

Report on an unannounced full follow-up
inspection of

Brook House Immigration

Removal Centre

12 – 23 September 2011

by HM Chief Inspector of Prisons

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Introduction

Brook House immigration removal centre, located near Gatwick airport and operated by G4S, holds over 400 male detainees. All are either subject to immigration administrative procedures or awaiting deportation and many are ex-prisoners. At our first inspection in March 2010 we found Brook House to be one of the least safe immigration detention centres we had ever visited. Detainees were deeply frustrated and staff lacked support and experience. As a consequence, the centre was struggling to achieve basic levels of security and decency. At this unannounced follow-up inspection, we found substantial improvements. Detainees were safer, and staff were more skilled in their interactions with detainees and better supported by managers. The centre provided a more settled and respectful overall environment. However, significant concerns remained. There was over-use and poor governance of separation, much more remained to be done to improve the quality and quantity of activities, and preparation for release and removal was inadequate.

Arrangements for the reception and induction of newly arrived detainees were better and the dedicated induction unit was reasonably effective in preparing detainees for their time in the centre. Most reported feeling far safer than at the last inspection. This was reflected in the significant reduction in the numbers of assaults and we were pleased to see that arrangements to address bullying and violence were now more robust. Use of force had similarly dropped significantly and self-harm procedures had improved.

Of significant concern was the excessive and often illegitimate use of the separation unit. The use of Detention Centre Rule 15 – an administrative measure to certify all accommodation – as a catch-all to authorise and justify the separation of many detainees was unacceptable, not least because the normal safeguards afforded by the proper use of Rules 40 and 42 were not in place. The use of the stark separation cells for those in crisis was also inappropriate. The regime and quality of facilities were limited and privileges were permitted or denied in a crude and sometimes unthinking way.

The average length of stay at the centre was about three months but for a significant number, stays had exceeded 10 months. UK Border Agency's monthly reviews were mostly taking place but some were delayed and not all were useful. Legal advice surgeries were accessible but, in the view of many, of limited value.

The standards of cleanliness and the quality of accommodation were generally good, but there had been little attempt to soften the harsh and noisy prison-like environment. Staff-detainee relationships were much improved. Staff felt better supported by managers and their greater confidence in working with detainees was one of the most positive findings of this inspection, underpinning much of the general progress. However, the creation of a so-called enhanced wing was inappropriate in the context of a detainee population, and the application of a prison-style basic regime, which included separation within its sanctions, was excessively punitive.

Although there was little tension evident among different groups of detainees, diversity work in general was underdeveloped and it was particularly surprising that professional interpretation services were used so sparingly, often in situations where confidentiality and accuracy of interpretation were essential. Provision for religious diversity was generally good, but there had been insufficient access to Muslim chaplains for the substantial Muslim population.

Detainees had good access to health care and services were generally good, but the lack of professional interpretation for health consultations was a significant weakness. The level of

mental health need was unclear given the weakness of the needs analysis. There was little evidence of any significant drug problem in the centre.

The provision of activity was the area that had improved least. Detainees had reasonable freedom of movement and consequently quite good access to recreational facilities. However, time unlocked was, by comparison to other IRCs, restrictive, particularly in the evening. Education was minimal, despite the best efforts of the single tutor. Slightly more paid work was now available but most of it was mundane.

The service provided by the welfare officer was appreciated but limited. There was no systematic consideration of detainees' needs prior to release or removal. Access to the internet was problematic, with several helpful websites needlessly blocked. The practice of taking 'reserve' detainees to fill spaces on escorted flights, with many returned, was an appalling practice that caused distress and disruption to detainees and their families.

Managers and staff should be commended for bringing a level of stability to the centre, which is now a largely safe environment run by properly supported staff. However, Brook House continues to face a number of challenges and much more needs to be done, particularly in relation to separation, activities and preparation for release and removal. The centre had a tough start, but is now past that phase in its development. We expect it to have built on the firmer footing that it has now achieved by the time we return.

Nick Hardwick
HM Chief Inspector of Prisons

November 2011

Fact page

Task of the establishment

Immigration removal centre for adult male detainees.

Location

Gatwick Airport, West Sussex

Name of contractor

G4S

Number held

406 on 19 September 2011

Certified normal accommodation

426

Operational capacity

426

Last inspection

15-19 March 2010

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 more challenging or difficult to manage within less secure centres, and those waiting to be removed en masse from the UK by organised charter flights.

Short description of residential units

The centre has four wings, of which one is for 'enhanced' detainees. Three wings have three landings and the fourth, the induction wing, two landings. The ground floor of the fourth wing is used for removal from association and temporary confinement accommodation. There are four small outdoor areas for fresh air and exercise. There is no sports hall, but there are three fitness rooms.

Escort provider

Reliance

Health service commissioner and provider

Saxonbrook Medical (Crawley)

Learning and skills provider

G4S

Section 1: Healthy establishment assessment

Introduction

HE.1 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.

HE.2 All inspections carried out by HM Inspectorate of Prisons contribute to the UK's response to its international obligations under the UN Optional Protocol to the 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.

HE.3 All Inspectorate of Prisons reports include a summary of an establishment's performance against the model of a healthy establishment. The four criteria 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 detainees are able to be purposefully occupied while they are in detention

Preparation for release – that detainees are able to keep in contact with the outside world and are prepared for their release, transfer or removal.

HE.4 The purpose of this inspection was to follow up the recommendations made in our last inspection of 2010 and examine progress achieved. We have commented where we have found significant improvements and where we believe little or no progress has been made and work remained to be done.

HE.5 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 United Kingdom Border Agency.

- **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.

HE.6 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.

HE.7 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.

HE.8 At the last inspection in 2010, we found that outcomes at Brook House IRC were poor against the healthy establishment test of safety. We made 57 recommendations, of which 23 had been achieved, 11 partially achieved and 23 were not achieved. We have made nine further recommendations.

HE.9 In 2010, we found that outcomes at Brook House IRC were not sufficiently good against the healthy establishment test of respect. We made 82 recommendations, of which 28 had been achieved, 28 partially achieved and 26 were not achieved. We have made 22 further recommendations.

HE.10 In 2010, we found that outcomes at Brook House IRC were not sufficiently good against the healthy establishment test of purposeful activity. We made 18 recommendations, of which one had been achieved, four partially achieved and 13 were not achieved. We have made two further recommendations.

HE.11 In 2010, we found that outcomes at Brook House IRC were not sufficiently good against the healthy establishment test of resettlement. We made 23

recommendations, of which four had been achieved, four partially achieved and 15 were not achieved. We have made nine further recommendations.

Safety

HE.12 Most detainees were positive about their escort, but some still experienced excessive journeys around the detention estate. Early days arrangements had improved, with a new induction wing and clear first night procedures. Security was well managed and use of force had reduced. There was excessive and illegitimate use of the separation unit, often without the safeguards that apply to normal rule 40 and rule 42 separation. Those at risk of self-harm were well managed but a care suite was much needed. Violence and bullying had significantly reduced and most detainees now described a far safer centre. There were more legal advice surgeries, although many detainees were critical of the standard of legal representation. The centre held some long-term and frustrated detainees. The on-site UK Border Agency team was diligent, although detainees found access to them difficult. The rule 35 (torture allegations) process had improved. Outcomes for detainees against this healthy establishment test were reasonably good.

HE.13 Most detainees were reasonably positive about their experience of escort staff. However, many arrived overnight and some had experienced too many moves in a short period. Detainees were routinely handcuffed when taken to outside appointments.

HE.14 Detainees said that they had reasonable treatment by reception staff, but for some the process took too long. The reception waiting area was now more welcoming, but the discharge rooms were bleak. The booking-in area was still not confidential, despite efforts at screening. The risk assessment process was mostly effective, but reception staff were not always confident about asking key risk questions. Risk information was received from prisons and other immigration removal centres and taken into account for room sharing risk assessments. However, it did not always arrive from police stations.

HE.15 In our survey,¹ just over half of detainees said they felt safe on first night, an improvement on the previous inspection. B wing was now an induction wing, which helpfully prepared detainees for their time at the centre. There were systematic first night interviews and overnight checks. Staff were welcoming and there was a

¹ **Inspection methodology:** There are five key sources of evidence for inspection: 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, applying both qualitative and quantitative methodologies. All findings and judgements are triangulated, which increases the validity of the data gathered. Survey results show the collective response (in percentages) from detainees in the establishment being inspected compared with the collective response (in percentages) from respondents in all establishments of that type (the comparator figure). Where references to comparisons between these two sets of figures are made in the report, these relate to statistically significant differences only. Statistical significance is a way of estimating the likelihood that a difference between two samples indicates a real difference between the populations from which the samples are taken, rather than being due to chance. If a result is very unlikely to have arisen by chance, we say it is 'statistically significant'. The significance level is set at 0.05, which means that there is only a 5% chance that the difference in results is due to chance. (Adapted from Towel et al (eds), *Dictionary of Forensic Psychology*.)

reasonable regime. However, induction was basic and there was no structured programme. Not all detainees received the compact and basic information booklet, and we saw the latter given out in English only.

- HE.16** The security department was well run and properly resourced. There was regular police and UK Border Agency (UKBA) attendance at security meetings, and better follow-up of security information reports, although the number of reports had dropped. Assaults on staff had reduced substantially, mainly because of better staff engagement with detainees and the bedding-in of the wing entry system.
- HE.17** Use of force had reduced significantly. Written records and video recordings showed that adequate attempts were made to persuade detainees to comply before force was used, and that appropriate de-escalation was generally used. Use of force was monitored by managers and lessons learned were passed on. No particular trends had emerged from regular analysis of the records. Medical assessment documents were now present for all uses of force, but often with scant information.
- HE.18** The separation unit was used excessively and illegitimately. Detention centre rule 15 – covering the certification of accommodation – was used illegitimately to justify separation of a large number of detainees, usually before removal. The use of the separation unit for some detainees at risk of suicide or self-harm was poor practice, and the constant watch cells were stark and depressing environments. Governance of rule 40 (removal from association) and rule 42 (temporary confinement) was now satisfactory and detainees were not held for excessive periods under these rules. However, rule 15 separation did not have similar safeguards. Detainees separated under rule 40 were not permitted a television or their own mobile phone, irrespective of risk factors.
- HE.19** Eight detainees whose age was disputed had been in the centre in the year to date. All had been assessed by social services and one was confirmed as minor. He had been taken to the separation unit, which was not an appropriate environment for a child. Improved safeguarding training had been introduced, with just over half of staff so far trained. In some cases, UKBA records indicated that offender managers and police might not have been informed about the release of detainees subject to a licence or who posed a risk of harm.
- HE.20** Levels of self-harm had reduced since the last inspection. Assessment, care in detention and teamwork (ACDT) self-harm monitoring forms were completed fully and kept up to date, with a reasonable standard of entries. Reviews included regular UKBA attendance. ACDTs and self-harm incidents were now systematically monitored, and there had been a detainee presence at all safer community meetings. The Befrienders scheme had yet to be launched. Detainees refusing food for more than a few days were sent, inappropriately, to the separation unit. There was no care suite as an alternative to the constant watch cells.
- HE.21** Our survey suggested a far safer environment than at the last inspection, and our in-depth safety interviews with detainees confirmed that they now had few concerns about safety. Assaults on fellow detainees had reduced by more than half. There were now well-established anti-bullying systems, with a steady improvement in the standard of staff entries in documents. Investigations were now thorough, and led to the practical setting of improvement objectives for bullies and support plans for victims.

- HE.22** Detention duty advice surgeries were now more frequent. However, in our survey a third of respondents were without legal representation, and many of those who had lawyers reported a poor service. Detainees were unable to access some important legal websites and could not open many legitimate documents, which might have impeded their access to justice. Arrangements for legal visits were good.
- HE.23** The average length of detention was around three months, and there were several long-term detainees from countries to which removals were very difficult. Twenty-seven people had been held in the centre for over 10 months. Some monthly reviews were overdue, but records did not accurately show how many and for how long. Monthly reviews now contained a subheading recording progress since the last report, but were not always useful. Rule 35 letters (health care notifications, including allegations of torture) were more structured but did not provide UKBA with enough information or judgement. Replies were generally on time, and the contact management team diligently chased those that were not. Many replies were detailed but there was no evidence of rule 35 reports leading to release. Detainees reported difficulties in access to the on-site immigration team. Induction interviews were conducted adequately, using interpreters as necessary.

Respect

- HE.24** Residential units were clean but not appropriate for a detainee population. Staff-detainee relationships had improved – most staff managed detainees with greater confidence, and were better supported by managers. There was little evidence of discrimination, but not enough had been done to improve outcomes for detainees who spoke little English. Diversity work needed further development overall. The use of a punitive incentives scheme was inappropriate for a detainee population. The management of complaints was variable and trend analysis was weak. Faith provision remained generally good. There were many complaints about the food, but detainees were now more positive about the overall quality, and the cultural kitchen was a valued resource. Most detainees received a satisfactory health care service. Outcomes for detainees against this healthy establishment test were reasonably good.
- HE.25** Little had been done to differentiate the centre's environment from that of a prison. The residential units were visually harsh and noisy, and ventilation remained a considerable problem. Detainees' rooms were well equipped and spacious, but otherwise similar to prison cells, with poorly screened toilet areas – or no screens at all. With some minor exceptions, rooms, showers and communal areas were tidy and clean. However, the showers still lacked adequate privacy and many cells clearly needed repainting. The laundry was accessible, but about half the machines were designed for domestic use and broke down regularly.
- HE.26** We observed some positive and confident staff-detainee interactions, and most staff reported an improvement in management support and guidance. In our survey, three-quarters of respondents said that most staff treated them with respect, compared with only half at the previous inspection. There were no regular groups to help increase communication and support, and ensure that staff were abreast of detainee concerns. A new care officer scheme was not yet fully operational.

- HE.27** There was little evidence of significant tensions between different groups of detainees or of racism. However, Chinese detainees, in particular, reported feeling discriminated against, and there had been insufficient effort to understand and address their concerns. Diversity orderlies provided some useful language support, but there was little use of professional interpreting for sensitive situations, including health care, reception, ACDT and welfare interviews. There was insufficient written information in different languages. There were few complaints about racist incidents and the standard of investigations was satisfactory. The diversity team meeting was well attended, but minutes showed little follow-up of action points. Nationality monitoring was not used to full effect, and there had been no impact assessments. Detainees with disabilities and older detainees were identified and individually assessed, but not all those who needed them had care plans.
- HE.28** In our survey, about two-thirds of respondents said their religious beliefs were respected, compared with half at the last inspection. Facilities for worship were small but welcoming. We received generally good feedback on chaplaincy provision, but the team was stretched as a result of being shared between Brook House, Tinsley House and the new pre-departure facilities at Pease Pottage for children and families. About 40% of detainees were Muslims and they had had limited access to Muslim chaplains for most of the previous six months.
- HE.29** The creation of an enhanced wing and use of a prison-style three-level rewards scheme were not appropriate for a detainee population. Detainees on the basic level were locked up for most of the day, with limited access to activities, and also had their mobile phones removed. Separation was used as a punishment under the scheme, which was inappropriate for a detainee rewards scheme. Detainees had little understanding of how the rewards scheme worked.
- HE.30** There had been 79 complaints to G4S in the previous three months, with only one recorded as partially substantiated. This was misleading as the complaints summary report was inaccurate and consequently gave managers little sense of the true picture. Most replies were polite and reasonably timely, but not all were helpful or resolved underlying issues. Complaints forms and boxes were easily available. In our survey, three-quarters of respondents said it was easy to obtain a complaint form, but non-English speakers had less understanding of the scheme.
- HE.31** We received many individual complaints about the poor quality of the food, but in our survey 28% of detainees said that the food was good, which was similar to the comparator and an improvement on the 11% in 2010. The cultural kitchen was used regularly and a good resource for a few detainees, but there had been little effort to ensure that detainees' cooking informed the main menus. The kitchen was clean and staff had appropriate training. The shop stocked a wide variety of items, and detainees welcomed the cashless approach, although there were often long queues.
- HE.32** In our survey, 41% of respondents who had used health care said the overall quality was good, a rise from the 23% at the last inspection. Detainees had reasonably good access to health services staff. Professional interpreting was underused for confidential consultations. The health needs assessment needed updating and there had been no mental health needs assessment to identify the full range of need. Pharmacy and dental services were adequate. Clinical governance was good.

HE.33 The number of drug finds was still relatively low and the introduction of a drugs strategy was a positive step. Health care staff had a positive approach to engaging with detainees with low-level drug and alcohol issues.

Activities

HE.34 Most detainees had too little to fill their time, especially if they were detained for long periods. Education provision had reduced even further since the previous inspection. The standard of teaching was good. There were more paid work roles, but most work was mundane. The library was popular and well used, although the stock was insufficient. PE provision was reasonably good but staff were not sufficiently trained. Outcomes for detainees against this healthy establishment test were not sufficiently good.

HE.35 There were too few activity places to meet the needs of detainees, particularly those detained for longer periods. In our survey, only a third of respondents said there was enough to do to fill their time. There was a reasonable range of recreational activity. Detainees appreciated the relative ease of movement around the centre for most of the day, but the lock-up time was early and detainees were unable to come out of their rooms at night.

HE.36 In our survey, only 6% of respondents said they were in education, half the response at the last inspection and much worse than the comparator of 29%. There was now only one tutor and currently no arts and crafts provision. The tutor was well qualified and delivered good quality individual support and coaching. There were no formal arrangements for self-assessment or quality improvement, and education staff did not have regular opportunities for professional development.

HE.37 There were slightly more paid roles for detainees than at the last inspection, and they were more aware of the work that was available. Most work was relatively mundane despite the fact that there had been some changes to make it more interesting. Detainees were still inappropriately blocked from work opportunities for non-compliance with UKBA.

HE.38 The library was accessible and popular, but stock was not reviewed to meet the needs of the population. There was an inadequate supply of dictionaries, audiovisual materials and foreign language newspapers.

HE.39 The cardiovascular/fitness rooms were popular and detainees had good access to them. The system for induction to PE facilities was inadequate and many detainees had not received an induction before use. There were insufficient activities staff to supervise the gyms effectively, and officers had not been given appropriate gym instructor training.

Preparation for release

HE.40 There was a high demand for welfare support and, although improved, the welfare service was underdeveloped. Detainees were generally positive about visits but there were some excessive restrictions. Access to phones, email and fax was generally

good. There was no systematic pre-release assessment or assistance for detainees. The system of taking detainees as reserves to the airport for removal was not acceptable. Outcomes for detainees against this healthy establishment test were not sufficiently good.

- HE.41 The welfare officer provided a valued service, although this was mainly helping with property and completing immigration forms. The service was under-resourced and in need of development. The Gatwick Detainees Welfare Group provided a good service with around 80 volunteers visiting detainees, but there were few other external support agencies linked to the centre.
- HE.42 The visits hall was a reasonable environment but small for the population. Detainees were generally positive about their treatment by visits staff. There were some delays in starting visits. We saw staff taking a flexible approach to physical contact between detainees and visitors, but some were overzealous in restricting it. Detainees who needed to go to the toilet were not permitted to return to their visit. We were told that this had changed during the inspection.
- HE.43 Most detainees had good access to telephones, but there was uneven mobile phone signal strength, and cordless phones were not always available. Email contact was good but detainees could not open attachments. Internet access was good, but many legitimate websites were blocked. Fax machines were easy to access and this was valued by detainees.
- HE.44 There was no systematic pre-release assessment or assistance for detainees, a role that could have been performed by an expanded welfare service. The system of taking detainees as reserves to the airport in case there were spaces on escorted flights was inhumane. Detainees were not told they were on the reserve list and were returned after they had said goodbyes to families in this country or when they were looking forward to being reunited with families abroad. Detainees in the holding room before an overseas charter removal had not received a briefing from UKBA and did not see anyone from UKBA during the process. Detainees transferred into further detention were not given adequate reasons for the transfer.

Main concerns and recommendations

- HE.45 **Concern:** The separation unit was used excessively and illegitimately. A large number of detainees spent time in the separation unit before removal without the safeguards associated with Detention Centre Rules 40 and 42.

Recommendation: With immediate effect, detainees should be located in the separation unit only under the provisions of Detention Centre Rules 40 and 42, for the shortest time possible and subject to the governance associated with legitimate separation.

- HE.46 **Concern:** Professional interpretation was underused in sensitive situations and in discussions where accuracy of interpretation could be essential.

Recommendation: Professional interpreting should be used in sensitive circumstances and where accuracy is essential, including for health care consultations, reception, assessment, care in detention and teamwork (ACDT) and welfare interviews.

HE.47 Concern: There were no support and information groups to enhance staff-detainee communication and ensure staff awareness of detainee concerns.

Recommendation: Weekly group meetings should be convened with detainees to identify unmet need, inform them of relevant issues and keep staff abreast of concerns.

HE.48 Concern: Mental health services were underdeveloped and there was no care planning.

Recommendation: All detainees with mental health needs should be identified and any who need them should have a care plan.

HE.49 Concern: Education provision was minimal and had reduced further since the previous inspection.

Recommendation: The volume and range of education provision should significantly increase, and its structure and planning meet the needs of all detainees.

HE.50 Concern: The welfare service was underdeveloped and there was no systematic pre-release or removal assessment and support for detainees.

Recommendation: A full and widely advertised welfare service should be provided seven days a week and should provide systematic pre-release or removal assessment and support for detainees.

HE.51 Concern: Detainees were taken as 'reserves' to the airport in case there were spaces on escorted flights. They were not told they were on the reserve list and were returned after they had said goodbyes to families in this country or when they were looking forward to being reunited with families abroad.

Recommendation: The system of taking 'reserve' detainees to the airport for removals should cease.

