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**Report to the Finnish Government
on the visit to Finland carried out by
the European Committee for the Prevention
of Torture and Inhuman or Degrading
Treatment or Punishment (CPT)**

from 10 to 20 May 1992

The Finnish authorities have requested the publication of this report.

Strasbourg, 1 April 1993

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Copy of the letter transmitting the CPT's report

Strasbourg, 26 February 1993

Dear Mr Taimisto,

In pursuance of Article 10, paragraph 1, of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment, I have the honour to enclose herewith the report to the Finnish Government drawn up by the European Committee for the prevention of torture and inhuman or degrading treatment or punishment (CPT) after its visit to Finland from 10 to 20 May 1992. The report was adopted by consensus by the CPT at its sixteenth meeting, held from 15 to 18 February 1993.

I would draw your attention in particular to paragraph 165 of the report, in which the CPT requests the Finnish authorities to provide an interim and a follow-up report on action taken upon its report. The CPT would be most grateful if it were possible, in the event of the reports forwarded being in Finnish, for them to be accompanied by an English or French translation.

More generally, the CPT is keen to establish an ongoing dialogue with the Finnish authorities on matters of mutual interest, in the spirit of the principle of co-operation set out in Article 3 of the Convention. Consequently, any other communication that the Finnish authorities might wish to make would also be most welcome.

I am at your entire disposal if you have any questions concerning either the CPT's report or the future procedure.

Finally, I would be grateful if you could acknowledge receipt of this letter.

Yours sincerely,

Antonio CASSESE
President of the European Committee for
the prevention of torture and inhuman
or degrading treatment or punishment

Mr Hannu Taimisto
Senior Ministerial Secretary
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Preface

As the European Committee for the prevention of torture and inhuman or degrading treatment or punishment is a new institution, knowledge of its mandate and functions is inevitably limited. The CPT has therefore deemed it appropriate to begin the first of its reports to each Party by setting out some of the Committee's salient features. This should prove particularly helpful in differentiating the basis and aims of the CPT from those of two other Council of Europe supervisory bodies within the field of human rights: the European Commission and European Court of Human Rights.

Unlike the Commission and the Court, the CPT is not a judicial body empowered to settle legal disputes concerning alleged violations of treaty obligations (i.e. to determine claims ex post facto).

The CPT is first and foremost a mechanism designed to **prevent ill-treatment from occurring**, although it may also in special cases intervene after the event.

Consequently, whereas the Commission's and Court's activities aim at "conflict solution" on the legal level, the CPT's activities aim at "conflict avoidance" on the practical level.

This being so, the guiding maxim for the CPT when performing its obligations must be to "extend the widest possible protection against abuses, whether physical or mental" (quotation from the 1979 UN Code of conduct for law enforcement officials as well as from the 1988 Body of Principles for the Protection of All Persons Under Any Form of Detention or Imprisonment, both adopted by the General Assembly).

The CPT's activities are based on the concept of co-operation (Article 3 of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment). The CPT's task is not to publicly criticise States, but rather to assist them in finding ways to strengthen the "cordon sanitaire" that separates acceptable and unacceptable treatment or behaviour. In fulfilling this task the CPT is guided by the following three principles:

- i) that the prohibition of ill-treatment of persons deprived of their liberty is absolute,
- ii) that ill-treatment is repugnant to the principles of civilised conduct, even if used in milder forms, and
- iii) that ill-treatment is not only harmful to the victim but also degrading for the official who inflicts or authorises it and ultimately harmful to the national authorities in general.

The CPT first of all explores the prevailing factual situation in the countries it visits. In particular it:

- i) examines the general conditions in establishments visited;
- ii) observes the attitude of law enforcement officials and other staff towards persons deprived of their liberty;
- iii) interviews persons deprived of their liberty in order to understand how they perceive i) and ii) and hear any specific grievances they may have;
- iv) examines the legal and administrative framework on which the deprivation of liberty is based.

Subsequently, the CPT reports to the State concerned, giving its assessment of all the information gathered and providing its observations. In this regard, it should be recalled that the CPT does not have the power to confront persons expressing opposing views or to take evidence under oath. If necessary, it recommends measures designed to prevent the possible occurrence of treatment that is contrary to what reasonably could be considered as acceptable standards for dealing with persons deprived of their liberty.

In carrying out its functions, the CPT has the right to avail itself of legal standards contained in not only the European Convention on Human Rights but also in a number of other relevant human rights instruments (and the interpretation of them by the human rights organs concerned). At the same time, it is not bound by the case law of judicial or quasi-judicial bodies acting in the same field, but may use it as a point of departure or reference when assessing the treatment of persons deprived of their liberty in individual countries.

To sum up, the principal differences between the CPT and the European Commission and European Court of Human Rights are:

- i) the Commission and the Court have as their primary goal ascertaining whether breaches of the European Convention of Human Rights have occurred. By contrast, the CPT's task is to prevent abuses, whether physical or mental, of persons deprived of their liberty from occurring; it has its eyes on the future rather than the past;
- ii) the Commission and Court have substantive treaty provisions to apply and interpret. The CPT is not bound by substantive treaty provisions, although it may refer to a number of treaties, other international instruments and the case law formulated thereunder;
- iii) given the nature of their functions, the Commission and the Court consist of lawyers specialising in the field of human rights. The CPT consists not only of such lawyers but also of medical doctors, experts in penitentiary questions, criminologists, etc;
- iv) the Commission and Court only intervene after having been petitioned through applications from individuals or States. The CPT intervenes ex officio through periodic or ad hoc visits;
- v) the activities of the Commission and Court culminate in a legally binding finding as to whether a State has breached its obligations under a treaty. The CPT's findings result in a report and, if necessary, recommendations and other advice, on the basis of which a dialogue can develop; in the event of a State failing to comply with the CPT's recommendations, the CPT may issue a public statement on the matter.

I. INTRODUCTION

A. Dates of the visit and composition of the delegation

1. In pursuance of Article 7 of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment (hereinafter referred to as "the Convention"), a delegation of the CPT carried out a visit to Finland from 10 to 20 May 1992. The visit formed part of the CPT's programme of periodic visits for 1992.

2. The delegation consisted of the following members of the Committee:

- Love KELLBERG, Head of the Delegation,
- Nadia GEVERS LEUVEN-LACHINSKY,
- Rudolf MACHACEK,
- Stefan TERLEZKI.

The delegation was assisted by:

- James MacKEITH, Consultant Forensic Psychiatrist at Bethlem Royal and Maudsley Hospitals, London (expert),
- Rodney MORGAN, Professor of Criminal Justice, University of Bristol (expert),
- Leena LIUKKONEN-SUOMAA (interpreter),
- Kati REVELL-NIELSEN (interpreter),
- Marianna SUNNARI (interpreter),
- Anna-Riitta VUORIKOSKI (interpreter).

The delegation was also accompanied by the following members of the CPT's Secretariat:

- Geneviève MAYER,
- Mark KELLY.

B. Establishments visited

3. The delegation visited the following places of detention:

Helsinki

- Central Prison
- Central Police Department
- Police Detoxification Centre

Hämeenlinna

- Central and Local Prisons
- City Police Department

Kerava

- Juvenile Prison

Turku

- Mental Hospital for Prisoners
- City Police Department

C. Consultations held by the delegation

4. The delegation held consultations with the national authorities and with representatives of non-governmental organisations active in the CPT's fields of interest, in addition to talks at local level with those responsible for the places visited.

