



Report on an inspection visit to police custody suites in Hillingdon Basic Command Unit

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1. Introduction

This is the third in a series of reports of inspections of police custody suites carried out by our two inspectorates. These inspections are a key part of the joint work programme for criminal justice inspectorates, agreed with Ministers. They arise from the UK's international obligation to ensure regular and independent inspection of all places of detention. The inspections look not only at the implementation of statutory requirements, but also at the conditions of detention and the treatment of detainees.

There are two custody suites in the Hillingdon Borough of the Metropolitan Police Service: the main suite in Uxbridge and a smaller facility in West Drayton, which we were told was used as an overflow or to hold those detained in relation to domestic violence, but which in fact dealt with a range of prisoners and issues.

As in the other Metropolitan Police Service suites we have inspected, we found that custody staff implemented the requirements of the Police and Criminal Evidence Act (PACE) codes professionally and consistently. We received no complaints from detainees, their families or their legal representatives. A range of translation services was used, and legal advice facilitated. However, as in the other suites, we noted the absence of specialist and dedicated custodial staff, and the need for improved systems to collate and analyse any complaints. There was no evidence of any assessment of risk at the point of release, and one woman told us that she had been let go at 3.30 in the morning to make her way home.

However risk assessments on arrival were carried out thoroughly, and determined the location and observation of detainees. We saw good interaction between staff and detainees, beyond the minimum required, and considerable individual care. The cells were clean, though in need of decoration and not always sufficiently warm. There was inconsistency in relation to the personal items detainees were allowed, including necessities such as spectacles, and not all detainees were told that they could have essential items such as blankets, towels and toilet paper. Showers were rarely offered, and their location meant that there was insufficient privacy for female detainees. There was very little for detainees to do, and visits were not allowed: this was of particular concern in relation to immigration detainees, who could be held for several days.

Other common themes from previous inspections emerged. There was little privacy for the disclosure of confidential information, and no specific policies or procedures for dealing with young people or women (though the 14-year-old we observed was treated appropriately for his age). Similarly, in relation to immigration detainees, there was a need for the UK Border Agency to exercise much greater control over the length of stay, and the conditions of custody, for immigration detainees held on its behalf. While the forensic medical examiners provided a reasonable service, there was a lack of clinical governance, and inconsistencies in record-keeping. There were, however, good arrangements for mental health assessments.

These inspections in three different London boroughs have proved very valuable in providing independent confirmation of the many elements of good practice in custody suites, as well as

¹ Now required under the Optional Protocol to the United Nations Convention on the Prevention of Torture and Inhuman and Degrading Treatment.

revealing a number of common areas for development and improvement, which the Metropolitan Police's Custody Directorate will wish to consider in moving towards best practice.

Anne Owers HM Chief Inspector of Prisons Sir Ronnie Flanagan HM Chief Inspector of Constabulary

August 2008

2. Background and key findings

- 2.1 HM Inspectorates of Prisons and Constabulary have begun a programme of joint inspections of police custody suites, as part of the UK's international obligation to ensure regular independent inspection of places of detention. These inspections do not look only at the implementation of the Police and Criminal Evidence Act (PACE) codes. They are also informed by expectations about the appropriate treatment of detainees and conditions of detention, which have been developed by the two inspectorates to assist best custodial practice.
- 2.2 The Metropolitan Police Service (MPS) has 76 custody suites designated under the Police and Criminal Evidence Act 1984 for the reception of detainees. Twenty-two are 'overflow custody suites' used for various operational matters, such as charging centres for football matches or immigration detention. The remaining custody suites operate 24 hours a day and deal with detainees arrested as a result of mainstream policing.
- 2.3 This inspection was conducted in the two custody suites in the London Borough of Hillingdon. Inspectors examined force-wide and borough custody strategies, as well as treatment and conditions, individual rights and healthcare in each suite. A survey of prisoners at HMP Wormwood Scrubs who had formerly been detained in the custody suites, and a postal survey of former detainees, were conducted by HM Inspectorate of Prisons researchers to obtain additional evidence (see appendices).
- 2.4 The main custody suite in Hillingdon was in Uxbridge. This was open continuously and normally held a mix of up to 11 adults, young people and, occasionally, immigration detainees. There was a slightly smaller facility, with nine cells, in West Drayton, about three miles from Uxbridge. We were told that this was primarily an overflow facility or used to hold detainees connected with domestic violence cases, as a domestic violence unit was also based in West Drayton, and that higher risk or problematic detainees were ordinarily held in Uxbridge. However, our observations suggested that West Drayton was a busy facility that dealt with a range of prisoners and issues. We were told that Hillingdon as a whole processed just under 9,000 detainees a year.

Strategic overview

- A Commander in the MPS retained custody as part of his portfolio of responsibilities within the criminal justice area. Responsibility and accountability for custody rested with the borough commander, although the MPS Custody Directorate supported boroughs with comprehensive policy guidance, standard operating procedures (SOPs) and an internal inspection regime. Custody teams were drawn from among frontline operational response staff, and normally comprised three sergeants and two PC gaolers to cover the two suites. A bail sergeant was also deployed and retained a general interest in custody. All sergeants had received training in custody and on the National Strategy for Police Information Systems (NSPIS) custody system as part of their generic preparation for the role. There was some training for gaolers as part of the borough's training cycle, but no civilian designated detention officers were deployed.
- 2.6 Independent custody visitors (ICVs) were active in the two custody facilities and made regular reports on conditions. There were systems to enquire into the comments and criticisms of the ICVs, principally through responses to the regular ICV meetings. Arrangements to collate and analyse complaints from detainees were less well developed.

Treatment and conditions

2.7 The quality of cellular accommodation at Uxbridge was reasonable, if a little gloomy, with some graffiti. Environmental standards in the West Drayton suite were generally good. Risk assessments were thorough and appropriately sensitive to the needs of individuals. Assessments were prompted by questions raised on the NSPIS electronic custody record, and informed by the detainee and access to the Police National Computer (PNC). The levels of supervision and observation required for individuals were properly monitored, and the quality of entries on the custody record was good. Decisions about the removal of property were somewhat risk averse, potentially disproportionate, and often inconsistent. Both custody suites had the option to place detainees in CCTV-monitored cells if needed, and staff generally answered cell call bells promptly. The quality of relationships and the attitude of staff to detainees were professional and respectful. However, information for detainees about access to basic amenities and services was given inconsistently.

Individual rights

- 2.8 Detention at both custody suites was authorised and reviewed in line with PACE guidelines. Rights and entitlements were explained to detainees on their admission. Information about detainees was recorded on the NSPIS computerised custody record system, but there was little privacy at the custody desks to discuss confidential information. Access to free telephone calls to family and friends, legal representatives and other third parties was good. Medical and legal advice was freely available, although there were some delays because of limited private interview facilitates, notably at Uxbridge. Legal representatives reported generally positive impressions of their experiences in the custody suites. Interpretation services were used extensively.
- 2.9 Subject to availability, at Uxbridge young people and women were allocated specific cells nearer to the custody desk, and children and young people at both suites were not interviewed without an appropriate adult present, although access to appropriate adults could be problematic out of hours. Little else was different in the treatment of young people and women, and there were no policies on how to meet their specific needs while in detention. Female staff were not always available in the custody suite, in particular at West Drayton, although they could be called upon if required.
- 2.10 Use of restraints was minimal and proportionate, with few detainees held in restraints in the custody suite. Detainees were able to gain access to their custody record and interview transcript, but pre-release risk assessment of detainees was underdeveloped.

Healthcare

- 2.11 Detainees requiring medical consultation received a reasonable service from the forensic medical examiners (FMEs) who provided health services to both custody suites. There were, however, no clinical governance arrangements for the FMEs. Clinical record keeping was underdeveloped. Entries on NSPIS were sparse, and FMEs had varying methods of recording more comprehensive clinical notes. Healthcare facilities and consultation rooms in the two suites were satisfactory.
- 2.12 There were good arrangements for detainees who required mental health assessments, as they were taken directly to a nearby NHS facility. There was a relatively new mental health court diversion/liaison scheme at Uxbridge Magistrates' Court, but partnership arrangements

needed further development to identify and maximise the potential benefits for detainees in police custody. In additional to mental health provision, there was also a drug referral service, although partnership working between these two services and FMEs was weak.

3. Strategy

- 3.1 The Metropolitan Police Service (MPS) had a Custody Directorate within Territorial Policing led by a commander, with day-to-day management by a detective superintendent. The Custody Directorate had an internal inspection function, but there was no formal mechanism for following up and ensuring compliance with these inspections. Responsibility for day-to-day management of custody suites and delivery of services had been devolved to boroughs. Responsibility and accountability therefore rested with the borough commander, who was a chief superintendent.
- 3.2 All custody sergeants had received nationally approved custody training and police constable (PC) gaolers had received custody training before their deployment into the custody suites. There were no permanent custody teams in the suites, though custody officers were organised and professional in their approach. Independent custody visitors (ICVs) visited the custody suites regularly, but there was no protocol governing their access to the National Strategy for Police Information Systems (NSPIS). There was no evidence of UK Border Agency (UKBA) oversight of the custody suites when they were used to hold immigration detainees.

Expectation

3.3 There is a policy focus on custody issues at a chief officer level that is concerned with developing and maintaining the custody estate, staffing custody suites with trained staff, managing the risks of custody, meeting the health and wellbeing needs of detainees and working effectively with colleagues in the health service, immigration service, youth offending service, criminal justice teams, Crown Prosecution Service (CPS), courts and other law enforcement agencies.

Findings

- 3.4 A commander was the chief officer lead on custody for the MPS. The Custody Directorate had an inspection function: one police inspector and one health and safety officer were responsible for audit and inspection, health and safety and the implementation of *Guidance on the safer detention and handling of persons in police custody*.
- 3.5 The Custody Directorate also provided standard operating procedures (SOPs) for custody suites in each London borough. These covered police custody, use of closed-circuit television and guidance to custody staff on the supervision of detainees. The SOPs were designed to assist boroughs to deliver consistent levels of service, although responsibility and accountability for doing so had been delegated to borough commanders.
- 3.6 Hillingdon borough had two custody suites. Uxbridge was the main suite with nine cells and two detention rooms. A subsidiary unit at West Drayton had seven cells and two detention rooms. We were told that West Drayton dealt mainly with domestic violence and sexual offence detainees, though it was occasionally used as an overspill facility. However, at the time of the inspection, West Drayton was more akin to a frontline custody suite and held a broader range of detainees than this.
- 3.7 There was corporate custody training for sergeants and borough-level custody-specific training for gaolers, which included enhanced first aid training. There was refresher training at borough

- level. The Uxbridge custody team consisted of two sergeants, a bail sergeant and one PC gaoler, and West Drayton had one sergeant and one PC gaoler.
- 3.8 The borough had no permanent custody teams, and custody sergeants and PC gaolers were usually engaged in response duties. The acting borough commander had held a borough review of custody with a view to moving to dedicated custody teams, but the achievement of this was uncertain. There was a borough bail sergeant who dealt with many of the day-to-day issues that arose in custody, and also had monthly meetings with the ICVs.
- 3.9 Detainees who needed to see a forensic medical examiner (FME) could do so, but we had concerns about FME working practices (see healthcare section). We questioned whether the current FME business model offered value for money or additional benefits to the MPS or wider community.
- 3.10 Detainees were asked if they wished to speak to a drugs referral worker. However, there was no liaison between these workers and FMEs, and therefore no holistic approach to the treatment of detainees who were substance dependent. Although the drugs referral worker identified drug-dependent detainees when they were charged to court, those not charged to court were missed, along with possible intervention opportunities to reduce harm within the community.
- 3.11 Immigration detainees could be held in police custody for five days or for seven days if removal directions were set within this time. Custody staff were not given enough guidance on liaison with the UKBA to ensure that detainees spent the minimum possible time in custody.
- 3.12 The MPS's single point of contact for immigration matters considered that the main problem was that immigration detainees were held for lengthy periods, often up to the prescribed limits, in unsuitable facilities. We were told that station custody managers were advised to contact local enforcement offices and the UKBA's Detainee, Escorting and Population Management Unit when cases were not progressing. There was no evidence of operating instructions or standards to regulate the use of police cells for immigration detainees. However, UKBA staff attended both custody suites while the inspection team were present, and expeditiously dealt with immigration detainees who had papers served and were subsequently bailed.
- 3.13 There were national policies with partner organisations in the criminal justice system, which allowed for services tailored to local need. There was one Crown Prosecution Service (CPS) lawyer in the borough who worked from 9am to 5pm. CPS Direct dealt with charging decisions after 5pm. If the CPS could not meet police needs for charging advice, and an appointment had not been made within two weeks of the request, the matter was escalated for action. The CPS was considering lowering appointment times from one hour to 50 minutes to facilitate more cases. Defence solicitors thought relationships with the police were generally good and that custody staff were professional. Their only concern was a lack of consultation space.
- 3.14 We observed much positive interaction between custody staff and detainees, and staff went beyond the requirements of legislation and MPS procedures to discharge their professional duties.
- 3.15 There was a Metropolitan Police Authority lead for the ICV scheme, which was viewed as an important independent oversight mechanism. ICVs reported good relationships with the borough and custody staff in general.