Progress on main recommendations since the previous report

(The paragraph numbers at the end of each main recommendation refer to its location in the previous inspection report)

MR1 All forms of separation should be subject to appropriate governance and be for the shortest period possible. (HE.40)

Not achieved. There was a form of separation, supposedly under rule 15 of the detention centre rules, which was not authorised or monitored through the normal rule 40 or 42 procedures.

See main recommendation HE.45.

MR2 The anti-bullying strategy should be fully implemented and closely monitored by the safer community group. (HE.41)

Achieved. Implementation of the anti-bullying strategy had improved greatly, and its effectiveness had contributed to the increased sense of safety in the establishment. The safer community committee monitored the outcomes of the strategy each month.

MR3 Staff supervision in the shop area, stairways and any other communal area where bullying or violence is identified should be sufficient to deal with the problem. (HE.42)

Achieved. The shop area and stairways were patrolled more thoroughly (see paragraph 8.14). Although some detainees mentioned the exercise yards as points of tension, during the inspection they were well covered by staff.

MR4 Managers should draw up and implement a policy on drug supply reduction, including clear guidance and briefing for visits staff. (HE.43)

Achieved. A draft drug strategy had been introduced detailing the Gatwick Immigration Removal Centres' (including the nearby Tinsley House IRC) joint approach to supply and demand reduction. A UK Border Agency-wide drug strategy was being developed to replace the draft document. An additional policy on the use of UKBA drugs dogs had been implemented in April 2010.

MR5 Detainee custody officers should be supported to develop positive relationships with detainees in their care, and all new and inexperienced staff should have mentors as part of a formal mentoring scheme. (HE.44)

Achieved. Detainee custody officers (DCOs) were well supported by managers and new appointees were allocated mentors. We found no evidence that staff felt abandoned and unsupported, as at the last inspection, and staff were more confident in their interactions with detainees. The mentoring scheme did not require formal meetings or form filling but it was achieving the desired outcome. (See paragraph 2.29.)

MR6 Weekly group meetings should be convened with detainees to identify unmet need, inform detainees of relevant issues and keep abreast of concerns. These should use professional interpreters wherever necessary. (HE.45)

Not achieved. No such meetings were held. There were regular consultation meetings (see paragraph 2.10) but these were mainly about facilities and there was no use of professional interpretation.

See main recommendation HE.47.

- MR7 **Detainees should have access to primary, secondary and specialist mental health services which meet the needs of the centre population. (HE.46)**

Partially achieved. Development of mental health services had commenced but there were limited therapeutic interventions. Following considerable difficulties in gaining security clearance, the number of primary care mental health nurses had increased. There was access to a psychiatrist every two weeks, but there was no community psychiatric nurse and very limited access to counselling services. There was some pastoral support through the chaplaincy. There had been no mental health needs assessment of the full range of need among the population, and there was no caseload monitoring or care planning.

See main recommendation HE.48.

- MR8 **The volume and range of education provision should significantly increase and its structure and planning meet the needs of all detainees. (HE.47)**

Not achieved. There was less education provision than at the last inspection. There were no arts and crafts classes and now only a single tutor. He could provide a service to a small number of detainees only, though he had been creative about organising provision to make best of limited resources. He offered French, Italian, Spanish and German, as well as a weekly baking class and English for speakers of other languages (ESOL). These subjects were now offered in the same classes. While not ideal, this arrangement offered small group teaching and individual coaching to meet a wider range of detainee needs.

See main recommendation HE.49.

- MR9 **A full and widely advertised welfare service should be provided seven days a week and should provide systematic pre-release or removal assessment and support for detainees. (HE.48)**

Not achieved. A welfare service was provided Monday to Friday only. The welfare officer was not routinely made aware of detainees being released or removed, and could not, therefore, provide any systematic support to them.

See main recommendation HE.50.

2. Progress on other recommendations since the last report

Section 1: Arrival in detention

Expected outcomes:

Escort staff ensure the well being and respectful treatment of detainees under escort. On arrival, detainees are treated with respect and care and are able to receive information about the centre in a language and format that they understand.

Escort vans and transfers

- 1.1 Detainees should routinely be told of any transfer in advance and given details of reasons for transfer and information about their destination. They should not be subject to successive unexplained moves around the detention estate. (1.12)

Not achieved. Some detainees were still transferred without sufficient notice, hindering preparation for the move. Our survey suggested fewer successive moves around the estate but they were still occurring. In one case we looked at, a man with a heart problem was moved six times in two months for no obvious reason.

We repeat the recommendation.

- 1.2 Detainees should not be transferred between centres overnight. (1.13)

Not achieved. Detainees were still regularly transferred between centres overnight, causing exhaustion and disorientation.

We repeat the recommendation.

- 1.3 Escorting staff should contact the receiving centre to provide them with an estimated arrival time and details of who they are escorting. (1.14)

Partially achieved. Reception staff told us that they usually received a telephone call from escort staff informing them that detainees were on their way in sufficient time to plan receptions and prepare files. We observed an arrival of four detainees for which no telephone call had been received because, the escort staff told us, the reception telephone had been constantly engaged.

We repeat the recommendation.

- 1.4 Copies of police custody records should be attached to the IS91 when a detainee is transferred from police custody. (1.15)

Not achieved. Although risk information was received from prisons and other immigration removal centres, we found no instances in which police custody records were sent with the detainee, and staff told us it was rare for them to receive an escort record from police stations.

We repeat the recommendation.

- 1.5 Detainees should only be handcuffed if there is specific information indicating substantial risk. (1.16)

Not achieved. Staff routinely handcuffed detainees for escorts to hospitals, dentists and embassies.

We repeat the recommendation.

Additional information

- 1.6 The escort vehicles we inspected were new, clean and in good condition, and equipped with CCTV, air conditioning, tinted windows and cool boxes for refreshments.
- 1.7 Detainees told us that escort staff were polite and considerate. Records showed that most, but not all, detainees had received toilet and food breaks on their journeys at the specified intervals. One journey that started at 8.26am had not had a break until 12.40pm. Detainees were offered sandwiches, crisps and water during transfer.
- 1.8 Not all detainees had been given adequate information about transfer. One detainee we spoke to in the discharge area was told early in the morning that he was being moved to Colnbrook IRC that day, to be deported the next. He said his wife had gone to Colnbrook with his belongings, taking their young child. On arrival there, she had to travel to Brook House instead. In the event he was taken to a prison.

Reception

- 1.9 **The waiting rooms in reception and discharge should be made more welcoming and should contain books, newspapers and magazines in a range of languages. (1.35)**

Partially achieved. There had been significant improvements to the reception main waiting room, including the installation of a TV and table football, but there was still no reading material and little to occupy detainees during waits of up to four hours. The discharge waiting rooms remained bleak and largely empty.

We repeat the recommendation.

- 1.10 **Detainees should be offered hot and cold drinks on arrival and at regular intervals, and have free access to drinking water. (1.36)**

Achieved. Detainees could help themselves to water, tea and coffee provided in the waiting room. Meals were also provided.

- 1.11 **Detainees should not be locked in an unsupervised waiting room. (1.37)**

Not achieved. The waiting room was covered by CCTV but detainees were not actively supervised.

We repeat the recommendation.

- 1.12 **Detainees should not have their fingerprints taken in reception if UKBA already have their prints on record. (1.38)**

Not achieved. There was a stamp on the files of incoming detainees to show if they had been fingerprinted elsewhere, but staff still took fingerprints from some people who had existing prints. About three-quarters of arriving detainees had prints taken.

We repeat the recommendation.

1.13 All detainees should be interviewed in private in reception. (1.39)

Not achieved. Although screens had been installed between booking-in desks, these still gave little privacy, particularly because the reception area was used as a through route into the main centre.

We repeat the recommendation.

1.14 Detainees who do not speak English fluently should be interviewed with the use of telephone interpretation. (1.40)

Not achieved. We saw detainees not fluent in English being interviewed with the help of another detainee. This practice could breach confidentiality, lead to mistakes or inhibit the detainee from disclosing sensitive information during his risk assessment. (See main recommendation HE.46.)

1.15 Staff should receive training and guidance on interviewing techniques and completion of the first night and room-sharing risk assessments, which should be completed for all detainees. (1.41)

Partially achieved. All detainees were risk assessed in reception. Staff had been given 'toolbox talks' – scripted briefings on specific aspects of their work – to enhance their skills. However, these were short and did not provide the opportunity of structured training to practise and embed newly acquired skills. Reception staff told us that they felt awkward when asking questions about risk, self-harm and health, and they were diffident in delivering that part of the reception process.

We repeat the recommendation.

1.16 Detainees should be able to have a shower in reception on arrival. (1.42)

Not achieved. There was no shower in reception and detainees arriving after about 8.30pm had to wait until the next morning for a shower.

We repeat the recommendation.

First night and induction

1.17 There should be designated first night rooms. (1.48)

Achieved. All new detainees were now accommodated in B wing, a designated induction wing that had facilitated considerable improvements to first night and induction processes. Staff were aware of first night detainees.

1.18 Detainees should be interviewed by staff on arrival in their first night accommodation to assess their risk and immediate needs. (1.49)

Achieved. On arrival on B wing, all new detainees received a structured first night interview with residential staff that addressed their immediate concerns.

1.19 All detainees should be checked at least twice on their first night. These checks should be recorded. (1.50)

Achieved. All detainees were checked at least three times during their first night and a record of the checks was maintained, along with a record of their first night interviews and inductions.

- 1.20 All detainees should receive a comprehensive induction and clear written information explaining the facilities and routine of the centre in a language they can understand. The same information should be provided in audio or video formats for detainees who are unable to read. (1.51)

Partially achieved. All new detainees received an induction interview with a member of residential staff within 24 hours of their arrival. Although the process contained useful information, its delivery was mechanical and there was no use of DVDs, other media or group discussions to make induction more interesting and effective. There was no structured induction programme. We did not see any written information, in English or any other language, given out during the induction process. Detainee diversity orderlies saw each new detainee during their first few days (see paragraph 4.36).

We repeat the recommendation.

Additional information

- 1.21 Room sharing risk assessments were carried out, but there was too much reliance on risk assessments completed in previous establishments. Correct documentation (IS91) arrived with each arriving detainee we saw in reception.
- 1.22 Reception staff were friendly and welcoming, but despite checking detainees' names and nationality, they made no effort to find out and use their preferred names, referring to them all as 'mate'. Staff did not wear name badges.
- 1.23 Reception staff did not fully explain the compact that set out expected standards of behaviour and the regime at Brook House. Every detainee was given a copy of the compact but they were so badly photocopied that they were not legible and conveyed a poor impression of the centre. During the otherwise well-organised reception process, some potentially sensitive discussions were interrupted, such as when an officer stopped a detainee's risk assessment to take fingerprints while a history of self-harm was being disclosed.
- 1.24 There was little information in reception. The only translated information was not given out by all staff owing to confusion about whether or not it was still current. In our survey, only 15% of respondents, against the comparator of 25%, said that they had received information on arrival that was translated. We spoke with a group of Chinese detainees, most of whom spoke very little English, who said they had been given no information about the centre in their own language. In our survey, only 46% of non-English speaking respondent said that reception staff treated them well, compared with 61% of English speakers.
- 1.25 Reception staff offered detainees a free telephone call and replacement clothing. We observed a team leader who gave considerate advice sensitively to a detainee refusing to cooperate with the reception process. After her intervention, which included helping him find and telephone a solicitor, he was calm and compliant.
- 1.26 All arriving detainees had an interview with the nurse in reception. Although we were told this should happen within two hours, we observed two detainees who had waited for four hours in reception after tiring journeys, apparently because of delays with the nurse handover.

Further recommendations

- 1.27 Reception staff should use detainees' preferred names and wear name badges.

1.28 Expected standards of behaviour and the regime should be explained to detainees in a language they can understand, and written information should be clearly printed in a range of languages.

Housekeeping point

1.29 Detainees should be interviewed quickly and not be left waiting in reception for excessive periods.

Section 2: Environment and relationships

Residential units

Expected outcomes:

Detainees are held in decent conditions in an environment that is safe and well maintained. Family accommodation is child friendly.

Accommodation and facilities

- 2.1 **Daily fabric checks should be rigorous to preserve security and maintain adequate standards of hygiene, safety and decency. (2.22)**

Achieved. All wings were inspected daily, and the checks recorded. With a few exceptions, the rigour of these checks had resulted in clean, tidy and well-equipped rooms and communal areas.

- 2.2 **The living environment should be softened with, for example, the introduction of plants, soft furnishing and art work. (2.23)**

Not achieved. Only D wing, designated as an enhanced wing, had any soft furnishings and there was little artwork to brighten up the environment. We were told that there was a reluctance to upgrade other wings as this would impact on the reward scheme.
We repeat the recommendation.

- 2.3 **Information notices should be displayed in a wide range of languages. (2.24)**

Not achieved. With the exception of complaint forms, which were available in all wings in many languages, all information notices were in English.
We repeat the recommendation.

- 2.4 **There should be adequate space on the wings for detainees to participate in recreational activities. (2.25)**

Achieved. Each wing had pool tables, table tennis, bar football and board games, and there was sufficient space for them. We did not see overcrowding in these areas.

- 2.5 **Seating should be installed in the exercise yards. (2.26)**

Partially achieved. Seats had been installed in D wing yard, which was a garden area. All other exercise yards were marked out for sports and had no seating. Many detainees told us that seating would be helpful.
We repeat the recommendation.

- 2.6 **All rooms should be adequately ventilated. (2.27)**

Not achieved. Rooms had sealed windows, and we received many complaints of poor ventilation and hot rooms.
We repeat the recommendation.

2.7 The smoking policy should be enforced. (2.28)

Achieved. The policy was that smoking was only permitted in rooms and in exercise yards, and we saw no detainee in breach of this.

2.8 Soundproofing should be introduced on the residential units. (2.29)

Not achieved. All wings and some interior communal areas could be extremely noisy, which at times led to an intimidating atmosphere. Sounds reverberated around the wings and there was a loud but barely comprehensible public address system that interfered with normal conversation.

We repeat the recommendation.

Housekeeping point

2.9 The use of the public address system should be minimised and directed at appropriate areas.

2.10 Consultative meetings should result in resolution of legitimate issues raised by detainees. (2.30)

Achieved. Wing consultative meetings were held monthly and a variety of issues were discussed and actioned.

Clothing and possessions

2.11 Detainees should be able to store their property safely. (2.31)

Achieved. All detainees had a lockable cupboard beneath their bed in which they could securely store property. Further property could be left in the property store in the reception area. The incidence of theft and property interference was low.

Hygiene

2.12 Detainees should be encouraged and helped to keep rooms clean and tidy. (2.32)

Achieved. Cleaning materials were easily available on all wings. All the rooms that we examined were clean and tidy. Any detainee whose room was below standard was spoken to, encouraged to clean it and could be issued a warning under the rewards scheme.

2.13 The showers should be adequately screened. (2.33)

Not achieved. All showers had stable doors, which did not offer full privacy. Some detainees complained that they could too easily be seen by others if they came within a few feet of the showers.

We repeat the recommendation.

2.14 Detainees should have the option of taking a bath. (2.34)

Not achieved. There were still no baths available.

We repeat the recommendation.

2.15 All toilets should have seats and should be screened so that detainees are afforded complete privacy. (2.35)

Not achieved. No toilets had seats and, with a few exceptions, toilet areas in rooms were screened only by a curtain, which did not provide full privacy – and some rooms were even without these.

We repeat the recommendation.

Additional information

- 2.16** The centre was designed to category B prison specifications and little had been done to soften the prison-like feel of the environment to make it more suitable for a detainee population. The centre was generally clean, but the B wing corridor to the exercise yard was very dirty and had clearly not been cleaned for some time.
- 2.17** Each wing had a room adapted for use by detainees with disabilities, although the showers in these were not used owing to drainage problems.
- 2.18** All rooms had emergency call bells with intercom facilities. We saw many call bell lights illuminated and it was difficult to determine how recently they had been activated. In the cases we observed, responses were reasonably quick. Some officers did not have the key to re-set the lights.
- 2.19** Most detainees wore their own clothes. The centre also had a good selection of clothes, although this did not include any outdoor wear and was insufficient for detainees to take outside exercise in cold or wet weather. Clothing was washed on the wings in domestic machines, but the heavy use had led to damage to the machines and regular breakdowns. In our survey, 75% of respondents said that they could clean their clothes easily, against the comparator of 86%.
- 2.20** Many detainees complained that they could not sleep because the pillows were thin and of poor quality.
- 2.21** There were sufficient showers on all wings, and they were clean and working properly. In our survey, 97% of respondents said that they could shower daily.

Further recommendations

- 2.22** The drainage problems in the adapted rooms should be corrected.
- 2.23** Industrial washing machines should be sourced for domestic washing.
- 2.24** Better quality pillows should be provided.

Housekeeping point

- 2.25** All officers should be able to re-set emergency call bell lights.

Staff-detainee relationships

Expected outcomes:

Detainees are treated respectfully by all staff, with proper regard for the uncertainty of their situation, and their cultural and ethnic backgrounds. Positive relationships act as the basis for dynamic security and detainees are encouraged to take responsibility for their own actions and decisions.

2.26 Wing managers should be based on the wings to help support staff and speak to detainees. (2.41)

Achieved. One team leader worked between two wings and was generally on one or other of them.

2.27 A personal or care officer scheme should be implemented. (2.42)

Partially achieved. A care officer scheme had been implemented but only recently. Detainees were largely unaware of it and it was too early to evaluate its effectiveness.

2.28 History sheet entries should be regular and substantial, building a meaningful picture of detainees. (2.43)

Not achieved. History sheets had very few entries and nearly all were negative comments on behaviour.

We repeat the recommendation.

Additional information

2.29 In our survey, 74% of respondents said that most staff treated them with respect, which was considerably better than the response of 52% at the last inspection and now similar to the overall IRC comparator. We observed some positive and confident staff-detainee interactions, and most staff reported improvement in management support and guidance. DCOs who had been at the centre at the last inspection told us they felt better supported by managers, and many cited the visibility and helpfulness of team leaders who were in turn supported by the deputy director. Newly appointed DCOs had been given staff mentors and told us that this was helpful in inducting them to the work, and that they felt supported by these colleagues as well as team leaders. (See paragraphs MR5 and MR6.)

2.30 Most detainees (57%) said they had a member of staff to turn to if they had a problem, similar to the IRC comparator. We saw reasonable staffing levels, but a number of detainees still complained of a lack of staff availability. We saw an example of mature management of one detainee during a night visit. The man had mental health problems, was stressed about the lack of resolution to his immigration case, and became threatening to a DCO. The officer stayed calm, went to the detainee's room to reassure him, and said that he would call a team leader. The team leader spent some time discussing the detainee's concerns with him. The detainee calmed down and apologised for his earlier behaviour.

Section 3: Casework

Legal rights

Expected outcomes:

Detainees are able to obtain expert legal advice and representation from within the centre. They can receive visits and communications from their representatives without difficulty to progress their cases efficiently.

- 3.1 In consultation with the Legal Services Commission, the centre should ensure adequate access to legal advice, representation and bail applications. (3.10)

Partially achieved. In our survey, a third of detainees said they were without legal representation, a third paid privately for legal representation, and a third received publicly funded representation. Since our last inspection, the detention duty advice surgeries (DDAS) had increased from once to twice a week. Ten half-hour advice slots were available on Tuesdays and Thursday. Despite this increase, in our survey only 32% of respondents, against the comparator of 42%, said that they had received free legal advice. On average, detainees had to wait four days to access the surgeries. Not all detainees attending DDAS received ongoing substantive representation, and they told us of difficulty in finding good lawyers to represent them (see additional information). In our safety interviews, detainees said that their situation relating to their immigration case made them feel depressed and there was little at Brook House that could help them with this.

Further recommendation

- 3.2 In consultation with the Legal Services Commission, the centre should ensure adequate access to legal advice, representation and bail applications, and seek peer review of the quality of advice and representation received by detainees.

- 3.3 Important websites, such as Community Legal Advice and Bail for Immigration Detainees, should be advertised. (3.11)

Achieved. Notices in the internet suite promoted the Community Legal Advice and Bail for Immigration Detainees (BID) websites, although they did not explain their function of providing access to lawyers and bail advice. The Community Legal Advice website was no longer active and only its telephone helpline was available. Notices for the BID website were displayed in the library and welfare office.

Housekeeping point

- 3.4 Notices about Community Legal Advice should be updated to explain that it is only available over the telephone.

- 3.5 Detainees should be reminded of their bail rights and given a bail application form during their UKBA induction to the centre. (3.12)

Partially achieved. Detainees were reminded of their bail rights during induction interviews

but not given application forms. A member of the UKBA contact management team saw all detainees within 48 hours of arrival. We observed two induction interviews. Both men were advised that if they wished to apply for bail they should speak with their solicitors. Detainees without a solicitor were directed to the library where they could sign up for the detention duty advice surgery (see paragraph 3.1). Bail application forms were available in the library and in the welfare office. In our survey, 37% of detainees said it was easy to obtain bail information, which was higher than the comparator of 30% and the 17% response at our last inspection.

3.6 Hard copies of BID's 'Handbook on Bail' should be available in English and other languages. (3.13)

Partially achieved. Copies in English of the BID *Handbook on Bail* were kept in the library behind the staff desk but could only be viewed on request. There were no notices advertising their availability. Copies of the handbook in Arabic were freely available on the shelves. The handbook was not available in other languages. Electronic copies could not be viewed on the internet.

We repeat the recommendation.