A list of the authorities and organisations with which the delegation held talks is set out in Appendix II to this report.

D. Co-operation encountered during the visit

5. The talks held by the delegation with the national authorities were conducted in a spirit of full co-operation. The delegation was received by the Minister of Justice and certain of her senior officials. Fruitful meetings were also held with the Chancellor of Justice, the Assistant Parliamentary Ombudsman and with senior officials from the relevant departments of the Ministries of Foreign Affairs, Justice, Interior Affairs, Social Affairs and Health and the National Agency for Welfare and Health. In addition, the delegation had a joint meeting with representatives of those Ministries at the end of the visit.

6. Throughout those meetings and before, during and after the visit itself, the delegation benefited from the able assistance of Mr. Hannu TAIMISTO, Senior Ministerial Secretary at the Ministry of Justice and Liaison Officer to the CPT.

7. At local level the delegation received a very satisfactory reception at all of the places visited, including those which had not been notified in advance that a visit would take place. In particular the delegation experienced no delays whatsoever in gaining access to the establishments visited. It was observed that both managerial and subordinate staff were aware of the possibility of a visit by the CPT and had some knowledge of the mandate of the delegation.

II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

A. Police establishments

1. General information

8. As indicated above, the delegation visited four police establishments in Finland. It is noteworthy that, in addition to the holding of apprehended/arrested persons, the police Headquarters visited in Helsinki, Turku and Hämeenlinna have also been approved by the Ministry of Justice, under the terms of section 1 of the Remand Imprisonment Act¹, as suitable for the detention of remand prisoners (see also paragraph 10). Further, those establishments were being used, apparently on a temporary basis, to detain asylum seekers whose identities had not been established or in respect of whom there was reasonable suspicion that they might attempt to go into hiding or commit crimes.

9. The periods for which people may be detained by the police are regulated by the Coercive Criminal Investigation Means Act². A senior officer with the power of arrest must be informed without delay when a person is apprehended without a warrant. A decision on whether to arrest or release such a person must then be taken within twenty-four hours (cf. Chapter 1, section 2 of the Act). A person taken into custody must be informed of the reason for his arrest "as soon as he has been declared under arrest or apprehended pursuant to an arrest warrant", (cf. Chapter 1, section 7 of the Act).

After arrest, the police must make a request to a court that a person be remanded for trial without delay and "... not later than noon on the third day from the day of apprehension"³. Such requests must be heard by a court "... not later than four days from when the suspect was taken into custody"⁴. The maximum period in police custody before a first judicial hearing is therefore ninety-six hours.

10. According to section 1 of the Remand Imprisonment Act, a person who is remanded for an offence shall immediately be taken to a general prison or to an institution approved by the Ministry of Justice for the detention of remand prisoners. Further, in certain cases a person remanded for trial may be detained, "in another place that is suitable for long-term detention ... until the Court begins to hear the charges".

The delegation found that, after their first judicial hearing, considerable numbers of accused persons were returned to police premises designated under section 1 of the Act, and remained there during part or all of the period of pre-trial investigation. The latter period lasts, in principle, a maximum of four weeks but may be extended by a further two weeks⁵.

¹ Remand Imprisonment Act 19.7.1974/615

² Coercive Criminal Investigation Means Act 30.4.1987/450

³ cf. Chapter 1, sections 4 and 13 of the Coercive Criminal Investigation Means Act

⁴ cf. Chapter 1, section 14 of the Coercive Criminal Investigation Means Act, (as amended 27.4.1990/361)

⁵ cf. Chapter 1, section 21 of the Coercive Criminal Means Investigation Act 1987, (as amended 27.4.1990/361)

The decision to send a person remanded for trial to a police establishment, rather than a prison, is taken by the judge concerned. However, it appears that once the police consider that the pre-trial investigation has reached a satisfactory stage, they can, on their own initiative, transfer the person concerned to a prison, (cf. also paragraphs 24, 52 and 53).

11. The CPT would like to receive a detailed explanation of the practical operation of section 1 of the Remand Imprisonment Act, together with copies of any subordinate legislation which contains provisions for its implementation.

2. Torture and other forms of ill-treatment

12. The delegation heard no allegations of torture or other forms of physical ill-treatment of those deprived of their liberty in police establishments in Finland; nor was any other evidence of such treatment found by the delegation during the visit.

13. The information which the delegation received during its visit suggests that there is currently little risk of people deprived of their liberty by the Finnish police being physically ill-treated. **Nevertheless, the CPT would like to receive information on the number of complaints of ill-treatment by police officers made in Finland during 1991 and 1992 and on the number of cases in which disciplinary/criminal proceedings were initiated, with an indication of any sanctions imposed.**

The CPT would also like to receive information on the circumstances under which Chapter 26 of the Penal Code (on false and unsubstantiated denunciations) might be invoked in relation to allegations of ill-treatment by police officers.

3. Conditions of detention in police establishments

a) introduction

14. All police cells should be of a reasonable size for the number of persons they are used to accommodate, and have adequate lighting (ie. sufficient to read by, sleeping periods excluded) and ventilation; preferably, cells should enjoy natural light. Further, cells should be equipped with a means of rest (eg. a fixed chair or bench), and persons obliged to stay overnight in custody should be provided with a mattress and clean blankets.

Persons in custody should be allowed to comply with the needs of nature when necessary in clean and decent conditions, and be offered adequate washing facilities. They should be given food at appropriate times, including at least one full meal (i.e. something more substantial than a sandwich) every day. Persons held for extended periods (24 hours or more) should, as far as possible, be offered outdoor exercise every day.

15. In most countries visited by the CPT, criminal suspects are held for a relatively short time in police premises; therefore, the question of activities for them has little relevance. However, as noted above (cf. paragraph 10), in Finland some detainees may be held in police establishments for extended periods of time on remand. In consequence, the question of the regime to which they are subject must be addressed.

b) situation in the police establishments visited

i. material conditions of detention

16. Material conditions of detention in the police establishments visited were of a very high standard (cf. however, paragraphs 18 to 20). The cells seen were large, well lit, adequately heated and contained lavatories and drinking fountains. All police stations visited were equipped with showers, and no complaints were heard about access to such facilities.

17. Non-intoxicated persons required to stay in custody for more than a few hours were provided with a mattress and blanket. This also apparently applied to intoxicated persons who had been apprehended on suspicion of commission of an offence, but not to those who were simply being held by the police until sober.

The CPT considers that it would be preferable to provide all intoxicated persons with mattresses (which are fireproof and equipped with washable coverings).

18. The CPT is concerned by the conditions under which most intoxicated persons taken into custody at the **Helsinki Police Detoxification Centre** were held. The Centre had 45 cells and accommodated an average of 100 persons over a 24 hour period. Of these, the majority had not been and would not be charged with an offence; having been brought to the Centre by the police, they would usually be released eight to twelve hours later, once sober⁶. A minority of the persons held there had been apprehended by the police as criminal suspects whilst intoxicated; they were kept in cells equipped with a bed and mattress and were transferred to Helsinki Central Police Department when they had "sobered up".