3.16 The inspection team identified a need to analyse the NSPIS custody system to profile the detainees entering the custody suites, including the number held for more than 24 hours and how many were juveniles, women and UKBA detainees.

Expectation

3.17 There is an effective management structure for custody that ensures that policies and protocols are implemented and managed and that there are mechanisms for learning from adverse incidents, rubbing points or complaints.

Findings

- 3.18 Newsletters from the Custody Directorate provided information and advice on detainee supervision, and identified health and safety learning points from investigating adverse incidents. Adverse incidents were referred to as 'successful interventions' to encourage reporting and create a positive learning environment.
- 3.19 ICVs visited the custody suites regularly and made weekly reports on prisoner standards and welfare. They were prepared to seek assurances on their concerns and were consistent on the issues they reported on. There was a system of recording ICV concerns, and the custody manager attended monthly meetings with them for feedback and dealt with any arising actions.
- 3.20 Complaints from detainees were not taken while they were in custody unless they were serious or concerned their treatment while in custody. Detainees who wished to make complaints about their treatment before their arrival at the custody suite were told to report these to the front desk of the police station on their release. This was a flawed working practice, which could be viewed as a mechanism for suppressing complaints. There was no feedback from the Department for Professional Standards (DPS) to borough or custody managers about the number or type of complaints from detainees. This was a weakness, as it missed the opportunity for solving the underlying causes of complaints. However, complaints were reviewed locally before a decision on whether they should be forwarded to the DPS for further investigation.
- 3.21 We found no evidence that detainees were detained inappropriately. Custody officers appeared to recognise the greater impact of custody on juveniles, and we saw positive interactions between them and young detainees. The appropriate adult scheme was sound and provided a good level of service, particularly in Uxbridge. However, staff at West Drayton were concerned about out of hours provision, though a recently introduced scheme seemed to be addressing these concerns.

Expectation

3.22 Maintenance of facilities only occurs when the suite is closed down.

Findings

3.23 Maintenance appeared to take place when facilities were closed. Uxbridge was due to be closed for a month after our visit for improvement work on fire alarms.

Recommendations

To the Metropolitan Police Service

- 3.24 The Metropolitan Police Service (MPS) should review the practice of extracting custody staff from response teams, and take action to establish permanent custody teams.
- 3.25 A protocol should be developed governing the access of independent custody visitors to information on the National Strategy for Police Information Systems (NSPIS).
- 3.26 There should be liaison between force medical examiners and drugs referral workers about detainees identified as substance dependent.
- 3.27 There should be greater analysis of information on the NSPIS to improve understanding of the profile of detainees.
- 3.28 Detainees who wish to make a formal complaint about their arrest or treatment while in custody should be able to do so while they are in custody.
- 3.29 The number and nature of complaints should be analysed centrally and this information fed back to boroughs and custody managers to enable them to identify and solve the underlying cause of complaints.

To the UK Border Agency and Metropolitan Police Service

- 3.30 The UK Border Agency (UKBA) should regularly monitor the physical conditions in which detainees are held on its behalf by the MPS.
- 3.31 There should be clear operating instructions and standards to regulate the use of police cells for immigration detainees and a protocol between the MPS and UKBA that incorporates the following.
 - The UKBA should ensure that immigration detainees are held for the shortest possible time in police cells.
 - The UKBA should review detention expeditiously and keep detainees informed of case progress in a language they can understand.
 - Immigration officials should serve and explain to detainees decision documents that have important consequences or engage appeal rights.
 - Police custody officers should communicate daily with the UKBA to ensure speedy case progression.

4. Treatment and conditions

- 4.1 Facilities at Uxbridge were generally reasonable, although the cells were gloomy, had graffiti, needed decoration, and detainees complained about the temperature. Custody staff completed thorough safety risk assessments, but were inconsistent in allowing access to personal possessions and facilities. Despite a recent written reminder to custody staff, not all detainees were routinely informed about how to obtain a blanket or toilet paper, and not all were told about the location and purpose of the cell call bell or that they could use the toilet out of sight of the CCTV. Access to showers and towels was very limited. Little reading material was available, and detainees did not have access to outdoor exercise. There was a high level of interaction between detainees and staff, and staff were calm, polite and professional. There was little space for confidential interviews.
- 4.2 The suite at West Drayton was clean and bright, and all cells were free from graffiti. Staff were respectful to detainees and took time to explain custody processes to them and check that they understood what would happen to them. Detainees were not offered access to the shower. There was a limited range of reading material.

Expectation

- 4.3 Custody staff are aware of the risk of self-harm from:
 - attempted suicide
 - drugs ingestion
 - medical conditions
 - alcohol

and these risks are assessed, monitored and managed appropriately.

Findings

Uxbridge

- 4.4 Two custody sergeants and one gaoler were on duty per shift. The sergeants initiated the National Strategy for Police Information Systems (NSPIS) custody record when a detainee arrived in the suite, which included completion of a risk assessment. All custody sergeants had attended a four-day course on the use of NSPIS. The NSPIS prompted consideration of factors such as the history and risk of self-harm and the detainee's medical condition, including whether they had ever suffered from depression or were currently taking prescribed medication. Detainees were also asked about drug or alcohol dependency. Referrals to the forensic medical examiner (FME) were made if any concerns were identified.
- 4.5 Custody sergeants also checked the Police National Computer (PNC) and used information and markers on this system to ensure the risk assessment considered prior knowledge of the detainee. They also relied heavily on their experience to explore detainees' responses to questions, particularly if their demeanour gave them cause for concern. We observed custody sergeants conducting risk assessments diligently, thoroughly and patiently. In the case of a 14-year-old detainee held in the custody suite during our inspection, the custody sergeant's approach was age-appropriate.

- 4.6 The outcome of the risk assessment was used to determine the level of monitoring of a detainee. For example, detainees could be located in a cell with CCTV. Four of the cells in the suite had CCTV, as did the two detention rooms. For closer monitoring, there was an increase in the level of observation by the gaoler from the minimum of hourly to 30 or 15 minute intervals if the custody sergeant deemed this necessary. The 14-year-old detainee referred to above was initially placed on constant supervision. Following consultation with the FME, this level of observation was reduced.
- 4.7 Following observations, gaolers made entries in the custody record, including documenting any conversation with the detainee. Custody sergeants visited each detainee at the start of their shift and introduced themselves. This was also recorded in the custody record. We saw a significant amount of positive interaction between gaolers and detainees, over and above the observations stipulated in the custody record.
- 4.8 We were told it was standard procedure to remove shoelaces and belts from all detainees irrespective of the outcome of the risk assessment, and we observed this. Detainees were denied access to other items and personal possessions at the discretion of the custody sergeant, but this resulted in inconsistencies. For example, one custody sergeant told us that he always removed a detainee's spectacles, while others said they would only do this if there were an identified risk of self-harm. In our survey, one respondent commented that his glasses were removed even though he had worn them for over 30 years. We observed another detainee denied her glasses. This decision did not seem proportionate to the level of risk identified.

West Drayton

- 4.9 Staff had received the same training as those at Uxbridge and used the same processes to receive detainees into custody. There was one custody sergeant and one PC gaoler on duty at each shift. Custody sergeants ensured that charging and recording procedures were completed accurately, and the PC gaolers dealt with the needs of detainees. Anti-ligature knives were attached to the custody keys and these were passed between staff, including UKBA staff, to unlock interview rooms.
- 4.10 Staff were focused on the need to prevent self-harm and suicide, and were somewhat overcautious in their decisions to remove certain items, including clothing and shoes. However, we noted that one detained was able to keep his glasses throughout his detention.
- 4.11 Incidents where detainees had attempted to harm themselves were documented and the reports sent to a central point. Staff told us they were kept well informed of required changes to operating practice as a result of these 'near misses'.
- **4.12** Detainees who had drug or alcohol issues were referred to support agencies, or to the FME if appropriate.

Expectation

4.13 Custody staff are aware of any risk of harm to others and this is managed appropriately. Detainees are not placed in cells together unless a risk assessment indicates that it is safe to do so. Risk assessments include whether the detainee has previous convictions for racially aggravated offences.

Uxbridge

4.14 All cells were single, so there were no risks associated with cell sharing. The NSPIS did not require custody sergeants to consider risk of harm to others or to ask questions about racially motivated offences. However, the checks on the PNC would draw their attention to any previous such offences on a detainee's record, and we were told that custody sergeants considered this when locating and managing a detainee. The majority of detainees we surveyed said they felt safe in the custody suite.

West Drayton

4.15 Detainees did not share cells. The initial NSPIS checks with the PNC highlighted any known risk to others or previous convictions for racially aggravated offences. West Drayton held most detainees charged with domestic abuse in the borough, because of its proximity to the community safety (domestic violence) unit (CSU) on the first floor. Custody staff had strong links with the CSU, which enhanced information sharing to manage risk effectively.

Expectation

4.16 Holding cells are equipped with call bell systems and their purpose is explained to detainees. They are responded to within a reasonable time.

Findings

Uxbridge

4.17 All cells had call bells, which were answered promptly throughout our inspection. A typed memorandum dated June 2008, that reminded custody staff of the need to inform all detainees of the location and purpose of their cell call bell, was attached to the NSPIS computer terminal. However, despite this, in our survey 40% of respondents said the cell bell was not explained to them.

West Drayton

4.18 Detainees we spoke with confirmed that the use of the call bell had been explained to them on their arrival. We observed detainees using the call bell to request access to such items as washing facilities and food, and staff responded promptly. Police visiting the custody suite also responded to call bells when custody staff were busy.

Expectation

- 4.19 Holding areas, cells, interview rooms and detention rooms are:
 - clean
 - free from graffiti
 - in good decorative order
 - of a suitable temperature
 - well ventilated

- well lit
- equipped with somewhere to sit
- free of ligature points.

Uxbridge

- 4.20 The custody suite was generally clean. Cleaning contractors visited twice a day, and staff could access out of hours' provision for emergency cleaning. Each cell had an unscreened toilet, tiled walls and a fixed solid wooden plinth. The two detention rooms designated for young detainees were similar to the adult cells, but larger.
- 4.21 There was some natural light in cells and detention rooms, although some were gloomy. There was a considerable amount of graffiti on the door frames and the wooden benches in most of the cells and the detention rooms. The cells were shabby and in need of decoration.
- 4.22 In our survey, some respondents complained about the temperature in the cells, which they said were cold, poorly ventilated and stuffy and uncomfortable in hot weather. Defence solicitors who regularly visited the suite also told us that detainees frequently complained about temperatures in the cells.
- 4.23 The suite had only two interview rooms, which also doubled as consultation rooms for solicitors. The interview rooms were badly sited being close to the custody suite desk where the two custody sergeants were located. There was a constant flow of people in very close proximity to where detainees were disclosing personal details to the custody sergeant. Detainees had no privacy as they provided sensitive information within hearing of other detainees, other staff, defence solicitors, appropriate adults and others.