3.7 The stock of legal text books should be updated and made readily available to detainees. (3.14)

Partially achieved. The range of legal text books had increased. However, as at our last inspection, they were locked in a cupboard in the library. A list of the legal text books was displayed beside the library door. In our survey, more respondents than the comparator (43% against 33%) and than at our last inspection (16%) said that they could get legal books in the library.

Housekeeping point

3.8 The stock of legal text books should be made readily available to detainees.

3.9 Country of Origin Information Service reports should be available in hard copies and electronically. (3.15)

Not achieved. Hard copies of the most frequently used country of origin reports were freely available in the library, but they were out of date. For example, only the December 2009, not the August 2011, Iraq report was available. It was not possible to download the reports electronically in the internet suite.

We repeat the recommendation.

3.10 Notices explaining how to complain about legal representatives should be displayed and Office of the Immigration Services Commissioner and Legal Complaints Service complaint forms should be freely available to detainees. (3.16)

Partially achieved. Notices about the Office of the Immigration Services Commissioner (OISC) and the Legal Ombudsman (which had replaced the Legal Complaints Service) were displayed in the library in various languages. Legal Ombudsman leaflets were available from the welfare office. We found a single complaint form for the OISC in English underneath a pile of other leaflets in the library.

Housekeeping point

- 3.11 Complaint forms for the Office of the Immigration Services Commissioner should be freely available.

Additional information

- 3.12 Three firms of solicitors, contracted by the Legal Services Commission, provided advice through the detention duty advice service (DDAS). Detainees complained about the quality of representation offered through DDAS. One firm had a reputation for incompetence amongst detainees and some preferred to wait until a solicitor with a good reputation was on the rota before signing up (see further recommendation 3.2). DDAS was advertised in the library, welfare office and some interview rooms. The legal representative we spoke with said that his firm would only decline to pursue a detainee's case on grounds of insufficient merit after all the papers had been received from UKBA or the previous representative. He also confirmed that his firm had capacity to represent substantively detainees whose cases had merit.
- 3.13 The library and welfare office had a range of relevant legal and application forms in an easily accessible manner. The welfare officer assisted detainees in completing forms.
- 3.14 Detainees could write legal letters on four PCs in the library, but as these did not have internet access, they could not copy and paste information into documents to support their case. Documents could be printed without charge. Detainees were not allowed to carry memory sticks so they saved work on the PC hard drive, but documents could be password protected.
- 3.15 Arrangements for legal visits were good. Lawyers were allowed to bring laptops and mobile phones without cameras into the centre. Lawyers confirmed that they could easily make appointments and access the centre. Detainees were generally brought to the interview rooms on time. There were 10 spacious interview rooms equipped with telephones, shared between legal visitors and UKBA. Chairs were chained or fastened to the floor, which was uninviting and unnecessary. In our survey, fewer respondents than the comparator, 39% against 55%, said they had received a visit from their lawyer. There were two video link suites, which were well used for bail hearings.
- 3.16 Detainees had access to internet based email accounts but could not open attachments. This meant that lawyers could not email statements or letters. Many legitimate websites were blocked making it difficult for detainees to research their cases or their countries of origin. (See recommendation 9.13.) While technically it was possible to unblock sites, in reality many sites remained blocked and one detainee commented in a safety interview: 'I should have free access for information. It's not a safety issue but I feel extremely under pressure.' Word and PDF files could not be opened. These restrictions impeded detainees' access to justice.

Housekeeping points

- 3.17 Detainees should only be interviewed on chairs fastened to the floor following individualised risk assessments.
- 3.18 Detainees should be able to open Word and PDF files on computers in the internet suite.

Immigration casework

Expected outcomes:

Decisions to detain are based on individual reasons that are clearly communicated and effectively reviewed. Detention is for the minimum period necessary and detainees are kept informed throughout about the progress of their cases.

3.19 Cumulative periods of detention should be routinely collated by UKBA. (3.29)

Not achieved. Although the UKBA contact management team could easily access details of detainees' length of detention at Brook House, cumulative periods of detention could not be collated without analysing each detainee's casework record.

We repeat the recommendation.

3.20 Where there is no prospect of a detainee being removed, the UKBA caseworker should specifically address any continued detention as a matter of law and fact. (3.30)

Partially achieved. A number of detainees were held for lengthy periods with limited prospects for removal within reasonable timescales (see additional information). We reviewed the case of one undocumented failed asylum seeker who had been held for 17 months following a prison sentence. Shortly before the completion of his criminal sentence, the detainee completed an emergency travel document (ETD) application. His ETD application was submitted to the Iranian embassy and he attended a face-to-face interview there. Despite fortnightly reminders from UKBA, the embassy did not issue a travel document but only confirmed that it would look at the application. Given the length of detention and the lack of progress from the embassy, there was little prospect of removal within a reasonable timescale by the time of our inspection. In this case and others we looked at, the reviews addressed many of the facts but failed to refer to relevant case law on detention (the Hardial Singh principles).

We repeat the recommendation.

3.21 Monthly review letters should be timely and reflect a balanced consideration of all factors relevant to continuing detention. In particular, the review letter should state the reasons if there has been a lack of progress since the previous letter. (3.31)

Partially achieved. Monthly review letters were generally served on time. The UKBA contact management team recorded service of letters on a database that could be checked to find those that were overdue. On the second day of our inspection, according to the database, 31 letters were overdue. However, it was not kept up to date and UKBA staff estimated that half the 'overdue' reviews were already served. Monthly review letters contained a section headed 'progress since last review', although the information in it was not always updated. For example, in the Iranian case mentioned above, the only progress recorded was: 'We are continuing to make arrangements to obtain a travel document for your removal from the United Kingdom. However this is taking longer than we would like.'

We repeat the recommendation.

3.22 UKBA should adopt a national policy that bail summaries are issued by caseworkers to all detainees, whether they are legally represented or not, at least one day before the hearing. (3.32)

Not achieved. The UKBA contact management team did not know if all detainees with bail hearings had received their bail summaries. The UKBA caseworker, who was not based at the

centre, was responsible for sending the summary to the detainee. The UKBA contact management team often received the summaries and served them immediately, but they could not guarantee that all summaries were sent to Brook House.

We repeat the recommendation.

3.23 If an allegation of torture is made, health care staff should document and describe any scarring. (3.33)

Not achieved. Scarring in rule 35² reports was not adequately documented and diagrams were not included. Rule 35 reports contained standard questions for the health care team to complete – for example, 'when did the torture occur?'. Many of the reports also merely repeated the detainee's account of torture without adding value by giving a professional opinion on the consistency of any scarring with the alleged method of torture.

Further recommendation

3.24 If an allegation of torture is made, health care staff should document and describe any scarring, wherever possible providing a professional opinion on the consistency of the scarring with the alleged method of torture.

3.25 All legal correspondence addressed to a detainee arriving through the on-site immigration team should be passed directly to the detainee without being read or copied by immigration staff. (3.34)

Achieved. We did not find legal correspondence on any of the files we reviewed.

Additional information

3.26 The average length of detention was 93 days, compared with 111 days across the estate. Twenty-seven detainees had been held in the centre for over 10 months. Their true length of detention may have been higher but, as noted above, UKBA did not keep figures on their accumulated detention. The longest held detainee, a Zimbabwean, had been in immigration detention for more than four and half years. He was the third longest held in the detention estate. Seven Zimbabweans and 17 Somalis were held despite the difficulties in removal to these countries.

3.27 The on-site UKBA contact management team consisted of a manager, two deputy managers and seven contact officers. The team was on site seven days a week and responsible for liaising between detainees and their case owners. The team was supplemented by two Criminal Casework Directorate caseworkers who each visited the centre once a week. The visiting caseworkers were able to carry out interviews that the local staff were unable to do, for example, screening, asylum and travel document interviews.

3.28 Newly arrived detainees were inducted by UKBA within 48 hours of arrival. Contact officers met other detainees to serve documents (for example, deportation orders, removal directions, refusal of asylum letters). The interviews we observed were conducted reasonably. The officer was polite and patient with detainees. Professional telephone interpreting was used, but failing to address the first person when using an interpreter could have caused confusion and given the impression that the officer was talking to the interpreter rather than the detainee.

² Rule 35 of detention centre rules requires notification to UKBA if a detainee's health is likely to be injuriously affected by detention, including if they may have been the victim of torture.

- 3.29 Although the UKBA team evidently attempted to respond to all requests, detainees complained that it was difficult to see immigration staff. In our survey, only a quarter of detainees said that it was easy to see the centre's immigration staff. Detainees' frustration about their cases was evident in our in-depth interviews and one man told us: 'You can apply to see immigration staff but they never get back to you. They look like they are trying to help but they are just playing.'
- 3.30 In the previous six months, 39 rule 35 reports had been made. Nearly all were responded to within the required timescales. Those that were not were diligently chased by a member of the on-site contact management team. Replies to the reports were detailed, sometimes three or four pages long. Most cases involved torture allegations already considered by immigration judges in dismissed appeals. However, one detainee who had never claimed asylum told health care that he had been tortured. This was reported through rule 35. The case owner treated the report appropriately as an asylum claim but did not review detention. The detainee remained in detention while an asylum interview was arranged.
- 3.31 Detainees held for three months or more were reminded by UKBA that they could apply for a transfer to another centre. This was in recognition of the fact that the centre had not been designed for long stays. Detainees could not choose which centre and there was no guarantee their request would be accepted. Contact management staff reported that few detainees took up the chance to make a transfer application.

Further recommendation

- 3.32 All rule 35 reports should be responded to within the required timescales, even when the report triggers an asylum claim.

Section 4: Duty of care

Expected outcomes:

The centre exercises a duty of care to protect detainees from risk of harm. It provides safe accommodation and a safe physical environment.

Bullying

- 4.1 **Victims of bullying should have an individual plan to offer them appropriate support. (4.19)**

Achieved. Victims were always interviewed, and a support plan put in place.

- 4.2 **A safety survey should be carried out annually and the results used to inform the anti-bullying strategy. (4.20)**

Achieved. A safety survey had been carried out in a number of languages in the spring of 2011 with a 55% completion rate. The results had shown an improved situation, and had been used to inform the strategy.

- 4.3 **Relevant data on bullying and violence should be systematically collated, analysed and presented to the safer community group. Trends should be investigated. (4.21)**

Partially achieved. Full reports, with analysis by nationality, age, location and religion, were given to the monthly meetings, with tracking of figures over the previous three months. There was no 12-month retrospective analysis of trends.

Further recommendation

- 4.4 The safer community group should consider 12-month analyses of violence reduction data and investigate trends.

- 4.5 **Bullying investigations should be systematic, thorough and quality checked and include interviews with victims. (4.22)**

Achieved. The quality of investigations had improved steadily to a satisfactory standard, and always included interviews with victims.

Additional information

- 4.6 The number of anti-bullying forms opened had increased steadily, from three in March 2011 to 15 in August. Feedback from detainees suggested that this reflected better use of the system, rather than an increase in bullying. There was practical setting of improvement objectives for bullies and support plans for victims. Our survey showed that detainees' perceptions of the amount of victimisation, both by other detainees and also by staff, were better than the comparator and than at our previous inspection. In 2010, 44% of respondents said that they had been victimised by other detainees, compared with 20% now. The reduction in violence was borne out in the number of recorded assaults on detainees, which had fallen from 39 in the first eight months of 2010 to 15 in the same period of 2011. The results of our in-depth

safety interviews were also positive about the various aspects of safety. A few detainees complained of overly-aggressive staff responses to fights and some felt unsafe because of uncertainty around their immigration cases. However, more typical were views such as 'We are very safe here' and 'Safety, it's ok. I've been here five months so far and there have been no big deals'.

Suicide and self-harm

- 4.7 **The SCG meeting should monitor incidents of self-harm, analyse and respond to any emerging trends, and reflect on any lessons that can be learned from serious incidents of self-harm. (4.23)**

Achieved. The safer community group (SCG) now discussed monthly monitoring reports, analysed by location, age, nationality and religion, although not over a 12-month period (see further recommendation 4.4).

- 4.8 **Detainees should be encouraged and supported to attend the SCG meetings. (4.24)**

Achieved. Every meeting but one in the current year had been attended by at least one detainee.

- 4.9 **Objectives set in the care plans should be individualised. (4.25)**

Achieved. Objectives related to the individual detainee in each care plan we examined.

- 4.10 **All staff should carry ligature knives. (4.26)**

Partially achieved. Almost all staff did, but a newly appointed officer on night duty had not yet received a ligature knife.

- 4.11 **UKBA should investigate reports that detainees have been taken off ACDT simply to effect transfer, and ensure that this practice ceases. (4.27)**

Not achieved. Managers had escalated concerns about specific cases, but were not aware of any action to address this problem across all IRCs. The situation had improved, but there were still some cases where assessment, care in detention and teamwork (ACDT) self-harm monitoring observations had been reduced at other establishments to enable transfers.
We repeat the recommendation.

- 4.12 **A care suite for detainees at risk of self-harm should be established. (4.28)**

Not achieved. Two cells in the separation unit had been fitted with large perspex door panels for constant watch, but there was no care suite. These cells were bleak, bare, and not suitable for people in crisis. Detainees were also sometimes moved to other cells in the separation unit because of risk of self-harm. This deprived them of the social interaction that could help provide support and improve mood, simply to facilitate staff observation. This was inappropriate and accentuated the need for a care suite.
We repeat the recommendation

- 4.13 **The role of the RASP procedure should be made clear to all staff. (4.29)**

Achieved. The role of raised awareness support plans (RASPs) was now explained in initial and refresher staff training and staff were aware of their role.

4.14 A formal peer support scheme for vulnerable detainees should be introduced. (4.30)

Not achieved. There was no formal peer support scheme in operation. We were told that safer community orderlies had provided some level of support, but there was only one newly appointed orderly in post at the time of inspection. The safer community coordinator had been trained and had produced a full training and guidance pack for peer supporters, and there were plans to implement the Befrienders scheme before the end of 2011.

We repeat the recommendation.

Additional information

4.15 Detainee self-harm remained a concern, with 33 instances in 2011 to date, although the incidence had fallen to 20 in the previous six months, compared with 34 in the six months before the previous inspection. The number of ACDT forms opened in the previous six months, 103, was also a reduction on the previous period. They were up to date and the entries reflected an appropriate level of staff care. Reviews were multidisciplinary and included UKBA staff, though health care staff rarely attended. The issuing of removal directions was a common trigger for opening ACDTs. We saw one ACDT where a main concern was the detainee's inability to communicate with staff; despite this, there was no evidence that interpretation (professional or otherwise) had been used (see main recommendation HE.46).

4.16 An average of two detainees a month went through a period of refusing food. RASPs had been drawn up 84 times in 2011 so far, mainly in response to evident emotional distress, and were usually open for one to three days. Some detainees who refused food for more than a few days were inappropriately transferred to the separation unit (see paragraph 4.12).

4.17 The Samaritans now visited every month to see detainees by appointment, and members were awaiting security clearance to be available in the detainee activity area regularly. In practice, detainees who did not speak English could not access this support.

Childcare and child protection

Expected outcomes:

Children are detained only in exceptional circumstances and then only for a few days. Children are well cared for, properly protected in a safe environment and receive suitable education. All managers and staff safeguard and promote the welfare of children; as do any services provided by any other body.

4.18 A child protection and age dispute policy should be published in consultation with the local safeguarding children board. (4.37)

Achieved. A robust policy, incorporating both child protection and age dispute procedures, was signed off and published during the inspection week.

4.19 All G4S staff should receive training in safeguarding children. (4.38)

Not achieved. Only 72 staff (55%) had received safeguarding training.
We repeat the recommendation.

4.20 Visits staff should be alerted to any detainees who pose a risk to children. (4.39)

Achieved. There were 27 detainees in the centre about whom there were public protection concerns – 7% of the population. An up-to-date folder was kept at the visits hall desk detailing multi-agency public protection arrangements (MAPPA) levels one, two and three cases, and staff were aware of the detainees who posed a risk to children.

4.21 UKBA should ensure that the police and offender managers are informed when a detainee who is a risk to children is released from detention. (4.40)

Not achieved. It was the responsibility of the case owner, rather than the local UKBA team, to ensure that relevant partner agencies were informed in MAPPA cases and when detainees were released on licence. A senior officer at the Criminal Casework Directorate said care had been taken to ensure case owners were made aware of this. However, in a sample of five cases for which we had full access to UKBA's case notes, two had no record of the case owner contacting the relevant authorities – one was a release on licence case and the other was a level two/three MAPPA case.

We repeat the recommendation.

Additional information

4.22 The head of children's services held the safeguarding strategic lead for both Brook House and neighbouring Tinsley House – known collectively as 'Gatwick IRCs'. Quarterly safeguarding meetings were well attended, including by the local social services department, although the meetings focused on Tinsley House, appropriately as children were still held at the latter centre. All G4S staff were Criminal Records Bureau-checked.

4.23 There had been eight age dispute cases at the centre since January 2011, all of whom had been age-assessed by social services before their arrival or at the request of the centre. A detainee in one case was assessed as a minor and the child had been moved to the separation unit under rule 15 (see paragraph 7.39) and subsequently released into the care of Nottingham social services. A comprehensive age dispute section in the new safeguarding policy set out the requirement for a multidisciplinary meeting to undertake a risk assessment and care mapping exercise in such cases. This was a positive development.

4.24 A new and more robust one-day safeguarding training package approved by the local safeguarding children's board – 'NSPCC shared responsibility' – had been introduced and made part of the initial training for all DCOs. Existing staff were still to be brought up to date and the intention was to do so through 'toolbox talks' on immediate risk, significant risk and age disputes.

Further recommendation

4.25 Children should not be held in the separation unit.

Diversity

Expected outcomes:

There is understanding of the diverse backgrounds of detainees and of different cultural norms. Detainees are not discriminated against on the basis of their race, nationality, gender, religion, disability or sexual orientation, and there is positive promotion and understanding of diversity.

- 4.26 A policy should be developed to include all strands of diversity, including the needs of older, gay and transgendered detainees. It should be accompanied by an action plan to ensure implementation. (4.52)

Partially achieved. A good single equality policy dating to 2011 encompassed all aspects of the Equality Act 2010. However, there was no action plan setting out how it would be implemented (see further recommendation 4.39).

- 4.27 Diversity monitoring should allow trends to be analysed over time and be routinely discussed at RCAC meetings. (4.53)

Achieved. There was monitoring of nationality and trends, by nationality, in detainees' access to the regime, which was reported regularly to the diversity and equality action team (DEAT) (formerly the religious and cultural affairs committee).

- 4.28 RCAC meetings should be advertised to detainees, and include strategic discussion of diversity issues. Action points should be systematically followed up. (4.54)

Partially achieved. The DEAT met monthly, and detainees were aware of the meetings. It was attended by staff from relevant departments and diversity orderlies (although not all attended each meeting). However, the minutes suggested that not all action points were followed up. For example, the decline in the use of telephone interpreting had been raised at three consecutive meetings with no action specified to address the situation.

We repeat the recommendation.

- 4.29 Detainees with disabilities should be identified and have their needs assessed at the earliest possible stage. There should be care plans for all disabled detainees. (4.55)

Partially achieved. There were few detainees with identified disabilities. Nursing staff identified such detainees on reception and passed their details to the diversity and equality coordinator. The coordinator talked with the detainee, assessed his needs, and informed team leaders of any reasonable adjustments required. Detainees were often transferred to more suitable IRCs. Detainees who needed them had personal evacuation and emergency plans. We did not see care plans in files. (See also further recommendation 5.10.)

Further recommendation

- 4.30 There should be care plans for all detainees with disabilities.

- 4.31 Call bells in adapted rooms should be easily accessible. (4.56)

Not achieved. There had been no change since the last inspection.
We repeat the recommendation.

- 4.32 Detainees with mobility problems should be supported by staff to use the lifts. (4.57)

Achieved. At the time of the inspection there were no detainees at the centre who needed to use the lifts. Staff told us that they gave detainees with limited mobility access to them, and diversity orderlies confirmed this.

- 4.33 The library should stock some easy read materials for detainees with visual impairments. (4.58)

Achieved. There were a few easy read and large print books in the library, although they were stored among the stock and could have been difficult for such detainees to find.

Additional information

- 4.34 There was little evidence of significant tensions between different groups of detainees or of racism. However, Chinese detainees, few of whom could communicate well in English, told us that they felt poorly treated by staff, and complained about the suitability of food, and the lack of Chinese newspapers or Chinese TV programmes. Although there had been some consultative meetings to address these issues, the Chinese group felt ill-served by the meetings, which had no professional interpreters (see paragraph MR6).
- 4.35 Some cultural events were celebrated, although detainees told us that the recent Eid festival had been inadequately observed. While black history month had been celebrated, LGBT (lesbian, gay, bisexual, transgender) history month had not. Although there were 10 detainees with a disability and 16 over the age of 50 at the time of the inspection, there was no lead nurse for age and disability (see recommendation 5.10).
- 4.36 At the time of the inspection, five detainee diversity orderlies worked across the four wings. This was a very positive initiative, but there was some uncertainty about their role. Some saw themselves simply as interpreters, while others described a wider role in helping to prevent unfair discrimination. Training for diversity orderlies was limited to the diversity coordinator taking them through a list of acceptable and unacceptable terms.
- 4.37 The number of complaints about racist incidents and other unfair discrimination was low, with 11 in 2011 to date. Investigations were thorough, although it was not always clear from the record if the complaint had been upheld or not, and it seemed that most were held to be unsubstantiated. There had been no equality impact assessments.
- 4.38 There was little to address the needs of gay or transgender detainees. There was no strategy for providing them with support or for combating homophobia. We saw an insensitive letter from a staff member to a gay detainee who was worried about potential persecution on his return to his country, which missed the point that his concern was about violent homophobia to which he might be subject on deportation.

