



CPT/Inf (2006) 26

**Report to the United Kingdom Government  
on the visit to the United Kingdom  
carried out by the  
European Committee for the Prevention of Torture  
and Inhuman or Degrading  
Treatment or Punishment (CPT)**

**from 11 to 15 July 2005**

The United Kingdom Government has requested the publication of this report and of its response. The Government's response is set out in document CPT/Inf (2006) 27.

Strasbourg, 10 August 2006

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**Copy of the letter transmitting the CPT's report**

Strasbourg, 16 November 2005

Dear Mr Kissane,

In pursuance of Article 10, paragraph 1, of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment, I enclose herewith the report to the Government of the United Kingdom drawn up by the European Committee for the prevention of torture and inhuman or degrading treatment or punishment (CPT) following its visit to the United Kingdom from 11 to 15 July 2005. The report was adopted by the CPT at its 58th meeting, held from 7 to 11 November 2005.

The recommendations, comments and requests for information made by the CPT are set out in bold type in paragraphs 12 to 14, 16, 19, 23, 24, 28 to 31, 35, 38 to 40, 42 to 45, 47, 48, 51 and 52 of the report. The CPT requests the United Kingdom authorities to provide within three months a response containing an account of action taken by them to implement the Committee's recommendations and setting out their reactions and replies to its comments and requests for information.

I am at your entire disposal if you have any questions concerning either the CPT's report or the future procedure.

Yours sincerely,

Silvia CASALE  
President of the European Committee for the  
Prevention of Torture and Inhuman  
or Degrading Treatment or Punishment

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## **I. INTRODUCTION**

### **A. Dates of the visit and composition of the delegation**

1. In pursuance of Article 7 of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment (hereinafter referred to as "the Convention"), a delegation of the CPT carried out a visit to the United Kingdom from 11 to 15 July 2005. The visit was one which appeared to the Committee "to be required in the circumstances" (cf. Article 7, paragraph 1, of the Convention).

2. The visit was carried out by the following members of the CPT:

- Mario FELICE (Head of delegation)
- Pétur HAUSSON.

They were supported by Geneviève MAYER, Deputy Executive Secretary, and Hugh CHETWYND, Head of Unit, of the CPT's Secretariat, and assisted by

- Dan DERMENGIU, Director of the National Institute for Forensic Medicine, Bucharest, Romania (expert)
- Mohammad ASSI (interpreter).

### **B. Context of the visit**

3. On 16 December 2004 the House of Lords upheld the appeals made by nine persons, detained under Part IV of the Anti-Terrorism, Crime and Security Act 2001<sup>1</sup> (hereafter the "ATCSA"), on the legality of their detention. The Lords quashed the Human Rights Act 1998 (Designated Derogation) Order 2001 SI N°3644, which had allowed the United Kingdom to opt out of Article 5 of the European Convention on Human Rights (ECHR), and declared the ATCSA Part IV to be incompatible with Articles 5 and 14 of the ECHR<sup>2</sup>.

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<sup>1</sup> cf. CPT/Inf (2005) 10

<sup>2</sup> A (FC) and others (FC) (Appellants) v. Secretary of State for the Home Department (Respondent), <http://www.publications.parliament.uk/pa/ld200405/ldjudgmt/jd041216/a&others.pdf>.

4. As a consequence, the United Kingdom Government introduced draft legislation in order for new measures to be rapidly available to deal with those persons detained indefinitely under the ATCSA, and others, prior to the expiration of the ATCSA on 13 March 2005. The Prevention of Terrorism Act 2005 was adopted on 11 March 2005, and provides for the making of control orders, imposing obligations on individuals (foreign or United Kingdom citizens) whom the Home Secretary believes are involved in terrorism-related activity. These are designed to be preventative orders to restrict or prevent further involvement by individuals in such activity<sup>3</sup>.

5. On 12 March 2005 the Home Secretary issued "non-derogating" control orders on ten individuals previously certified under Part IV of the ATCSA, nine of whom had been detained in Belmarsh and Woodhill Prisons or at Broadmoor Special Hospital until 11 March<sup>4</sup>. The Committee decided to examine the practical operation of the Prevention of Terrorism Act 2005 and to meet with a number of persons served with control orders, many of whom the Committee had met in 2002 and 2004 when they were being held under Part IV of the ATCSA. The delegation interviewed eight persons under control orders in the course of the visit.