West Drayton

- 4.24 There were seven cells and two detention rooms. Four cells were in an extension to the custody suite. Five of the cells and detention rooms in the main building were covered by CCTV, and there were no apparent ligature points. All the accommodation was decorated to a high standard, and there was no graffiti on walls or beds. The beds were sufficiently high for detainees to sit on. Most cells had limited natural light, supplemented by overhead, often dull lighting. The cells had limited natural ventilation, and some were too warm. Some detainees complained that they were either too hot or too cold.
- 4.25 There were two interview rooms with recording and CCTV equipment, and free-standing furniture. These rooms were used frequently throughout our inspection, and became cramped when several people were present (such as a solicitor, translator, or appropriate adult).

Expectation

4.26 A smoking policy for staff and detainees is enforced that respects the right of individuals to breathe clean air in the custody suite.

Uxbridge

4.27 The custody suite was designated no smoking, and detainees and staff were unable to smoke anywhere. Tobacco items were taken from detainees on arrival and placed in their stored property. No nicotine patches or other substitutes were provided.

West Drayton

4.28 Smoking was not permitted in any part of the custody suite or in the outside caged walkway. Tobacco items were taken from detainees on arrival and placed in their stored property. No nicotine patches or other substitutes were provided.

Expectation

4.29 Detainees are provided with suitable meals that cater for special dietary requirements, and drinks at appropriate intervals.

Findings

Uxbridge

4.30 Cooked meals were provided from the staff canteen between 8am and 8pm and delivered to detainees in individual containers. At other times, detainees were given a microwave meal from a limited selection, including a vegetarian option, heated up in a small kitchen in the custody suite. There did not appear to be a limit on the amount of food or drink detainees were given, and we observed gaolers dealing promptly with such requests. However, one detainee we interviewed said: 'When I asked for food it took more than six hours to give it to me'.

West Drayton

4.31 Detainees could have only microwaved meals. There was a reasonable supply of vegetarian and meat meals, but no provision for fresh fruit or freshly cooked food. There were no facilities to cater for special diets, and meals had to be brought over from the canteen at Uxbridge for detainees with special dietary needs.

Expectation

4.32 Detainees are provided with a mattress, pillow and clean blankets if held overnight.

Findings

Uxbridge

4.33 All the cells had a plastic-covered pillow, mattress and blanket. There was a ready supply of clean blankets, and bedding was removed from the cell and laundered when a detainee was discharged. Blankets were available on request, subject to a risk assessment. Although the custody records we examined did not record that detainees were denied a blanket, not all the

respondents to our survey who had been held overnight in the suite said they were offered a blanket.

West Drayton

4.34 All cells had a mattress and pillow. Blankets were not routinely offered to detainees, but were supplied on request or if they were held overnight, subject to a risk assessment. Contract cleaners usually cleaned the custody suite and any vacant cells, but if a cell was vacated and required immediately, the PC gaoler removed any debris and ensured the cell was fit for use. Mattresses or pillows were not generally wiped down between detainees.

Expectation

4.35 Detainees are able to use a toilet in privacy, and toilet paper and washing facilities are provided.

Findings

Uxbridge

- 4.36 All cells and detention rooms had in-cell sanitation. Toilets were not fitted with privacy screens. In cells with CCTV, the toilet area was out of view, which enabled detainees to use the toilet in some privacy. There was a plentiful supply of toilet paper, which was available to detainees on request. There were no handwashing facilities in the cells, although there were two wash basins in the custody suite and soap was available.
- 4.37 The typed prompt of June 2008 attached to the NSPIS terminal (see 4.17) reminded custody staff to inform detainees that toilet paper was available on request and that the toilet area was obscured from the CCTV coverage. We did not observe custody staff using the prompt checklist consistently during admissions. In our survey, one detainee commented: 'I didn't go to the toilet because there wasn't any toilet paper'.

West Drayton

4.38 All holding cells had toilet facilities, which were clean. Toilet areas were blocked out on CCTV-covered cells to protect individual privacy, but this was not always clearly explained to detainees. Toilet paper was issued only on request. Hand washing facilities were available outside holding cells, but detainees had to request access. We observed staff responding quickly to detainee requests to wash their hands and clean their teeth.

Expectation

4.39 Detainees whose clothing is taken for forensic examination are provided with suitable alternative clothing before being released or transferred to court.

Findings

Uxbridge

4.40 There was a plentiful supply of clothing for detainees whose own clothes had been removed for forensic examination. Detainees wore paper suits in the custody suite, but were given a

white sweatshirt and jogging bottoms for court appearances or on release. While this clothing was clean, it was inappropriate as it would draw attention to released detainees.

4.41 We interviewed a juvenile detainee who had been held in the custody suite for approximately 12 hours. He was in socks as his footwear had been removed and he had not been given an alternative, despite requests. We also observed other detainees walking around the custody suite in socks.

West Drayton

4.42 There was a supply of white T-shirts, jogging bottoms, paper suits and black pumps for detainees whose clothing was removed for forensic examination or because of a risk assessment. We observed one young detainee given a paper suit as his jogging bottoms had a cord around the waist. He was permitted to change in the presence of his mother, and the CCTV camera was switched off by the custody sergeant during this.

Expectation

4.43 Detainees who are held for more than 24 hours are able to take a shower and a period of outdoor exercise.

Findings

Uxbridge

- 4.44 The custody suite had one shower which was reasonably clean, but there were no towels except paper towels. The shower was close to the cells used to accommodate male detainees, which made privacy difficult for female detainees who wished to shower, particularly during busy periods. Detainees had to request a shower, and we were told such requests could be denied if staff were not available to supervise. During our inspection, a juvenile held overnight did not have a shower before his court appearance, but a detainee held over 24 hours was permitted one. None of the other respondents to our survey said they were offered a shower while in custody.
- 4.45 There was a very small secure area outside the custody suite, which we were told could be used to give detainees access to fresh air. We did not see this area used for this purpose. It was used as a waiting area for detainees in busy periods. Its limited space made it unsuitable for exercise.

West Drayton

- 4.46 There was one shower for both male and female detainees, but staff and detainees indicated that it was not routinely offered. We were also told that female staff had to be present to enable a female detainee to shower, and female staff were not always detailed to the staff roster. There were no towels in the custody suite, and detainees using the shower had to dry themselves on a blanket. The shower was fully operational and screened from view.
- 4.47 There were no facilities for exercise. An external caged corridor was used as the main entrance for arriving detainees, but detainees were not usually offered the option of fresh air in this area.

Expectation

4.48 Detainees who are held in custody for several days are provided with suitable reading material. Visits are also allowed, and changes of clothing, especially underwear, are facilitated.

Findings

Uxbridge

- 4.49 Reading material was limited to a small stock of magazines and newspapers left by staff. The mother of the juvenile detainee held overnight in the custody suite during our inspection was told she could bring in reading material. However, most detainees we surveyed said they had not been offered anything to read. One respondent commented that they were offered a copy of the Police and Criminal Evidence Act (PACE) codes when they requested something to read.
- 4.50 We did not observe any visits to detainees, but we were told these could be arranged if the detainee was held in custody for several days. Such visits and access to a change of clothes were at the discretion of the custody sergeant.

West Drayton

- 4.51 There was a limited supply of magazines for detainees, although they were not routinely offered, and detainees who had been held for several hours complained that they were bored. A few religious texts were available, but detainees were not told that they could request these. A small supply of free newspapers was also available at the custody desk. Books, puzzles and other distractions were not available.
- 4.52 Visits from family and friends were not permitted, and we were told this was a borough-wide position. There were no supplies of underwear, but family and friends could hand in fresh underwear if detainees were in custody for several days.

Expectation

4.53 Custody suite staff have received fire safety training and evacuation procedures are practised frequently.

Findings

Uxbridge

4.54 Staff we spoke to were aware of fire evacuation procedures and plans, which were stored in a clearly labelled locked cabinet behind the custody desk. There were desktop fire evacuation exercises, but not live tests.

West Drayton

4.55 An evacuation exercise had been held in the week before our inspection, while the custody suite was closed to detainees, and was clearly documented. Maintenance logs for fire equipment were up to date and staff had received appropriate training.

Other findings

Uxbridge

4.56 The custody suite keys were attached to a pouch containing ligature scissors. Typically one set of keys remained with the gaoler and a further set with the custody sergeant. However, the keys were not attached to the member of staff, and there appeared to be no individual accountability or ownership of the keys. We observed that the keys frequently changed hands to allow staff to access cells, the property store or unlock the FME room.

Recommendations

- 4.57 Custody sergeants should be consistent in their approach to the removal of personal possessions, and denial of access should be proportionate to the level of identified risk.
- 4.58 All detainees should be given verbal and written information, at the earliest opportunity, about the use of and access to all facilities in the custody suite.
- 4.59 Detainees should be informed that the toilet is obscured on CCTV monitors.
- 4.60 Clothing offered to detainees when their own has been removed for forensic examination should be less conspicuous.
- 4.61 Detainees should always be given alternative footwear when their own is removed for forensic examination.
- 4.62 Custody suite staff should receive fire safety training, and evacuation plans should be practised.
- 4.63 A stock of reading material should be available to detainees, including newspapers, religious texts and material in languages commonly spoken by detainees.
- 4.64 Detainees should always be offered a shower if held in the suite for over 24 hours and before a court appearance.
- 4.65 Detainees who are smokers should be offered nicotine replacement if in custody for a substantial period.
- 4.66 Access to outdoor exercise should be available, especially for detainees held for 24 hours or more.
- 4.67 Towels should be available for detainees.
- 4.68 The layout of the reception desk should be improved and the interview rooms relocated to ensure detainees can share personal information with custody staff without being overheard.

- 4.69 Mattresses and pillows should be wiped with a disinfectant before they are used by other detainees.
- 4.70 Detainees held for more than 24 hours should be able to receive visits.
- 4.71 All custody staff should carry keys and ligature knives secured to their person.

5. Individual rights

Detention was authorised appropriately and reviews took place in line with Police and Criminal Evidence Act (PACE) guidelines. Detainees were routinely offered free telephone calls. Medical and legal advice was available, but private interview facilitates were limited, which led to delays. Interpretation services were used extensively. Juveniles and women were allocated specific cells, where available, and juveniles were not interviewed without an appropriate adult present. However, there was little difference in the treatment of juveniles and women detainees, and no policies on meeting their specific needs. Parents, guardians or appropriate adults could not remain with juveniles during waiting periods, and access to appropriate adults out of working hours was a problem. Use of restraints was minimal, and detainees could see their custody record and interview transcript. The complaints system was not properly explained to detainees, and pre-release risk assessment of vulnerable prisoners was not structured.

Expectation

5.2 Detention is appropriate, authorised and lasts no longer than is necessary. In the case of immigration detainees alternative disposals are expedited.

Findings

Uxbridge

5.3 The custody records and discussions with relevant staff indicated that detention was authorised appropriately, and was overseen by regular reviews at inspector level. We also observed custody sergeants taking steps to expedite bail for detainees when appropriate. Custody staff told us that this process was more complex during the night when investigating staff were less readily available, and some case decisions about ongoing detention were delayed until the following morning.

West Drayton

5.4 The initial review was carried out by the custody sergeant and subsequent ones by an officer of at least the rank of inspector. Reviews were completed within the scheduled timescales and covered the necessary legal requirements. We were unable to determine if detention was always appropriate and lasted no longer than necessary.

Expectation

5.5 Detainees, including immigration detainees, are told that they are entitled to have someone concerned for their welfare informed of their whereabouts. Any delay in being able to exercise this entitlement, such as phoning a person concerned for their welfare, is authorised at the level of Inspector or above. They are asked if they wish to see a doctor.