Further recommendations

- 4.39 An action plan should be drawn up, implemented and kept under review to ensure the single equality policy is effectively implemented.
- 4.40 Diversity orderlies should have a clear role and appropriate training for it.
- 4.41 Equality impact assessments should be completed.

Faith and religious activity

Expected outcomes:

All detainees are able to practise their religion fully and in safety. The faith team plays a full part in the life of the centre and contributes to detainees' overall care, support and release plans.

No recommendations were made under this heading at the previous inspection.

Additional information

- 4.42 In our survey, two-thirds of detainees said their religious beliefs were respected, compared with only 54% at the last inspection. The largest religious groups were Muslims (40%) and Christians (29%), while Sikhs, Buddhists and Hindus each constituted under 5% of the population.
- 4.43 The manager of religious affairs was a full-time Christian chaplain, supported by a wide range of other mainly Christian chaplains and faith visitors. The team's resources were shared between Brook House, Tinsley House IRC and the new family pre-departure facility at Pease Pottage. There was a generally good service to most detainees, and we were told that chaplaincy team members spoke about 20 languages between them. However, we received complaints from Muslim detainees that it was difficult to see Muslim chaplains. Three Muslim chaplains attended the centre for a total of about 20 hours a week; a fourth, contracted to provide a further 10-12 hours a week, had been absent for most of the previous six months but was due to return.
- 4.44 Detainees had good access to the chapel, mosque and multi-faith room and all were used regularly during the inspection. As at the last inspection, although the chapel and mosque were too small for main services, detainees and chaplains were content to overspill into the corridor and multi-faith room or, in the case of Christian services, relocate to the visits area. However, detainees were concerned that the centre's public address system could be intrusive in the faith rooms (see also paragraph 2.8 and housekeeping point 2.9). There were adequate religious books and other resources, such as prayer mats.
- 4.45 There were two regular main religious classes – a Bible studies group and a new and popular Islamic studies class. There was also a regular prayer workshop and chaplains had initiated some other events, such as music workshops and life coaching classes. Six cultural or religious festivals a year were observed, including black history month, Chinese New Year and Christmas. The most recent had been Eid, which the Muslim chaplain we spoke to felt had gone well, along with Ramadan itself, although it received mixed reviews from detainees themselves. Chaplains were informed of key meetings and important events, such as ACDT reviews.

Further recommendation

- 4.46 The chaplaincy team should be adequately resourced to meet the needs of Brook House detainees.

Section 5: Health services

Expected outcomes:

Health services are provided at least to the standard of the National Health Service, include the promotion of well being as well as the prevention and treatment of illness, and recognise the specific needs of detainees as displaced persons who may have experienced trauma.

General

- 5.1 A health needs assessment should be completed as soon as possible, identifying the training needs of health care staff and the mental health needs of detainees. (5.32)

Partially achieved. A health needs assessment had been completed in 2010 but needed updating and had not adequately addressed mental health needs. There was a training needs analysis to develop learning for staff.

Further recommendation

- 5.2 Services should be developed on the basis of an up-to-date health assessment, including detailed assessment of mental health needs.

- 5.3 The health care centre should be provided with a toilet for the use of detainees being examined or treated. (5.34)

Not achieved. There was no toilet for detainees being examined or treated. This had affected the implementation of services for substance users, as urine testing could not be undertaken to support clinical decision making.

We repeat the recommendation.

- 5.4 The security of the pharmacy room and administration hatch should be reviewed. (5.35)

Partially achieved. The bolts securing the hatch to the pharmacy room had been replaced since the last inspection and were more robust, but there was no screen or grille over the hatch.

We repeat the recommendation.

- 5.5 Automated emergency defibrillator batteries should be checked daily. (5.40)

Achieved. The automated emergency defibrillator was checked twice a day.

- 5.6 All doors to the health care centre should be secured with a separate health care suite key. (5.41)

Not achieved. There were no separate keys for the health care suite rooms.

We repeat the recommendation.

Clinical governance

- 5.7 The lead nurse manager should be more actively involved in the management of the health care centre and the development of all health care staff. (5.33)

Achieved. The acting nurse manager had been appointed to a substantive post in June 2011. She held full responsibility for managing the health care department.

- 5.8 Greater emphasis should be given to the recruitment of nursing staff, with priority for mental health nurses. (5.36)

Achieved. Two whole-time-equivalent mental health nurses had been appointed alongside a further two bank mental health nurses.

- 5.9 Adequate facilities should be provided for the management of detainees with disabilities who need enhanced care. (5.37)

Partially achieved. There were suitable facilities on the wings for detainees with disabilities. However, there was limited assessment to identify detainees who required enhanced care (see also paragraph 4.29). There was also no nurse lead for disabilities.

Further recommendation

- 5.10 There should be a nurse lead for detainees with disabilities, and regular assessment and monitoring of their needs in collaboration with the diversity and equality coordinator.

- 5.11 Nursing staff should be suitably qualified to deliver specialist clinics. (5.38)

Partially achieved. Nursing staff were generally qualified to provide the range of available clinics, but not for some new clinics (e.g. asthma). Nurses had been identified for further training to enhance their skills for such clinics.

- 5.12 Clinical supervision should be provided for all professional health care staff. (5.39)

Achieved. Clinical supervision was available for all nursing staff and used reasonably well.

- 5.13 Detainees should have access to a dedicated health care forum. (5.43)

Partially achieved. Attempts to run a health care forum had been unsuccessful as no detainees had attended. There was feedback through the detainee consultative form. There had also been a health care evaluation, although the response rate was poor.

Further recommendation

- 5.14 There should be effective mechanisms to obtain detainee perspectives on health care.

Primary care

- 5.15 All health care staff should be trained in the recognition and treatment of victims of torture. (5.44)

Partially achieved. Half a day of training was delivered by a Saxonbrook senior general practitioner, involving discussion of scenarios and completion of documentation for UKBA. Preparation was under way to support a national e-learning training programme. Health care staff had generated approximately 34 rule 35 reports during a six-month period, but many did not include sufficient information to provide the intended safeguards. (See paragraph 3.23 and further recommendation 3.24).

- 5.16 Health care staff should be informed at the earliest opportunity of a detainee's pending release, transfer or removal. (5.45)

Partially achieved. The situation had improved, although health care staff did not always receive sufficient warning to prepare for a detainee's release, removal or transfer.

We repeat the recommendation.

- 5.17 Detainees should be given a supply of anti-malarial drugs when removed to a country with a known risk of malaria. (5.46)

Not achieved. Only immuno-compromised detainees were provided with anti-malarial medication.

We repeat the recommendation.

Additional information

- 5.18 Detainees reported an improved level of health service and reasonably good access to health services staff. In our survey, 41% of respondents who had used health care said the overall quality was good, a rise from the 23% at the last inspection. Most detainees spoke English, but professional interpreting was underused for those who did not. Other detainees were regularly used to interpret during what should have been confidential consultations, which could have led to inaccurate interpretation and compromised the quality of care (see main recommendation HE.46). Overall, clinical governance was good.
- 5.19 We observed two emergency calls where nurses responded promptly – one on the segregation unit where a detainee had self-harmed with a razor. The detainee received good treatment and officers were able to explain the process for reporting.
- 5.20 All officers were up to date with their first aid training, but the available equipment was inadequate and not checked regularly – with no first aid equipment at all on the segregation unit and A wing. Nursing staff attended one emergency with a large bag of dressings but had to return to the department to get the specific dressing required. Resuscitation equipment bags were too heavy at 14kgs. They contained equipment for staff who were advanced life support trained but clinical staff were only trained in basic life support.

Further recommendation

- 5.21 There should be suitable, regularly checked emergency equipment on all wings. The resuscitation equipment should be matched with staff skills and training.

Pharmacy

- 5.22 The pharmacist should be supported to take a more active role within the centre, especially with regard to prescribing review and analysis. (5.42)**

Partially achieved. Although there was no service level agreement with the pharmacy specifying the number of pharmacist hours to be provided, the pharmacist visited the centre once a month to assist with medicines management. There were no pharmacist-led clinics and detainees did not have the opportunity to consult a pharmacist, although the pharmacist could answer staff queries by telephone. The pharmacist attended the medicines and therapeutics committee when prescribing issues were discussed and undertook prescribing review and analysis.

- 5.23 Regular out-of-date checks should be carried out on all medicines and records kept. (5.47)**

Achieved. A record of medicines due to expire within the next three months was kept and the medicines were clearly marked. Staff said that date checking was undertaken each month although documentation supporting this could not be located.

- 5.24 The use of patient named medication should be encouraged where practicable. (5.48)**

Partially achieved. Named patient medication could be ordered from the pharmacy but only for medication to be held in possession. A labelling facility at the centre enabled the doctor to dispense and supply named patient medication, such as antibiotics, at the time of prescribing. There were no nurse prescribers, although the pharmacist was qualifying in becoming a non-medical prescriber. There were no patient group directions to allow nurses to prescribe, which reduced the administering of individualised medication. All supervised medication was dispensed from stock. This meant that the stock included a wide range of items, some of which were no longer used.

Further recommendation

- 5.25** The medicines and therapeutics committee should review the use of general stock and the introduction of patient group directions to allow nursing staff to supply more potent medication in the absence of the doctor.

- 5.26 There should be standard procedures to cover the current arrangements for pharmacy service provision and delivery of medication to detainees. These should be formally agreed through the medicines and therapeutics committee. (5.49)**

Partially achieved. Although there was an overarching medicines management policy dated March 2009, the standard operating procedures agreed by the medicines and therapeutics committee in July 2011 were not readily available for staff to read.

Housekeeping point

- 5.27** The standard operating procedures for the pharmacy service should be readily available to all health care staff.

- 5.28 A medicines and therapeutics committee should meet at least four times a year. Meetings should have clear terms of reference and all relevant stakeholders should attend. (5.50)

Achieved. A medicines and therapeutics committee met quarterly and was attended regularly by the relevant stakeholders, including nursing staff, the doctor, the pharmacist and, more recently, a representative from the primary care trust (PCT). The minutes of meetings were recorded and available.

- 5.29 The system of relying on faxed prescriptions should be subject to audit. (5.51)

Achieved. The pharmacist checked the prescription and administration charts during his monthly visits to the pharmacy.

Mental health

- 5.30 Detainees should have access to counselling services. (5.52)

Not achieved. Detainees had no access to professional counselling services. Not all were aware that they could access support from the Samaritans, and it could take two weeks for an appointment.

We repeat the recommendation.

- 5.31 Mental health awareness training should be provided for all custody staff. (5.53).

Not achieved. Only 10% of custody staff had received mental health awareness training and there was a general lack of awareness about the mental health support needs of detainees (see paragraph MR7).

We repeat the recommendation.

Substance use

Additional information

- 5.32 There was little evidence of substance use problems among detainees, but there was an organised approach to supply reduction and a drugs strategy was being developed (see paragraph 7.9). There was no opiate substitution or detoxification facility at Brook House, and detainees with significant opiate or alcohol dependencies were not normally sent there. On the rare occasions that a detainee with the need for such treatment arrived, he was transferred to the Heathrow IRCs (Colnbrook or Harmondsworth). There were no structured psychosocial interventions for drug or alcohol users at Brook House.
- 5.33 Although the centre was not equipped to handle detainees with complex drug treatment needs, health care staff were willing to engage with detainees with lower level drug and alcohol issues. For example, they could provide symptomatic relief for opiate users and vitamin treatments for alcoholics close to the completion of a detoxification regime.
- 5.34 During a comprehensive health screening in reception, all new arrivals were asked about previous drug and alcohol use and any perceived problems. Where necessary, there were more comprehensive substance misuse related assessments with the GP the following morning.

5.35 One-to-one smoking cessation advice was available and nicotine replacement treatment in the form of patches and lozenges. Leaflets with information about blood-borne viruses and other problems related to substance use were available throughout the centre in a wide range of languages.

Section 6: Activities

Expected outcomes:

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

Work and learning and skills

- 6.1 The centre should offer structured training in using the internet and emailing to detainees unfamiliar with computers and ensure sufficient printing capacity to meet detainees' reasonable needs. (6.28)

Partially achieved. Although there were plans to provide IT self-study software on two computers in an education classroom, there was no structured training for detainees in using the internet and emailing. The printer in one of the two internet suites provided sufficient capacity for detainees.

Further recommendation

- 6.2 The centre should offer structured training in using the internet and emailing to detainees unfamiliar with computers.

- 6.3 The centre should reduce the length of time detainees are confined to their rooms each day, institute later lock up and increase the time detainees are allowed in communal areas. (6.29)

Not achieved. There had been no reduction in the time detainees were confined to their rooms, which was around 11 hours a day – longer than at most other IRCs. Detainees continued to be unlocked for up to 13 hours a day, of which nine and three quarter hours were available to visit communal areas. The lock-up time each evening was still 9pm, which was earlier than in most other IRCs.

We repeat the recommendation.

- 6.4 The centre should increase the volume of paid work available to detainees, accompanied by appropriate training for all work roles leading to internal or external accreditation. (6.30)

Partially achieved. Paid work available had increased only slightly to about 60 places, catering for just over 15% of the detainee population, compared with 12.5% at the last inspection. Waiting lists were short, although some detainees had to wait more than a month to obtain work. All detainees were given basic instruction to enable them to carry out their work roles but not all received accredited training. Those working in the servery received internally certificated training and an assessment of competence. Detainees who worked in the kitchen followed an externally accredited food and hygiene training programme.

We repeat the recommendation.

- 6.5 Detainees' cooperation or failure to cooperate with UKBA should not affect the process of allocating paid work roles. (6.31)

Not achieved. Recruitment procedures continued to allow UKBA to veto individual

applications for work for reasons of non-cooperation.
We repeat the recommendation.

- 6.6 Appropriate arrangements should be made to ensure that detainees understand information about work roles, including any agreements they have to sign before starting work. (6.32)**

Partially achieved. Information about paid work was now included in detainees' induction. Jobs were advertised on a notice board in the communal area next to the library, although the notice board was untidy and information about work roles had not been translated into other languages. Work roles were not promoted on notice boards in residential wings. The application process and forms were clear and were understood by detainees.

Further recommendation

- 6.7 Information about work roles should be available in a range of languages and promoted throughout the centre.**

- 6.8 Detainees should have the opportunity to follow short units of study leading to internal or external accreditation. (6.33)**

Not achieved. Although detainees could follow short units of study, these did not lead to internal or external accreditation.
We repeat the recommendation.

- 6.9 Cover for planned or unplanned education staff absence should be routine and appropriate. (6.34)**

Not achieved. There were no routine arrangements to provide cover for planned or unplanned staff absence.
We repeat the recommendation.

- 6.10 ESOL provision should prioritise the systematic development of detainees' speaking skills. (6.35)**

Achieved. There was a greater focus on the development of detainees' speaking skills in English for speakers of other languages (ESOL) classes. The use of worksheets had decreased in favour of individual and group speaking practice.

- 6.11 The range of arts and crafts activities and resources should significantly increase. (6.36)**

Not achieved. No arts and crafts classes had been available since the resignation of the tutor in March 2011. The post had been replaced with the appointment of two part-time tutors, but they were awaiting security clearance and had not yet started work.
We repeat the recommendation.

- 6.12 Effective monitoring of detainees' participation in activity, including education, visits to the library and PE, should form the basis for identifying patterns of participation by individuals or groups. (6.37)**

Partially achieved. There was a basic system to collect information about the number of visits

to education classes and the library and the nationality of detainees who used these services, but neither the length of stay in classes nor the subjects followed were recorded. The collected data were reviewed by managers but not used in self-assessment, planning or management or to determine individual patterns of participation. Detainees had free access to the fitness rooms and systematic records of participation were not kept.

We repeat the recommendation.

6.13 Thorough and systematic quality assurance, including regular self assessment, should apply to education and other activities. (6.38)

Not achieved. There were no quality assurance arrangements for education and other activities, and no process for self-assessment.

We repeat the recommendation.

6.14 Education staff should receive suitable professional support and development. (6.39)

Not achieved. There had been some observation of teaching and learning sessions by a manager from G4S, along with occasional peer observations, but these were not regular or systematic and not used sufficiently well to develop staff. The education coordinator attended quarterly meetings of IRC education managers to share and develop practice.

We repeat the recommendation.

Additional information

- 6.15** The centre did not offer sufficient activities to meet the needs of the current detainee population, particularly those remaining there for longer periods. In our survey, only a third of respondents said there was enough to fill their time, an improvement on the 19% response at the last inspection but lower than the comparator of 41%.
- 6.16** While detainees were unlocked and on their residential wings, they had free access to their wing recreational area and outside courtyard. The outside area of the enhanced D wing had been turned into a garden, which was popular with detainees. Controlled access to outside areas on other residential wings was permitted during sports competitions.
- 6.17** A satisfactory range of recreational activities was available for detainees on residential wings, as well as TV and DVD players that regularly screened films. Electronic games consoles and a wider range of channels were provided on the enhanced wing. There were regular and popular competitions, including bingo, pool and dominoes, organised by the activities team.
- 6.18** Detainees had good access to computers for the internet and emailing. Two rooms in the activities area were equipped with 25 computers, available to detainees every morning, afternoon and evening. This facility was popular and well used by detainees.
- 6.19** For detainees in work, hours worked varied between jobs, with an average of around 20 a week. Most of the jobs, such as kitchen, servery and cleaning work, were part time and lacked challenge, but the centre had recently reviewed job specifications to make some work more interesting. As well as training in the servery and kitchen (see paragraph 6.4), there had been some basic training in floor polishing for wing cleaners.
- 6.20** In our survey, only 6% of respondents said they took part in education, against the IRC comparator of 29% and 11% at the last Brook House inspection. A single tutor ran 10 educational sessions a week over five weekdays and two evenings, for a total of 30 hours a week. This was insufficient to meet the needs of detainees, particularly those detained for

longer periods – at the time of the inspection, 21% of detainees had been in the centre for more than four months. Many detainees had little awareness of the education provision, despite good promotion throughout the centre, and most classes were not filled to capacity.

- 6.21 Most education sessions were arranged as 'drop in' classes that detainees could attend as they wished. The tutor managed this well, and many of those who attended classes did so regularly. The tutor met the needs of these detainees through short individually tailored programmes of study, but these were not externally accredited. The cultural kitchen operated each afternoon, offering up to three detainees the opportunity to develop their cooking skills. A chaplain provided two evening music sessions.
- 6.22 The education coordinator carried out regular surveys to identify detainees' interests and preferences, and detainees received good individual coaching and support in classes. They were given a basic initial assessment and set individually tailored work to suit their level of ability. Speaking skills were prioritised wherever possible. The tutor managed this well but with several different subjects in a class at time, some detainees were engaged on individual writing tasks. Detainees worked purposefully and with interest. Classes took place in a bright and appropriately furnished room with a satisfactory range of equipment and good wall displays to reinforce learning. The second classroom, usually used for arts and crafts, was locked and unused at the time of the inspection. Each classroom had a capacity of about 15.

Library

- 6.23 **The library should stock and loan newspapers, periodicals, dictionaries, audio and video material which reflects the languages, cultures and interests of detainees. (6.40)**

Not achieved. The foreign language newspapers and periodicals stocked in the library reflected only a small proportion of the languages, cultures and interests of detainees, and were not routinely reviewed against current population statistics. There were only seven foreign language and two English dictionaries, which were kept at the library reception desk and not available on the open shelves. No audio and video material was stocked, although some was used in education classes.

We repeat the recommendation.

- 6.24 **Management of the library should ensure that monitoring of stock levels and borrowing is routine. Staff responsible for the management and operation of the library should be appropriately trained. (6.41)**

Not achieved. Library staff used a rudimentary system for recording loans but there was no routine monitoring of book returns, stock levels or losses. The information collected was not used to identify trends and plan and manage the library. New library staff shadowed an existing member of staff but did not receive any specialist training or external accreditation. This resulted in inconsistent practice in some aspects of library management and operation.

We repeat the recommendation.

Additional information

- 6.25 Detainees had good access to the library and it was a popular facility. It was open each day during the mornings, afternoons and evenings while other activities were offered. In our survey, 83% of respondents' said that it was easy to go to the library, an improvement on the last inspection and higher than the comparator. The library stocked books in 30 languages including English, a satisfactory range of English language newspapers, and a small range of

large print books and easy readers. The stock of other materials was poor. There had been good efforts by the activities staff and the library orderly to label and tidy stock. The books and country of origin information were well organised and clearly labelled, and a few displays brightened the décor.

- 6.26 Detainees made good use of the library's two fax machines, three computers and printer. They could also borrow board games, which they played in the communal area outside the library. A trolley with a small stock of books went to the separation unit, and there was a larger selection of books in the induction wing, although these were untidy and not well displayed.

Physical education

- 6.27 Detainees should routinely receive an appropriate induction before engaging in sporting and PE activity, with confirmation of their fitness to participate. (6.42)

Not achieved. Many detainees who routinely used the PE equipment in the fitness rooms had not received an induction, and the majority of those who had, had not had their identity card stamped to indicate this.

We repeat the recommendation.

- 6.28 Appropriately trained staff should supervise all sporting and PE activity. (6.43)

Not achieved. The majority of the activities staff who supervised sporting and PE activities had not been appropriately trained. There were plans to offer training in a Community Sport Leader Award (CSLA) but this did not provide appropriate training for gymnasium instruction and supervision. The one member of activities staff on duty could not adequately supervise the three fitness rooms in different areas, which meant that many detainees used the fitness rooms with no staff supervision

We repeat the recommendation.

- 6.29 The centre should ensure systematic recording of all accidents and injuries sustained during PE and sporting activity, and monitor records to identify any necessary changes to practice. (6.44)

Not achieved. There was no systematic recording of incidents and accidents sustained during PE and sporting activity, unless a medical assessment was required, and the centre did not, therefore, have the information to identify trends and change practice if needed.