19. The Centre's cells varied in size: those for between 1 and 4 people measured around 6m²; those for 5 people, around 8m² and those for 6 people, 10m². The policy in force at the time of the visit was to fill group cells first and only to move a detainee to a single cell if he disturbed those with whom he had been placed; consequently, whereas some cells were very crowded, others were completely empty. In the former, intoxicated people lay side-by-side between white strips marked out on the cell floor.

⁶ Although, under the terms of the Act on the Treatment of Inebriates, 8 June 1973/461, such persons can be held for up to 24 hours.

20. The self-inflicted loss of dignity suffered by a person who is sufficiently intoxicated to merit his being brought to a Detoxification Centre by the police is likely to be sharply accentuated by being deposited on the bare floor of a cell between several other people in a similar condition. Observed on the central monitors connected to the overhead cameras in each cell, the Centre gave the impression of being a human "car park".

In short, the present allocation arrangements in the Centre are not satisfactory. The CPT recognises that there may be valid reasons for placing intoxicated persons together. However, the permitted occupancy levels in the cells in the Centre are excessive. **It is recommended that they be reduced.**

Naturally, the comment made in paragraph 17, regarding the provision of mattresses to intoxicated persons, applies equally to the Detoxification Centre.

21. It should be stressed, however that the delegation's major concern related to inadequacies in the level of medical supervision in the Centre (cf. paragraphs 37 to 39).

ii. regime

22. Although material conditions of detention in the police establishments visited were entirely satisfactory (with the exception of the Helsinki Detoxification Centre), the same cannot be said of the regime activities offered to those being held there on remand. None of the police establishments visited offered a suitable regime for people detained for lengthy periods.

23. It emerged from interviews with staff and remand prisoners that the latter were confined to their cells for the whole of the day, apart from periods of exercise, showers, visits or interrogation. All prisoners were apparently offered the opportunity to take exercise once a day, for up to thirty minutes. At Helsinki and Turku police stations the exercise areas were located on the roof, and at Hämeenlinna in a cage in the vehicle area behind the police station. The delegation paid particular attention to the exercise facilities at Helsinki, following complaints from detainees. They were found to consist of a series of wedge-shaped, cage-like enclosures of a particularly oppressive design. Some prisoners claimed that they would rather forgo exercise than take it under such conditions and this was confirmed by the staff. No other out-of-cell activities were offered in any of the establishments visited.

24. In short, remand prisoners in the police establishments visited routinely spent up to 23 hours each day alone in featureless cells: a situation which might endure for weeks on end.

Furthermore, it was clear from conversations with many of the remand prisoners that the prospect of the police exercising their discretion to move them to the local remand prison (cf. paragraph 10) - where inter alia they would be allowed to associate with other prisoners - was seen as an inducement to provide information.

In the view of the CPT, such a state of affairs is not acceptable.

25. The regimes applied in Helsinki, Hämeenlinna and Turku Police stations do not offer appropriate activities to detainees held on remand; and it is highly doubtful whether it would be possible to offer such activities given the material constraints imposed by the premises concerned.

In this respect, it should be stressed that persons on remand should be able to spend a reasonable part of the day (ie. eight hours or more) outside their cells, engaged in purposeful activity of a varied nature.

The CPT recommends:

- **that the regimes applied to remand prisoners in Helsinki, Hämeenlinna and Turku Police Stations be reviewed in light of the above remarks and, if the creation of a satisfactory regime appears unrealistic, that the accreditation of those establishments by the Ministry of Justice as suitable places to hold detainees on remand be withdrawn;**
- **that a similar review be conducted in other police establishments which have been accredited by the Ministry of Justice for the detention of remand prisoners.**

4. Safeguards against the ill-treatment of persons detained by the police

- a) introduction

26. The CPT attaches particular importance to three rights for persons detained by the police:

- the right of those concerned to have the fact of their detention notified to a close relative or a third party of their choice,
- the right of access to a lawyer,
- the right to a medical examination by a doctor of their choice (in addition to any medical examination carried out by a doctor called by the police authorities).

The CPT considers that these three rights are fundamental safeguards against the ill-treatment of persons in detention, which should apply from the very outset of custody (i.e. from the moment when those concerned are obliged to remain with the police).

27. Furthermore, in the view of the CPT, persons taken into police custody should be expressly informed without delay of all their rights, including those referred to in paragraph 26.

b) notification of custody

28. Finnish law provides that information about the fact that a person has been arrested shall be given to his close relatives or friends at his request, provided that this will not jeopardise the "clarification" of the case. (Chapter 1, section 7(2) Coercive Criminal Investigation Means Act 1987).

The law does not address the question of notification of custody in respect of apprehended persons, during the period of up to 24 hours for which they may be held before arrest. In practice it appeared that a relative or third party would be informed of the fact of detention, unless the detainee expressly objected to this. The form completed and signed by a detainee on arrival includes the requirement to specify whether or not such notification has taken place.

The CPT recommends that an apprehended person be expressly guaranteed the right to inform without delay a relative or third party of his situation.

29. Naturally, the exercise by an apprehended/arrested person of the right to have the fact of his custody notified to a relative or other third party could be made subject to exceptions designed to protect the interests of justice. However, any such exceptions should be well-defined and they should be applied for as short a time as possible.

On both these counts the provisions of Chapter 1, section 7(2) of the Coercive Criminal Investigation Means Act 1987 could usefully be developed. At present, they would appear to give a broad discretionary power to hold someone for up to 96 hours (ie. until the first remand hearing) without any notification of his apprehension/arrest being given to his family or other persons with whom he has a close relationship.

30. **The CPT recommends that the possibility exceptionally to delay the exercise of the right to have the fact of one's custody notified to a relative or other third party should be clearly circumscribed and made subject to appropriate safeguards (e.g. any such delay to be recorded in writing together with the reasons therefor and to require the approval of a senior officer or public prosecutor) and to an express time limit.**

c) access to a lawyer

31. Section 10 of the Pre-Trial Investigation Act⁷ provides that a person suspected of an offence and apprehended, arrested or remanded for trial shall have the right to be in contact with his counsel through visits, by letter or by telephone.

However, the exercise of that right is subject to the qualifications in section 12 of the Remand Imprisonment Act under which, in exceptional cases, discussions with a lawyer may be listened to, and correspondence inspected.

32. The CPT welcomes the provision under Finnish law of a right of access to a lawyer for persons in police custody. However, it is concerned by the possibility to breach the confidentiality of detainee-lawyer consultations in some circumstances.

For the right of access to a lawyer to be fully effective as a means of preventing ill-treatment, it must include the right for the person in custody to consult in private with a lawyer. The CPT recognises that in order to protect the interests of justice it may be necessary in exceptional cases to place restrictions upon the right of access to a particular lawyer chosen by the detainee. However, in such cases, unrestricted access to (including the right to consult in private with) another independent lawyer, who can be trusted not to jeopardise the legitimate interests of the police investigations, should be arranged.

The CPT recommends that the existing provisions on the right of access to a lawyer be reviewed in the light of the above remarks.