Uxbridge

We observed custody staff actively facilitating telephone calls for detainees to inform family or friends of their whereabouts. Detainees could use a mobile land line handset, which enabled them to make these calls in the privacy of their cell rather in the public areas. Custody sergeants also routinely asked detainees about medical conditions and medication, and whether they needed to see a doctor. The provision of telephone calls and offers to see a doctor were recorded in custody records.

West Drayton

5.7 Detainees were told about their right to have someone informed about their situation. Staff were clear that where telephone calls were not permitted, this required authorisation by a senior officer. Detainees were always asked if they wished to see a doctor.

Expectation

5.8 Detainees who have difficulty communicating are adequately provided for with staff who can communicate with them or interpreters.

Findings

Uxbridge

5.9 There was a range of translation services. We observed a Bulgarian national detainee being given an interpreter to ensure he understood what was happening to him in police custody. Information about rights and entitlements in detention was also available in a wide range of languages on the National Strategy for Police Information Systems (NSPIS), although staff told us that Tamil was a notable exception. Telephone interpretation services were also used, although less extensively than face-to-face interpretation – the telephone service had been used 41 times between March and May 2008, compared with 152 face-to-face interpretations between April 2008 and our inspection.

West Drayton

5.10 Staff used an interpreter where there was any doubt of a detainee's ability to understand what was being said. There were no formal arrangements to assist detainees with hearing impairments.

Expectation

- 5.11 There are special arrangements for detained young people that cover:
 - the limited use of restraints
 - the conduct of any strip search
 - location in unlocked detention rooms close to the custody desk where possible for observation purposes
 - separation from adults at all times including in showers and exercise yard

- specially trained officers allocated until the appropriate adult arrives
- whether appropriate adults are indeed appropriate for the task
- the capacity for the relative, guardian or appropriate adult to remain with the detained young person during waiting periods, in the detention room if necessary.

Uxbridge

- 5.12 Whenever possible, juveniles were located in the two cells with CCTV closest to the front desk to facilitate monitoring by custody staff. These cells were described as detention rooms, and were slightly larger than the other cells, but were the same in all other respects.
- 5.13 There were no other differences in the way juveniles were dealt with on their admission or in their ongoing management, and there was no policy to manage them differently from adults. Custody staff told us that they treated juveniles the same as any other detainee in the use of restraints, strip searching and provision of showers, and that they had no specific training in dealing with them.
- 5.14 We observed one 14-year-old detainee being dealt with at the front desk. Adult detainees were being dealt with at the desk at the same time, and when his mother arrived as an appropriate adult, he saw her at the same desk. Staff told us that they did not allow a relative, guardian or appropriate adult to wait with a detainee in a detention room.

West Drayton

5.15 There were no special arrangements for the care of juveniles, apart from ensuring that an appropriate adult was found. However, we noted that when juveniles were being processed at the front desk, staff tended to take more time and care with them to ensure that they understood what was happening.

Expectation

5.16 Female detainees are able to be dealt with by female staff, or where this is not possible, hygiene packs for women are routinely provided. Staff are aware that the impact of detention on women is different to the impact on men, and adapt their level of observation and support appropriately.

Findings

Uxbridge

- There was no policy for dealing with female detainees although, whenever possible, they were allocated to one of three cells in the same corridor as the detention rooms for juveniles. Custody staff did not indicate any great awareness of the differential impact of detention on women, and said they treated them similarly to men. There were relatively few women among the permanent custody suite staff. On one day during the inspection, there were no female staff on duty in the suite. We were told that non-custody suite female police officers were used if required.
- 5.18 Hygiene packs were available, but we did not observe staff informing new female arrivals of this. We were told that the packs, which included sanitary products, were only issued on

request from the detainee. In our survey, we received negative comments about this. One woman said, 'I was on my period and not offered any sanitation', and another said, 'It was degrading... I was on my period; I had leaked through my jeans. How humiliating.'

West Drayton

5.19 Female staff were not always on duty, although they could be called in from other areas when necessary. Hygiene packs for female detainees were available. There were no special arrangements for female detainees, who were treated the same as male detainees. Staff did not seem to appreciate that female detainees might experience custody in a different way to men.

Expectation

5.20 Persons detained who have dependency obligations are catered for.

Findings

Uxbridge

5.21 Custody staff told us that they did not routinely ask newly arrived detainees about this, but would take appropriate action if they were made aware that children were left unsupervised. Nevertheless, we received some negative comments about this in our survey. One former detainee said: 'I was on my way home to my children, who were with a babysitter who was going in half an hour. I was detained for five hours, worrying about my children'.

West Drayton

5.22 A visiting solicitor told us of a situation where a single parent had not been given sufficient help to arrange for childcare.

Expectation

5.23 Detainees are able to have a solicitor present when interviewed by police officers. Those under the age of 17 or vulnerable adults or those with learning disabilities are not interviewed without a relative, guardian or appropriate adult present. Solicitors and advocates arrive promptly so as not to unnecessarily prolong the period in custody. Detainees are able to consult with legal representatives in privacy.

Findings

Uxbridge

- 5.24 Custody staff were active in facilitating communication and contact between detainees, their legal advisers and a range of third parties who could provide information and support. We saw solicitors provided for newly arrived detainees without any undue delay, and this was also evident in the custody records. Detainees were also routinely told that they could have a solicitor present when they were interviewed by police officers.
- 5.25 Detainees saw their legal advisers in one of two small interview rooms. Given the number of detainees dealt with at Uxbridge, this was inadequate, and delays resulted from these rooms

being oversubscribed. Solicitors also mentioned that the shortage of private interview rooms was a problem.

5.26 Custody records and our observations indicated that juveniles were not interviewed unless a relative, guardian or appropriate adult was present. We were told that an effective appropriate adult scheme operated during weekday working hours, which provided trained and vetted individuals quickly. However, this system broke down out of working hours, particularly at night, and it was not uncommon for juveniles to be left without such support until the following day, or to be bailed until a time when an appropriate adult could be provided.

West Drayton

- 5.27 Detainees were always given the opportunity to have a solicitor present when they were interviewed by police, and those under 17 and vulnerable adults were never interviewed alone. Solicitors normally arrived reasonably promptly, although there had sometimes been difficulties in obtaining an appropriate adult out of hours. This latter problem had recently abated with the introduction of paid sessional staff employed by social services.
- 5.28 Solicitors we spoke to were content with their treatment and satisfied with the interview facilities.

Expectation

5.29 Detainees are not interviewed by police officers while under the influence of alcohol or drugs, or if medically unfit unless in circumstances provide for under PACE.

Findings

Uxbridge

5.30 We observed detainees who had arrived in the custody suite under the influence of alcohol, and who had been deemed by the doctor to be unfit to be seen under PACE until they were fit and able. Custody staff told us that this would apply in any circumstances when detainees were under the influence of substances, or had a medical condition which meant they were unable to fully understand what was happening to them.

West Drayton

5.31 Custody staff involved medical staff if they had any doubt that the detainee was not fit to be interviewed.

Expectation

5.32 Suitable legal advice is available for both police detainees and immigration detainees.

Uxbridge

5.33 Newly arrived detainees were told about their legal rights, and given a relevant Law Society leaflet. Solicitors were provided for all detainees who requested one, including, if appropriate, lawyers with specific expertise in immigration.

West Drayton

5.34 Custody staff made sure detainees were given the opportunity of receiving legal advice. They contacted a specialist call centre, which routed the request to an immigration or a criminal lawyer. We saw one complex case where a detainee needed to see both a criminal and an immigration lawyer, and these arrangements were made efficiently.

Expectation

5.35 Detainees are not subject to inhuman or degrading treatment in the context of being interviewed, or in the denial of any services they need. They are allowed a period of eight hours continuous break from interviewing in a 24-hour period.

Findings

Uxbridge

5.36 Custody records confirmed that detainees were given at least an eight-hour continuous break from interviewing in a 24-hour period.

West Drayton

5.37 Reviewing officers were alert to the need for detainees to have sufficient breaks between interviews.

Expectation

5.38 Detainees are not handcuffed in secure areas unless there is a risk of violence to other detainees or staff.

Findings

Uxbridge

5.39 Custody staff took active steps to minimise the use of handcuffs in the suite, unless it was necessary for the safety of detainees and staff. During our inspection, detainees were not normally handcuffed or otherwise restrained. West Drayton

5.40 Although detainees occasionally arrived in handcuffs, these were normally removed after the custody sergeant was satisfied that there was no unnecessary risk.

Expectation

5.41 Those charged are produced at court promptly either in person or via video link.

Findings

Uxbridge

5.42 Custody staff ensured there were minimal delays in the production of detainees at court, and this was confirmed in the custody records.

West Drayton

5.43 It normally took an average of nine days for detainees to appear in court when they were bailed from the police station. The process, we were told, had lengthened because of an increase in numbers. Evidence suggested that juvenile prisoners appeared in the courts expeditiously.

Expectation

5.44 Detainees know how to complain about their care and treatment. They are not discouraged from doing so but are supported in doing so where necessary.

Findings

Uxbridge

Newly arrived detainees were not told about how they could complain about their treatment or conditions. Staff told us that if complaints were received they were logged on the custody record, but that no action was taken until or unless the detainee or their representative subsequently made a formal complaint to the police.

West Drayton

5.46 Detainees did not appear to have a clear idea about how to make a complaint. We found no evidence that they had been given any explanation about how they could make a complaint, or even that this was an option. Staff told us that complaints were infrequent, and would be dealt with informally at the lowest level, although there did not appear to be a clear procedure about this.

Expectation

5.47 There is an effective system in place for reporting and dealing with racist incidents.

Uxbridge

5.48 There was no formal system for detainees to report racist incidents, and any such complaint would be dealt with in the same way as any other complaint (see above).

West Drayton

5.49 As in the Uxbridge suite, there was no formal system for detainees to report racist incidents (see above).

Expectation

5.50 All custody suites hold a copy of the PACE Code of Practice C, and detainees, including immigration detainees, know they are able to consult it. Detainees or their legal representatives are able to obtain a copy of their custody record on release, or at any time within 12 months following their detention.

Findings

Uxbridge

5.51 An up-to-date PACE code of practice C was available, and all newly arrived detainees were told this was available on request. Police staff told us that detainees or their legal representatives could obtain a copy of the custody record on release, or at any time within the 12 months following their detention.

West Drayton

5.52 There were copies of the PACE code of practice and up-to-date amendments at the custody sergeant's desk. Detainees were informed about this when they were admitted. Detainees or their legal representatives could obtain copies of their custody records, although this was not a frequent request.

Expectation

5.53 Pre-release risk management is conducted and vulnerable detainees are released safely.

Findings

Uxbridge

5.54 There was no policy on risk assessment of vulnerable detainees before they were released back into the community. The NSPIS did not facilitate any risk management assessment of detainees before their release, and custody sergeants told us that any questioning about this depended on their discretion. In our survey, one former female detainee said: 'I was thrown out at 3.30am in the morning to make my own way home'.

West Drayton

5.55 There were no formal pre-release arrangements. Detainees under 17 were never discharged without an appropriate adult, but, apart from this, there was no other routine support. Staff from the Community Safety Unit could provide some follow-through support where the detainee was regarded as a victim of domestic violence, but this was provided separately and not in conjunction with custody staff. In cases involving detainees with mental health problems custody staff thought that external agencies should take the initiative to provide suitable support.

Recommendations

- 5.56 There should be a policy outlining how custody staff should manage juveniles in their care.
- 5.57 Information on detainees' rights and entitlements while in police custody should be available in Tamil.
- 5.58 Subject to individual risk assessment, relatives, guardians or appropriate adults should be allowed to remain with juveniles during waiting periods, including in the detention room if necessary.
- 5.59 The Metropolitan Police Service should consult with the local authority with a view to improving availability of appropriate adults, particularly out of normal working hours.
- 5.60 Custody staff should receive training in working with female detainees. Policies and procedures should be checked to ensure they take into account the distinctive needs of women, including minimum female staffing levels and routine provision of hygiene and sanitary packs.
- 5.61 Detainees should routinely be asked about any childcare needs, and given assistance to make childcare arrangements.
- 5.62 There should be sufficient private interview rooms to minimise delays in the time that detainees spend in custody.
- 5.63 The complaints procedure, including racist incident complaints, should be explained to all detainees.
- 5.64 There should be arrangements to assist communication for detainees with hearing difficulties.
- 5.65 There should be formal pre-release arrangements for all detainees who are vulnerable.