We repeat the recommendation.

Additional information

- 6.30 There were three well-equipped cardiovascular fitness rooms. Most machinery was in good working order and well maintained, except for two machines in one room awaiting repair. There was also a small fitness area on the induction wing. Three of the residential wings had small outside courtyards that were frequently used by detainees for general exercise and a range of sports, including football, basketball, volleyball and cricket. There was no separate sports hall or indoor area for team sports.

- 6.31 Detainees had free access to the fitness rooms when they were unlocked and made good use of them. The rooms had sufficient capacity to meet needs. In our survey, 85% of respondents said that it was easy to access the gym, which was significantly better than at the last

inspection and the comparator. Sport and physical activity were well promoted throughout the centre using easy to understand and helpful pictorial information.

Section 7: Rules and management of the centre

Expected outcomes:

Detainees feel secure in a predictable and ordered environment.

Rules of the centre

- 7.1 **Rules of the centre, including those of the RFA [removal from association], should be available to detainees in a range of languages on all residential units. (7.38)**

Not achieved. Some new arrivals were given a detention centre compact and a basic information booklet. Both were poorly photocopied and difficult to read. The detention centre compact did not use plain English and might have been difficult to understand for those without English as their first language. Neither booklet was available in other languages, and there were no copies on the residential units. When we asked staff in the unit offices for copies they referred us to reception.

We repeat the recommendation.

- 7.2 **Senior management should evaluate the practice of restricting detainee movements to ensure that the reasons are valid. (7.39)**

Achieved. Senior managers had reviewed the restrictions and on the basis of improved levels of safety and control on the wings, concluded appropriately that the benefits outweighed other considerations.

- 7.3 **Managers should support staff to ensure they address non-compliance with rules directly with the detainee(s) concerned. (7.40)**

Achieved. Staff engaged far more effectively with detainees than at the previous inspection, and had more visible and effective management support (see staff-detainee relationships section).

Additional information

- 7.4 There was more detainee compliance with rules and more effective enforcement than at our last inspection. For example, there was less smoking in public areas and loud music playing. Staff enforced rules by verbally challenging detainees and recording these warnings on their detention records. Detainees who persistently broke the rules were dealt with through the rewards scheme (see section on the rewards scheme).

Security

- 7.5 **Staff should be encouraged and supported by managers to interact with detainees to enhance the dynamic security of the centre. (7.41)**

Partially achieved. There was more staff engagement with detainees, and we observed that many staff (especially those on night duty) interacted well with them. The level of security information submitted, however, had decreased since the last inspection. There had been

1,012 security information reports submitted in 2011 to date, 19% fewer than in the same period of 2010.

Further recommendation

7.6 Managers should ensure that staff continue to submit security information, even if the level of risk is perceived to have lowered.

7.7 **Actions in response to security information should be taken quickly and appropriately. (7.42)**

Achieved. Actions were followed up and tracked by the security team.

Additional information

7.8 The security team had been strengthened, with team leaders now involved almost daily. There were reasonably limited but sustained attempts to bring illegal drugs into the centre, with 18 finds in the previous six months and 29 in the year to date. Security meetings were well attended, with police and UKBA usually represented.

7.9 The centre had responded well to the gradually increasing number of drug finds and issues of drug use among detainees. Although the number of incidents was still relatively low, the introduction of a draft drugs strategy, the use of UKBA drug dogs and good joint working with Gatwick police showed a robust approach to drug supply reduction. In the six months to August 2011, seven drugs finds – mostly cannabis – had resulted in six detainees receiving police cautions. There were indications from nurses and detainees of some opiate-based medication diversion, although there was little evidence of this being a major problem.

Rewards scheme

7.10 **The rewards scheme policy should be updated, published and implemented by staff. (7.43)**

Achieved. The rewards scheme policy had been updated and published in March 2011. Detainees were sent a letter and notices displayed when it was re-launched. The basic information booklet issued on reception (see paragraph 7.1) did not explain the rewards scheme.

7.11 **Managers should encourage staff to record recognition of constructive behaviour by detainees, which should be reflected in the incentives scheme. (7.44)**

Not achieved. We reviewed records of 18 detainees, none of which recorded positive or constructive comments.

We repeat the recommendation.

Additional information

7.12 The rewards scheme provided for an enhanced wing and three levels of rewards, similar to the Prison Service's incentives and earned privileges scheme, both of which were inappropriate for a detainee population. During our inspection, 63% of detainees were on the standard level and

37% on enhanced; none were on basic. We were told that approximately 10 detainees had been on the basic level since the scheme's re-launch and this normally meant location on the induction wing. New arrivals were placed on the standard level and could apply for enhanced status after a month at the centre.

- 7.13 The rewards scheme confused the running of the removal centre with the maintenance of immigration control. Progression to the enhanced level was contingent on clearance from the security department and compliance with UKBA. Detainees who contested their immigration cases and were not ready to apply for an emergency travel document were excluded from progression. If a detainee on the enhanced level was subsequently deemed as non-compliant by UKBA, he lost his enhanced status.
- 7.14 Benefits available to detainees on the enhanced level included access to paid work, the opportunity to reside on the enhanced wing, and additional access to the garden. Detainees on the enhanced wing also had more TV channels, a large communal TV screen, communal sofas and rugs in their rooms. In our groups, detainees told us that they did not understand how the scheme worked and felt that access to the enhanced wing was unfair. As the enhanced wing was often full, only a limited number of detainees could go there and there was a waiting list to get on to the wing. The use of an enhanced wing was fundamentally at odds with the principle of a non-punitive rewards scheme that gives all detainees access to facilities.
- 7.15 The regime for detainees on the basic level was unacceptable. They had their mobile phones and televisions removed, were locked up for most of the day, and not allowed to leave their residential unit to attend activities. Their regime was similar to the cellular confinement punishment in prisons. The separation unit was also used, potentially illegally, as a punishment under the rewards scheme (see 7.27).
- 7.16 A detainee placed on basic was reviewed after seven days. Reviews were held properly, but detainees were not allowed to bring a friend with them. Detainees had the opportunity to appeal against written warnings and decisions made at a review. The appeal process was generally fair, with four of the 11 decisions we looked at being overturned. A senior manager examined 5% of all reward review decisions and sometimes gave critical feedback to team leaders.

Further recommendation

- 7.17 The rewards scheme should not involve an enhanced wing or a prison-style three-tier incentives and earned privileges scheme involving punishments.

Housekeeping point

- 7.18 Detainees should be allowed to bring a friend with them to rewards review hearings.

The use of force

- 7.19 Any detainee subject to anything other than very minimal contact amounting to use of force should receive a recorded assessment from a health care professional. (7.46)

Partially achieved. In all cases where control and restraint techniques had been used, there was an entry in the records by a health care professional, but this was often too brief to convey

any information about the detainee's medical condition.
We repeat the recommendation.

- 7.20 **All planned uses of force should be filmed, and the film retained for a reasonable fixed period. (7.47)**

Partially achieved. Almost all planned interventions were now filmed, and the discs retained. However, on two recent occasions when intervention had to be arranged quickly, they had not been filmed as the camera was locked away and could only be accessed by the orderly officer, who was managing the operational situation.
We repeat the recommendation.

- 7.21 **A senior manager should review and give a written assessment of all incidences of the use of force, taking appropriate action in the case of unsatisfactory practice. (7.48)**

Achieved. The head of security and head of operations reviewed all incidents and recorded their observations about learning points, taking action as necessary. The security committee reviewed use of force at its monthly meeting.

- 7.22 **Senior managers should regularly review the use of force, making use of analysis by categories such as ethnicity, nationality, age and location. (7.49)**

Achieved. Regular analyses had taken place, without revealing significant correlations over time.

- 7.23 **Handcuffs should be used only when justified by an individualised risk assessment. (7.50)**

Not achieved. Risk assessments were in place, but managers remained risk averse in requiring the use of handcuffs in less secure areas for all detainees except those not physically capable of an escape attempt.
We repeat the recommendation.

Additional information

- 7.24 There had been 64 uses of force in the previous six months, which was lower than the rate recorded at the last inspection (78 times in six months). Almost half the incidents had been in the separation unit. Assaults on staff had decreased in line with the overall reduction in violence. This appeared linked to better staff engagement with detainees and the bedding-in of the wing entry system, which allowed detainees access to their own wings only on production of their identity cards.

Discipline

- 7.25 **Exclusion from access to paid work should not be used as a punishment linked to separation. (7.45)**

Not achieved. At our last inspection detainees were denied work for four weeks following time spent in the segregation unit. This period had been extended to two months.
We repeat the recommendation.

Additional information

- 7.26 Separation was used as a punishment under the rewards scheme. In one rewards review, the panel concluded: 'Due to your behaviour over the last few days I have decided that you are to be placed in RFA [removal from association] on basic regime.' Not only was this against the centre's own policy, it was possibly unlawful as detainees could only be removed from association 'in the interest of security or safety' under rule 40 of the detention centre rules (see paragraph 7.39).
- 7.27 Some detainees were also punished twice following a single incident, first by being removed from association and then by being downgraded under the rewards scheme. One rewards review noted: 'you were involved in an altercation with another detainee on C wing courtyard and you were placed in RFA (rule 40). This behaviour is unacceptable for someone on the enhanced regime. Therefore the decision of this board is that you will be placed on to standard regime...'. Another review noted: 'you were in RFA on R40 for non-compliance with UKBA ... Due to the above explained reason you are now on standard regime.' (See further recommendation 7.17.)

Single separation

- 7.28 **If local managers judge that a detainee cannot safely be housed in Brook House for the foreseeable future other than in separation, UKBA should ensure that he is moved out into more suitable conditions as soon as possible. (7.51)**

Achieved. There was no evidence of detainees with mental health problems spending long periods in the separation unit because they could not be transferred to more appropriate institutions, as at the last inspection.

- 7.29 **Detainees should not be accommodated under Rule 40 conditions solely because a single or ground-floor room is required or solely because of medical requirements. (7.52)**

Partially achieved. Those requiring a single or ground-floor room were normally placed on other wings. However, detainees continued to be located in the separation unit occasionally for medical reasons, such as an isolation measure to prevent infection or to enable regular observations.

We repeat the recommendation.

- 7.30 **Separation should be authorised by a senior manager, or ratified by a senior manager as soon as possible when an immediate operational decision has been required. (7.53)**

Not achieved. Authorisation by a senior manager was recorded in all cases of rule 40, but not when detainees were separated supposedly under rule 15 (see paragraph 7.39).

We repeat the recommendation.

- 7.31 **All those located in the separation unit should first be certified as fit for separation by a health care professional. (7.54)**

Not achieved. There was no formal advance certification of fitness for separation. Detainees located in the separation unit were normally first seen by a health care professional on their

regular daily rounds.

We repeat the recommendation.

- 7.32 **Any period of separation exceeding 24 hours should be authorised in writing by a UKBA manager before expiry of that period. (7.55)**

Not achieved. Authorisation was in place in all cases of rules 40 and 42, but not for those held under rule 15, which sometimes went over 24 hours.

We repeat the recommendation.

- 7.33 **The reasons for separation should be given to every separated detainee within two hours. (7.56)**

Not achieved. For those separated under rule 40, the reasons were given on a written form, available in several languages, with options to tick one of a list of common reasons. Those on rule 15 were not given the reasons formally.

We repeat the recommendation.

- 7.34 **The full published regime should be provided and recorded for all those held in separation, with reasons indicated for any elements not delivered. (7.57)**

Achieved. The regime was displayed and issued to each detainee, and daily records kept for each separated detainee of the regime elements provided. Translation of the regime document was in progress.

- 7.35 **Temporary confinement should only be used for detainees who are violent or refractory, for as short a period as possible, and only for as long as such behaviour continues. (7.58)**

Partially achieved. The temporary confinement cells, with a plinth bed, were certified and used for all purposes including 'normal location', despite being unsuitable for such use. When completely unfurnished they were used sparingly and for short periods while detainees were violent or refractory. There was no clear trend in the use of temporary confinement, which had averaged 4.3 uses a month over the previous 12 months.

We repeat the recommendation.

- 7.36 **Regular meetings involving senior managers should review the use of separation, making use of analysis by key categories such as ethnicity, nationality, age and location. (7.59)**

Not achieved. Although there had been analysis of the use of rule 40, separation under rule 15 was not monitored in this way.

We repeat the recommendation.

Additional information

- 7.37 A very large number of detainees went to the separation unit, with more than 1,700 admissions recorded by the Independent Monitoring Board between March 2010 and March 2011. While the recorded use of removal from association under rule 42 had reduced dramatically since April 2011, this was due entirely to the rebranding of separation in preparation for flights, and for the detainee's own protection, as 'rule 15' separation. This was illegitimate, since rule 15 applies to the certification of cells for various purposes, rather than the authorisation of removal of detainees from association on normal residential units, for which provision is made

under rules 40 (removal from association) and 42 (temporary confinement). Separation justified by rule 15 was not subject to the governance required for legitimate separation (see main recommendation HE.45).

- 7.38 All the cells in the separation unit were the same, with basic fixed furniture. None had chairs; we were told that they were available on request, but that no detainee had ever requested one. We were told that UKBA had 'triple-certified' the cells as suitable for normal accommodation, rule 40 and rule 42. One cell had been further stripped out, with no flooring and a plinth bed only. A separate area was designated rule 42 but had the same fittings (apart from the unfurnished cell).
- 7.39 UKBA managers said that there had been cases of detainees voluntarily cooperating with removal who had been located in the separation unit under 'rule 15' before removal. Under this 'rule' detainees could have a TV and their mobile phone, and smoking requisites in their cells. These privileges were normally not available to rule 40 detainees – during the inspection they were taken away from a detainee because his status had changed to rule 40, even though there were no risks involved.
- 7.40 Visits by the chaplaincy to detainees held in separation were sporadic. On most days, but not all, a member of the chaplaincy team visited the unit, but they were generally not recorded as speaking to individuals and they made almost no entries in individual daily records.

Further recommendations

- 7.41 All cells in the separation unit should contain normal cell furniture, including a chair, except when used for temporary confinement under rule 42.
- 7.42 Detainees separated under rule 40 should have a television, their mobile phone and smoking requisites if desired, unless any of these are ruled out by an individual risk assessment.
- 7.43 A chaplain should normally speak face to face with each detainee held in separation every day.

Complaints

- 7.44 **Complaints should be monitored and reported in such a way that local managers, including UKBA managers, can track response performance and analyse any emerging trends. (7.60)**

Not achieved. Complaints monitoring was poor. The data compiled in the monthly G4S complaints report covered both Brook House and the neighbouring Tinsley House. Complaints were grouped in vague and meaningless categories – for example, many complaints were recorded as 'availability'. Complaints in this category were disparate and we could discern no common theme. Complaints were monitored over time by category and service delivery area only. In the previous three months, the most common complaints were around 'poor communication' (23%) and 'availability' (18%). There was little discussion of complaint themes and trends at G4S senior management meetings, and no discussion of them at the contract monitoring meetings between UKBA and G4S.

We repeat the recommendation.

- 7.45 **A senior manager should quality check a percentage of complaints to ensure that responses are appropriate and respectful. (7.61)**

Achieved. The investigator's line manager audited 10% of G4S complaints. Copies of all complaints and replies were routinely forwarded to the IMB, unless the detainee specifically requested that it not be.

- 7.46 **Information on how to make a complaint should be readily available in a range of languages on residential units. (7.62)**

Achieved. Information on how to make a complaint was readily available, and there were complaints forms in all the published languages on the residential units. In our survey, three-quarters of respondents said it was easy to obtain a complaint form, which was more than the comparator of 49% and the response of 39% at our last inspection.

- 7.47 **Wing staff should make every effort to resolve detainees' concerns, making use of first-line managers where appropriate, before advising the use of complaint forms. (7.63)**

Partially achieved. In our survey, 57% of respondents said there was a member of staff they could turn to if they had a problem, compared with 39% at our last inspection, and in our safety interviews, most detainees felt that staff were helpful. We observed mixed staff responses to detainees' problems. In one instance, the welfare officer assisted a detainee who urgently needed to send money to a relative by setting up a telephone banking account (see also the section on staff-detainee relationships). But in another case, a newly arrived detainee who spoke little English and was confused about how he could obtain his prescribed medicine was simply told loudly shouted at by an officer who said: 'I've told you already. Go and get it yourself.'

We repeat the recommendation.

- 7.48 **Complaint forms should be made freely available in the RFA unit. (7.64)**

Achieved. Complaint forms in 15 languages were available in the separation unit.

- 7.49 **Complaints should be answered within seven days of the detainee making the complaint. (7.65)**

Not achieved. UKBA's target was to respond to complaints within 10 working days. Of the 79 complaints to G4S that we examined, 28 were replied to within seven days. The average response took 11 days.

We repeat the recommendation.

- 7.50 **Information on how to contact the IMB and IMB application forms should be available on all residential units, including the RFA unit, in a range of languages. (7.66)**

Partially achieved. Information on how to contact the IMB and application forms were available on all residential units and the RFA unit, but in English only. IMB information booklets in a variety of languages and application forms were available in the welfare office and library.
We repeat the recommendation.

- 7.51 **Members of the IMB should have free access to all parts of the centre at all times. (7.67)**

Achieved. IMB members confirmed they had free access to all parts of the centre.

Additional information

- 7.52 Complaints outcomes were incorrectly recorded. Only one of the complaints received by G4S in the previous three months was recorded as partially substantiated, and the rest were dismissed. Some outcomes were recorded as unsubstantiated when they were clearly substantiated. For example, a detainee complained that £12 had been illegally withdrawn from his account. G4S agreed to reimburse the £12 but recorded the outcome as unsubstantiated. Replies were polite but did not always resolve the underlying issue. The UKBA contact management team had received seven complaints in 2011. These were well investigated and responses were generally timely and polite.
- 7.53 Notices about the Prisons and Probation Ombudsman (PPO) were displayed in the library. PPO application forms were available in the welfare office but not on the wings. A notice from the PPO asking for information in relation to the death of a Brook House detainee in 2010 during a scheduled removal was displayed in the library.
- 7.54 Replies to complaints did not always use plain English, even though English was not the first language for many detainees. For example, one response from health care stated: 'I note that you presented to see the nurse who followed our algorithm...'
- 7.55 Non-English speakers had less understanding of the complaints system. In our survey, fewer non-English than English speakers (57% against 79%) said that it was easy to get a complaint form. Despite the availability of complaint forms in different languages, all complaints were submitted in English.

Housekeeping points

- 7.56 Complaints outcomes should be accurately recorded.
- 7.57 Prisons and Probation Ombudsman application forms should be available on the residential wings.
- 7.58 Replies to complaints should be written in plain English.

Section 8: Services

Expected outcomes:

Services available to detainees allow them to live in a decent environment in which their everyday needs are met freely and without discrimination.

Catering

- 8.1 Detainees should be encouraged to assist in the preparation of menus and cooking of dishes, particularly on the themed days. (8.16)**

Partially achieved. Staff informed us that they had tried to involve detainees in the preparation of menus but had met with limited success. Detainees could use the `cultural kitchen` to prepare their own dishes but there was little evidence of cooking informing the main menus.

We repeat the recommendation.

- 8.2 A pictorial menu should be displayed in residential areas. (8.17)**

Not achieved. There were some pictorial images on the daily menus but none on residential wings. Many detainees, especially recent arrivals, told us that they did not always understand the pictorial images.

Further recommendation

- 8.3 The menu should be displayed in residential areas, and managers should ensure that it is comprehensible to detainees.**

- 8.4 Detainees should be provided with an additional snack and hot drink between the evening meal and breakfast. (8.18)**

Not achieved. No additional snacks and hot drink were provided. However, the gap between the last meal of the day and breakfast was not excessive, and detainees could obtain snacks and drinks through daily issue or the shop.

- 8.5 There should be separate, clearly identifiable tools for serving halal and vegetarian food. (8.19)**

Not achieved. Staff regarded all utensils, except two used for pork products, as suitable for halal and vegetarian food provided that each utensil was used for the same dish throughout the same period.

We repeat the recommendation.

- 8.6 All detainees should be able to eat communally. (8.20)**

Not achieved. There were insufficient tables and chairs in communal areas to allow detainees to eat together.

We repeat the recommendation.

- 8.7 Detainees' plates and cutlery should be washed in the serveries or separate washing up facilities should be provided. (8.21)

Achieved. There was a separate sink on each wing for detainees to wash their plates and cutlery.

- 8.8 Food comments books should be freely available to detainees at the serveries and should be checked at least weekly by catering staff, who should respond to any comments made. (8.22)

Partially achieved. We found food comment books in each wing, although not always easily. Not all detainees or staff knew of their existence and they were seldom used. There was evidence that kitchen staff checked the books.

- 8.9 A catering committee, including broad detainee representation, should meet at least monthly to discuss catering and shop issues and the minutes of meetings should be acted upon. (8.23)

Partially achieved. Catering and shop issues were raised and acted upon at the monthly consultative committee meetings. However, detainee representation was variable at best. At the meeting we observed, there were seven staff but only three detainees, one of whom was reliant on his colleague to interpret for him. This limited the consultation element, although there was good discussion of various issues, and systematic follow up of previous action points.

Further recommendation

- 8.10 Managers should ensure broad detainee representation at and participation in consultation meetings.

