ideation. Yet, in our survey 40% of detainees said they had felt suicidal at some time while in the centre. In the previous year almost 100 detainees had been on constant watch to prevent self-harm or suicide.

Recommendation: Doctors should submit a rule 35 report to the Home Office on any detainee they suspect of having suicidal ideation.

- S44 Concern: The quality of ACDD documentation was not good enough. Assessments and reviews were timely but care maps frequently lacked detail, case reviews were not sufficiently multidisciplinary and some post-closure reviews were not completed. ACDD observations were regular but did not always demonstrate enough meaningful engagement.

Recommendation: Care maps should always be completed in detail and regularly updated. Case reviews, including those for post closure, should demonstrate multidisciplinary input and daily observations should be in depth and demonstrate engagement with detainees.

- S45 Concern: Despite the reduction in the average length of detention, some detainees were held for prolonged periods. There was evidence that lengthy and indefinite detention affected feelings of safety and wellbeing. At the start of our inspection, 13 detainees had been held for more than six months, two of them for more than a year. The longest detention was for one year and eight months. Sluggish casework and delays in obtaining suitable accommodation and travel documents prolonged detention.

Recommendation: There should be a strict time limit on the length of detention and caseworkers should act with diligence and expedition throughout detention.

- S46 Concern: Detainees were locked in their cells from 9pm to 8am and, during the day, for two half-hour periods for roll count. This was a disproportionate restriction for a detainee population.

Recommendation: Detainees should not be locked in cells and should be allowed free movement around the centre until later in the evening. (Repeated recommendation 1.49).

- S47 Concern: There was a reasonable range of food choices, but we received many complaints about the food not meeting the diverse needs of the population, both in our detainee interviews and survey, where 68% of detainees said the food was quite or very bad. The centre was aware that some groups of detainees were dissatisfied with the food but had not succeeded in addressing these concerns.

Recommendation: Effective measures should be taken to ensure that a majority of detainees find the food to be of sufficient quality.

- S48 Concern: The complaints system had several layers of quality checking. However, while courteous, replies often took an unhelpfully defensive and legalistic approach. Almost no complaints were upheld, and in some cases, that had clearly been the wrong decision. In both our survey and interviews, nearly half the detainees suggested that they did not have confidence in the complaints system.

Recommendation: Managers should investigate and address the reasons for detainees' low confidence in the complaints system.

- S49 Concern: There was no systematic approach to the identification of individuals' protected characteristics.

Recommendation: Information about the protected characteristics of all detainees should be systematically collected on arrival, with support offered where necessary.

- S50 Concern: The centre did not give detainees enough encouragement to participate in education and improve their skills. Managers had not developed policies to incentivise consistent attendance. The centre induction did not include advice or guidance to help and encourage detainees to choose a course.

Recommendation: Managers should significantly increase the number of detainees who benefit from the education provision, through better promotion, guidance and incentives to improve participation.

- S51 Concern: Although access to fitness provision was reasonably good, there were not enough activities to promote wellbeing, relaxation or stress relief to help detainees who were often preoccupied by their cases.

Recommendation: Managers should introduce relaxation and stress-relief activities into the centre's activities programme.

- S52 Concern: Detainees had reasonable access to email and internet. However, the blocking of legitimate websites, including some national newspapers, immigration support and humanitarian sites, was a significant problem which could affect detainees' preparations for legal motions and removal or release plans. Systems to unlock sites and provide access were slow. In our survey, only 16% said it was easy to access what they wanted on the internet. There was still no access to social networks or video-calling sites.

Recommendation: Detainees should have access to legitimate websites, including those facilitating legal assistance, Skype and social networking. There should be effective and prompt procedures for unblocking such sites.

- S53 Concern: Centre staff did not systematically assess detainees' welfare needs on arrival nor did they assess whether detainees had outstanding welfare needs before leaving the centre.

Recommendation: Detainees should be routinely seen on arrival and before discharge to ensure that welfare matters are identified and addressed.

Section 1. Safety

Arrival and early days in detention

Expected outcomes:

Detainees travelling to and arriving at the centre are treated with respect and care.

Risks are identified and acted on. Detainees are supported on their first night. Induction is comprehensive.

- 1.1 In our survey, 77% of detainees said they were treated well by escort staff on their journey to the centre. Vehicles that we examined were clean, in good condition and stocked with snacks and water. We observed some lengthy delays in vans before detainees could alight, in one case of more than an hour.
- 1.2 During the previous three months, 35% of arrivals had been between 10pm and 6am. Many of these journeys, often after long waits at other centres or police stations, were scheduled at night for reasons of operational convenience, despite being exhausting and stressful for detainees.
- 1.3 Detainee turnover was high, with an average of 84 arrivals each week over the past six months. Despite this, the reception area was clean and well maintained, with good facilities. After a rub-down search, detainees were moved to a welcoming waiting room before they were seen by staff.
- 1.4 Reception processes were similar to our previous inspection and detainees received toiletries, cutlery, bedding and additional clothes and a mobile phone and SIM card if required. All detainees could make a free telephone call to their family and/or friends (see paragraph 4.13). A nurse saw detainees for a confidential medical interview.
- 1.5 Reception staff interviewed detainees and completed a vulnerability screening which covered depression, self-harm and suicide. However, these interviews were not conducted in private and did not include all areas of potential vulnerability such as torture, trafficking or sexual orientation.
- 1.6 In our group interviews, detainees raised a lack of interpreting as one of the difficulties they faced on arrival. Centre records showed that professional interpreting had been used in reception for just under 10% of new arrivals in the previous six months. This figure was surprisingly low, particularly in the context of our survey finding that only 53% of detainees said they were able to understand spoken English well. We observed new arrivals being interviewed in reception with no interpreting when they clearly did not understand all the questions they were asked (see key concern and recommendation S42).
- 1.7 Reception staff were polite and courteous towards detainees and in our survey 84% said they were treated well. Few detainees experienced significant delays before being moved to the induction unit.
- 1.8 The induction unit was clean and in a good state of repair. Cells that we looked at were clean and recent arrivals confirmed that the cells were appropriately equipped. Additional welfare checks were undertaken on all new arrivals during their first night and were documented by night staff.
- 1.9 Induction started the following day but was still held on a landing which could be noisy. Staff tried diligently to ensure that all detainees on the induction unit attended the session which

consisted of a short introductory video followed by staff presenting information to detainees for about 20 to 30 minutes. The information was useful and relevant. A trial was in progress to make the information available in several languages through iPods.

- I.10** An enthusiastic peer mentor led a tour of the centre in the afternoon, although there was not enough engagement by staff to introduce their work to detainees.
- I.11** Most detainees were moved to the designated induction wing, but a small minority went to other units for additional support or because of a lack of available space. In these cases, it was possible for detainees not to receive an induction for several days or at all. An increasing number of detainees remained on the induction unit for longer than planned because they objected to sharing a cell.

Recommendation

- I.12** **Detainees should not be subjected to exhausting overnight transfers when this could be avoided through more timely escorts.** (Repeated recommendation I.4)

Safeguarding

Expected outcomes:

The centre promotes the welfare of all detainees and protects them from all kinds of harm and neglect. The centre provides a safe environment which reduces the risk of self-harm and suicide. Detainees at risk of self-harm or suicide are identified at an early stage and given the necessary care and support.

Safeguarding of vulnerable adults

- I.13** During the six months from November 2018 to April 2019, the centre had held 423 adults at risk of harm, seven of whom were at level three of the Home Office adults at risk in immigration detention policy. At the time of our inspection, the centre had identified 46 adults at risk (19% of the population): 30 at level two and 16 at level one. Two detainees were subsequently assessed as level three and were promptly released.
- I.14** Centre and health service staff used supported living plans to care for the most vulnerable detainees. Over this six-month period, 28 plans had been opened. On one day during our inspection, four detainees had supported living plans which were good in theory. They included identification of needs, actions to address needs and multidisciplinary reviews. In practice, they were poorly completed. Many of the plans that we reviewed lacked detail; actions were not completed and reviews were poorly attended. It was unclear why some plans had been opened at all, and overall the plans did not help staff to care for detainees.
- I.15** Joint working between the Home Office, G4S and health care to identify vulnerable adults was good. The Home Office and G4S each had nominated officers who ensured that accurate records were kept of adults at risk. These records were checked for consistency at the weekly adults at risk meeting.
- I.16** At the time of our inspection, two detainees submitted medical/legal reports confirming that their complex post-traumatic stress disorder was aggravated by detention. Case owners identified them both as level three adults at risk and promptly arranged their release. It was concerning that the centre's health screening had not identified their condition on arrival.

- I.17** Adults at risk were discussed at a reasonably well attended multidisciplinary meeting. On-site Home Office, health services, G4S managers and, importantly, wing staff attended. We observed one meeting where the care of men on supported living plans was discussed in detail. Information sharing was good and the discussions contributed to their care. In one case the off-site Home Office case owner contributed via speaker phone. There was little discussion about the other adults at risk who did not have a supported living plan.
- I.18** During the six months from October 2018 to March 2019, Brook House doctors had submitted 93 Rule 35 reports, 91 of which related to torture and two to the impact of detention on health. Fourteen per cent of the 91 reports had led to release.
- I.19** We were concerned that doctors had not submitted any reports on suicidal intentions and thoughts (see paragraph 2.65 and key concern and recommendation S43). The level of self-harm was higher than at the last inspection. During the previous six months, centre staff had initiated suicide and self-harm prevention (ACDT) measures on 167 occasions and in the last year 95 detainees had been placed on constant watch. This was reflected in our survey, where 40% of detainees said they had felt suicidal while in the centre. The health services were aware of this and had recently created a pathway so that every detainee on an ACDT received a full mental health assessment by a registered mental health nurse within six days of the ACDT being opened. A doctor would then consider whether to submit a Rule 35 report. It was too early to judge the effectiveness of this initiative.
- I.20** We reviewed 10 Rule 35 reports and their replies. All related to torture. One report had led to release and another detainee was released before the report was considered. In seven cases the reports were accepted as evidence of torture, but immigration factors were cited as reasons to maintain detention. In one case, the case worker did not dispute the events described by the detainee but concluded that they did not meet the definition of torture.
- I.21** The reports that we reviewed all gave clear judgements but the reasoning behind the judgements was not always clear. Most reports commented on the state of the detainee's mental health but did not consider whether the detainee was suffering from post-traumatic stress disorder. All but one report contained body maps where relevant and all reports were legible.
- I.22** Most replies were timely with the exception of two, one of which was delayed by more than a week. Some reports in our sample were considered, not by the case worker, but officers from a dedicated Home Office team. There was no discernible difference in the quality of responses from this team.
- I.23** Staff submitted a large number of security information reports to prevent corruption. In the previous six months, 307 reports had been submitted, 107 by detainee custody managers and 200 by detainee custody officers (see paragraphs I.49 and I.52). Whistleblowing procedures were promoted widely in staff areas throughout the centre. G4S staff could report unlawful or inappropriate behaviour anonymously by telephone or online using the G4S Speak Out service. The service had been used seven times in the previous six months. All staff in our interviews said that they would report any inappropriate behaviour towards detainees, usually to managers; 12% did not believe that they would be taken seriously if they raised a concern.

Self-harm and suicide prevention

- I.24** In our survey, 40% of detainees said they had felt suicidal while at the centre, reflecting a high level of distress. The number of self-harm incidents had risen significantly since the last inspection. During the previous six months, there had been 79 recorded incidents of self-

harm compared to 46 at our previous inspection when the population was also markedly higher⁴. Over the same period, 167 ACDT⁵ forms had been opened, which was proportionately more than at our last inspection. Injuries resulting from self-harm were usually superficial.

- I.25** There was a comprehensive strategy to manage detainees at risk of self-harm, and an improvement plan. All acts of self-harm were subject to an investigation, but some case reports lacked detail on the reason for self-harm and actions taken to support detainees.
- I.26** The quality of ACDT documentation was inadequate. Assessments and reviews were timely and documents were generally open for a short period. However, care maps frequently lacked detail and were not updated appropriately. Case reviews were often not multi-disciplinary, and health care and the Home Office were not routinely represented or consulted before reviews took place. We found some recently closed documents that had not been subject to post-closure reviews and in one case the inappropriate use of a detainee to interpret at a case review. Management checks were in place but had yet to lead to a discernible improvement in quality (see key concern and recommendation S44).
- I.27** ACDT entries were made regularly, but a significant minority demonstrated little meaningful engagement with the detainee. Wing staff were knowledgeable about detainees at risk and we observed information being communicated among staff at shift handovers. However, detainees on ACDTs whom we spoke to were generally negative about the level of support they received and the benefits to them of the ACDT.
- I.28** Monthly safer community meetings were held, but not all key departments attended regularly and there was little evidence of discussion of individual cases or analysis and actions from the useful data set that was collated and presented at the meeting.
- I.29** There had been 95 constant supervision cases in the previous six months. ACDT records in these cases were marginally better; in our case sample, there was better attendance at case reviews and adequate justification for the use of constant supervision. The two constant supervision cells were fit for purpose and more welcoming than at our last inspection.
- I.30** There was still no care suite and no Listener⁶ or Befriender⁷ scheme. However, there were now two safer community orderlies who could raise issues with the safer community team on behalf of detainees. The local Samaritans group continued to attend the centre every two weeks to provide support to detainees.
- I.31** The number of detainees refusing food was high and there had been 388 cases in the previous six months. However, all instances were graded and recorded comprehensively and there were effective monitoring and support arrangements. Health care staff undertook daily medical observations and details of detainees were recorded on the daily centre briefing sheet so that all staff were aware of individual cases. Since our previous inspection, detainees refusing food or fluids were no longer routinely monitored through the ACDT process.

Recommendation

- I.32 Key departments should be consistently represented at monthly safer community meetings and the minutes should demonstrate discussions and actions based on the data presented.**

⁴ The population during the 2016 inspection was 391. The current population was 239.

⁵ Assessment, care in detention and teamwork case management of detainees at risk of suicide and self-harm.

⁶ Detainees trained by the Samaritans to provide confidential emotional support to fellow detainees.

⁷ Detainees who can provide support for other detainees, particularly those recently arrived and new to detention.

Safeguarding children

Expected outcomes:

The centre promotes the welfare of children and protects them from all kind of harm and neglect.

- I.33** The centre had one comprehensive policy for safeguarding children and adults despite the distinct needs of these groups.
- I.34** During the previous six months, six detainees had claimed to be children, but none was subsequently found to be a child. Shortly before our inspection and following a legal challenge, the Home Office had amended its policy to strengthen the test used by chief immigration officers (CIOs) to assess age. Two detainees were held who had been age assessed by a CIO before the policy change. We were pleased to see that the Home Office had referred both cases to West Sussex County Council. Social workers promptly attended the centre and confirmed that the detainees were adults. Links with the Council's children's services were sound.
- I.35** The centre's age dispute policy had not been updated following the CIO age assessment test. It was otherwise a good policy which described the steps to be taken if a detainee claimed to be a child. The detainee would be consulted, a care plan opened and consideration given to relocating the detainee within Brook House or moving them to the more relaxed environment of Tinsley House IRC.
- I.36** The G4S child protection training package for new staff was comprehensive, covering general child protection principles and the distinct protection issues arising in Brook House. Arrangements to protect children in visits were sound and visits staff were alerted to detainees who posed a risk to visiting children.

Personal safety

Expected outcomes:

Everyone is and feels safe. The centre promotes positive behaviour and protects detainees from bullying and victimisation. Security measures and the use of force are proportionate to the need to keep detainees safe.

- I.37** In our survey, two-thirds of detainees said they felt unsafe. However, very few detainees in our confidential interviews told us they felt physically unsafe in the centre and none said that they had been assaulted by staff or other detainees. The detainees who said they did not feel safe cited concerns such as indefinite detention, anxiety about possible removal, the behaviour of other detainees or concerns about health care.
- I.38** The level of detainee-on-detainee violence was low. In the previous six months, there had been 14 such assaults, which was similar to the level we see in other IRCs and at the last inspection. None of these assaults was classed as serious. There had been 12 fights in the same period.
- I.39** However, the level of reported violence against staff had increased since the last inspection and was much higher than in other IRCs. There had been 51 assaults on staff. In the sample that we looked at, assaults were generally minor and none had resulted in serious injury. Managers attributed the high level of staff assaults to strict compliance with reporting requirements. Further investigation was needed to confirm this.

- I.40** Systems and practices for identifying violence were good and records of incidents were examined to ensure they were logged and investigated. All cases were investigated, but in some there was not enough enquiry into the causes of violence. This weakness was reflected in data presented to the monthly safer communities meeting which was otherwise good. Managers suggested that frustration at the delays in Home Office casework was a significant factor, but this had not been established evidentially.
- I.41** A violence reduction strategy and action plan were in place, but attendance at the safer communities meeting was generally poor. No discussion or actions were recorded arising from data on violence presented to the previous six meetings. A useful 'detainee of interest' meeting also took place each week (see paragraph I.51).
- I.42** In the past six months, 26 detainees had been formally monitored for bullying and violence, compared with 12 at the last inspection when the population was higher. However, at the time of the inspection, only one victim support document and one perpetrator document were open. Perpetrators and victims were managed through 'Monitor-Challenge-Support' books, which included provision for care planning, case reviews and monitoring. This was a good system, but it was undermined by poor implementation. In many cases, there was no record of whether care plan actions were completed and staff observations suggested some confusion about the purpose of the books. Some victims who were considered vulnerable were located on the quieter E wing. Otherwise, support books did not demonstrate adequate tailored provision for victims.
- I.43** The centre no longer used the punitive incentives scheme that was in operation at our last inspection.

Recommendation

- I.44** **Violence reduction processes should focus on identifying, quantifying and addressing the causes of violence.**

Security and freedom of movement

Expected outcomes:

Detainees feel secure. They have a relaxed regime with as much freedom of movement as is consistent with the need to maintain a safe and well-ordered community.

- I.45** The physical security features of the centre resembled a category B prison and some security measures remained disproportionate to the risks posed by the population.
- I.46** Freedom of movement was good during association, but detainees were locked in their cells from 9pm to 8am and for two half-hour periods during the day for roll count. In our survey, detainees commented on the adverse impact of this restriction. One said: 'The closed doors create a bad feeling in me and locking doors are also irritating and it hurts me emotionally ...' (see key concern and recommendation S46).
- I.47** During the previous six months, 82% of detainees were handcuffed on hospital escorts, in some cases without sufficient justification. The number of strip-searches in the last six months had reduced from 52 at the last inspection to 27, but this was still high compared with other centres and the justification for some strip searches was still not recorded. Visits restrictions were, however, applied appropriately.

- I.48** Reception staff had been instructed to photocopy all mail for a week in October 2018 following intelligence about the supply of liquid psychoactive substances, which was proportionate. However, some reception staff were still routinely photocopying detainees' mail, despite the requirement no longer being in place.
- I.49** The volume, quality and analysis of security reports were very good. There had been 1,523 intelligence reports in the previous six months compared with 972 at the last inspection, far more than in other IRCs. Reports were of reasonable quality and were processed in good time.
- I.50** Security meetings should have been held monthly, but this was not always the case. Attendance was reasonable and a good range of data were presented to the meeting. Minutes recorded no discussion or actions on the data, although there was other evidence of such actions being taken.
- I.51** At weekly 'detainee of interest' meetings detailed information was shared about detainees who were considered to pose a threat to order and safety in the centre and appropriate actions were taken. Attendance at these meetings was variable.
- I.52** There had been some very good corruption prevention work. All new staff had been trained in the local corruption prevention strategy and intelligence reporting was particularly good. In the previous year there had been 369 intelligence reports about staff behaviour, 307 of which had originated from custodial staff. Several staff had been dismissed, most of whom had had inappropriate relationships with detainees.
- I.53** There was evidence of limited drug availability in the centre. Since the last inspection, a new multidisciplinary drug and alcohol strategy and action plan had been introduced. However, while a review of the strategy was underway, it had not been completed at the time of the inspection. Minutes of the last six security meetings recorded little discussion about drugs strategy. The substance misuse service, Forward Trust, had only attended one of these meetings.
- I.54** However, good work had been done to interrupt the supply of drugs into the centre. This included good 'contact mapping' of detainees and visitors suspected of involvement in trafficking. This and some good liaison with the police led to the arrest of two visitors during the inspection.

Recommendation

- I.55** **All security procedures should be proportionate to a detainee population and based on individual risk assessments.** (Repeated recommendation I.48)

Good practice

- I.56** *All new staff were trained in corruption prevention. In our interviews, all staff said that they would report inappropriate behaviour by their colleagues. Staff had submitted a large number of security information reports to prevent corruption (307 in the last year).*

Use of force and single separation

Expected outcomes:

Force is only used as a last resort and for legitimate reasons. Detainees are placed in the separation unit on proper authority, for security and safety reasons only, and are held in the unit for the shortest possible period.

- I.57** The number of incidents involving force was high. During the previous six months, staff had used force on 141 occasions compared with 80 at the last inspection. This was also more than we see at other IRCs, including those with a similar detainee profile.
- I.58** There had been no clear analysis of the reasons for the increase, although managers told us that, in response to the Panorama investigation, there had been a drive to ensure strict compliance with reporting requirements. Paperwork had been routinely completed for very minor incidents and the documentation that we reviewed confirmed that many incidents involved relatively little application of force.
- I.59** The use of force committee met monthly, but attendance was very variable. The meeting focused on practical matters such as training. Some useful data were presented but did not generate any discussion or actions. However, all incidents were reviewed by a senior manager and there was evidence that deficiencies were identified and addressed.
- I.60** The inspection took place almost two years after BBC Panorama's September 2017 documentary which showed clear and very disturbing evidence of excessive use of force on detainees in Brook House. In addition to the incidents reported in the documentary, there was evidence of further abuse at around the time of the events shown. In a very concerning case, the Home Office Professional Standards Unit (PSU) found that an officer had assaulted a detainee on three occasions in June 2017. The same officer was shown in the Panorama documentary to have engaged in poor, unprofessional, insulting and possibly physically abusive behaviour.
- I.61** The PSU also found that excessive force had been used against a detainee in October 2017 during the removal of his cell mate for a night time escort. It found that force was neither proportionate nor necessary, because staff had not spoken directly to him beforehand to explain what was happening and explore alternatives, such as moving him to another cell.
- I.62** More recent records justifying force that we examined were completed to a good standard, although we saw a few staff reports which were not sufficiently detailed. Briefings before planned use of force were usually good and, in almost all cases that we reviewed, there were reasonable attempts at de-escalation and good justification of use.
- I.63** However, in one case attempts to resolve an issue could have been made before planned use of force on a detainee who had self-harmed. It was particularly concerning that health care staff were not present from the outset of this planned intervention and were only summoned when a medical emergency was called (in the event, the detainee's injury was minor).
- I.64** In our confidential interviews with detainees, none said they had been assaulted by staff. No staff said they had seen unjustified use of force in our survey or interviews. At the time of the inspection, no complaints about excessive use of force had been upheld by the PSU for incidents occurring after 2017, although other failings had been identified, such as a staff member swearing at a detainee. PSU investigations that we saw were thorough.
- I.65** Conditions in the six-cell separation unit were reasonable. It was clean and reasonably bright and rooms were appropriately furnished. When in use, the ratio of staff to detainees was

appropriately high. There had been 130 instances of separation in the unit in the previous six months, similar to the last inspection but more than in other IRCs. Twenty-nine of these had occurred in a single 24-hour period.