Subsequent to the visit, eight of the ten persons under control orders were arrested again on 12 August 2005 and transferred to Full Sutton and Long Lartin Prisons. The persons concerned were detained under the 1971 Immigration Act with a view to being sent back to their countries of origin; in this connection, the United Kingdom authorities have sought to conclude memoranda of understanding with States from the Middle East and North Africa.<sup>5</sup>

6. In the light of these developments, the Committee has decided to carry out a further visit to the United Kingdom, from 20 to 25 November 2005, to examine the treatment of those persons who have been detained pending deportation. The CPT also intends to discuss with the United Kingdom authorities issues arising out of the policy of seeking to conclude memoranda of understanding governing such deportations. The CPT's findings on the operation of the Prevention of Terrorism Act 2005 will be set out in the report on the November 2005 visit.

7. The terrorist bombings in London on 7 July 2005 in no way influenced the timing of the visit by the CPT's delegation, which had been planned in advance. That said, the visit coincided with a number of arrests linked to these tragic events. Consequently, the Committee decided to visit Paddington Green High Security Police Station, with a particular attention on examining the treatment of persons held under the Terrorism Act of 2000 (TACT). Further, the Committee decided to visit Belmarsh Prison as it had received a communication concerning an inmate held on remand in relation to offences under the TACT 2000, who was physically disabled.

The CPT's delegation also decided to interview people detained at Campsfield House Immigration Removal Centre, and to examine conditions of detention in that establishment.

The Committee's findings relating to the matters in this paragraph are set out in the present report.

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<sup>3</sup> cf. paragraphs 8 to 13 of the response of the United Kingdom authorities to the report on the CPT's visit in March 2004 (CPT/Inf (2005) 11) for an overview of the system of control orders.

<sup>4</sup> The other person had been released on stringent bail conditions on 22 April 2004, which included house arrest.

<sup>5</sup> The United Kingdom has already signed Memoranda of Understanding with the Hashemite Kingdom of Jordan, on 10 August 2005, and with the Great Socialist People's Libyan Arab Jamahiriya, on 18 October 2005.

**C. Cooperation received and consultations undertaken during the visit**

8. The CPT's delegation enjoyed excellent cooperation at all levels. It had access to the detention facilities it wished to visit, the individuals whom it desired to interview and the information required to carry out its task.

9. The delegation met Phil WHEATLEY, Director General, and other members of the Prison Service. The delegation also met with representatives of the Terrorism and Protection Unit at the Home Office, during which the operation of control orders under the Prevention of Terrorism Act 2005 and the issue of diplomatic assurances in the context of deportation procedures were discussed. The CPT would like to thank John KISSANE and Ian MAYNARD of the Department for Constitutional Affairs for their assistance, both during and after the visit.

The delegation also met the legal representatives acting for a number of the individuals either detained under the Terrorism Act 2000 or served with control orders under the Prevention of Terrorism Act 2005, as well as mental health professionals providing care to several of these individuals, and representatives of the NGOs Amnesty International, Justice and Liberty.

## II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

### A. Persons detained pursuant to the Terrorism Act 2000

#### a. Paddington Green High Security Police Station

##### 1. Preliminary remarks

10. The CPT's delegation visited Paddington Green High Security Police Station on three occasions during the visit, and had an opportunity to interview a number of persons detained under the Terrorism Act 2000. The Terrorism Act 2000 permits the police, on their own authority, to detain terrorist suspects for a maximum period of 48 hours, and a warrant for further detention may be obtained from a judicial authority for the suspect to remain in police custody up to seven days. This seven day period may currently be extended by judicial decision for a further seven day period<sup>6</sup>.

However, it is now envisaged to amend the above-mentioned provisions so as to increase to 28 days the maximum possible period of custody by the police in cases falling under the terrorism legislation.

11. The existing, and *a fortiori* the likely new, provisions concerning the length of police custody in such cases are a matter of considerable concern to the CPT. Indeed, in the interests of the prevention of ill-treatment, the sooner a criminal suspect passes into the hands of a custodial authority which is functionally and institutionally separate from the police or other investigative authority, the better.<sup>7</sup> If, exceptionally, a criminal suspect does remain in the custody of a law enforcement agency for a prolonged period, there must be stringent judicial scrutiny of the manner in which the person concerned is being treated; above all, that person should be brought before a judge at regular, short, intervals.

12. At present, persons detained under the Terrorism Act 2000 are physically brought within 48 hours before the judge responsible for deciding the question of the possible extension of the detention period up to seven days. However, the detainee is apparently not always physically brought before the judge when the possible extension of police custody for a further period of up to seven days is considered; instead, the CPT understands that in such a case a video conferencing link may be arranged between the judge and the person concerned.

