

The Chairman,

The Tribunal of Inquiry into Police Interrogation Procedures in Northern Ireland.

The enclosed statement is submitted with the sole object of assisting the Tribunal in the completion of its mandate.

My primary role is that of a member of the Medical Profession; any other role is subsidiary including that as a Civil Servant. My evidence therefore is that of a doctor born and bred in Northern Ireland with a wider-than-normal experience of life in general and with a particular knowledge of medico-legal and prison work. It is also the evidence of one of the very few non-members of the R.U.C. who has had access to an Interrogation Centre.

I am fully aware of the Tokyo Convention and the Declaration with respect to the role of doctors in their treatment of persons in custody.

In Northern Ireland I have lived in close association with convicted terrorists; I have had close friends murdered in the most foul ways; I have picked up the warm still-living tissues of humans blown apart in the streets; I have tended the blinded and maimed; I have tried to console relatives.

I have no sympathy with terrorists.

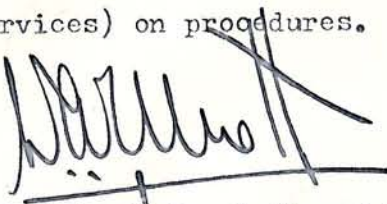
The training in subversion, subterfuge and deception completed by the terrorists is well known to me.

My sympathies lie with the law abiding population and particularly with the R.U.C. whose members are at considerably greater risk than any other group.

Unfortunately even with the above views the recommendations contained in the Amnesty International report came as no surprise.

Any degree of rancour which may be apparent in the statement comes only from a strong feeling that the activities of a few have caused the majority of the present difficulties.

I would like to make it quite clear that this is a personal submission made directly to the Tribunal. Before completing the document I consulted the Chief Medical Officer (Department of Health and Social Services) on procedures.



14 August 1978.

D.A. Elliott M.A., M.B., B.Ch., J.P..

Senior Medical Officer, Police Authority for Northern Ireland.

Sheet One.Statement to the Tribunal of Inquiry into Police Interrogation Procedures in Northern Ireland.

In September 1977 I was approached by the Chief Medical Officer (Department of Health and Social Services) with respect to acceptance of the Senior Medical Officer position at Gough Barracks (Armagh) where a new Interrogation Centre was about to open. Following consultation with various officers concerned and prolonged visits to the existing Interrogation Centre (Castlereagh) I informed the Chief Medical Officer that I would be loathe to accept the position pending definition of the duties involved. At a meeting on 6th September 1977 chaired by the Deputy Chief Medical Officer and involving officers of the Northern Ireland Office and of the Police Authority, Dr C.G. Alexander and myself the content of the S.M.O. Job Description was discussed amongst other issues. Dr Alexander and I were asked to produce an initial draft Job Description to facilitate further consideration. This draft was prepared and submitted to the Chief Medical Officer on 4th October 1977 (Appendix A). Following this submission a meeting took place at Police Authority Headquarters with representatives of the Medical Profession, the Police Authority and the Royal Ulster Constabulary. At this meeting the principles set out in the submission were accepted on an oral basis.

Under the above circumstances I accepted the position of Senior Medical Officer at Gough Barracks Armagh.

In early November 1977 the Interrogation Centre at Gough Barracks opened. Very soon it became obvious to me that my duties as had been agreed orally had not been made clear to the police at the Centre who considered that I should complete examinations at their request, and that only. They were not aware that I was to be present at the Centre on a full-time basis. I made repeated requests directly to the R.U.C. and through the Police Authority that the position should be clarified but the response was slow. This made my position most difficult.

In early December 1977 the Amnesty International Team came to Northern Ireland and I was asked by the Police Authority to give evidence as to the safeguards which existed for the protection of prisoners and police at the Interrogation Centre Armagh. These safeguards had not been agreed in writing, however under the oral assurances which I had received I felt that I could give the necessary evidence and did so.

In the period after the visit by Amnesty International I experienced increased difficulty in carrying out my duty. e.g. in visiting prisoners in their cells in the early morning and in having access to the times and durations of interrogations. At that time I remained confident that at least the vast majority of the allegations made against the police were without foundation; I had seen only one case which had caused considerable doubt (McGrath 29.11.77). With increasing numbers of

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allegations by prisoners and in the light of my clinical findings this confidence decreased.

In January 1978 a case appeared where I had no doubt that the allegations were at least partly true (Mohan 23.1.78). In February 1978 a further case with significant findings came to my attention (H.J. Canavan 27.2.78)

The cases mentioned above are only three of many complaints (official and unofficial) which I had dealt with. The many accounts given to me by prisoners about interrogation procedures and the consistency of their content, together with the knowledge gleaned from my presence at the Centre now left me in grave doubt about the interrogation procedures being carried out in accordance with acceptable methods. At that time I consulted with the Police Surgeons Association and the Senior Medical Officer at Belfast Prison to find that they were equally concerned. I requested an urgent meeting with the Complaints Committee of the Police Authority and read a statement to the members on 6th March 1978 (Appendix B). As a result of this action a meeting of the Hermon Committee was called on an urgent basis; this took place considerably later but did not result in effective action. It is significant that at a meeting with the Police Authority at about this time the Chief Constable is understood to have remarked that a doctor had attempted to interfere with interrogation procedures by examining records of frequency and duration of interviews and to have encouraged complaints by visiting prisoners without request.