- I.66** Towards the end of summer 2018, managers had identified significant problems with the quality of segregation records, which often did not show sufficient justification. Measures had been taken to address this, including the delivery of a bespoke training package for detention managers.
- I.67** More recent separation paperwork that we examined was good and management reviews were thorough. Separation was now well justified and records demonstrated a staged approach to testing compliance before reintegration and very good efforts to engage with a particularly challenging man.
- I.68** Cells had no televisions and, although we were told that detainees were given a radio on request, we saw no record of this or of detainees being given books or other means of distraction. Detainees were assessed for access to the regime; however, there was little evidence in records that separated detainees had received a significant regime.
- I.69** There was no formal review or data analysis of the use of segregation.

Recommendations

- I.70** **An in-depth review of use of force should be conducted to ensure that such incidents are minimised in line with the level used in other immigration removal centres.**
- I.71** **Detainees in the segregation unit should be offered full access to the regime, subject to individual risk assessments.**

Legal rights

Expected outcomes:

Detainees are fully aware of and understand their detention, following their arrival at the centre and on release. Detainees are supported by the centre staff to freely exercise their legal rights.

- I.72** At the start of our inspection, over two-thirds (67%) of detainees had been held for less than a month. However, figures from the first week of our inspection showed that 11 detainees had been held for six to 12 months, and two for more than a year. The longest detention at this time was one year eight months (see key concern and recommendation S45). Thirty-seven percent of the population were ex-offenders and all of those held for more than six months were ex-offenders.
- I.73** Fewer detainees were held in the centre (239) than at our last inspection (391) and detainees were held for shorter periods. In 2016, the average length of cumulative detention was about three months, which had now halved to about 44 days. These figures did not include cases of detainees being released and then re-detained. In our sample of 12 cases, five detainees had been held on more than one occasion. One man had been detained on 10 separate occasions, usually following short criminal sentences, for a total of more than 3.5 years.

- I.74** We examined 12 cases, four involving detentions of more than six months, four of less than six months and four covered by the adults at risk policy. Three key factors contributed to lengthy detentions: sluggish case progression, delays in the provision of suitable accommodation and delays in obtaining travel documents.
- I.75** Eight of the detainees in our sample were ex-offenders. In only two cases were deportation matters concluded before the end of the custodial sentence. In other cases, the Home Office took far too long to start and progress the deportation.
- I.76** In some cases, the Home Office were slow to consider claims for asylum. For example, one person claimed asylum while in custody, but it took 19 months for the Home Office to make and serve its decision.
- I.77** Delays in obtaining approved premises prolonged the detention of one detainee. In December 2018, an immigration judge bailed a detainee in principle, subject to suitable accommodation being found within two weeks. The accommodation was sourced eight weeks later but the detainee remained in detention even then. Another ex-prisoner subject to extant licence conditions was granted bail by an immigration judge in January 2019, but at the time of our inspection four months later remained in detention.
- I.78** All detainees could access half an hour of publicly funded legal advice. The Legal Aid Agency (LAA) had commissioned 48 legal organisations to run the surgeries four days a week. Waits were not excessive, and at the time of our inspection detainees could get an appointment within two days. Arrangements for legal representatives were sound. There were 10 interview rooms and solicitors could bring laptops into the centre.
- I.79** The range of legal text books in the library was narrow and many books were out of date. Detainees could download country information and policy notes but important websites were blocked, for example Amnesty International. Only 21% of detainees in our survey said it was easy to obtain bail information. Detainees could easily print documents and use Word but could not download Bail for Immigration Detainees' (BID) helpful advice booklet 'How to get out of detention'. This booklet was available in the welfare office in a number of languages and BID attended the centre twice a month to support detainees applying for bail. All detainees without means were entitled to LAA funded legal representation for bail applications.
- I.80** The Home Office had introduced a 'detention engagement' team since our last inspection to forge better relationships between detainees and case owners. The team comprised eight engagement officers of executive officer grade. All detainees were allocated a single engagement officer who inducted them within 48 hours of arrival and then saw them regularly face to face, at least once every 28 days. The quality of on-site engagement had improved since our last inspection and was now more informed.
- I.81** Engagement officers gave detainees their business card with their mobile phone number. Detainees could email the officer or submit a paper application if they needed additional information or wanted to see their officer. The engagement officers had also started a weekly surgery to update up to 10 detainees on their cases. However, in the previous two weeks, only five detainees had used the surgery. Despite efforts by the Home Office, in our survey only 21% of detainees said it was easy to see immigration staff and only 43% said Home Office staff were keeping them informed about the progress of their case. Work was needed to understand why this was the case.

Section 2. Respect

Staff–detainee relationships

Expected outcomes:

Detainees are treated with respect by all staff, with proper regard for the uncertainty of their situation and their cultural backgrounds.

- 2.1 Detainees spoke positively about the way staff related to them and responded to requests and enquiries. Staffing on the residential units had been increased, with a first-line manager on each wing and officers on the landings. Many G4S staff said that the low detainee numbers and higher staffing allowed them to build relationships with detainees. There was now a regular, consistent staff group on each wing, and staff knew many detainees by name. In our interviews with them, staff consistently mentioned job satisfaction through helping people, having a caring role, and learning about people from different countries.
- 2.2 In our confidential interviews, nearly all detainees said that they were treated well or reasonably well by staff. No detainee said they had seen staff behaving inappropriately towards another detainee. These findings were reflected in our staff survey, where 95% said that G4S staff treated detainees well (74%) or reasonably well (21%).
- 2.3 In our staff survey and interviews, there were comments about a lack of respect, often related to the attitude of some health care staff. In the survey, 35% of staff thought that health care staff treated detainees well and 48% reasonably well, but there were many comments about rude, dismissive or suspicious behaviour by health care staff.
- 2.4 The lack of useful communication with detainees by Home Office staff and a perception that the Home Office detainee engagement team was not effective enough, were common themes in our staff survey and interviews. Staff said detainees were frustrated at the lack of information about their cases. Comments about the Home Office compliance team were generally more positive, for example their availability and helpful manner.
- 2.5 Initial staff training now focused heavily on interpersonal skills and understanding the situation of detainees, including work on the cultures of the main nationalities; current detainees were invited to the training to share their perspectives. There was also a full day of mental health training. The focus on these issues combined with a highly interactive approach had enabled entrenched negative attitudes to be identified and addressed early. Newly joined staff to whom we spoke were positive about the training, and the two weeks of shadowing that followed, as were a range of staff in our interviews. A mentoring scheme was being introduced and the first cohort of mentors had been trained.
- 2.6 There was no named care officer for each detainee. However, a one-to-one formal conversation took place on induction, a fortnight later, and monthly thereafter. A paper system showed that this was done consistently, with a daily diary for scheduling the reviews, although the outcomes were generally not transferred to the electronic case record.

Good practice

- 2.7 *The training programme for new officers had been completely redesigned so that the first week focused more heavily on the detainee experience, using former detainees, and on interpersonal skills. There were substantial training modules on mental health and other topics directly relevant to giving*

mature support and care to detainees. This also enabled those with entrenched negative attitudes to be identified early.

Daily life

Expected outcomes:

Detainees live in a clean and decent environment suitable for immigration detainees. Detainees are aware of the rules and routines of the centre. They are provided with essential basic services, are consulted regularly and can apply for additional services and assistance. The complaints and redress processes are efficient and fair. Food is prepared and served according to religious, cultural and prevailing food safety and hygiene regulations.

Living conditions

- 2.8** The residential units remained unchanged in their prison-like structure. Significant refurbishment had been carried out to improve the units, but they were understandably still perceived by many detainees as an oppressive environment. There was little graffiti in the cells, and the walls and ceilings were in good condition. Some floors were worn but had been repaired where necessary. New stable-door partitions were being fitted to enhance screening of the in-cell toilets, which currently had only curtains (see paragraph 2.40). Privacy curtains had been fitted above the stable-doors to the showers located on the landings, providing reasonably effective screening. The extra bunk beds installed before the last inspection were no longer in use and had been removed from all but one wing.
- 2.9** The standard of cleanliness was very high because of active management. This included unlocking cleaners after lock-up at night to do a thorough clean of common areas; allocation of cleaners to specific tasks and careful management and monitoring of those tasks; appointment of ‘room orderlies’ to ensure that any vacated room was immediately cleaned and fully equipped; a cleanest wing competition with incentives; controlled and predictable provision of cleaning materials; and immediate removal of any graffiti. There was, however, widespread staining of toilets and basins, despite different products being tried. The communal areas were clean and the stairs had been painted with durable paint, which made them easier to clean. Detergent dispensers had recently been fitted in the serveries.
- 2.10** A number of detainees raised the issue of ventilation, which was now controlled by the in-house facilities staff, rather than remotely. Regular maintenance was now taking place and the number of complaints had reduced. Nevertheless, some cells remained too hot during the night, even in moderate weather, and many detainees were affected by being locked in rooms with windows that did not open.
- 2.11** Clean bed linen was issued weekly. All detainees had clean duvets and pillows, which were issued to them on arrival. All detainees had a lockable cabinet in the base of the bed. Wing laundries were well equipped.
- 2.12** Sofas had been placed in the communal areas. The wings had all been painted with lively colours. All wings had pool, table tennis, games consoles for the large screen, projectors and pull-down screens.
- 2.13** There was new artificial turf on the C wing yards, suitable for football, and the D wing garden was a popular area with raised beds and seating. However, these areas were small in relation to the size of the population and, in our interviews the lack of outside activity space and the cramped activity areas were regularly mentioned by detainees.

Recommendation

2.14 Toilets and basins should be clean and unstained.

Good practice

- 2.15** *High standards of cleanliness were sustained through active management which included unlocking cleaners after lock-up at night to do a thorough clean of common areas; allocation of cleaners to specific tasks and careful management and monitoring of those tasks; use of high quality paint which could be kept clean; appointment of room orderlies to ensure that any vacated room was immediately cleaned and fully equipped; a cleanest wing competition with incentives; controlled and predictable provision of cleaning materials; and immediate removal of any graffiti.*

Detainee consultation, applications and redress

- 2.16** A detainee forum was held each Thursday morning. On the last Thursday of the month this took the form of a consultative council chaired by the director or centre manager. Notes were taken, but actions were not systematically tracked and many issues were repeated at consecutive meetings. There was good multidisciplinary attendance by staff at these meetings.
- 2.17** An average of 15 complaints were received each month, similar to the last inspection. Complaints were efficiently handled; forms were available in 21 languages on all residential units and the boxes were emptied every day by Home Office staff. A senior manager quality checked 10% of complaint responses each month. However, all the responses were lengthy and written in templates alongside standard material. The intention was positive but the templates made the responses difficult for many detainees to understand, especially those with little English. Most responses were defensive and focused on the precise wording of the complaint in a legalistic way.
- 2.18** In our interviews, 47% of detainees said they did not feel confident about making complaints, often because they had no faith in the effectiveness of the complaints system, particularly in resolving key concerns about immigration status.
- 2.19** Any complaints judged by the investigator to be upheld were sent for approval to the centre manager or director. A reluctance to uphold complaints had increased, with no explicit change in policy. During 2018, 8% had been fully substantiated. During the last six months, 95 complaints had been dealt with by G4S, only one of which (1%) had been substantiated. We saw evidence that some of the unsubstantiated complaints should have been upheld (see key concern and recommendation S48).

Recommendation

- 2.20** **Decisions on actions should be made, and their implementation tracked, at detainee consultation meetings.**

Residential services

- 2.21** The catering department had put considerable work into consulting detainees and introducing varied choices at each meal. Hot meals continued to be served at lunchtime and in the evening, and breakfast alternately included baked beans and boiled eggs. The portions

were adequate. The communal dining areas were well used. At the time of the inspection, the catering staff were fully stretched with a shortage of staff.

- 2.22** Nevertheless, many detainees from all sections of the population told us that the food was poor. In our survey, 68% said that the food was quite bad or very bad and we received many complaints that the food did not meet the diverse needs of the population. The inadequacy of Ramadan packs was raised frequently and detainees said that they were not filling enough to sustain them during the fasting period (see key concern and recommendation S47).
- 2.23** Monthly food forums were held, and the catering manager regularly attended the weekly detainee forum. Food comments books were prominently displayed at all serveries. There were frequent entries in the books and replies were courteous. In spite of all the positive work being done, the negative perceptions of a large number of detainees remained entrenched and some fresh thinking and new approaches were needed.
- 2.24** The cultural kitchen was used by a wide range of detainees – over 50 nationalities in the past year - and was valued very highly. The stresses of detention were alleviated by a normal kitchen environment, with ingredients sourced from outlets of their own nationality. The kitchen now operated on mornings and afternoons, an improvement since the previous inspection. However, the same room was being used as previously, with space for only four detainees at a time.
- 2.25** In the centre shop the stock was wide ranging, including fresh fruit and vegetables, and many ingredients specific to the cultures and religions represented in the centre, including seasonal foods relevant to annual festivals. A weekly delivery cycle meant that some popular items ran out a day or two before the delivery date. An experienced team staffed the shop, which was open for 8.5 hours on weekdays. They had a good manner with detainees, with some understanding of the pressures on them. There was a well-used requests book, with responses to all requests. The staff between them spoke Urdu, Hindi, Polish, Russian and Spanish.

Recommendation

- 2.26** All detainees who wish to take part in the cultural kitchen activity should be able to do so regularly and within a reasonable timescale.

Equality, diversity and faith

Expected outcomes:

There is a clear approach to promoting equality and diversity, underpinned by processes to identify and address any inequality or discrimination. The distinct needs of detainees with protected and any other minority characteristics are recognised and addressed. Detainees are able to practise their religion. The multi-faith team plays a full part in centre life and contributes to detainees' overall care and support.

Strategic management

- 2.27** A diversity strategy and equality policy were in place and a continuous improvement diversity plan had been developed but was not being regularly reviewed. A dedicated diversity manager was shared with nearby Tinsley House and three staff members were designated diversity officers in addition to their main duties. There was one diversity orderly at the time of inspection.

- 2.28** Equality impact assessments had been carried out on several aspects of life in the centre such as induction. These had been undertaken well and many of the recommendations had subsequently been implemented.
- 2.29** Diversity meetings took place monthly in conjunction with safer community meetings. These were well attended by the Home Office, Forward Trust, the Samaritans and the Independent Monitoring Board, but there was limited attendance by G4S managers and staff, including the diversity officers. Detainee representatives could contribute to the latter part of these meetings, which was positive. These meetings had been used to identify and discuss diversity themes, although few action points had resulted.
- 2.30** Diversity monitoring reports were produced each month and an annual equality, diversity and inclusion progress report was in preparation. The efficacy of the monitoring reports was limited by the lack of systematic collection of data across the protected characteristics (see key concern and recommendation S49). Minutes of the diversity meeting indicated that the monitoring reports were reviewed, but issues and trends were not identified.

Recommendation

- 2.31** **Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes.**

Protected characteristics

- 2.32** Systematic efforts were made to identify detainees with a disability and to address their needs, mainly through supported living plans. There was no systematic approach to the identification of other protected characteristics and information collected was limited and unreliable. For example, the centre data showed that only one GBT detainee had been held during 2019, while in our survey five detainees disclosed that they were gay, six that they were bisexual and seven that they were transgender or transsexual.
- 2.33** There was no routine support for detainees with needs related to protected characteristics other than disability. One of the diversity officers and the diversity orderly had been giving individual support, but there was no evidence of this more widely.
- 2.34** There had been some forums for older and younger detainees. These forums were not well prepared or facilitated and had been of limited value. There had been a poorly conceived attempt to organise a forum for all detainees with protected characteristics, but nobody had attended. There were plans to undertake a GBT forum which was positive.
- 2.35** Staff were aware of the telephone interpreting service and when it was appropriate to use it. Records showed that it had been used across the centre over 1,400 times in the previous six months, which was positive. However, the health care team were responsible for more than half of these and there were significant variations in the use of the service across the wings and inadequate use in reception (see paragraph 1.6). We observed detainees being used to interpret when it would have been appropriate to use the interpreting service.

Recommendation

- 2.36** **Detainee support forums should be provided for detainees with protected characteristics and different nationality groups.**

Faith and religion

- 2.37** The chaplaincy was shared with Tinsley House and met the faith needs of most detainees through services, events, activities and ministering to individuals. The chaplaincy strove to source appropriate faith provision for other detainees when needed.
- 2.38** Most services took place in the small chapel, mosque or multi-faith rooms. The exceptions to this were Friday prayers and church services on Sunday, which took place in the visits hall to accommodate the numbers attending. Other religious and cultural events also took place there. All such services and activities took place in the morning or very early afternoon, and there was no evidence of an adverse impact on afternoon visits.
- 2.39** There had been no religious affairs manager in post since March 2019, although a replacement was awaiting security clearance. While the chaplaincy tried to provide cover, the chaplaincy office was empty during much of our inspection which compromised the well-advertised ‘drop-in’ service.
- 2.40** At our last inspection, many of the toilets in detainees’ rooms were only partially screened or not screened at all. In 2018, the High Court had found that the Home Secretary had failed to consider how praying next to uncovered toilets might discriminate against Muslim detainees in the practice of their faith.⁸ Cells had curtains that enabled full screening of the toilets and were also being fitted with firmer decency screens, although these had gaps at the top and bottom. Both were needed (see paragraph 2.8). The Muslim chaplains whom we spoke to considered that the curtains allowed Muslim detainees to practise their faith and, in our survey, 80% of Muslim detainees said that their religious beliefs were respected.

Recommendation

- 2.41** Chaplains should be available for the drop-in service at specified times each day.

Health services

Expected outcomes:

Health services assess and meet detainees’ health needs while in detention and promote continuity of health and social care on release. Health services recognise the specific needs of detainees as displaced persons who may have experienced trauma. The standard of health service provided is equivalent to that which people expect to receive elsewhere in the community.

Governance arrangements

- 2.42** The inspection of health services was jointly undertaken by the Care Quality Commission (CQC)⁹ and HM Inspectorate of Prisons under a memorandum of understanding agreement *between the agencies*. The CQC found there were no breaches of the relevant regulations.
- 2.43** NHS England commissioned G4S Health Services (UK) Limited (G4S) to provide health services at the centre, and Forward Trust to deliver psychosocial substance misuse services.

⁸ See <http://www.bailii.org/ew/cases/EWHC/Admin/2018/213.html>

⁹ CQC is the independent regulator of health and adult social care in England. It monitors, inspects and regulates services to make sure they meet fundamental standards of quality and safety. For information on CQC’s standards of care and the action it takes to improve services, please visit: <http://www.cqc.org.uk>.

The most recent health needs assessment was completed in June 2017, with a refreshed assessment due for completion by July 2019.

- 2.44** Regular governance meetings involving partner agencies monitored service delivery, including quarterly contract review and quality committee meetings, and a quarterly partnership board meeting chaired by NHSE. Health care managers attended a wide range of meetings in the centre to contribute to local management.
- 2.45** Overall, health care provision was a reasonably good and responsive service. Most detainees we spoke to were positive about health care although, in our interviews, a significant minority of detainees complained about their treatment, particularly the dismissive behaviour of a few health care staff. We found evidence of concerns about the attitude of a few health care staff. However, the vast majority of the work that we observed was good.
- 2.46** A regular clinical audit schedule enabled health care managers to monitor the quality and safety of services. The latest annual infection control audit showed 97% compliance and areas of concern about governance had been addressed. The small clinical facilities were reasonably clean, although some litter was left on surfaces by staff during clinics. Managers addressed this during our inspection.
- 2.47** Staff we spoke to knew how to report clinical incidents through the information exchange electronic system. Incidents were analysed by service managers and learning shared with staff at regular team meetings. The imminent move to the 'Ulysses' reporting system was due to improve information sharing about incidents. The head of health care closely monitored actions from several recent external investigations and reviews to ensure timely compliance with recommendations and drive improvements.
- 2.48** Feedback from detainees was gathered through patient surveys in several languages and analysed at clinical governance meetings. Health staff also received feedback from detainees at the regular safer community meetings.
- 2.49** Detainees could complain about health services through several channels including a dedicated confidential complaints box in the health care waiting area, although this was not well promoted. Most complaints were received through the Home Office complaints system and then passed to health care, which potentially compromised medical confidentiality. Once received, complaints were investigated and responded to promptly by health care staff. The responses that we reviewed were adequate and generally addressed the concerns raised.
- 2.50** Difficulties with staff recruitment persisted, particularly registered nurses (RGNs) and health care assistants (HCAs), although G4S promoted employment opportunities and had expanded the skill mix of the team since our last inspection, including the introduction of paramedics. Regular bank and agency staff were used to limit successfully the impact of staff vacancies on service delivery.
- 2.51** Not all health staff received consistent, recorded managerial and clinical supervision in line with the policy, and the quality and consistency of staff supervision records that we reviewed varied. Clinical supervision was being developed, including recent group sessions. Compliance with mandatory training requirements was good across the staff group and staff told us they were well supported in using development opportunities.
- 2.52** All health staff had received intermediate life support training. Emergency equipment and medication were well maintained and checked regularly. Operational staff also had access to well-maintained automated external defibrillators (AEDs) and had been trained in first aid and use of an AED, which was commendable. However, staff told us that, although custody staff were aware of code blue and red emergency protocols, they were rarely used with other radio calls to summon health care in an emergency. This could have caused confusion.

- 2.53** Use of professional telephone interpreting services during health clinics was embedded in practice, with health staff using these significantly more than other areas of the centre. However, we found a few cases where other detainees were allowed to interpret which compromised confidentiality and accuracy.
- 2.54** The provider had developed and was starting to implement a health promotion strategy based on NHS national events. A health champion helped to promote health services to other detainees which was positive. A good range of health promotion information was displayed around the centre, although mainly in English. Folders containing translated health information in the waiting room and the library were not well advertised. There was also limited access to translated mental health and substance misuse self-help materials.
- 2.55** Screening for blood-borne viruses and a range of vaccinations were offered to detainees from the point of reception, although uptake was generally low apart from tuberculosis screening. Sexual health screening was also offered and barrier protection was available.
- 2.56** There were good arrangements for managing communicable diseases, and the provider had worked closely with Public Health England to manage recent outbreaks effectively.

Recommendations

- 2.57** **The health care complaints system should be well advertised and ensure that medical confidentiality is maintained.**
- 2.58** **All health staff should receive regular, recorded managerial and clinical supervision.**
- 2.59** **The centre should promote the emergency protocols to ensure that all custody staff are familiar with them and are confident to use them when needed to prevent confusion and potential risk.**
- 2.60** **A wide range of translated health information, including self-help guidance, should be easily accessible and clearly promoted.**

Primary care and inpatient services

- 2.61** All detainees arriving at Brook House received a prompt initial screen to identify their health and substance misuse needs, and referrals were made to other services. All detainees were given a GP appointment within 24 hours, and staff routinely followed up detainees with a known medical condition who did not attend.
- 2.62** Detainees with acute physical, substance misuse or mental health problems were identified promptly and located on E wing, where they received an increased level of support including a daily review by a GP and nurse. Health care staff routinely attended multidisciplinary meetings with centre staff to review patients with complex health needs whom they discussed each day at handover meetings to ensure they were safe.
- 2.63** The service was staffed 24 hours a day, including an RGN and HCA at night. Doctor PA Ltd provided regular GPs each day and on-call services out of hours.
- 2.64** Access to primary care services was very good. Detainees waited no longer than three days for a routine GP appointment, with emergency appointments available each day. Nurses conducted daily walk-in triage clinics in the health care centre, and HCAs had recently

started running regular well man clinics across the centre to improve engagement with detainees and offer health promotion advice. This was a positive initiative. Did-not-attend rates for primary care clinics were monitored. These were reducing and in April 2019 the rate stood at 14% for nurse-led clinics and 18% for GP clinics. Detainees on food and fluid refusal were managed well by health staff, in liaison with centre staff. Detainees had prompt access to visiting health professionals, including an optician.