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<sup>6</sup> cf. Section 41 of the Terrorism Act 2000 and paragraphs 29 et seq. of Schedule 8 to the Act.

<sup>7</sup> That said, the fact that the police no longer have custody of the suspect should certainly not preclude them from carrying out further questioning of the person concerned.

The CPT fully accepts that a video conferencing link may be an appropriate manner of proceeding in certain circumstances. However, it is not a suitable way of conducting a hearing into the possible extension of police custody if - as should be the case - one of the purposes of the hearing is to monitor the manner in which the detained person is being treated. From the point of view of making an accurate assessment of the physical and psychological state of a detainee, nothing can replace bringing the person concerned into the direct physical presence of the judge. Further, it will be more difficult to conduct a hearing in such a way that a person who may have been the victim of ill-treatment feels free to disclose this fact if the contact between the judge and the detainee is via a video conferencing link.

**Consequently, the CPT recommends that steps be taken to ensure that persons detained under terrorism legislation in respect of whom an extension, or further extension, of police custody is sought are always physically brought before the judge responsible for deciding this question. Further, the detainee should have the right to be assisted by a lawyer at such hearings.**

13. As regards the periodicity at which the issue of extension of police custody should be re-examined by a judge, **the CPT considers that an interval of no more than four days would be preferable.**

**Further, regardless of the interval provided by law, the competent judge should be empowered to have immediately brought before him, at any stage, a person in police custody whose period of detention under terrorism legislation has been extended beyond 48 hours.**

14. Finally, the CPT is fully aware of the circumstances which led to the introduction and subsequent amendment of the prevention of terrorism legislation in general and of the provisions on detention in particular. **The Committee trusts, nevertheless, that the need for the continued application of the above-mentioned legislation, and in particular the exceptional measures relating to detention by the police, will be kept under close review.**



2. Ill-treatment

15. The delegation heard no allegations of ill-treatment of detained persons by custodial police officers at Paddington Green Police Station.

- (a) However, one person, detained in the afternoon of 11 July 2005, alleged that when he was arrested on the street, the police officers concerned threw him on the ground and inflicted a number of kicks to his head and body. Upon examination by a medical member of the delegation, in the morning of 14 July 2005, the person concerned displayed the following injuries consistent with his allegations: Over the right temple a bruised area (10 x 8 cm) with 2 abrasions covered with a brownish red crust (1 x 0.5 cm and 1 x 0.3 cm) and a superficial laceration (1 x 0.2 cm) covered with a red crust; above the left eyebrow an abrasion covered by a brownish red crust and over the area of the left cheek bone 2 abrasions (0.7 x 0.4 cm and 1.2 x 0.2 cm) covered by a brownish red crust; over the right antero-lateral shoulder area a violet bruised area (11 x 9 cm) streaked with fine linear red-brown abrasions; over the left antero-lateral shoulder area a greenish-yellow bruised area (10 x 8 cm) streaked with fine linear brownish red abrasions; over the left side of the upper back 2 parallel linear abrasions (9 x 1 cm); over lateral aspect of the right elbow a violet bruised area (2 x 2.5 cm) with 3 parallel, linear abrasions, covered with brownish red crust; over the antero-lateral aspect of the left knee a red linear abrasion (2 x 0.1 cm).
- (b) Moreover, the delegation met two detained persons, who had been arrested in the early hours of the morning of 12 July 2005, and whose movements and appearance suggested they were in physical pain. The two persons were held in separate cells and each one explained, when interviewed<sup>8</sup>, that in the seconds after the police broke down the door to their apartment they were propelled to the floor, face down, whereupon they were handcuffed. When examined by a medical member of the delegation, the following marks were observed:
- (i) In respect of one person: below left shoulder blade and on the right shoulder blade area, 2 circular red-violet bruises (5 cm in diameter) with an abraded circumference, encircled by a bruised halo, with the underlying tissues severely swollen; a third almost identical injury over the right lower back area; a similar injury over the left antero-lateral shoulder area.
- (ii) In respect of the other person: on the back 2 circular red-violet bruises (5 cm in diameter) (one in the area between the shoulder blades, another below the tip of the left shoulder blade), with an abraded circumference, encircled by a bruised halo, with the underlying tissues severely swollen; a blue bruise (1.5 x 1cm) at the internal corner of the right eye; over the anterior aspect of the left knee a superficial linear red abrasion (1.5 x 0.2 cm).