On about 26 March two further cases of alleged ill-treatment with significant clinical findings came to my attention (D.J. Hamill and P.J. Dignam). At that time my four deputies (local General Practitioners) informed me that, if ill-treatment should continue, they would not be able to remain in post as they could not be seen to be associated with the procedures.

In April 1978 three further cases were seen where the clinical findings were significant and supported the allegations of ill-treatment (R.B. Livingstone 2.4.78; S.H. Gilpin 10.4.78; A. Maguire 17.4.78). One less serious case was also recorded (W.S. Irwin 19.4.78).

On 12 April 1978 I decided that I could no longer be associated with the Interrogation Centre and submitted a request for transfer stating my reasons. However as a result of assurances given to me personally by the Chief Medical Officer and because a Press leak had taken place I agreed to withhold my request pending efforts to resolve the causes of my dissatisfaction.

On 20th April 1978 a meeting took place with the Chief Constable and other doctors involved; my rough notes are enclosed as appendix D. At this meeting Dr R.B. Irwin (Senior Police Surgeon Belfast District and part-time Medical Officer Belfast Prison) produced a document from the Senior Medical Officer Belfast Prison showing the number of remand prisoners in the prison at that time who had arrived from police

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custody bearing significant clinical findings consistent with ill-treatment (Appendix E). I produced a letter sent to the Police Authority by my Deputy Medical Officers (Appendix F). Just before this meeting took place a further case of ill-treatment with significant clinical findings had come to my attention. This case had taken place in spite of warnings given to the Duty Inspector (uniformed) and to the interrogators immediately beforehand (A. Maguire 17.4.78 previously quoted above and worthy of close attention). After this meeting with the Chief Constable a further meeting of the Hermon Committee took place.

Immediately after the meeting with the Chief Constable action was seen to be taken for the first time e.g. wideangle lens viewing devices were fitted to the doors of the interrogation rooms at Armagh; a Chief Inspector was appointed to overall control of the Interrogation Centre; certain members of the CID who seemed to be regularly close to complaints of ill-treatment did not appear at Armagh Interrogation Centre again. Since that time I have seen no significant case of ill-treatment at Armagh Interrogation Centre although I must add that the establishment has been almost out of use.

The following are facts:-

- (1) Ill-treatment of prisoners in custody at Armagh Interrogation Centre has taken Place.
- (2) At Armagh Interrogation Centre:-
 - (a) No report of self-inflicted or attempted self-inflicted injury has been received from the police in connection with a complaint, nor indeed have clinical findings indicated that any such injuries have taken place in significant numbers.
 - (b) No report of assault on the R.U.C. by a prisoner has been received.
- (3) No case is known to me where a member of the R.U.C. has been successfully prosecuted for assault on a prisoner in custody at an Interrogation Centre.
- (4) Serious charges have been dismissed in Court due to the use of irregular interrogation procedures.

My conclusion from the above is that the existing system for the protection of prisoners is inadequate.

The following are opinions which I have formed after very careful consideration of my experiences:-

- (1) That Senior Officers of the R.U.C. have been interested in the 'successful' results of interrogation procedures to such an extent that the use of some unacceptable methods would appear to have been condoned.
- (2) That the Complaints and Discipline Branch of the R.U.C. functions with complete integrity but is so hampered by the existing system for dealing with complaints that it cannot produce results of a sufficiently positive nature to enable

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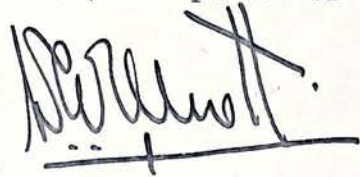
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corrective action to be taken.

- (3) That interrogation procedures which have been in use are to some extent responsible for the unacceptability of the R.U.C. in certain areas.
- (4) That selection of officers for interrogation work should be completed with greater care.
- (5) That the use of non-members of the R.U.C. as observers in Interrogation Centres and Police Stations is essential. Members of the Medical Profession are well qualified for such work and the burden of their registration with the General Medical Council is an added insurance. However it would be essential for the duties of such observers to be laid down absolutely.
- (6) That with minor modifications the system at present in use at Armagh Interrogation Centre is adequate.
- (7) That the use of a Closed Circuit Television System in the interrogation rooms is unnecessary and understandably unacceptable to the interrogators.

Other documentation is enclosed as follows:-

- (1) A copy of my letter to the Police Authority dated 23rd May 1978 (Appendix G).
- (2) Copies of all reports submitted to Complaints and Discipline Branch (RUC) on cases of alleged ill-treatment (Appendix H). I consider it important to submit all these reports and not just those in which I concluded that ill-treatment had taken place.
- (3) A series of letters etc. which illustrate the difficulties experienced in getting written agreement on a Job Description for Senior Medical Officers at Interrogation Centres. Even at this date the position has not been absolutely finalised.(Appendix I).
- (4) A copy of the Guidance Instructions issued to the Deputy Medical Officers at Armagh Interrogation Centre. This has achieved some 98% acceptance of medical examinations offered to prisoners.



15 August 1978

D.A. Elliott M.A., M.B., B.Ch., J.P.

Senior Medical Officer Police Authority for Northern Ireland.

Late Police Surgeon East Tyrone.

Late Coroner East Tyrone.

Late Senior Medical Officer H.M. Prison Service.