- 2.65** All GPs and some nurses had completed relevant training in rule 35, including signs of trauma and torture. Rule 35 assessments by GPs were completed promptly, usually with clear judgements, but were not submitted for suicidal ideation (see paragraph 1.19 and key concern and recommendation S43). The provider had developed a pathway to improve this and there was a quality assurance process for assessments.
- 2.66** There was structured, nurse-led management of patients with long-term health conditions such as diabetes and asthma. Care plans were created on or shortly after arrival at the centre and reviewed regularly by nurses at daily clinics, with GP or pharmacy input where necessary.
- 2.67** Two escorts a day were available for detainees requiring treatment at hospital. Cancellation rates were low at the time of the inspection.
- 2.68** We reviewed records of detainees released from the centre which showed that they were given a summary of their medical records and an adequate supply of prescribed medication based on individual need. There was no formal monitoring of compliance to ensure patient safety on discharge.

Recommendation

- 2.69** **Formal monitoring should be introduced to ensure that all detainees leave the centre with their prescribed medication.**

Good practice

- 2.70** *The introduction of well-man sessions across the centre was a positive initiative to improve engagement with the service and offer health promotion advice.*

Mental health

- 2.71** All operational staff had received mental health awareness training as part of their initial training. Mental health first aid training had recently been introduced with the intention of rolling it out to all staff, which was positive. More than a third of staff had already received this.
- 2.72** G4S mental health nurses provided primary and secondary mental health support and subcontracted Elysium Healthcare to deliver specialist secondary care. This included a weekly consultant psychiatrist session and an emotional health group run by a clinical psychologist which included anxiety and depression. The group was for English speakers only, but the psychiatrist and nurses used telephone interpreting and translated materials in individual sessions.
- 2.73** A senior mental health nurse worked every weekday and there was a duty mental health nurse seven days a week. All urgent referrals were seen within 24 hours and routine referrals within three to four days, which was reasonable. Referrals were received through

reception screening, self-referral, officers or other health staff. The recent implementation of the well-man clinic on the wings had identified mental health concerns which were referred to the mental health nurses and dealt with very promptly.

- 2.74** The service offered a broad approach to detainees' emotional and mental health needs, including individual sessions to address mild to moderate problems. Guided self-help material could be translated but not enough translated material was displayed or easily available and needed better promotion. A drop-in group called 'coffee and chat' to give low-level mental health support was just about to restart.
- 2.75** There was an average of 50 referrals a month and, at the time of the inspection, the team was supporting 32 detainees with varying levels of need. The did-not-attend rate for individual sessions was high but these were actively followed up and further appointments offered. There was a symptomatic approach to post-traumatic stress disorder, which was appropriate given the unpredictable and short stay of detainees.
- 2.76** The mental health nurses gave regular support to detainees on rule 40 and those on constant watch. They also attended some ACDT¹⁰ reviews but not enough to ensure a multidisciplinary approach (see paragraph 1.26).
- 2.77** A learning disability nurse undertook assessments and participated in supported living plans for detainees with a moderate learning disability.
- 2.78** Detainees with severe illness or psychosis had not been admitted to the centre. If problems emerged, a review of detention took place. Four detainees had been transferred under the Mental Health Act in the previous 12 months, three within agreed timescales of within 14 days. One had exceeded this by 12 days.
- 2.79** Detainees with continuing needs were supported before they left the centre and were given medication and contacts with community teams. A procedure for transferring health information between IRC health care departments had been established following a recommendation from the Prisons and Probation Ombudsman.

Substance use treatment

- 2.80** Since the last inspection, the centre had implemented a joint substance misuse strategy for the two Gatwick IRCs, and an action plan which was updated every six months. However, the last completed review had taken place in October 2018 and the strategy needed updating (see paragraph 1.53). Drug and alcohol intelligence was passed to the substance misuse psychosocial team and discussed at security meetings, which health care staff regularly attended.
- 2.81** Detainees with substance misuse problems were referred for an assessment promptly on reception. The demand for clinical prescribing for drug and alcohol dependence was low and detainees were given appropriate support. Prescribing for opiate dependence focused on reduction, although prescribing was flexible and patients were involved in treatment decisions with regular reviews. At the time of the inspection, one detainee was receiving opiate substitution therapy and was on methadone. Two detainees were detoxing from alcohol and had received good care with regular checks throughout the first five days of treatment.
- 2.82** Forward Trust delivered the psychosocial service. A team leader and two psychosocial workers screened all new arrivals and offered individual and group work. At the time of the

¹⁰ Assessment, care in detention and teamwork case management of detainees at risk of suicide or self-harm.

inspection, the team were supporting 20 detainees. Access to psychosocial interventions was good, with effective use of two peer supporters who ran drop-in sessions on each wing to promote the service. They also participated in weekly workshops which covered a range of topics including alcohol, cannabis awareness and psychoactive substances. Two popular auricular acupuncture sessions took place each week which promoted physical and emotional wellbeing.

- 2.83** Some information was available in several languages but information packs to work through were only available in English which limited their usefulness.
- 2.84** There was evidence of a small amount of illicit drug use in the centre, mainly cannabis and psychoactive substances (NPS). Health care kept a log of suspected use of NPS. During 2019, there had been five episodes in March and five in May where detainees needed observation.
- 2.85** The team delivered monthly training and awareness sessions for custody staff on substance misuse, including the effects of NPS. All custody staff had received this training, which was commendable.

Good practice

- 2.86** *There was effective use of substance misuse peer supporters who ran drop-in sessions on each wing to promote the substance misuse service. They participated in weekly workshops which covered a range of topics including alcohol, cannabis awareness and psychoactive substances. A detainee 'health champion' also helped to promote health services.*

Medicines optimisation and pharmacy services

- 2.87** G4S contracted pharmacy supplies from Boots UK at Gatwick Airport and Alliance Healthcare Direct supplied methadone.
- 2.88** A pharmacy technician worked every weekday and managed the pharmacy efficiently. Since October 2018, a G4S pharmacist had been visiting for four hours each week to give professional oversight of the service. A pharmacist from Boots UK had recently taken over this role and planned to continue with audits and medicine use reviews.
- 2.89** Medicines were administered by competent staff three times a day, with separate administration for opiate substitution therapy. The allocation of an officer to supervise the health care waiting area during clinics and medication times had increased security and improved the oversight of medicine administration. SystmOne (electronic clinical records) was used for prescribing and administration of medicine. Records that we looked at were complete and non-attendance was followed up. About 60 to 70% of detainees on medication received it in possession following appropriate risk assessment.
- 2.90** Medicines were stored safely in the pharmacy room in the health centre and refrigerator temperatures were well monitored. Most medicines were supplied for named patients in individual labelled containers. The few stock items were well managed. Controlled drugs were stored appropriately in a cabinet which was now fixed with the correct bolts.
- 2.91** Detainee custody officers could administer soluble paracetamol to detainees, following consultation with a health professional, who logged the administration on SystmOne. The governance of this was robust and the process worked well. There were now protocols for a range of medicines to treat minor illnesses and emergency medicines which authorised registered nurses and paramedics to administer certain medicines in specific conditions.

- 2.92** Medicines was a standard agenda item at the quality meeting which was attended by the doctor and pharmacist. Medication audits, prescribing trends and medication incidents were discussed.

Oral health

- 2.93** A dental officer from East Surrey Hospital attended the centre fortnightly to assess patients and provide oral health advice. Detainees requiring urgent treatment were referred to hospital dental clinics at weekends. Detainees waited about three weeks for a routine assessment and could access emergency care daily at Crawley Hospital.
- 2.94** There were no on-site dental facilities and G4S was considering engaging a mobile dental service to improve access to dental treatment.

Section 3. Activities

Expected outcomes:

The centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees.

Access to activities

- 3.1** The centre provided a reasonably good range of activities. In our survey, 25% of detainees said they attended education and 45% said they had a job. Nearly all those who attended education said they found it useful (88%). Access to activity areas was good.
- 3.2** The capacity of some facilities was limited by the size of rooms, for example the gym could only accommodate about 20 detainees. The barber shop had space for only one customer at a time, and the cultural kitchen could only occupy four detainees (see paragraph 2.24). Only a third of detainees said they had enough to do to fill their time.
- 3.3** Access to paid work was good. The number of jobs had increased since the last inspection and was sufficient for the population with 141 jobs available, 99 of which were filled at the time of the inspection. These included about 20 orderly and mentor posts which had been created since the last inspection, as well as cleaners, kitchen staff, painters and gym assistants. Allocation to work was efficient. Very few men had been prevented from working through non-compliance with Home Office requirements.
- 3.4** Teachers actively promoted their classes, handing out leaflets and displaying posters on notice boards. Detainees could study English, numeracy, Spanish, Italian and a range of short personal development courses such as anger management and job interview techniques.
- 3.5** Induction included a brief tour of facilities including education and work opportunities, but it was left to detainees to enquire further if they wished to participate. There was no advice or guidance session to help and encourage them to choose a course.
- 3.6** No vocational training was offered apart from an in-house certificate in food hygiene for kitchen and servery workers. Managers had plans to introduce barista and distance learning courses in the near future. There was little provision to promote wellbeing or to help detainees cope with stress (see key concern and recommendation S51).
- 3.7** Two IT rooms provided good access to the internet, with more than 30 PCs for detainees to use on a drop-in basis. Machines sometimes ran slowly and many sites were blocked unnecessarily (see paragraph 4.16).
- 3.8** Recreational facilities on the residential units consisted of a pool table, table tennis table, and board games supplied on request. Residents had good access to the yards where they could play football or cricket or socialise. Big screen television showed some popular sporting events. A cinema showed a limited range of films, but managers were planning to introduce world cinema such as Bollywood films.

Education and work

- 3.9** Teachers promoted their subjects enthusiastically and worked hard to deliver interesting and engaging classes. They had developed good schemes of work which were flexible enough to cater for the wide range of abilities and interests. They created individual learning plans for detainees who remained on the course, setting appropriate targets based on an initial assessment of their needs. However, only a few detainees were motivated to participate regularly. Many attended erratically for only short periods. This constant coming and going made it difficult for learners to maintain concentration and make progress.
- 3.10** In one classroom the teacher managed up to four different groups simultaneously, studying a range of courses including anger management, English and Spanish. Despite the teacher's best efforts, outcomes for many of the learners were poor. The other classroom provided a well-managed ESOL course (English for speakers of other languages). Although about half the detainees said that they understood little or no English, attendance was very low. However, those who attended classes regularly received good individual coaching and made good progress.
- 3.11** Resources for teaching required improvement. Teaching rooms were equipped with computers, but they were not used much. There were no electronic whiteboards and teachers worked mainly from a limited range of paper worksheets.
- 3.12** No externally-validated accreditation of achievement was available in education, but teachers did award G4S certificates to learners who made good progress. Since the last inspection in 2016, 258 certificates had been awarded.
- 3.13** Managers were developing strategies to improve the education provision. The centre had adopted a quality assurance framework. However, most of the measures had not yet been implemented. For example, there was no procedure for teaching and learning observations, and no annual needs analysis to inform curriculum development. These points were recognised in the centre's self-assessment report.
- 3.14** There was a lack of support for teaching, which reduced the effectiveness of learning. Not enough encouragement was provided by the centre for detainees to participate in education and improve their skills. Managers had not developed policies to improve punctuality or motivate consistent attendance, and attendance at some classes remained poor (see key concern and recommendation S50).
- 3.15** Activities managers aimed to create a work culture similar to that in the community. Each job had a contract of employment and a clear description of the responsibilities of the role. Supervision of work was thorough and staff monitored attendance and standards of work carefully. However, there was no formal record of the quality of detainees' work, and no opportunities for workers to gain vocational qualifications, except in food hygiene.
- 3.16** New mentoring roles included race relations and diversity orderlies and safer community orderlies. They worked to improve communication and resolution of issues across the centre, through discussion with residents, liaison with staff teams, and attendance at monthly meetings such as equality and diversity. They also gave newly-arrived detainees information about the centre and supported the more vulnerable residents. Orderlies appreciated the extra responsibility they were given and the opportunity to help their peers.
- 3.17** The cultural kitchen was a popular and well-managed facility enabling detainees to prepare their own meals using ingredients supplied by the centre's kitchen. Up to four men could attend each morning and afternoon session (see paragraph 2.24). A small craft room afforded

opportunities for creative expression, using paint, papier mâché, beadwork and T-shirt printing.

Recommendation

- 3.18 Managers should implement the quality assurance framework to support teachers more effectively in improving the provision.**

Library provision

- 3.19** Access to the library was good, but the facility was poorly managed and unattractive. There were spaces for eight people to sit and read which were often filled with detainees playing cards or board games. In our survey, only 28% of detainees said that the library had what they needed.
- 3.20** The book stock included titles in over 30 languages. The number of books was adequate for the size of population, but many were old and there were few recent acquisitions. There were no promotional displays or activities to promote reading, and the number of books loaned was very small. The library did not monitor book loans to inform future acquisitions. The stock of legal textbooks was out of date.
- 3.21** The library had a small collection of film DVDs and music CDs for use in the library, and some language learning courses on CD. A good range of daily newspapers was available and we saw four foreign-language titles during the inspection.

Recommendation

- 3.22 Managers should monitor use of the library to identify areas where the service can be improved and use increased.**

Fitness provision

- 3.23** Access to fitness provision was reasonably good. While detainees could easily use the gym, it was not clear exactly how long it was open each day. A PE instructor thought it was open for seven hours, while management information suggested eight hours and 45 minutes or nine hours and 15 minutes. In any event, the gym was equipped with a good range of exercise equipment. The facility was small, with a capacity of about 20 users, but was adequate for the current population.
- 3.24** Since the previous inspection, artificial turf had been laid on one wing courtyard, improving the sports facilities. Two yards were in use in the afternoons, one for football and one for cricket. Activities staff and orderlies organised regular football and cricket tournaments on the exercise yards, which were popular with detainees.
- 3.25** The gym provided a limited service. There was no formal gym induction, though staff and orderlies were available to help detainees use the equipment. There was little promotion of fitness activities, and no links to the health care department or support for men recovering from injuries. No records were kept of which detainees were using the facility. However, managers planned to provide an improved service in the near future. Five officers were close to completing a level 2 gym instructor course, to enable them to provide detainees with a full gym induction, fitness courses and advice on individual training programmes.

Section 4. Preparation for removal and release

Welfare

Expected outcomes:

Detainees are supported by welfare services during their time in detention and prepared for release, transfer or removal before leaving detention.

- 4.1 The welfare service remained a valuable resource for detainees which helped to relieve some of their tension and stress. The four experienced welfare officers had been trained to give basic immigration advice up to level 1 of the Office of the Immigration Services Commissioner's scheme, which was good practice.
- 4.2 The welfare office was open seven days a week and staffed by two officers. During the previous six months, the team had assisted about 800 detainees a month with a wide range of issues including retrieving lost property, contacting solicitors, booking appointments for the legal advice surgeries and contacting the Gatwick Detainee Welfare Group (GDWG). We observed welfare officers assisting detainees to solve their welfare problems. However, welfare staff did not meet detainees on arrival to assess their needs (see key concern and recommendation S53).
- 4.3 The welfare office had moved and was now located on a corridor locked off from the main activities centre. This prevented the constant disruptions we saw at our last inspection and afforded more confidentiality, but detainees could no longer drop in. To mitigate this a detainee welfare orderly had been recruited to hand out tickets to detainees who wanted to use the service. In addition, welfare officers also went on to the wings to meet detainees.

Good practice

- 4.4 *Welfare officers were accredited by the Office of the Immigration Services Commissioner to give level 1 support, which enhanced their ability to provide information and to direct detainees to sources of support.*

Visits and family contact

Expected outcomes:

Detainees can easily maintain contact with their families and the outside world. Visits take place in a clean, respectful and safe environment.

- 4.5 A free minibus shuttle service took visitors to and from Gatwick Airport railway station. Limited details of the service were mentioned on the centre website and we were told by several visitors that they were not aware of it.
- 4.6 Six and a half hours of slots for visits were available every day, which was sufficient. For security reasons visits had to be booked at least 24 hours in advance by telephone, email or letter. Visitors trying to book by phone told of problems getting through and, when we tested the number, it took several calls before the phone was answered. We were told that it was not unusual for staff responsible for answering the phones to have to leave them with no cover in place and that there were plans for an online booking system.

- 4.7** All visitors were required to pass through a metal detector and most adults were subject to rub-down searches. A more thorough search was undertaken when there was specific intelligence about a visitor or when their behaviour aroused suspicion.
- 4.8** Visitors were only allowed to take £5 in coins into the centre. Visitors had access to vending machines in the reception area which dispensed hot and cold drinks, chocolate and crisps. No hot food was available. Toilets were in good condition and clean and there was a changing facility for babies. Visitors were required to deposit remaining coins in a locker before entering the visits hall.
- 4.9** The visits hall was bright, well-furnished and welcoming. There was a water dispenser and complimentary fresh fruit. There was a play area with toys principally for very young children. Colouring books were available.
- 4.10** Guidance in the centre had recently been revised and we saw that detainees were able to greet and bid farewell to their visitors with hugs and kisses and hold hands with them throughout the visit. Staff monitored visits on CCTV and periodically walked discreetly around the visits hall. The visitors we spoke to were positive about their experience and treatment by staff.
- 4.11** In our survey, only 37% of detainees against the comparator of 49% said that they had received a visit while at the centre. GDWG provided a befriending service, including for isolated detainees. They had established good co-operation with the welfare office and were receiving referrals from it. They held a surgery twice a week where they could receive self-referrals.

Recommendation

- 4.12 Visitors should be able to book visits easily by telephone.**

Communications

Expected outcomes:

Detainees can maintain contact with the outside world regularly using a full range of communications media.

- 4.13** Access to communications was generally good. Detainees were given a mobile telephone on loan if they were not permitted to keep their own because it had camera or recording capabilities. Detainees were given a free phone call in reception and an international dialling card and they could buy phone cards from the centre shop. Wing staff and the welfare office enabled detainees who were short of money to make free calls and they could also apply for a £10 monthly top up from the GDWG.
- 4.14** A fax machine was available for detainees on each unit, and there was a photocopier and a scanner in the library. This was adequate for the population of detainees held. Incoming faxes arrived at a central point and were delivered to wings within four hours of receipt.
- 4.15** Detainees could post unlimited legal correspondence free of charge but only one personal letter a week. There was some confusion about how detainees received their mail and whether it was photocopied (see paragraph 1.48). We raised this with managers who undertook to clarify this for staff and detainees. We saw no significant delay in mail distribution, even though in our survey a third of detainees spoke of problems with sending or receiving mail.

- 4.16** Access to computers was good, although download speeds could be slow. Detainees could access their emails and use the internet in two designated IT rooms. However, the blocking of legitimate websites, including some national newspapers, immigration support and humanitarian sites, was a significant problem which could affect detainees' preparation for legal cases and removal or release plans. Systems to unlock sites and provide access were slow. In our survey, only 16% said it was easy to access what they wanted on the internet.
- 4.17** There were no restrictions on how much documentation detainees could print, but they were not able to do so in confidence. There was still no access to social networks or video-calling sites, which remained an inappropriate restriction for a detainee population.

Recommendation

- 4.18 Detainees should have access to video-calling and social networking sites unless an individual risk assessment determines that this is inappropriate.**

Leaving the centre

Expected outcomes:

Detainees leaving detention are prepared for their release, transfer, or removal.

Detainees are treated sensitively and humanely and are able to retain or recover their property.

- 4.19** During the six months from October 2018 to March 2019, 1,901 detainees had left the centre of whom 742 were removed from the UK, 858 were released into the community and 301 were transferred to other places of detention.
- 4.20** The welfare team did not routinely interview all detainees leaving the centre to make sure their welfare needs were met (see key concern and recommendation S53). Some detainees were not released because there was no suitable accommodation (see paragraph 1.77). Others had been released homeless. Neither the Home Office nor G4S kept records of detainees being released homeless and could not quantify the extent of the problem.
- 4.21** G4S held ad hoc meetings to discuss complex removals. Helpful release plans were implemented for men with complex needs leaving the centre. In some cases, G4S had driven men to their release addresses. Following a legal challenge, all detainees were being given at least 72 hours' notice of their removal at the time of our inspection and all removal flights had been suspended. We observed detainees leaving the centre and discharge processes were efficient and orderly. Released detainees were routinely given a summary of their medical records and at least a week's supply of medication.
- 4.22** Detainees with no funds to reach their final destination could make a request to the Home Office for additional funding. If this failed, they could apply for up to £25 from GDWG through the welfare office.

Recommendation

- 4.23 The Home Office should keep records of the numbers of detainees being released homeless.**

Section 5. Summary of recommendations and good practice

The following is a listing of key concerns and recommendations, general recommendations and examples of good practice included in this report. The reference numbers in the left-hand column refer to the paragraph location in the main report.

