



CPT/Inf (2006) 27

**Response of the United Kingdom Government  
to the report of the European Committee  
for the Prevention of Torture and Inhuman  
or Degrading Treatment or Punishment (CPT)  
on its visit to the United Kingdom**

**from 11 to 15 July 2005**

The United Kingdom Government has requested the publication of this response. The report of the CPT on its July 2005 visit to the United Kingdom is set out in document CPT/Inf (2006) 26.

Strasbourg, 10 August 2006

RESPONSE BY THE UNITED KINGDOM GOVERNMENT  
TO THE EUROPEAN COMMITTEE FOR THE PREVENTION OF TORTURE  
FOLLOWING ITS VISIT TO THE UNITED KINGDOM  
FROM 11 TO 15 JULY 2005

**INTRODUCTION**

1. The Government of the United Kingdom is pleased to provide this response to the report by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) following the Committee's visit to the United Kingdom from 11 to 15 July 2005.
2. The response follows in sequence the issues raised in the CPT's report. Extracts from the report relating to those issues are reproduced in bold typeface with paragraph references.
3. The Government would like to thank the Committee for its report. The Government has given serious consideration and responded comprehensively to the findings and recommendations of the report.
4. It is important to recognise the current circumstances facing the United Kingdom. The threat to the United Kingdom posed by terrorism is very real and serious as the events of 7 July 2005 tragically demonstrated. It is a fundamental responsibility of a Government to do everything it can to defend its citizens from terrorist attacks. The Government has acted to protect its citizens in the face of these threats and is satisfied that the anti-terrorism measures in place are a necessary and proportionate response to the threat faced by the country.
5. The Government believes that it has managed to respond to the very real threat to national security posed by terrorism, while respecting civil liberties and human rights. We abide by our human rights obligations under international law, including the United Nations Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, and the European Convention for the Protection of Human Rights and Fundamental Freedoms (ECHR). The United Kingdom has numerous safeguards in place to ensure that standards are maintained and due diligence is applied, including a number of independent bodies which provide regular scrutiny and accountability.
6. We respect and promote human rights not only because it is the correct thing to do but because it is one of the most effective ways to undermine terrorists. Equally, counter-terrorism measures are there to help us preserve a democratic and free society. Those people subject to control orders or deportation on national security grounds are affected as individuals by those laws because they pose a substantial threat to the safety of our society. At the most basic level, measures which protect innocent civilians from attack are supporting one of the most basic human rights of all – the right to be alive – and they protect all people's ability to enjoy their other rights.

**CO-OPERATION BETWEEN THE CPT AND UNITED KINGDOM AUTHORITIES**

7. The Government is pleased to note the Committee's comment that the visiting delegation enjoyed excellent co-operation at all levels during its visit, and that it had access to the detention facilities it wished to visit, the individuals it desired to interview, and the information needed to carry out its task (CPT/Inf (2006) 26, paragraph 8). The Government is also pleased to note the positive comments made by the Committee with regard to detainees' access to lawyers (CPT/Inf (2006) 26, paragraph 17), and the relaxed atmosphere at Campsfield House (CPT/Inf (2006) 26, paragraph 35).

## **ISSUES RAISED BY THE COMMITTEE**

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

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

##### **Paragraph 12 Recommendation by the Committee**

**...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**

8. The Government believes that robust and appropriate safeguards are in place to protect the rights of individuals detained under the Terrorism Act 2000 (TACT).
9. Those arrested under section 41 of TACT are detained under the provisions of Schedule 8 to TACT, which provides for the treatment and detention of terrorist suspects. The wider provisions of the Police and Criminal Evidence Act 1984 (PACE) Code C on the detention, treatment and questioning by police officers also apply to those arrested under section 41.
10. A separate Code of Practice for the detention of terrorist suspects has been produced. The Code expands on the provisions of PACE Code C for the purposes of terrorist detentions and includes various safeguards against the mistreatment of detainees.
11. Schedule 8 to TACT includes procedures for granting warrants for extension of detention. For security reasons, hearings may be conducted via video link between the court and the place of detention.
12. A judicial authority may grant a warrant of further or extended detention only if satisfied that detention continues to be necessary to obtain or preserve relevant evidence, and that the investigation is being conducted diligently and expeditiously. Detainees have a right of access to free legal advice during their detention and may raise any issues concerning their care or treatment at any time.
13. Furthermore, a detainee may make oral or written representations to the judicial authority about any application for extended detention, and they are entitled to be legally represented at the hearing. Such representations are subject to no restriction and may therefore include complaints about treatment in custody. If there are concerns regarding the detention of a suspect, a solicitor can also make this known to the judicial authority, who has ultimate responsibility for deciding whether physical presence of a detainee at a hearing is necessary.