Additional information

- 8.11 In our survey, 28% of respondents thought the food was good, which was considerably higher than at the previous inspection (11%) and now similar to the IRC comparator. Despite this, we continued to receive a number of complaints about the food from detainees, and found it to be of variable quality ourselves. Detainees were not sufficiently involved in helping to cook dishes. The kitchen and servery areas were clean and well supervised. All food at the servery was checked with a heat probe before serving. All staff had been health screened to work in the kitchen and servery areas, and had received food handling training.
- 8.12 Detainees made their menu choices on a daily basis, while queuing for lunch. The menus were all in English and had pictorial images next to the wording, although not all detainees understood the images (see further recommendation 8.3).

Centre shop

- 8.13 In consultation with detainees, the shop should stock a wider range of goods to meet the cultural and religious needs of different nationalities and religions. (8.24)

Achieved. In our survey, 43% of detainees said the shop now sold a wide enough range of products to meet their needs, which was better than the comparator (34%) and our finding at

the last inspection (15%). There had been some consultation through detainee consultative meetings and a few items had been added as a result.

8.14 The shop queue should be supervised to prevent bullying, begging and fraud. (8.25)

Achieved. The shop area was under CCTV observation and the shop workers could easily summon an officer if there was a problem. Detainees were able to buy items using a cashless system entailing use of their identity cards and a form of debit card, and most detainees felt the system worked effectively. However, it often led to queues and we were told there was sometimes frustration among detainees, especially around closing time. There was additional staff supervision at these times.

Section 9: Preparation for release

Expected outcomes:

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.

Welfare

- 9.1 The Gatwick Detainee Welfare Group should be enabled, under the terms of an appropriate agreement, to provide regular surgeries for support and advice, and further links should be established with a range of external support agencies. (9.20)

Partially achieved. Since November 2010, the Welfare Group had been attending the centre on Wednesday morning and was due to extend this to Friday afternoon. These sessions undertook needs assessment with new detainees. This was a welcome development, although there was no appropriate agreement. The range of other external support agencies linked to the centre remained limited.

Further recommendation

- 9.2 The range of external support agencies linked to the centre should be expanded.

- 9.3 Managers should encourage the use of telephone interpretation by those engaged in welfare work, and monitor the effectiveness of their communication with detainees of all nationalities. (9.21)

Not achieved. The welfare officer we spoke to had used telephone interpreting only once, and said that other detainees were usually used where there was a language barrier. Although this was acceptable in some circumstances, it was not appropriate for sensitive issues. There was no monitoring of communication with detainees. (See main recommendation HE.46.)

- 9.4 Welfare staff should interview and assess all detainees on induction and all those about to be removed or released. (9.22)

Not achieved. The welfare officer did not routinely see all new detainees for a needs assessment, and instead relied on reception and induction wing staff to refer them. The welfare officer also did not see detainees about to be removed or released unless they requested an appointment.

We repeat the recommendation.

- 9.5 Suitable clothing should be available for loan or issue to detainees for occasions such as appearances in court. (9.23)

Not achieved. Although shirts were available for issue, there were no trousers except work trousers and jogging bottoms available.

We repeat the recommendation.

Additional information

- 9.6 A new welfare officer had recently been appointed but had not yet started. In the interim, the function was covered by other staff with experience of the welfare service. In our focus groups, detainees said they thought the welfare officer was overloaded and difficult to see, although they valued the service.
- 9.7 Recent recording had been inconsistent, due to the staff changes, but figures for August 2011 indicated that 173 detainees had been seen, with the top two concerns being lost property and immigration-related issues. Appointments were available between 9.30am and 5pm on weekdays, and there was an open surgery on Wednesday evening in the library. No specific training had been provided for the role.
- 9.8 Service provision was focused on reacting to issues as and when they were raised by detainees. The service required significant development to become proactive in meeting the identified welfare needs of detainees (see main recommendation HE.50).

Further recommendation

- 9.9 There should be a programme of ongoing training for welfare staff, which includes visits to relevant outside agencies.

Telephones

- 9.10 **All detainees should have sole use of a DECT phone at all times. (9.30)**
- Not achieved.** There were insufficient DECT (digital enhanced cordless technology) telephones for every detainee. On one wing, there were only six handsets, which had all been loaned out to other detainees.
We repeat the recommendation.
- 9.11 **Managers should ensure that any underlying technical problems leading to intermittent failure of the DECT system are resolved. (9.31)**
- Not achieved.** Staff told us there continued to be ongoing problems with the DECT system. On one wing, staff said there had been a period of seven to 10 days when it had not been possible to make any outgoing calls through the system.
We repeat the recommendation.
- 9.12 **Managers should research and implement the provision of a consistent mobile phone signal in all detainee areas. (9.32)**
- Not achieved.** Both staff and detainees said it was still difficult to receive a strong and consistent mobile phone signal throughout the centre.
We repeat the recommendation.
- 9.13 **Internet security should not block legitimate websites, particularly those providing legal assistance and UKBA country of origin information. (6.27)**
- Not achieved.** Detainees could request access to websites that had been blocked, and staff

provided information showing that they had complied with several such requests. However, many detainees complained that they were unable to use news and information websites, which they considered to be important for their immigration cases, and some were indeed blocked when we tested them (see legal rights section).

We repeat the recommendation.

Additional information

- 9.14 There were no payphones in the centre. Detainees could retain their own mobile phones if they did not have camera or internet capability, and could buy a mobile phone in the shop. However, at £27 these were expensive given that detainees' basic allowance was 71p a day. The Gatwick Detainee Welfare Group provided a limited number of phone cards to detainees, but those without money did not get a weekly telephone allowance from the centre.

Further recommendation

- 9.15 Detainees without money should be given a weekly telephone allowance.

Mail

- 9.16 **Managers should institute regular checks on the timeliness of delivery of incoming mail and faxes. (9.33)**

Achieved. The mail was logged and delivered to the wings by 1.30pm, although detainees collected recorded delivery mail from reception between 1.30pm and 3.30pm. Incoming faxes were logged and taken each hour to the relevant residential units. In our survey, only 23% of respondents said they had experienced problems with sending or receiving mail, compared with 52% at the last inspection. Detainees had easy access to a fax machine in the library and another on B wing, which they could use to send faxes free of charge.

Visits

- 9.17 **A toilet should be available for detainee use in the visits area. (9.24)**

Not achieved. There was still no detainee toilet in the visits hall and those who needed to use one had to leave the hall and were not permitted to return to their visit. One detainee with a bladder problem needed to go to the toilet 10 minutes into a visit with his wife and three small children and was not allowed back into the hall. The Gatwick Detainee Welfare Group had paid almost £100 to enable the family to visit him. We were told that this policy was changed during the inspection so that detainees could resume their visit.

We repeat the recommendation.

- 9.18 **Managers should revise working practices to ensure that visitors are not unnecessarily delayed during the entry process. (9.25)**

Not achieved. Several visitors told us that there were still delays at the gate where searching took place, and in our focus groups detainees said it could take a long time for visitors to get into the hall. Staff told us that following a recent change, detainees were not called on the public address system until their visitors had been received in the hall, whereas previously this had happened when they arrived in the visitors' centre. This had resulted in some visitors

waiting in the hall for up to half an hour, particularly if the detainee had not heard the message or was at an appointment.

We repeat the recommendation.

- 9.19 **The décor in the visits room and the visitors' centre should be brightened with displays appropriate to different ages and cultures. (9.26)**

Partially achieved. The hall had recently been repainted but remained relatively bare. The visits manager was identifying detainees to paint a mural, and pictures and displays were to be put up.

We repeat the recommendation.

- 9.20 **Managers should monitor the use of the visits hall, through methods such as visitor surveys, to ensure that access and facilities are adequate. (9.27)**

Achieved. There were feedback forms for visitors with a brief monthly report on their response. The report was displayed in the visitors' centre, along with details of specific issues raised by visitors and the actions taken to address them.

- 9.21 **An information booklet should be produced for visitors in a number of languages. (9.28)**

Not achieved. Staff told us an information leaflet was available. However, there were none in the visitors' centre when we inspected it, and staff were not able to provide one for us.

We repeat the recommendation.

- 9.22 **Managers should encourage and monitor use of telephone interpretation by visitors' centre staff to ensure that visitors have the necessary information. (9.29)**

Not achieved. Visitors' centre staff told us that they had never used the telephone interpreting service, as they thought they were not allowed to use it and that it was for immigration staff only. There was no monitoring of use by managers.

We repeat the recommendation.

Additional information

- 9.23 Detainees could receive social visits between 2pm and 5.30pm and 6.30pm and 9pm, which could be booked through a telephone booking line, a newly introduced email booking facility or before leaving the visitors' centre. We called the booking line at three different times of the day and it was answered quickly. Detainees were officially not allowed to book consecutive afternoon and evening sessions. However, staff adopted an appropriately flexible approach and if an evening session was not full on the day, they allowed visitors to return in the evening. Detainees were not routinely informed of this possibility and it was not policy. If a detainee was to be removed and there was a pressing compassionate need for a visit, this was facilitated where possible, even if the hall was fully booked. In our survey, 62% of respondents said they were treated well by visits staff, which was better than the 53% at the last inspection.

- 9.24 The visitors' centre had recently been redecorated and refurbished with soft seating, and was much improved. It had vending machines for drinks and snacks, as well as lockers. Detainees and visitors could take documents to a visit. A useful free bus service was provided to and from Gatwick Airport rail station. There was limited information displayed in the centre, and in English only.

- 9.25 The visits hall was reasonably informal, with comfortable freestanding furniture at 15 tables, but was small for the number of detainees. There was a children's corner with some play equipment for younger children, and a large-screen monitor for showing DVDs. A PlayStation was available on request for older children. There was some information displayed on the chaplaincy and anti-bullying provision.
- 9.26 Detainees told us they were not allowed to have physical contact with their visitors beyond an initial embrace. Staff said that while contact was restricted due to the inappropriate conduct of some visitors in the past, detainees could hold hands with their visitor. We saw some staff taking a flexible approach to physical contact, but a number of detainees complained that others were overzealous in their approach. Visitors had to sign a behaviour declaration before going into the visit, but it was in English only – we met one visitor who had signed the form without understanding it.
- 9.27 There was one closed visits room, which staff said was very rarely used. One detainee was on closed visits at the time of our inspection.
- 9.28 The Gatwick Detainee Welfare Group ran a busy and much valued visitor group. At the time of inspection it had 80 volunteers who regularly met detainees who did not receive visits.

Further recommendation

- 9.29 Detainees should be able to have physical contact with visitors throughout their visits within the bounds of propriety, and the limits of such behaviour should be explained to visitors in a language they understand.

Removal and release

- 9.30 Detainees being transferred into further detention should be given written reasons for this decision and information about the centre to which they are being transferred. (9.34)

Partially achieved. The UKBA detainee escorting and population management unit sent movement orders directly to the detainee discharge area, and the local UKBA team was not routinely and consistently informed of transfers. The movement orders did not include helpful reasons – they usually just said 'transfer' – and, as a result, staff said they were unable to provide even a verbal explanation in most cases. There were useful information leaflets about other IRCs, but they were in English only.

Further recommendation

- 9.31 Detainees being transferred into further detention should be given detailed written reasons for this decision and information about the centre to which they are being transferred in a language they can understand.

- 9.32 **Multidisciplinary risk management meetings, including health care and welfare staff, should be held before the removal of high-risk or vulnerable detainees to consider their welfare. (9.35)**

Not achieved. There were no specific multidisciplinary risk management meetings to consider

the welfare of high-risk detainees before their removal.
We repeat the recommendation.

- 9.33 **The small holding rooms in the discharge area should be taken out of commission. (9.36)**

Achieved. We did not observe these inadequate facilities used during the discharge process, and managers confirmed they had been taken out of commission.

- 9.34 **Detainees held for significant periods in the discharge area should be provided with meals at regular times, and with some basic reading matter and activity resources. (9.37)**

Partially achieved. We saw some detainees who were held in the discharge area for approximately four hours during the late afternoon/early evening. They had all been given a meal, but had not been provided with any reading matter or other activity, beyond a television.

Housekeeping point

- 9.35 Detainees in the discharge area should be given reading matter and activity resources.

- 9.36 **Removed detainees should receive assistance with travel from the airport of arrival to their final destination. (9.38)**

Not achieved. There was no systematic provision for onward travel from the destination airport in the country to which detainees were removed, although some ad hoc assistance was provided, particularly by the Gatwick Detainee Welfare Group.
We repeat the recommendation.

- 9.37 **Shower-proof coats should be available for issue to departing detainees in case of need. (9.39)**

Achieved. Lightweight showerproof coats were available for departing detainees.

- 9.38 **Published and online information about destination countries should be available to detainees. (9.40)**

Not achieved. Country of origin reports were out of date and many of the newspaper internet sites were blocked (see recommendation 3.9).

Additional information

- 9.39 An average of 325 detainees a month were discharged during June, July and August 2011. The centre provided no systematic pre-release assessment or support for detainees (see previous main recommendation MR9). The Gatwick Detainee Welfare Group provided a small amount of money and a country of origin information pack (where available) to those about to be removed who requested it. Detainees could only retrieve items from their home before removal through friends and family.

- 9.40 Detainees being released were given rail warrants to destinations within the UK and contact numbers of outside agencies, such as the Salvation Army and Citizens Advice. Gatwick

Detainee Welfare Group provided information packs on several cities in the UK. The only bags available to detainees without their own were clear plastic, which were indiscreet and unsuitable for public transport.

- 9.41 We observed preparations for an escorted charter flight to Afghanistan. In preparation for this, nine compliant detainees had been moved to the separation unit under 'rule 15' (see paragraph 7.39). Staff told us this was routine practice to enable staff to manage any potential refractory behaviour. This was inappropriate and illegitimate. A further six detainees were already in the discharge room. They said they had not received a briefing from UKBA or indeed seen anyone from UKBA during the process.
- 9.42 One detainee had received paperwork by fax that afternoon stating that his case had been accepted by the European Court of Human Rights and his removal should be put on hold until further notice. Staff told us that the first opportunity he would have for someone from UKBA to see the paperwork would be at the airport, which meant that he travelled to the airport unnecessarily. In the event, the whole charter flight was cancelled and he was returned to the centre.
- 9.43 Overseas escort staff were easily identifiable with clearly visible name badges. Several detainees were identified as reserves and taken to the airport to fill any seats that might become vacant through the granting of a last minute injunction. This system was inhumane, since these detainees were given to understand that they would be on the flight. Staff told us about the distress and upset of some 'reserve' detainees, who had made preparations for leaving behind or returning to their families (see main recommendation HE.51).

Further recommendations

- 9.44 Detainees should be given systematic help to recover essential property before removal.
- 9.45 There should be suitable bags available for detainees on discharge.
- 9.46 UKBA staff should speak to all detainees on their day of removal to allow them to ask questions, address concerns and present new paperwork.

10. Summary of recommendations

The following is a list of both repeated and further recommendations included in this report. The reference numbers in brackets refer to the paragraph location in the main report.

Main recommendations **to the Chief Executive of UKBA**

- 10.1 The system of taking 'reserve' detainees to the airport for removals should cease. (HE.51)

Main recommendation **to the Chief Executive of UKBA and centre manager**

- 10.2 The volume and range of education provision should significantly increase, and its structure and planning meet the needs of all detainees. (HE.49)

Main recommendations **to the centre manager**

- 10.3 With immediate effect, detainees should be located in the separation unit only under the provisions of Detention Centre Rules 40 and 42, for the shortest time possible and subject to the governance associated with legitimate separation. (HE.45)
- 10.4 Professional interpreting should be used in sensitive circumstances and where accuracy is essential, including for health care consultations, reception, assessment, care in detention and teamwork (ACDT) and welfare interviews. (HE.46)
- 10.5 Weekly group meetings should be convened with detainees to identify unmet need, inform them of relevant issues and keep staff abreast of concerns. (HE.47)
- 10.6 All detainees with mental health needs should be identified and any who need them should have a care plan. (HE.48)
- 10.7 A full and widely advertised welfare service should be provided seven days a week and should provide systematic pre-release or removal assessment and support for detainees. (HE.50)

Recommendations **to UKBA**

Escort vans and transfers

- 10.8 Detainees should routinely be told of any transfer in advance and given details of reasons for transfer and information about their destination. They should not be subject to successive unexplained moves around the detention estate. (1.1)
- 10.9 Detainees should not be transferred between centres overnight. (1.2)

Reception

- 10.10 Detainees should not have their fingerprints taken in reception if UKBA already have their prints on record. (1.12)

Immigration casework

- 10.11 Cumulative periods of detention should be routinely collated by UKBA. (3.19)
- 10.12 Where there is no prospect of a detainee being removed, the UKBA caseworker should specifically address any continued detention as a matter of law and fact. (3.20)
- 10.13 Monthly review letters should be timely and reflect a balanced consideration of all factors relevant to continuing detention. In particular, the review letter should state the reasons if there has been a lack of progress since the previous letter. (3.21)
- 10.14 UKBA should adopt a national policy that bail summaries are issued by caseworkers to all detainees, whether they are legally represented or not, at least one day before the hearing. (3.22)
- 10.15 All rule 35 reports should be responded to within the required timescales, even when the report triggers an asylum claim. (3.32)

Suicide and self-harm

- 10.16 UKBA should investigate reports that detainees have been taken off ACDT simply to effect transfer, and ensure that this practice ceases. (4.11)

Childcare and child protection

- 10.17 UKBA should ensure that the police and offender managers are informed when a detainee who is a risk to children is released from detention. (4.21)

Work

- 10.18 Detainees' cooperation or failure to cooperate with UKBA should not affect the process of allocating paid work roles. (6.5)

Removal and release

- 10.19 UKBA staff should speak to all detainees on their day of removal to allow them to ask questions, address concerns and present new paperwork. (9.46)

Recommendations **to UKBA and escort contractors**

Escort vans and transfers

- 10.20 Escorting staff should contact the receiving centre to provide them with an estimated arrival time and details of who they are escorting. (1.3)
- 10.21 Copies of police custody records should be attached to the IS91 when a detainee is transferred from police custody. (1.4)

- 10.22 Detainees should only be handcuffed if there is specific information indicating substantial risk. (1.5)

Recommendations to the Chief Executive of UKBA and centre manager

Rules and management of the centre

- 10.23 Handcuffs should be used only when justified by an individualised risk assessment. (7.23)
- 10.24 Complaints should be answered within seven days of the detainee making the complaint. (7.49).

Preparation for release

- 10.25 Detainees being transferred into further detention should be given detailed written reasons for this decision and information about the centre to which they are being transferred in a language they can understand. (9.31)
- 10.26 Multidisciplinary risk management meetings, including health care and welfare staff, should be held before the removal of high-risk or vulnerable detainees to consider their welfare. (9.32)
- 10.27 Removed detainees should receive assistance with travel from the airport of arrival to their final destination. (9.36)

Recommendations to the centre manager

Reception, first night and induction

- 10.28 The waiting rooms in reception and discharge should be made more welcoming and should contain books, newspapers and magazines in a range of languages. (1.9)
- 10.29 Detainees should not be locked in an unsupervised waiting room. (1.11)
- 10.30 All detainees should be interviewed in private in reception. (1.13)
- 10.31 Staff should receive training and guidance on interviewing techniques and completion of the first night and room-sharing risk assessments, which should be completed for all detainees. (1.15)
- 10.32 Detainees should be able to have a shower in reception on arrival. (1.16)
- 10.33 All detainees should receive a comprehensive induction and clear written information explaining the facilities and routine of the centre in a language they can understand. The same information should be provided in audio or video formats for detainees who are unable to read. (1.20)
- 10.34 Reception staff should use detainees' preferred names and wear name badges. (1.27)

- 10.35 Expected standards of behaviour and the regime should be explained to detainees in a language they can understand, and written information should be clearly printed in a range of languages. (1.28)

Residential units

- 10.36 The living environment should be softened with, for example, the introduction of plants, soft furnishing and art work. (2.2)
- 10.37 Information notices should be displayed in a wide range of languages. (2.3)
- 10.38 Seating should be installed in the exercise yards. (2.5)
- 10.39 All rooms should be adequately ventilated. (2.6)
- 10.40 Soundproofing should be introduced on the residential units. (2.8)
- 10.41 The showers should be adequately screened. (2.13)
- 10.42 Detainees should have the option of taking a bath. (2.14)
- 10.43 All toilets should have seats and should be screened so that detainees are afforded complete privacy. (2.15)
- 10.44 The drainage problems in the adapted rooms should be corrected. (2.22)
- 10.45 Industrial washing machines should be sourced for domestic washing. (2.23)
- 10.46 Better quality pillows should be provided. (2.24)

Staff-detainee relationships

- 10.47 History sheet entries should be regular and substantial, building a meaningful picture of detainees. (2.28)

Legal rights

- 10.48 In consultation with the Legal Services Commission, the centre should ensure adequate access to legal advice, representation and bail applications, and seek peer review of the quality of advice and representation received by detainees. (3.2)
- 10.49 Hard copies of BID's 'Handbook on Bail' should be available in English and other languages. (3.6)
- 10.50 Country of Origin Information Service reports should be available in hard copies and electronically. (3.9)

Immigration casework

- 10.51 If an allegation of torture is made, health care staff should document and describe any scarring, wherever possible providing a professional opinion on the consistency of the scarring with the alleged method of torture. (3.24)

Bullying

- 10.52 The safer community group should consider 12-month analyses of violence reduction data and investigate trends. (4.4)

Suicide and self-harm

- 10.53 A care suite for detainees at risk of self-harm should be established. (4.12)
- 10.54 A formal peer support scheme for vulnerable detainees should be introduced. (4.14)

Childcare and child protection

- 10.55 All G4S staff should receive training in safeguarding children. (4.19)
- 10.56 Children should not be held in the separation unit. (4.25)