Key concerns and recommendations		Directed to:
S42	<p>Key concern: Detainee interviews were not conducted in private and did not cover enough areas of possible vulnerability and risk. There was not enough use of professional interpreting by reception staff.</p> <p>Recommendation: Reception interviews for new arrivals should be held in private using telephone interpreting wherever detainees are not fluent in English, and should consider a broad range of potential risks and vulnerabilities.</p>	Centre manager
S43	<p>Key concern: During the previous six months, the centre doctors had not submitted any rule 35 reports notifying the Home Office that a detainee may be suffering suicidal ideation. Yet, in our survey 40% of detainees said they had felt suicidal at some time while in the centre. In the previous year almost 100 detainees had been on constant watch to prevent self-harm or suicide.</p> <p>Recommendation: Doctors should submit a rule 35 report to the Home Office on any detainee they suspect of having suicidal ideation.</p>	Centre manager
S44	<p>Key concern: The quality of ACDT documentation was not good enough. Assessments and reviews were timely but care maps frequently lacked detail, case reviews were not sufficiently multidisciplinary and some post-closure reviews were not completed. ACDT observations were regular but did not always demonstrate enough meaningful engagement.</p> <p>Recommendation: Care maps should always be completed in detail and regularly updated. Case reviews, including those for post closure, should demonstrate multidisciplinary input and daily observations should be in depth and demonstrate engagement with detainees.</p>	Centre manager
S45	<p>Key concern: Despite the reduction in the average length of detention, some detainees were held for prolonged periods. There was evidence that lengthy and indefinite detention affected feelings of safety and wellbeing. At the start of our inspection, 13 detainees had been held for more than six months, two of them for more than a year. The longest detention was for one year and eight months. Sluggish casework and delays in obtaining suitable accommodation and travel documents prolonged detention.</p> <p>Recommendation: There should be a strict time limit on the length of detention and caseworkers should act with diligence and expedition throughout detention.</p>	Home Office

S46	<p>Key concern: Detainees were locked in their cells from 9pm to 8am and, during the day, for two half-hour periods for roll count. This was a disproportionate restriction for a detainee population.</p> <p>Recommendation: Detainees should not be locked in cells and should be allowed free movement around the centre until later in the evening</p>	Centre manager
S47	<p>Key concern: There was a reasonable range of food choices, but we received many complaints about the food not meeting the diverse needs of the population, both in our detainee interviews and survey, where 68% of detainees said the food was quite or very bad. The centre was aware that some groups of detainees were dissatisfied with the food but had not succeeded in addressing these concerns.</p> <p>Recommendation: Effective measures should be taken to ensure that a majority of detainees find the food to be of sufficient quality.</p>	Centre manager
S48	<p>Key concern: The complaints system had several layers of quality checking. However, while courteous, replies often took an unhelpfully defensive and legalistic approach. Almost no complaints were upheld, and in some cases, that had clearly been the wrong decision. In both our survey and interviews, nearly half the detainees suggested that they did not have confidence in the complaints system.</p> <p>Recommendation: Managers should investigate and address the reasons for detainees' low confidence in the complaints system.</p>	Centre manager
S49	<p>Key concern: There was no systematic approach to the identification of individuals' protected characteristics.</p> <p>Recommendation: Information about the protected characteristics of all detainees should be systematically collected on arrival, with support offered where necessary.</p>	Centre manager
S50	<p>Key concern: The centre did not give detainees enough encouragement to participate in education and improve their skills. Managers had not developed policies to incentivise consistent attendance. The centre induction did not include advice or guidance to help and encourage detainees to choose a course.</p> <p>Recommendation: Managers should significantly increase the number of detainees who benefit from the education provision, through better promotion, guidance and incentives to improve participation.</p>	Centre manager
S51	<p>Key concern: Although access to fitness provision was reasonably good, there were not enough activities to promote wellbeing, relaxation or stress relief to help detainees who were often preoccupied by their cases.</p> <p>Recommendation: Managers should introduce relaxation and stress-relief activities into the centre's activities programme.</p>	Centre manager

S52	<p>Key concern: Detainees had reasonable access to email and internet. However, the blocking of legitimate websites, including some national newspapers, immigration support and humanitarian sites, was a significant problem which could affect detainees' preparations for legal motions and removal or release plans. Systems to unlock sites and provide access were slow. In our survey, only 16% said it was easy to access what they wanted on the internet. There was still no access to social networks or video-calling sites.</p> <p>Recommendation: Detainees should have access to legitimate websites, including those facilitating legal assistance, Skype and social networking. There should be effective and prompt procedures for unblocking such sites.</p>	Centre manager
S53	<p>Key concern: Centre staff did not systematically assess detainees' welfare needs on arrival nor did they assess whether detainees had outstanding welfare needs before leaving the centre.</p> <p>Recommendation: Detainees should be routinely seen on arrival and before discharge to ensure that welfare matters are identified and addressed.</p>	Centre manager
General recommendations		Directed to:
1.12	Detainees should not be subjected to exhausting overnight transfers when this could be avoided through more timely escorts.	Home Office and escort contractor
1.32	Key departments should be consistently represented at monthly safer community meetings and the minutes should demonstrate discussions and actions based on the data presented.	Centre manager
1.44	Violence reduction processes should focus on identifying, quantifying and addressing the causes of violence.	Centre manager
1.55	All security procedures should be proportionate to a detainee population and based on individual risk assessments.	Centre manager
1.70	An in-depth review of use of force should be conducted to ensure that such incidents are minimised in line with the level used in other immigration removal centres.	Centre manager
1.71	Detainees in the segregation unit should be offered full access to the regime, subject to individual risk assessments.	Centre manager
2.14	Toilets and basins should be clean and unstained.	Centre manager
2.20	Decisions on actions should be made, and their implementation tracked, at detainee consultation meetings.	Centre manager
2.26	All detainees who wish to take part in the cultural kitchen activity should be able to do so regularly and within a reasonable timescale.	Centre manager
2.31	Diversity monitoring should facilitate the identification and investigation of trends in detainee outcomes.	Centre manager
2.36	Detainee support forums should be provided for detainees with protected characteristics and different nationality groups.	Centre manager
2.41	Chaplains should be available for the drop-in service at specified times each day.	Centre manager
2.57	The health care complaints system should be well advertised and ensure that medical confidentiality is maintained.	Centre manager
2.58	All health staff should receive regular, recorded managerial and clinical supervision.	Centre manager

2.59	The centre should promote the emergency protocols to ensure that all custody staff are familiar with them and are confident to use them when needed to prevent confusion and potential risk.	Centre manager
2.60	A wide range of translated health information, including self-help guidance, should be easily accessible and clearly promoted.	Centre manager
2.69	Formal monitoring should be introduced to ensure that all detainees leave the centre with their prescribed medication.	Centre manager
3.18	Managers should implement the quality assurance framework to support teachers more effectively in improving the provision.	Centre manager
3.22	Managers should monitor use of the library to identify areas where the service can be improved and use increased.	Centre manager
4.12	Visitors should be able to book visits easily by telephone.	Centre manager
4.18	Detainees should have access to video-calling and social networking sites unless an individual risk assessment determines that this is inappropriate.	Centre manager
4.23	The Home Office should keep records of the numbers of detainees being released homeless.	Home Office
Examples of good practice		
1.56	All new staff were trained in corruption prevention. In our interviews, all staff said that they would report inappropriate behaviour by their colleagues. Staff had submitted a large number of security information reports to prevent corruption (307 in the last year).	
2.7	The training programme for new officers had been completely redesigned so that the first week focused more heavily on the detainee experience, using former detainees, and on interpersonal skills. There were substantial training modules on mental health and other topics directly relevant to giving mature support and care to detainees. This also enabled those with entrenched negative attitudes to be identified early.	
2.15	High standards of cleanliness were sustained through active management which included unlocking cleaners after lock-up at night to do a thorough clean of common areas; allocation of cleaners to specific tasks and careful management and monitoring of those tasks; use of high quality paint which could be kept clean; appointment of room orderlies to ensure that any vacated room was immediately cleaned and fully equipped; a cleanest wing competition with incentives; controlled and predictable provision of cleaning materials; and immediate removal of any graffiti.	
2.70	The introduction of well-man sessions across the centre was a positive initiative to improve engagement with the service and offer health promotion advice.	
2.86	There was effective use of substance misuse peer supporters who ran drop-in sessions on each wing to promote the substance misuse service. They participated in weekly workshops which covered a range of topics including alcohol, cannabis awareness and psychoactive substances. A detainee 'health champion' also helped to promote health services.	
4.4	Welfare officers were accredited by the Office of the Immigration Services Commissioner to give level 1 support, which enhanced their ability to provide information and to direct detainees to sources of support.	

Section 6. Appendices

Appendix I: Inspection team

Peter Clarke	Chief Inspector of Prisons
Hindpal Singh Bhui	Team leader
Colin Carroll	Inspector
Deri Hughes-Roberts	Inspector
Martin Kettle	Inspector
Chris Rush	Inspector
Kam Sarai	Inspector
Maureen Jamieson	Health services inspector
Tim Byrom	Care Quality Commission inspector
Steve Oliver-Watts	Associate activities inspector
Sharlene Andrew	Researcher
Helen Ranns	Researcher
Patricia Taflan	Researcher
Claudia Vince	Researcher
Holly Tuson	Research trainee

Appendix II: Progress on recommendations from the last report

The following is a summary of the main findings from the last report and a list of all the recommendations made, organised under the four tests of a healthy establishment. The reference numbers at the end of each recommendation refer to the paragraph location in the previous report. If a recommendation has been repeated in the main report, its new paragraph number is also provided.

Safety

Detainees are held in safety and with due regard to the insecurity of their position.

At the last inspection in 2016, early days arrangements had improved but not all detainees received a consistent level of care during reception and early days in detention. Most detainees said they felt safe and levels of violence were fairly low. Those at risk of self-harm were supported, but constant watch cells were in poor condition. Safeguarding procedures did not yet reflect new guidance on detainees at risk but were developing well. Dynamic security was good. Some security procedures remained disproportionate for a detainee population. Use of force had increased but governance of use of force and separation was very good. Fewer detainees were separated than at the last inspection and detainees were generally moved out quickly; the regime in the separation unit was poor. A third of detainees had no legal representation. The average length of cumulative detention was high. Rule 35 reports were helpful for some and a third had led to release, but protections for those with post-traumatic stress disorder were inadequate. Outcomes for detainees were reasonably good against this healthy establishment test.

Main recommendation

The reasons for the increasing length of detention should be analysed and appropriate remedial action taken. All casework should be progressed promptly and, if that is impossible, the detainee should be released. (S35)

Not achieved

Recommendations

Detainees should not be subjected to exhausting overnight transfers when this could be avoided through more timely escorts. (I.4)

Not achieved (Recommendation repeated, I.12)

All detainees should have a private reception interview and experience robust first night and induction procedures, irrespective of their initial location, to help reduce anxiety and prepare for their time in the centre. (I.11)

Not achieved

The management of perpetrators of violence and bullying should include monitoring and challenge of poor behaviour. (I.18)

Not achieved

The ACDT process should be reserved for detainees assessed as at risk of self-harm, and should not be used to monitor those who do not eat food provided by the centre. ACDT documents should identify specific triggers and daily entries should reflect interactions with detainees in crisis. (I.25)

Partially achieved

The constant supervision cells should be refurbished and cleaned to provide a more suitable environment for detainees in crisis. (I.26)

Achieved

All staff should have effective training in the adults at risk guidance. There should be effective multidisciplinary oversight of detainees in this group. Their vulnerability should be monitored carefully and developments communicated promptly to Home Office case workers. (I.33)

Partially achieved

A care suite for detainees at risk of self-harm should be established. (I.27, repeated recommendation I.42)

Not achieved

All detainees claiming to be children should have a Merton-compliant age assessment by social services. (I.38)

Not achieved

There should be a multi-agency case review of detainees found by social services to be children, which should include the chief immigration officer who made the original assessment, to learn safeguarding lessons. (I.39)

Not achieved

All security procedures should be proportionate to a detainee population and based on individual risk assessments. (I.48)

Not achieved (Recommendation repeated, I.55)

Detainees should not be locked in cells and should be allowed free movement around the centre until later in the evening. (I.49)

Not achieved

The rewards scheme should not be punitive or based on sanctions. (I.51)

Achieved

All use of force should be necessary, proportionate and competently applied. (I.58)

Partially achieved

Detainees in the separation unit should be held in clean and fully furnished cells, and they should be able to access a full regime. (I.59)

Partially achieved

In consultation with the Legal Aid Agency, the centre should ensure adequate prompt access to legal advice. (I.66, recommendation repeated I.84)

Achieved

Detainees should have access to up-to-date legal resources, including text books and country of origin information, and be permitted to print legal correspondence in confidence. (I.67)

Partially achieved

The contact management team should conduct comprehensive induction interviews with all detainees within 24 hours of arrival at the centre. (I.78)

Not achieved

Monthly progress reports should be served on time and should contain meaningful and relevant information on progress since the last report. (1.79, repeated recommendation 1.98)

Achieved

Where a detainee claims they have been tortured, the Rule 35 report should include an assessment of PTSD. Where there is independent evidence of torture, the Home Office should only detain in very exceptional circumstances. Reasons for maintaining detention in such cases should be comprehensive. (1.80)

Not achieved

Respect

Detainees are treated with respect for their human dignity and the circumstances of their detention.

At the last inspection in 2016, poor ventilation and the general prison-like environment remained significant shortcomings. Cleanliness varied and some deep cleaning was needed. Staff-detainee relationships were a particular strength. Equality and diversity structures were robust and outcomes were reasonably good for most detainees. Faith provision was excellent. Complaints were well managed. The standard of food was reasonable and the cultural kitchen was used more often. Health care provision was adequate. There were shortcomings in some areas, including pharmacy. Outcomes for detainees were reasonably good against this healthy establishment test.

Main recommendation

Concerted action should be taken to soften the prison-like living conditions. Showers and toilets should be adequately screened, and toilets deep cleaned. Units should be well ventilated and detainees should have more control over access to fresh air. (S36)

Partially achieved

Recommendations

Each detainee should be asked about their welfare by their allocated care officer at least once a month and more frequently in the early stages, and the conversation should be recorded together with any actions arising from it. (2.8)

Achieved

The specific needs of gay and bisexual detainees should be identified and addressed through the fostering of a climate of acceptance of different lifestyles, drawing on the resources of community organisations. (2.19)

Not achieved

A health needs assessment should be carried out and a centre health and well-being strategy should be developed. (2.40)

Achieved

There should be regular clinical audit. (2.41)

Achieved

The health care complaints system should maintain medical confidentiality. (2.42)

Partially achieved

Detainees who do not speak or read English well should have reasonable access to translated information about health services and health and well-being. (2.43)

Partially achieved

A professional pharmacist should be present on site to audit and quality assure services, provide advice to detainees, and advise the medicines and therapeutics committee. (2.54)

Achieved

Medicines administration and collection queues should be supervised. The medicines room hatch and controlled drugs cabinet should be made secure. (2.55)

Achieved

A drug and alcohol strategy for the centre should be established. (2.65)

Achieved

The extended opening hours of the cultural kitchen should be continued after Tinsley House detainees return to that centre. The kitchen should be increased in size. (2.71)

Partially achieved

Activities

The centre encourages activities and provides facilities to preserve and promote the mental and physical well-being of detainees.

At the last inspection in 2016, detainees could attend activities with reasonable ease and reported particularly good access to the gym and library. However, facilities were limited and the infrastructure was likely to be further challenged by plans for a larger population. There was a limited range of education but teaching and learning were good and detainees found education helpful. There was enough work for most detainees. The library provided a good service. The gym was small, but adequate and well used. Outcomes for detainees were reasonably good against this healthy establishment test.

Recommendations

The quantity and range of provision in English and English for speakers of other languages should increase significantly to ensure that all detainees' needs are fully met. (3.10)

Partially achieved

Thorough and systematic quality assurance, including regular self-assessment, should be applied to education and other activities. (3.11, repeated recommendation 3.19)

Not achieved

A strategy should be developed and implemented to improve punctuality and attendance at learning and skills sessions. (3.12)

Not achieved

Detainees should not be prevented from taking up jobs because of non-compliance with the Home Office. (3.15, repeated recommendation 3.23)

Achieved

A wider range of accredited employment related work should be provided to enhance detainees' skills and employment opportunities. (3.16)

Achieved

Language support materials should be available in the library to enable detainees to improve their language skills. (3.19, repeated recommendation 3.27)

Achieved

Detainees' attendance in the gym should be monitored systematically to ensure fairness and equality of access. (3.23)

Not achieved

Preparation for removal and release

Detainees are able to maintain contact with family, friends, support groups, legal representatives and advisers, access information about their country of origin and be prepared for their release transfer or removal. Detainees are able to retain or recover their property.

At the last inspection in 2016, welfare services had improved and detainees spoke positively of the support they received from welfare staff. Visits arrangements were reasonable but the experience for some in the visitors' centre was poor. There was reasonable access to communication networks, but important websites had been blocked and there was still no access to Skype or social networking. There were some shortcomings in discharge arrangements, but an overseas charter removal that we observed was well managed. Outcomes for detainees were reasonably good against this healthy establishment test.

Recommendations

All detainees should be able to access the welfare service when required. Interviews should be confidential and not interrupted by other detainees. (4.5)

Achieved

Managers should ensure that detainees can easily book visits. (4.11)

Not achieved

Detainees' contact with visitors should only be restricted on the basis of individual assessments of risk. (4.12)

Achieved

Legitimate websites should be accessible, including those facilitating legal assistance, Skype and social networking. There should be effective procedures for permanently unblocking such sites. (4.18, repeated recommendation 4.26)

Not achieved

Home Office staff should speak to all detainees on their day of removal to allow them to ask questions, address concerns and present new paperwork. (4.25, repeated recommendation 4.38)

Not achieved

Only detainees who volunteer to do so should be placed on a reserve list. (4.26)

No longer relevant

Removed detainees should receive assistance with travel from the airport of arrival to their final destination. (4.27)

Achieved

Extant licence conditions should be explained to all ex-prisoners being released into the community. Systems should be robust enough to ensure that police and offender managers are also informed when a detainee who is a risk to children or others is released from detention. (4.28, repeated recommendation 4.45)

Not achieved

Appendix III: Detainee population profile

Please note: the following figures were supplied by the establishment and any errors are the establishment's own.

Population breakdown by:

(i) Age	No. of men	No. of women	No. of children	%
Under 1 year				
1 to 6 years				
7 to 11 years				
12 to 16 years				
16 to 17 years				
18 years to 21 years	23			9.6
22 years to 29 years	72			30.1
30 years to 39 years	83			34.7
40 years to 49 years	39			16.3
50 years to 59 years	20			8.4
60 years to 69 years	2			0.9
70 or over				
Total	239			100

(ii) Nationality Please add further categories if necessary	No. of men	No. of women	No. of children	%
Afghanistan	5			2.1
Albania	37			15.5
Algeria	2			0.9
Angola	1			0.4
Bangladesh	14			5.9
Belarus				
Bolivia	3			1.3
Brazil	7			2.9
Bulgaria	1			0.4
Cameroon				
China	16			6.7
Colombia				
Congo (Brazzaville)				
Congo Democratic Republic (Zaire)				
Costa Rica				
Czech Republic	2			0.9
Ecuador				
Egypt	3			1.3
El Salvador	1			0.4
Estonia				
Ethiopia	1			0.4
France	1			0.4
Georgia				
Ghana	5			2.1
Grenada	1			0.4

Population breakdown by nationality continued:

Honduras	1			0.4
India	16			6.7
Iran	16			6.7
Iraq	14			5.9
Ivory Coast				
Jamaica	7			2.9
Kenya				
Kosovo				
Latvia	1			0.4
Liberia				
Libya	1			0.4
Lithuania	2			0.9
Malaysia				
Mauritius	1			0.4
Mexico	1			0.4
Moldova				
Morocco	4			
Namibia	1			0.4
Nepal	3			1.3
Netherlands	1			0.4
Nigeria	5			2.1
Pakistan	13			5.4
Poland	4			1.7
Portugal	1			0.4
Romania	10			4.2
Russia				
Senegal	1			0.4
Sierra Leone	1			0.4
Somalia	2			0.9
South Africa	1			0.4
Spain	1			0.4
Sri Lanka	5			2.1
Sudan	2			0.9
Syria	1			0.4
Taiwan	1			0.4
Trinidad and Tobago	2			0.9
Turkey	1			0.4
Turkmenistan	1			0.4
Ukraine	4			1.7
Vietnam	7			2.9
Yugoslavia (FRY)				
Zambia	1			0.4
Zimbabwe	5			2.1
Other (Unknown)	1			0.4
Total	239	0	0	98.5

(iii) Religion/belief Please add further categories if necessary	No. of men	No. of women	No. of children	%
Buddhist	8			3.3
Roman Catholic	19			7.9
Orthodox	7			2.9
Other Christian religion	46			19.2
Hindu	8			3.3
Muslim	99			41.4
Sikh	11			4.6
Agnostic/atheist	37			15.5
Unknown	1			0.4
Other (Unknown)	3			1.3
Total	239			99.8

(iv) Length of time in detention in this centre	No. of men	No. of women	No. of children	%
Less than 1 week	69			28.9
1 to 2 weeks	37			15.5
2 to 4 weeks	55			23.0
1 to 2 months	44			18.4
2 to 4 months	21			8.8
4 to 6 months	5			2.1
6 to 8 months	5			2.1
8 to 10 months	1			0.4
More than 10 months (please note the longest length of time)	2 (11 months)			0.9
Total	239			100.1

(v) Detainees' last location before detention in this centre	No. of men	No. of women	No. of children	%
Community				
Another IRC				
A short-term holding facility (e.g. at a port or reporting centre)				
Police station				
Prison				
Total				

Appendix IV: Photographs



A wing



B wing



Cell on B wing



Reception entrance



Reception waiting area holding room



Separation unit



Social visits room

Appendix V: Summary of detainee interviews

Every detainee in Brook House was offered a confidential individual interview with an inspector. A few had either left the centre or did not want to be interviewed when inspectors went to see them. We conducted 65 interviews, 12 with interpreters. We also issued an invitation, through various support voluntary and community groups, for recently released detainees to speak to us. Two were referred to us and we conducted telephone interviews with both of these released men. All interviews were semi-structured and held from 21-29 May 2019. What follows is a brief summary of the key messages that emerged. The opinions of interviewers are not included, and this represents only the views of interviewees. These interviews were used as one source of evidence to inform the rounded judgements made by inspectors in the body of this report. The men we spoke to were self-selecting, and the percentages here do not supplant those of our randomised survey (Appendix V). We followed up any allegations of concern and have reported on outcomes in the main body of the report where we were able to corroborate.

Key themes from 67 detainee interviews

Safety

71% of interviewed detainees said overall safety for detainees at the centre was either very good (29%) or quite good (42%)¹¹. Twenty per cent of detainees said that safety was quite bad and 9% said that it was very bad. Most said this was because of the fear of removal, the behaviour of other detainees or concerns about health care.

Very few detainees said they felt physically unsafe in the centre. None said they had been assaulted by staff and/or other detainees. The detainees who said they did not feel safe cited concerns such as indefinite detention and anxiety about possible removal. Some mentioned fear of detainees they did not know; one man had witnessed his room-mate attempting to hang himself; and some mentioned being locked up at night and the sound of banging made them feel frightened. One detainee said: *'Being kept here not knowing sends people mad. People are cutting themselves - trying to hang themselves. Had a bail application pending for nine weeks. I need a response. The waiting messes with your head.'*

9% (five detainees) said they had been treated inappropriately by staff. None reported physical assault.

Two referred to the attitude of health care staff; one spoke of both poor healthcare treatment and that he was stopped from seeing a visitor and shouted at by staff, then forced to apologise to them; one cited overnight lock up; and one said an officer had entered the room uninvited and was there when the detainee woke up. None reported experiencing physical assaults. Most detainees said that other detainees were respectful and few had seen fights. Most detainees said staff stepped in quickly and stopped incidents.

Nearly all detainees reported a positive experience of reception and first night care. 46% said they were treated well on arrival and 49% reasonably well. The three detainees who were unhappy about treatment on arrival all cited perceptions of poor support from health care and one said he did not know how to complain.

92% of interviewed detainees said they were treated well or reasonably well by staff, 6% that they were not treated well enough, and 2% (one detainee) said they were treated poorly¹².

Most interviewed detainees said that staff treated them at least reasonably well, for example describing them as 'helpful and kind'. None had seen staff behaving inappropriately towards another detainee. The detainees who were critical of staff focused on unhelpful health care staff.

¹¹ Percentages are based on the 55 men who answered this question during face-to-face interviews. The two telephone interviews were briefer and less structured.

¹² 62 detainees answered this question.

Poor food was the biggest concern about daily life

We received many complaints about the food not meeting the diverse needs of the population. The inadequacy of Ramadan packs was raised frequently; detainees reported that they were not filling enough to sustain them during the fasting period.

Nearly half of interviewed detainees (47%)¹³ did not feel confident making complaints, mostly because of a lack of faith in the effectiveness of the complaints system, especially in resolving their key concerns about immigration status.

The lack of outside activity space or cramped activity areas was regularly mentioned by detainees.

46% of interviewed detainees said their physical and mental health needs were not met¹⁴

A large minority of interviewed detainees reported concerns about health care. These centred mainly around the attitude of health care staff, saying they were 'dismissive', 'rude' or 'disbelieving'. There were some reports of poor care.