Such marks could be indicative of injuries sustained when police officers use incapacitating devices.

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<sup>8</sup> The delegation interviewed one of the persons in the late afternoon of 12 July and both of them separately in the morning of 14 July 2005, after they had been transferred to the non-secure custody suite.

It is noteworthy that in neither of the cases referred to in sub-paragraph (b) did the “forensic medical examination” forms, filled out after the suspects were admitted to the high security custody suite at Paddington Green Police Station, describe the above-mentioned injuries (cf. paragraph 18).

16. The CPT recognises that the arrest of a suspect is often a hazardous task, in particular if the person concerned resists and/or is someone whom the police have good reason to believe may be armed and dangerous. The circumstances of an arrest may be such that injuries are sustained by the person concerned (and by police officers), without this being the result of an intention to inflict ill-treatment. However, no more force than is strictly necessary should be used when effecting an arrest. Furthermore, once arrested persons have been brought under control, there can be no justification for their being struck by police officers. **The CPT recommends the United Kingdom authorities to remind police officers once again of these precepts.**

**Further, the CPT requests the United Kingdom authorities to verify the circumstances of the arrest of the two persons referred to in paragraph 15 (b), and to inform the Committee of any report thereon.**

### 3. Safeguards against ill-treatment by the police

17. The information gathered during the July 2005 visit suggests that, as regards persons detained on suspicion of offences of a terrorist nature, the three basic safeguards against ill-treatment by the police advocated by the CPT (rights of notification of custody, access to a lawyer and access to a doctor)<sup>9</sup> on the whole operate in a satisfactory manner. The fact that the detainees were offered the possibility of access to a lawyer from the outset of their detention is extremely positive.

In this respect, the Committee is pleased to note that a provision on the question of access to another lawyer when access to a specific lawyer is delayed, has now been incorporated in the Code of Practice for the detention, treatment and questioning of persons by police officers, which entered into force on 31 July 2004<sup>10</sup>.

However, the CPT’s delegation observed that the recording of some of the medical examinations was at times of such a rudimentary nature as to weaken the effectiveness of the safeguard.

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<sup>9</sup> cf. *inter alia*, Schedule 8, paragraphs 6 to 9, to the Terrorism Act 2000.

<sup>10</sup> cf. Annex B to the Code (Code C), which applies to both persons detained under the Police and Criminal Evidence Act 1984 (PACE) and persons detained under the Terrorism Act 2000.

18. With regard to the cases referred to in paragraph 15 (b) above, the delegation observed that the “forensic medical examination” forms did not in the first instance describe the injuries at all. Subsequent examinations of the persons concerned appeared to be equally cursory, as the records merely noted “injury in the back”. Only in respect of one of them during a third examination, by a different doctor, more than 24 hours after the suspects were admitted into custody, were the injuries fairly well described. The logic of these medical records could lead one to draw the conclusion that the injuries recorded were sustained while in custody in Paddington Green Police Station. As far as the CPT has ascertained, such a conclusion would be unfair.

19. A forensic examination requires that each injury must be appropriately documented in terms of type (bruise, abrasion, etc.), exact location, shape, dimensions and colour. Each description of an injury should be accompanied with an estimation as to its age, the type of object that may have caused the injury (blunt; sharp edged; pointed; etc.) and the mechanics involved.

The regular system of examinations by a doctor of all detainees, which is in place at this police station, is positive. However, for the “forensic medical examination” to be meaningful and reliable the visiting doctors must be systematic in carrying out their duties. **The CPT recommends that the United Kingdom authorities remind all doctors visiting Paddington Green Police Station of the importance of carrying out thorough medical examinations of detained persons and of recording in full their findings.**

**Further, it is axiomatic that the file drawn up after the examination should contain a full account of statements made by the person concerned which are relevant to the medical examination (including the description of his/her state of health and any allegations of ill-treatment), and that the doctor should indicate the degree of consistency between allegations made and objective medical findings. In addition, the results of every examination should be made available to the detained person and his lawyer.**

#### 4. Conditions of detention

20. The CPT’s general criteria in relation to conditions of detention in police stations are well known to the United Kingdom authorities<sup>11</sup>.

