



SIVILOMBUDSMANNEN

Norwegian Parliamentary Ombudsman
National Preventive Mechanism

VISIT REPORT

Stavanger Prison

16–18 August 2016



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1 The Parliamentary Ombudsman's preventive mandate

Based on Norway's ratification of the Optional Protocol to the UN Convention against Torture (OPCAT), the Parliamentary Ombudsman has been issued with a special mandate to prevent torture and other cruel, inhuman or degrading treatment or punishment.¹ The Parliamentary Ombudsman has established its own National Preventive Mechanism (NPM) in order to fulfil this mandate.

The NPM makes regular visits to locations where people are deprived of their liberty, such as prisons, police custody facilities, mental health care institutions and child welfare institutions. The visits may be announced or unannounced.

Based on these visits, the NPM issues recommendations with the aim of preventing torture and other cruel, inhuman or degrading treatment or punishment. The Parliamentary Ombudsman, represented by the NPM, has right of access to all places of detention and the right to speak privately with people deprived of their liberty. The NPM also has right of access to all essential information relating to detention conditions. During its visits, the NPM will seek to identify risks of violation by making its own observations and through interviews with the people involved. Interviews with detainees are given special priority.

The NPM also engages in extensive dialogue with national authorities, civil society and international human rights bodies.

¹ The Act relating to the Parliamentary Ombudsman for Public Administration Section 3(a).

2 Summary²

The Parliamentary Ombudsman's National Preventive Mechanism (NPM) visited Stavanger Prison in the period 16–18 August 2016. The date of the visit was not announced. Stavanger Prison is a high-security prison with both male and female inmates. The visit included the whole prison except Auklend Overgangsbolig transitional housing section.

The prison administration and the other staff were helpful throughout the visit, and all requested information was made available to the NPM.

During the NPM's visit, particular emphasis was placed on investigating how prison conditions were adapted for women. This is because the Parliamentary Ombudsman's experience from previous visits is that women in mixed-gender prisons rarely experience equal conditions with men.

In line with the international regulatory framework and guidelines, the women's section in Stavanger Prison is separate from the men's sections. The women have their own exercise yard and nurse, and some leisure activities were women-only. Men and women could meet in connection with other activities such as work, school and communal activities. Physical contact was not permitted in such situations.

It emerged during the visit that individual agreements and arrangements are established for women who are known to be vulnerable.

Several measures had been implemented to ensure that the women had dignified prison conditions and felt safe during their stay. Both the prison administration and staff demonstrated good insight into the vulnerability women may experience in a mixed prison. Interviews with the women showed that the majority of them found it unproblematic to serve their sentence in Stavanger Prison. The prison's continuous focus on dignified conditions for women as well as men is assumed to be an important reason for this.

Stavanger Prison has prepared an action plan for inmates aged 18–21 years. Findings from the visit also indicated that young inmates were given priority for work and school places.

Stavanger Prison has six double cells, four in the women's section and two in the remand section for men. In cases where two inmates are placed in the same cell at night, it is important that the prison conducts a thorough risk assessment and that double cells are prioritised for supervision during the night.

A review of the sections' procedures showed that all the sections complied with the European Committee for the Prevention of Torture's (CPT) recommendations for minimum time outside the cell.

The visit showed that a high proportion of inmates did not know who their contact officer was. Some also told us that they had a contact officer, but that they had not spoken with him/her since their admission and had therefore had to seek help from other prison officers.

² Read the full report in Norwegian on the Parliamentary Ombudsman's website: <https://www.sivilombudsmannen.no/besoksrapporter/>.

A review of administrative decisions showed that the security cells were used on a total of 25 occasions in the period from 2015 to June 2016. A review of the supervision log showed that inmates placed in security cells were under regular supervision by prison officers and the health service. The prison's procedures for the use of security cells stated that full body searches are only to be carried out if strictly necessary and on the basis of an individual assessment. This is in line with the CPT's recommendations. Rip-resistant clothing was not used. Such clothing is used by several other institutions to prevent inmates at risk of suicide from being left naked in the security cell in special cases.

The inmates described a mostly good environment at the sections and a strong sense of security. The inmates gave good feedback about the staff during interviews. Employees described a good and stable working environment.

The NPM's interviews with inmates showed that there is a high level of awareness among staff that body searches should be conducted and urine samples collected by persons of the same sex as the inmate.

