

23rd GENERAL REPORT OF THE CPT

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



1 August **2012** -
31 July **2013**

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE

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French edition:

23^e rapport général du Comité européen pour la prévention de la torture et des peines ou traitements inhumains ou dégradants (CPT)

The CPT is required to draw up every year a general report on its activities, which is published. This 23rd General Report, as well as previous general reports and other information about the work of the CPT, may be obtained from the Committee's Secretariat or from its website: <http://www.cpt.coe.int/>.

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Contents

Activities during the period 1 August 2012 to 31 July 2013	5
Visits	7
Periodic visits	7
Ad hoc visits	7
Monitoring on behalf of the International Criminal Tribunal for the former Yugoslavia (ICTY)	12
Plenary meetings and activities of subgroups.....	12
Contacts with other bodies.....	13
Publication highlights	17
Introduction.....	19
Selected publications.....	19
Report on the ad hoc visit to Belgium in April 2012 and response of the Belgian authorities	20
Report on the ad hoc visit to Bulgaria in May 2012 and response of the Bulgarian authorities	21
Report on the ad hoc visit to Georgia in November 2012 and response of the Georgian authorities	23
Report on the ad hoc visit to Malta in September 2011 and response of the Maltese authorities.....	24
Report on the ad hoc visit to the North Caucasian region of the Russian Federation in April/May 2011 and response of the Russian authorities	26
Reports on the periodic and ad hoc visits to Spain in May/June 2011 and June 2012 and responses of the Spanish authorities	28
Report on the ad hoc visit to the United Kingdom in October 2012 and response of the United Kingdom authorities	30
Documenting and reporting medical evidence of ill-treatment	33
Organisational matters	41
CPT membership.....	43
Bureau of the CPT	44
CPT secretariat.....	44

Appendices	45
1. The CPT's mandate and <i>modus operandi</i>	47
2. Signatures and ratifications of the Convention establishing the CPT	48
3. The CPT's field of operations.....	49
4. CPT members.....	50
5. CPT secretariat.....	52
6. Publication of CPT visit reports	54
7. Countries and places of detention visited by CPT delegations;	
August 2012-July 2013	55
Periodic visits	55
Ad hoc visits	63

Activities during the period 1 August 2012 to 31 July 2013



Visits

1. The CPT organised 21 visits totalling 164 days during the twelve-month period covered by this General Report, which constitutes a notable increase in the Committee's activities as compared to the previous year (during which 18 visits totalling 146 days were organised).

Eleven of the visits (totalling 101 days) formed part of the CPT's annual programmes of periodic visits for 2012 and 2013, and ten (63 days) were ad hoc visits which the Committee considered were required by the circumstances. The precise dates of each of these visits and a list of the places of deprivation of liberty visited by the CPT's delegation are provided in Appendix 7.

2. The above-mentioned development of the CPT's activities over the last twelve months has in large part been made possible by a more favourable situation within the Committee's Secretariat. The CPT trusts that this situation can be maintained (see also paragraphs 91 to 93).

Periodic visits

3. The eleven periodic visits were carried out to Croatia, Greece, Hungary, Iceland, Lithuania, Monaco, Montenegro, Poland, San Marino, Turkey and the United Kingdom. The last-mentioned visit was in large part focused on Scotland, which had not been visited by the CPT since 2003.

4. In line with the CPT's usual practice, the situation in a wide range of places of deprivation of liberty was examined during each periodic visit. Naturally, the treatment of persons in police custody will always feature prominently in the programme of any periodic visit. In this connection, the Committee's delegation paid particular attention, during the June 2013 periodic visit to Turkey, to the treatment of persons detained in the context of the widespread public demonstrations that took place in the country in the course of May and June; scores of demonstrators who had been taken into police custody in Ankara and Istanbul were interviewed.

The treatment of persons detained under immigration legislation was a focus of the periodic visit to Greece as well as of that part of the visit to the United Kingdom devoted to England. As regards prison-related matters, health-care services for prisoners were closely examined in several countries (e.g. Greece and Poland) and the situation of persons serving life sentences or other long prison terms was explored in detail in Hungary, Lithuania and Turkey. The treatment of residents in social care facilities was an aspect of the visits to Croatia, Montenegro and San Marino.

Ad hoc visits

5. The ten ad hoc visits carried out by the CPT during the period covered by this General Report were to Armenia, Azerbaijan, Bosnia and Herzegovina, Georgia, Greenland (Denmark), Portugal, the Russian Federation, Turkey, Ukraine and the United Kingdom.

6. During the ad hoc visit to **Armenia** in April 2013, the CPT's delegation reviewed the steps taken to implement recommendations made by the Committee after previous visits regarding the treatment of persons deprived of their liberty by the police. The delegation interviewed numerous detained persons who had recently been or were still in police custody, and examined investigation files concerning complaints about police ill-treatment.

The delegation also reviewed the situation of certain life-sentenced prisoners at Kentron Prison, whose treatment had been severely criticised by the CPT in the reports on its 2010 and 2011 visits to Armenia.

7. The treatment of persons detained by law enforcement agencies was also the principal focus of the December 2012 ad hoc visit to **Azerbaijan**. In addition to interviewing a large number of persons with recent experience of police custody, the CPT's delegation examined in depth the effectiveness of the investigations carried out into several specific cases involving possible ill-treatment by law enforcement officials; those cases included that of Turac Zeynalov, who died in August 2011 whilst remanded in custody in the Nakhchivan Autonomous Republic of Azerbaijan.

8. Similarly, the main theme of the ad hoc visit to **Bosnia and Herzegovina** in December 2012 was the treatment of persons in police custody, in particular in the Republika Srpska. The CPT wished to evaluate the progress made in implementing the recommendations aimed at combating police ill-treatment set out in the report on the periodic visit organised in 2011. The report on the 2012 ad hoc visit as well as the response of the Government of Bosnia and Herzegovina were made public on 12 September 2013.

In its report, the CPT concludes that resort to ill-treatment by the police remains a frequent occurrence, in particular by crime inspectors in the Banja Luka Central and Gradiska Police Stations. In response to the CPT's recommendations, the authorities of Bosnia and Herzegovina provide information on certain investigations into allegations of ill-treatment, as well as on preventive action taken in the form of circulars issued by the Director of Police and the Criminal Police Administration following an instruction from the Minister of the Interior of the Republika Srpska. Reference is also made to a letter sent to judges by the President of the Supreme Court of the Republika Srpska, reminding them of their obligations whenever there are indications of possible ill-treatment by the police.

In contrast to the situation as regards the police, most prisoners interviewed by the CPT's delegation during the 2012 visit stated that they were treated correctly by prison staff. However, a number of allegations were received of ill-treatment by certain prison officers at Bijeljina Prison.

9. The ad hoc visit to **Georgia** in November 2012 was triggered by the publication on 18 September of video material containing scenes of apparent serious ill-treatment of prisoners by staff at Prison No. 8 in Tbilisi. Already on 20 September, the CPT sent a letter to the Georgian authorities, pursuant to

Rule 28 (1) of the Committee's Rules of Procedure¹, expressing its serious concern about the video material and recalling that in the report on its 2010 periodic visit to Georgia, the Committee had drawn attention to allegations it had received of the ill-treatment of inmates at Prison No. 8. The CPT requested to receive, by 27 September, information on the first results of the investigations carried out into this matter as well as an account of other action taken or envisaged with a view to preventing any repetition of ill-treatment at Prison No. 8 or other penitentiary establishments. A substantial response was received on 27 September and the Georgian authorities invited the CPT to take part in high-level talks in Tbilisi on the situation in the country's penitentiary system. The CPT accepted that invitation; however, in view of the political situation at the time², the Committee decided to wait before fixing precise dates for the visit.

The visit took place from 19 to 23 November. During the talks at the outset of the visit, the CPT sought detailed information on the investigations underway into the alleged ill-treatment of prisoners at Prison No. 8 in Tbilisi as well as at Prison No. 2 in Kutaisi, and on the additional measures being taken to prevent ill-treatment in penitentiary establishments. The CPT's delegation also discussed with the Georgian authorities the plans of the new Government concerning reform of the prison system and of the criminal justice system in general. Following the talks, the delegation went to both Prison No. 8 and Prison No. 2 in order to examine the treatment of persons detained in those establishments.

The report on this visit and the response of the Georgian authorities were published on 31 July 2013 and will be commented upon in the section "Publication highlights" (see paragraphs 43 to 49).

10. The September 2012 ad hoc visit to **Greenland** was the first time that the CPT had examined the treatment of persons deprived of their liberty in this semi-autonomous entity within the Kingdom of Denmark. The visit was centred on the capital city, Nuuk, where the main places of deprivation of liberty are situated, namely Nuuk Police Station, Nuuk Prison and the psychiatric ward of Queen Ingrid Hospital. The report on the visit as well as the response of the Danish Government were made public on respectively 22 January and 3 July 2013.

The CPT's delegation did not gather any information indicative of deliberate ill-treatment of persons deprived of their liberty in Greenland. However, in its report, the Committee expresses serious concern about the prolonged use of mechanical restraint vis-à-vis certain patients at the psychiatric ward of Queen Ingrid Hospital, and sets out the principles and minimum standards to be applied as regards the immobilisation of psychiatric patients. The CPT also recommends

1. Use of this provision makes it clear to the State concerned that the CPT is considering carrying out a visit.

2. Following the outcome of parliamentary elections held on 1 October 2012, a new Government had yet to be formed.

that the planned construction of a new prison in Nuuk be treated as a matter of priority; conditions of detention in the “semi-open” and “closed” sections of the existing facility are not satisfactory. In their response, the Danish authorities state that the new prison is scheduled for completion in 2017 and that it will include facilities for a wide range of work, educational and leisure activities.

11. The main objective of the ad hoc visit to **Portugal** in May 2013 was to review the situation at Lisbon Central Prison; during the CPT’s 2012 periodic visit, the material conditions in this establishment had been found to be very poor and a number of allegations of ill-treatment of inmates by prison staff were received. In addition, the Committee’s delegation held discussions with the General Prosecutor’s Office and the Inspectorate General of Internal Administration on the system in place to investigate allegations of ill-treatment, and several specific investigations were examined.

In the course of the May 2013 ad hoc visit, the delegation also examined the treatment and conditions of detention of a prisoner convicted by the International Criminal Tribunal for the former Yugoslavia who is serving his sentence in Portugal (see also paragraphs 16 and 17).

12. During the ad hoc visit to the **Russian Federation** in July 2013, the CPT’s delegation reviewed the implementation of recommendations made by the Committee after previous visits regarding the treatment of persons deprived of their liberty by law enforcement agencies. For this purpose, it interviewed numerous persons in the Republic of Bashkortostan and the Novosibirsk, Omsk and Sverdlovsk Regions who had recently been or were still in the custody of the police or other law enforcement agencies, such as the Federal Drug Control Service. Further, in both Moscow and the regions visited, the delegation held meetings with senior officials of the Investigative Committee of the Russian Federation and discussed investigation files concerning specific complaints of ill-treatment.

13. The January 2013 ad hoc visit to **Turkey** formed part of the CPT’s continuous monitoring of the situation of Abdullah Öcalan and other prisoners held in the high-security prison on the island of Imralı, located in the south of the Marmara Sea. The CPT’s delegation reviewed the measures taken by the Turkish authorities to implement recommendations made after the Committee’s previous visit to the prison in 2010, in particular as regards communal activities offered to the prisoners and the application in practice of their right to receive visits from relatives and lawyers.

The delegation interviewed individually all the six prisoners being held at Imralı Prison, had consultations with the management and medical staff at the establishment, and examined relevant administrative and medical files. It also met the Head of the Prison Monitoring Board which covers Imralı Prison.

On 12 February 2013, the CPT’s President held talks in Ankara with the Minister of Justice on the facts found during the visit.