6. Healthcare

6.1 Detainees appeared to receive a reasonable service from the forensic medical examiners (FMEs) who covered the custody suites at Uxbridge and West Drayton. However, there were no clinical governance arrangements for the FMEs, the clinical entries on the National Strategy for Police Information Systems (NSPIS) were sparse, and FMEs varied in their recording of more comprehensive clinical notes. There were good arrangements to take detainees who required assessments under the Mental Health Act directly to NHS facilities. There was a court diversion/liaison scheme at Uxbridge Magistrates' Court, but staff did not appear to be aware that they could refer detainees directly to the service. Neither the mental health team nor the drugs and alcohol service had regular contact with detainees, or a working relationship with the FMEs to enhance the healthcare of detainees.

Expectation

6.2 The decency, privacy and dignity of detainees are respected.

Findings

Access to the FME was by detainee request. When detainees were booked in they were asked questions about their physical and mental health. This was at the main desk in the custody suite, alongside other detainees, with no confidentiality. However, most staff we saw booking in detainees appeared sensitive to their needs, and suggested they see the FME if there was any indication of a health need.

Expectation

6.4 Detainees are treated by healthcare professionals and drug treatment workers in a professional and caring manner that is sensitive to their situation and their diverse needs, including language needs.

Findings

- There were no specific arrangements for female detainees to be treated by a woman FME, and there were no women FMEs in the borough. A female police officer was used as a chaperone if requested.
- 6.6 The FMEs covered other boroughs as well as Hillingdon, and on some occasions during our inspection the FME took over three hours to arrive. This was a problem when custody staff needed to know if the detainee was fit to interview, as this delay led to individuals spending longer in custody.
- 6.7 We were told that telephone interpretation services were available, but one of the FMEs told us that he insisted on interpreters being present when he conducted consultations. This requirement also had the potential to detain individuals in custody longer than necessary.

6.8 Central and North West London Mental Health Trust (CNWL), who provided mental health and drug arrest referral services, had their own interpretation services available if required.

Expectation

6.9 Clinical governance arrangements include the management, training and supervision and accountability of staff.

Findings

6.10 There were no substantive clinical governance arrangements for the FMEs. CNWL staff were subject to clinical governance arrangements, such as supervision and accountability, through their employer. Some CNWL polices were specific to their work with the police.

Expectation

6.11 Patients are treated by healthcare staff who receive ongoing training, supervision and support to maintain their professional registration and development. Staff have the appropriate knowledge and skills to meet the particular healthcare needs of detainees in police custody.

Findings

6.12 All the FMEs who worked in the borough were GP trained, but not all were approved under Section 12 of the Mental Health Act. Details of the medical qualifications of the FMEs attending the custody suites were not held on site or by the coordinating doctor. The FMEs met as a group every three to four months, but the meetings were not always minuted.

Expectation

6.13 All equipment (including resuscitation kit) is regularly checked and maintained and all staff (healthcare and custody staff) understand how to access and use it effectively.

Findings

6.14 There was a defibrillator in each custody suite which was checked daily (although this appeared to be a relatively new task). There was a requirement for one member of each custody staff shift to be trained in the use of the defibrillator. This was the case, and other staff were aware of who the nominated defibrillator operator was. All staff were trained once every three years. There was a sealed first aid kit in the FME room. It was checked, restocked and resealed after use. There were also life masks and basic suction apparatus placed strategically around the custody suites.

Expectation

6.15 Detainees are able to request the services of a healthcare professional in and out of hours, and to continue to receive any prescribed medication for current health conditions or for drug maintenance.

Findings

dependency, nor were they routinely offered symptomatic relief for drug or alcohol withdrawal, or appropriate maintenance medications. Symptomatic relief was available if a detainee exhibited signs of withdrawal. However, given that the wait to see an FME could be several hours, this meant that a detainee could be unduly distressed before he was seen. In our survey one detainee commented that: 'I was coming off heroin, crack and alcohol; they gave me two valium to help me sleep.'

Expectation

6.17 A liaison and/or diversion scheme enables mentally disordered detainees to be identified and diverted into appropriate mental health services, or referred on to prison health care services.

Findings

6.18 CNWL provided a court diversion and liaison scheme based at Uxbridge Magistrates' Court, across the road from the police station. Staff told us that they had offered their services to the custody suite, both for training custody staff and seeing patients, but had not had any referrals from the FME or other staff. The team had arranged to set up a protocol for working with the drug and alcohol community team.

Expectation

6.19 Clinical examinations are conducted out of the sight and preferably out of the hearing of police officers. Treatment rooms provide conditions that maintain decency, privacy and dignity. Infection control facilities are implemented. There is at least one room that is forensically clean.

Findings

Each custody suite had an FME room. Both rooms were clean and relatively tidy. There was paper roll for the examination couch, and handwashing facilities. The examination couch at Uxbridge was damaged and an infection control risk. There were daily records of when the clinical waste bin was emptied, which appeared to be a new initiative. Clinical consultations were undertaken with the door to the FME room open or ajar, in view of the custody sergeant, but not other staff or detainees. The door was closed if an examination was required.

Expectation

6.21 Detainees are offered the services of a drugs or alcohol arrest referral worker where appropriate and referred on to community drugs/alcohol teams or prisons' drugs workers as appropriate.

Findings

- The local drug arrest referral worker was based very close to Uxbridge Police Station, and was available during weekdays as part of the local community drugs team. The FMEs had no dealings with the team. The methods of referral to the service had recently altered and not all staff appeared to be aware of this. We found several referrals to the service, made in good faith by custody staff at Uxbridge, which had been made at least a week previously. The arrest referral worker attended the local court each morning and took referrals direct from court custody staff, but was aware that she did not always pick up those who had been bailed from the custody suites. There did not appear to be a robust mechanism to ensure that detainees referred by the custody staff were actually seen. Arrangements for detainees at West Drayton were scant, although there were plans to improve these.
- 6.23 Once a detainee had been accepted by the arrest referral worker, they were seen and assessed within a few days, or even on the same day as the referral, and offered appropriate services. We were told that the worker had had 70 initial contacts in the previous five weeks.

Expectation

6.24 Police custody is not used as a place of safety for section 136 assessments² except where the detainee needs to be controlled for his or her own safety or the safety of others.

Findings

6.25 There were excellent arrangements for the police to take detainees assessed as requiring a section 136 assessment directly to CNWL premises, where there was a section 136 suite. All staff to whom we spoke were aware of this arrangement, and could not recall when a detainee who required such an assessment had last been in either custody suite. We were told that there were regular liaison meetings between CNWL staff and the police that discussed a variety of issues, such as section 136 assessments, situations that had arisen on CNWL premises, and community team issues.

Expectation

6.26 Each detainee seen by healthcare staff has a clinical record containing an up-to-date assessment and any care plan conforms to professional guidance from the regulatory bodies. Ethnicity of the detainee is also recorded.

Findings

6.27 The FMEs recorded information in several places, although not all were consistent in their approach. They all used the NSPIS, although some provided more information than others. Some, but not all, also kept their own notes of consultations with detainees, and all used the Book 83 to ensure payment. Some FMEs also used the Book 83 to record additional

² Section 136 of the Mental Health Act enables a police officer to remove someone from a public place and take them to a place of safety e.g. a police station. It also states clearly that the purpose of being taken to the place of safety is to enable the person to be examined by a doctor and interviewed by an approved social worker, and for the making of any necessary arrangements for treatment or care.

information that was not recorded on NSPIS. Although this information was not visible on the copy of the book that was sent to the finance department, there appeared to be no audit trail of other pages of the book, and the FMEs used several books in each custody suite, as some carried their own book.

- 6.28 This method of record keeping meant that there was no single contemporaneous clinical record for any detainee in the custody suite, and so there was no guarantee that their care would be consistent if they were seen by more than one FME. It also appeared that each FME carried out a full assessment of each patient, even though this could have already been done by another FME earlier in the day.
- 6.29 Although those FMEs we spoke to were adamant that they held their records securely, it was not possible to be confident that the individual records were held in accordance with Caldicott quidelines on the use and confidentiality of personal health information.³

Expectation

6.30 Any contact with a doctor or other healthcare professional is also recorded in the custody record, and a record made of any medication provided. The results of any clinical examination are made available to the detainee and, with detainee consent, his/her lawyer.

Findings

- 6.31 Although the FMEs recorded information on the NSPIS, we found instances where the information was so sparse that neither an FME colleague or custody staff would have known what clinical care had been given.
- 6.32 FMEs told us that if a solicitor requested a copy of their client's records, assuming the client had given consent, they would write a letter or provide a copy of their own notes (assuming they made them), but would not include a copy of the electronic custody record.

Expectation

6.33 Information-sharing protocols exist with all appropriate agencies to ensure efficient sharing of relevant health and social care information.

Findings

6.34 There were no formal information-sharing protocols between the various health and social care agencies to ensure efficient sharing of health information.

Expectation

6.35 All medications on site are stored safely and securely, and disposed of safely if not consumed. There is safe pharmaceutical stock management and use.

³ Only individuals who need access to patient identifiable information should have access to it. Action should be taken to ensure that those handling patient identifiable information – both clinical and non-clinical staff – are aware of their responsibilities and obligations to respect patient confidentiality.

Findings

6.36 The cupboards where medicines were stored were kept locked, and the keys were held by the custody staff. Stock levels were not excessive and the cupboards were tidy and well ordered. However, there were no agreed stock levels and ordering appeared ad hoc – the FMEs made an order when they considered stock was getting low. Medication stock was in date, although it was unclear who was responsible for date checking the stock on a routine basis.

Recommendations

- 6.37 There should be clinical governance arrangements in place that include the management, training, supervision and accountability of staff.
- 6.38 There should be evidence that healthcare staff receive ongoing training, supervision and support to maintain their professional registration and development.
- 6.39 The forensic medical examiners (FMEs) should communicate and work with other healthcare professionals, such as drug referral workers and the mental health team, to ensure comprehensive care is provided to individual detainees.
- 6.40 Female forensic medical examiners should be available.
- 6.41 Detainees should be able to continue to receive any prescribed clinical management for drug dependency while in custody.
- 6.42 All clinical records should be contemporaneous and conform to professional guidance from the relevant regulatory body, such as the General Medical Council.
- 6.43 All clinical records should be held in accordance with Caldicott guidelines.
- 6.44 There should be information-sharing protocols with all appropriate agencies to ensure efficient sharing of relevant health and social care information.

Housekeeping point

6.45 The examination couch in the FME room in Uxbridge custody suite should be replaced.

Good practice

- 6.46 There were excellent arrangements for undertaking section 136 mental health assessments in specialist premises.
- 6.47 There was always a member of custody staff on duty who was trained in the use of the defibrillator, and there were life masks and basic suction apparatus around the custody suites.