¹³ 55 detainees answered this question.

¹⁴ Based on 61 who answered this question.

Appendix VI: Summary of staff interviews and survey

Thirty-seven interviews were completed with 23 randomly selected detainee custody officers, four detainee custody managers, five health care staff and five Home Office staff. All staff were in detainee contact roles and were interviewed from 21 to 29 May 2019. These numbers equated to about 17% of uniformed staff, 23% of health care staff and 26% of Home Office staff. In addition, 43 staff (approximately 21% of all staff) from all departments completed online surveys. The survey was sent to all staff in contact roles. All responses were anonymous and some of the survey respondents and interviewees might have been the same people. There were few significant differences between the survey and interview responses and most of the findings are reported together. The opinions of interviewers are not included, and only the views of staff are represented. The interviews and survey were used as sources of evidence to inform the rounded judgements made by inspectors in the body of this report. The main objective of both was to provide staff with an opportunity to tell inspectors confidentially about concerns over safety and the treatment of detainees, and any specific instances of concern that inspectors could follow up. The main themes are listed below.

Key themes from 43 staff survey responses and 37 staff interviews¹⁵

Safety

No staff in our survey or interviews said they had seen inappropriate use of force towards detainees. 84% of staff in our survey said they had seen no inappropriate behaviour towards detainees.

Of the surveyed staff who had seen inappropriate behaviour, a few reported perceptions of women staff lacking boundaries with some detainees; one said a detainee had been locked in the room while crying by some staff; one said they did not want to disclose what they had seen. In our interviews, one DCO described a complex removal where he thought that escort staff had been too aggressive in their management of a detainee. The escort had grabbed and shouted at the detainee, and it appeared that this was because he suspected the detainee was concealing a blade in his mouth. A nurse raised a similar concern regarding escorting staff which she passed on to Home Office management.

All staff in our survey said they would report inappropriate behaviour, usually to managers.

Staff were usually very clear about their duty to report any concerns and/or submit a security information report. One member of staff said they would report to an external authority rather than managers because of a lack of trust in them. 12% did not believe they would be taken seriously if they made an allegation and another 9% said they probably would not be taken seriously.

Staff were generally positive about staff culture and many thought that the centre had improved over the previous year to year and a half

Interviewed and surveyed staff mentioned helping people, having a caring role, and learning about people from different countries as factors that made them most satisfied about their work.

While many staff had not been at the centre for long, those that had been in post for long enough usually felt that the centre had improved significantly over the previous year and a half.

A number of staff said they did not believe that the type of behaviour seen in the Panorama programme would be tolerated now. A few staff raised concerns about the inexperience of the large number of new, younger staff.

¹⁵ Note that the percentages relate to the staff survey which was designed to have more quantifiable answers; the interview were more qualitative.

Respect

95% of staff in our survey said G4S staff treated detainees well (74%) or reasonably well (21%).

There were some comments about lack of respect, both in our staff survey and interviews, but these were often about the attitude of some health care staff. Many G4S staff said that the low detainee numbers and higher staffing allowed them to build relationships with detainees.

The lack of useful communication with detainees by Home Office staff and a perception that the Home Office detainee engagement team was not effective enough were common themes. Staff said the detainees were frustrated at the lack of information about their cases. Comments about the Home Office compliance team were generally more positive, for example mentioning their availability and helpful manner.

A few staff said that the point when detainees were first locked into their cells was particularly stressful for them.

A small number of staff mentioned discriminatory behaviour towards detainees but none had specific examples and instead said it was something they felt was happening.

83% of all surveyed staff thought that health care staff treated detainees well (35%) or reasonably well (48%).

However, there were many comments about rude, dismissive or suspicious behaviour by health care staff in both the survey and individual interviews.

79% of surveyed staff said they behaved reasonably towards each other.

A small number of allegations were made of management bullying and inappropriate 'banter', such as taunting of a member of staff observing Ramadan.

Three-quarters of interviewed staff said they had enough training for their roles.

Those who did not mentioned mental health and interviewing skills as gaps in their training. Many staff felt the initial training course was helpful in preparing them for the job.

Appendix VII: Summary of detainee survey responses

Detainee survey methodology

A representative survey of detainees is carried out at the start of every inspection, the results of which contribute to the evidence base for the inspection.

HMIP researchers have developed a self-completion questionnaire to support HMIP Expectations. The questionnaire consists of structured questions covering the detainee ‘journey’ from reception to removal/release together with demographic and background questions which enable us to compare responses from different sub-groups of the detainee population. There are also three open questions at the end of the questionnaire which allow detainees to express in their own words what they find most positive and negative about the IRC¹⁶.

The questionnaire is available in 23 languages and can also be administered via a telephone interpreting service if necessary.

The questionnaire was revised during 2018-19, in consultation with both inspectors and detainees. The current version has been in use since May 2019.

Sampling

For smaller IRCs or where the current detainee population is small, questionnaires are offered to every detainee. If the detainee population is large at the time of the survey, questionnaires are offered to a sample of detainees, selected using the following procedure. A stratified random sample is drawn by HMIP researchers on the day of the survey from a detainee population printout ordered by room location. Using a power calculation, HMIP researchers calculate the minimum sample size required to ensure that the survey findings are representative of the entire population of the centre.¹⁷

Distributing and collecting questionnaires

HMIP researchers distribute and collect the questionnaires in person so that detainees can give their informed consent¹⁸ to participate. The purpose of the survey is explained and assurances are given about confidentiality and anonymity. Detainees are made aware that participation in the survey is voluntary; detainees who decline to participate are not replaced within the sample. Those who agree to participate are provided with a sealable envelope for their completed questionnaire and told when we will be returning to collect it. We make arrangements to administer the questionnaire via a face-to-face interview for respondents who disclose literacy difficulties.

Survey response

At the time of the survey on 20 May 2019, the detainee population at Brook House IRC was 245. Using the sampling method described above, questionnaires were distributed to 242 detainees. We received a total of 158 completed questionnaires, a response rate of 65%. This included one questionnaire completed via face-to-face interview. Twenty detainees declined to participate in the survey and 64 questionnaires were either not returned at all or returned blank.

¹⁶ Qualitative analysis of these written comments is undertaken by HMIP researchers and used by inspectors.

¹⁷ 95% confidence interval with a 7% margin of error. The formula assumes a 65% response rate.

¹⁸ For further information about the ethical principles which underpin our survey methodology, please see ‘Ethical principles for research activities’ which can be downloaded from HMIP’s website <http://www.justiceinspectorates.gov.uk/hmiprisons/about-our-inspections/>

Returned language	Number of completed survey returns
English	75 (48%)
Albanian	19 (12%)
Farsi	18 (11%)
Chinese	13 (8%)
Punjabi	5 (3%)
Russian	5 (3%)
Urdu	4 (3%)
Polish	3 (2%)
Portuguese	3 (2%)
Arabic	2 (1%)
Bengali	2 (1%)
Kurdish	2 (1%)
Ukrainian	2 (1%)
Vietnamese	2 (1%)
Hindi	1 (1%)
Romanian	1 (1%)
Spanish	1 (1%)
Total	158 (100%)

Survey results and analyses

Over the following pages we present the full survey results followed by various comparative analyses for Brook House IRC. For the comparator analyses, each question was reformulated into a binary ‘yes/no’ format and affirmative responses compared.¹⁹ Missing responses have been excluded from all analyses and for some questions, responses from a sub-group of the sample are reported (as indicated in the data).

Full survey results

A full breakdown of responses is provided for every question. Percentages have been rounded and therefore may not add up to 100%.

Responses from Brook House IRC 2019 compared with those from other HMIP surveys²⁰

- Survey responses from Brook House IRC in 2019 compared with survey responses from other IRCs inspected since November 2016.
- Survey responses from Brook House IRC in 2019 compared with survey responses from Brook House IRC in 2016.

Comparisons between self-reported sub-populations of detainees within Brook House IRC 2019²¹

- Responses of detainees from black or minority ethnic groups compared with those of white detainees.
- Responses of Muslim detainees compared with those of non-Muslim detainees.
- Responses of detainees who reported that they had a disability compared to those who did not.
- Responses of detainees who reported that they had mental health problems compared with those who did not.
- Responses of detainees who reported understanding written or spoken English very/quite well compared with those who did not.

¹⁹ Using the Chi-square test (or Fisher’s exact test if there are fewer than five responses in a group).

²⁰ These analyses are carried out on summary data from all survey questions. As we have been using a new version of the questionnaire since May 2019, we do not yet have full comparator data for all questions.

²¹ These analyses are carried out on data from all survey questions.

- Responses of detainees who reported that they had been held in prison in the UK compared with those of detainees who reported that they had not been held in prison in the UK.
- Responses of detainees aged 50 and over compared with those under 50.
- Responses of detainees aged 25 and under compared with those over 25.
- Responses of non-heterosexual detainees compared with those of heterosexual detainees.

Please note that we only carry out within-IRC comparator analysis where there are sufficient responses in each sub-group.²²

In the comparator analyses, statistically significant²³ differences are indicated by shading. Results that are significantly more positive are indicated by green shading and results that are significantly more negative are indicated by blue shading. Orange shading has been used to show a statistically significant difference in demographic or other background details. If there is no shading, any difference between the two results is not statistically significant and may have occurred by chance. Grey shading indicates that there are no valid comparative data for that question.

Filtered questions are indented and preceded by an explanation in italics of how the filter has been applied. In the comparator analyses, percentages for filtered questions refer to the number of respondents filtered to that question. For all other questions, percentages refer to the total number of valid responses to the question.

²² A minimum of 10 responses which must also represent at least 10% of the total response.

²³ A statistically significant difference between the two samples is one that is unlikely to have arisen by chance alone, and can therefore be assumed to represent a real difference between the two populations. In order to appropriately adjust p-values in light of multiple testing, $p < 0.01$ is considered statistically significant for all comparisons undertaken. This means there is only a 1% likelihood that the difference is due to chance.

Survey summary

Section 1: About you

I.1	What unit are you currently living on?	
	A Unit	60 (38%)
	B Unit.....	27 (17%)
	D Unit.....	68 (43%)
	E Unit	3 (2%)
I.2	How old are you?	
	Under 18	0 (0%)
	18-20	11 (7%)
	21-25	18 (11%)
	26-29	30 (19%)
	30-39	57 (36%)
	40-49	26 (16%)
	50-59	14 (9%)
	60-69	1 (1%)
	70 or over	1 (1%)
I.3	How would you describe your ethnicity?	
	Asian.....	73 (47%)
	Black.....	23 (15%)
	Mixed	6 (4%)
	White.....	48 (31%)
	Other	5 (3%)
I.4	Do you understand spoken English?	
	Very well	54 (35%)
	Quite well	29 (19%)
	A little	55 (35%)
	No.....	18 (12%)
I.5	Do you understand written English?	
	Very well	50 (32%)
	Quite well	30 (19%)
	A little	47 (30%)
	No.....	30 (19%)

Section 2: Immigration detention

2.1	How long have you been detained in this centre?	
	Less than 1 week.....	31 (20%)
	1 week or more but less than 1 month.....	59 (38%)
	1 month or more but less than 3 months.....	37 (24%)
	3 months or more but less than 6 months.....	18 (12%)
	6 months or more	9 (6%)
2.2	How much time have you spent in immigration detention in the UK in total?	
	Less than 1 month.....	56 (38%)
	1 month or more but less than 3 months.....	46 (31%)
	3 months or more but less than 6 months.....	21 (14%)
	6 months or more	19 (13%)
	Don't remember	7 (5%)

2.3	Have you ever been held in prison in the UK?	
	Yes	63 (42%)
	No	88 (58%)

Section 3: Your journey to this centre

3.1	Before being brought to this centre, were you told where you were going?	
	Yes	104 (68%)
	No	50 (32%)
3.2	How were you treated by escort staff during your journey to this centre?	
	Very well	62 (41%)
	Quite well	56 (37%)
	Quite badly	16 (10%)
	Very badly	13 (8%)
	Don't remember	6 (4%)

Section 4: Reception and first nights

4.1	When you were searched in reception, was this done in a respectful way?	
	Yes	127 (81%)
	No	18 (12%)
	Don't remember	9 (6%)
	Was not searched	2 (1%)
4.2	While in reception, were you able to speak to someone from the health care team?	
	Yes	123 (80%)
	No	25 (16%)
	Don't remember	6 (4%)
4.3	Overall, how were you treated in reception?	
	Very well	67 (43%)
	Quite well	64 (41%)
	Quite badly	14 (9%)
	Very badly	7 (4%)
	Don't remember	4 (3%)
4.4	When you first arrived, did you have any problems with the following? (Please tick all that apply.)	
	Getting phone numbers	28 (19%)
	Contacting family	34 (23%)
	Arranging care for children or other dependants	7 (5%)
	Contacting employers	11 (7%)
	Money	36 (24%)
	Housing	19 (13%)
	Feeling depressed	83 (56%)
	Feeling suicidal	31 (21%)
	Your mental health	50 (34%)
	Your physical health	45 (30%)
	Drugs or alcohol (e.g. withdrawal)	3 (2%)
	Getting medication	32 (21%)
	Lost or delayed property	13 (9%)
	Other problems	21 (14%)
	Did not have any problems	33 (22%)

4.5 Did staff help you to deal with any of these problems?

Yes	42 (31%)
No.....	60 (44%)
Did not have any problems.....	33 (24%)

4.6 Did you feel safe on your first night in this centre?

Yes	73 (49%)
No.....	62 (42%)
Don't remember	13 (9%)

4.7 In your first two days here, did you receive information in a language you could understand about:

	Yes	No	Don't remember
Daily life at this centre	68 (55%)	47 (38%)	9 (7%)
Visits	53 (49%)	47 (44%)	8 (7%)
How to see immigration staff	54 (43%)	65 (52%)	7 (6%)
How to get legal advice	53 (45%)	57 (48%)	9 (8%)
How to see health care staff	75 (63%)	37 (31%)	8 (7%)
Other support available	36 (38%)	50 (52%)	10 (10%)

Section 5: Legal rights and immigration**5.1 Have you received free legal advice in this centre?**

Yes	53 (37%)
No.....	89 (63%)

5.2 Do you have an immigration lawyer?

Yes	91 (61%)
No	58 (39%)

5.3 If you have an immigration lawyer, how easy or difficult is it to:

	Easy	Difficult	Don't know
Contact your lawyer	47 (57%)	28 (34%)	7 (9%)
Have a visit from your lawyer	24 (36%)	32 (48%)	11 (16%)

5.4 How easy or difficult is it to:

	Easy	Difficult	Don't know
Obtain bail information	28 (21%)	72 (55%)	32 (24%)
Access up-to-date information about your country	16 (14%)	63 (56%)	34 (30%)
See Home Office immigration staff	25 (20%)	71 (58%)	26 (21%)

5.5 Are Home Office immigration staff keeping you informed about the progress of your case?

Yes	60 (43%)
No.....	67 (48%)
Don't know.....	14 (10%)

Section 6: Respectful detention**6.1 Please answer the following questions about the wing or residential unit you are currently living on:**

	Yes	No	Don't know
Do you normally have enough clean, suitable clothes for the week?	79 (56%)	54 (38%)	9 (6%)
Can you shower every day?	135 (91%)	1 (1%)	12 (8%)
Do you have clean sheets every week?	71 (51%)	47 (34%)	20 (14%)
Do you get cleaning materials for your room every week?	71 (53%)	48 (36%)	14 (11%)
Is it normally quiet enough for you to sleep or relax at night?	64 (45%)	69 (48%)	10 (7%)
Can you get your property from the centre's property store when you need it?	74 (55%)	33 (25%)	27 (20%)

6.2 Normally, how clean or dirty are the communal/shared areas of your wing or unit (landings, stairs, showers etc.)?

Very clean	36 (24%)
Quite clean	73 (48%)
Quite dirty	27 (18%)
Very dirty	15 (10%)

6.3 What is the quality of food here?

Very good	15 (10%)
Quite good	34 (22%)
Quite bad	35 (23%)
Very bad	69 (45%)

6.4 Do you get enough to eat at meal times?

Always	45 (30%)
Most of the time	26 (18%)
Some of the time	47 (32%)
Never	30 (20%)

6.5 Does the centre's shop sell the things that you need?

Yes	67 (45%)
No	58 (39%)
Don't know	25 (17%)

6.6 Do you know how to make a complaint about your treatment in this centre?

Yes	62 (42%)
No	85 (58%)

6.7 In your experience, are complaints dealt with fairly?

Yes	14 (10%)
No	15 (10%)
Not made a complaint	116 (80%)

6.8 Have you ever been too afraid to make a complaint about your treatment in this centre?

Yes	49 (35%)
No	91 (65%)

Section 7: Staff

7.1	Do staff here treat you with respect?	
	Always.....	69 (45%)
	Most of the time.....	41 (27%)
	Some of the time.....	38 (25%)
	Never	5 (3%)
7.2	Do staff here knock and wait for an answer before entering your room?	
	Always.....	72 (48%)
	Most of the time.....	25 (17%)
	Some of the time.....	32 (21%)
	Never	22 (15%)
7.3	Are there any members of staff here you can turn to for help if you have a problem?	
	Yes.....	97 (67%)
	No.....	47 (33%)
7.4	Have staff physically restrained you since you've been in this centre?	
	Yes.....	17 (12%)
	No.....	124 (88%)
7.5	Have you spent any time in the separation/isolation unit, in this centre?	
	Yes.....	17 (12%)
	No.....	126 (88%)

Section 8: Faith

8.1	What is your religion?	
	No religion.....	15 (10%)
	Buddhist.....	6 (4%)
	Christian.....	63 (42%)
	Hindu.....	8 (5%)
	Jewish.....	0 (0%)
	Muslim.....	47 (31%)
	Sikh	9 (6%)
	Other	2 (1%)
8.2	Are your religious beliefs respected here?	
	Yes.....	99 (67%)
	No.....	12 (8%)
	Don't know.....	21 (14%)
	Not applicable (no religion).....	15 (10%)
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	
	Yes.....	68 (49%)
	No.....	23 (17%)
	Don't know.....	32 (23%)
	Not applicable (no religion).....	15 (11%)

Section 9: Safety

9.1	Have you ever felt unsafe here?	
	Yes.....	100 (66%)
	No.....	51 (34%)

9.2	Where have you felt unsafe? (Please tick all that apply.)		
	In your room.....	36	(29%)
	On corridors.....	32	(26%)
	In the dining hall	22	(18%)
	At health care.....	18	(15%)
	In association or shared areas (e.g. TV room).....	19	(15%)
	In activity areas (e.g. library, IT room, education, gym).....	18	(15%)
	In outside areas.....	26	(21%)
	Anywhere else in this centre.....	20	(16%)
	Never felt unsafe here	51	(41%)
9.3	Do you feel unsafe now?		
	Yes.....	48	(34%)
	No.....	94	(66%)
9.4	Have you experienced any of the following forms of victimisation or bullying from other detainees here? (Please tick all that apply.)		
	Verbal abuse.....	22	(18%)
	Threats or intimidation.....	24	(20%)
	Sexual comments	6	(5%)
	Sexual assault.....	1	(1%)
	Physical assault.....	12	(10%)
	Theft.....	11	(9%)
	Other	7	(6%)
	Not experienced any of these from detainees here.....	81	(66%)
9.5	If you were being bullied or victimised by other detainees here, would you report it?		
	Yes.....	95	(68%)
	No.....	45	(32%)
9.6	Have you experienced any of the following forms of victimisation or bullying from staff here? (Please tick all that apply.)		
	Verbal abuse.....	15	(11%)
	Threats or intimidation.....	11	(8%)
	Sexual comments	2	(2%)
	Sexual assault.....	1	(1%)
	Physical assault.....	4	(3%)
	Theft.....	2	(2%)
	Other	10	(8%)
	Not experienced any of these from staff here.....	106	(80%)
9.7	If you were being bullied or victimised by staff here, would you report it?		
	Yes.....	100	(75%)
	No.....	33	(25%)

Section 10: Alcohol and drugs

10.1	While in this centre, have you developed any problems with:		
		Yes	No
	Illicit drugs	11 (9%)	108 (91%)
	Medication not prescribed to you	30 (25%)	91 (75%)
	Alcohol	8 (7%)	103 (93%)

10.2	Do you currently have a problem with:			
		Yes	No	
	Illicit drugs	13 (11%)	106 (89%)	
	Medication not prescribed to you	34 (28%)	88 (72%)	
	Alcohol	9 (8%)	104 (92%)	
10.3	While in this centre, have you been helped with your problems with:			
		Yes	No	Not applicable
	Illicit drugs	5 (4%)	8 (7%)	103 (89%)
	Medication not prescribed to you	17 (14%)	16 (14%)	85 (72%)
	Alcohol	6 (5%)	6 (5%)	98 (89%)
10.4	Is it easy or difficult to get illicit drugs in this centre?			
	Very easy			11 (8%)
	Quite easy			1 (1%)
	Quite difficult			2 (1%)
	Very difficult			7 (5%)
	Don't know.....			117 (85%)
10.5	Is it easy or difficult to get alcohol in this centre?			
	Very easy			5 (4%)
	Quite easy			1 (1%)
	Quite difficult			2 (1%)
	Very difficult			8 (6%)
	Don't know.....			122 (88%)

Section 11: Health and support

11.1	Is a professional interpreter available if you need one during health care assessments?	
	Yes	35 (25%)
	No.....	40 (28%)
	Don't know.....	28 (20%)
	Don't need an interpreter	38 (27%)
11.2	What is the quality of health care services here?	
	Very good	19 (13%)
	Quite good	37 (25%)
	Quite bad	29 (20%)
	Very bad	41 (28%)
	Have not been to health care	22 (15%)
11.3	Do you have any mental health problems?	
	Yes	79 (53%)
	No.....	69 (47%)
11.4	Have you been helped with your mental health problems while in this centre?	
	Yes	18 (12%)
	No.....	60 (41%)
	Don't have mental health problems.....	69 (47%)
11.5	Have you ever felt depressed while in this centre?	
	Yes	125 (84%)
	No.....	24 (16%)

11.6	Have you ever felt suicidal while in this centre?	
	Yes	56 (40%)
	No	83 (60%)
11.7	If you have felt depressed or suicidal here, did you receive any help from staff?	
	Yes	24 (21%)
	No	70 (60%)
	Have not felt depressed or suicidal	23 (20%)

Section 12: Other needs and support

12.1	Do you consider yourself to have a disability (long-term physical, mental or learning needs that affect your day-to-day life)?	
	Yes	44 (35%)
	No	83 (65%)
12.2	If you have a disability, are you getting the support you need?	
	Yes	10 (8%)
	No	27 (21%)
	Don't have a disability/don't need support	91 (71%)

Section 13: Activities

13.1	Are you taking part in any education here?	
	Yes	36 (25%)
	No, but I want to	52 (37%)
	No and I don't want to	54 (38%)
13.2	If you are taking part in education, is it helpful?	
	Yes	28 (20%)
	No	4 (3%)
	Not taking part in education	107 (77%)
13.3	Do you have a job here?	
	Yes	65 (45%)
	No, but I want one	34 (24%)
	No and I don't want one	45 (31%)
13.4	Does the library have appropriate materials to meet your needs?	
	Yes	39 (28%)
	No	61 (43%)
	Don't know	41 (29%)
13.5	How easy or difficult is it to access what you need on the internet?	
	Very easy	13 (9%)
	Quite easy	10 (7%)
	Quite difficult	26 (18%)
	Very difficult	67 (47%)
	Don't know	28 (19%)
13.6	Can you go to the gym as often as you want to?	
	Yes	105 (71%)
	No	7 (5%)
	Don't know	18 (12%)
	Don't want to go	17 (12%)

13.7	Is there enough to do in this centre to fill your time?	
	Yes	48 (33%)
	No	74 (51%)
	Don't know	22 (15%)

Section 14: Keeping in touch with family and friends

14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	
	Yes	43 (33%)
	No	88 (67%)
14.2	Have you had a visit from family or friends since you've been in this centre?	
	Yes	54 (36%)
	No	94 (64%)
14.3	Are your visitors usually treated with respect by staff?	
	Yes	27 (18%)
	No	5 (3%)
	Don't know	22 (15%)
	Have not had a visit	94 (64%)

Section 15: Leaving this centre

15.1	Has anyone here helped you prepare for leaving this centre?	
	Yes	20 (14%)
	No	118 (86%)

Section 16: More about you

16.1	Are you responsible for any child under the age of 18 in the UK?	
	Yes	33 (25%)
	No	101 (75%)
16.2	What is your gender?	
	Female	3 (2%)
	Male	135 (94%)
	Non-binary	4 (3%)
	Other	2 (1%)
16.3	How would you describe your sexual orientation?	
	Straight/heterosexual	89 (82%)
	Gay/lesbian/homosexual	5 (5%)
	Bisexual	6 (6%)
	Other	9 (8%)
16.4	Do you identify as transgender or transsexual?	
	Yes	7 (6%)
	No	105 (94%)

Brook House IRC 2019

Survey responses compared with those from other HMIP surveys of IRCs and with those from the previous survey

In this table, summary statistics from Brook House IRC 2019 are compared with the following HMIP survey data:

- Summary statistics from most recent surveys of all other IRCs (7 centres). Please note that we do not have comparable data for the new questions introduced in May 2019.
- Summary statistics from Brook House IRC in 2016. Please note that we do not have comparable data for the new questions introduced in May 2019.