14. The ad hoc visit to **Ukraine** in December 2012 was focused on the treatment of prisoners serving sentences in the so-called “correctional colonies”, and for this purpose the CPT’s delegation visited four colonies in three different regions of the country. A follow-up visit was paid to Colony No. 89 in Dnipropetrovsk; after the previous visit to this establishment, in 2009, the CPT had expressed serious concern about the manner in which the inmates were being treated by staff. Visits were also carried out to Colonies Nos. 25 for men and 54 for women in the Kharkiv region, as well as to Colony No. 81 in the Vinnytsia region. While in Kharkiv, the delegation reviewed the situation of Ms Yulia Tymoshenko, who was being accommodated in Central Clinical Hospital No. 5 at the time of the visit.

The report on this ad hoc visit, which was published on 5 September 2013 together with the response of the Ukrainian authorities, highlights the need for further action to combat ill-treatment of sentenced prisoners. The CPT notes that there has been a significant improvement at Colony No. 89 as regards the treatment of inmates by staff, and the overall impression gained by the Committee’s delegation was that the treatment of inmates at Colony No. 54 raised no major concerns. In contrast, at Colonies Nos. 25 and 81, the information gathered indicated that the ill-treatment of inmates had become an accepted feature of keeping good order and combating prison subcultures in these establishments. The means employed by staff, assisted by a carefully chosen group of inmates, were apparently aimed at obtaining submissive behaviour from all prisoners as from their admission.

In their response, the Ukrainian authorities refer to the adoption of measures to combat ill-treatment and corruption in correctional colonies and other penitentiary establishments as well as to the results obtained by the prosecuting authorities in the investigation of cases of alleged ill-treatment of inmates by staff.

As regards Ms Tymoshenko, the material conditions in which she was held were of a high standard, and the health care she was receiving at Clinical Hospital No. 5 in Kharkiv did not give rise to any particular comments from the CPT. However, the Committee urges the Ukrainian authorities to ensure that medical confidentiality is respected with regard to her and that the security arrangements concerning her are no more than what is strictly required by the circumstances. As regards the force allegedly used by staff against Ms Tymoshenko during her transfer to the hospital in April 2012, the CPT expresses doubts about the effectiveness of the investigation which had been carried out.

15. During the October 2012 ad hoc visit to the **United Kingdom**, the CPT examined for the first time the treatment of foreign nationals throughout the course of an operation of deportation by air. This involved the presence of the CPT’s delegation on a charter flight between London and Colombo (Sri Lanka).

The report on this visit and the response of the United Kingdom authorities were published on 18 July 2013 and will be commented upon in the section “Publication highlights” (see paragraphs 67 to 70).

Monitoring on behalf of the International Criminal Tribunal for the former Yugoslavia (ICTY)

16. This specific monitoring activity is regulated by an exchange of letters between the ICTY and the Council of Europe dated 4 and 24 November 2000³. At present, the CPT has agreed to monitor the treatment and conditions of detention of any persons convicted by the ICTY who are serving their sentences in Albania, Portugal, Ukraine and the United Kingdom, as well as of certain persons convicted by the Tribunal and serving their sentences in Germany.

With reference to the recent closure of the ICTY and the setting up of the United Nations Mechanism for International Criminal Tribunals, it should be noted that the above-mentioned exchange of letters remains in force in relation to the Mechanism.

17. During the ad hoc visit to Portugal in May 2013, the CPT's delegation monitored the situation of a person sentenced to 20 years' imprisonment by the ICTY who is serving his sentence at Monsanto Prison.

18. The CPT also participated in a round table on the enforcement of sentences rendered by the ICTY, held in the Hague from 14 to 16 November 2012. This event, jointly organised by the Tribunal and the International Committee of the Red Cross, brought together representatives of prison administrations and ministries of States which have agreed to enforce ICTY sentences and of the bodies entrusted with monitoring the situation of persons sentenced by the Tribunal.

Plenary meetings and activities of subgroups

19. The CPT held three one-week plenary meetings during the twelve months covered by this General Report, in November 2012, and in March and July 2013. A total of 22 visit reports were adopted by the Committee at these meetings, ten of them drawn up under the expedited drafting procedure (according to which draft visit reports that are circulated at least two weeks before a plenary meeting are taken as approved without debate, save for paragraphs in respect of which a discussion has been specifically requested in advance).

20. Time was set aside at the plenary meetings in November 2012 and July 2013 for training in the techniques of visiting psychiatric establishments and of interviewing children who are deprived of their liberty. The CPT benefited from the presence of Professor Timothy Harding, former Director of the University Institute of Forensic Medicine, Geneva, at the first training session, and that of Professor Michael Lamb, Professor of Psychology at Cambridge University, at the second session.

3. The exchange of letters is reproduced in the CPT's 11th General Report; CPT/Inf (2001) 16, Appendix 5.

At the plenary meeting in March 2013, the CPT held an exchange of views with Professor Ursula Kilkelly, Dean of the Faculty of Law at University College, Cork, on the rights of children in detention. A working group was subsequently set up, tasked with reviewing the CPT's existing standards regarding juveniles deprived of their liberty as set out in the Committee's 9th General Report⁴.

21. The Jurisprudence and Medical Groups have continued to meet on the eve of each plenary meeting. The Jurisprudence Group advises the CPT on innovations and possible inconsistencies in the Committee's standards as reflected in visit reports, and identifies areas where there is room for development of the standards. The Medical Group examines substantive issues of a medical nature related to the CPT's mandate and organises training sessions on the specific tasks that medical members of visiting delegations are required to perform.

One of the documents prepared by the Medical Group during the last year, on documenting and reporting medical evidence of ill-treatment, formed the basis of the substantive section contained in this General Report.

Contacts with other bodies

22. The CPT's then Acting 1st Vice-President, Ms Haritini Dipla, took part in the informal meeting of the Presidents of Council of Europe monitoring bodies organised by the Secretary General on 3 December 2012. The Committee welcomes this initiative as well as subsequent measures to promote better coordination of the mechanisms involved, and will take an active part in the regular meetings of Presidents of the monitoring bodies planned for the future. The CPT remains firmly committed to promoting synergy with other bodies, both within the Council of Europe and outside the Organisation.

23. In the context of the Council of Europe, regular contacts have been maintained between the CPT's Secretariat and the Office of the Commissioner for Human Rights, so as to avoid any unhelpful overlapping of activities and ensure as far as possible that the Committee and the Commissioner build on each other's work. Efforts are also made to follow the activities of other monitoring bodies, and the recently-introduced shared monitoring visits calendar will be useful in this regard.

The CPT's President, Mr Lətif Hüseynov, took part in the Council of Europe Conference of Ministers of Justice held in Vienna from 19 to 21 September 2012, and was also pleased to have the opportunity to address the Conference of Directors of Prison Administration held in Rome from 22 to 24 November 2012.

On a more technical level, members of the CPT have been taking part in work within the Council of Europe on the preparation of a non-binding legal instrument on dangerous offenders as well as on the preparation of an additional Protocol to the Oviedo Convention, addressing the protection of human rights and dignity of persons with mental disorder in the context of involuntary treatment and placement.

4. See CPT/Inf (99) 12, paragraphs 20 to 41.

24. On 12 and 13 June 2013, the CPT's 1st Vice-President, Ms Marzena Ksel, took part in a seminar on medical ethics and prison health care organised by the Council of Europe in Vadul-lui-Voda, Republic of Moldova. This event brought together for the first time prison officials from both the central administration and the breakaway region of Transnistria. Following the seminar, she was joined by the CPT's President for talks with successively the authorities of the Republic of Moldova and the de facto authorities of Transnistria; the latter talks focused on a possible resumption of the CPT's activities in the region.

25. From 12 to 14 December 2012, the CPT's President took part in a Workshop on enhancing cooperation between the United Nations and regional mechanisms for the promotion and protection of human rights, organised in Geneva by the Office of the UN High Commissioner for Human Rights. While in Geneva, on 13 December, he also had a broad-ranging exchange of views with the new President of the International Committee of the Red Cross, Mr Peter Maurer.

26. In the context of the monitoring by the CPT of the deportation of foreign nationals by air ("return flights"), representatives of the Committee held discussions with officials of Frontex⁵ on 12 April 2013 in Warsaw. This was to prepare the forthcoming monitoring by the CPT of one or more return flights co-ordinated by Frontex. More generally, and with reference to Parliamentary Assembly Recommendation 2016 (2013) and Resolution 1932 (2013) on "Frontex: human rights responsibilities", the CPT is willing to enhance its cooperation with Frontex with a view to assisting the agency in strengthening its monitoring mechanisms, in particular as regards the monitoring of joint return operations, and is ready to provide views on the draft of the future code of conduct for such operations.

27. At the invitation of the Russian authorities, the President of the CPT participated in the 3rd International Legal Forum held in St Petersburg from 15 to 17 May 2013, and addressed the Forum on the second day. This event brought together more than 2000 participants from some 50 countries. In the margins of the Forum, the President held discussions with the Deputy Minister of Justice of the Russian Federation, Mr Maxim Travnikov, including on the question of publication of CPT visit reports (see also paragraph 31).

28. Naturally, the CPT places a premium on maintaining and developing its relations with the Committee's counterpart at universal level, the United Nations Subcommittee on Prevention of Torture (SPT). At the SPT's invitation, the CPT's President will shortly be having an exchange of views with the Subcommittee on a range of issues of mutual interest. In this connection, the CPT wishes to underline the interest, for the purpose of promoting synergy between the CPT and the SPT, of having a small number of persons who are simultaneously members of both bodies.

5. European Agency for the Management of Operational Cooperation at the External Borders of the member States of the European Union.

Moreover, in the context of its visits, the CPT has been seeking to strengthen relations with the national preventive mechanisms set up under the Optional Protocol to the United Nations Convention against Torture, in line with the principles of action set out in the Committee's 22nd General Report⁶.

29. It should also be noted that during the CPT's forthcoming plenary meeting, in November 2013, the Committee will have its first exchange of views with the current UN Special Rapporteur on Torture, Mr Juan E. Méndez.

6. See CPT/Inf (2012) 25, in particular paragraphs 42 to 47.

Publication highlights



Introduction

30. Eighteen CPT visit reports were published during the twelve-month period covered by this General Report, confirming once again the well-established trend of States deciding to lift the veil of confidentiality and place the Committee's findings in the public domain. At the time of writing, 292 of the 341 reports so far drawn up have been published.

A State-by-State table showing the current situation as regards publication of CPT visit reports is set out in Appendix 6.

31. Special mention should be made of the publication in January this year of the report on the CPT's visit to the North Caucasian region in April/May 2011 (see also paragraphs 55 to 60). The Committee trusts that this positive development marks the beginning of a new policy of the Russian Federation and that further publications will follow. It would be particularly desirable to have published the report on the CPT's most recent periodic visit to Russia, in May/June 2012, during which the treatment of persons deprived of their liberty was examined in various regions. The Committee is keen to pursue its work in the Federation, through both close cooperation with the Russian authorities and informed dialogue with all other relevant interlocutors. Obviously, the publication of the CPT's reports will greatly facilitate this process.

32. The CPT also hopes that the clear message given by the Committee of Ministers in February 2002, encouraging "all Parties to the Convention to authorise publication, at the earliest opportunity, of all CPT visit reports and of their responses" will be heeded by the Azerbaijani authorities. Publication of the report on the Committee's most recent periodic visit to Azerbaijan, in December 2011, as well as of the report on the ad hoc visit in December 2012, would be a very positive step.

33. The report transmitted to NATO more than six years ago on the CPT's visit to places of deprivation of liberty in Kosovo⁷ under the authority of KFOR⁸ also remains confidential. The Committee is struck by this continuing reluctance on the part of NATO to place the report in the public domain; its publication would be a welcome sign of openness.

Selected publications

34. In this section, a closer look is taken at some of the visit reports and government responses published during the twelve-month period covered by the General Report.