21. The custody suite within Paddington Green Police Station can be divided into two distinct sections; a non-secure custody suite for ordinary criminal suspects and a secure custody suite for terrorist suspects. Conditions of detention in both sections were suitable for short periods of stay. In particular, cells in both custody suites were of an adequate size (approximately 8.5m<sup>2</sup>, the juvenile detention cell being much larger, approximately 18m<sup>2</sup>), reasonably well lit and adequately ventilated, and were equipped with a call system, a means of rest (raised platform) and a toilet. Detained persons were offered a mattress (with washable cover) and blankets, and the cells were clean. Arrangements for the provision of food were entirely satisfactory. Moreover, all necessary measures were taken to observe the religious rites of the detainees.

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<sup>11</sup> cf. CPT/Inf (96) 11, paragraph 11.

22. The delegation was informed that persons detained in the secure custody suite were provided with 15-30 minutes outdoor exercise every day in a section of the vehicle park that could be made secure. A detainee, being held in the secure custody suite, confirmed he had been provided with outdoor exercise. However, the delegation met three persons who had been detained initially in the secure suite, and thereafter in the non-secure suite, and who, after some 54 hours in custody, had had no shower nor any outdoor exercise.

23. The CPT has noted that custody by the police is in principle of relatively short duration for persons deprived of their liberty under the Police and Criminal Evidence Act 1984. Consequently, material conditions of detention cannot be expected to compare with those in other places of detention (e.g. prisons) where persons might be held for lengthy periods. However, if persons are held in detention more than 24 hours they should be offered the opportunity of at least one hour of outdoor exercise every day and access to a shower facility. **The CPT recommends that the necessary measures be taken to this effect.**

24. The length of detention will naturally have an influence on the conditions of detention to be expected in the police stations concerned. As the statistics on arrests under TACT 2000 show, some 36 persons have been held for periods in excess of seven days between January 2004 and September 2005<sup>12</sup>. Further, it is now envisaged, as mentioned above, to increase to 28 days the maximum possible period of custody by the police under the terrorism legislation. **It should be noted in this connection that the present conditions at Paddington Green High Security Police Station are not adequate for such prolonged periods of detention.**

**b. Belmarsh Prison**

1. Preliminary remarks

25. The Committee has had the occasion to visit Belmarsh Prison several times over the past few years, primarily in respect of persons who were formerly held under Part IV of the ATCSA but also some individuals held in relation to offences under the Terrorism Act 2000 (TACT)<sup>13</sup>. On this occasion the CPT's delegation examined the treatment pertaining to a person with physical impairments held in the high security unit of the Prison.

26. It should be noted at the outset that the prisoner concerned made no allegations of ill-treatment by the prison staff.

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<sup>12</sup> cf. letter of 6 October 2005 from the Home Secretary to Rt Hon David Davis MP and Mark Oaten MP.

<sup>13</sup> cf. CPT/Inf (2003) 18 and CPT/Inf (2005) 10.

## 2. Conditions of detention

27. As to the material conditions of the prisoner's detention, he is held in a cell in the high security unit, which contains up to 12 persons in each of the four spurs. Each cell is approximately 9m<sup>2</sup> (a satisfactory size for an individual cell) and equipped with a fixed metal bed, table, toilet and sink. There is sufficient natural light and artificial lighting. The bedclothes are changed regularly and the level of hygiene in the cell is satisfactory.

However, the individual in question has lost both his forearms and his left eye, apparently from an anti-personnel mine. The layout of the cell is not at all adapted for people with physical disabilities, such as those of this person. Moreover, the fixed metal furnishings all represent potential dangers for his exposed forearm stumps and the water in the sink is operated through pushing down quite forcefully, and at regular intervals, on the knobs of the taps. Similarly, neither the toilet nor the curtains are adapted for someone with physical disabilities, and even the bed poses a challenge.

28. This is the second time that the CPT has examined the conditions of detention in Belmarsh Prison for persons with severe physical disabilities<sup>14</sup>. It is evident that the cell in the high security unit is not designed to meet the particular needs of someone with no forearms or any other major physical disability. Re-designing and re-furbishing one or more cells to meet the needs of physically disabled persons would resolve the problem. This might also entail adapting the security policy operating in the high security unit, which requires inmates to change cells on a random basis every 28 days, for severely disabled prisoners. **The Committee recommends that the United Kingdom authorities make the necessary adaptations in the high security unit, in the light of these remarks.**

29. As for the regime in the high security unit, the prisoner in question, like all the other inmates at the time of the visit, was on the so-called "normal" regime, which allows for one hour of outdoor exercise and up to two hours of association time in the spur every day, with the possibility of access to educational courses. On Fridays, the Muslims in the high security unit can attend prayers.