Diversity

- 10.57 Diversity and equality action team (DEAT) meetings should be advertised to detainees, and include strategic discussion of diversity issues. Action points should be systematically followed up. (4.28)
- 10.58 There should be care plans for all detainees with disabilities. (4.30)
- 10.59 Call bells in adapted rooms should be easily accessible. (4.31)
- 10.60 An action plan should be drawn up, implemented and kept under review to ensure the single equality policy is effectively implemented. (4.39)
- 10.61 Diversity orderlies should have a clear role and appropriate training for it. (4.40)
- 10.62 Equality impact assessments should be completed. (4.41)

Faith and religious activity

- 10.63 The chaplaincy team should be adequately resourced to meet the needs of Brook House detainees. (4.46)

Health services

- 10.64 Services should be developed on the basis of an up-to-date health assessment, including detailed assessment of mental health needs. (5.2)
- 10.65 The health care centre should be provided with a toilet for the use of detainees being examined or treated. (5.3)
- 10.66 The security of the pharmacy room and administration hatch should be reviewed. (5.4)
- 10.67 All doors to the health care centre should be secured with a separate health care suite key. (5.6)
- 10.68 There should be a nurse lead for detainees with disabilities, and regular assessment and monitoring of their needs in collaboration with the diversity and equality coordinator. (5.10)
- 10.69 There should be effective mechanisms to obtain detainee perspectives on health care. (5.14)
- 10.70 Health care staff should be informed at the earliest opportunity of a detainee's pending release, transfer or removal. (5.16)
- 10.71 Detainees should be given a supply of anti-malarial drugs when removed to a country with a known risk of malaria. (5.17)
- 10.72 There should be suitable, regularly checked emergency equipment on all wings. The resuscitation equipment should be matched with staff skills and training. (5.21)
- 10.73 The medicines and therapeutics committee should review the use of general stock and the introduction of patient group directions to allow nursing staff to supply more potent medication in the absence of the doctor. (5.25)
- 10.74 Detainees should have access to counselling services. (5.30)
- 10.75 Mental health awareness training should be provided for all custody staff. (5.31)

Work and learning and skills

- 10.76 The centre should offer structured training in using the internet and emailing to detainees unfamiliar with computers. (6.2)
- 10.77 The centre should reduce the length of time detainees are confined to their rooms each day, institute later lock up and increase the time detainees are allowed in communal areas. (6.3)
- 10.78 The centre should increase the volume of paid work available to detainees, accompanied by appropriate training for all work roles leading to internal or external accreditation. (6.4)
- 10.79 Information about work roles should be available in a range of languages and promoted throughout the centre. (6.7)
- 10.80 Detainees should have the opportunity to follow short units of study leading to internal or external accreditation. (6.8)

- 10.81 Cover for planned or unplanned education staff absence should be routine and appropriate. (6.9)
- 10.82 The range of arts and crafts activities and resources should significantly increase. (6.11)
- 10.83 Effective monitoring of detainees' participation in activity, including education, visits to the library and PE, should form the basis for identifying patterns of participation by individuals or groups. (6.12)
- 10.84 Thorough and systematic quality assurance, including regular self-assessment, should apply to education and other activities. (6.13)
- 10.85 Education staff should receive suitable professional support and development. (6.14)
- 10.86 The library should stock and loan newspapers, periodicals, dictionaries, audio and video material which reflects the languages, cultures and interests of detainees. (6.23)
- 10.87 Management of the library should ensure that monitoring of stock levels and borrowing is routine. Staff responsible for the management and operation of the library should be appropriately trained. (6.24)

Physical education

- 10.88 Detainees should routinely receive an appropriate induction before engaging in sporting and PE activity, with confirmation of their fitness to participate. (6.27)
- 10.89 Appropriately trained staff should supervise all sporting and PE activity. (6.28)
- 10.90 The centre should ensure systematic recording of all accidents and injuries sustained during PE and sporting activity, and monitor records to identify any necessary changes to practice. (6.29)

Rules of the centre

- 10.91 Rules of the centre, including those of the RFA [removal from association], should be available to detainees in a range of languages on all residential units. (7.1)

Security

- 10.92 Managers should ensure that staff continue to submit security information, even if the level of risk is perceived to have lowered. (7.6)

Rewards scheme

- 10.93 Managers should encourage staff to record recognition of constructive behaviour by detainees, which should be reflected in the incentives scheme. (7.11)
- 10.94 The rewards scheme should not involve an enhanced wing or a prison-style three-tier incentives and earned privileges scheme involving punishments. (7.17)

The use of force

- 10.95 Any detainee subject to anything other than very minimal contact amounting to use of force should receive a recorded assessment from a health care professional. (7.19)
- 10.96 All planned uses of force should be filmed, and the film retained for a reasonable fixed period. (7.20)

Discipline

- 10.97 Exclusion from access to paid work should not be used as a punishment linked to separation. (7.25)

Single separation

- 10.98 Detainees should not be accommodated under Rule 40 conditions solely because a single or ground-floor room is required or solely because of medical requirements. (7.29)
- 10.99 Separation should be authorised by a senior manager, or ratified by a senior manager as soon as possible when an immediate operational decision has been required. (7.30)
- 10.100 All those located in the separation unit should first be certified as fit for separation by a health care professional. (7.31)
- 10.101 Any period of separation exceeding 24 hours should be authorised in writing by a UKBA manager before expiry of that period. (7.32)
- 10.102 The reasons for separation should be given to every separated detainee within two hours. (7.33)
- 10.103 Temporary confinement should only be used for detainees who are violent or refractory, for as short a period as possible, and only for as long as such behaviour continues. (7.35)
- 10.104 Regular meetings involving senior managers should review the use of separation, making use of analysis by key categories such as ethnicity, nationality, age and location. (7.36)
- 10.105 All cells in the separation unit should contain normal cell furniture, including a chair, except when used for temporary confinement under rule 42. (7.41)
- 10.106 Detainees separated under rule 40 should have a television, their mobile phone and smoking requisites if desired, unless any of these are ruled out by an individual risk assessment. (7.42)
- 10.107 A chaplain should normally speak face to face with each detainee held in separation every day. (7.43)

Complaints

- 10.108 Complaints should be monitored and reported in such a way that local managers, including UKBA managers, can track response performance and analyse any emerging trends. (7.44)

- 10.109 Wing staff should make every effort to resolve detainees' concerns, making use of first-line managers where appropriate, before advising the use of complaint forms. (7.47)
- 10.110 Information on how to contact the IMB and IMB application forms should be available on all residential units, including the RFA unit, in a range of languages. (7.50)

Catering

- 10.111 Detainees should be encouraged to assist in the preparation of menus and cooking of dishes, particularly on the themed days. (8.1)
- 10.112 The menu should be displayed in residential areas, and managers should ensure that it is comprehensible to detainees. (8.3)
- 10.113 There should be separate, clearly identifiable tools for serving halal and vegetarian food. (8.5).
- 10.114 All detainees should be able to eat communally. (8.6)
- 10.115 Managers should ensure broad detainee representation at and participation in consultation meetings. (8.10)

Welfare

- 10.116 The range of external support agencies linked to the centre should be expanded. (9.2)
- 10.117 Welfare staff should interview and assess all detainees on induction and all those about to be removed or released. (9.4).
- 10.118 Suitable clothing should be available for loan or issue to detainees for occasions such as appearances in court. (9.5)
- 10.119 There should be a programme of ongoing training for welfare staff, which includes visits to relevant outside agencies. (9.9)

Telephones

- 10.120 All detainees should have sole use of a DECT (digital enhanced cordless technology) phone at all times. (9.10)
- 10.121 Managers should ensure that any underlying technical problems leading to intermittent failure of the DECT system are resolved. (9.11)
- 10.122 Managers should research and implement the provision of a consistent mobile phone signal in all detainee areas. (9.12)
- 10.123 Internet security should not block legitimate websites, particularly those providing legal assistance and UKBA country of origin information. (9.13)
- 10.124 Detainees without money should be given a weekly telephone allowance. (9.15)

Visits

- 10.125 A toilet should be available for detainee use in the visits area. (9.17)
- 10.126 Managers should revise working practices to ensure that visitors are not unnecessarily delayed during the entry process. (9.18)
- 10.127 The décor in the visits room and the visitors' centre should be brightened with displays appropriate to different ages and cultures. (9.19)
- 10.128 An information booklet should be produced for visitors in a number of languages. (9.21)
- 10.129 Managers should encourage and monitor use of telephone interpretation by visitors' centre staff to ensure that visitors have the necessary information. (9.22)
- 10.130 Detainees should be able to have physical contact with visitors throughout their visits within the bounds of propriety, and the limits of such behaviour should be explained to visitors in a language they understand. (9.29)

Removal and release

- 10.131 Detainees should be given systematic help to recover essential property before removal. (9.44)
- 10.132 There should be suitable bags available for detainees on discharge. (9.45)

Housekeeping points

Reception, first night and induction

- 10.133 Detainees should be interviewed quickly and not be left waiting in reception for excessive periods. (1.29)

Residential units

- 10.134 The use of the public address system should be minimised and directed at appropriate areas. (2.9)
- 10.135 All officers should be able to re-set emergency call bell lights. (2.25)

Legal rights

- 10.136 Notices about Community Legal Advice should be updated to explain that it is only available over the telephone. (3.4)
- 10.137 The stock of legal text books should be made readily available to detainees. (3.8)
- 10.138 Complaint forms for the Office of the Immigration Services Commissioner should be freely available. (3.11)

10.139 Detainees should only be interviewed on chairs fastened to the floor following individualised risk assessments. (3.17)

10.140 Detainees should be able to open Word and PDF files on computers in the internet suite. (3.18)

Health services

10.141 The standard operating procedures for the pharmacy service should be readily available to all health care staff. (5.27)

Rewards scheme

10.142 Detainees should be allowed to bring a friend with them to rewards review hearings. (7.18)

Complaints

10.143 Complaints outcomes should be accurately recorded. (7.56)

10.144 Prisons and Probation Ombudsman application forms should be available on the residential wings. (7.57)

10.145 Replies to complaints should be written in plain English. (7.58)

Welfare

10.146 Detainees in the discharge area should be given reading matter and activity resources. (9.35)

Appendix I: Inspection team

Martin Lomas	Deputy Chief Inspector
Hindpal Singh Bhui	Team leader
Bev Alden	Inspector
Gary Boughen	Inspector
Colin Carroll	Inspector
Peter Dunn	Inspector
Martin Kettle	Inspector
Helen Carter	Health services inspector
Paul Roberts	Substance use inspector
Linda Truscott	Ofsted inspector
Laura Nettleingham	Researcher
Alice Reid	Researcher
Michael Skidmore	Researcher
Amy Summerfield	Researcher

Appendix II: Detainee population profile

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

Age	No of men	%
18 years to 21 years	41	10.1
22 years to 29 years	148	36.46
30 years to 39 years	139	34.24
40 years to 49 years	62	15.27
50 years to 59 years	13	3.21
60 years to 69 years	3	0.74
Total	406	100

Nationality	No of men	%
Afghanistan	28	6.9
Albania	4	0.99
Algeria	19	4.68
Angola	1	0.25
Bangladesh	20	4.93
Barbados	1	0.25
Bolivia	4	0.99
Brazil	4	0.99
Cameroon	1	0.25
China	31	7.64
Congo (Brazzaville)	3	0.74
Congo Democratic Republic (Zaire)	1	0.25
Eritrea	7	1.73
Ethiopia	2	0.5
France	1	0.25
Gambia	6	1.48
Georgia	2	0.5
Ghana	6	1.48
Guinea	2	0.5
Guinea Bissau	1	0.25
Hungary	2	0.5
India	23	5.67
Iran	7	1.73
Iraq	10	2.47
Ivory Coast	4	0.99
Jamaica	36	8.87
Kenya	5	1.24
Kosovo	1	0.25
Latvia	1	0.25
Liberia	2	0.5
Libya	1	0.25
Lithuania	1	0.25
Malaysia	3	0.74

Morocco	4	0.99
Nigeria	32	7.89
Pakistan	41	10.1
Palestine	2	0.5
Philippines	4	0.99
Poland	6	1.48
Portugal	4	0.99
Russia	1	0.25
Serbia	1	0.25
Sierra Leone	3	0.74
Somalia	14	3.46
South Africa	2	0.5
Sri Lanka	20	4.93
St Lucia	1	0.25
Sudan	2	0.5
Sweden	1	0.25
Syria	1	0.25
Turkey	6	1.48
Uganda	3	0.74
Ukraine	2	0.5
Vietnam	6	1.48
Zimbabwe	7	1.73
Other	2	0.5
Total	406	100

Religion/belief	No of men	%
Buddhist	16	3.94
Roman Catholic Orthodox	27	6.65
Other Christian	88	21.68
Hindu	11	2.71
Muslim	165	40.64
Sikh	18	4.44
Agnostic/atheist	3	0.74
Unknown	35	8.62
Other	43	10.6
Total	406	100

Length of time in detention in this centre	No of men	%
Less than 1 week	64	15.77
1 to 2 weeks	48	11.83
2 to 4 weeks	54	13.3
1 to 2 months	72	17.74
2 to 4 months	82	20.2
4 to 6 months	33	8.13
6 to 8 months	17	4.19
8 to 10 months	9	2.22
More than 10 months	27	6.65
Total	406	100

Detainees' last location before detention in this centre	No of men	%
Community	59	14.54
Another IRC	134	33.01
A short-term holding facility (e.g. at a port or reporting centre)	22	5.42
Police station	60	14.78
Prison	131	32.27
Total	406	100

Appendix III: Summary of detainee survey responses

A voluntary, confidential and anonymous survey of the detainee population was carried out for this inspection. The results of this survey formed part of the evidence base for the inspection.

Choosing the sample size

At the time of the survey on 12-13 September 2011, the detainee population at Brook House was 397. The questionnaire was offered to 198 detainees.

Selecting the sample

Respondents were randomly selected from a detainee population printout using a stratified systematic sampling method. This essentially means every second person is selected from the list, which is printed in location order, if 50% of the population is to be sampled.

Completion of the questionnaire was voluntary. If a detainee was not bilingual, an interpreter was used via telephone to communicate the purpose and aims of the survey.

Questionnaires were offered in 23 languages.

Interviews were carried out with any respondents with literacy difficulties.

Methodology

Every attempt was made to distribute the questionnaires to each respondent on an individual basis. This gave researchers an opportunity to explain the independence of the Inspectorate and the purpose of the questionnaire, as well as to answer questions.

All completed questionnaires were confidential – only members of the Inspectorate saw them. In order to ensure confidentiality, respondents were asked to do one of the following:

- to have their questionnaire ready to hand back to a member of the research team at a specified time;
- to seal the questionnaire in the envelope provided and hand it to a member of staff, if they were agreeable; or
- to seal the questionnaire in the envelope provided and leave it in their room for collection.

Respondents were not asked to put their names on their questionnaire.

Response rates

In total, 132 respondents completed and returned their questionnaires. This represented 33% of the detainee population. The response rate was 67%. Sixty-six questionnaires were not returned or returned blank. Eighty five questionnaires (64%) were returned in English, 14 (11%) in Punjabi, 12 (9%) in Urdu, nine (7%) in Chinese, four (3%) in Bengali, two (2%) in Tamil, one (1%) each in Arabic, Spanish, Turkish, Polish, Kurdish Sorani and Romanian.

Comparisons

The following details the results from the survey. Data from each centre have been weighted, in order to mimic a consistent percentage sampled in each centre.

Some questions have been filtered according to the response to a previous question. Filtered questions are clearly indented and preceded by an explanation as to which respondents are included in the filtered questions. Otherwise, percentages provided refer to the entire sample. All missing responses are excluded from the analysis.

The following analyses have been conducted:

- The current survey responses in 2011 against comparator figures for all detainees surveyed in detention centres. This comparator is based on all responses from detainee surveys carried out in nine detention centres since 2009.
- The current survey responses in 2011 against the responses of detainees surveyed at Brook House IRC in 2010.
- A comparison within the 2011 survey between the responses of non-English speaking detainees with English speaking detainees.
- A comparison within the 2011 survey between the responses of detainees who consider themselves to have a disability and those who do not consider themselves to have a disability.

In all the above documents, statistical significance is used to indicate whether there is a real difference between the figures, i.e. the difference is not due to chance alone. Results that are significantly better are indicated by green shading, results that are significantly worse are indicated by blue shading and where there is no significant difference, there is no shading. Orange shading has been used to show a significant difference in detainees' background details.

It should be noted that, in order for statistical comparisons to be made between the most recent survey data and those of the previous survey, both sets of data have been coded in the same way. This may result in percentages from previous surveys looking higher or lower. However, both percentages are true of the populations they were taken from, and the statistical significance is correct.

Summary

In addition, a summary of the survey results is attached. This shows a breakdown of responses for each question. Percentages have been rounded and therefore may not add up to 100%.

No questions have been filtered within the summary so all percentages refer to responses from the entire sample. The percentages to certain responses within the summary, for example 'not made a complaint' options across questions, may differ slightly. This is due to different response rates across questions, meaning that the percentages have been calculated out of different totals (all missing data is excluded). The actual numbers will match up as the data are cleaned to be consistent.

Percentages shown in the summary may differ by 1% or 2% from those shown in the comparison data as the comparator data have been weighted for comparison purposes.

Survey results

Section 1: About you

Q1	Are you male or female?	
	Male.....	131 (100%)
	Female	0 (0%)
Q2	What is your age?	
	Under 18.....	0 (0%)
	18-21.....	15 (12%)
	22-29.....	35 (27%)
	30-39.....	52 (40%)
	40-49.....	16 (12%)
	50-59.....	10 (8%)
	60-69.....	1 (1%)
	70 or over.....	0 (0%)
Q3	What region are you from? (Please tick only one.)	
	Africa.....	45 (35%)
	North America	1 (1%)
	South America.....	3 (2%)
	Indian subcontinent (India, Pakistan, Bangladesh, Sri Lanka).....	32 (25%)
	China	9 (7%)
	Other Asia	7 (5%)
	Caribbean	18 (14%)
	Europe.....	10 (8%)
	Middle East.....	5 (4%)
Q4	Do you understand spoken English?	
	Yes	103 (80%)
	No	26 (20%)
Q5	Do you understand written English?	
	Yes	95 (77%)
	No	29 (23%)
Q6	What would you classify, if any, as your religious group?	
	None.....	6 (5%)
	Church of England	10 (8%)
	Catholic	17 (13%)
	Protestant.....	3 (2%)
	Other Christian denomination	17 (13%)
	Buddhist.....	8 (6%)
	Hindu	6 (5%)
	Jewish.....	1 (1%)
	Muslim.....	54 (43%)
	Sikh	4 (3%)

Q7	Do you have a disability?	
	Yes	16 (13%)
	No	105 (87%)

Section 2: Immigration detention

Q8	When being detained, were you told the reasons why in a language you could understand?	
	Yes	98 (80%)
	No	24 (20%)

Q9	Including this centre, how many places have you been held in as an immigration detainee since being detained (including police stations, airport detention rooms, removal centres, and prison following end of sentence)?	
	One to two.....	74 (61%)
	Three to five.....	38 (31%)
	Six or more.....	9 (7%)

Q10	How long have you been detained in this centre?	
	Less than 1 week.....	17 (13%)
	More than 1 week less than 1 month.....	27 (21%)
	More than 1 month less than 3 months	38 (30%)
	More than 3 months less than 6 months	15 (12%)
	More than 6 months less than 9 months	13 (10%)
	More than 9 months less than 12 months.....	5 (4%)
	More than 12 months.....	12 (9%)

Section 3: Transfers and escorts

Q11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	
	Yes	56 (45%)
	No	54 (43%)
	Do not remember	15 (12%)

Q12	How long did you spend in the escort vehicle to get to this centre on your most recent journey?	
	Less than one hour.....	11 (9%)
	One to two hours	46 (37%)
	Two to four hours.....	33 (26%)
	More than four hours	30 (24%)
	Do not remember	6 (5%)

Q13	How did you feel you were treated by the escort staff?	
	Very well.....	22 (17%)
	Well	53 (41%)
	Neither.....	29 (23%)
	Badly.....	6 (5%)
	Very badly.....	14 (11%)
	Do not remember	4 (3%)

Section 4: Reception and first night

Q15	Were you seen by a member of health care staff in reception?	
	Yes	113 (88%)
	No	11 (9%)
	Do not remember	5 (4%)
Q16	When you were searched in reception, was this carried out in a sensitive way?	
	Yes	90 (71%)
	No	22 (17%)
	Do not remember/not applicable	15 (12%)
Q17	Overall, how well did you feel you were treated by staff in reception?	
	Very well	20 (15%)
	Well	58 (44%)
	Neither.....	34 (26%)
	Badly.....	6 (5%)
	Very badly	8 (6%)
	Do not remember	6 (5%)
Q18	On your day of arrival did you receive information about what was going to happen to you?	
	Yes	52 (40%)
	No	69 (53%)
	Do not remember	8 (6%)
Q19	On your day of arrival did you receive information about what support was available to you in this centre?	
	Yes	49 (40%)
	No	61 (50%)
	Do not remember	13 (11%)
Q20	Was any of this information given to you in a translated form?	
	Do not need translated material	52 (42%)
	Yes	11 (9%)
	No	62 (50%)
Q21	On your day of arrival did you get the opportunity to change into clean clothing?	
	Yes	78 (60%)
	No	42 (33%)
	Do not remember	9 (7%)
Q22	Did you feel safe on your first night here?	
	Yes	68 (52%)
	No	51 (39%)
	Do not remember	11 (8%)
Q23	Did you have any of the following problems when you first arrived here? (Please tick all that apply to you.)	
	Not had any problems	45 (37%)
	Loss of property.....	17 (14%)
	Contacting family	26 (21%)
	Access to legal advice.....	28 (23%)