33. The right of access to a lawyer should, in principle, include the right to have the lawyer present during interrogations. There is provision for this under Finnish law (cf. section 31 of the Pre-Trial Investigation Act); however, the officer in charge of the investigation may prohibit the presence of a lawyer during interrogations for "important reasons related to the investigation". **The CPT would like to receive information from the Finnish authorities about the operation of this provision in practice; in particular, it wishes to be informed of the percentage of cases in which lawyers were excluded from interrogations during 1991 and 1992.**

34. Furthermore, the delegation were told that, notwithstanding the provisions of the Pre-Trial Investigation Act, it was extremely rare for a lawyer to become involved before his or her client had been arrested. The police form signed by an apprehended person when taken into custody makes no reference to legal advice and some detainees alleged that they had not been told about their right to legal advice at that stage. In addition, one police officer interviewed stated that, in over six years of service, he could recall no case where a lawyer had been involved before his or her client had been arrested.

The CPT wishes to receive the comments of the Finnish authorities on this subject.

⁷ Pre-Trial Investigation Act 30.4.1987/449

d) medical examination of detained persons

35. The delegation found that current practice in the police stations visited was satisfactory. Detainees were entitled to call upon the services of a general practitioner or specialist of their choice, although at their own cost. The medical services offered by the police were also of a good standard. At Helsinki Police Headquarters a nurse was on duty every day, a doctor attended three times a week, and at other times a doctor was on-call. At Hämeenlinna and Turku Police Headquarters the permanent on-call service of a doctor was also provided.

Nevertheless, the CPT would like to be informed whether the right of a person in police custody to be examined by a doctor of his own choice is expressly guaranteed by law.

36. **Further, the CPT recommends that:-**

- **all medical examinations of persons in police custody be undertaken out of the hearing and, preferably, out of the sight of police officers (unless the doctor concerned requests otherwise);**
- **the results of every examination, as well as any relevant statements by the detainee and the doctor's conclusions, be recorded in writing by the doctor and made available to the detainee and his lawyer.**

37. By contrast with the police stations, the situation found by the delegation at the **Helsinki Police Detoxification Centre** was not satisfactory. Despite the large number of intoxicated persons passing through the Centre every day, there was no ongoing health care service. A nurse was present in the Centre on five evenings per week, but apparently not at weekends (when the Centre was busiest). Further, the officers employed there had received no specialised training in the treatment of such persons. The police simply applied the rule that a new admission who was incapable of talking would be sent to a hospital; otherwise, he or she would be placed in a cell.

A doctor would only be called if the staff on duty thought that this was necessary or if an intoxicated person so requested. Although a doctor did visit the Centre once a day, he only examined those persons who expressed a wish to see him or who were brought to his attention by staff.

38. The cells could be observed on closed circuit television and the staff physically checked the condition of those detained from time to time; however, such measures cannot be considered to be a substitute for an adequate level of medical supervision.

In this context, it should be stressed that a range of serious medical conditions (eg. internal bleeding, diabetes) may be masked by, or mistaken for, a state of intoxication. When apparently intoxicated persons are taken into custody by the police, it is therefore of critical importance that their health be appropriately monitored⁸. It might be added that an intoxicated person with head injuries was received at the Centre during the visit, but no doctor was called by the staff.

⁸ In this respect, the CPT has also taken note of a letter dated 6 July 1990 from the Parliamentary Ombudsman to the Ministry of the Interior which, inter alia, recommends that an Alcometer be used to test the alcohol level of those admitted to the Centre, "...to make an immediate and more reliable distinction between a person who has drunk alcohol ... and a person who has taken an overdose of medicine or who has an attack of illness". cf. Report of the Finnish Parliamentary Ombudsman 1990, 3.2.3. - Treatment of the Intoxicated.

39. **The CPT recommends:**

- **that improvements be made to the medical service provided at the Helsinki Police Detoxification Centre and, in particular, that the presence of a nurse in the Centre at weekends be guaranteed;**
- **that staff in all such detoxification centres receive specialised training in the care of intoxicated persons and in the recognition of conditions which could be mistaken for a state of intoxication.**

Further, the CPT would like to receive the views of the Finnish authorities on the possibility of locating such detoxification facilities within hospitals, rather than on police premises.

40. The delegation noted that certain cells in the Helsinki Centre had apparently been reserved for detainees who were known to be HIV positive, a fact which was indicated by signs on the doors of those cells. **The CPT considers that it is inappropriate to record such information on the door of a cell.**

The Committee also wishes to take this opportunity to stress the importance of a continuing programme of information for police officers in general on the subject of AIDS (risks of transmission and means of protection). In this connection, it would like to receive copies of any guidelines or regulations on the procedures to be followed by the police in respect of detainees who are known to be HIV+, or to have developed AIDs.

41. Finally, the delegation heard that there had been a number of deaths in the Helsinki Police Detoxification Centre in 1991. **The CPT would like to receive full information on the circumstances of all deaths in the Centre in 1991 and 1992, including the results of any enquiries which were carried out.**

e) information on rights

42. Those detained by the police in Helsinki (both at the Central Police Department and, if they had been apprehended on suspicion of having committed a crime, in the Detoxification Centre), were given a booklet setting out their rights; however, this was apparently available only in Finnish and simply reproduced the relevant legal provisions. It is clear that the complexity of the language employed might render it obscure to many Finnish detainees and that the booklet would be incomprehensible to foreigners. No written information was available in the other police establishments visited.

43. In order to ensure that persons in police custody are duly informed of their rights, **the CPT recommends that a form setting out those rights in a straightforward manner be given systematically to detainees at the outset of their custody. This form should be available in an appropriate range of languages. Further, the detainee should be asked to sign a statement attesting that he has been informed of his rights.**

f) conduct of police interviews

44. Section 24 of the Pre-Trial Investigation Act 1987 provides that:

"The person being questioned shall be treated in a calm and objective manner. Knowingly false statements, promises or deceptions concerning particular benefits, exhaustion, threats, coercive means or other improper methods or approaches ... shall not be used in order to obtain a confession or a statement...

No one may be questioned between 9.00 pm and 6.00 am without special cause. The person being detained shall be allowed the opportunity for regular meals and sufficient rest."

45. The CPT welcomes the provisions of section 24 but considers they could be usefully supplemented by a code of conduct for interrogations setting out in detail the procedure to be followed on a number of specific points. The code should deal inter alia with the following: the systematic informing of the detainee of the identity (name and/or number) of those present at the interrogation; the permissible length of an interrogation; rest periods between interrogations and breaks during an interrogation; places in which interrogations may take place; whether the detainee may be required to remain standing while being questioned; the questioning of persons who are under the influence of drugs, alcohol, medicine, or who are in a state of shock. It should also be required that a record be systematically kept of the time at which interrogations start and end, of the persons present during each interrogation and of any request made by the detainee during the interrogation.

The position of specifically vulnerable persons (for example, the young, those who are mentally disabled or mentally ill) should be the subject of specific safeguards.

It therefore recommends that such a code of conduct for interrogations be drawn up for Finnish police forces.

46. Section 30 of the Pre-Trial Investigation Act provides for the presence of a "credible and competent" witness during interrogation by the police, on the request of the person detained. In cases of urgency, interrogation may begin without a witness being present, except in the case of suspects under the age of 18, who cannot be questioned in the absence of a witness.

However, the delegation was told by detainees that, in practice, the witness involved was usually a police officer. This was confirmed by the police officers with whom the delegation raised the question.

47. Certainly the presence of a witness during interrogation can represent an important safeguard; however, in addition to being credible and competent he should also be demonstrably impartial. It is open to question whether a police officer can be considered to meet this latter criterion. **The CPT would like to receive the comments of the Finnish authorities on this subject, together with clarification about the precise role of a witness in the interrogation procedure.**

48. The CPT considers that the electronic recording of police interrogations represents another important safeguard for detainees, as well as offering advantages to the police.