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DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	<i>n=158</i>	7%		7%
	Are you 25 years of age or younger?	<i>n=158</i>	18%		18%
	Are you 50 years of age or older?	<i>n=158</i>	10%	10%	10%
1.3	Are you from a black or minority ethnic group?	<i>n=155</i>	69%		69%
1.4	Do you understand spoken English very / quite well?	<i>n=156</i>	53%		53%
1.5	Do you understand written English very / quite well?	<i>n=157</i>	51%		51%
	Do you understand either spoken or written English very / quite well?	<i>n=157</i>	55%		
8.1	Are you Muslim?	<i>n=150</i>	31%	36%	31%
11.3	Do you have any mental health problems?	<i>n=148</i>	53%		53%
12.1	Do you consider yourself to have a disability?	<i>n=127</i>	35%	13%	35%
16.1	Are you responsible for any child under the age of 18 in the UK?	<i>n=134</i>	25%		25%
16.2	Is your gender female or non-binary?	<i>n=144</i>	6%		6%
16.3	Are you homosexual, bisexual or other sexual orientation?	<i>n=109</i>	18%		18%
16.4	Do you identify as transgender or transsexual?	<i>n=112</i>	6%		6%
IMMIGRATION DETENTION					
2.1	Have you been detained in this centre for a month or more?	<i>n=154</i>	42%	57%	42%
2.2	Have you spent three months or more in immigration detention in the UK?	<i>n=149</i>	27%		27%
2.3	Have you ever been held in prison in the UK?	<i>n=151</i>	42%		42%
JOURNEY TO THIS CENTRE					
3.1	Before being brought to this centre, were you told where you were going?	<i>n=154</i>	68%		68%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	<i>n=153</i>	77%		77%
RECEPTION AND FIRST NIGHTS					
4.1	When you were searched in reception, was this done in a respectful way?	<i>n=154</i>	83%		83%
4.2	While in reception, were you able to speak to someone from the health care team?	<i>n=154</i>	80%		80%
4.3	Overall, were you treated very / quite well in reception?	<i>n=156</i>	84%		84%

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4.4	When you first arrived, did you have any problems?	n=149	78%		78%	
4.4	When you first arrived, did you have any problems with:					
	- Getting phone numbers?	n=149	19%		19%	
	- Contacting family?	n=149	23%	18%	23%	14%
	- Arranging care for children or other dependents?	n=149	5%		5%	
	- Contacting employers?	n=149	7%		7%	
	- Money?	n=149	24%		24%	
	- Housing?	n=149	13%		13%	
	- Feeling depressed?	n=149	56%		56%	
	- Feeling suicidal?	n=149	21%		21%	
	- Your mental health?	n=149	34%		34%	
	- Your physical health?	n=149	30%		30%	
	- Drugs or alcohol (e.g. withdrawal)?	n=149	2%		2%	
	- Getting medication?	n=149	22%		22%	
	- Lost or delayed property?	n=149	9%		9%	
	- Other problems?	n=149	14%		14%	
	For those who had any problems when they first arrived:					
4.5	Did staff help you to deal with any of these problems?	n=102	41%		41%	
4.6	Did you feel safe on your first night in this centre?	n=148	49%	46%	49%	52%
4.7	In your first two days here, did you receive information in a language you could understand about:					
	- Daily life at this centre?	n=124	55%		55%	
	- Visits?	n=108	49%		49%	
	- How to see immigration staff?	n=126	43%		43%	
	- How to get legal advice?	n=119	45%		45%	
	- How to see health care staff?	n=120	63%		63%	
	- Other support available?	n=96	38%		38%	
LEGAL RIGHTS AND IMMIGRATION						
5.1	Have you received free legal advice in this centre?	n=142	37%		37%	
5.2	Do you have an immigration lawyer?	n=149	61%		61%	
	For those who have an immigration lawyer:					
5.3	Is it easy to contact your lawyer?	n=82	57%		57%	
	Is it easy to have a visit from your lawyer?	n=67	36%		36%	

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5.4	Is it easy to obtain bail information?	n=132	21%		21%	
	Is it easy to access up-to-date information about your country?	n=113	14%		14%	
	Is it easy to see Home Office immigration staff?	n=122	21%		21%	
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	n=141	43%		43%	
RESPECTFUL DETENTION						
6.1	On the wing or residential unit you are currently living on:					
	- Do you normally have enough clean, suitable clothes for the week?	n=142	56%		56%	
	- Can you shower every day?	n=148	91%	94%	91%	97%
	- Do you have clean sheets every week?	n=138	51%		51%	
	- Do you get cleaning materials for your room every week?	n=133	53%		53%	
	- Is it normally quiet enough for you to sleep or relax at night?	n=143	45%	54%	45%	66%
	- Can you get your property from the centre's property store when you need it?	n=134	55%	47%	55%	49%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	n=151	72%		72%	
6.3	Is the quality of the food here very / quite good?	n=153	32%		32%	
6.4	Do you get enough to eat at meal-times always / most of the time?	n=148	48%		48%	
6.5	Does the centre's shop sell the things that you need?	n=150	45%		45%	
6.6	Do you know how to make a complaint about your treatment in this centre?	n=147	42%		42%	
6.7	Have you made a complaint while in this centre?	n=145	20%		20%	
For those who have made a complaint:						
6.7	Are complaints dealt with fairly?	n=29	48%	24%	48%	19%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	n=140	35%		35%	
STAFF						
7.1	Do staff here treat you with respect always / most of the time?	n=153	72%		72%	
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	n=151	64%		64%	
7.3	Are there any members of staff here you can turn to for help if you have a problem?	n=144	67%	64%	67%	66%
7.4	Have staff here physically restrained you since you've been in this centre?	n=141	12%		12%	
7.5	Have you spent any time in the separation / isolation unit, in this centre?	n=143	12%		12%	
FAITH						
8.1	Do you have a religion?	n=150	90%	94%	90%	89%
For those who have a religion:						
8.2	Are your religious beliefs respected here?	n=132	75%		75%	
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	n=123	55%		55%	

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SAFETY					
9.1	Have you ever felt unsafe here?	<i>n=151</i>	66%		66%
9.2	If yes, have you felt unsafe:				
	- In your room?	<i>n=123</i>	29%		29%
	- On corridors?	<i>n=123</i>	26%		26%
	- In the dining hall?	<i>n=123</i>	18%		18%
	- At health care?	<i>n=123</i>	15%		15%
	- In association or shared areas (e.g. TV room)?	<i>n=123</i>	15%		15%
	- In activity areas (e.g. library, IT room, education, gym)?	<i>n=123</i>	15%		15%
	- In outside areas?	<i>n=123</i>	21%		21%
	- Anywhere else in this centre?	<i>n=123</i>	16%		16%
9.3	Do you feel unsafe now?	<i>n=142</i>	34%	45%	34% 37%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	<i>n=123</i>	18%		18%
	- Threats or intimidation?	<i>n=123</i>	20%		20%
	- Sexual comments?	<i>n=123</i>	5%		5%
	- Sexual assault?	<i>n=123</i>	1%		1%
	- Physical assault?	<i>n=123</i>	10%	6%	10% 10%
	- Theft?	<i>n=123</i>	9%		9%
	- Other forms of victimisation or bullying?	<i>n=123</i>	6%		6%
	- Not experienced any of these from detainees here	<i>n=123</i>	66%		66%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	<i>n=140</i>	68%		68%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	<i>n=133</i>	11%		11%
	- Threats or intimidation?	<i>n=133</i>	8%		8%
	- Sexual comments?	<i>n=133</i>	2%		2%
	- Sexual assault?	<i>n=133</i>	1%		1%
	- Physical assault?	<i>n=133</i>	3%	4%	3% 3%
	- Theft?	<i>n=133</i>	2%		2%
	- Other forms of victimisation or bullying?	<i>n=133</i>	8%		8%
	- Not experienced any of these from staff here	<i>n=133</i>	80%		80%
9.7	If you were being bullied or victimised by staff here, would you report it?	<i>n=133</i>	75%		75%

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ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	n=119	9%		
	- Medication not prescribed to you?	n=121	25%		
	- Alcohol?	n=111	7%		
10.2	Do you currently have a problem with:				
	- Illicit drugs?	n=119	11%		
	- Medication not prescribed to you?	n=122	28%		
	- Alcohol?	n=113	8%		
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?	n=13	39%		
	- Medication not prescribed to you?	n=33	52%		
	- Alcohol?	n=12	50%		
10.4	Is it very / quite easy to get illicit drugs in this centre?			9%	
10.5	Is it very / quite easy to get alcohol in this centre?			4%	
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?			34%	
11.2	Is the quality of the health care services here very / quite good?			44%	
11.3	Do you have any mental health problems?			53%	
For those who have mental health problems:					
11.4	Have you been helped with your mental health problems while in this centre?			23%	
11.5	Have you ever felt depressed while in this centre?			84%	
11.6	Have you ever felt suicidal while in this centre?			40%	
For those who have felt depressed or suicidal here:					
11.7	Did you receive any help from staff?			26%	
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?			35%	13%
For those who consider themselves to have a disability:					
12.2	Are you getting the support you need?			27%	
ACTIVITIES					
13.1	Are you taking part in any education here?			25%	17%
For those who are taking part in education:					
13.2	Is it helpful?			88%	93%
13.3	Do you have a job here?			45%	

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13.4	Does the library have appropriate materials to meet your needs?	<i>n=141</i>	28%		28%	
13.5	Is it very / quite easy to access what you need on the internet?	<i>n=144</i>	16%		16%	
13.6	Can you go to the gym as often as you want to?	<i>n=130</i>	81%		81%	
13.7	Is there enough to do in this centre to fill your time?	<i>n=144</i>	33%		33%	
KEEPING IN TOUCH WITH FAMILY AND FRIENDS						
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	<i>n=131</i>	33%	23%	33%	21%
14.2	Have you had a visit from family or friends since you've been in this centre?	<i>n=148</i>	37%	49%	37%	39%
<i>For those who have had a visit from family or friends:</i>						
14.3	Are your visitors usually treated with respect by staff?	<i>n=54</i>	50%		50%	
LEAVING THIS CENTRE						
15.1	Has anyone here helped you prepare for leaving this centre?	<i>n=138</i>	15%		15%	

Brook House IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees from black and minority ethnic groups are compared with those of white detainees
- responses of Muslim detainees' responses are compared with those of non-Muslim detainees

These analyses are based on data from all survey questions.

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		Black and minority ethnic	White	Muslim	Non-Muslim
		107	48	47	103
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
1.2	Are you under 21 years of age?	5%	10%	11%	6%
	Are you 25 years of age or younger?	12%	31%	34%	12%
	Are you 50 years of age or older?	12%	4%	6%	11%
1.3	Are you from a black or minority ethnic group?			61%	77%
1.4	Do you understand spoken English very / quite well?	59%	44%	58%	52%
1.5	Do you understand written English very / quite well?	59%	35%	57%	50%
8.1	Are you Muslim?	26%	44%		
11.3	Do you have any mental health problems?	64%	31%	59%	52%
12.1	Do you consider yourself to have a disability?	38%	29%	46%	31%
16.1	Are you responsible for any child under the age of 18 in the UK?	29%	16%	12%	29%
16.2	Is your gender female or non-binary?	6%	7%	2%	7%
16.3	Are you homosexual, bisexual or other sexual orientation?	21%	11%	24%	15%
16.4	Do you identify as transgender or transsexual?	5%	10%	3%	5%
IMMIGRATION DETENTION					
2.1	Have you been detained in this centre for a month or more?	50%	26%	33%	48%
2.2	Have you spent three months or more in immigration detention in the UK?	33%	13%	16%	34%
2.3	Have you ever been held in prison in the UK?	46%	35%	34%	45%
JOURNEY TO THIS CENTRE					
3.1	Before being brought to this centre, were you told where you were going?	60%	85%	85%	61%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	71%	89%	80%	75%
RECEPTION AND FIRST NIGHTS					
4.1	When you were searched in reception, was this done in a respectful way?	76%	96%	85%	81%
4.2	While in reception, were you able to speak to someone from the health care team?	79%	82%	82%	78%
4.3	Overall, were you treated very / quite well in reception?	79%	94%	83%	85%

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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

		Black and minority ethnic	White	Muslim	Non-Muslim
		107	48	47	103
4.4	When you first arrived, did you have any problems?	87%	57%	73%	82%
4.4	When you first arrived, did you have any problems with:				
	- Getting phone numbers?	17%	21%	16%	21%
	- Contacting family?	25%	16%	18%	25%
	- Arranging care for children or other dependents?	6%	2%	5%	4%
	- Contacting employers?	8%	7%	7%	7%
	- Money?	28%	16%	34%	20%
	- Housing?	15%	9%	18%	11%
	- Feeling depressed?	65%	34%	57%	58%
	- Feeling suicidal?	26%	9%	18%	23%
	- Your mental health?	42%	14%	27%	37%
	- Your physical health?	37%	14%	23%	35%
	- Drugs or alcohol (e.g. withdrawal)?	3%	0%	0%	3%
	- Getting medication?	27%	11%	14%	24%
	- Lost or delayed property?	12%	2%	5%	11%
	- Other problems?	14%	16%	9%	17%
For those who had any problems when they first arrived:					
4.5	Did staff help you to deal with any of these problems?	40%	45%	56%	36%
4.6	Did you feel safe on your first night in this centre?	45%	62%	59%	42%
4.7	In your first two days here, did you receive information in a language you could understand about:				
	- Daily life at this centre?	56%	51%	58%	53%
	- Visits?	51%	46%	60%	44%
	- How to see immigration staff?	47%	36%	50%	41%
	- How to get legal advice?	48%	38%	53%	41%
	- How to see health care staff?	62%	66%	64%	62%
	- Other support available?	41%	32%	43%	33%
LEGAL RIGHTS AND IMMIGRATION					
5.1	Have you received free legal advice in this centre?	40%	33%	44%	34%
5.2	Do you have an immigration lawyer?	62%	58%	73%	57%
For those who have an immigration lawyer:					
5.3	Is it easy to contact your lawyer?	54%	67%	56%	62%
	Is it easy to have a visit from your lawyer?	30%	56%	48%	31%

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Number of completed questionnaires returned

		Black and minority ethnic	White	Muslim	Non-Muslim
		107	48	47	103
5.4	Is it easy to obtain bail information?	24%	17%	21%	23%
	Is it easy to access up-to-date information about your country?	17%	9%	18%	14%
	Is it easy to see Home Office immigration staff?	21%	18%	22%	20%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	47%	34%	44%	44%
RESPECTFUL DETENTION					
6.1	On the wing or residential unit you are currently living on:				
	- Do you normally have enough clean, suitable clothes for the week?	56%	57%	49%	57%
	- Can you shower every day?	92%	91%	87%	93%
	- Do you have clean sheets every week?	51%	55%	43%	54%
	- Do you get cleaning materials for your room every week?	56%	49%	52%	52%
	- Is it normally quiet enough for you to sleep or relax at night?	46%	44%	42%	45%
	- Can you get your property from the centre's property store when you need it?	53%	60%	58%	52%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	75%	66%	74%	71%
6.3	Is the quality of the food here very / quite good?	32%	33%	28%	34%
6.4	Do you get enough to eat at meal-times always / most of the time?	50%	44%	46%	49%
6.5	Does the centre's shop sell the things that you need?	43%	50%	57%	39%
6.6	Do you know how to make a complaint about your treatment in this centre?	43%	41%	44%	42%
6.6	Have you made a complaint while in this centre?	22%	16%	21%	21%
<i>For those who have made a complaint:</i>					
6.7	Are complaints dealt with fairly?	46%	57%	78%	35%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	39%	26%	35%	35%
STAFF					
7.1	Do staff here treat you with respect always / most of the time?	70%	76%	79%	68%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	60%	73%	70%	61%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	63%	76%	77%	62%
7.4	Have staff here physically restrained you since you've been in this centre?	11%	12%	10%	12%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	12%	11%	12%	11%
FAITH					
8.1	Do you have a religion?	90%	90%	100%	85%
<i>For those who have a religion:</i>					
8.2	Are your religious beliefs respected here?	77%	69%	80%	72%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	57%	49%	54%	56%

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Number of completed questionnaires returned

Black and minority ethnic	White	Muslim	Non-Muslim
107	48	47	103

SAFETY					
9.1	Have you ever felt unsafe here?	71%	55%	61%	69%
9.2	If yes, have you felt unsafe:				
	- In your room?	34%	19%	22%	34%
	- On corridors?	28%	22%	24%	27%
	- In the dining hall?	17%	22%	19%	17%
	- At health care?	17%	8%	8%	18%
	- In association or shared areas (e.g. TV room)?	18%	11%	16%	15%
	- In activity areas (e.g. library, IT room, education, gym)?	18%	8%	14%	15%
	- In outside areas?	24%	17%	27%	20%
	- Anywhere else in this centre?	15%	19%	8%	20%
9.3	Do you feel unsafe now?	38%	25%	29%	37%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	23%	8%	12%	21%
	- Threats or intimidation?	25%	8%	14%	22%
	- Sexual comments?	5%	5%	5%	5%
	- Sexual assault?	1%	0%	0%	1%
	- Physical assault?	13%	3%	12%	9%
	- Theft?	11%	5%	5%	12%
	- Other forms of victimisation or bullying?	8%	0%	5%	7%
	- Not experienced any of these from detainees here	57%	84%	79%	58%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	69%	64%	75%	67%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	15%	3%	7%	14%
	- Threats or intimidation?	10%	5%	2%	11%
	- Sexual comments?	2%	0%	0%	2%
	- Sexual assault?	1%	0%	0%	1%
	- Physical assault?	3%	3%	5%	2%
	- Theft?	1%	3%	0%	2%
	- Other forms of victimisation or bullying?	10%	3%	10%	7%
	- Not experienced any of these from staff here	74%	92%	88%	75%
9.7	If you were being bullied or victimised by staff here, would you report it?	71%	84%	78%	75%

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		Black and minority ethnic		White		Muslim		Non-Muslim	
Number of completed questionnaires returned		107		48		47		103	
ALCOHOL AND DRUGS									
10.1	While in this centre, have you developed any problems with:								
	- Illicit drugs?	13%		3%		9%		9%	
	- Medication not prescribed to you?	28%		18%		21%		25%	
	- Alcohol?	10%		3%		7%		7%	
10.2	Do you currently have a problem with:								
	- Illicit drugs?	14%		5%		14%		9%	
	- Medication not prescribed to you?	30%		24%		25%		28%	
	- Alcohol?	10%		5%		9%		7%	
10.3	While in this centre, have you been helped with your problems with:								
	- Illicit drugs?	46%		0%		50%		38%	
	- Medication not prescribed to you?	54%		44%		71%		48%	
	- Alcohol?	56%		33%		75%		43%	
10.4	Is it very / quite easy to get illicit drugs in this centre?	11%		5%		2%		10%	
10.5	Is it very / quite easy to get alcohol in this centre?	5%		2%		2%		4%	
HEALTH AND SUPPORT									
11.1	Is a professional interpreter available if you need one during health care assessments?	33%		31%		42%		29%	
11.2	Is the quality of the health care services here very / quite good?	40%		58%		56%		38%	
11.3	Do you have any mental health problems?	64%		31%		59%		52%	
<i>For those who have mental health problems:</i>									
11.4	Have you been helped with your mental health problems while in this centre?	25%		15%		39%		16%	
11.5	Have you ever felt depressed while in this centre?	87%		76%		86%		83%	
11.6	Have you ever felt suicidal while in this centre?	40%		41%		55%		34%	
<i>For those who have felt depressed or suicidal here:</i>									
11.5	Did you receive any help from staff?	26%		26%		45%		16%	
OTHER NEEDS AND SUPPORT									
12.1	Do you consider yourself to have a disability?	38%		29%		46%		31%	
<i>For those who consider themselves to have a disability:</i>									
12.2	Are you getting the support you need?	25%		33%		38%		19%	
ACTIVITIES									
13.1	Are you taking part in any education here?	29%		16%		21%		27%	
<i>For those who are taking part in education:</i>									
13.2	Is it helpful?	84%		100%		91%		85%	
13.3	Do you have a job here?	53%		29%		41%		46%	

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		Number of completed questionnaires returned			
		Black and minority ethnic	White	Muslim	Non-Muslim
		107	48	47	103
13.4	Does the library have appropriate materials to meet your needs?	24%	35%	43%	20%
13.5	Is it very / quite easy to access what you need on the internet?	15%	20%	27%	11%
13.6	Can you go to the gym as often as you want to?	79%	83%	76%	82%
13.7	Is there enough to do in this centre to fill your time?	34%	33%	33%	33%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	34%	29%	39%	30%
14.2	Have you had a visit from family or friends since you've been in this centre?	33%	46%	47%	34%
<i>For those who have had a visit from family or friends:</i>					
15.4	Are your visitors usually treated with respect by staff?	46%	58%	50%	50%
LEAVING THIS CENTRE					
15.1	Has anyone here helped you prepare for leaving this centre?	16%	10%	15%	15%

Brook House IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who reported that they cannot understand spoken or written English very well / quite well are compared with those who can