7. Summary of recommendations

Strategy

To the Metropolitan Police Service

- 7.1 The Metropolitan Police Service should review the practice of extracting custody staff from response teams, and take action to establish permanent custody teams. (3.24)
- 7.2 A protocol should be developed governing the access of independent custody visitors to information on the National Strategy for Police Information Systems (NSPIS). (3.25)
- 7.3 There should be liaison between force medical examiners and drugs referral workers about detainees identified as substance dependent. (3.26)
- 7.4 There should be greater analysis of information on NSPIS to improve understanding of the profile of detainees. (3.27)
- 7.5 Detainees who wish to make a formal complaint about their arrest or treatment while in custody should be able to do so while they are in custody. (3.28)
- 7.6 The number and nature of complaints should be analysed centrally and this information fed back to boroughs and custody managers to enable them to identify and solve the underlying cause of complaints. (3.29)

To the UK Border Agency and Metropolitan Police Service

- 7.7 The UK Border Agency (UKBA) should regularly monitor the physical conditions in which detainees are held on its behalf by the Metropolitan Police Service (MPS). (3.30)
- 7.8 There should be clear operating instructions and standards to regulate the use of police cells for immigration detainees and a protocol between the MPS and UKBA that incorporates the following.
 - The UKBA should ensure that immigration detainees are held for the shortest possible time in police cells.
 - The UKBA should review detention expeditiously and keep detainees informed of case progress in a language they can understand.
 - Immigration officials should serve and explain to detainees decision documents that have important consequences or engage appeal rights.
 - Police custody officers should communicate daily with UKBA to ensure speedy case progression. (3.31)

Treatment and conditions

- 7.9 Custody sergeants should be consistent in their approach to the removal of personal possessions, and denial of access should be proportionate to the level of identified risk. (4.57)
- 7.10 All detainees should be given verbal and written information, at the earliest opportunity, about the use of and access to all facilities in the custody suite. (4.58)
- 7.11 Detainees should be informed that the toilet is obscured on CCTV monitors. (4.59)
- 7.12 Clothing offered to detainees when their own has been removed for forensic examination should be less conspicuous. (4.60)
- 7.13 Detainees should always be given alternative footwear when their own is removed for forensic examination. (4.61)
- 7.14 Custody suite staff should receive fire safety training, and evacuation plans should be practised. (4.62)
- 7.15 A stock of reading material should be available to detainees, including newspapers, religious texts and material in languages commonly spoken by detainees. (4.63)
- 7.16 Detainees should always be offered a shower if held in the suite for over 24 hours and before a court appearance. (4.64)
- 7.17 Detainees who are smokers should be offered nicotine replacement if in custody for a substantial period. (4.65)
- **7.18** Access to outdoor exercise should be available, especially for detainees held for 24 hours or more. (4.66)
- 7.19 Towels should be available for detainees. (4.67)
- 7.20 The layout of the reception desk should be improved and the interview rooms relocated to ensure detainees can share personal information with custody staff without being overheard. (4.68)
- 7.21 Mattresses and pillows should be wiped with a disinfectant before they are used by other detainees. (4.69)
- 7.22 Detainees held for more than 24 hours should be able to receive visits. (4.70)
- 7.23 All custody staff should carry keys and ligature knives secured to their person. (4.71)

Individual rights

- 7.24 There should be a policy outlining how custody staff should manage juveniles in their care. (5.56)
- 7.25 Information on detainees' rights and entitlements while in police custody should be available in Tamil. (5.57)

- 7.26 Subject to individual risk assessment, relatives, guardians or appropriate adults should be allowed to remain with juveniles during waiting periods, including in the detention room if necessary. (5.58)
- 7.27 The Metropolitan Police Service should consult with the local authority with a view to improving availability of appropriate adults, particularly out of normal working hours. (5.59)
- 7.28 Custody staff should receive training in working with female detainees. Policies and procedures should be checked to ensure they take into account the distinctive needs of women, including minimum female staffing levels and routine provision of hygiene and sanitary packs. (5.60)
- 7.29 Detainees should routinely be asked about any childcare needs, and given assistance to make childcare arrangements. (5.61)
- 7.30 There should be sufficient private interview rooms to minimise delays in the time that detainees spend in custody. (5.62)
- **7.31** The complaints procedure, including racist incident complaints, should be explained to all detainees. (5.63)
- 7.32 There should be arrangements to assist communication for detainees with hearing difficulties. (5.64)
- 7.33 There should be formal pre-release arrangements for all detainees who are vulnerable. (5.65)

Healthcare

- 7.34 There should be clinical governance arrangements in place that include the management, training, supervision and accountability of staff. (6.37)
- 7.35 There should be evidence that healthcare staff receive ongoing training, supervision and support to maintain their professional registration and development. (6.38)
- 7.36 The forensic medical examiners (FMEs) should communicate and work with other healthcare professionals, such as drug referral workers and the mental health team, to ensure comprehensive care is provided to individual detainees. (6.39)
- 7.37 Female forensic medical examiners should be available. (6.40)
- 7.38 Detainees should be able to continue to receive any prescribed clinical management for drug dependency while in custody. (6.41)
- 7.39 All clinical records should be contemporaneous and conform to professional guidance from the relevant regulatory body, such as the General Medical Council. (6.42)
- 7.40 All clinical records should be held in accordance with Caldicott guidelines. (6.43)
- 7.41 There should be information-sharing protocols with all appropriate agencies to ensure efficient sharing of relevant health and social care information. (6.44)

Housekeeping point

7.42 The examination couch in the FME room in Uxbridge custody suite should be replaced. (6.45)

Good practice

- 7.43 There were excellent arrangements for undertaking section 136 mental health assessments in specialist premises. (6.46)
- 7.44 There was always a member of custody staff on duty who was trained in the use of the defibrillator, and there were life masks and basic suction apparatus around the custody suites. (6.47)

Appendix I: Inspection team

Martin Lomas - HMIP team leader
Paddy Craig - HMIC inspector
Ian Macfadyen - HMIP inspector
Marie Orrell - HMIP inspector
Sean Sullivan - HMIP inspector
Andrea Walker - HMIP inspector

Elizabeth Tysoe - HMIP healthcare inspector Margot Nelson-Owen - HMIP healthcare inspector

Sherrelle Parke - HMIP researcher

Gary Boughen - HMIC observer

Appendix II: Detainee survey

Detainee survey methodology

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.

Methodology

Interviews were offered to approximately 17 detainees held in police custody on 23 and 24 June 2008.

Researchers and inspectors explained the independence of the Inspectorate and the purpose of the questionnaire, and answered questions.

All interviews were confidential – only members of the Inspectorate recorded them. One interview was carried out with an interpreter present. Respondents were not asked their name or reasons for being in police custody.

Response rates

In total, 15 respondents were interviewed, 10 from Uxbridge police station and five from West Drayton police station. Two detainees refused to take part in an interview.

Summary

Accompanying this document is a summary of the interviews conducted.

Police custody survey

Section 1: about you

Q1	What police station are you currently being held at?	15
Q2	What type of detainee are you?	
	Police detainee	
	Prison lock-out (i.e. you were in custody in a prison before coming here)	
	Immigration detainee	
	I don't know	I
Q3	How old are you?	
20	16 years or younger	0
	17–21 years	
	22–29 years	
	30–39 years6	
	•	
Q4	Are you:	
	Male	
	Female	
	Transgender / Transexual	0
Q5	What is your ethnic origin?	
QJ	White - British	6
	White - Irish	
	White - Other	
	Wille – Other Black or Black British – Caribbean	
	Black or Black British – African	
	Black or Black British – Other	
	Asian or Asian British – Indian	
	Asian or Asian British – Pakistani	
	Asian or Asian British – Pansiani	
	Asian or Asian British – Other	
	Mixed Race – White and Black Caribbean	
	Mixed Race – White and Black Cambbean	
	Mixed Race – White and Asian	
	Mixed Race – Other	
	Chinese	
	Other ethnic group	
	Please specify:	1
	r rease speeing.	
Q6	Are you a foreign national (i.e. you do not hold a British passport, or you are not eligible	
	Yes	3
	No	12
07	What if any would you alossify as your religious group?	
Q7	What, if any, would you classify as your religious group? None	6
	Church of England	
	Catholic	
	Protestant	
	Other Christian denomination	
	Buddhist.	_
	Hindu Hindu	
	Jewish	
	Muslim	
	sikh	
	Any other religion, please specify	1

	How would you describe your sexual orientation? Straight / Heterosexual			
	Gay/Lesbian/Homosexual			
	Bisexual			
	Other (please specify):			
	Ошег (piease specify).			
Q9	Do you consider yourself to have a disability?			
	Yes			
	No			
	Don't know			
Q10	Have you ever been held in police custody before?			
	Yes			
	Section 2: your experience of this custody s	<u>uite</u>		
	If you are a 'prison-lock out' some of the following questions may not apply to Jou, please leave it blank.	o you.		
Q11	How long have you been held at this police station?			
	1 hour or less			
	More than 1 hour, but less than 6 hours			
	More than 6 hours, but less than 12 hours			
	More than 12 hours, but less than 24 hours			
	More than 24 hours, but less than 48 hours (2 days)			
	More than 48 hours (2 days), but less than 72 hours (3 days)			
	72 hours (3 days) or more			
Q12	Were you given information about your arrest and your entitlements when yo	u arrived here?		
Q12	Were you given information about your arrest and your entitlements when your service	u arrived here?		
Q12	Were you given information about your arrest and your entitlements when your service of the serv	u arrived here?		
Q12	Were you given information about your arrest and your entitlements when your service	u arrived here?		
	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')?	u arrived here?		
Q12 Q13	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here?		
	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here?		
	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here?		
	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru		
Q13	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru		
Q13	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru g to wear?		
Q13	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru g to wear?		
Q13	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru		
Q13	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru		
Q13 Q14	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru		
Q13 Q14	Were you given information about your arrest and your entitlements when you have you been told about the Police and Criminal Evidence (PACE) codes of book')? Yes	u arrived here? practice (the 'ru g to wear?		
Q13 Q14 Q15	Were you given information about your arrest and your entitlements when you have a solution of the control of t	u arrived here? practice (the 'ru		
Q13 Q14	Were you given information about your arrest and your entitlements when you have used the toilet here, were these things provided?	u arrived here? practice (the 'rul		
Q13 Q14 Q15	Were you given information about your arrest and your entitlements when you yes	u arrived here? practice (the 'rul		
Q13 Q14 Q15	Were you given information about your arrest and your entitlements when you yes	u arrived here? practice (the 'rul		
Q13 Q14 Q15	Were you given information about your arrest and your entitlements when you yes	u arrived here? practice (the 'rul		

Q17	Have you shared a cell at this p				0	
Q18	How would you rate the conditi	· .	N1 91	D 1		
	Claanlinaaa	Good	Neither	Bad		
	Cleanliness	9 2	5 9	1 1		
	Ventilation / Air quality Temperature	3	6	6		
	Lighting	4	10	1		
	Lighting	7	10	ı		
Q19	Was there any graffiti in your co				7	
	No				_	
Q20	Did staff explain to you the cor				_	
	Yes					
	No				6	
Q21	Have you been held overnight?				0	
	Yes No					
	/ v O				/	
Q22	If you have been held overnigh				7	
	Not held overnight Pillow					
	Blanket					
	Nothing					
	Notiffing				∠	
Q23	Have you been offered a shower					
	<i>Yes</i>					
	No				15	
Q24	Have you been offered any peri	od of outside exercise v	vhile here?			
	Yes					
	No				15	
Q25	Have you been offered anything	g to:				
	,	Yes	No)		
	Eat?	14	1			
	Drink?	14	1			
Q26	Was the food/drink you receive	d suitable for vour dieta	rv requirements?			
	I have not had any food or drink					
	Yes				7	
	No				1	
Q27	If you smoke, have you been of	fered anything to help v	ou cope with the smo	king ban here?		
	I do not smoke					
	I have been allowed to smoke					
	I have not been offered anything to cope with not smoking					
	I have been offered nicotin					
	I have been offered nicotin					
	I have been offered nicotin	e ıozenges			0	
Q28	Have you been offered anything	g to read?				
	Yes				4	
	No				11	

Q29	Has someone been informed of your arroyes				
	No				
	I don't know				
	I didn't want to inform anyone				
Q30	Were you offered a free telephone call?				
	Yes				
	No				
Q31	If you were denied a free phone call, was	a reason for	this offered?		
	My phone call was not denied Yes				
	No				
Q32	Do you have any concerns about the foll	owing, while	you are in police cus	tody:	
	,	Yes		No	
	Who is taking care of your children	2		11	
	Contacting your partner, relative or friend	0		13	
	Contacting your employer	0		13	
	Where you are going once released	3		11	
Q33	Have you been interviewed by police off	icials about yo	our case yet?		
	<i>Yes</i>		6		
	No		9 If no, go to C	235	
Q34	Were any of the following people presen	t when you we	ere interviewed?		
	, 31 1 1	Yes	No	Not neede	
	Solicitor	3	1	2	
	Appropriate adult	0	0	6	
	Interpreter	1	0	5	
Q35	How long did you have to wait (or how long have you been waiting) for your solicitor?				
	I have not requested a solicitor				
	2 hours or less				
	Over 2 hours but less than 4 hours				
	4 hours or more				
Q36	Have you been officially charged?				
	Yes				
	No Don't Know				
Q37	How long have you been in custody <u>after</u>				
	I have not been charged yet 1 hour or less				
	More than 1 hour, but less than 6 ho				
	More than 6 hours, but less than 12 hours				
000	De combana and the		tadaba 2		
Q38	Do you have any other comments about	your time in c	custody here?		
	0. 11	m 0	1		
	Section	on 3: safe	ety		
	<u> Scene</u>		_		
Q39	Do you feel safe here?				