The delegation found no evidence of the use of such techniques in Finland (although they are authorised by section 39 of the Pre-Trial Investigation Act and section 17 of the Decree on Pre-Trial Investigation and Coercive Criminal Means, 17 June 1988/575). **The CPT recommends that the Finnish authorities consider the possibility of making such recording a standard practice. The system to be introduced should offer all appropriate guarantees (for example, use of two tapes, one of which would be sealed in the presence of the detainee and the other used as a working copy).**

g) custody registers

49. The police used a number of forms to record various details at different stages of a detainee's time in custody. The delegation noted that these were diligently completed by police officers.

Nonetheless, the CPT considers that the fundamental safeguards granted to persons in police custody would be reinforced (and the work of police officers facilitated) if a single and comprehensive custody record were to exist for each person detained, on which would be recorded all aspects of his custody and action taken regarding them (when deprived of liberty and reasons for that measure; when told of rights; signs of injury, mental illness, etc; when next of kin/consulate and lawyer contacted and when visited by them; when offered food; when interrogated; when transferred or released, etc.). For various matters (for example, items in the person's possession, the fact of being told of one's rights and of invoking or waiving them), the signature of the detainee should be obtained and, if necessary, the absence of a signature explained. Further, the detainee's lawyer should have access to such a custody record.

The CPT recommends that the Finnish authorities endeavour to develop such a single and comprehensive custody record.

h) procedures vis-à-vis allegations of ill-treatment

50. A person who wishes to make a complaint about ill-treatment by the police may do so, at an administrative level, within the police force. In addition, allegations of ill-treatment may be addressed to the Chancellor of Justice or to the Parliamentary Ombudsman. Law enforcement officials in Finland are also subject to civil and criminal liability for wrongful actions in their capacity as civil servants (cf. section 93 of the Constitution Act of Finland).

51. The investigations in such cases have traditionally been conducted by the police; however, in June 1990, the Ministry of Justice Committee on Police Offences recommended inter alia the creation of an independent investigatory body to examine complaints against the police.

The CPT considers that the existence of an independent mechanism for examining complaints about treatment whilst in police custody is an essential safeguard against the ill-treatment of those deprived of their liberty. **Consequently, it would like to be informed about the progress being made towards the creation of such a system in Finland.**

i) remand detention in police establishments during pre-trial investigation

52. The period of time during which a criminal suspect may remain in police premises has an important bearing upon the issue of the prevention of ill-treatment. Lengthy periods spent in police premises during criminal investigations can lead to high-risk situations.

53. As already indicated, in Finland the maximum period of police custody prior to a first judicial hearing is 96 hours. Equivalent maximum periods are to be found in certain other European countries (although in a number of countries this period is shorter). However, the Finnish system is unusual in that after a first judicial hearing, persons may be returned to police premises and held there for a considerable time whilst awaiting trial (cf. paragraph 10).

It would be preferable, from the standpoint of the prevention of ill-treatment, for all persons remanded in custody to be held in premises managed and staffed by the prison authorities. Of course, such an approach would not necessarily exclude further questioning of criminal suspects by the police.

The CPT would like to receive the comments of the Finnish authorities on this question.

B. Prisons

1. Introduction

54. The CPT delegation visited Helsinki Central Prison, Hämeenlinna Central and Local Prisons, Kerava Juvenile Prison and Turku Prison Mental Hospital. All of the establishments visited fall under the authority of the Department of Prison Administration within the Ministry of Justice.

55. **Helsinki Central Prison** was built in 1882 and now accommodates adult male prisoners who have been sentenced to prison for between the second and the sixth time. It has an official capacity of 331 places and at the time of the delegation's visit it was holding 319 inmates.

56. **Hämeenlinna Central Prison** was built in 1972 as a prison for male and female sentenced prisoners. It presently holds juvenile and adult male offenders serving their first prison sentence and the female sentenced prisoner population for the whole of Finland. A certain number of prisoners were held on remand.

Hämeenlinna Local Prison is located in an old castle in the town centre and accommodates adult male prisoners on remand and serving sentences. The prison is due to be replaced by a new building outside the town, which was also visited briefly by the delegation.

The Hämeenlinna prisons have an official capacity of 509 places and there were 367 people detained there at the time of the visit. They presently fall under the authority of a single Director; however, the new Hämeenlinna Local Prison will have a separate management structure and an independent Director.

57. **Kerava Juvenile Prison** is located in the countryside around 30 km north of Helsinki. When visited, 78 young offenders were living in modern buildings designed for that purpose. Their ages ranged from 15 to 20 years old and they were serving first custodial sentences ranging from 6 months to 6 years.

58. **Turku Prison Mental Hospital** provides 42 beds and 34 patients were in residence on the day of the visit. The hospital is located in an old building which underwent major renovations in the 1970's. It has a secure perimeter and is located next to the Local Prison on the outskirts of Turku. The hospital forms an integral part of the Finnish prison system. The Director is also the Chief Medical Officer and is responsible administratively to the Administration Branch, and medically to the Head of Prison Medical Services, of the Department of Prison Administration.

2. Torture and other forms of ill-treatment

59. The delegation heard no allegations of torture or other forms of ill-treatment of detainees by prison staff in the establishments visited. Further, the CPT's delegation heard very few allegations of such treatment having occurred in other establishments in Finland. Notwithstanding this positive finding, **the CPT would like to receive information on the number of complaints of ill-treatment by prison officers, if any, made in Finland during 1991 and 1992 and on the number of cases in which disciplinary/criminal proceedings were initiated, with an indication of any sanctions imposed.**

60. In contrast to the information received about prisoner-staff relations, numerous allegations were heard of frequent and severe acts of violence between inmates in **Helsinki Central Prison**. Such attacks seemed most often to take the form of beatings, with occasional incidents of slashing the face or body of a victim with a knife (the blade of which might be partially bound with tape in order to reduce the chances of the injury proving fatal). It was also stated by prisoners, and confirmed by staff, that a variety of drugs (including cannabis, amphetamines, cocaine and heroin) were available in the prison. Those who incurred drug-related debts to other detainees were said to be most at risk of attack. The delegation were told that inter-prisoner attacks sometimes went undetected by staff and that, when they were discovered, little effective action was taken. Members of staff spoken to by the delegation recognised that inter-prisoner violence was a significant problem.

61. The high number of prisoners in the establishment who were in solitary confinement at their own request was further evidence of the extent of the above-mentioned problem. According to the staff, there were on average forty to fifty prisoners (i.e. approximately 15% of the population) seeking such protection at any one time. This group of prisoners were referred to by other inmates as "pelkolas" (the fearful ones). More generally, the delegation detected a climate of fear amongst a significant proportion of the prison population.

The delegation also noted a low level of supervision by staff of the activities of inmates in some areas of the prison. Indeed, in one wing it was found that, despite the fact that all the cell doors were open and prisoners were circulating freely, no custodial staff whatever were present. Moreover, in certain units the delegation encountered members of staff who openly admitted that they had not received even basic training for the tasks which they were expected to perform (cf. paragraph 126).