7. All reference to Kosovo, whether to the territory, institutions or population, in this text shall be understood in full compliance with United Nations Security Council Resolution 1244 and without prejudice to the status of Kosovo.

8. The International Security Presence in Kosovo.

Report on the ad hoc visit to Belgium in April 2012 and response of the Belgian authorities

(Conditions of detention in remand prisons and issues connected with strikes by prison staff)

35. During this first ever visit by the CPT to Forest Prison, the Committee's delegation observed that some of the establishment's cells did not have running water or sanitary facilities and that prisoners in other cells had to sleep on mattresses on the floor. The CPT makes a number of recommendations in order to remedy these problems: the setting of a maximum cell occupancy rate and the partitioning of the toilets in C and D wings, the ending of the use of toilet buckets in A and B wings, etc. As well as the difficult material conditions, the Committee expresses concern about the almost complete lack of activities available to prisoners, the length of time that it takes to obtain a "table visit" and the impossibility for prisoners to wear their own clothes (in contravention of the provisions of the "Dupont law"). The CPT also recommends an increase in the staff/inmate ratio – which was low at the time of the visit – and the taking of measures to enable the Psychological/Social Service (SPS) and the Inmate Assistance Service (SAD) to carry out their statutory tasks, even during periods of strike action by prison staff.

In their response, the Belgian authorities provide information about the measures taken or planned at Forest Prison. They comment, inter alia, that the prison's population has recently decreased, following the opening of a new wing at nearby St-Gilles Prison. Furthermore, the Belgian authorities undertake to keep the inmate population of these two prisons below their respective thresholds of 600 and 850. The resumption of activities by the SPS and SAD – following over two months of suspension – is also confirmed. However, the authorities say that they are unable to implement some of the improvements recommended by the Committee, including the partitioning of toilets and the ending of the use of toilet buckets. The same applies to the recommended increase in activities of a varied nature for prisoners' benefit.

36. The follow-up visit to Andenne Prison was carried out in order to assess the situation prevailing within the establishment at the time of the spontaneous strike by prison staff, which had just ended. The delegation noted, inter alia, the shortage of staff during the strike and the very large numbers of restrictions imposed on prisoners (impossibility of access to the SPS and SAD for prisoners, difficulty of access to the doctor, access to exercise and to showers impossible on the first days of the strike, etc.).

The Committee returns in its report to the recommendation, made as long ago as 2005, that a "guaranteed service" be introduced without delay at Belgian prisons. On this point, the information gathered by the CPT's delegation indicated that Agreement No. 351 of 19 April 2010 on "the strengthening of social dialogue and the management of disputes within the prison sector" did not

guarantee the reasonable functioning of prisons in the event of strikes by staff. Furthermore, since it was signed, a large number of strikes or other instances of industrial action had taken place outside the consultation process for which provision had been made. The Belgian authorities refer in their response to the “more coercive measures” which could be taken in the event of failure to comply with Agreement No. 351 and to two bills tabled in parliament with a view to the introduction of a guaranteed service.

37. In its report, the CPT also analyses the issue of prison overcrowding, which has steadily worsened in Belgium in recent years. None of the measures implemented, with the exception of early release, had brought about a structural and lasting decrease in overcrowding. The Committee states that prison overcrowding implies not only very poor conditions of detention, combining lack of privacy and violence, but also deprives prisoners of certain fundamental rights. Further, prison overcrowding involves considerable human and budgetary costs. Finally, prison overcrowding is one of the reasons frequently invoked by prison staff when they go on strike. The CPT therefore recommends that a national conference be held, involving all interested parties, in order to draw up the general framework of a new criminal justice and prisons policy. In their response, the Belgian authorities state that they are in favour of consultation of all the interested parties.

Report and response published in December 2012, CPT/Inf(2012) 36 and 37

Report on the ad hoc visit to Bulgaria in May 2012 and response of the Bulgarian authorities

(prison overcrowding, treatment and conditions of detention of inmates at Burgas and Varna Prisons)

38. The CPT’s delegation found that overcrowding remained a major problem in the Bulgarian penitentiary system as a whole, and it observed disturbing levels of overcrowding in both Burgas and Varna Prisons. More generally, the material conditions at Burgas and Varna Prisons were not acceptable. In its report, the Committee urges the Bulgarian authorities to redouble their efforts to counter the problem of prison overcrowding and to be guided in this respect by the relevant Recommendations of the Committee of Ministers of the Council of Europe. In their response, the Bulgarian authorities draw attention to a Government-adopted “Agenda for the improvement of the conditions in the penitentiary establishments for the period 2011-2013” and point out that some establishments, including Burgas and Varna Prisons, would undergo partial or full refurbishment. However, they also underline that a lack of financial resources is hampering efforts in this respect.

39. At Burgas Prison, the delegation heard many allegations of frequent physical ill-treatment by staff and, in several cases, recent bruises and abrasions consistent with allegations of ill-treatment were observed. In one case,

CCTV footage viewed by the delegation confirmed allegations of assault of an inmate by a prison officer. In their response, the Bulgarian authorities inform the CPT that, following investigations carried out into that case as well as other serious matters identified by the delegation, two staff members including the Prison Director had been dismissed. Further, an action plan had been drawn up including the carrying out of a comprehensive review of the overall functioning of Burgas Prison and an assessment of the weaknesses in the management of the establishment as well as of the problems encountered by the inmate population.

40. At both Burgas and Varna Prisons, the delegation received a very large number of allegations of corrupt practices by prison staff. In its report, the CPT calls for decisive action to combat the phenomenon of corruption and recommends that an inquiry be conducted into the allegations received at the prisons visited. In their response, the Bulgarian authorities refer to the adoption of a Strategy for the Prevention of Corruption in the prison system at central and local levels. As regards more specifically Burgas Prison, two cases of corruption had been established and resulted in dismissals, and a third case was under investigation.

41. The provision of health care was very problematic at Burgas and Varna Prisons, due to an extreme shortage of staff and resources. The poor staffing levels in each of the establishments rendered virtually impossible the provision of health care worthy of the name. In its report, the CPT calls for a considerable reinforcement of the health-care teams at both prisons, and also recommends that the Ministry of Health become more involved in supervising the standard of care in places of deprivation of liberty (including as regards recruitment of health-care staff, their in-service training, evaluation of clinical practice, certification and inspection). The Bulgarian authorities indicate in their response that a procedure was underway to fill the vacant post of doctor at Burgas Prison.

42. As regards life-sentenced prisoners, the CPT welcomes the efforts made at both Burgas and Varna Prisons to integrate some of the lifers into the mainstream inmate population. However, it voices regret that no progress had been made as regards the removal from the Criminal Code of the sentence of “life imprisonment without the right to substitution” (i.e. without possibility of parole). The Committee emphasises that, in its view, it is inhuman to imprison a person for life without any realistic hope of release.⁹

Report and response published in December 2012, CPT/Inf (2012) 32 and 33

9. In this context, reference should be made to the judgment of the European Court of Human Rights of 9 July 2013 in the case of *Vinter and Others v. the United Kingdom*.

Report on the ad hoc visit to Georgia in November 2012 and response of the Georgian authorities

(publication of incriminating video material on 18 September 2012, treatment and conditions of detention of prisoners at Gldani and Kutaisi Prisons, reform of the prison system)

43. The background to this ad hoc visit has already been described in some detail (see paragraph 9).

44. Inmates interviewed by the CPT's delegation at Prison No. 8 in Gldani and Prison No. 2 in Kutaisi made hardly any recent allegations of physical ill-treatment by custodial staff. In fact, the vast majority of the prisoners stressed that there had been a dramatic change for the better in the attitude of the management and staff – and in the general atmosphere – in the two establishments after the publication of the video material on 18 September 2012. By contrast, the delegation was inundated with allegations of ill-treatment said to have occurred prior to that date. The CPT stresses in its report that these allegations merit thorough consideration by the competent investigative and prison authorities.

45. The CPT welcomes the wide-scale prison amnesty adopted on 21 December 2012 as well as the granting of Presidential pardons. At the same time, it stresses that the problems of prison overcrowding and prison population inflation cannot be addressed in a comprehensive and lasting way through the use of such exceptional measures; a strategy for the sustainable reduction of the prison population should include a variety of steps to ensure that imprisonment really is the measure of last resort. This implies, in the first place, an emphasis on non-custodial measures in the period before the imposition of a sentence and the availability to the judiciary, especially in less serious cases, of alternatives to custodial sentences together with an encouragement to use those options. The adoption of measures to facilitate the reintegration into society of persons who have been deprived of their liberty should also reduce the rate of reoffending. The Committee also urges the Georgian authorities to use the opportunity provided by the amnesty and Presidential pardons, and the ensuing significant drop in the prison population, to raise the minimum standard of living space per prisoner to 4 m² from the existing level of 2.5 m².

46. In contrast with planned or already implemented measures concerning the prison population and estate, the delegation observed that there had been little, if any, progress towards introducing programmes of out-of-cell activities for prisoners. In the two prisons visited, prisoners – both those on remand and sentenced – were locked up in their cells for most of the day, in a state of enforced idleness. The CPT once again calls upon the Georgian authorities to take decisive steps to develop the programmes of activities for both sentenced and remand prisoners, with the aim of ensuring that inmates are able to spend a reasonable part of the day (8 hours or more) outside their cells, engaged in purposeful activities of a varied nature.

47. Other issues addressed in the CPT's report include the need to improve prison health-care services and to enhance their role in the prevention of ill-treatment.

48. In their response, the Georgian authorities provide additional information on the progress and outcome of the criminal investigations launched following the publication of the video material on 18 September 2012, as well as on measures being taken to reform the Georgian prison system. Those measures include steps to reduce further the prison population, renovate existing prisons and build new establishments, develop the programmes of activities for both sentenced and remand prisoners, and improve prison staff training.

49. The response also provides details of the Strategy and Action Plan for Prison Health-care Reform for the period 2013 - 2014.

Report and response published in July 2013, CPT/Inf (2013) 18 and 19

Report on the ad hoc visit to Malta in September 2011 and response of the Maltese authorities

(situation at Corradino Correctional Facility, conditions in detention centres for foreigners, access to a lawyer for persons in police custody)

50. The overwhelming majority of the prisoners interviewed by the CPT's delegation at Corradino Correctional Facility (the prison) indicated that they were treated correctly by staff. However, some allegations of physical ill-treatment and verbal abuse of inmates by certain prison officers were received, as were some allegations of inter-prisoner violence. On the latter point, the CPT stresses in its report that it will be difficult to effectively prevent instances of inter-prisoner violence with the extremely low number of prison officers that were present within the detention areas; the Maltese authorities are recommended to take urgent steps to fill the many vacant posts (50 at the time of the visit) with appropriately qualified staff and to provide prison officers with professional training, both initial and ongoing.

In their response, the Maltese authorities emphasise that ill-treatment by prison staff is not tolerated. They indicate that additional resources were being allocated to the prison and that calls to fill various posts were to be issued shortly; in addition, further training would be offered to prison officers.

51. The delegation observed that material conditions of detention had significantly improved in certain parts of the prison, most notably in Division 4. However, major shortcomings were found once again in several other areas of the establishment, in particular as regards the state of repair of cells and access to natural light. The situation was further exacerbated by the prevailing overcrowding and the lack of organised activities for many prisoners, including those serving life sentences. The CPT has recommended that a comprehensive plan be drawn up as soon as possible to renovate the entire prison, with priority

to be given to Female Division A, the Infirmary and Divisions 2 and 3. It also urges the Maltese authorities to redouble their efforts to expand the activities offered to prisoners.

In their response, the Maltese authorities point out that steps have already been taken to renovate Female Division A and state that efforts are being made to carry out further refurbishment as soon as possible. They also provide detailed information on the efforts being made to develop activities for prisoners.