Interviews with inmates indicated that the degree to which inmates had been asked about their mental health or suicidal thoughts on admission varied. The prison stated that it employed a psychologist and a psychiatrist in part-time positions. Reference was also made to a cooperation agreement entered into and procedures for cooperation between the prison and Stavanger University Hospital's Division of Psychiatry.

Female inmates usually only had access to a male doctor. From a preventive healthcare point of view, it is important that inmates do not refrain from consulting a doctor or giving an honest description of their health problems because they find having an open dialogue with a male GP problematic.

The supervision log contained several notes from visits by the health service in which it seemed that health personnel had recommended that the decision to use a security cell should be upheld. It is emphasised that health personnel should always treat inmates as patients, and that the health service should never be involved in decisions to uphold the use of coercive measures.

The health service's work in relation to inmates in isolation appears somewhat unsystematic. It was not its regular practice to visit inmates in isolation daily.

The health service emphasised that telephone interpreting is used in all medical consultations where this is required, and that inmates are never used as interpreters during such consultations.

The prison did not provide much information in languages other than Norwegian, although a few documents had been translated into English. There was no information available in other languages. It also emerged that the prison rarely calls in interpreters other than when serving court documents. In interviews, many inmates expressed dissatisfaction with the information received on admission or stated that they had not understood the information given. The prison had a clear goal of providing all inmates with information on admission. However, there seems to be a need to strengthen this work.

Stavanger Prison does not offer Skype or similar modern means of communication for foreign inmates or inmates with family in Norway living far away from the prison.

Recommendations

Mixed-gender prisons and vulnerable groups

The women's section in Stavanger Prison

- Women should be offered the same treatment for drug or alcohol problems as male inmates.

Particularly vulnerable groups

- Inmates with disabilities should be ensured equal conditions with other inmates.

Physical conditions and activities

Contact officers

- It should be ensured that all inmates have a contact officer and that inmates have understood their contact officer's role and duties.

Invasive coercive measures

Use of security cells at Stavanger Prison

- The prison should ensure that its security cells are equipped with necessary equipment such as a suicide prevention blanket and a clock, and that equipment such as dimmer switches is working.
- Suicide prevention clothing should only be used as a last resort following a concrete suicide risk assessment.
- Inmates in security cells should be offered the opportunity to spend time outdoors, particularly if held there for more than 24 hours.

Legal protection in case processing

- All administrative decisions regarding the use of security cells should contain a concrete description of which less intrusive measures have been attempted.
- An administrative decision should always be made on discontinuation of exclusion from company pursuant to Section 37 of the Execution of Sentences Act.

Protecting and safeguarding the inmates

Suicide prevention procedures

- All new inmates should be asked about their mental health and suicidal thoughts on admission to the prison.
- The prison, together with the police, should review the procedures for information flow and cooperation on the transfer of vulnerable (including suicidal) detainees to prison to ensure that they are taken care of in a safe manner.

Security

- The prison should exercise great caution in placing inmates in double cells. When this is done, it should be on a voluntary basis following a thorough risk assessment, and with intensified supervision.

Admission procedures and information on admission

- The prison should ensure that all inmates, when they arrive, receive verbal and written information about their rights and the prison's procedures in a language they understand.
- The prison should ensure that all inmates are given an opportunity to use an interpreter when needed, also after the admission phase.
- The prison should consider facilitating the use of video-mediated interpreting, for example during admissions.

Health services

Women's health

- Steps should be taken to ensure that women who, for one reason or another, want a female GP have access to one.

The health service's role in connection with the use of coercive measures

- In order to maintain a relationship of trust between patients and the health service, the prison health service and, if relevant, accident and emergency unit staff, must ensure that they never carry out medical examinations or provide assessments that are or may be perceived as approval of the use of coercive measures by the prison.

Confidentiality

- The prison should ensure that confidentiality is maintained regarding all contact with the health department, including with the dentist, physiotherapist and psychiatrist. Inmates should be informed that request forms for medical consultations can be placed in sealed envelopes, and envelopes should be made available to all inmates. The line for prison officer's signature on request forms for medical consultations should be removed immediately.

Follow-up of inmates in isolation and other vulnerable inmates

- The health service should ensure that inmates in full isolation are checked on by health personnel at least once a day.

Contact with the outside world

Telephone

- The prison should take steps to ensure that inmates who are unable to receive visits from family and friends because of the travel distance are given an opportunity to communicate with them via Skype or a similar internet solution.

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