62. The CPT's task is to examine the treatment of persons deprived of their liberty with a view to strengthening their protection from torture and from inhuman or degrading treatment or punishment. It should be emphasised that this mandate is not circumscribed by the sources from which such ill-treatment may emanate. More specifically, it is not limited to ill-treatment of persons deprived of their liberty which is inflicted, or authorised, by law enforcement officials. Of course, the CPT is especially attentive to the issue of abuses of prisoners by staff. However, it is also very concerned when it discovers a prison culture which is conducive to inter-prisoner violence.

63. The duty of care which is owed by custodial staff to those in their charge includes the responsibility to protect them from other inmates who wish to cause them harm. Satisfactorily discharging that duty of care will often be a very onerous task, given the very nature of a prison environment. That said, the CPT is convinced that more could, and should, be done at Helsinki Central Prison to counter the problem of inter-prisoner violence.

64. In the view of the CPT, addressing the phenomenon of inter-prisoner violence requires of a prison's staff that it be alert to signs of trouble and both resolved and properly trained to intervene when necessary. The existence of positive relations between staff and prisoners, based on the notions of secure custody and care, is a decisive factor in this context; this will depend in large measure on staff possessing appropriate interpersonal communication skills. Further, management must be prepared to fully support staff in the exercise of their authority.

Specific security measures adapted to the particular characteristics of the situation encountered (including effective search procedures) may also be required. However, such measures can never be more than an adjunct to the above-mentioned basic imperatives.

65. The CPT recommends the Finnish authorities to carry out a detailed examination of the problem of inter-prisoner violence in Helsinki Central Prison and, taking into account the above-mentioned remarks, draw up an appropriate plan of action.

66. More generally, the CPT's delegation was informed that, in 1990, the Ministry of Justice set up a Working Group to examine, inter alia, the development of techniques to prevent drug-related violence in Finnish Prisons. The Working Group reported in 1991⁹ and recommended that staff training in dealing with drug-related problems as well as control and inspection actions should be increased substantially. **The CPT would like to be informed about the action taken to implement the recommendations in that report.**

⁹ cf. Increasing the Efficiency of Drug Abuse Prevention and Welfare for Abusers of Drugs and Other Intoxicants During the Time of Imprisonment: Working Group Report, Helsinki, 1991.

3. Solitary confinement

67. The CPT pays particular attention to prisoners detained in conditions akin to solitary confinement. The principle of proportionality requires that a balance be struck between the requirements of the case and the application of a solitary confinement-type regime, which is a step that can have very harmful consequences for the person concerned. Solitary confinement can, in certain circumstances, amount to inhuman and degrading treatment; in any event, all forms of solitary confinement should be as short as possible.

68. The CPT has noted that under Finnish law (Chapter 3, section 9 of the Enforcement of Sentences Decree of 1889), a sentenced prisoner may be kept isolated to prevent: serious injury to the life or health of another detainee; an attempt to escape; use of intoxicants or drugs and other conduct which endangers order in the prison¹⁰.

An additional circular on the use of precautionary measures¹¹ adds that a sentenced prisoner may also be placed in solitary confinement for his own safety or "where the prisoner does not dare to live together with other prisoners" and "at the prisoner's own request for an acceptable reason". The circular also provides that in respect of such an inmate "attempts must be made to place him in a prison section other than an isolation unit".

69. Reference has already been made to the large number of prisoners in **Helsinki Central Prison** who had requested to be placed in solitary confinement (cf. paragraph 61). The prisoners concerned were accommodated in the isolation unit of the prison, which also housed those who had been placed in non-voluntary solitary confinement (including prisoners classified as dangerous recidivists - cf. paragraph 77) and inmates undergoing the disciplinary penalty of cellular confinement.

The CPT has serious reservations about both the material conditions in this unit and the regime applied to prisoners placed there for non-disciplinary reasons.

70. The isolation unit was located in the "day cells" wing in the prison. Most of the cells contained only a platform bed and a lavatory - both made of concrete. Four of the cells had been converted to accommodate prisoners thought to be especially dangerous and likely to be held in solitary confinement for extended periods. Material conditions in those cells were of a slightly higher standard. None of the cells possessed any storage space, with the result that the limited range of personal possessions allowed to prisoners tended to be left strewn on the floor.

Many of the cells were in an unhygienic condition and some were extremely dirty. The condition of the in-cell lavatories also left a great deal to be desired. In this respect, it should be noted that the lavatories could only be flushed from outside the cell and prisoners alleged that their requests for this to be done were frequently ignored by the staff.

¹⁰ For the provisions on remand prisoners, cf. section 15 of the Remand Imprisonment Act.

¹¹ Circular No. 346/4/19/26.3.1980

71. In short, the material conditions of detention in the isolation unit at Helsinki Central Prison were poor.

The CPT recommends:

- **that steps be taken without delay to improve the material conditions of detention of all prisoners held in the isolation unit for whatever reason;**
- **that those prisoners not undergoing cellular confinement as a disciplinary punishment be accommodated in cells which contain the same equipment as that found in ordinary cells in the establishment, (cf. paragraph 80).¹²**

72. The delegation discussed the regime provided in the isolation unit with staff and prisoners there. It emerged that the inmates' activities consisted of reading and writing in their cells, together with one hour of outdoor exercise each day, when they might be allowed to associate with the other prisoners from the unit. No work was available, even in the cells, and no group association or sporting activities were provided. To sum up, the vast majority of prisoners spent their time alone in their cells, with little to occupy them. Given the extended periods for which persons may be held under voluntary or non-voluntary segregation, the regime which was offered to them cannot be regarded as acceptable.

73. It is generally acknowledged that all forms of solitary confinement without appropriate mental and physical stimulation are likely, in the long term, to have damaging effects, resulting in deterioration of mental faculties and social abilities. The delegation found that the regime applied in the solitary confinement unit in Helsinki Central Prison did not provide such stimulation.

The CPT recommends that the regime applied to prisoners held in solitary confinement for non-disciplinary reasons in Helsinki Central Prison be reviewed in order to ensure that they are offered purposeful activities and appropriate human contact.

74. As regards the question of legal safeguards for persons placed involuntarily in solitary confinement, it is axiomatic that a prisoner should not be held in a solitary confinement unit any longer than necessary. This calls for regular reviews of the placement decision. Further, prisoners should as far as possible be kept fully informed of the reasons for their placement and, if necessary, its renewal; this will inter alia enable them to make effective use of avenues for challenging the measure.

¹² As regards prisoners undergoing cellular confinement as a disciplinary punishment (cf. paragraph 128).

The CPT recommends that:

- **any prisoner placed in solitary confinement or whose solitary confinement has been renewed be informed in writing of the reasons for the decision, unless compelling security requirements dictate otherwise;**
- **the prisoner be given an opportunity to present his views on the matter to the relevant authority before any final decision on placement in, or renewal of, solitary confinement is taken;**
- **the position of a prisoner held in solitary confinement for an extended period should be subject to a full review (including a psychiatric assessment) at least every three months.**

The CPT would also like to be informed of the routes of appeal open to prisoners to contest a solitary confinement measure.

75. It should be added that the mental and physical state of all prisoners placed in solitary confinement must be the subject of special attention.

In this respect, Finnish law obliges prisons doctors to supervise the health of those placed in isolation¹³; however, the delegation found that, in practice, doctors rarely visited the isolation units in the adult prisons visited.