**That said, the regime in the high security unit should certainly be further developed, with a view to offering more out-of-cell time and purposeful activities.**

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<sup>14</sup> cf. CPT/Inf (2005) 10.

3. Health related issues

30. Although the prison had paid for new prosthetic devices for the prisoner, he was unable to wear them for more than 10 to 20 minutes per day, as he suffered from a serious skin disease (psoriasis) on the stumps of his forearms. Thus, wearing the prosthetics causes him pain. An examination of the stumps confirmed the severe condition of the skin.

From an examination by a medical member of the delegation it was evident that his skin condition was not being adequately treated. While a nurse attended the prisoner in the morning and evening to assist him with his daily needs (he has immense difficulties urinating and defecating unaided), in the intervening period no assistance was provided, for example, to apply the ointments and other care required for his skin condition. His condition required more direct care in treating his psoriasis than he was receiving at the time of the delegation's visit. **The CPT recommends that the necessary steps be taken to ensure that the prisoner receives the appropriate care for his skin condition.**

31. In addition to his physical disability the prisoner is a diabetic, requiring close monitoring and a special diet. In examining his "Inmate medical record", the delegation noted that the most recent blood glucose result dated back more than 6 months. Apparently, it was a question of filing. However, as other more recent (non-glucose) blood tests were in the record, and given the importance for a diabetic to receive regular blood glucose testing, **this matter should be verified.**

## **B. Immigration detainees**

### 1. Preliminary remarks

32. The administrative detention of foreign nationals is governed by paragraphs 16 to 21 of Schedule 2 of the Immigration Act 1971 (as amended). The power to detain foreign nationals is exercised by officials of the Immigration Service<sup>15</sup>. Such detention is not subject to any time limit.

33. The CPT's delegation visited Campsfield House Immigration Removal Centre. This was the second visit by the Committee to this facility, the first having taken place in 1994<sup>16</sup>. The facility is now used for holding males over 18 years of age prior to their removal from the country. Persons detained include those who no longer possess valid papers, illegal entrants and failed asylum seekers, as well as a number of persons whose cases have not been determined but are assessed as being likely to abscond. With a capacity of 184<sup>17</sup>, the Centre held 163 detainees at the time of the visit. On average people are detained for periods of around 15 days prior to being deported but, at the time of the delegation's visit, 14 persons had been in the Centre for over three months and one individual for 10½ months.

34. The Centre is managed by Global Solutions UK Ltd (GSL), a private contractor, on behalf of the United Kingdom Immigration Service. An on-site monitor from the Immigration and Nationality Directorate (IND) of the Home Office is responsible for ensuring the terms of the contract are met.

35. The Committee heard no allegations of ill-treatment of detainees by staff. In fact, the overall atmosphere was relaxed and the major complaints from detainees related to their particular cases.

The Committee would nevertheless like to recall the absolute prohibition of sending people back to countries where they face a real risk of torture or inhuman or degrading treatment or punishment. In this respect, the CPT's attention was drawn to the fact that a number of persons in Campsfield House and other Immigration Removal Centres had gone on hunger strike, in June 2005, in protest to a Home Office policy to send failed asylum seekers back to Zimbabwe. Subsequently, the policy of returning persons to Zimbabwe was halted pending the decision of the Asylum and Immigration Tribunal (AIT) as to whether Zimbabwe can be considered a safe country. On 14 October 2005 the AIT found evidence that failed asylum seekers returning to Zimbabwe faced persecution, and hence could not be deported. **The CPT would like to receive information from the United Kingdom authorities with regard to the current policy towards failed asylum seekers from Zimbabwe.**

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<sup>15</sup> The Home Secretary is endowed with analogous powers under Section 62 of the Nationality, Immigration and Asylum Act of 2002.

<sup>16</sup> cf. CPT/Inf (96) 11, paragraphs 196 to 225.

<sup>17</sup> Soon to be increased to 198.

## 2. Conditions of detention

36. The material conditions in the centre were generally good. The accommodation consisted of a mixture of single and double bed rooms, and dormitories of six and seven beds. The recent introduction of a rewards policy for tidy rooms had apparently borne fruit and the delegation observed a clean and hygienic environment in the accommodation areas. The rooms were of an adequate size (a double room was approximately 10.5m<sup>2</sup>), appropriately furnished and enjoyed natural light and artificial lighting. The sanitary facilities were in a satisfactory state of cleanliness and repair.