52. The delegation received hardly any allegations of deliberate physical ill-treatment of foreign nationals by custodial staff at Lyster and Safi Barracks, which were the only two detention centres for foreigners in operation at the time of the visit. However, the CPT expresses concern about the frequency and seriousness of allegations received about the force used by soldiers and police officers during disturbances which occurred in August 2011 at the Safi Detention Centre; the Committee recommends in its report that a comprehensive inquiry by an independent body be carried out into this matter.

The Maltese authorities express disagreement with this recommendation, stating that during the “riot” in question only one foreign national suffered minor injuries.

53. At the Lyster Detention Centre, the delegation observed improvements in terms of both material conditions and activities provided to foreign nationals, as compared to the situation found during the previous visit to the facility in 2008. However, material conditions of detention in the two Warehouses at Safi Barracks remained very poor, and there was a total lack of organised activities. Further, in both detention centres, the health-care services were found to be insufficient.

In their response, the Maltese authorities point out that refurbishment work was being carried out in one of the warehouses at Safi Barracks. In addition, a project providing cultural orientation, life skills, educational and sports activities has been made available to foreign nationals. They disagree with the CPT’s assessment of the health-care services at the centres.

54. During the visit, the delegation discussed with the authorities the legal framework and implementation in practice of the right of access to a lawyer for persons in police custody. In its report, the CPT welcomes the fact that Section 355 AT of the Criminal Code has now entered into force, thereby providing persons in police custody with the right to consult in private with a lawyer. However, the Committee expresses concern that the right of access to a lawyer remains subject to important limitations which may well undermine its effectiveness as a safeguard against ill-treatment; in particular, detained persons are still not allowed to have a lawyer present during police questioning, and access to a lawyer may in certain cases be delayed for up to 36 hours. The CPT calls upon the Maltese authorities to ensure that all persons detained by the police can effectively benefit from access to a lawyer throughout their police custody,

including during questioning; the Committee accepts that exceptionally the lawyer in question may not be one chosen by the detained person but instead a replacement independent lawyer selected following a procedure agreed upon in advance with the Bar Association.

In their response, the Maltese authorities refer to the ongoing negotiations in the EU context concerning a proposed Directive on the right of access to a lawyer. They state that amendments to national legislation will be introduced in accordance with the Directive, once it has been adopted.¹⁰

Report and response published in July 2013, CPT/Inf (2013) 12 and 13

Report on the ad hoc visit to the North Caucasian region of the Russian Federation in April/May 2011 and response of the Russian authorities

(treatment of persons detained by law enforcement officials, investigations into alleged ill-treatment, the situation in pre-trial establishments)

55. A significant proportion of the detained persons interviewed by the CPT's delegation made allegations of recent ill-treatment by law enforcement officials. The ill-treatment alleged was frequently of such severity as to amount to torture (e.g. electric shocks, asphyxiation with a gas mask); this was particularly the case in the Republic of Dagestan and the Chechen Republic, although some very serious allegations were also received in North Ossetia-Alania. In the vast majority of cases, the torture/severe ill-treatment was said to have been inflicted at the time of questioning by operational officers, either during the initial period of deprivation of liberty or (and) during periods when remand prisoners were returned to the custody of law enforcement agencies for further investigative purposes. In a considerable number of cases, the delegation gathered medical evidence that was fully consistent with recent torture or other forms of severe ill-treatment; a selection of individual cases is given in the CPT's report in respect of each of the three Republics visited.

The overall picture which emerged from the Committee's findings was that any detained persons who did not promptly confess to the crimes of which they were suspected, or provide information being sought, were at high risk of torture or other forms of ill-treatment.

56. Based on the information gathered during the visit, the CPT also concludes that the response from the competent investigating authorities vis-à-vis the phenomenon of torture and other forms of ill treatment in the three Republics visited remains totally inadequate, a state of affairs well illustrated by the extremely low number of criminal cases initiated in respect of ill-treatment by law enforcement officials. When evidence of possible torture or other forms of

10. The Directive was adopted by the Council of the European Union on 7 October 2013.

ill-treatment emerges, in the vast majority of cases the matter is dropped after a preliminary inquiry. And in those few cases when criminal proceedings are initiated, the charge almost invariably relates to abuse of power rather than torture. There were also clear indications that local law enforcement structures, in particular in the Chechen Republic, do not always provide the necessary support to the investigative authorities even when they pursue instances of possible ill-treatment.

57. In its report, the CPT makes a series of detailed recommendations aimed at tackling the above-mentioned situation; they address such issues as methods of crime investigation, professional training for law enforcement officials, the role to be played by investigators and judges at the initial stage of the criminal procedure, the securing in good time of medical evidence of ill-treatment, reinforcing fundamental safeguards such as access to a lawyer during police custody, and instructions and training to ensure that the criteria of an effective investigation are met when there are grounds to believe that ill-treatment has occurred. However, to stand any chance of success, these measures need to be accompanied by a clear and firm message of “zero tolerance” of ill-treatment emanating from both the republican and federal authorities.

58. In their response, the Russian authorities provide information on steps taken or envisaged to implement the CPT’s recommendations, and give an account of investigations into specific cases of possible ill-treatment raised by the Committee in its report. As regards in particular the Chechen Republic, it is indicated that following a joint order issued by the Investigative Committee and the Ministry of Internal Affairs of the Republic, investigative authorities now enjoy the support of local law enforcement structures. Another noteworthy development is the closure of the IVS (temporary detention facility) formerly located on the premises of the Operational/Search Bureau (ORB-2) of the Main Department of the Ministry of Internal Affairs responsible for the North Caucasian Federal District, in Grozny.

59. The delegation did not receive any allegations of ill-treatment of inmates by the staff of the pre-trial establishments (SIZOs) visited, and staff-prisoner relations in the establishments concerned appeared to be generally free of tension. Nevertheless, this overall positive assessment has to be qualified in the light of claims made by some prisoners that they had been warned by staff not to make any complaints to the delegation.

Material conditions of detention were on the whole satisfactory at SIZO No 1 in Grozny and SIZO No 1 in Makhachkala. However, this was certainly not the case at SIZO No 1 in Vladikavkaz; the existing facilities of this establishment did not conform with modern standards. As regards the regime applied to pre-trial prisoners, it was extremely limited in all the SIZOs visited; with the exception of the few juveniles, these prisoners had no access to purposeful activities and most of them were locked up in their cells for 23 hours a day.

60. In their response, the Russian authorities state that there is no evidence of inmates having been warned not to make complaints to the CPT's delegation. As regards SIZO No 1 in Vladikavkaz, information is provided on specific improvements to material conditions made in the light of the delegation's findings; further, a major refurbishment of the establishment as a whole was due to start in 2013.

Report and response published in January 2013, CPT/Inf (2013) 1 and 2

Reports on the periodic and ad hoc visits to Spain in May/June 2011 and June 2012 and responses of the Spanish authorities

(treatment of persons detained by law enforcement officials, conditions in prisons, treatment of foreigners detained under aliens legislation)

61. With the notable exception of those held in incommunicado detention, most persons interviewed by the CPT's delegation during the May/June 2011 visit stated that they had been treated correctly when deprived of their liberty by law enforcement officials. However, the report does refer to several allegations of ill-treatment by the Catalan police (Mossos d'Esquadra), usually at the time of apprehension but also in some cases during detention in police stations. Recommendations are made aimed at strengthening the safeguards in place and ensuring that all investigations into allegations of ill-treatment by the police are prompt and thorough. Further, the CPT recommends that all Mossos d'Esquadra officers wear at all times some form of identification, including during public order operations.

62. In the context of the incommunicado detention regime¹¹, 10 of the 11 persons met by the CPT's delegation made credible and consistent allegations of ill-treatment by officers of the *Guardia Civil* following their arrest in early 2011. The alleged ill-treatment consisted of kicks and blows with truncheons; in addition, the persons concerned alleged that a plastic bag had been placed over their heads inducing the sensation of asphyxiation and that, at the same time, they had been forced to perform prolonged physical exercises. The aim of the alleged ill-treatment was apparently to oblige them to sign a confession before the end of the incommunicado detention. In its report, the CPT once again calls upon the Spanish authorities to carry out a thorough and independent investigation into the methods used by the *Guardia Civil* when holding and questioning persons arrested as presumed participants in an offence referred to in Article 384 bis of the Code of Criminal Procedure¹². It is also recommended that steps be taken to reinforce the safeguards in place to prevent ill-treatment in the context of incommunicado detention, that a code of conduct for interviews be established, building on the existing rules and regulations, and that judges be encouraged to

11. Incommunicado detention may be imposed for an initial period of five days.

12. i.e. an offence committed by a person who is a member of or has links with terrorists or rebels.

adopt a more proactive approach in respect of the supervisory powers granted to them in the context of the incommunicado detention regime.

63. In their response, the Spanish authorities provide detailed information about the operation of the law enforcement agencies. As regards incommunicado detention, they underline the exceptional nature of this measure and argue that adequate safeguards against ill-treatment are already in place, including through the habeas corpus judicial review of detention as well as the periodic visits by court-appointed forensic doctors. Reference is also made to additional safeguards which are potentially applicable in the context of incommunicado detention (such as CCTV recording). Further, it is stated that the lodging a complaints of ill-treatment forms part of a well-established strategy of the organisations concerned.

64. A number of allegations of ill-treatment of prisoners by staff were received in the prisons visited. The ill-treatment alleged consisted for the most part of slaps, punches or kicks and concerned primarily inmates being transferred to or held in the “special” departments. The CPT expresses particular concern in its report about the situation observed at Puerto III Prison, where the atmosphere was palpably tense and several inmates expressed their fear of reprisals by prison staff for having spoken with the delegation.

The CPT is critical of the continuing practice of mechanical restraint of prisoners (fixation) and, more specifically, of the frequent resort to this measure, its duration and the inadequate safeguards surrounding its application. It calls upon the authorities to review the current approach as regards the use of fixation in prisons and to put in place stricter rules, based on the principles and minimum standards identified by the Committee.

As regards more particularly La Modelo Prison in Barcelona, it was found to be in a state of dilapidation, a situation made worse by chronic overcrowding; this led to the CPT carrying out a follow-up visit in June 2012. In the report on that visit, the Committee urges the authorities to put in place a strategy with clear timelines for the phased reduction in overcrowding at La Modelo Prison.

65. In their response, the Spanish authorities state that the management of Puerto III Prison had been instructed to exercise vigilance vis-à-vis any possible abuse of authority by prison staff. Further, information is provided about specific training modules for staff on the management and restraint of difficult prisoners. On the subject of resort to fixation, the Spanish authorities stress the exceptional nature of the measure, but announce that its practical application will be amended in line with the CPT’s recommendations. As regards La Modelo Prison, the possibility was being examined of relocating some of the establishment’s inmates to other prisons.

66. The report highlights the prison-like atmosphere in the Barcelona and Madrid Detention Centres for foreign nationals, made worse by the restrictive regime in place and the limited contacts with the outside world.

Reference is also made to several allegations received in both establishments of ill-treatment of detainees; in this connection, the CPT requested the Spanish authorities to carry out an investigation into the intervention of an external National Police unit at the Madrid Centre on 22 May 2011, during which several detainees were injured.

In their response, the Spanish authorities provide information on the cases of alleged ill-treatment mentioned in the report and refer to recent legislative changes to improve the functioning of the centres for the detention of foreign nationals.

Reports and responses published in April 2013, CPT/Inf(2013) 6, 7, 8 and 9

Report on the ad hoc visit to the United Kingdom in October 2012 and response of the United Kingdom authorities

(removal of foreign nationals by air from the United Kingdom to Sri Lanka)

67. In its report, the CPT concludes that each stage of the preparation of the removal process was carefully planned and organised, that escort staff were well briefed, and that every effort was made for the removal to be carried out in a humane way. The Committee's delegation was also satisfied that all persons to be removed had been informed in due time of the removal decision and the possibility to appeal it, and that access to legal advice and avenues of legal recourse was guaranteed.