**Paragraph 13**  
**Comment by the Committee**

**...[with regard to the periodicity at which the extension of police custody should be re-examined] the CPT considers that an interval of no more than four days would be preferable.**

14. The Government is satisfied that there are appropriate procedural safeguards in place governing pre-charge detention. Extensions to detention are subject to regular scrutiny and review by the court and can be made for periods of up to five days until the initial seven-day period is reached. It is then possible to grant an extension for a maximum of a further 7 days. The decision to extend the period of detention is made by the courts. If the judicial authority does not believe that the length of time cited in an application for extended detention is necessary for obtaining or preserving relevant evidence, he may refuse to grant the extension or may grant an extension for a period of time shorter than that requested. This judicial discretion, in the context of maximum extensions of up to five days in the first instance and thereafter seven, ensures that extensions are never granted beyond the period considered appropriate by the judicial authority.
15. Schedule 8 to TACT also provides that any person subject to extended detention be released if it becomes clear that the grounds upon which the extension has been granted cease to exist.
16. The Terrorism Act 2006 makes a number of changes to the provisions relating to detention, though commencement of these provisions will not take place until the appropriate Code of Practice is in force. The proposed maximum period of detention has been set at 28 days. However, detentions beyond 14 days will now be supervised at a more senior judicial level – by a High Court Judge, rather than by a District Judge. As under the existing arrangement, judges will only be able to grant extensions to a maximum of seven days at a time, but may grant shorter extensions if they feel this would be appropriate.

**Paragraph 13**  
**Recommendation by the Committee**

**...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.**

17. Once a judge has made an order, it is the responsibility of the police to carry out the investigation in a diligent and expeditious manner with a view either to releasing the detainee once enquires are complete, or charging them, or seeking an extension of detention.
18. There is no provision in Schedule 8 to TACT specifying the interval within which a judge must have a detainee brought before him; but if such a request were made, it is likely that it would be complied with as soon as it was practicable to transfer the detainee to the court.
19. The Government is not aware of such a request ever having been made by a judge.

**Paragraph 14**  
**Comment by the Committee**

**The CPT trusts... that the need for continued application of [the Terrorism Act 2000], in particular the exceptional measures relating to detention by the police, will be kept under close review.**

20. The powers in the Terrorism Act 2000 are subject to independent scrutiny and review. The independent reviewer, currently Lord Carlile of Berriew QC, carries out an annual review of the operation of the Act and his reports are laid before Parliament. As part of his review he has visited facilities such as Paddington Green Police Station to assess the conditions and operating procedures for detainees.

**Paragraph 16**  
**Recommendation by the Committee**

**The CPT recommends that the United Kingdom remind police officers [that 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].**