37. The three meals per day were on a self-service basis with 1½ hours allocated for each meal. Tea and coffee were available in the morning, afternoon and evening. The staff also used the self-service restaurant and ate their meals with the detainees. The food was culturally varied and sufficient, and possibilities existed for special dietary needs.

38. As regards regime, it should be noted that the bedrooms were never locked. Detainees were, nevertheless, encouraged to be in their rooms between midnight and 7 a.m. The centre provided a range of activities: day rooms where the detainees could either associate or watch television; a games room with board games, table tennis, billiards tables, etc.; a well-equipped fitness room supervised by a qualified member of staff; and various sports activities that could take place in a large indoor sports hall. Outdoor activities could take place in an internal courtyard, and a garden area with benches and smoking points was available to the detainees. The Centre also had two classrooms where various courses were organised, notably English language lessons and computer studies. A large room was used for arts and crafts activities, as well as a cinema. There was a multi-faith prayer room, a mosque and a Christian chapel and a team of clergy administered to the religious needs of the detainees.

To sum up, the range of activities could be considered as satisfactory given the average length of stay. However, for those people remaining for a prolonged period **additional efforts are required to offer them a wider range of purposeful activities, including work opportunities.**

39. There were many complaints about the length of the reception process, and managers admitted that a lack of space combined with limited staff resulted in the procedures taking a considerable time to complete. If there were more than six arrivals at once the detainees would have to remain in the transport vehicle<sup>18</sup>. The delegation was informed that there were plans to carry out extensive refurbishment, now that the uncertainty over the Centre's future was removed. **The CPT would like to receive information on the proposed plans for refurbishing the Centre.**

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<sup>18</sup> Some detainees informed the delegation that they waited four hours in the transport vehicle before being let into the reception area.



40. The delegation was also informed about the sometimes excessively long period of time detainees had to spend in transit from one place of detention to another. The arrangements made for the transport of detainees should allow for the provision of food and drink and access to a toilet. **The Committee would like to receive the comments of the United Kingdom authorities on this issue.**

### 3. Contact with the outside world

41. An efficient pager system operated, alerting detainees about incoming calls and other messages. For outgoing calls a phone card system was in place. There was a sufficient number of telephones for both incoming and outgoing calls, placed at strategic points around the Centre. Upon arrival the detainee was allowed to make one phone call at the expense of the Centre.

42. As to social visits, they could take place between 2 and 5 p.m. and from 6 to 9 p.m. every day. To facilitate access, a free shuttle bus service runs between the Centre and Oxford Railway Station between 1.30 p.m. and 9 p.m. Up to three adults plus children could visit a detainee at one time. The visitor's centre was bright and spacious, but was crammed with tables and chairs and, if filled to capacity, would be cramped and noisy. The provision of some children's toys and DVDs was positive, but the space available was minimal if the visitor's room was full. **The CPT invites the United Kingdom authorities to address these issues accordingly.**

### 4. Health care

43. The delegation was informed that a general practitioner visits the Centre Monday to Friday. However, from interviews carried out by the delegation it appeared that the presence of the doctor was insufficient. In addition there are six nurses working in shifts, with two present in the mornings and one in the afternoon. A permanent presence is assured between 9 a.m. and 10 p.m. Although the nursing staff appeared professional and available, they cannot substitute for the doctor. **The CPT recommends that steps be taken to ensure the regular presence of the general practitioner in the Centre.**

44. The CPT is also concerned by the manner in which the initial screening takes place. It consists solely of the nurse asking a detainee to fill out a questionnaire. In the CPT's view, every newly admitted detainee should be properly interviewed and physically examined by a medical doctor as soon as possible after his admission. Such medical screening on admission could also be performed by a fully qualified nurse reporting to a doctor. **The CPT recommends that the necessary measures be taken to this effect.**

45. There was no trained professional to provide psychiatric/psychological care. For many of the detainees, not knowing what the future holds represents a stressful condition and these individuals may require treatment. Although, there is in theory a policy to identify persons with suicidal tendencies and place them on “suicide watch”, there are no qualified persons to make such evaluations. The suicide of a detainee, who was not identified as being at risk, on 26 June 2005 highlights this fact. The CPT is conscious of the large turnover of detainees through the Centre; it nevertheless **recommends that measures be taken to provide psychological and psychiatric assistance for the detainee population.**

## 5. Staffing

46. The CPT has constantly stressed the importance of ensuring that staff in centres for foreigners are carefully selected and receive appropriate training. As well as possessing qualities in the area of interpersonal communication, the staff concerned should be familiarised with the different cultures of the detainees and at least some of them should have relevant language skills. Ideally, they should be taught to recognise possible symptoms of stress reactions displayed by detained persons and to take appropriate action.