That said, the CPT recommends that more appropriate arrangements, offering more privacy, be found for searching detainees at Brook House Immigration Removal Centre (IRC) when they are handed over to escort staff. The Committee also considers that the handing over of a detainee to escort staff should be subject to the systematic delivery of a "fit-to fly" certificate issued by a medical doctor; at the time of the visit, this was not a general requirement.

In their response, the United Kingdom authorities acknowledge that the area used for searches at Brook House IRC does not afford an appropriate level of privacy and indicate that improvements will be made. They also state, responding to another point raised by the Committee, that consideration will be given to providing an interpreter for specific charter flights. However, the authorities do not consider it necessary to positively assert in all cases that a person is fit to fly based on the reasonable assumption that this will be the case in the vast majority of instances.

68. As regards the execution of the removal, the CPT comments that the presence of a medical doctor on board removal charter flights would be highly desirable; on the flight monitored by the Committee, only paramedics were present. The United Kingdom authorities respond that a doctor will be provided where indicated by risk assessment and where appropriate.

69. Several issues raised in the report relate to the escort staff, such as the recruitment procedure in place (which should include some form of psychological assessment), as well as the measures taken to avoid professional exhaustion syndrome and the risks related to routine. In this context, the CPT highlights the importance of ensuring that escort staff maintain a certain emotional distance from the operational activities in which they are involved. The United Kingdom authorities indicate that these matters are under consideration.

At the time of the visit, specific training had yet to be given to escort staff concerning the use of control and restraint techniques in aircraft. However, this would be addressed in a revised training package for overseas escorts that had been commissioned by the United Kingdom Border Agency. The CPT recommends that this training package be accredited and implemented at the earliest opportunity.

70. The CPT expresses regret in its report that the Sri Lankan authorities did not allow its delegation to observe the hand-over of the returned detainees to local immigration staff. The Committee invites the authorities of the United Kingdom to expressly address the issue of the role of monitoring bodies in future readmission agreements. The United Kingdom authorities agree that monitoring of the process of hand-over to the local authorities would be in the interests of all concerned and indicate that they will continue to request such access.

Report and response published in July 2013, CPT/Inf(2013) 14 and 15

Documenting and reporting medical evidence of ill-treatment



71. As from an early stage of its activities, the CPT has emphasised the important contribution which health-care services in places of deprivation of liberty can and should make to combating ill-treatment of detained persons, through the methodical recording of injuries and the provision of information to the relevant authorities¹³. The accurate and timely documenting and reporting of such medical evidence will greatly facilitate the investigation of cases of possible ill-treatment and the holding of perpetrators to account, which in turn will act as a strong deterrent against the commission of ill-treatment in the future.

The CPT has paid particular attention to the role to be played by prison health-care services in relation to combating ill-treatment. Naturally, that role relates in part to possible ill-treatment of detained persons during their imprisonment, whether it is inflicted by staff or by fellow inmates. However, health-care services in establishments which constitute points of entry into the prison system also have a crucial contribution to make as regards the prevention of ill-treatment during the period immediately prior to imprisonment, namely when persons are in the custody of law enforcement agencies (e.g. the police or gendarmerie).

72. As an attentive reader of CPT reports will know, the situation as regards the documenting and reporting of medical evidence of ill-treatment is at present far from satisfactory in many States visited by the Committee. The procedures in place do not always ensure that injuries borne by detained persons will be recorded in good time; and even when injuries are recorded, this is often done in a superficial manner. Moreover, there is frequently no guarantee that medical evidence which is documented will then be reported to the relevant authorities.

Consequently, the Committee considered that it would be useful to set out in the following paragraphs the standards which it has developed as regards the documenting and reporting of medical evidence of ill-treatment. Various related issues are also discussed.

73. It is axiomatic that persons committed to prison should be properly interviewed and physically examined by a health-care professional as soon as possible after their admission. The CPT considers that the interview/examination should be carried out within 24 hours of admission. This systematic medical screening of new arrivals is essential for various reasons; more specifically, if performed properly, it will ensure that any injuries borne by the persons concerned – as well as related allegations – are recorded without undue delay. The same procedure should be followed when a prisoner who has been transferred back to police custody for investigative reasons is returned to the prison; unfortunately, such transfers are still a common practice in some States visited by the CPT, and they can entail a high risk of ill-treatment (see also paragraph 80). Similarly, any prisoner who has been involved in a violent episode within prison should be medically screened without delay.

13. See, for example, paragraphs 60 to 62 of the CPT's 3rd General Report, CPT/Inf (93) 12.

In addition to prisons, there are other places of deprivation of liberty where persons may be detained for a prolonged period (i.e. more than a few days). This is the case, for example, of detention centres used to accommodate persons held under aliens legislation. Further, in a number of countries visited by the CPT, various categories of detained persons (e.g. administrative offenders; persons remanded in custody who are awaiting transfer to a prison or undergoing further investigation) can be held for prolonged periods in “arrest houses” or “temporary detention facilities”. Systematic medical screening of new arrivals should also be carried out in such places.

74. The record drawn up after the medical screening referred to in paragraph 73 should contain: i) an account of statements made by the person which are relevant to the medical examination (including his/her description of his/her state of health and any allegations of ill-treatment), ii) a full account of objective medical findings based on a thorough examination, and iii) the health-care professional’s observations in the light of i) and ii), indicating the consistency between any allegations made and the objective medical findings. The record should also contain the results of additional examinations carried out, detailed conclusions of specialised consultations and a description of treatment given for injuries and of any further procedures performed.

Recording of the medical examination in cases of traumatic injuries should be made on a special form provided for this purpose, with *body charts* for marking traumatic injuries that will be kept in the medical file of the prisoner. Further, it would be desirable for photographs to be taken of the injuries, and the photographs should also be placed in the medical file. In addition, a special trauma register should be kept in which all types of injury observed should be recorded.

75. It is important to make a clear distinction between the above-mentioned medical screening and the procedure followed when a detained person is handed over to the custody of a prison. The latter procedure entails the drawing up of documentation, co-signed by the prison staff on duty and the police escort as well as perhaps by the detained person. Any visible injuries observed on the prisoner at the moment of handover of custody will usually be recorded in that documentation.

This procedure is of an administrative nature, even if – as is sometimes the case – it takes place in the presence of a member of the prison’s health-care staff. It can in no event serve as a substitute for the medical screening procedure already described. Moreover, given the presence of the police escort as well as the anxiety often felt at the very moment of entering prison, prisoners should not be questioned at this initial stage about the origin of any visible injuries observed on them. Nevertheless, the record made of visible injuries observed should be immediately forwarded to the prison’s health-care service.

76. The CPT sets much store by the observance of medical confidentiality in prisons and other places of deprivation of liberty. Consequently, in the same way as any other medical examination of a detained person, the medical screening

referred to in paragraph 73 must be conducted out of the hearing and – unless the health-care professional concerned expressly requests otherwise in a given case – out of the sight of non-medical staff. This requirement is at present far from being met in all States visited by the CPT.

77. However, the principle of confidentiality must not become an obstacle to the reporting of medical evidence indicative of ill-treatment which health-care professionals gather in a given case. To allow this to happen would run counter to the legitimate interests of detained persons in general and to society as a whole¹⁴. The CPT is therefore in favour of an automatic reporting obligation for health-care professionals working in prisons or other places of deprivation of liberty when they gather such information. In fact, such an obligation already exists under the law of many States visited by the CPT, but is often not fully respected in practice.

In several recent visit reports, the CPT has recommended that existing procedures be reviewed in order to ensure that whenever injuries are recorded by a health-care professional which are consistent with allegations of ill-treatment made by a detained person, that information is immediately and systematically brought to the attention of the relevant authority, **regardless of the wishes of the person concerned**. If a detained person is found to bear injuries which are clearly indicative of ill-treatment (e.g. extensive bruising of the soles of the feet) but refuses to reveal their cause or gives a reason unrelated to ill-treatment, his/her statement should be accurately documented and reported to the authority concerned together with a full account of the objective medical findings.

78. The “relevant authority” to which the health-care professional’s report should be sent is first and foremost the independent body empowered to carry out an official investigation into the matter and, if appropriate, bring criminal charges. Other authorities to be informed could include bodies responsible for disciplinary investigations or for monitoring the situation of persons detained in the establishment where ill-treatment may have occurred. The report should also be made available to the detained person concerned and to his/her lawyer.

The actual mechanism for transmission of the report to the relevant authority(ies) will vary from country to country in the light of organisational structures and may well not involve direct communication between the health-care professional and that authority. The report might be transmitted through the hierarchy of the health-care professional (e.g. a Medical Department at ministerial level) or the management of the detention facility in which he/she works (e.g. prison director). However, whichever approach is followed, the rapid transmission of the report to the relevant authority must be ensured.

14. For a description of the dilemmas that can be faced by health-care professionals working in places of deprivation of liberty, see paragraphs 65 to 72 of the 1999 Istanbul Protocol (Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment).

79. A corollary of the automatic reporting obligation referred to in paragraph 77 is that the health-care professional should advise the detained person concerned of the existence of that obligation, explaining that the writing of such a report falls within the framework of a system for preventing ill-treatment and that the forwarding of the report to the relevant authority is not a substitute for the lodging of a complaint in proper form. The appropriate moment to provide that information to the detained person would be as from the moment that he/she begins to make allegations of ill-treatment and/or is found to bear injuries indicative of ill-treatment.

If the process is handled with sensitivity, the great majority of the detained persons concerned will not object to disclosure. As for those that remain reluctant, the health-care professional might choose to limit the content of the report to the objective medical findings.

80. The reporting to the relevant authority of medical evidence indicative of ill-treatment must be accompanied by effective measures to protect the person who is the subject of the report as well as other detained persons. For example, prison officers who have allegedly been involved in ill-treatment should be transferred to duties not requiring day-to-day contact with prisoners, pending the outcome of the investigation. If the possible ill-treatment relates to the acts of fellow inmates, alternative accommodation should be found for the detained person concerned.

Naturally, if the report concerns possible ill-treatment by law enforcement officials, the detained person should under no circumstances be returned to their custody. More generally, the CPT considers that the objective should be to end the practice of returning remand prisoners to law enforcement agencies for investigative purposes; in particular, any further questioning of the person concerned which may be necessary should be conducted on prison premises.

81. In addition to the reporting by name of each case in which medical evidence indicative of ill-treatment is gathered, the Committee recommends that all traumatic injuries resulting from all possible causes be monitored and periodically reported to the bodies concerned (e.g. prison management, ministerial authorities) through anonymous statistics. Such information can be invaluable for the purpose of identifying problem areas.

82. To ensure compliance with the standards described above, special training should be offered to health-care professionals working in prisons and other places where persons may be detained for a prolonged period. In addition to developing the necessary competence in the documentation and interpretation of injuries as well as ensuring full knowledge of the reporting obligation and procedure, that training should cover the technique of interviewing persons who may have been ill-treated.

It would also be advisable for the health-care professionals concerned to receive, at regular intervals, feedback on the measures taken by the authorities following the forwarding of their reports. This can help to sensitise them to specific points

in relation to which their documenting and reporting skills can be improved and, more generally, will serve as a reminder of the importance of this particular aspect of their work.

83. Prior to the systematic medical screening referred to in paragraph 73, detained persons will often spend some time in the custody of law enforcement officials for the purpose of questioning and other investigative measures. During this period, which may vary from several hours to one or more days depending on the legal system concerned, the risk of ill-treatment can be particularly high. Consequently, the CPT recommends that specific safeguards be in place during this time, including the right of access to a doctor¹⁵. As the Committee has repeatedly emphasised, a request by a person in police/gendarmerie custody to see a doctor should always be granted; law enforcement officials should not seek to filter such requests.