21. Police officers should use no more force than is reasonably necessary in the circumstances to effect an arrest. Individual officers risk disciplinary action or criminal prosecution if they use excessive force or act outside the powers they are given by law. Similarly, chief officers may face civil proceedings if their officers act unlawfully or inappropriately.
22. Police officers are trained in a number of unarmed or empty hand restraint methods and in the use of a number of items of defensive equipment, including batons, CS spray and handcuffs. Officers are taught the medical implications of blows to different areas of the human body and how to provide appropriate aftercare. Instruction and guidance on the law in relation to the use of force, and the principle that this should be used as the basis for operational decision making, also forms an important part of training for police officers. The training also includes use of communication skills to avoid conflict and confrontation.
23. However, as the business of policing is so diverse, it will never be possible to train a police officer precisely how to deal with every possible type of situation. It is inevitable that occasions will arise where individual officers will act otherwise than in accordance with their training. In such cases, officers are expected to act reasonably and within the law. Guidance and training for police officers provided by the Association of Police Chief Officers (ACPO) is reviewed and updated each year.
24. The UK Government, the Police Service and the Home Office would deplore the use of any physical violence by police officers against any detainee, whatever the reason for their arrest. The Police and Criminal Evidence Act 1984 (PACE) and the Police Reform Act 2002 are designed to prevent such actions, but in the extremely unlikely event of such behaviour occurring, the Acts provide specific measures for the detainee to make an official complaint.
25. The Independent Police Complaints Commission (IPCC) was created in April 2004 to replace the Police Complaints Authority. It provides a robust, open and independent system for dealing with complaints against the police. The IPCC can determine what type of investigation is appropriate for a particular incident.
26. Provisions in the Police Reform Act 2002 are intended to ensure that all investigations under the new system comply with the procedural requirements of the ECHR wherever these rights are engaged.

27. The Police Reform Act also made it a statutory requirement that all detainees must be allowed visits from independent custody visitors. These are members of the local community who visit police stations unannounced to check on the welfare of people in custody. Independent custody visitors are required to maintain independence and impartiality. They do not take sides but look, listen and report on what they find in the custody unit. On arrival at the police station, the custody visitors are escorted to the custody area. Detainees are identified by their custody numbers and strict rules of confidentiality apply. For protection of custody visitors, interviews with detainees are normally carried out within sight, but out of hearing, of the escorting officer.

**Paragraph 16  
Request by the Committee**

**The CPT requests the United Kingdom authorities 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.**

28. Both persons referred to in paragraph 15(b) of the CPT's report were initially arrested and detained on suspicion of involvement in the commission, preparation, or instigation of an act (or acts) of terrorism under Section 41 of the Terrorism Act. The arrests were made as a result of the execution of a search warrant obtained from magistrates under Schedule 5 of the Act, and were carried out in accordance with standard procedures.
29. Records indicate that when one of the detainees was initially seen by the CPT physician, two forensic medical examination forms were in existence. Both forms noted injuries allegedly received on arrest, and the treatment recommended following each examination.
30. At least one medical examination form had been completed on the other detainee. This noted that the person detained had complained of injuries, and that he had been recommended treatment consisting of general painkilling tablets. This indicates that he had been subject to a medical examination. An additional form completed the day after the CPT examination described the injuries complained of in fuller detail, and the examining doctor noted that, despite those, the detainee was fit and well with 'no problem'.

**Paragraph 19  
Recommendation by the Committee**

**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.**

31. All detainees are entitled to receive appropriate medical care and treatment, whatever the reason for their arrest. Detainees have a right to request a health practitioner and the custody officer is required to comply with that request. The conduct of a medical examination is a matter for the healthcare professional. A police officer cannot direct a healthcare professional and any medical examination or intervention by the healthcare professional will be subject to the consent of the detainee.
32. The Codes of Practice under the Police and Criminal Evidence Act 1984 (PACE) make it a requirement that a full record is kept of the reasons why a health practitioner was called to see a detainee and of any clinical directions and advice given.
33. Guidance for doctors is set out in "Healthcare of detainees in police stations" published jointly for the Association of Forensic Physicians and the British Medical Association. A copy is attached at Appendix 1 to this document.

**Paragraph 19**  
**Comment by the Committee**

**...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.**

34. Following examination of a detainee, healthcare professionals are required to record any clinical findings and directions in the custody record, unless there is information that must remain confidential and is not relevant to the effective ongoing care and well-being of the detainee. In such cases, an entry must be made in the custody record indicating where the clinical findings are recorded.
35. In addition, the custody record must contain a record of any request by the detainee for an examination; any decision by the custody officer to require a medical examination (and the reasons for such a requirement); details of arrangements made for an examination by an appropriate healthcare professional; and any clinical directions and advice.
36. The custody record must be made available to the solicitor or another appropriate adult as soon as practicable after their arrival at the police station and at any other time while the person is detained. The detainee, solicitor, or another appropriate adult are entitled to inspect the original custody record after the detainee has left police detention. The entitlement lasts up to 12 months.