<i>Feeling depressed or suicidal</i>	46 (38%)
<i>Health problems</i>	22 (18%)

Q24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	
	<i>Not had any problems</i>	45 (39%)
	Yes	22 (19%)
	No	48 (42%)

Section 5: Legal rights and immigration

Q26	Do you have a lawyer?	
	<i>Do not need one</i>	3 (2%)
	Yes	86 (67%)
	No	40 (31%)

Q27	Do you get free legal advice?	
	<i>Do not need legal advice</i>	12 (10%)
	Yes	39 (32%)
	No	71 (58%)

Q28	Can you contact your lawyer easily?	
	Yes	58 (47%)
	No	21 (17%)
	<i>Do not know/not applicable</i>	44 (36%)

Q29	Have you had a visit from your lawyer?	
	<i>Do not have one</i>	43 (34%)
	Yes	32 (26%)
	No	50 (40%)

Q30	Can you get legal books in the library?	
	Yes	52 (43%)
	No	28 (23%)
	<i>Do not know/not applicable</i>	41 (34%)

Q31	How easy or difficult is it for you to obtain bail information?	
	<i>Very easy</i>	12 (10%)
	<i>Easy</i>	34 (28%)
	<i>Neither</i>	16 (13%)
	<i>Difficult</i>	16 (13%)
	<i>Very difficult</i>	39 (32%)
	<i>Not applicable</i>	6 (5%)

Q32	Can you get access to official information reports on your country?	
	Yes	23 (19%)
	No	64 (53%)
	<i>Do not know/not applicable</i>	34 (28%)

Q33	How easy or difficult is it to see the centre's immigration staff when you want?	
	<i>Do not know/have not tried</i>	24 (19%)
	<i>Very easy</i>	5 (4%)

Easy.....	27 (22%)
Neither.....	16 (13%)
Difficult	26 (21%)
Very difficult.....	27 (22%)

Section 6: Respectful detention

Q35	Can you clean your clothes easily?	
	Yes	93 (75%)
	No	31 (25%)
Q36	Are you normally able to have a shower every day?	
	Yes	122 (97%)
	No	4 (3%)
Q37	Is it normally quiet enough for you to be able to relax or sleep in your room at night time?	
	Yes	77 (61%)
	No	49 (39%)
Q38	Can you normally get access to your property held by staff at the centre if you need to?	
	Yes	70 (56%)
	No	30 (24%)
	<i>Do not know</i>	25 (20%)
Q39	What is the food like here?	
	Very good.....	2 (2%)
	Good.....	33 (27%)
	Neither.....	20 (16%)
	Bad.....	28 (23%)
	Very bad	40 (33%)
Q40	Does the shop sell a wide enough range of goods to meet your needs?	
	<i>Have not bought anything yet</i>	8 (7%)
	Yes	52 (43%)
	No	62 (51%)
Q41	Do you feel that your religious beliefs are respected?	
	Yes	79 (66%)
	No	20 (17%)
	<i>Not applicable</i>	21 (18%)
Q42	Are you able to speak to a religious leader of your faith in private if you want to?	
	Yes	62 (52%)
	No	20 (17%)
	<i>Do not know/not applicable</i>	38 (32%)
Q43	How easy or difficult is it to get a complaint form?	
	Very easy.....	40 (33%)
	Easy.....	50 (41%)
	Neither.....	12 (10%)
	Difficult	2 (2%)
	Very difficult.....	1 (1%)

Do not know 16 (13%)

Q44 Have you made a complaint since you have been at this centre?
Yes 30 (24%)
No 85 (69%)
Do not know how to 9 (7%)

Q45 If yes, do you feel complaints are sorted out fairly?
Yes 6 (5%)
No 22 (18%)
Not made a complaint 94 (77%)

Section 7: Staff

In order to assess how well you are being treated by staff, we ask that you fill in the following information. This will not affect your immigration case. Your responses to these questions will remain both confidential and anonymous. This means that we do not ask you to put your name on this questionnaire and centre staff will not have access to them.

Q47 Do you have a member of staff at the centre that you can turn to for help if you have a problem?
Yes 67 (57%)
No 51 (43%)

Q48 Do most staff at the centre treat you with respect?
Yes 92 (74%)
No 33 (26%)

Q49 Have any members of staff physically restrained you (C and R) in the last six months?
Yes 14 (12%)
No 104 (88%)

Q50 Have you spent a night in the separation/isolation unit in the last six months?
Yes 18 (15%)
No 100 (85%)

Section 8: Safety

In order to assess how safe this centre is, we ask that you fill in the following information. This will not affect your immigration case. Your responses to these questions will remain both confidential and anonymous. This means that we do not ask you to put your name on this questionnaire and centre staff will not have access to them.

Q52 Do you feel unsafe in this centre?
Yes 41 (34%)
No 79 (66%)

Q53 Has another detainee or group of detainees victimised (insulted or assaulted) you here?
Yes 24 (20%)
No 94 (80%) If No, go to question 55

Q54 If you have felt victimised by a detainee/group of detainees, what did the incident(s) involve? (Please tick all that apply to you.)

<i>Physical abuse (being hit, kicked or assaulted)</i>	8 (7%)
<i>Because of your nationality</i>	8 (7%)
<i>Having your property taken</i>	2 (2%)
<i>Drugs</i>	1 (1%)
<i>Because you have a disability</i>	1 (1%)
<i>Because of your religion/religious beliefs</i>	3 (3%)

Q55 Has a member of staff or group of staff victimised (insulted or assaulted) you here?

Yes	23 (20%)
No	94 (80%) If No, go to question 57

Q56 If you have felt victimised by a member of staff/group of staff, what did the incident(s) involve? (Please tick all that apply to you.)

<i>Physical abuse (being hit, kicked or assaulted)</i>	7 (6%)
<i>Because of your nationality</i>	10 (9%)
<i>Drugs</i>	1 (1%)
<i>Because you have a disability</i>	0 (0%)
<i>Because of your religion/religious beliefs</i>	3 (3%)

Q57 If you have been victimised by detainees or staff, did you report it?

Yes	16 (14%)
No	14 (12%)
Not been victimised	83 (73%)

Q58 Have you ever felt threatened or intimidated by another detainee/group of detainees in here?

Yes	21 (19%)
No	90 (81%)

Q59 Have you ever felt threatened or intimidated by a member of staff in here?

Yes	21 (19%)
No	92 (81%)

Section 9: Health care

Q61 Is health information available in your own language?

Yes	45 (37%)
No	42 (34%)
Do not know	36 (29%)

Q62 Is a qualified interpreter available if you need one during health care assessments?

Do not need an interpreter/do not know	67 (59%)
Yes	12 (11%)
No	34 (30%)

Q63 Are you currently taking medication?

Yes	52 (45%)
No	64 (55%)

Q64 What do you think of the overall quality of the health care here?

Have not been to health care	15 (12%)
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Very good.....	12 (10%)
Good.....	32 (26%)
Neither.....	29 (24%)
Bad.....	16 (13%)
Very bad.....	18 (15%)

Section 10: Activities

Q66	Are you doing any education here?	
	Yes.....	7 (6%)
	No.....	115 (94%)
Q67	Is the education helpful?	
	Not doing any education	115 (93%)
	Yes.....	7 (6%)
	No.....	1 (1%)
Q68	Can you work here if you want to?	
	Do not want to work	24 (20%)
	Yes.....	68 (56%)
	No.....	29 (24%)
Q69	Is there enough to do here to fill your time?	
	Yes.....	39 (33%)
	No.....	78 (67%)
Q70	How easy or difficult is it to go to the library?	
	Do not know/do not want to go	8 (7%)
	Very easy.....	66 (55%)
	Easy.....	34 (28%)
	Neither.....	4 (3%)
	Difficult.....	3 (3%)
	Very difficult.....	5 (4%)
Q71	How easy or difficult is it to go to the gym?	
	Do not know/do not want to go	12 (10%)
	Very easy.....	63 (52%)
	Easy.....	40 (33%)
	Neither.....	4 (3%)
	Difficult.....	3 (2%)
	Very difficult.....	0 (0%)

Section 11: Keeping in touch with family and friends

Q73	How easy or difficult is it to use the phone?	
	Do not know/have not tried	10 (8%)
	Very easy.....	40 (34%)
	Easy.....	30 (25%)
	Neither.....	13 (11%)
	Difficult.....	9 (8%)
	Very difficult.....	17 (14%)

Q74	Have you had any problems with sending or receiving mail?	
	Yes	29 (23%)
	No	63 (51%)
	Do not know	32 (26%)
Q75	Have you had a visit since you have been here from your family or friends?	
	Yes	59 (47%)
	No	66 (53%)
Q76	How did staff in the visits area treat you?	
	Not had any visits	43 (38%)
	<i>Very well</i>	15 (13%)
	<i>Well</i>	28 (25%)
	<i>Neither</i>	12 (11%)
	<i>Badly</i>	6 (5%)
	<i>Very badly</i>	8 (7%)

Main comparator and comparator to last time



Detainee survey responses: Brook House IRC 2011

Detainee survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

		Brook House IRC 2011	IRC comparator	Brook House IRC 2011	Brook House IRC 2010
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
Number of completed questionnaires returned		132	984	132	159
SECTION 1: General information					
1	Are you male?	100%	84%	100%	100%
2	Are you aged under 21 years?	12%	11%	12%	11%
4	Do you understand spoken English?	80%	73%	80%	84%
5	Do you understand written English?	77%	66%	77%	78%
6	Are you Muslim?	43%	39%	43%	34%
7	Do you have a disability?	13%	18%	13%	17%
SECTION 2: Immigration detention					
8	When being detained, were you told the reasons why in a language you could understand?	80%	68%	80%	70%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	7%	11%	7%	18%
10	Have you been detained in this centre for more than one month?	65%	54%	65%	
SECTION 3: Transfers and escorts					
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	45%	31%	45%	25%
12	Did you spend more than four hours in the escort van to get to this centre?	24%	25%	24%	26%
13	Were you treated well/very well by the escort staff?	59%	55%	59%	52%
SECTION 4: Reception and first night					
15	Were you seen by a member of health care staff in reception?	88%	86%	88%	90%
16	When you were searched in reception was this carried out in a sensitive way?	71%	67%	71%	69%
17	Were you treated well/very well by staff in reception?	59%	59%	59%	50%
18	Did you receive information about what was going to happen to you on your day of arrival?	40%	33%	40%	20%
19	Did you receive information about what support was available to you in this centre on your day of arrival?	40%	47%	40%	
For those who required information in a translated form:					
20	Was any of this information provided in a translated form?	15%	25%	15%	18%
21	Did you get the opportunity to change into clean clothing on your day of arrival?	60%	57%	60%	36%
22	Did you feel safe on your first night here?	52%	50%	52%	35%
23a	Did you have any problems when you first arrived?	63%	69%	63%	77%
23b	Did you have any problems with loss of transferred property when you first arrived?	14%	21%	14%	27%
23c	Did you have any problems contacting family when you first arrived?	21%	20%	21%	28%

Main comparator and comparator to last time

Key to tables

		Brook House IRC 2011	IRC comparator	Brook House IRC 2011	Brook House IRC 2010
	Any percentage highlighted in green is significantly better				
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 4: Reception and first night continued					
23d	Did you have any problems accessing legal advice when you first arrived?	23%	20%	23%	23%
23e	Did you have any problems with feeling depressed or suicidal when you first arrived?	38%	29%	38%	28%
23f	Did you have any health problems when you first arrived?	18%	29%	18%	28%
For those who had problems on arrival:					
24	Did you receive any help/support from any member of staff in dealing with these problems within the first 24 hours?	31%	33%	31%	14%
SECTION 5: Legal rights and immigration					
26	Do you have a lawyer?	67%	69%	67%	60%
For those who have a lawyer:					
28	Can you contact your lawyer easily?	75%	79%	75%	
29	Have you had a visit from your lawyer?	39%	55%	39%	43%
27	Do you get free legal advice?	32%	42%	32%	39%
30	Can you get legal books in the library?	43%	33%	43%	16%
31	Is it easy/very easy for you to obtain bail information?	37%	30%	37%	17%
32	Can you get access to official information reports on your country?	19%	17%	19%	7%
33	Is it easy/very easy to see this centre's immigration staff when you want?	26%	31%	26%	
SECTION 6: Respectful detention					
35	Can you clean your clothes easily?	75%	86%	75%	
36	Are you normally able to have a shower every day?	97%	94%	97%	96%
37	Is it normally quiet enough for you to be able to sleep in your room at night?	61%	56%	61%	43%
38	Can you normally get access to your property held by staff at the centre, if you need to?	56%	55%	56%	49%
39	Is the food good/very good?	28%	28%	28%	11%
40	Does the shop sell a wide enough range of goods to meet your needs?	43%	34%	43%	15%
41	Do you feel that your religious beliefs are respected?	66%	69%	66%	54%
42	Are you able to speak to a religious leader of your own faith if you want to?	52%	54%	52%	52%
43	Is it easy/very easy to get a complaint form?	75%	49%	75%	39%
44	Have you made a complaint since you have been at this centre?	24%	32%	24%	39%
For those who have made a complaint:					
45	Do you feel complaints are sorted out fairly?	21%	22%	21%	8%

Main comparator and comparator to last time

Key to tables

	Any percentage highlighted in green is significantly better	Brook House IRC 2011	IRC comparator	Brook House IRC 2011	Brook House IRC 2010
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 7: Staff					
47	Do you have a member of staff you can turn to for help if you have a problem?	57%	60%	57%	39%
48	Do most staff treat you with respect?	74%	72%	74%	52%
49	Have any members of staff physically restrained you in the last six months?	12%	14%	12%	17%
50	Have you spent a night in the segregation unit in the last six months?	15%	15%	15%	25%
SECTION 8: Safety					
52	Do you feel unsafe in this centre?	34%	36%	34%	
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	20%	25%	20%	44%
54a	Have you been hit, kicked or assaulted since you have been here? (By detainees)	7%	6%	7%	16%
54b	Have you been victimised because of your nationality since you have been here? (By detainees)	7%	7%	7%	13%
54c	Have you ever had your property taken since you have been here? (By detainees)	2%	7%	2%	13%
54d	Have you been victimised because of drugs since you have been here? (By detainees)	1%	3%	1%	5%
54e	Have you ever been victimised here because you have a disability? (By detainees)	1%	3%	1%	3%
54f	Have you ever been victimised here because of your religion/religious beliefs? (By detainees)	3%	5%	3%	5%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	18%	21%	18%	37%
56a	Have you been hit, kicked or assaulted since you have been here? (By staff)	6%	4%	6%	4%
56b	Have you been victimised because of your nationality since you have been here? (By staff)	9%	7%	9%	15%
56c	Have you been victimised because of drugs since you have been here? (By staff)	1%	2%	1%	1%
56d	Have you ever been victimised here because you have a disability? (By staff)	0%	3%	0%	2%
56e	Have you ever been victimised here because of your religion/religious beliefs? (By staff)	3%	3%	3%	6%
For those who have been victimised by detainees or staff:					
57	Did you report it?	53%	49%	53%	39%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	19%	19%	19%	39%
59	Have you ever felt threatened or intimidated by a member of staff in here?	19%	16%	19%	32%

Main comparator and comparator to last time

Key to tables

Key to tables		Brook House IRC 2011	IRC comparator	Brook House IRC 2011	Brook House IRC 2010
	Any percentage highlighted in green is significantly better	Brook House IRC 2011	IRC comparator	Brook House IRC 2011	Brook House IRC 2010
	Any percentage highlighted in blue is significantly worse				
	Any percentage highlighted in orange shows a significant difference in detainees' background details				
	Percentages which are not highlighted show there is no significant difference				
SECTION 9: Health services					
61	Is health information available in your own language?	37%	36%	37%	39%
62	Is a qualified interpreter available if you need one during health care assessments?	11%	14%	11%	7%
63	Are you currently taking medication?	45%	45%	45%	40%
For those who have been to health care:					
64	Do you think the overall quality of health care in this centre good/very good?	41%	36%	41%	23%
SECTION 10: Activities					
66	Are you doing any education here?	6%	29%	6%	11%
For those doing education here:					
67	Is the education helpful?	88%	86%	88%	91%
68	Can you work here if you want to?	56%	54%	56%	38%
69	Is there enough to do here to fill your time?	33%	41%	33%	19%
70	Is it easy/very easy to go to the library?	83%	73%	83%	71%
71	Is it easy/very easy to go to the gym?	85%	69%	85%	72%
SECTION 11: Keeping in touch with family and friends					
73	Is it easy/very easy to use the phone?	59%	66%	59%	
74	Have you had any problems with sending or receiving mail?	23%	20%	23%	52%
75	Have you had a visit since you have been in here from your family or friends?	47%	46%	47%	53%
For those who have had visits:					
76	Do you feel you are treated well/very well by staff in the visits area?	62%	67%	62%	53%



Key questions (non-English speakers) Brook House IRC 2011

Detainee survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

		Non-English speakers	English speakers
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		26	103
8	When being detained, were you told the reasons why in a language you could understand?	71%	82%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	4%	7%
10	Have you been in this centre for more than one month?	77%	62%
11	Before you arrived here did you receive any written information about what would happen to you in a language you could understand?	21%	51%
13	Were you treated well/very well by the escort staff?	50%	60%
17	Were you treated well/very well by staff in reception?	46%	61%
18	Did you receive information about what was going to happen to you on your day of arrival?	24%	44%
19	Did you receive information about what support was available to you on your day of arrival?	33%	41%
22	Did you feel safe on your first night here?	48%	53%
23	Did you have any problems when you first arrived?	54%	65%
26	Do you have a lawyer?	58%	68%
33	Is it easy/very easy to see the centre's immigration staff when you want?	21%	25%
35	Can you clean your clothes easily?	82%	74%
36	Are you normally able to have a shower every day?	100%	96%
43	Is it easy/very easy to get a complaint form?	57%	79%
44	Have you made a complaint since you have been at this centre?	21%	25%
47	Do you have a member of staff you can turn to for help if you have a problem?	52%	59%
48	Do most staff treat you with respect?	88%	70%
52	Do you feel unsafe in this centre?	32%	35%
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	29%	19%

Key to tables

		Non-English speakers	English speakers
	Any percentage highlighted in green is significantly better		
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	11%	20%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	26%	18%
59	Have you ever felt threatened or intimidated by a member of staff in here?	5%	22%
61	Is health information available in your own language?	26%	39%
62	Is a qualified interpreter available if you need one during health care assessments?	40%	4%
66	Are you doing any education here?	0%	7%
68	Can you work here if you want to?	57%	56%
69	Is there enough to do here to fill your time?	46%	30%
70	Is it easy/very easy to go to the library?	83%	83%
71	Is it easy/very easy to go to the gym?	91%	82%
73	Is it easy/very easy to use the phone?	70%	56%
74	Have you had any problems with sending or receiving mail?	8%	27%
75	Have you had a visit since you have been in here from your family or friends?	21%	55%



Diversity analysis - disability

Key questions (disability analysis) Brook House IRC 2011

Detainee survey responses (missing data have been excluded for each question). Please note: where there are apparently large differences, which are not indicated as statistically significant, this is likely to be due to chance.

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
Number of completed questionnaires returned		16	105
4	Do you understand spoken English?	67%	82%
9	Including this centre, have you been held in six or more places as an immigration detainee since being detained?	14%	6%
10	Have you been in this centre for more than one month?	81%	63%
13	Were you treated well/very well by the escort staff?	56%	58%
15	Were you seen by a member of health care staff in reception?	93%	90%
16	When you were searched in reception was this carried out in a sensitive way?	93%	69%
17	Were you treated well/very well by staff in reception?	75%	56%
22	Did you feel safe on your first night here?	67%	51%
23	Did you have any problems when you first arrived?	64%	65%
23f	Did you have any health problems when you first arrived?	29%	17%
26	Do you have a lawyer?	67%	68%
33	Is it easy/very easy to see this centre's immigration staff when you want?	29%	24%
35	Can you clean your clothes easily?	62%	79%
36	Are you normally able to have a shower every day?	100%	96%
43	Is it easy/very easy to get a complaint form?	79%	73%
44	Have you made a complaint since you have been at this centre?	25%	24%
47	Do you have a member of staff you can turn to for help if you have a problem?	85%	54%
48	Do most staff treat you with respect?	93%	71%
49	Have any members of staff physically restrained you in the last six months?	31%	8%
50	Have you spent a night in the segregation unit in the last six months?	31%	13%

Diversity analysis - disability

Key to tables

	Any percentage highlighted in green is significantly better	Consider themselves to have a disability	Do not consider themselves to have a disability
	Any percentage highlighted in blue is significantly worse		
	Any percentage highlighted in orange shows a significant difference in detainees' background details		
	Percentages which are not highlighted show there is no significant difference		
52	Do you feel unsafe in this centre?	33%	32%
53	Has another detainee or group of detainees victimised (insulted or assaulted) you here?	25%	18%
55	Has a member of staff or group of staff victimised (insulted or assaulted) you here?	31%	14%
58	Have you ever felt threatened or intimidated by another detainee/group of detainees in here?	42%	16%
59	Have you ever felt threatened or intimidated by a member of staff in here?	33%	15%
62	Is a qualified interpreter available if you need one during health care assessments?	8%	11%
63	Are you currently taking medication?	79%	38%
66	Are you doing any education here?	0%	6%
69	Is there enough to do here to fill your time?	62%	29%
70	Is it easy/very easy to go to the library?	77%	85%
71	Is it easy/very easy to go to the gym?	73%	87%
73	Is it easy/very easy to use the phone?	64%	58%
74	Have you had any problems with sending or receiving mail?	29%	21%
75	Have you had a visit since you have been in here from your family or friends?	36%	48%