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Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment

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Subcommittee on Prevention of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment

National preventive mechanism checklist on health-care issues relating to the monitoring of places of detention*

I. Introduction

- 1. The present document was prepared pursuant to a decision taken by the Subcommittee on Prevention of Torture at its thirty-second session, in accordance with its mandate as set forth in article 11 (b) of the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.
- 2. The availability and the quality of health care in prisons are crucial indicators in assessing the risk of cruel, inhuman and degrading treatment, and even torture.
- 3. National preventive mechanisms should ensure that they cover health-care issues comprehensively in order to fulfil their preventive mandate. The checklist annexed below is recommended as a self-assessment tool to remind national preventive mechanisms of the critical health issues that they should consider in their evaluations of places of deprivation of liberty. The checklist is expected to reveal a general pattern of health-care issues that are, or are not, being addressed in their visit reports. It is designed for internal use only and not as an instrument for assessing actual conditions in places of deprivation of liberty. National preventive mechanisms are encouraged to design their own health-care assessment tools for use in all their monitoring visits.

II. Objectives of the checklist

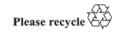
- 4. The objectives of the checklist are to:
- (a) Remind national preventive mechanisms of the important health-care issues that need to be noted during their visits;
- (b) Identify gaps in the capacity of national preventive mechanisms to monitor health aspects of torture prevention and, if necessary, strengthen their health expertise.

III. Design of the checklist

5. The checklist consists of six categories of health-care issues, which are based on the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules) and on the Istanbul Protocol (knowledge, sensitivity and professional ethics, and practice, included under the section on health staff). The comments

^{*} Adopted by the Subcommittee at its thirty-third session (13–17 November 2017).







(problems/difficulties) column is meant to bring to the fore problems related to monitoring the particular issue.

IV. How to use the checklist

6. National preventive mechanisms should tick either the "Yes" or "No" box depending on the issues on the checklist that they have noted during their visit to a particular place of deprivation of liberty. It is important to enter remarks in the comments (problems/difficulties) column, such as lack of clarity, lack of expertise, administrative barriers, as well as recommendations on how to resolve them.

Annex

Checklist on health-care issues relating to the monitoring of places of detention¹

Noted	Yes	No	Comments (problems/difficulties)	
Admission procedures				
1. Body search procedures				
2. Medical screening, including medication history, physical examination and review of physiological systems				
3. Documentation of all procedures done upon admission				
4. Access to health-care services (medical, dental and mental health services) without discrimination of any kind				
5. Information provided to detainees, for instance, on their rights or on the prison regime				
Files and records				
1. Prisoner file management system				
2. Consistency of general data between administrative records and medical records				
3. Recording of medical information and problems				
4. Documentation of injuries or medical complaints (including mental and psychological complaints)				
5. Mechanisms for reporting and documenting torture and ill-treatment				
6. Compilation and storage of records				

Based on the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the Istanbul Protocol and the United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules).

Noted	Yes	No	Comments (problems/difficulties)		
General health services					
1. Classification system to specify and protect the needs of specific populations, considering age, culture, gender, religion					
2. Use of risk assessment tools					
3. Programmes for the special needs of different populations and ensuring equitable access to health care for mental illness, drug addiction and communicable diseases					
4. Dental and medical supplies (equipment and medication)					
5. Medical and dental referral system					
6. Budget for health services					
7. Interventions for the prevention and/or treatment of sexually transmitted diseases, communicable diseases, suicide, self-harm, substance abuse, etc.					
8. Rehabilitation/reintegration/resocialization programmes					
Mental health services					
Availability of mental health professionals					
2. Recording of mental and stress-related complaints, signs and symptoms					
3. Preventive mental health-care programmes					
4. Quality of mental health services					
Health staff					
Training					
1. Documenting torture					
2. Istanbul Protocol					

Noted	Yes	No	Comments (problems/difficulties)
3. Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment and its Optional Protocol			
4. Guidelines against Intimidation or Reprisals ("San Jose Guidelines")			
5. United Nations Standard Minimum Rules for the Treatment of Prisoners (the Nelson Mandela Rules)			
Sensitivity and professional ethics			
Sensitivity to different age-related, cultural, religious and gender aspects when rendering health services			
2. Availability of institutional support, training and protection			
3. Confidence in system for reporting torture/ill-treatment to the authorities			
4. Recognition of barriers to documenting and reporting cases of torture			
Practice			
1. Autonomy and independence			
2. Use of protocols and procedures in cases of incarceration, isolation and other disciplinary measures			
3. Use of protocols for referral and transport to external medical facilities			
4. Reporting of torture and ill-treatment			
5. Existence of anti-reprisal mechanisms			
6. Involvement of medical personnel in the application and/or monitoring of isolation, restraints and other disciplinary measures			
7. Adherence to the Nelson Mandela Rules			

Noted	Yes	No	Comments (problems/difficulties)	
8. Use of the Istanbul Protocol to document torture				
9. Attendance of training for documentation and reporting on torture				
Prison health environment				
1. Food quality and quantity				
2. Water safety, general cleanliness, ventilation and sunlight				
3. Recreational and exercise facilities				