84. The record drawn up after any medical examination of a person in police/gendarmerie custody should meet the requirements set out in paragraph 74 above, and the confidentiality of the examination should be guaranteed as described in paragraph 76. Further, the automatic reporting obligation referred to in paragraph 77 should apply whenever medical evidence indicative of ill-treatment is gathered in the course of the examination. All these conditions should be complied with, irrespective of whether the health-care professional concerned has been called following a request by the detained person or is in attendance following an initiative taken by a law enforcement official.

The means of implementing the reporting obligation in such cases should reflect the urgency of the situation. The health-care professional should transmit his/her report directly and immediately to the authority which is in the best position to intervene rapidly and put a stop to any ill-treatment taking place; the identity of that authority will depend on the legal system and the precise circumstances of the case.

15. Other essential safeguards include the right to have one's detention notified to a third party of one's choice and the right of access to a lawyer.

Organisational matters



CPT membership

85. At the time of publication of this General Report, the CPT has 45 members. The seats in respect of Bosnia and Herzegovina and Ireland are currently vacant.

Twenty five of the CPT's members are men and twenty are women. Consequently, applying the "less-than 40%" criterion used by the Parliamentary Assembly when examining lists of candidates, at present neither sex is under-represented in the Committee.

86. Thanks to the system of renewal every two years of one half of the members, introduced by Protocol No. 2 to Convention establishing the CPT, the Committee's membership has remained very stable over the last twelve months. However, Seán Aylward, the member elected in respect of Ireland, resigned in August 2013 because of other professional commitments.

Two new members were elected during the period covered by this General Report, namely Maria José Garcia-Galan San Miguel (in respect of Spain) and Ivona Todorovska ("the former Yugoslav Republic of Macedonia").

87. The next biennial renewal of the CPT's membership is due to take place at the end of this year, the terms of office of 22 members of the Committee expiring on 19 December 2013. To date, elections for 14 of the seats concerned have taken place. The CPT trusts that elections for the remaining eight seats will take place in the near future, as this will greatly facilitate the planning of the Committee's visits for the following year. In this connection, it should be noted that lists of candidates in respect of Turkey and the United Kingdom have not yet been forwarded to the Bureau of the Parliamentary Assembly.

88. In an increasing number of countries, lists of candidates for vacant seats in the Committee are being drawn up in a manner that meets the requirements of Parliamentary Assembly Resolution 1540 (2007) on improving selection procedures for CPT members. The Committee hopes that this will soon be the case in all countries. As the Parliamentary Assembly emphasised most recently in its Resolution 1923 (2013) on reinforcing the selection processes for members of key Council of Europe human rights monitoring mechanisms, "at the national level, selection procedures must be transparent and open to competition, including through public calls for candidatures". Indeed, this is the only way of ensuring that all persons placed on lists of candidates are capable of making an effective contribution to the CPT's activities. And as the CPT has stressed in the past, the effectiveness of the Committee will ultimately depend on the quality of its members.

89. The spread of professional experience within the CPT's membership remains on the whole satisfactory. In this connection, the Committee is pleased to note in particular that following recent elections, it is now clear that there will continue to be a sufficient number of medical members with relevant forensic skills. However, the CPT still needs more members with first-hand knowledge of law enforcement agencies (police/gendarmerie) as well as members with specific knowledge of the treatment of juveniles deprived of their liberty.

Bureau of the CPT

90. During the CPT's March 2013 meeting, elections were held for the Bureau of the Committee. Lətif Hüseynov, Professor of Public International Law at Baku State University, Azerbaijan, was re-elected as the CPT's President. Marzena Ksel, a medical doctor and former Head of the Health-Care Department in the Polish Prison Service, was elected as the Committee's 1st Vice-President. The composition of the Bureau was completed by Mykola Gnatovskyy, Associate Professor of International Law at Taras Shevchenko National University, Kyiv, Ukraine, who was elected as 2nd Vice-President.

CPT secretariat

91. In a few months time, the CPT's long-serving Executive Secretary, Trevor Stevens, will leave the Council of Europe's Secretariat. The procedure to find a new incumbent for this challenging post is under way, and the vacancy notice has been published at <http://www.coe-recruitment.com/>.

92. Two other vacancies have now arisen among the administrative staff within the Committee's Secretariat. Both of them can only be filled by persons working on relatively short fixed-term contracts as, in one case, the postholder has been assigned to other duties in the field and the post must be left available for her possible return and, in the other, the postholder is on extended unpaid leave for personal reasons.

In situations of this kind, the CPT considers that the most appropriate approach would be to seek to secure the services for a limited period of specialists, as provided for in Article 12, paragraph 3, of the Staff Regulations. This could be done through the organisation of a selection based on qualifications under Article 16 of the Regulations on Appointments. The CPT is confident that a number of suitably qualified persons – for example, from national inspectorates/ monitoring mechanisms – would be interested in joining the Committee's Secretariat for a limited period, and given their experience they should become fully operational rapidly.

93. Finally, the CPT hopes that in due course it will be possible for its Secretariat to be reinforced by another B4 post, thereby enabling all three of the operational divisions to have the benefit of such an official. As experience has shown, these staff members can perform a range of support tasks, thereby ensuring that optimal use is made of the existing complement of administrators, which the CPT is not seeking to have increased.

Appendices



1. The CPT's mandate and *modus operandi*

The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) was set up under the 1987 Council of Europe Convention of the same name (ETS.126, hereinafter “the Convention”).

According to Article 1 of the Convention:

“There shall be established a European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment... The Committee shall, by means of visits, examine the treatment of persons deprived of their liberty with a view to strengthening, if necessary, the protection of such persons from torture and from inhuman or degrading treatment or punishment.”

The work of the CPT is designed to be an integrated part of the Council of Europe system for the protection of human rights, placing a proactive non-judicial mechanism alongside the existing reactive judicial mechanism of the European Court of Human Rights.

The CPT implements its essentially preventive function through two kinds of visits – periodic and ad hoc. Periodic visits are carried out to all Parties to the Convention on a regular basis. Ad hoc visits are organised in these States when they appear to the Committee “to be required in the circumstances”.

When carrying out a visit, the CPT enjoys extensive powers under the Convention: access to the territory of the State concerned and the right to travel without restriction; unlimited access to any place where persons are deprived of their liberty, including the right to move inside such places without restriction; access to full information on places where persons deprived of their liberty are being held, as well as to other information available to the State which is necessary for the Committee to carry out its task.

The Committee is also entitled to interview in private persons deprived of their liberty and to communicate freely with anyone whom it believes can supply relevant information.

Each Party to the Convention must permit visits to any place within its jurisdiction “where persons are deprived of their liberty by a public authority”. The CPT’s mandate thus extends beyond prisons and police stations to encompass, for example, psychiatric institutions, detention areas at military barracks, holding centres for asylum seekers or other categories of foreigners, and places in which young persons may be deprived of their liberty by judicial or administrative order.

Two fundamental principles govern relations between the CPT and Parties to the Convention – co-operation and confidentiality. In this respect, it should be emphasised that the role of the Committee is not to condemn States, but rather to assist them to prevent the ill-treatment of persons deprived of their liberty.

After each visit, the CPT draws up a report which sets out its findings and includes, if necessary, recommendations and other advice, on the basis of which a dialogue is developed with the State concerned. The Committee’s visit report is, in principle, confidential; however, most of the reports are eventually published at the State’s request.

2. Signatures and ratifications of the Convention establishing the CPT

The European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (ECPT) was opened for signature by the member States of the Council of Europe on 26 November 1987. Since 1 March 2002, the Committee of Ministers of the Council of Europe has been able to invite any non-member State of the Council of Europe to accede to the Convention.

Member States of the Council of Europe	Date of signature	Date of ratification	Date of entry into force
Albania	02/10/1996	02/10/1996	01/02/1997
Andorra	10/09/1996	06/01/1997	01/05/1997
Armenia	11/05/2001	18/06/2002	01/10/2002
Austria	26/11/1987	06/01/1989	01/05/1989
Azerbaijan	21/12/2001	15/04/2002	01/08/2002
Belgium	26/11/1987	23/07/1991	01/11/1991
Bosnia and Herzegovina	12/07/2002	12/07/2002	01/11/2002
Bulgaria	30/09/1993	03/05/1994	01/09/1994
Croatia	06/11/1996	11/10/1997	01/02/1998
Cyprus	26/11/1987	03/04/1989	01/08/1989
Czech Republic	23/12/1992	07/09/1995	01/01/1996
Denmark	26/11/1987	02/05/1989	01/09/1989
Estonia	28/06/1996	06/11/1996	01/03/1997
Finland	16/11/1989	20/12/1990	01/04/1991
France	26/11/1987	09/01/1989	01/05/1989
Georgia	16/02/2000	20/06/2000	01/10/2000
Germany	26/11/1987	21/02/1990	01/06/1990
Greece	26/11/1987	02/08/1991	01/12/1991
Hungary	09/02/1993	04/11/1993	01/03/1994
Iceland	26/11/1987	19/06/1990	01/10/1990
Ireland	14/03/1988	14/03/1988	01/02/1989
Italy	26/11/1987	29/12/1988	01/04/1989
Latvia	11/09/1997	10/02/1998	01/06/1998
Liechtenstein	26/11/1987	12/09/1991	01/01/1992
Lithuania	14/09/1995	26/11/1998	01/03/1999
Luxembourg	26/11/1987	06/09/1988	01/02/1989
Malta	26/11/1987	07/03/1988	01/02/1989
Republic of Moldova	02/05/1996	02/10/1997	01/02/1998
Monaco	30/11/2005	30/11/2005	01/03/2006
Montenegro			06/06/2006 ¹⁶
Netherlands	26/11/1987	12/10/1988	01/02/1989
Norway	26/11/1987	21/04/1989	01/08/1989
Poland	11/07/1994	10/10/1994	01/02/1995
Portugal	26/11/1987	29/03/1990	01/07/1990
Romania	04/11/1993	04/10/1994	01/02/1995
Russian Federation	28/02/1996	05/05/1998	01/09/1998
San Marino	16/11/1989	31/01/1990	01/05/1990
Serbia	03/03/2004	03/03/2004	01/07/2004
Slovak Republic	23/12/1992	11/05/1994	01/09/1994
Slovenia	04/11/1993	02/02/1994	01/06/1994
Spain	26/11/1987	02/05/1989	01/09/1989
Sweden	26/11/1987	21/06/1988	01/02/1989
Switzerland	26/11/1987	07/10/1988	01/02/1989
“The former Yugoslav Republic of Macedonia”	14/06/1996	06/06/1997	01/10/1997
Turkey	11/01/1988	26/02/1988	01/02/1989
Ukraine	02/05/1996	05/05/1997	01/09/1997
United Kingdom	26/11/1987	24/06/1988	01/02/1989

16. On 14 June 2006, the Committee of Ministers of the Council of Europe agreed that the Republic of Montenegro was a Party to the Convention with effect from 6 June 2006, the date of the Republic's declaration of succession to the Council of Europe Conventions of which Serbia and Montenegro was a signatory or party.

3. The CPT's field of operations

States bound by the ECPT			
Albania	Finland	Malta	Slovenia
Andorra	France	Republic of Moldova	Spain
Armenia	Georgia	Monaco	Sweden
Austria	Germany	Montenegro	Switzerland
Azerbaijan	Greece	Netherlands	“The former
Belgium	Hungary	Norway	Yugoslav Republic
Bosnia and Herzegovina	Iceland	Poland	of Macedonia”
Bulgaria	Ireland	Portugal	Turkey
Croatia	Italy	Romania	Ukraine
Cyprus	Latvia	Russian Federation	United Kingdom
Czech Republic	Liechtenstein	San Marino	
Denmark	Lithuania	Serbia	
Estonia	Luxembourg	Slovak Republic	



Note: This is an unofficial representation of States bound by the ECPT. For technical reasons it has not been possible to show the entire territory of certain of the States concerned.