**Paragraph 23**  
**Recommendation by the Committee**

**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.**

37. The Police and Criminal Evidence Act 1984 (PACE) governs the treatment of all detainees. The PACE Codes of Practice provide that it is the duty of a custody officer to ensure that all persons in police detention are treated in accordance with the Act.
38. PACE provides that all cells should be heated and ventilated; that detainees should have access to toilet and washing facilities; that they should be provided with food and drink and that they may have brief outdoor exercise if practicable. The PACE Codes also provide for a detainee to have at least eight hours for rest, free from questioning, travel or any interruption in connection with the investigation concerned.
39. The Association of Chief Police Officers (ACPO) and the National Centre for Policing Excellence (NCPE) together with the Home Office have developed policy, guidance and best practice on the safer handling of detainees in order to foster a human rights culture in custody suites and to contribute to the prevention of deaths in custody. This guidance (*The Safer Detention and Handling of Persons in Police Custody 2006*) was launched on 8 February 2006, and is attached at Appendix 2 to this document.

**Paragraph 24  
Comment by the Committee**

**The present condition at Paddington Green High Security Police Station is not adequate for such prolonged periods of detention [28 days].**

40. The Government has produced a separate Code of Practice on the detention of individuals under section 41 of, and Schedule 8 to, the Terrorism Act 2000. One of the key changes included in the Code of Practice is for detainees to be transferred to a prison once a warrant has been obtained that would take the period of detention beyond 14 days where appropriate. This is to ensure that detainees have access to the facilities of an institution equipped for longer periods of detention.

**b. Belmarsh Prison**

**Paragraph 28  
Recommendation by the Committee**

**The Committee recommends that the United Kingdom authorities make the necessary adaptations in the high security unit [at Belmarsh Prison] in the light of [its] remarks [on the prisoner the Committee visited there].**

41. The Government is committed to providing appropriate conditions for all prisoners, including those with disabilities. Adjustments will be made, where appropriate, to ensure that prisoners are kept under conditions that respect their dignity and human rights.
42. The prosthetic limbs that this prisoner attaches to his arms were obtained by Belmarsh prison. However, they are similar to those used by the prisoner prior to his arrest. He is able to operate the toilet and water-taps with their aid. He has also been supplied with special toilet paper and wipes. In addition, he has access to a health care assistant who is available between the hours of 07.30 and 17.30 to attend to his personal needs. Outside these times, he can obtain assistance from nursing staff at Belmarsh. There is no evidence that he has found the fixtures and furniture of the cell a hazard to him.
43. It is a security requirement that all prisoners in the Unit must change cells at least once in every calendar month. All cells in the Unit are of similar design. There is no evidence that this requirement to change cells has caused any difficulty to this prisoner. In the event of any problem, however, he has access to a health care assistant, who is on duty for ten hours every day.
44. The provisions of the Disability Discrimination Act 1995 apply to the Prison Service. Appropriate action is taken to meet the needs of individual prisoners, as shown by the steps taken in respect of this prisoner – though security procedures have to be maintained. It is not possible to waive or amend security procedures for an individual prisoner without impacting on security arrangements as a whole.

**Paragraph 29  
Recommendation by the Committee**

**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.**

45. It is intended to review the Unit regime as part of the Performance Improvement Programme at Belmarsh in 2006, and consideration will be given to whether changes are appropriate.