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

Do not understand English	Understand English
71	86

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	6%	7%
	Are you 25 years of age or younger?	16%	20%
	Are you 50 years of age or older?	10%	11%
1.3	Are you from a black or minority ethnic group?	61%	76%
1.4	Do you understand spoken English very / quite well?		98%
1.5	Do you understand written English very / quite well?		93%
8.1	Are you Muslim?	28%	33%
11.3	Do you have any mental health problems?	62%	47%
12.1	Do you consider yourself to have a disability?	38%	33%
16.1	Are you responsible for any child under the age of 18 in the UK?	15%	32%
16.2	Is your gender female or non-binary?	5%	8%
16.3	Are you homosexual, bisexual or other sexual orientation?	16%	20%
16.4	Do you identify as transgender or transsexual?	2%	9%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	28%	53%
2.2	Have you spent three months or more in immigration detention in the UK?	9%	41%
2.3	Have you ever been held in prison in the UK?	18%	60%
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	56%	77%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	79%	75%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	86%	80%
4.2	While in reception, were you able to speak to someone from the health care team?	75%	84%
4.3	Overall, were you treated very / quite well in reception?	83%	85%

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Number of completed questionnaires returned

Do not understand English	Understand English
71	86

4.4	When you first arrived, did you have any problems?	79%	78%
4.4	When you first arrived, did you have any problems with:		
	- Getting phone numbers?	20%	18%
	- Contacting family?	26%	21%
	- Arranging care for children or other dependents?	2%	7%
	- Contacting employers?	6%	8%
	- Money?	20%	28%
	- Housing?	14%	12%
	- Feeling depressed?	60%	53%
	- Feeling suicidal?	19%	23%
	- Your mental health?	32%	35%
	- Your physical health?	34%	28%
	- Drugs or alcohol (e.g. withdrawal)?	2%	2%
	- Getting medication?	12%	29%
	- Lost or delayed property?	6%	11%
	- Other problems?	8%	19%
	<i>For those who had any problems when they first arrived:</i>		
4.5	Did staff help you to deal with any of these problems?	29%	50%
4.6	Did you feel safe on your first night in this centre?	45%	52%
4.7	In your first two days here, did you receive information in a language you could understand about:		
	- Daily life at this centre?	46%	61%
	- Visits?	34%	59%
	- How to see immigration staff?	33%	50%
	- How to get legal advice?	37%	49%
	- How to see health care staff?	53%	69%
	- Other support available?	32%	41%
LEGAL RIGHTS AND IMMIGRATION			
5.1	Have you received free legal advice in this centre?	32%	42%
5.2	Do you have an immigration lawyer?	54%	67%
	<i>For those who have an immigration lawyer:</i>		
5.3	Is it easy to contact your lawyer?	47%	64%
	Is it easy to have a visit from your lawyer?	30%	39%

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Do not understand English	Understand English
71	86

5.4	Is it easy to obtain bail information?	19%	23%
	Is it easy to access up-to-date information about your country?	13%	15%
	Is it easy to see Home Office immigration staff?	22%	20%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	32%	51%
RESPECTFUL DETENTION			
6.1	On the wing or residential unit you are currently living on:		
	- Do you normally have enough clean, suitable clothes for the week?	55%	57%
	- Can you shower every day?	84%	98%
	- Do you have clean sheets every week?	46%	56%
	- Do you get cleaning materials for your room every week?	47%	58%
	- Is it normally quiet enough for you to sleep or relax at night?	44%	46%
	- Can you get your property from the centre's property store when you need it?	51%	58%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	72%	72%
6.3	Is the quality of the food here very / quite good?	36%	29%
6.4	Do you get enough to eat at meal-times always / most of the time?	50%	46%
6.5	Does the centre's shop sell the things that you need?	45%	45%
6.6	Do you know how to make a complaint about your treatment in this centre?	27%	54%
6.6	Have you made a complaint while in this centre?	11%	27%
<i>For those who have made a complaint:</i>			
6.7	Are complaints dealt with fairly?	71%	41%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	33%	36%
STAFF			
7.1	Do staff here treat you with respect always / most of the time?	76%	68%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	72%	58%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	63%	70%
7.4	Have staff here physically restrained you since you've been in this centre?	11%	13%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	15%	10%
FAITH			
8.1	Do you have a religion?	94%	87%
<i>For those who have a religion:</i>			
8.2	Are your religious beliefs respected here?	72%	78%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	49%	60%

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Number of completed questionnaires returned

Do not understand English	Understand English
71	86

SAFETY			
9.1	Have you ever felt unsafe here?	68%	66%
9.2	If yes, have you felt unsafe:		
	- In your room?	24%	34%
	- On corridors?	29%	24%
	- In the dining hall?	18%	18%
	- At health care?	16%	14%
	- In association or shared areas (e.g. TV room)?	16%	16%
	- In activity areas (e.g. library, IT room, education, gym)?	14%	16%
	- In outside areas?	20%	23%
	- Anywhere else in this centre?	12%	20%
9.3	Do you feel unsafe now?	38%	30%
9.4	Have you experienced any of the following from other detainees here:		
	- Verbal abuse?	13%	22%
	- Threats or intimidation?	13%	24%
	- Sexual comments?	4%	5%
	- Sexual assault?	0%	1%
	- Physical assault?	6%	12%
	- Theft?	2%	14%
	- Other forms of victimisation or bullying?	0%	10%
	- Not experienced any of these from detainees here	73%	61%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	75%	63%
9.6	Have you experienced any of the following from staff here:		
	- Verbal abuse?	6%	15%
	- Threats or intimidation?	2%	13%
	- Sexual comments?	0%	3%
	- Sexual assault?	0%	1%
	- Physical assault?	4%	3%
	- Theft?	2%	1%
	- Other forms of victimisation or bullying?	2%	11%
	- Not experienced any of these from staff here	87%	75%
9.7	If you were being bullied or victimised by staff here, would you report it?	84%	68%

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Number of completed questionnaires returned

Do not understand English	Understand English
71	86

ALCOHOL AND DRUGS		
10.1	While in this centre, have you developed any problems with:	
	- Illicit drugs?	10% 9%
	- Medication not prescribed to you?	29% 22%
	- Alcohol?	12% 3%
10.2	Do you currently have a problem with:	
	- Illicit drugs?	14% 9%
	- Medication not prescribed to you?	36% 22%
	- Alcohol?	14% 3%
10.3	While in this centre, have you been helped with your problems with:	
	- Illicit drugs?	63% 0%
	- Medication not prescribed to you?	56% 47%
	- Alcohol?	60% 0%
10.4	Is it very / quite easy to get illicit drugs in this centre?	3% 13%
10.5	Is it very / quite easy to get alcohol in this centre?	0% 7%
HEALTH AND SUPPORT		
11.1	Is a professional interpreter available if you need one during health care assessments?	42% 22%
11.2	Is the quality of the health care services here very / quite good?	39% 49%
11.3	Do you have any mental health problems?	62% 47%
	For those who have mental health problems:	
11.4	Have you been helped with your mental health problems while in this centre?	13% 33%
11.5	Have you ever felt depressed while in this centre?	86% 82%
11.6	Have you ever felt suicidal while in this centre?	39% 41%
	For those who have felt depressed or suicidal here:	
11.5	Did you receive any help from staff?	24% 27%
OTHER NEEDS AND SUPPORT		
12.1	Do you consider yourself to have a disability?	38% 33%
	For those who consider themselves to have a disability:	
12.2	Are you getting the support you need?	41% 15%
ACTIVITIES		
13.1	Are you taking part in any education here?	30% 22%
	For those who are taking part in education:	
13.2	Is it helpful?	88% 87%
13.3	Do you have a job here?	34% 54%

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* less than 1% probability that the difference is due to chance

Number of completed questionnaires returned

		Do not understand English	Understand English
		71	86
13.4	Does the library have appropriate materials to meet your needs?	30%	26%
13.5	Is it very / quite easy to access what you need on the internet?	15%	17%
13.6	Can you go to the gym as often as you want to?	82%	80%
13.7	Is there enough to do in this centre to fill your time?	36%	31%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	38%	30%
14.2	Have you had a visit from family or friends since you've been in this centre?	27%	44%
<i>For those who have had a visit from family or friends:</i>			
15.4	Are your visitors usually treated with respect by staff?	47%	51%
LEAVING THIS CENTRE			
15.1	Has anyone here helped you prepare for leaving this centre?	13%	16%

Brook House IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of non-heterosexual detainees are compared with those of heterosexual detainees

These analyses are based on data from all survey questions.

Shading is used to indicate statistical significance*, as follows:

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Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
20	89

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	10%	7%
	Are you 25 years of age or younger?	25%	17%
	Are you 50 years of age or older?	5%	12%
1.3	Are you from a black or minority ethnic group?	85%	72%
1.4	Do you understand spoken English very / quite well?	58%	58%
1.5	Do you understand written English very / quite well?	60%	57%
8.1	Are you Muslim?	42%	29%
11.3	Do you have any mental health problems?	60%	51%
12.1	Do you consider yourself to have a disability?	33%	31%
16.1	Are you responsible for any child under the age of 18 in the UK?	32%	27%
16.2	Is your gender female or non-binary?	20%	5%
16.3	Are you homosexual, bisexual or other sexual orientation?		
16.4	Do you identify as transgender or transsexual?	11%	4%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	21%	46%
2.2	Have you spent three months or more in immigration detention in the UK?	16%	29%
2.3	Have you ever been held in prison in the UK?	32%	49%
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	70%	66%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	60%	77%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	70%	82%
4.2	While in reception, were you able to speak to someone from the health care team?	85%	77%
4.3	Overall, were you treated very / quite well in reception?	85%	83%

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Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
20	89

4.4	When you first arrived, did you have any problems?	78%	84%
4.4	When you first arrived, did you have any problems with:		
	- Getting phone numbers?	22%	20%
	- Contacting family?	22%	28%
	- Arranging care for children or other dependents?	0%	6%
	- Contacting employers?	0%	10%
	- Money?	17%	30%
	- Housing?	6%	16%
	- Feeling depressed?	50%	63%
	- Feeling suicidal?	28%	24%
	- Your mental health?	44%	36%
	- Your physical health?	39%	28%
	- Drugs or alcohol (e.g. withdrawal)?	6%	2%
	- Getting medication?	17%	24%
	- Lost or delayed property?	6%	12%
	- Other problems?	17%	16%
	<i>For those who had any problems when they first arrived:</i>		
4.5	Did staff help you to deal with any of these problems?	33%	44%
4.6	Did you feel safe on your first night in this centre?	47%	50%
4.7	In your first two days here, did you receive information in a language you could understand about:		
	- Daily life at this centre?	47%	57%
	- Visits?	69%	46%
	- How to see immigration staff?	50%	41%
	- How to get legal advice?	50%	43%
	- How to see health care staff?	63%	64%
	- Other support available?	36%	39%
LEGAL RIGHTS AND IMMIGRATION			
5.1	Have you received free legal advice in this centre?	26%	41%
5.2	Do you have an immigration lawyer?	68%	66%
	<i>For those who have an immigration lawyer:</i>		
5.3	Is it easy to contact your lawyer?	46%	56%
	Is it easy to have a visit from your lawyer?	33%	29%

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Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
20	89

5.4	Is it easy to obtain bail information?	31%	21%
	Is it easy to access up-to-date information about your country?	25%	12%
	Is it easy to see Home Office immigration staff?	64%	13%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	44%	38%
RESPECTFUL DETENTION			
6.1	On the wing or residential unit you are currently living on:		
	- Do you normally have enough clean, suitable clothes for the week?	56%	58%
	- Can you shower every day?	90%	92%
	- Do you have clean sheets every week?	41%	51%
	- Do you get cleaning materials for your room every week?	59%	50%
	- Is it normally quiet enough for you to sleep or relax at night?	28%	48%
	- Can you get your property from the centre's property store when you need it?	56%	54%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	85%	70%
6.3	Is the quality of the food here very / quite good?	25%	35%
6.4	Do you get enough to eat at meal-times always / most of the time?	60%	48%
6.5	Does the centre's shop sell the things that you need?	35%	49%
6.6	Do you know how to make a complaint about your treatment in this centre?	40%	40%
6.6	Have you made a complaint while in this centre?	20%	18%
	<i>For those who have made a complaint:</i>		
6.7	Are complaints dealt with fairly?	50%	38%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	40%	33%
STAFF			
7.1	Do staff here treat you with respect always / most of the time?	75%	74%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	60%	62%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	74%	70%
7.4	Have staff here physically restrained you since you've been in this centre?	11%	13%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	21%	9%
FAITH			
8.1	Do you have a religion?	90%	88%
	<i>For those who have a religion:</i>		
8.2	Are your religious beliefs respected here?	78%	76%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	61%	57%

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Number of completed questionnaires returned

Gay/bisexual/other	Heterosexual
20	89

SAFETY			
9.1	Have you ever felt unsafe here?	75%	63%
9.2	If yes, have you felt unsafe:		
	- In your room?	33%	29%
	- On corridors?	27%	23%
	- In the dining hall?	20%	15%
	- At health care?	7%	11%
	- In association or shared areas (e.g. TV room)?	20%	15%
	- In activity areas (e.g. library, IT room, education, gym)?	27%	12%
	- In outside areas?	13%	21%
	- Anywhere else in this centre?	33%	16%
9.3	Do you feel unsafe now?	22%	33%
9.4	Have you experienced any of the following from other detainees here:		
	- Verbal abuse?	26%	20%
	- Threats or intimidation?	21%	20%
	- Sexual comments?	0%	7%
	- Sexual assault?	0%	1%
	- Physical assault?	0%	14%
	- Theft?	0%	14%
	- Other forms of victimisation or bullying?	21%	4%
	- Not experienced any of these from detainees here	58%	62%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	58%	71%
9.6	Have you experienced any of the following from staff here:		
	- Verbal abuse?	6%	17%
	- Threats or intimidation?	6%	9%
	- Sexual comments?	0%	2%
	- Sexual assault?	0%	1%
	- Physical assault?	6%	4%
	- Theft?	0%	2%
	- Other forms of victimisation or bullying?	17%	8%
	- Not experienced any of these from staff here	72%	77%
9.7	If you were being bullied or victimised by staff here, would you report it?	60%	76%

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Number of completed questionnaires returned

	Gay/bisexual/other	Heterosexual
	20	89

ALCOHOL AND DRUGS		
10.1	While in this centre, have you developed any problems with:	
	- Illicit drugs?	21% 10%
	- Medication not prescribed to you?	53% 18%
	- Alcohol?	27% 6%
10.2	Do you currently have a problem with:	
	- Illicit drugs?	21% 10%
	- Medication not prescribed to you?	53% 21%
	- Alcohol?	18% 7%
10.3	While in this centre, have you been helped with your problems with:	
	- Illicit drugs?	33% 50%
	- Medication not prescribed to you?	40% 44%
	- Alcohol?	33% 67%
10.4	Is it very / quite easy to get illicit drugs in this centre?	20% 8%
10.5	Is it very / quite easy to get alcohol in this centre?	15% 4%
HEALTH AND SUPPORT		
11.1	Is a professional interpreter available if you need one during health care assessments?	24% 32%
11.2	Is the quality of the health care services here very / quite good?	72% 40%
11.3	Do you have any mental health problems?	60% 51%
	<i>For those who have mental health problems:</i>	
11.4	Have you been helped with your mental health problems while in this centre?	42% 21%
11.5	Have you ever felt depressed while in this centre?	80% 86%
11.6	Have you ever felt suicidal while in this centre?	33% 45%
	<i>For those who have felt depressed or suicidal here:</i>	
11.5	Did you receive any help from staff?	55% 21%
OTHER NEEDS AND SUPPORT		
12.1	Do you consider yourself to have a disability?	33% 31%
	<i>For those who consider themselves to have a disability:</i>	
12.2	Are you getting the support you need?	60% 14%
ACTIVITIES		
13.1	Are you taking part in any education here?	30% 29%
	<i>For those who are taking part in education:</i>	
13.2	Is it helpful?	67% 90%
13.3	Do you have a job here?	50% 50%

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Number of completed questionnaires returned

		Gay/bisexual/other	Heterosexual
		20	89
13.4	Does the library have appropriate materials to meet your needs?	40%	26%
13.5	Is it very / quite easy to access what you need on the internet?	21%	14%
13.6	Can you go to the gym as often as you want to?	77%	88%
13.7	Is there enough to do in this centre to fill your time?	21%	36%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	25%	40%
14.2	Have you had a visit from family or friends since you've been in this centre?	35%	38%
<i>For those who have had a visit from family or friends:</i>			
15.4	Are your visitors usually treated with respect by staff?	29%	53%
LEAVING THIS CENTRE			
15.1	Has anyone here helped you prepare for leaving this centre?	15%	13%

Brook House IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who reported having mental health problems are compared with those of detainees who did not report having mental health problems

- responses of detainees who reported having a disability are compared with those of detainees who did not report having a disability

These analyses are based on data from all survey questions.

Shading is used to indicate statistical significance*, as follows:

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Number of completed questionnaires returned

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	8%	4%
	Are you 25 years of age or younger?	20%	16%
	Are you 50 years of age or older?	9%	12%
1.3	Are you from a black or minority ethnic group?	84%	57%
1.4	Do you understand spoken English very / quite well?	47%	62%
1.5	Do you understand written English very / quite well?	48%	57%
8.1	Are you Muslim?	34%	27%
11.3	Do you have any mental health problems?		
12.1	Do you consider yourself to have a disability?	54%	16%
16.1	Are you responsible for any child under the age of 18 in the UK?	17%	33%
16.2	Is your gender female or non-binary?	4%	9%
16.3	Are you homosexual, bisexual or other sexual orientation?	21%	16%
16.4	Do you identify as transgender or transsexual?	4%	9%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	46%	38%
2.2	Have you spent three months or more in immigration detention in the UK?	25%	30%
2.3	Have you ever been held in prison in the UK?	39%	46%
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	61%	74%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	69%	85%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	75%	88%
4.2	While in reception, were you able to speak to someone from the health care team?	81%	78%
4.3	Overall, were you treated very / quite well in reception?	82%	87%

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Number of completed questionnaires returned

		Mental health problems	No mental health problems	Have a disability	Do not have a disability
		79	69	44	83
4.4	When you first arrived, did you have any problems?	85%	73%	86%	72%
4.4	When you first arrived, did you have any problems with:				
	- Getting phone numbers?	19%	19%	14%	20%
	- Contacting family?	24%	22%	14%	24%
	- Arranging care for children or other dependents?	4%	6%	5%	6%
	- Contacting employers?	11%	5%	5%	10%
	- Money?	26%	24%	30%	20%
	- Housing?	16%	9%	21%	10%
	- Feeling depressed?	72%	42%	67%	44%
	- Feeling suicidal?	34%	9%	40%	11%
	- Your mental health?	55%	10%	47%	22%
	- Your physical health?	39%	21%	40%	22%
	- Drugs or alcohol (e.g. withdrawal)?	3%	2%	2%	3%
	- Getting medication?	30%	15%	28%	17%
	- Lost or delayed property?	12%	6%	5%	12%
	- Other problems?	18%	10%	19%	10%
For those who had any problems when they first arrived:					
4.5	Did staff help you to deal with any of these problems?	36%	51%	41%	49%
4.6	Did you feel safe on your first night in this centre?	37%	63%	37%	65%
4.7	In your first two days here, did you receive information in a language you could understand about:				
	- Daily life at this centre?	48%	67%	43%	66%
	- Visits?	42%	62%	43%	57%
	- How to see immigration staff?	43%	45%	43%	47%
	- How to get legal advice?	42%	47%	35%	49%
	- How to see health care staff?	55%	73%	51%	70%
	- Other support available?	28%	48%	28%	48%
LEGAL RIGHTS AND IMMIGRATION					
5.1	Have you received free legal advice in this centre?	41%	34%	51%	32%
5.2	Do you have an immigration lawyer?	57%	67%	61%	66%
For those who have an immigration lawyer:					
5.3	Is it easy to contact your lawyer?	50%	67%	63%	58%
	Is it easy to have a visit from your lawyer?	27%	46%	35%	38%

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		Number of completed questionnaires returned			
		Mental health problems	No mental health problems	Have a disability	Do not have a disability
		79	69	44	83
5.4	Is it easy to obtain bail information?	20%	25%	26%	23%
	Is it easy to access up-to-date information about your country?	12%	15%	14%	14%
	Is it easy to see Home Office immigration staff?	19%	23%	26%	21%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	40%	49%	45%	41%
RESPECTFUL DETENTION					
6.1	On the wing or residential unit you are currently living on:				
	- Do you normally have enough clean, suitable clothes for the week?	49%	64%	49%	61%
	- Can you shower every day?	88%	95%	89%	92%
	- Do you have clean sheets every week?	44%	59%	35%	60%
	- Do you get cleaning materials for your room every week?	50%	58%	38%	60%
	- Is it normally quiet enough for you to sleep or relax at night?	39%	53%	26%	55%
	- Can you get your property from the centre's property store when you need it?	47%	66%	40%	64%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	67%	79%	59%	78%
6.3	Is the quality of the food here very / quite good?	26%	39%	21%	40%
6.4	Do you get enough to eat at meal-times always / most of the time?	39%	59%	41%	57%
6.5	Does the centre's shop sell the things that you need?	42%	47%	52%	44%
6.6	Do you know how to make a complaint about your treatment in this centre?	33%	54%	44%	50%
6.6	Have you made a complaint while in this centre?	20%	21%	24%	21%
<i>For those who have made a complaint:</i>					
6.7	Are complaints dealt with fairly?	53%	43%	50%	47%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	44%	24%	42%	26%
STAFF					
7.1	Do staff here treat you with respect always / most of the time?	69%	74%	59%	78%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	60%	68%	59%	67%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	63%	73%	71%	70%
7.4	Have staff here physically restrained you since you've been in this centre?	10%	12%	16%	10%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	13%	12%	21%	6%
FAITH					
8.1	Do you have a religion?	90%	92%	86%	90%
<i>For those who have a religion:</i>					
8.2	Are your religious beliefs respected here?	78%	73%	70%	75%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	52%	60%	56%	62%

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Number of completed questionnaires returned

Mental health problems	No mental health problems	Have a disability	Do not have a disability
79	69	44	83

SAFETY					
9.1	Have you ever felt unsafe here?	73%	58%	81%	51%
9.2	If yes, have you felt unsafe:				
	- In your room?	36%	21%	53%	21%
	- On corridors?	35%	15%	28%	17%
	- In the dining hall?	21%	11%	14%	14%
	- At health care?	21%	6%	22%	7%
	- In association or shared areas (e.g. TV room)?	21%	9%	19%	6%
	- In activity areas (e.g. library, IT room, education, gym)?	18%	11%	22%	7%
	- In outside areas?	27%	15%	31%	14%
	- Anywhere else in this centre?	17%	15%	17%	11%
9.3	Do you feel unsafe now?	45%	20%	43%	21%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	26%	9%	14%	18%
	- Threats or intimidation?	29%	9%	25%	12%
	- Sexual comments?	7%	4%	3%	5%
	- Sexual assault?	2%	0%	0%	1%
	- Physical assault?	10%	9%	6%	11%
	- Theft?	13%	4%	17%	7%
	- Other forms of victimisation or bullying?	7%	4%	6%	4%
	- Not experienced any of these from detainees here	55%	77%	67%	69%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	66%	69%	67%	68%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	16%	5%	12%	9%
	- Threats or intimidation?	9%	7%	15%	5%
	- Sexual comments?	2%	2%	2%	0%
	- Sexual assault?	2%	0%	0%	1%
	- Physical assault?	3%	3%	7%	1%
	- Theft?	2%	2%	2%	1%
	- Other forms of victimisation or bullying?	9%	5%	10%	5%
	- Not experienced any of these from staff here	73%	87%	71%	86%
9.7	If you were being bullied or victimised by staff here, would you report it?	71%	80%	75%	77%