47 States, prison population: 1 825 356 prisoners

(*Main source:* Council of Europe Annual Penal Statistics (SPACE I – 2011); data as at 1 September 2011)

It should be noted that, as well as prisons, the CPT's mandate covers all other categories of places where persons are deprived of their liberty: police establishments, detention centres for juveniles, military detention facilities, holding centres for aliens, psychiatric hospitals, homes for the elderly, etc.

4. CPT members

in order of precedence – as at 15 October 2013¹⁷

Name	Elected in respect of	Term of office expires
Mr Lətif Hüseynov, President	Azerbaijan	19/12/2015
Ms Marzena KSEL, 1st Vice-President	Poland	19/12/2015
Mr Mykola GNATOVSKYY, 2nd Vice-President	Ukraine	19/12/2017
Mr Jean-Pierre RESTELLINI	Switzerland	19/12/2013
Ms Marija DEFINIS GOJANOVIĆ	Croatia	19/12/2013
Ms Isolde KIEBER	Liechtenstein	19/12/2013
Mr Celso José DAS NEVES MANATA	Portugal	19/12/2015
Mr Jørgen Worsaae RASMUSSEN	Denmark	19/12/2013
Mr Antonius Maria VAN KALMTHOUT	Netherlands	19/12/2013
Mr George TUGUSHI	Georgia	19/12/2017
Ms Haritini DIPLA	Greece	19/12/2015
Mr Wolfgang HEINZ	Germany	19/12/2017
Mr Xavier RONSIN	France	19/12/2013
Ms Olivera VULIĆ	Montenegro	19/12/2015
Mr Dan DERMENGIU	Romania	19/12/2015
Ms Maria Rita MORGANTI	San Marino	19/12/2015
Ms Ilvija PŪCE	Latvia	19/12/2015
Ms Anna LAMPEROVÁ	Slovak Republic	19/12/2015
Mr Stefan KRAKOWSKI	Sweden	19/12/2013
Mr Vincent THEIS	Luxembourg	19/12/2013
Ms Yakin ERTÜRK	Turkey	19/12/2013
Mr Georg HØYER	Norway	19/12/2017
Ms Anna MOLNÁR	Hungary	19/12/2017
Ms Nadia POLNAREVA	Bulgaria	19/12/2013
Mr James MCMANUS	United Kingdom	19/12/2013
Ms Marika VÄLI	Estonia	19/12/2017
Ms Branka ZOBEC HRASTAR	Slovenia	19/12/2013
Ms Julia KOZMA	Austria	19/12/2017
Mr Régis BERGONZI	Monaco	19/12/2013
Ms Ana RACU	Republic of Moldova	19/12/2013
Ms Natalia KHUTORSKAYA	Russian Federation	19/12/2015
Mr Joan CABEZA GIMENEZ	Andorra	19/12/2015
Mr Andrés MAGNÚSSON	Iceland	19/12/2015
Mr Jan PFEIFFER	Czech Republic	19/12/2015
Mr Jari PIRJOLA	Finland	19/12/2015
Mr Alfred KOÇOBASHI	Albania	19/12/2015
Ms Andreana ESPOSITO	Italy	19/12/2015
Mr Djordje ALEMPIJEVIĆ	Serbia	19/12/2017
Ms Maïté DE RUE	Belgium	19/12/2015
Mr Ivan MIFSUD	Malta	19/12/2015
Mr Vytautas RAŠKAUSKAS	Lithuania	19/12/2015
Mr Costakis PARASKEVA	Cyprus	19/12/2015
Mr Arman TATOYAN	Armenia	19/12/2015
Ms Ivona TODOROVSKA	“The former Yugoslav Republic of Macedonia”	19/12/2015
Ms Maria José GARCÍA-GALÁN SAN MIGUEL	Spain	19/12/2017

17. On this date, the seats in respect of Bosnia and Herzegovina and Ireland were vacant.



Two members of the CPT do not appear in this photograph.

5. CPT Secretariat

Central section
Mr Trevor STEVENS, Executive Secretary
Mr Fabrice KELLENS, Deputy Executive Secretary
<i>Secretariat</i>
Ms Antonella NASTASIE
Ms Nadine SCHAEFFER
Mr Patrick MÜLLER, Research, information strategies and media contacts
Ms Claire ASKIN, Archives, publications and documentary research
Ms Morven TRAIN, Administrative, budgetary and staff questions

Divisions responsible for visits¹⁸

Division 1		
Mr Michael NEURAUTER, Head of Division	Albania	Latvia
Mr Elvin ALIYEV	Austria	Lithuania
Mr Petr HNATIK	Belgium	Luxembourg
Mr Julien ATTUIL	Czech Republic	Malta
Ms Yvonne HARTLAND, Administrative Assistant	Estonia	Norway
<i>Secretariat</i>	France	San Marino
Ms Nelly TASNADI	Germany	Slovak Republic
	Hungary	Turkey

Division 2		
Mr Borys WODZ, Head of Division	Armenia	Monaco
Mr Johan FRIESTEDT	Azerbaijan	Poland
Ms Isabelle SERVOZ-GALLUCCI	Bulgaria	Romania
Ms Almut SCHRÖDER	Denmark	Russian Federation
<i>Secretariat</i>	Finland	Slovenia
Ms Natia MAMISTVALOVA ¹⁹	Georgia	Sweden
	Iceland	Ukraine
	Republic of Moldova	

Division 3		
Mr Hugh CHETWYND, Head of Division	Andorra	Netherlands
Ms Stephanie MEGIES ²⁰	Bosnia and Herzegovina	Portugal
Mr Cristian LODA	Croatia	Serbia
Mr Thobias BERGMANN ²¹	Cyprus	Spain
Ms Françoise ZAHN, Administrative Assistant	Greece	Switzerland
<i>Secretariat</i>	Ireland	“The former Yugoslav Republic of Macedonia”
Ms Diane PÉNEAU	Italy	United Kingdom
	Liechtenstein	
	Montenegro	

18. The Executive and Deputy Executive Secretaries are directly involved in the operational activities of the divisions concerning certain countries.

19. Ms Mamistvalova was temporarily replaced by Mr Aleksander Dundua until 14 August 2013.
20. Ms Megies is currently on extended leave and was temporarily replaced by Mr Sebastian Rietz until 18 October 2013.

21. Mr Bergmann left the CPT's Secretariat on 1 October 2013.



Two members of the CPT's Secretariat do not appear in this photograph.

6. Publication of CPT visit reports as at 15 October 2013

States	Visits	Reports sent	Reports published
Albania	10	10	9
Andorra	3	3	3
Armenia	7	6	6
Austria	5	5	5
Azerbaijan	7	7	2
Belgium	7	7 ^a	7 ^a
Bosnia and Herzegovina	6	6	5
Bulgaria	8	8	8
Croatia	4	4	3
Cyprus	6	5	5
Czech Republic	6	6	5
Denmark	5	5	5
Estonia	5	5	4
Finland	4	4	4
France	11	11	11
Georgia	6	6	6
Germany	6	7 ^b	6
Greece	11	11	10
Hungary	7	7	6
Iceland	4	4	3
Ireland	5	5	5
Italy	10	10	8
Latvia	7	6	6
Liechtenstein	3	3	3
Lithuania	5	5	4
Luxembourg	4	4	4
Malta	7	7	7
Republic of Moldova	13	13	10
Monaco	2	2	1
Montenegro	2	2	1
Netherlands	8	9 ^c	9 ^c
Norway	5	5	5
Poland	5	4	4
Portugal	9	10 ^d	8
Romania	9	8 ^e	8 ^e
Russian Federation	23	19 ^f	2
San Marino	4	4	3
Serbia	5 ^g	6 ^h	5
Slovak Republic	5	4	4
Slovenia	4	4	4
Spain	13	13	13
Sweden	5	5	5
Switzerland	6	6	6
“The former Yugoslav Republic of Macedonia”	10	10	10
Turkey	25	22 ⁱ	21 ^j
Ukraine	9	9	9
United Kingdom	17	20 ^k	16

(a) Including a report on the visit to Tilburg Prison (Netherlands) in October 2011.

(b) Including one report drawn up in pursuance of the Agreement between the United Nations and the German Government on the Enforcement of Sentences of the International Criminal Tribunal for the former Yugoslavia (ICTY).

(c) Including a separate report on the visit to Tilburg Prison in the context of the periodic visit in October 2011.

(d) Including one report drawn up in pursuance of the Agreement between the United Nations and the Portuguese Government on the Enforcement of Sentences of the International Criminal Tribunal for the former Yugoslavia (ICTY).

(e) Covering the nine visits.

(f) Covering 22 visits.

(g) Organised in September 2004 to Serbia and Montenegro, in March 2007 and in June 2010 to Kosovo* and in November 2007 and February 2011 to Serbia.

(h) Covering the five visits. Including three reports on Kosovo*.

(i) Covering 24 visits.

(j) Covering 23 visits.

(k) Including three reports drawn up in pursuance of the Agreement between the United Nations and the Government of the United Kingdom of Great Britain and Northern Ireland on the Enforcement of Sentences of the International Criminal Tribunal for the former Yugoslavia (ICTY).

* All reference to Kosovo, whether to the territory, institutions or population, in this text shall be understood in full compliance with United Nations Security Council Resolution 1244 and without prejudice to the status of Kosovo.

7. Countries and places of detention visited by CPT delegations; August 2012-July 2013

Periodic visits

Croatia

18/09/2012-27/09/2012

Police establishments

- Petrinja Police Station
- Rab Police Station
- Zagreb Police Station I Centar
- Zabreb Police Station II Črnomerec
- Zagreb Police Station IV Maksimir
- Zagreb Police Station VII Trešnjevka
- Zagreb Police Station VIII Trnje
- Zagreb Detention and Observation Unit Oranice

Prisons

- Glina State Prison
- Sisak County Prison
- Zagreb County Prison
- Zagreb Hospital for Persons deprived of Liberty

Psychiatric establishments

- Rab Psychiatric Hospital

Social care establishments

- “Stančić” Centre for Rehabilitation, Dugo Selo
- Zagreb Home for Mentally Ill Persons, Mirkovec Branch

Greece

04/04/2013-16/04/2013

Police and Border Guard establishments

Attica region

- Agios Panteleimonas Police Station, Athens
- Alexander Street Police Headquarters, Athens
- Athens Airport holding facilities
- Drapetsona Police Station, Piraeus
- Exarchia Police Station, Athens

- Omonia Police Station, Athens
- Korydallos Police Station, Piraeus
- Kypseli Police Station, Athens
- Perama Police Station, Piraeus

East Macedonia and Thrace region

- Feres Police and Border Guard Station
- Iasmos Police Station
- Komotini Police Station
- Metaxades Police and Border Guard Station
- Orestiada Police Station
- Soufli Police and Border Guard Station
- Tycheron Police and Border Guard Station
- Xanthi Police Station

Epirus region

- Ioannina Police Station
- Igoumenitsa Police Station

Central Macedonia region

- Monasteriou Police Headquarters, Thessaloniki
- Dimokratias Police Station, Thessaloniki
- Stavroupoli Police Station, Thessaloniki
- Toumba Police Station, Thessaloniki
- Metagon Transfer centre, Thessaloniki

Thessaly region

- Larissa Police Station

Immigration detention facilities

- Amygdaleza Pre-departure centre
- Amygdaleza Special holding facility for unaccompanied minors
- Fylakio Special holding facility for irregular migrants
- Komotini Pre-departure centre
- Paranesti Pre-departure centre
- Petrou Ralli Special holding facility for irregular migrants
- Xanthi Pre-departure centre

Coast Guard detention facilities

- Igoumenitsa Coast Guard detention facility

Prisons

- Avlona Special Detention Facility for Juveniles
- Diavata Judicial Prison, Thessaloniki
- Ioannina Judicial Prison
- Komotini Judicial Prison