76. For its part, the CPT considers that whenever a prisoner, whatever the reason for his solitary confinement, asks for a medical doctor - or a prison officer asks for one on his behalf - the doctor should be called immediately to examine the prisoner. The results of the medical examination, including an assessment of the prisoner's mental and physical state and, if necessary, the likely consequences of continuing solitary confinement, should be set out in a written report, to be sent to the relevant authorities.

The CPT recommends that the Finnish authorities take the necessary steps to ensure that the regulations and practice in this area are in accordance with the requirements set out in this paragraph.

¹³ cf. section 27 of the Decree on Prison Administration, 14.2.1986, which also provides that doctors should scrutinise the material conditions in isolation units.

77. Finally, reference should be made to the small number of prisoners (9 at the time of the visit) subject to the terms of the Dangerous Recidivists Act¹⁴. This Act provides that recidivists whose offences have included murder, aggravated assault, robbery or rape with aggravated violence may receive an indeterminate sentence. The initial decision to classify such an offender as a dangerous recidivist is taken by the sentencing court. All subsequent decisions about whether a prisoner continues to represent "an evident and serious danger to the life and health of other persons", and should therefore remain in preventive detention, are taken by the Prison Court (a judicial-administrative tribunal, which is chaired by the Director General of the Department of Prison Administration). Such decisions are reviewed by the Prison Court every six months.

78. The delegation was informed that such prisoners were often held for very long periods under a solitary confinement-type regime. **The CPT wishes to emphasise that the observations made in paragraphs 69 to 76 above apply equally to prisoners classified under the Dangerous Recidivists Act who are held in solitary confinement.**

Further, the CPT would like to know how many prisoners are currently classified under this Act and, in respect of each of them, the total length of time during which they have been subject to a solitary confinement-type regime.

Moreover, the CPT understands that there are plans to repeal the Dangerous Recidivists Act and would like to receive information about any steps being taken by the Finnish authorities in this respect.

¹⁴ Dangerous Recidivists Act, 9 July 1953/317

4. Conditions of detention in general

a) Helsinki Central Prison

i. material conditions of detention

79. Helsinki Central Prison provided accommodation for inmates in two areas, referred to as the "day cells" and "night cells" sections (although a day-night system of prisoner location was no longer in operation). Each area contained two wings. The ground floor of the "day cells" east wing contained the isolation unit (on which cf. paragraphs 69 to 73) and the upper floor of the "night cells" east wing housed a small psychiatric unit (cf. paragraph 111). As indicated above (cf. paragraph 55), the prison was not overcrowded and prisoners lived one to a cell throughout the establishment.

80. Most of the cells were of a reasonable size (up to 9m²), acceptably furnished (bed, table, chair, wardrobe and bookshelf) and benefited from adequate lighting and sanitation. However, **it would be preferable for sanitation facilities to be partitioned off from the living areas in the cells.**

81. Material conditions in the cells on the upper floor of the night cells west wing and those in the psychiatric unit were of a distinctly lower standard. Firstly, the cells in question were very small (just over 4m²); cells of this size are unacceptably small as living accommodation for prisoners. Further, they had been constructed on the interior of a corridor with no windows. They received no direct daylight and were not equipped with a heating or ventilation system. Instead they relied upon wooden slats at the top and bottom of each cell door to admit light and heat from the corridor outside.

The cells were not equipped with lavatories or wash basins; prisoners were supplied with buckets to enable them to comply with the needs of nature at night. In this connection, the CPT must state that it does not approve of the practice of prisoners discharging human waste in buckets in their cells, which are subsequently "slopped out". Either a toilet facility should be located in cellular accommodation (preferably in a sanitary annex) or means should exist enabling prisoners who need to use such a facility to be released from their cells without undue delay at all times.

82. The delegation was told that there were plans to renovate the night cells west and psychiatric unit cell areas. The CPT welcomes these plans and **recommends that they include:**

- **enlargement of the cells (or the removal from service as living accommodation for prisoners of any cells which cannot be enlarged);**
- **the provision of adequate ventilation, light (including daylight) and heating as well as of ready access at all times to a toilet facility.**

83. More generally, the delegation was struck by the poor general state of repair of the prison; further, some areas were extremely dirty. **The CPT invites the Finnish authorities to take the necessary remedial measures.**

ii. regime

84. Helsinki Central Prison offers a range of work activities to those detained, including bookbinding, metal- and woodworking and a printshop. Those facilities appeared to the delegation to be well-equipped and to produce high quality products. Prisoners could be awarded vocational training certificates at the end of period of instruction in the workshops. However, it appeared that the workshops could only offer employment to a relatively small proportion of the prison population.

As regards opportunities for education, only 26 prisoners were following a programme of secondary-level tuition at the time of the delegation's visit. It was explained that this was because the prison authorities preferred to lay stress upon training inmates to perform skilled and semi-skilled work. Whilst the development of such vocational skills is of great value, in the view of the CPT, it should not be allowed to overshadow the need to provide those detained with a satisfactory range of educational opportunities.

85. The CPT would recall that Helsinki Central Prison is an establishment for sentenced prisoners and, as such, should be able to offer an appropriate range of work and educational activities to all those detained. The delegation had the distinct impression that there was considerable room for improvement in this area at Helsinki Central Prison. **The CPT would like to receive the comments of the Finnish authorities on this matter, as well as detailed statistics on the number and types of work and educational places available in the establishment.**

86. By contrast, prisoners had access to a well-stocked library (though it had little material in languages other than Finnish). The facilities for sport were also impressive - inmates could participate in a variety of activities (including basketball, table-tennis, volleyball and weight training) in a modern gymnasium with excellent equipment.

b) Hämeenlinna Central Prison

i. material conditions of detention

87. Hämeenlinna Central Prison consists of a number of modern buildings laid out within a large compound. In addition to accommodation blocks for female and male prisoners, it includes a variety of workshops and a prison hospital with 120 beds (on which cf. paragraph 100).

In general, prisoners live in single cells, although some larger cells are shared, on a voluntary basis by two or, occasionally, by three inmates.

88. The cells were all of a reasonable size for the number of prisoners accommodated and were well-lit, adequately ventilated and furnished to a satisfactory standard. In general, material conditions of detention in the prison were good, (although the delegation were concerned about conditions in the discipline unit for women - cf. paragraph 128).

89. Only one landing in the prison had cells which were equipped with lavatories. Prisoners who worked had access to toilet facilities during the day but during the night had to use a bucket for toilet purposes. Certain other prisoners appeared to stay in their cells for much of the day (apart from exercise periods, visits etc). Prison staff informed the delegation that such prisoners would often have to rely on the bucket in their cells as a toilet facility during the day.