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Number of completed questionnaires returned

		Mental health problems	No mental health problems	Have a disability	Do not have a disability
		79	69	44	83
ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	15%	3%	9%	9%
	- Medication not prescribed to you?	40%	9%	42%	12%
	- Alcohol?	10%	4%	10%	6%
10.2	Do you currently have a problem with:				
	- Illicit drugs?	15%	8%	12%	8%
	- Medication not prescribed to you?	43%	11%	42%	14%
	- Alcohol?	9%	7%	6%	6%
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?	40%	33%	50%	40%
	- Medication not prescribed to you?	56%	33%	69%	38%
	- Alcohol?	56%	33%	60%	67%
10.4	Is it very / quite easy to get illicit drugs in this centre?	9%	8%	10%	9%
10.5	Is it very / quite easy to get alcohol in this centre?	3%	5%	0%	6%
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?	35%	32%	46%	28%
11.2	Is the quality of the health care services here very / quite good?	36%	55%	44%	50%
11.3	Do you have any mental health problems?			76%	33%
For those who have mental health problems:					
11.4	Have you been helped with your mental health problems while in this centre?	23%		28%	27%
11.5	Have you ever felt depressed while in this centre?	95%	71%	95%	75%
11.6	Have you ever felt suicidal while in this centre?	57%	21%	67%	26%
For those who have felt depressed or suicidal here:					
11.5	Did you receive any help from staff?	25%	27%	28%	30%
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?	54%	16%		
For those who consider themselves to have a disability:					
12.2	Are you getting the support you need?	29%	13%	26%	
ACTIVITIES					
13.1	Are you taking part in any education here?	30%	21%	21%	24%
For those who are taking part in education:					
13.2	Is it helpful?	86%	90%	100%	87%
13.3	Do you have a job here?	44%	46%	38%	53%

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* less than 1% probability that the difference is due to chance

		Number of completed questionnaires returned			
		Mental health problems	No mental health problems	Have a disability	Do not have a disability
		79	69	44	83
13.4	Does the library have appropriate materials to meet your needs?	25%	31%	26%	34%
13.5	Is it very / quite easy to access what you need on the internet?	15%	19%	12%	22%
13.6	Can you go to the gym as often as you want to?	76%	86%	77%	86%
13.7	Is there enough to do in this centre to fill your time?	27%	41%	12%	44%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	39%	29%	43%	29%
14.2	Have you had a visit from family or friends since you've been in this centre?	37%	33%	45%	35%
<i>For those who have had a visit from family or friends:</i>					
15.4	Are your visitors usually treated with respect by staff?	46%	61%	50%	59%
LEAVING THIS CENTRE					
15.1	Has anyone here helped you prepare for leaving this centre?	14%	14%	15%	16%

Brook House IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who are 25 years of age and under are compared with those of detainees aged over 25
- responses of detainees who are 50 years of age or older are compared with those of detainees aged under 50

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

		25 and under	Over 25	50 and over	Under 50
		29	129	16	142
DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION					
I.2	Are you under 21 years of age?	38%			8%
	Are you 25 years of age or younger?				20%
	Are you 50 years of age or older?		12%		
I.3	Are you from a black or minority ethnic group?	46%	74%	87%	67%
I.4	Do you understand spoken English very / quite well?	61%	52%	50%	54%
I.5	Do you understand written English very / quite well?	57%	50%	50%	51%
8.1	Are you Muslim?	57%	25%	21%	32%
11.3	Do you have any mental health problems?	59%	52%	47%	54%
12.1	Do you consider yourself to have a disability?	41%	33%	25%	36%
16.1	Are you responsible for any child under the age of 18 in the UK?	7%	29%	62%	21%
16.2	Is your gender female or non-binary?	7%	6%	0%	7%
16.3	Are you homosexual, bisexual or other sexual orientation?	25%	17%	8%	20%
16.4	Do you identify as transgender or transsexual?	0%	8%	9%	6%
IMMIGRATION DETENTION					
2.1	Have you been detained in this centre for a month or more?	37%	43%	53%	40%
2.2	Have you spent three months or more in immigration detention in the UK?	22%	28%	36%	26%
2.3	Have you ever been held in prison in the UK?	43%	42%	57%	40%
JOURNEY TO THIS CENTRE					
3.1	Before being brought to this centre, were you told where you were going?	79%	65%	40%	71%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	79%	77%	47%	80%
RECEPTION AND FIRST NIGHTS					
4.1	When you were searched in reception, was this done in a respectful way?	76%	84%	67%	84%
4.2	While in reception, were you able to speak to someone from the health care team?	79%	80%	75%	80%
4.3	Overall, were you treated very / quite well in reception?	83%	84%	56%	87%

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Number of completed questionnaires returned

	25 and under	Over 25	50 and over	Under 50
	29	129	16	142

4.4	When you first arrived, did you have any problems?	70%	80%	86%	77%
4.4	When you first arrived, did you have any problems with:				
	- Getting phone numbers?	15%	20%	21%	19%
	- Contacting family?	11%	25%	50%	20%
	- Arranging care for children or other dependents?	0%	6%	21%	3%
	- Contacting employers?	7%	7%	21%	6%
	- Money?	19%	25%	43%	22%
	- Housing?	15%	12%	14%	13%
	- Feeling depressed?	48%	57%	50%	56%
	- Feeling suicidal?	19%	21%	14%	22%
	- Your mental health?	30%	34%	29%	34%
	- Your physical health?	30%	30%	43%	29%
	- Drugs or alcohol (e.g. withdrawal)?	0%	3%	0%	2%
	- Getting medication?	19%	22%	21%	22%
	- Lost or delayed property?	19%	7%	0%	10%
	- Other problems?	26%	12%	7%	15%
	For those who had any problems when they first arrived:				
4.5	Did staff help you to deal with any of these problems?	33%	43%	50%	40%
4.6	Did you feel safe on your first night in this centre?	44%	50%	40%	50%
4.7	In your first two days here, did you receive information in a language you could understand about:				
	- Daily life at this centre?	64%	53%	54%	55%
	- Visits?	63%	46%	46%	50%
	- How to see immigration staff?	55%	40%	13%	47%
	- How to get legal advice?	50%	43%	36%	46%
	- How to see health care staff?	64%	62%	39%	65%
	- Other support available?	33%	39%	40%	37%
LEGAL RIGHTS AND IMMIGRATION					
5.1	Have you received free legal advice in this centre?	42%	36%	29%	38%
5.2	Do you have an immigration lawyer?	78%	57%	67%	60%
	For those who have an immigration lawyer:				
5.3	Is it easy to contact your lawyer?	72%	53%	38%	60%
	Is it easy to have a visit from your lawyer?	43%	34%	29%	37%

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Number of completed questionnaires returned

		25 and under	Over 25	50 and over	Under 50
		29	129	16	142
5.4	Is it easy to obtain bail information?	17%	22%	0%	24%
	Is it easy to access up-to-date information about your country?	20%	13%	7%	15%
	Is it easy to see Home Office immigration staff?	13%	22%	14%	21%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	29%	45%	13%	46%
RESPECTFUL DETENTION					
6.1	On the wing or residential unit you are currently living on:				
	- Do you normally have enough clean, suitable clothes for the week?	57%	55%	29%	59%
	- Can you shower every day?	93%	91%	93%	91%
	- Do you have clean sheets every week?	56%	50%	31%	54%
	- Do you get cleaning materials for your room every week?	46%	55%	42%	55%
	- Is it normally quiet enough for you to sleep or relax at night?	41%	46%	21%	47%
	- Can you get your property from the centre's property store when you need it?	60%	54%	50%	56%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	56%	76%	53%	74%
6.3	Is the quality of the food here very / quite good?	28%	33%	19%	34%
6.4	Do you get enough to eat at meal-times always / most of the time?	44%	49%	53%	47%
6.5	Does the centre's shop sell the things that you need?	39%	46%	33%	46%
6.6	Do you know how to make a complaint about your treatment in this centre?	48%	41%	47%	42%
6.6	Have you made a complaint while in this centre?	23%	19%	20%	20%
<i>For those who have made a complaint:</i>					
6.7	Are complaints dealt with fairly?	50%	48%	33%	50%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	23%	38%	43%	34%
STAFF					
7.1	Do staff here treat you with respect always / most of the time?	69%	73%	53%	74%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	64%	64%	63%	64%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	63%	68%	63%	68%
7.4	Have staff here physically restrained you since you've been in this centre?	12%	12%	13%	12%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	12%	12%	6%	13%
FAITH					
8.1	Do you have a religion?	82%	92%	93%	90%
<i>For those who have a religion:</i>					
8.2	Are your religious beliefs respected here?	74%	75%	79%	75%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	50%	56%	36%	58%

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Number of completed questionnaires returned

25 and under	Over 25	50 and over	Under 50
29	129	16	142

SAFETY					
9.1	Have you ever felt unsafe here?	65%	66%	63%	67%
9.2	If yes, have you felt unsafe:				
	- In your room?	38%	27%	39%	28%
	- On corridors?	29%	25%	23%	26%
	- In the dining hall?	29%	15%	23%	17%
	- At health care?	13%	15%	8%	16%
	- In association or shared areas (e.g. TV room)?	21%	14%	8%	16%
	- In activity areas (e.g. library, IT room, education, gym)?	17%	14%	0%	16%
	- In outside areas?	21%	21%	23%	21%
	- Anywhere else in this centre?	21%	15%	23%	16%
9.3	Do you feel unsafe now?	27%	35%	50%	32%
9.4	Have you experienced any of the following from other detainees here:				
	- Verbal abuse?	25%	16%	18%	18%
	- Threats or intimidation?	18%	20%	18%	20%
	- Sexual comments?	7%	4%	9%	5%
	- Sexual assault?	0%	1%	9%	0%
	- Physical assault?	11%	10%	18%	9%
	- Theft?	18%	6%	27%	7%
	- Other forms of victimisation or bullying?	7%	5%	18%	5%
	- Not experienced any of these from detainees here	64%	66%	64%	66%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	70%	67%	69%	68%
9.6	Have you experienced any of the following from staff here:				
	- Verbal abuse?	11%	11%	23%	10%
	- Threats or intimidation?	19%	6%	15%	8%
	- Sexual comments?	4%	1%	0%	2%
	- Sexual assault?	0%	1%	0%	1%
	- Physical assault?	4%	3%	0%	3%
	- Theft?	4%	1%	0%	2%
	- Other forms of victimisation or bullying?	15%	6%	15%	7%
	- Not experienced any of these from staff here	78%	80%	69%	81%
9.7	If you were being bullied or victimised by staff here, would you report it?	68%	77%	73%	75%

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Number of completed questionnaires returned

		25 and under	Over 25	50 and over	Under 50
		29	129	16	142
ALCOHOL AND DRUGS					
10.1	While in this centre, have you developed any problems with:				
	- Illicit drugs?	0%	12%	17%	8%
	- Medication not prescribed to you?	25%	25%	31%	24%
	- Alcohol?	0%	9%	17%	6%
10.2	Do you currently have a problem with:				
	- Illicit drugs?	4%	13%	15%	10%
	- Medication not prescribed to you?	29%	28%	29%	28%
	- Alcohol?	4%	9%	15%	7%
10.3	While in this centre, have you been helped with your problems with:				
	- Illicit drugs?	0%	46%	50%	36%
	- Medication not prescribed to you?	57%	50%	40%	54%
	- Alcohol?	33%	56%	50%	50%
10.4	Is it very / quite easy to get illicit drugs in this centre?	7%	9%	14%	8%
10.5	Is it very / quite easy to get alcohol in this centre?	4%	5%	7%	4%
HEALTH AND SUPPORT					
11.1	Is a professional interpreter available if you need one during health care assessments?	25%	36%	42%	33%
11.2	Is the quality of the health care services here very / quite good?	36%	46%	23%	47%
11.3	Do you have any mental health problems?	59%	52%	47%	54%
<i>For those who have mental health problems:</i>					
11.4	Have you been helped with your mental health problems while in this centre?	25%	23%	0%	26%
11.5	Have you ever felt depressed while in this centre?	82%	84%	88%	84%
11.6	Have you ever felt suicidal while in this centre?	56%	37%	33%	41%
<i>For those who have felt depressed or suicidal here:</i>					
11.5	Did you receive any help from staff?	35%	23%	11%	27%
OTHER NEEDS AND SUPPORT					
12.1	Do you consider yourself to have a disability?	41%	33%	25%	36%
<i>For those who consider themselves to have a disability:</i>					
12.2	Are you getting the support you need?	25%	28%	25%	27%
ACTIVITIES					
13.1	Are you taking part in any education here?	19%	27%	6%	28%
<i>For those who are taking part in education:</i>					
13.2	Is it helpful?	83%	89%	100%	87%
13.3	Do you have a job here?	30%	49%	40%	46%

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Number of completed questionnaires returned

		25 and under	Over 25	50 and over	Under 50
		29	129	16	142
13.4	Does the library have appropriate materials to meet your needs?	36%	26%	7%	30%
13.5	Is it very / quite easy to access what you need on the internet?	15%	16%	7%	17%
13.6	Can you go to the gym as often as you want to?	76%	82%	82%	81%
13.7	Is there enough to do in this centre to fill your time?	27%	35%	33%	33%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS					
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	39%	31%	54%	31%
14.2	Have you had a visit from family or friends since you've been in this centre?	41%	36%	31%	37%
For those who have had a visit from family or friends:					
15.4	Are your visitors usually treated with respect by staff?	50%	50%	0%	55%
LEAVING THIS CENTRE					
15.1	Has anyone here helped you prepare for leaving this centre?	8%	16%	31%	12%

Brook House IRC 2019

Comparison of survey responses between sub-populations of detainees

In this table the following analyses are presented:

- responses of detainees who had been held in prison in the UK are compared with those of detainees who had not been held in prison in the UK

These analyses are based on data from all survey questions.

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Number of completed questionnaires returned

Held in prison in the UK	Not held in prison in the UK
63	88

DEMOGRAPHICS AND OTHER BACKGROUND INFORMATION			
1.2	Are you under 21 years of age?	6%	7%
	Are you 25 years of age or younger?	19%	18%
	Are you 50 years of age or older?	13%	7%
1.3	Are you from a black or minority ethnic group?	75%	65%
1.4	Do you understand spoken English very / quite well?	79%	37%
1.5	Do you understand written English very / quite well?	71%	39%
8.1	Are you Muslim?	25%	35%
11.3	Do you have any mental health problems?	49%	57%
12.1	Do you consider yourself to have a disability?	38%	34%
16.1	Are you responsible for any child under the age of 18 in the UK?	38%	14%
16.2	Is your gender female or non-binary?	10%	4%
16.3	Are you homosexual, bisexual or other sexual orientation?	12%	23%
16.4	Do you identify as transgender or transsexual?	6%	7%
IMMIGRATION DETENTION			
2.1	Have you been detained in this centre for a month or more?	66%	24%
2.2	Have you spent three months or more in immigration detention in the UK?	53%	9%
2.3	Have you ever been held in prison in the UK?		
JOURNEY TO THIS CENTRE			
3.1	Before being brought to this centre, were you told where you were going?	75%	63%
3.2	Were you treated very / quite well by escort staff during your journey to this centre?	73%	82%
RECEPTION AND FIRST NIGHTS			
4.1	When you were searched in reception, was this done in a respectful way?	75%	89%
4.2	While in reception, were you able to speak to someone from the health care team?	81%	80%
4.3	Overall, were you treated very / quite well in reception?	79%	90%

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Number of completed questionnaires returned

	Held in prison in the UK	Not held in prison in the UK
	63	88

4.4	When you first arrived, did you have any problems?	80%	79%
4.4	When you first arrived, did you have any problems with:		
	- Getting phone numbers?	18%	18%
	- Contacting family?	22%	24%
	- Arranging care for children or other dependents?	8%	2%
	- Contacting employers?	13%	4%
	- Money?	28%	21%
	- Housing?	17%	8%
	- Feeling depressed?	57%	56%
	- Feeling suicidal?	27%	17%
	- Your mental health?	43%	26%
	- Your physical health?	37%	27%
	- Drugs or alcohol (e.g. withdrawal)?	5%	0%
	- Getting medication?	32%	16%
	- Lost or delayed property?	15%	5%
	- Other problems?	20%	10%
	<i>For those who had any problems when they first arrived:</i>		
4.5	Did staff help you to deal with any of these problems?	40%	43%
4.6	Did you feel safe on your first night in this centre?	58%	43%
4.7	In your first two days here, did you receive information in a language you could understand about:		
	- Daily life at this centre?	58%	52%
	- Visits?	57%	46%
	- How to see immigration staff?	46%	41%
	- How to get legal advice?	46%	46%
	- How to see health care staff?	67%	61%
	- Other support available?	39%	37%
LEGAL RIGHTS AND IMMIGRATION			
5.1	Have you received free legal advice in this centre?	47%	33%
5.2	Do you have an immigration lawyer?	71%	54%
	<i>For those who have an immigration lawyer:</i>		
5.3	Is it easy to contact your lawyer?	67%	47%
	Is it easy to have a visit from your lawyer?	35%	36%

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	Held in prison in the UK	Not held in prison in the UK
Number of completed questionnaires returned	63	88

5.4	Is it easy to obtain bail information?	32%	13%
	Is it easy to access up-to-date information about your country?	14%	12%
	Is it easy to see Home Office immigration staff?	23%	18%
5.5	Are Home Office immigration staff keeping you informed about the progress of your case?	52%	37%
RESPECTFUL DETENTION			
6.1	On the wing or residential unit you are currently living on:		
	- Do you normally have enough clean, suitable clothes for the week?	62%	53%
	- Can you shower every day?	98%	88%
	- Do you have clean sheets every week?	63%	44%
	- Do you get cleaning materials for your room every week?	56%	53%
	- Is it normally quiet enough for you to sleep or relax at night?	46%	46%
	- Can you get your property from the centre's property store when you need it?	54%	58%
6.2	Are the communal / shared areas of your wing or unit normally very / quite clean?	71%	75%
6.3	Is the quality of the food here very / quite good?	29%	37%
6.4	Do you get enough to eat at meal-times always / most of the time?	43%	52%
6.5	Does the centre's shop sell the things that you need?	42%	49%
6.6	Do you know how to make a complaint about your treatment in this centre?	56%	32%
6.6	Have you made a complaint while in this centre?	33%	11%
	<i>For those who have made a complaint:</i>		
6.7	Are complaints dealt with fairly?	45%	56%
6.8	Have you ever been too afraid to make a complaint about your treatment in this centre?	37%	31%
STAFF			
7.1	Do staff here treat you with respect always / most of the time?	61%	80%
7.2	Do staff here knock and wait for an answer before entering your room always / most of the time?	63%	66%
7.3	Are there any members of staff here you can turn to for help if you have a problem?	78%	61%
7.4	Have staff here physically restrained you since you've been in this centre?	12%	12%
7.5	Have you spent any time in the separation / isolation unit, in this centre?	17%	9%
FAITH			
8.1	Do you have a religion?	82%	96%
	<i>For those who have a religion:</i>		
8.2	Are your religious beliefs respected here?	67%	78%
8.3	Can you speak to a Chaplain of your faith in private, if you want to?	59%	53%

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	No shading means that differences are not significant and may have occurred by chance
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Number of completed questionnaires returned

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63	88

SAFETY			
9.1	Have you ever felt unsafe here?	68%	65%
9.2	If yes, have you felt unsafe:		
	- In your room?	33%	27%
	- On corridors?	29%	22%
	- In the dining hall?	18%	16%
	- At health care?	16%	12%
	- In association or shared areas (e.g. TV room)?	18%	13%
	- In activity areas (e.g. library, IT room, education, gym)?	26%	7%
	- In outside areas?	26%	19%
	- Anywhere else in this centre?	22%	12%
9.3	Do you feel unsafe now?	34%	33%
9.4	Have you experienced any of the following from other detainees here:		
	- Verbal abuse?	28%	10%
	- Threats or intimidation?	30%	12%
	- Sexual comments?	8%	2%
	- Sexual assault?	2%	0%
	- Physical assault?	12%	7%
	- Theft?	18%	2%
	- Other forms of victimisation or bullying?	4%	6%
	- Not experienced any of these from detainees here	54%	75%
9.5	If you were being bullied or victimised by other detainees here, would you report it?	57%	77%
9.6	Have you experienced any of the following from staff here:		
	- Verbal abuse?	17%	7%
	- Threats or intimidation?	19%	0%
	- Sexual comments?	4%	0%
	- Sexual assault?	2%	0%
	- Physical assault?	6%	1%
	- Theft?	4%	0%
	- Other forms of victimisation or bullying?	9%	5%
	- Not experienced any of these from staff here	67%	89%
9.7	If you were being bullied or victimised by staff here, would you report it?	63%	84%

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ALCOHOL AND DRUGS			
10.1	While in this centre, have you developed any problems with:		
	- Illicit drugs?	8%	9%
	- Medication not prescribed to you?	15%	30%
	- Alcohol?	4%	8%
10.2	Do you currently have a problem with:		
	- Illicit drugs?	6%	14%
	- Medication not prescribed to you?	14%	37%
	- Alcohol?	2%	12%
10.3	While in this centre, have you been helped with your problems with:		
	- Illicit drugs?	0%	63%
	- Medication not prescribed to you?	50%	54%
	- Alcohol?	0%	75%
10.4	Is it very / quite easy to get illicit drugs in this centre?	16%	3%
10.5	Is it very / quite easy to get alcohol in this centre?	7%	1%
HEALTH AND SUPPORT			
11.1	Is a professional interpreter available if you need one during health care assessments?	32%	35%
11.2	Is the quality of the health care services here very / quite good?	47%	43%
11.3	Do you have any mental health problems?	49%	57%
For those who have mental health problems:			
11.4	Have you been helped with your mental health problems while in this centre?	32%	19%
11.5	Have you ever felt depressed while in this centre?	84%	85%
11.6	Have you ever felt suicidal while in this centre?	42%	39%
For those who have felt depressed or suicidal here:			
11.5	Did you receive any help from staff?	23%	28%
OTHER NEEDS AND SUPPORT			
12.1	Do you consider yourself to have a disability?	38%	34%
For those who consider themselves to have a disability:			
12.2	Are you getting the support you need?	13%	35%
ACTIVITIES			
13.1	Are you taking part in any education here?	24%	27%
For those who are taking part in education:			
13.2	Is it helpful?	91%	85%

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13.3	Do you have a job here?	59%	33%
13.4	Does the library have appropriate materials to meet your needs?	24%	30%
13.5	Is it very / quite easy to access what you need on the internet?	20%	13%
13.6	Can you go to the gym as often as you want to?	82%	79%
13.7	Is there enough to do in this centre to fill your time?	24%	40%
KEEPING IN TOUCH WITH FAMILY AND FRIENDS			
14.1	Have you had any problems with sending or receiving mail (letters or parcels)?	29%	38%
14.2	Have you had a visit from family or friends since you've been in this centre?	41%	32%
<i>For those who have had a visit from family or friends:</i>			
15.4	Are your visitors usually treated with respect by staff?	52%	50%
LEAVING THIS CENTRE			
15.1	Has anyone here helped you prepare for leaving this centre?	15%	13%