Q40	Has another detainee or a member of staff victimised (insulted or assaulted) you here? Yes
Q41	If you have felt victimised, what did the incident involve? (Please tick all that apply) I have not been victimised
	beliefs
Q42	Have you been handcuffed or restrained whilst in this police custody suite? Yes
Q43	No
Q44	Have you been told how to make a complaint about your treatment here, if you need to? Yes
Q45	Do you have any other comments about safety in this police custody suite?
	Section 4: healthcare
Q46	Are you currently on any medication? Yes
Q47	Have you been able to continue taking your medication while here? Not currently taking medication
Q48	Did someone explain your entitlements to see a healthcare professional, if you need to? Yes
Q49	Have you been seen by the following healthcare professionals during your time here? Yes No Doctor 5 10 Nurse 0 10 Paramedic 0 10 Psychiatrist 0 10
Q50	Are you able to see a healthcare professional of your own gender? 9 No 1 Don't know 4

Q51	Do you have any drug or alcohol problems? Yes
Q52	Have you seen, or been offered the chance to see a drug or alcohol support worker? I don't have any drug/alcohol problems
Q53	Have you been offered relief or medication for your immediate symptoms? I don't have any drug/alcohol problems 13 Yes 0 No 1
Q54	Please rate the quality of your healthcare while in police custody: I have not been Very Good Neither Bad Very bad seen by healthcare good Ouality of healthcare 10 0 1 3 1 0
Q55	Quality of healthcare 10 0 1 3 1 0 Do you have any specific physical healthcare needs? No
Q56	Do you have any specific mental healthcare needs? 10 No
Q57	Do you have any other comments about your time in this custody suite?
	Thank you for your time

Appendix III: HMP Wormwood Scrubs prisoner survey

Prisoner survey methodology

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

Methodology

HMP Wormwood Scrubs provided a LIDS printout of the current population, which included the names of the courts prisoners had arrived from.

Forty-six were identified as coming from Uxbridge Magistrates' Court and Hillingdon Magistrates' Court, and 23 of these individuals were given a survey.

Nine were not given a survey because they were unable to read/speak English sufficiently. Three were not given a survey because they were out at work or education during distribution. The other 11 told us that they had not come from a Hillingdon borough police station. One person was interviewed, but further interviews were not offered due to the inspection work that was also taking place that week.

Researchers explained the independence of the Inspectorate and the purpose of the questionnaire.

All surveys were confidential – only members of the Inspectorate had access to them. Respondents were not asked their name or details of their offence.

Response rates

Eighteen surveys were completed. One person refused. Four were not returned due to cell movements and court visits. The response rate was 78%.

Summary

Accompanying this document is a summary of the interviews conducted.

Police custody survey

Section 1: about you

Q1	What police station were you last held at? 1. Uxbridge 2. Heathrow 3. West Drayton	
Q2	What type of detainee were you? Police detainee Prison lock-out (i.e. you were in custody in a prison before coming here) Immigration detainee I don't know	0 3
Q3	How old are you? 0 40–49 years 16 years or younger 0 40–49 years 17–21 years 2 50–59 years 22–29 years 6 60 years or older 30–39 years 8	0
Q4	Are you: Male Female Transgender / Transsexual.	0
Q5	What is your ethnic origin? White - British White - Irish White - Other Black or Black British - Caribbean Black or Black British - African Black or Black British - Other Asian or Asian British - Indian Asian or Asian British - Pakistani Asian or Asian British - Bangladeshi Asian or Asian British - Other Mixed Race - White and Black Caribbean Mixed Race - White and Black African Mixed Race - White and Asian Mixed Race - Other Chinese Other ethnic group.	
Q6	Are you a foreign national (i.e. you do not hold a British passport, or you are not eligible for a Yes	one)? 8
Q7	What, if any, would you classify as your religious group? None Church of England Catholic Protestant Other Christian denomination Buddhist Hindu Jewish Muslim Sikh	3 5 0 0 0

Q8	How would you describe your sexual			17	
	,				
00	Do you consider yourself to have a di	cobility?			
Q9	Do you consider yourself to have a dis			1	
	Don't know			0	
Q10	Have you ever been held in police cus	tody hefore?			
Q10				9	
	No			8	
	Section 2: your expe	erience of this	s custody suite		
	•		•		
	If you were a <i>'prison-lock out'</i> some If a question does no	e of the following questi t apply to you, please le			
Q11	How long were you held at the police	station?			
	1 hour or less				
	•				
			ays)		
	72 Hours (5 days) of Hiore			1	
Q12	Were you given information about you				
	Don't know / Gant remember			1	
Q13	Were you told about the Police and Cr				
	Yes				
	No				
	i don't know what this is / i don't re	?member		2	
Q14	If your clothes were taken away, were				
				10	
	i was onereu a bianket			1	
Q15	Could you use a toilet when you need			4.6	
				_	
Q16	If you have used the toilet there, were				
	Tailat napar	Yes 11	No 5		
	Toilet paper Sanitary protection	11 2	5 <i>3</i>		
	Запкату ргоксовон	2	3		
Q17	Did you share a cell at the police station				
				0	
Q17	<i>Yes</i>				

Q18	How would you rate the condition				
		Good	Neither	Bad	
	Cleanliness	4	5	6	
	Ventilation / Air quality	4	0	10	
	Temperature	2	2	11	
	Lighting	6	3	5	
Q19	Was there any graffiti in your ce				7
	No				
Q20	Did staff explain to you the corr	ect use of the cell hell?			
Q20	Yes				5
	No				9
Q21	Were you held overnight?				
	Yes				_
	No				2
Q22	If you were held overnight, which				
	Not held overnight				
	Pillow Blanket				
	Nothing				
022	Mana vary affirmed a abassian at the	a malias atation?			
Q23	Were you offered a shower at th				0
	<i>No</i>				
Q24	Were you offered any period of	outsida avarcisa whila t	thora?		
Q24	Yes				0
	No				
Q25	Were you offered anything to:				
Q23	were you offered arrything to.	Yes	No		
	Eat?	8	7		
	Drink?	9	5		
Q26	Was the food/drink you received	d suitable for your dieta	ry requirements?		
	I did not have any food or a	rink			
	Yes				_
	No				5
Q27	If you smoke, were you offered				
	I do not smoke				
	I was allowed to smoke I was not offered anything t				
	I was offered nicotine gum.	,			
	I was offered nicotine patch				
	I was offered nicotine lozen				
Q28	Were you offered anything to re	ad?			
	Yes				2
	No				13
Q29	Was someone informed of your	arrest?			
	Yes				
	<i>No</i>				
	I don't know				
	l didn't want to inform anyor	ne			3

Q30	Were you offered a free telephone cal			_	
	Yes				
	No			8	
Q31	If you were denied a free phone call, v	was a reason fo	or this offered?		
	My phone call was not denied				
	Yes				
	No			1	
Q32	Did you have any concerns about the	following, whi	le you were in police cus	stody:	
	,	Yes	No	,	
	Who was taking care of your children	5	6		
	Contacting your partner, relative or frien	d 9	5		
	Contacting your employer	3	6		
	Where you were going once released	4	5		
Q33	Were you interviewed by police official	als about your	case?		
	Yes				
	No		1		
Q34	Were any of the following people pres	sent when you	were interviewed?		
	, , , , ,	Yes	No	Not needed	
	Solicitor	11	1	3	
	Appropriate adult	0	1	5	
	Interpreter	1	2	5	
Q35	How long did you have to wait for you	ur solicitor?			
	I did not requested a solicitor			2	
	2 hours or less				
	Over 2 hours but less than 4 hour				
	4 hours or more			9	
Q36	Were you officially charged?				
	Yes			14	
	No			3	
	Don't know			1	
Q37	How long were you in police custody	after being cha	arged?		
	I have not been charged yet			3	
	1 hour or less			2	
	More than 1 hour, but less than 6 hours				
	More than 6 hours, but less than 12 hours				
	12 hours or more			8	
Q38	Do you have any other comments abo	out your time ir	n police custody?		
	"I had to ask for toilet paper. I got to bru	sh my teeth but	was not offered a shower		
	was too dark and very cold. My phone c				
	even though it was still AM. I was not offered an interpreter – though I felt I should have had one; they made				
	me sign things in English even though I			-	
		-			

Uxbridge Police Station:

"My phone call was denied because they thought I might ring the victim. They took my phone, and I haven't seen it since – it was not sent to the prison."

"The cells are dirty, and stuffy with bad ventilation, so you have to keep asking the officers for water – but they get a bit annoyed if you keep ringing the bell. Also, I wanted to know if I was going straight to court or getting bail but I was not told anything helpful."

"I had no complaints."

"I was handled by the police very seriously and very tough..."

"Depending on your attitude and criminal record, the police differ on how they handle dangerous [people] – you get some foolishness."

"I think they should have a smoking area for detainees, as this helps smokers when stressed."

"Some sort of exercise or access to a yard should be available."

"I was not treated with any respect as a fellow human being. As I am classified as Afro-Caribbean they instantly deal with me in an inhumane manner."

"I was not offered a free phone call, I had to ask – and I was denied because they were too busy. I hated my time in custody."

West Drayton Police Station:

"I was late to report for bail, but the way I was treated was not right. The officer on duty did not take the time to explain the situation to me, he just told me that I had broken the terms and conditions of bail and said to empty my pockets. I was then searched and put straight in the cell. He was upsetting and cheeky. The arresting officer was also there, but she was just taking the mickey out of me, and they joked around like kids. They should grow up – especially as police officers representing the country."

"It was very stressful in custody with no one to talk to, looking at the wall, with just the sizzling sound of the light bulb. It's better to be in prison than in police custody..."

"The cell was dirty. They didn't change the bedding after releasing the previous prisoner."

Section 3: safety

Q39	Did you feel safe there? 11 No
Q40	Had another detainee or a member of staff victimised (insulted or assaulted) you there? Yes
Q41	If you have felt victimised, what did the incident involve? (Please tick all that apply) I have not been victimised 12 Because of your crime 4 Insulting remarks (about you, your family or friends) 2 Because of your sexuality 00 Physical abuse (being hit, kicked or assaulted) 2 Because you have a disability 00 Sexual abuse 0 Because of your religion/religious 1 beliefs 1 Your race or ethnic origin 1 Because you are from a different 1 part of the country than others 0
Q42	Were you handcuffed or restrained while in the police custody suite? Yes
Q43	Were you injured while in police custody, in a way that you feel was not your fault? Yes

	No	. 12
Q44	Were you told how to make a complaint about your treatment here, if you needed to? Yes	
Q45	Do you have any other comments about safety in the police custody suite?	
	Uxbridge Police Station:	
	"I was physically pushed and thrown into the police van by the arresting officer at my house."	
	"Most people would feel safer if an independent person was in the custody suite to oversee proceedings.	"
	"Due the experiences of myself and others, I was worried about what would happen to me."	
	"I was always handcuffed whilst in the police custody suite."	
	West Drayton Police Station:	

"They treated me very badly. They sprayed me in the face with CS gas for no reason. I was scared."