47. The rapid turnover of detainees poses a particular challenge at Campsfield House. Hence, it is especially important that the full complement of staff are employed and present, and each member receives the required training, including refresher courses, to carry out their tasks. Regrettably, it is evident from the figures provided to the delegation, interviews with staff and detainees, and observations made, that there is a staffing problem<sup>19</sup>. Not only is there a shortage of staff, but there is also a rapid turnover<sup>20</sup>. It appears that working at Campsfield House is considered for many as a stop-gap job. The reasons are no doubt varied and include, among others, a combination of relatively long hours (four shifts of 12 hours per week), a remuneration package that is considered low when compared with prison officers, few incentives or opportunities for career development and location in a high employment area of the country.

Possessing the proper mix of qualified and motivated staff is essential for running a centre such as Campsfield House. This implies that the package offered to employees should be competitive. **The CPT recommends that United Kingdom authorities take the necessary measures to ensure appropriate staffing levels at Campsfield House.**

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<sup>19</sup> Out of an official complement of 84 detention centre officers there were 17 vacancies at the time of the delegation’s visit.

<sup>20</sup> According to the Centre Manager, on average 1.5 staff members leave the Centre every month.

48. Further, the CPT's delegation was informed that the four immigration officers present on-site, and available to provide advice to the detainees about their particular cases, would be re-locating out of the Centre. If this is the case, it will result in further stress and anxiety for the detainees as the uncertainty will be greater. This in turn will require greater people skills and psychological support from the staff. **The Committee would like to be informed whether the immigration officers have been re-located; if so, what are the reasons behind the re-location, and what procedures have been put in place thereafter to deal with the individual concerns of the detainees pertaining to their cases?**

6. Placement in isolation

49. Isolation is referred to as "removal from association" and is used by the management as a means of permitting agitated detainees to be given space and time to cool off and, in particular, for periods prior to deportation. In the first six and a half months of 2005 the isolation rooms accommodated 38 individuals for periods ranging from 5 hours to 3½ days, and in one case for 14 days. The isolation unit is located on the first floor above the induction unit and consists of up to five rooms, a toilet, shower and a room for the supervising staff member. The corridor with the isolation rooms is at the end of an accommodation block and, at times, some of the isolation rooms are used as single bedrooms. The corridor can be fitted with partitions when the isolation rooms are in use, thus separating them from the rest of the accommodation block. The rooms themselves measure a mere 4.2m<sup>2</sup>.

50. The secure segregation unit is used mainly for placing aggressive detainees until they calm down. In the first six months of 2005, the unit accommodated 18 persons, for periods ranging from 6 to 28 hours. The unit is located outside the accommodation block and comprises two pre-fabricated metallic rooms with an entrance area for the supervising staff member to observe the detainee. The rooms are small (4.2m<sup>2</sup>) but adequately equipped, with a toilet, a sink built into a cavity in the wall and a metallic bunk on which a foam mattress is placed. The natural light and artificial lighting are sufficient and there is a ventilation system. A staff member is supposed to check on the detainee every 15 minutes.

51. The size of the rooms in the isolation unit is scarcely adequate for periods longer than a few hours; consequently, the **CPT recommends that the rooms be enlarged.**

**Further, the CPT would like to be informed about when the secure segregation unit will be replaced with a more permanent structure and to receive the plans for the new unit. The rooms in the new structure should be larger than those in the present prefabricated facility.**

52. It should be noted that neither removal from association nor temporary confinement in the segregation unit are disciplinary measures. As explained above they are designed for the security and safety of the detainee, in the former case, and to permit a refractory or violent detainee time to calm down, in the latter case. The Detention Centre Rules 2001 explicitly forbid such confinement to be used for the purpose of punishment. Further, the Rules provide for each detainee to be informed in writing within two hours of the reasons for their removal from association, and a member of the visiting committee, the medical practitioner and the manager of religious affairs to be notified immediately. With regard to segregation, the Secretary of State must approve such confinement beyond 24 hours and in no instance should it exceed three days. In general, it appeared to the delegation that these measures were being applied in accordance with the relevant rules.

**The CPT would nonetheless like to receive information on the avenues of appeal open to a detainee against his placement in either the isolation or the segregation unit.**