- Korydallos Men's Judicial Prison, Piraeus
- Korydallos Female Remand Prison, Piraeus
- Larissa Judicial Prison

Hungary

03/04/2013-12/04/2013

Police establishments

Budapest

- Central Holding Facility of the Budapest Police Directorate
- Holding Facility at the National Investigation Bureau of the National Police General Directorate

Csongrád County

- Holding Facility at Csongrád County Police Directorate in Szeged and Szeged Police Department

Győr-Moson-Sopron County

- Holding Facility at Győr-Moson-Sopron County Police Directorate in Győr and Győr Police Department
- Holding Facility at Győr-Moson-Sopron County Police Directorate in Sopron and Sopron Police Department

Somogy County

- Holding Facility at Somogy County Police Directorate in Kaposvár and Kaposvár Police Department

Prisons

- Somogy County Remand Prison, Kaposvár
- Sopronkőhida Strict and Medium Regime Prison
- Szeged Strict and Medium Regime Prison (Special Regime Unit for prisoners serving lengthy sentences and Special Security Regime Unit)
- Central Prison Hospital and Unit for HIV+ prisoners, Tököl

Iceland

18/09/2012-24/09/2012

Police establishments

- Reykjavík Police Headquarters
- Akureyri Police Station
- Hafnarfjörður Police Station
- Keflavík International Airport Police Station
- Kópavogur Police Station
- Selfoss Police Station

Prisons

- Akureyri Prison
- Kópavogur Prison
- Litla-Hraun Prison
- Reykjavík (Skólavörðustígur) Prison

Psychiatric establishments

- Psychiatric ward of Akureyri Hospital
- Forensic and secure wards of the Psychiatric Department of Reykjavík National University Hospital, Kleppur

Lithuania

27/11/2012-04/12/2012

Police establishments

- Alytus City Police Headquarters Arrest House
- Joniškis District Police Department Arrest House
- Kėdainiai District Police Department Arrest House
- Kelmė District Police Department Arrest House
- Lazdijai District Police Department Arrest House
- Šiauliai City Police Headquarters Arrest House
- Varėna District Police Department Arrest House
- Vilnius City Police Headquarters Arrest House

Prisons

- Alytus Correction Facility
- Kaunas Juvenile Remand Prison
- Lukiškės Remand Prison, Vilnius
- Šiauliai Remand Prison

Psychiatric establishments

- Republican Psychiatric Hospital, Vilnius

Monaco

27/11/2012-30/11/2012

Police establishments

- Central Directorate of Public Security
- Detention unit of the Monaco Court of Justice

Prisons

- Monaco Remand Prison

Psychiatric establishments

- Department of Psychiatry and Medical Psychology of Princess Grace Hospital (CHPG)

Montenegro*13/02/2013-20/02/2013***Police establishments**

- Bar Police Department
- Danilovgrad Police Station
- Herceg Novi Police Department
- Kotor Police Station
- Nikšić Police Department
- Podgorica Police Department
- Ulcinj Police Station

Prisons

- Institution for sentenced prisoners (KPD), Podgorica
- Remand Prison, Podgorica

Psychiatric establishments

- Dobrota Special Psychiatric Hospital (forensic psychiatric unit)

Social care establishments

- Komanski Most Institution for People with Special Needs

Poland*05/06/2013-17/06/2013***Police establishments**

- Municipal Police Department, Bydgoszcz
- Municipal Police Department, Lublin
- Police Station, Kunickiego St. 49A, Lublin
- Municipal Police Department, Szczecin
- Metropolitan Police Department, Nowolipie St. 2, Warsaw
- District Police Department, Warsaw VII, Grenadierów St. 73/75, Warsaw
- District Police Department, Warsaw VII, Umińskiego St. 22, Warsaw
- Police Department Warsaw-Wawer, Mrówcza St. 210, Warsaw
- Police Station Warsaw-Białołęka, Myśliborska 65, Warsaw
- Police establishment for children, Bydgoszcz
- Police establishment for children, Lublin
- Police establishment for children, Szczecin
- Police establishment for children, Warsaw

Prisons

- Bydgoszcz Remand Prison and Prison Hospital
- Lublin Remand Prison
- Szczecin Remand Prison and Prison Hospital
- Warsaw-Grochów Remand Prison
- Warsaw-Mokotów Remand Prison and Prison Hospital

Other establishments

- Sobering-up centre, Warsaw

San Marino

29/01/2013-01/02/2013

Police establishments

- Headquarters of the Gendarmerie
- Headquarters of the Police
- Rock's Guard Central Office, Dogana

Prisons

- San Marino Prison

Psychiatric establishments

- Mental Health Service of the General Hospital of San Marino

Social care establishments

- Therapeutic apartments "Filo di Arianna"
- Home for the Elderly of the Republic of San Marino "Casa di Riposo"
- "La Fiorina" Home for the Elderly

Turkey

09/06/2013-21/06/2013

Police establishments

- Ankara Police Headquarters:
 - Anti-Terror Department
 - Immigration Department
 - Law and Order Department
 - Narcotics Department
 - Organised Crime Department
- Diyarbakır Police Headquarters:
 - Anti-Terror Department
 - Organised Crime Department

- Diyarbakır-Bağlar District Police Station
- Istanbul Police Headquarters:
 - Anti-Terror Department
 - Common Detention Facility
- Izmir Police Headquarters:
 - Anti-Terror Department
 - Law and Order Department
- Şanlıurfa Police Headquarters (Law and Order Department)
- Şanlıurfa-Birecik District Police Station
- Şanlıurfa-Eyyübiye District Police Station
- Şanlıurfa-Siverek District Police Station

Gendarmerie establishments

- Şanlıurfa-Siverek District Gendarmerie Headquarters

Prisons

- Ankara-Sincan Juvenile Prison
- Diyarbakır D-type Prison (remand prisoners)
- Diyarbakır E-type Prison (remand prisoners)
- Gaziantep E-type Prison
- Izmir-Buca Prison (new arrivals)
- Izmir Juvenile Prison
- Izmir T-type Prison No. 2
- Izmir Prison for Women (unit for aggravated life-sentenced prisoners)
- Şanlıurfa E-type Prison
- Tekirdağ F-type Prison No. 2 (unit for aggravated life-sentenced prisoners)

Other establishments

- Diyarbakır Court House (holding cells)

United Kingdom

17/09/2012-28/09/2012

England and Wales

Detention centres for foreign nationals

- Brook House Immigration Removal Centre
- Colnbrook Immigration Removal Centre

Scotland

Police establishments

Lothian and Borders Police

- Gayfield Square Police Station
- St Leonards Police Station

Strathclyde Police

- Greenock Police Station
- Maryhill Police Station
- Stewart Street Police Station

Court Houses

- Glasgow Sheriff Court

Prisons and Young Offender institutions

- Barlinnie Prison
- Cornton Vale Prison and Young Offenders Institution
- Edinburgh Prison
- Greenock Prison
- Kilmarnock Prison

Psychiatric establishments

- Rowanbank Clinic

Ad hoc visits

Armenia

04/04/2013-10/04/2013

Police establishments

- Detention Centre of Yerevan City Police Department
- Yerevan-Arabkir Police Division
- Yerevan-Central Police Division
- Yerevan-Malatia Police Division
- Yerevan-Marash Police Division
- Yerevan-Mashtots Police Division
- Kotayk-Abovyan Police Division

Prisons

- Abovyan Prison (juvenile unit)
- Yerevan-Kentron Prison
- Yerevan-Nubarashen Prison
- Prison Hospital, Yerevan

Azerbaijan

13/12/2012-20/12/2012

Police establishments

- Temporary detention facility of the Main Department for Combating Organised Crime, Baku
- Main Transport Police Department, Baku
- Nasimi District Police Department and temporary detention facility, Baku
- Police Station No. 19, Nasimi District, Baku
- Police Station No. 21, Nasimi District, Baku
- Police Station No. 23, Nizami District, Baku
- Police Station No. 37 and temporary detention facility, Khatai District, Baku
- Sabunchu District Police Department and temporary detention facility, Baku
- Sumgayit City Police Department and temporary detention facility
- Police Station No. 1, Sumgayit

Prisons

- Baku Pre-trial detention facility (Zabrat)
- Pre-trial detention facility No. 3 (Shuvalan)

Establishments under the authority of the Ministry of National Security

- Investigative isolator and temporary detention facility, Baku

Bosnia and Herzegovina

05/12/2012-11/12/2012

Police establishments

- Banja Luka Central Police Station
- Bijeljina Police Station
- Doboj Police Station
- Gradiška Police Station
- Istočno Sarajevo Police Station
- Prnjavor Police Station

Prosecutor's Offices

- Holding cells at Banja Luka District Prosecutor's Office
- Holding cells at Banja Luka Special Prosecutor's Office for Organised Crime
- Holding cells at Doboj District Prosecutor's Office

Courts

- Holding cells at Banja Luka District Court
- Holding cells at Doboj District Court
- Holding cells at the Supreme Court of Republika Srpska, Banja Luka

Prisons

- Banja Luka Prison (remand section)
- Bijeljina Prison
- Doboj Prison (remand section)
- Istočno Sarajevo Prison (remand section)

Denmark (Greenland)

25/09/2012-28/09/2012

Police establishments

- Nuuk Police Station

Prisons

- Nuuk Prison

Psychiatric establishments

- Psychiatric ward of Queen Ingrid Hospital, Nuuk

Georgia

19/11/2012-23/11/2012

Prisons

- Prison No. 8, Gldani
- Prison No. 2, Kutaisi

Portugal

13/05/2013-17/05/2013

Prisons

- Lisbon Central Prison
- Monsanto High Security Prison

Russian Federation

09/07/2013-19/07/2013

Police establishments

Republic of Bashkortostan

- Temporary Detention Centre (IVS) of the City Internal Affairs Department, Ufa
- IVS at the Police Division No. 5, Ufa
- Police Divisions Nos. 1, 4, 6 and 7, Ufa
- Blagoveshchensk District Internal Affairs Department

Novosibirsk Region

- IVS of the City Internal Affairs Department, Novosibirsk
- Police Divisions Nos. 2, 4 and 7, Novosibirsk

Omsk Region

- IVS of the City Internal Affairs Department, Omsk
- Police Divisions Nos. 2 and 9, Omsk
- Division of the Ministry of Internal Affairs for Omsk City District
- Special Reception Centre for Persons under Administrative Arrest, Omsk

Sverdlovsk Region

- IVS of the City Internal Affairs Department, Yekaterinburg
- Police Divisions Nos. 1, 4, 5, 14 and 15, Yekaterinburg

Federal Drug Control Service establishments (FSKN)

- FSKN Directorate for Omsk Region, Omsk
- FSKN Directorate for Sverdlovsk Region, Yekaterinburg

The delegation also carried out interviews of newly-arrived prisoners in the following establishments under the Ministry of Justice's Federal Service for the Execution of Punishments:

- Pre-trial establishment (SIZO) No. 1, Novosibirsk
- SIZO No. 1, Omsk
- SIZO No. 1, Ufa
- SIZO No. 1, Yekaterinburg

Turkey

16/01/2013-17/01/2013

Prisons

- Imralı F-Type High-Security Closed Prison

Ukraine

01/12/2012-10/12/2012

Prisons

Dnipropetrovsk region

- Correctional Colony No. 89

Kharkiv region

- Oleksiyivska Correctional Colony No. 25 for men
- Kachanivska Correctional Colony No. 54 for women

Vinnytsia region

- Correctional Colony No. 81, Stryzhavska

United Kingdom

22/10/2012-24/10/2012

Detention centres for foreign nationals

- Brook House Immigration Removal Centre

Removal flights

- Charter flight organised by the United Kingdom Border Agency (UKBA) between London and Colombo (Sri Lanka) on 23 October 2012

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