**Paragraph 30  
Recommendation by the Committee**

**The CPT recommends that the necessary steps be taken to ensure that the prisoner receives the appropriate care for his skin condition.**

46. When this prisoner first arrived at Belmarsh a nursing assessment was immediately undertaken to identify his needs. His request for assistance by a health care assistant for two hours each afternoon was granted. Since then, the availability of the assistant has been increased to ten hours per day.
47. During the initial assessment the prisoner requested large strong sheets of toilet paper. These were supplied, along with baby wipes. A special shower mitt (designed for amputated limbs) and a bath brush (with strap and long handle as requested by the prisoner) was purchased as well as a pump action soap dispenser. The health care assistant helps the prisoner to shower, after which the assistant applies appropriate cream to the affected skin areas. The assistant maintains a written record of the assistance provided to the prisoner. On occasion the prisoner has received only one shower a day and thereby only one application of cream a day – but this was when he declined to take a shower at the time it was offered.
48. A Consultant Dermatologist has seen the prisoner on a number of occasions. The Consultant recommended a new type of treatment for the prisoner's condition, but he refused it. In the meantime, the health care assistant is applying the creams prescribed by the Consultant. The prisoner remains under constant review by doctors and nursing staff at Belmarsh.
49. The prisoner has never requested assistance with using the toilet. Such assistance, if requested, is available throughout the day and night. When the prisoner was interviewed recently by the occupational therapist, he did not report having any difficulty with using the toilet.

**Paragraph 31  
Recommendation by the Committee**

**[Regular blood glucose tests for this prisoner's diabetic condition] should be verified.**

50. This prisoner has a "BM Stix" blood test weekly and his blood sugar levels are noted in the health care assistant's record. In the event of any abnormalities or other problems, the health care assistant would inform the nurse or doctor within the prison. All prisoners with diabetes are seen regularly by the diabetes nurse. Details of blood sugar levels are sent to the local NHS laboratory when requested by the doctor or diabetes nurse. The National Standards Framework recommends that this should be done every six months.

## **B. Immigration detainees**

### **Paragraph 35**

#### **Request by the Committee**

**The CPT would like to receive information from the United Kingdom authorities with regard to the current policy towards failed asylum seekers from Zimbabwe.**

51. On 12 April 2006, the Court of Appeal handed down its judgment on an appeal by the Government against an 18 October 2005 determination of the Asylum and Immigration Tribunal (AIT). The Court found that the AIT had erred in its approach to the evidence before it, and ordered that the AIT should consider the case afresh.
52. The AIT found that the particular way the Government was enforcing returns of failed Zimbabwean asylum seekers from the United Kingdom to Harare airport put them at risk of mistreatment. The AIT did not in its original determination find that Zimbabwe was unsafe generally for failed asylum seekers, or that those who return voluntarily are at risk – only that the method by which returns were enforced created a risk.
53. In line with the Government's original undertaking to the High Court, it will not be enforcing returns to Zimbabwe pending a decision in the further AIT hearing which is was heard from 3 to 7 July 2006. However, the Government continues to expect those who have exhausted their rights of appeal and been found not to need international protection to leave the United Kingdom voluntarily.

### **Paragraph 38**

#### **Recommendation by the Committee**

**...additional efforts are required to offer long-term detainees [at Campsfield House Detention Centre] a wider range of purposeful activities, including work opportunities.**

54. At present, it is not possible to extend the range of activities available to detainees at the Centre.
55. Outside activities were formerly permitted on an external grassy area. However, the ground became waterlogged and very uneven, and so activities ceased due to health and safety considerations. GEO (the contractors who run Campsfield House on behalf of the Home Office) are considering approaching the Immigration and Nationality Directorate (IND) with an estimate for the cost of restoring the grass area. If the field were to be put back into use, that would allow another activity to be run in the sports hall.
56. A newly drawn-up contract between IND and GEO is designed to provide the following range of activities for detainees:
  - Detainees will have access to a range of activities which will be properly supervised and controlled.
  - Care will be take to ensure that all physical activity is properly supervised giving due regard to health and safety.
  - The Contractor will ensure that the programme reflects the needs of a cross section of ages, cultural and ethnic needs. Regime activities will comprise as a minimum:

- Fitness Suite for a maximum of 20 Detainees per 1 hour session with 8 sessions every day.
  - Gymnasium available from 09.00 until 21.00 with breaks between 1200 – 1300 and 1730 for a maximum of 20 Detainees per session to include volleyball, football, badminton and other games.
  - Library available 09.30 – 12.00 / 13.30 – 16.30 / 18.30 – 20.30 7 days per week, with a Librarian attending for 35 hours per week.
  - Education for a maximum of 10 Detainees per session; 4 sessions per day delivering English, IT and with an emphasis on art and practical subjects 5 days per week from 09.00 – 16.00 with a 1 hour break for lunch.
  - Health Promotion will be delivered by a qualified nurse as a 1 hour programme each day 7 days per week.
  - Staff supervising PE will be trained to the Prison Service Sports & Games standards and will have a valid First Aid Certificate and will be instructed in the health and safety issues connected with PE.
- Every attempt will be made to engage Detainees. The induction programme will explain the benefits of engaging with the regime. Names of those attending the regime activities will be compared with the names of those present in the Removal Centre. Those Detainees who are not participating will be interviewed to ascertain why they do not engage, or what changes they would like to see that would encourage them to take part.
  - Every three months, the Contractor will conduct a survey of Detainees about the available regime activities. When attendance at any activity consistently falls below a desirable level, an ad hoc survey will be held to determine if there is any underlying cause for avoidance of that particular activity.
  - The regime programme will be re-submitted to the Authority every 6 months for approval in accordance with the procedures specified in Clause 15 of the Contract.

57. All removal centres have been exempted from the minimum wage legislation following the recent enactment of the Immigration and Nationality Bill, and are developing proposals for the introduction of paid work. Participation in such work will be entirely voluntary.

**Paragraph 39**  
**Request by the Committee**

**The CPT would like to receive information on the proposed plans for refurbishing the Centre.**

58. A planning application seeking agreement to an expanded centre with significantly improved facilities, including a new reception block, was rejected by Cherwell District Council in Autumn 2004. Accordingly, a revised package of refurbishment proposals has been prepared and was included in the wider Invitation to Tender for the new operating contract for the centre. The new contract with GEO came into operation on 29 May 2006. The proposed works include the following elements:

- Reception and Discharge Area: Reconfigure the existing areas, adjacent to bedroom and adjoining open space to provide new waiting room, new reception room and day room.
- Segregation Unit: Relocate the Segregation Unit to an adjacent building – the current baggage store area. (A plan is attached, as Appendix 3 to this document).
- Kitchen and Stores: Enlarge the existing kitchen facilities and centralise the stores to meet the needs of the existing facilities and the proposed expansion.
- Staff Facilities: Relocate the staff facilities to the current reception and waiting area to enable the expansion of the kitchen.
- The existing showers and toilets will be refurbished and the rooms and corridors will be redecorated.
- Utilities, including power supply will be upgraded.
- CCTV will be upgraded, including new external perimeter cabling.

**Paragraph 40**  
**Request for information by the Committee**

**The Committee would like to receive the comments of the UK authorities on [the sometimes excessively long period of time detainees had to spend in transit from one place of detention to another].**

59. Long journeys to removal centres are sometimes unavoidable. However, the aim is to keep travelling time to a minimum in the welfare interests of those detained. On long journeys there are contractual requirements for comfort and refreshment breaks at 2½ hour intervals.

**Paragraph 42**  
**Suggestion by the Committee**

**The CPT invites the UK authorities to address these issues [the size and amenity of the visitor's centre] accordingly.**

60. Space available for visits could be increased by using the second visit hall which is currently being used as an activity area. But current use of the visits hall is low so this is not included in the refurbishment plans.

**Paragraph 43  
Recommendation by the Committee**

**The CPT recommends that steps be taken to ensure the regular presence of the general practitioner in the Centre.**

61. Since 21 November 2005, the Centre has had 24 hour nurse cover and continues to have access to a doctor on-call throughout the day.

**Paragraph 44  
Recommendation by the Committee**

**The CPT recommends that the necessary measures be taken to interview and screen every new detainee as soon as possible after admission.**

62. Since 21 November 2005, all detainees are seen by a nurse within two hours of first reception. Detainees are seen by the visiting doctor if that is considered necessary, or on request.