		Section 4: healthcare	<u>9</u>			
Q46	Yes	istody were you on any medication				
Q47	Not taking medication Yes	taking your medication while ther		2		
Q48	Yes No	entitlements to see a healthcare p		9 6		
Q49	Were you seen by the following healthcare professionals during your time there?					
	5 .	Yes	No			
	Doctor	/	10			
	Nurse	2	12			
	Paramedic	0	12			
	Psychiatrist	I	12			
Q50	Were you able to see a healthcare professional of your own gender?					
	Don't know			3		
Q51	Did you have any drug or a	Icohol problems?				
				3		
	<i>No</i>			15		

Q52	I didn't have any drug/alcohol	problems					
	<i>Yes No</i>						
Q53	Were you offered relief or medicat I didn't have any drug/alcohol Yes	problems					2
Q54	Please rate the quality of your hea	Ithcare while in po		-	Neither	Bad	Voruhaa
		by healthcare	Very good	Good	rveitriei	DdU	Very bad
	Quality of healthcare	10	0	4	1	1	1
Q55	Did you have any specific <u>physica</u> No Yes						
Q56	Did you have any specific mental I No Yes.						
Q57	Do you have any other comments	about your time in	the poli	ce custo	dy suite?		
	Uxbridge Police Station:						
	"I was coming off heroin and crack and alcohol they gave me two valium tablets to help me sleep."						
	"I suffer from severe epilepsy." [Prisoner did not mention that this was an issue while in custody, but he did tick that he'd seen a doctor.]						out he did
	"Due to my disability, I just needed to	o be conscious of no	ot losing r	my artificia	ol leg."		

Thank you for your time

"I wear glasses and have been for over 30 years but they insisted on taking them off of me."

Appendix IV: Hillingdon community postal survey

Community survey methodology

A voluntary, confidential and anonymous survey of 500 adults who had been through the custody suites in Hillingdon in May 2008 was carried out for this inspection. The results of this survey formed part of the evidence base for the inspection report.

The Metropolitan Police provided the names and addresses of 500 adults who had been through Hillingdon police custody suites in May 2008. A copy of the survey, a covering letter and a SAE was sent to every individual on the list.

Respondents were not asked to put their names on their questionnaire, although many put their names on the envelopes.

In total, 35 (7%) respondents completed and returned their questionnaires.

Police custody survey

Section 1: about you

Q1	What police station were you last held at?		
		3.	
Q2	What type of detainee were you?	27	
	Police detainee		
	Prison lock-out (i.e. you were in custody in a prison before coming here)		
	Immigration detainee		
	I don't know	1	
Q3	How old are you?		
	16 years or younger 0 40–49 years 0	6	
	17–21 years		
	22–29 years		
	<i>30–39 years</i> 10		
Q4	Are you:		
	Male	28	
	Female		
Q5	What is your ethnic origin?		
Q3	White - British	22	
	White - Irish		
	White - Other		
	Black or Black British – Caribbean		
	Black or Black British African		
	Black or Black British - Other		
	Asian or Asian British – Indian		
	Asian or Asian British - Pakistani		
	Asian or Asian British – Pangladeshi		
	Asian or Asian British – Other		
	Mixed Race – White and Black Caribbean		
	Mixed Race – White and Black Cambbean Mixed Race – White and Black African		
	Mixed Race – White and Asian		
	Mixed Race - Other		
	Chinese		
	Other ethnic group		
Q6	Are you a foreign national (i.e. you do not hold a British passport, or you are not eligib	le for one)?	
	Yes		
	No		
Q7	What, if any, would you classify as your religious group?		
	None	8	
	Church of England		
	Catholic		
	Protestant		
	Other Christian denomination		
	Buddhist	1	
	Hindu	2	
	Jewish	0	
	Muslim	3	
	Sikh	2	

Q8	Do you consider yourself to have a disability? Yes		
	No	9	
	Don't know1		
	Section 2: your experience of this custody suite		

If you were a 'prison-lock out' some of the following questions may not apply to you. If a question does not apply to you, please leave it blank.

	ii a question t	dues flut apply to you, pied	ise leave it blank.			
Q9	How long were you held at the 1 hour or less				4	
	More than 1 hour, but less	than 6 hours			11	
	More than 6 hours, but les	s than 12 hours			7	
	More than 12 hours, but le	ess than 24 hours			12	
	More than 24 hours, but le	ess than 48 hours (2 days)			1	
	More than 48 hours (2 day	rs), but less than 72 hours	(3 days)		0	
	72 hours (3 days) or more					
Q10	Were you given information ab	out your arrest and you	entitlements when y	ou arrived there?	2	
	No		DOITE KNOW / CAITETEE	nember	Z	
044	W	10	(DAGE) (•	
Q11	Were you told about the Police Yes					
	No		T UUTTE KITOW WHAT IIIIS	13 / T doi i i Terrierribe	<i>51</i> 3	
Q12	Could you use a toilet when you		Don't know		ว	
	No		DUITE KHOW		Z	
	7 v O					
Q13	If you have used the toilet there, were these things provided?					
		Yes	N	0		
	Toilet paper	18	1	=		
	Sanitary protection	0	13			
	Other (please specify):					
Q14	How would you rate the condit	ion of your cell:				
		Good	Neither	Bad		
	Cleanliness	14	7	12		
	Ventilation / Air quality	11	8	14		
	Temperature	10	11	12		
	Lighting	18	7	8		
Q15	Did staff explain to you the cor	rect use of the cell bell?				
2.5	Yes				21	
Q16	If you were held overnight, whi	ich items of clean beddir	na were vou aiven?			
	Not held overnight				9	
	Pillow					
			· · · · · · · · · · · · · · · · · · ·			
Q17	Were you offered a shower at t				٠.	
	Yes	0	No		34	

Q18	Were you offered anything to:					
	Fai?	Yes		No		
	Eat? Drink?	20 23		12 10		
	Read?	5		26		
	redu.	Ü		20		
Q19	Was someone informed of your arrest?	15	Lateralt ton acco	2		
	Yes No					
	740		r diarre warn to in	norm arryone		
Q20	Were you offered a free telephone call? Yes	17	No	16		
Q21	Did you have any concerns about the fol	lowing, while	you were in polic	e custody: No		
	Who was taking care of your children	6		20		
	Contacting your partner, relative or friend	14		16		
	Contacting your employer	3		23		
	Where you were going once released	7		19		
O22	If you were interviewed, were any of the	following peor	nla nrasant at tha	time?		
QZZ	if you were interviewed, were any or the	Yes	No	Not needed / not interviewed		
	Solicitor	9	15	8		
	Appropriate adult	2	12	12		
	Interpreter	1	12	13		
	2 hours or less Over 2 hours but less than 4 hours 4 hours or more			3		
Q24	Do you have any other comments about	your time in p	olice custody?			
	Example of comments include:	, , , , , , , , , , , , , , , , , , , 				
	"When I was charged, one of the police officers who had detained me earlier came to the cell and took the [mickey] by gloating that I had been detained when handing me the charge sheet".					
	"I was treated very well by all the police office	cers I came in t	o contact with."			
	"Nowhere to wash my hands."					
	"[I was told about PACE], only when I asked	them for the b	ook to be read."			
	"When I asked for food it took then more than six hours to give it to me." "No solicitor was available." "Police were making jokes about detainees."					
	"I shouldn't have been detained initially. I was on my period and not offered any sanitation or a call home to make sure my children were safe and not worried. I voiced my fears and was ignored." "I was not properly informed. It took too long to contact my worried relatives to let them know my location and situation."					

"I am a middle-aged, working family man and was arrested for no reason by police officers young enough to be my grandchildren, who were obviously trying to impress someone. I had a whole can of pepper spray sprayed into my eyes and face; [so much] that my skin was peeling for one month. I was double handcuffed (two sets) for the whole night, purely because I am a large man. The police were too young, inexperienced and totally useless. I have never before been in trouble, have no record, and was detained overnight when my children needed me at home. If this is the Uxbridge police force then it is a total disgrace, and they should be properly trained."

Section 3: safety Q25 Did you feel safe there? *No.......* 9 Had another detainee or a member of staff victimised (insulted or assaulted) you there? Q26 *Yes* 13 *No.....* 21 Q27 If you have felt victimised, what did the incident involve? (Please tick all that apply) Insulting remarks (about you, your family or friends)......6 Because of your sexuality...... 0 Physical abuse (being hit, kicked or assaulted)......5 Because you have a disability 0 Sexual abuse......2 Because of your religion/religious 2 beliefs Your race or ethnic origin4 Because you are from a different 0 part of the country than others..... Example of comments include: "Silly embarrassing remarks." "Police were making jokes behind my back." "When I was being restrained I was kneed in the nose on purpose." "Teasing about rubber glove treatment by officers." "I was mistaken for an Asian which I was offended by." [Identified herself on the survey as Spanish] Q28 Were you handcuffed or restrained while in the police custody suite? *No.......* 21 Q29 Were you injured while in police custody, in a way that you feel was not your fault? *Yes*8 *No......* 26 Q30 Were you told how to make a complaint about your treatment here, if you needed to? Q31 Do you have any other comments about safety in the police custody suite?

Example of comments include:

"I felt very safe and protected. I was kept away from other prisoners, because I was the only woman."

"Once I was charged and told I was being detained overnight I requested a phone call as I have an animal in my house who needed looking after. I was eventually allowed to make a call at 12:30am. By leaving it so long, it was obvious it would inconvenience the person I wished to phone by getting them out of bed. That was a spiteful action by the custody sergeant."

"When I was arrested the police were very rough with me, the handcuffs were done so hard."

"Arrested for no reason, pushed to the ground, handcuffed too tight, with no consideration for the fact I was on my way home to my children, who were with a babysitter who was going in half an hour. I was detained for five hours, worrying about my children. I was thrown out at 3:30 in the morning to make my own way home."

"Because of police brutality, detainees must have their own independent legal representative or embassy staff. The police's heavy handedness plays a cruel part against the detainee and the innocent."

Section 4: healthcare

"I was put into a cold cage, shivering and shaking."

Q32 If you were on medication, were you able to continue taking it while in police custody? Did someone explain your entitlements to see a healthcare professional, if you needed to? Q33 Q34 Were you seen by the following healthcare professionals during your time there? Yes Doctor 16 15 24 Nurse 0 Paramedic 0 24 **Psychiatrist** 25 Q35 Did you have any drug or alcohol problems? Q36 Were you offered relief or medication for your immediate symptoms? Yes...... 1 I didn't have any drug/alcohol problems 30 *No* 2 Q37 Please rate the quality of your healthcare whilst in police custody: I was not seen by Very good Good Neither Bad Very bad healthcare

Q38

Quality of healthcare

12

Did you have any specific physical healthcare needs?

3

5

7

3

3

Example of comments include:

"Missed prescribed drugs for inflamed joints."

"Intestinal problems/ congenital."

"Fits."

Q39 Did you have any specific mental healthcare needs?

Yes.....

Example of comments include:

"I felt depressed and panicked."

"Clinical depression, anxiety and an eating disorder."

Q40 Do you have any other comments about your time in the police custody suite? Examples about healthcare include:

"The temperature of the cell was so high, it would be a breeding ground for germs. The doctor's examination was non-existent, so pointless."

"[I wasn't offered relief medication] straight away."

"Police doctors don't really care about your needs, they only care about protocol."

Example of comments of general experience in police custody include:

"I was dealt with quickly and efficiently and given the option of an 'on the spot' fine or court."

"There are good cops and bad cops and some couldn't care less. On this occasion I was picked up by some good guys and it's helped [me] straighten up."

"The doctor came late, he was sympathetic to the police force and not the detainee."

"The police force that attended my shop were extremely violent, behaved like thugs and were extremely aggressive and unprofessional."

"You should be allowed out for some fresh air."

"It was degrading, I was lied to and told my friend and children were contacted. As I was on my period I had leaked through my jeans. How humiliating."