**Paragraph 45  
Recommendation by the Committee**

**The CPT recommends that measures be taken to provide psychological and psychiatric assistance for the detainee population.**

63. The Centre's medical team consists of nurses trained in mental health, including suicide prevention. Any detainee who appears to require a psychiatric or psychological examination is referred to an appropriately qualified person.
64. GEO's Suicide and Self Harm policies incorporate enhanced observation on the first night in custody, in addition to the Prison Service's standard procedures for dealing with self-harm and suicide cases – the F2052SH system. Operational procedures are in direct line with Prison Service Guidance on self-harm and suicide. IND has also initiated implementation of the new Assessment, Care, Custody and Teamwork (ACCT) standards, recently introduced within the Prison Service, across the immigration removal estate.

**Paragraph 47  
Recommendation by the Committee**

**The CPT recommends that the UK authorities take the necessary measures to ensure appropriate staffing levels at Campsfield House.**

65. The current staffing levels at Campsfield House have increased since the Committee's visit. The minimum staff level under the new operating contract requires 84 full time equivalent Detainee Contact Officers (DCOs). A major recruitment campaign has been successful in attracting suitable new staff. Eleven new specially trained DCOs have been recruited: Newly recruited staff attend a seven-week training course which incorporates a full week dedicated to interpersonal skills.

**Paragraph 48  
Request by the Committee**

**The Committee would like to be informed whether the immigration officers have been relocated; if so, what are the reasons behind the relocation, and what procedures have been put in place thereafter to deal with the individual concerns of the detainees pertaining to their cases?**

66. Following consultation, and a review of the support given to detainees in Removal Centres, it was decided to replace Warranted Immigration Officers with DCOs. The staff on site were not in charge of the cases of detainees at the Centres, nor indeed had any knowledge of the individual cases. Therefore it was felt that Warranted Officers were not needed, and would be better used elsewhere. Although Immigration Officers were expected to stay for a two year transition period, many of them have found jobs elsewhere that made better use of their skills.
67. A recruitment campaign was undertaken to recruit and train suitable candidates to give the detainees the full level of support they need. A number of newly trained staff are already in post. In the interim period, Immigration Officers on detached duty have been supporting the team at Campsfield.
68. From 25 June 2006, there will be one Immigration Officer and three Contact Managers at Campsfield.

**Paragraph 51  
Recommendation by the Committee**

**The CPT recommends that the rooms [in the isolation unit] be enlarged.**

69. There are currently no plans to enlarge "Removal from Association" accommodation. However, as part of the refurbishment, the "Temporary Confinement" accommodation is to be relocated and increased from two rooms to three.

**Paragraph 51  
Request by the Committee**

**...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.**

70. The Segregation Unit will be relocated to an adjacent building where rooms will be larger than those currently used.

**Paragraph 52**  
**Request by the Committee**

**The CPT would... like to receive information on the avenues of appeal against... placement in... the isolation or the segregation unit.**

71. A detainee may speak to the Centre Manager, the Immigration Service Team Leader, or a member of the Independent Monitoring Board about isolation or segregation at any time. Removal will have been authorised by the Centre Manager and the Team Leader – who will visit the detainee – and will only be taken to protect the safety and security of the detainee concerned, the staff of the Centre, and other detainees. There is no set time limit for such removals or confinements: once the detainee is compliant and their unacceptable behaviour has moderated, they are placed back on normal location as soon as possible.

**APPENDICES:**

**Appendix 1: Healthcare of detainees in police stations**

available via : <http://www.bma.org.uk/ap.nsf/Content/Detainees>

**Appendix 2: The Safer Detention and Handling of Persons in Police Custody**

available via:

[http://police.homeoffice.gov.uk/news-and-publications/publication/operational-policing/Safer\\_Detention\\_and\\_Handlin1.pdf](http://police.homeoffice.gov.uk/news-and-publications/publication/operational-policing/Safer_Detention_and_Handlin1.pdf)