In this respect the CPT would recall the comments already made at paragraph 81, regarding access to toilet facilities. As regards the situation in Hämeenlinna Central Prison, **the CPT recommends that:**

- **any request made by a prisoner to be released from his or her cell during the day in order to use a toilet facility should be granted, unless significant security considerations require otherwise;**
- **plans be drawn up designed to give all prisoners in Hämeenlinna Central Prison ready access to toilet facilities at all times, including at night.**

ii. regime

90. The types of work available in Hämeenlinna Central Prison were delimited by gender; female prisoners carried out activities such as sewing, embroidery and making childrens' clothes and male inmates, gardening, joinery, routine maintenance and woodwork. There were a good range of educational opportunities for prisoners. The majority of courses were organised by outside organisations (including Kauriala Secondary School, the Vocational Adult Training Centre and the Open College) and no complaints were heard about the quality of the service which they provided. Overall, the delegation gained a fairly positive impression of the work and education facilities. Nevertheless, it was unclear whether the number of work and education places available were sufficient, in relation to the size of the prison's population. **The CPT requests the Finnish authorities to provide it with information on the percentage of prisoners in the establishment who have access to work and/or educational places.**

91. As in Helsinki, Hämeenlinna Central Prison possessed a first-rate gymnasium, which was in regular use by both male and female prisoners. Prisoners expressed satisfaction with the opportunities for sport in the establishment.

c) Hämeenlinna Local Prison

i. *material conditions of detention*

92. The present Hämeenlinna Local Prison is due to be replaced during 1993 by a new prison building, which was nearing completion when visited. The delegation was told that the existing premises will become a penal museum.

93. The cellular accommodation in use at the time of the visit was not of an acceptable standard. However, having inspected the site of new prison, the delegation was satisfied that the material shortcomings of the present establishment will be rectified by the new building.

Cells designed for single occupancy and measuring over 10m² will replace cells which varied in size from 7m² (and were shared by two or even three people when the Local Prison was overcrowded) to as small as 3.6m². Integral sanitation (lavatory and wash basin in a sanitary annex) in every cell will supersede the "slopping out" system in the existing building. Cells in the new building will be equipped with a modern call system in place of the old-fashioned "semaphore" equipment currently in use. The very poor physical conditions found in the disciplinary cells will improve substantially.

94. **The CPT would like to be informed when the new prison premises are brought into service.**

Further, the Committee would like to receive confirmation that the present premises of Hämeenlinna Local Prison will no longer be used to accommodate prisoners once the new buildings are brought into service.

ii. *regime*

95. The number of work places and the variety of work offered to detainees were unsatisfactory. From a population of 66 at the time of the visit, only some 20 prisoners were able to work - making fishing equipment (hooks and wire nets) and garden fences. Apparently, the new prison will offer 60 work places, but it will have an official capacity of 106. Education opportunities were shared with the Central Prison (cf. paragraph 90).

In general, the delegation was concerned that the programmes of activities offered in the establishment were somewhat limited, in relation to the number of prisoners accommodated there.

96. The CPT would like to receive full information on the nature and capacities of the programmes of activities planned for the new establishment.

In this regard, the CPT considers that prisoners should have access to programmes of activities which enable them to spend a reasonable part of the day (eight hours or more) outside their cells, engaged in purposeful activities of a varied nature (group association activities, education, sport, work with vocational value). Further, the legal status and needs of sentenced and remand prisoners are not the same: this should be reflected in the regimes applied to them.

d) Kerava Juvenile Prison

i. material conditions of detention

97. The accommodation in Kerava Juvenile Prison was divided between two cell blocks -cells west (which had 3 floors of cells, each containing 2 distinct units) and cells east (2 floors of cells, each with 2 units). The material conditions of detention were of an acceptable standard throughout the establishment. Inmates lived in single cells measuring 6.3m², which were well-furnished and equipped with a wash basin, although not with a lavatory.

The delegation were told by staff that inmates would be unlocked from their cells on request, including at night, in order to use a lavatory. This was confirmed by the prisoners interviewed.

ii. regime

98. Considerable emphasis was placed on education. The prison had its own school and had strong links with the nearby Kerava Comprehensive School. The work available included vocational training (car maintenance, metalwork etc) and training certificates were issued on satisfactory completion of the courses concerned.

Those who wished to take part in sport could use outdoor and indoor facilities including a large and comprehensively-equipped sports hall. They also had access to snooker and weightlifting rooms and (once a week) to a sauna. Other facilities available included music and art rooms.

To sum up, the regime activities provided to those detained at Kerava could be considered to be appropriate to the needs of a juvenile population.

5. Medical issues

a) general level of medical care

99. In all of the establishments visited the general level of medical care provided was high. The numbers of trained staff appeared, in almost every case, to be adequate and their equipment was usually modern and well-maintained. Health care services were provided on the principle that they should be equivalent to those available in the outside community.

100. In **Helsinki Central Prison**, a doctor (acting as locum for the prison doctor, who at the time of the visit was following a course in psychiatry) and a psychiatrist were employed on a full-time basis. A range of other outside specialists visited the prison at regular intervals and nursing cover appeared to be adequate. The prison also contained a 12 bed infirmary, although only a few beds were in regular use for relatively minor cases and the equipment was rather dated.

At **Hämeenlinna**, the **Central and Local Prisons** used the services of the Prison Hospital within the grounds of the Central Prison. This was modern (it opened in 1986) and very well-equipped; however, possibilities for association in the womens' ward could be improved. Prisoners serving sentences elsewhere in Finland could be transferred to the hospital, which had 120 beds in 4 wards. The health care staff included two full-time doctors and a full-time dentist. The delegation was told that a third doctor, who was currently undergoing psychiatric training, would be employed on a permanent basis as from October 1992. Other specialists regularly called at the hospital.

At **Kerava Juvenile Prison** a doctor attended the establishment for several hours each day during the week, the other health care staff being a full-time nurse and a psychiatrist who visited twice a week. There was no in-house medical service from a Friday evening until the following Monday morning. If a medical emergency did occur during the weekend, the custodial staff could call upon the local community health service for assistance. **The CPT considers that it would be desirable to supplement the current health care team at Kerava Juvenile Prison by ensuring the presence of a nurse in the establishment at weekends.**

101. More generally **it is recommended that someone competent to provide first aid should always be present on prison premises, preferably someone with a recognised nursing qualification.**

102. The health-care staff in any prison is potentially a staff at risk. Their duty to care for their patients (sick prisoners) may often enter into conflict with prison management and security considerations. This can give rise to difficult ethical questions and choices. In order to guarantee their complete independence in health-care matters, the CPT considers it important that such personnel should be aligned as closely as possible with the mainstream of health-care provision in the community as a whole.

Doctors working in prisons in Finland are employed by the Department of Prison Administration at the Ministry of Justice and are accountable to the Head of Prison Medical Services. The delegation gained the impression that, despite their civil servant status, they were able to exercise their functions with an appropriate degree of clinical independence. However, **the CPT would like to receive information about the existence of any formal guarantees of the clinical independence of doctors working in Finnish prisons.**

b) medical screening on reception

103. Under the terms of a circular issued by the Ministry of Justice¹⁵,

"The prisoner's state of health shall be examined at the incoming inspection performed by a nurse and, in special cases, by a physician within two weeks of arrival in the penal institution or from the date on which the remand prisoner began to serve his imprisonment ...".

In practice the delegation found that all newly-arrived prisoners were asked to complete a medical questionnaire, but were not examined by a doctor except at their own request or if their answers to the questionnaire suggested that such an examination was necessary.

104. In the view of the CPT, prisoners should be seen as soon as possible after their arrival in the establishment concerned by a doctor. This is particularly important in those establishments which represent a point of entry into the prison system.

The CPT recommends that every newly-arrived prisoner be properly interviewed and, if necessary, physically examined by a medical doctor as soon as possible after his admission; save for in exceptional circumstances, this interview/examination should be carried out on the day of admission, especially in respect of persons beginning a period of imprisonment.

105. **The CPT would also like to receive information on the approach followed concerning HIV testing of newly-arrived prisoners. More generally, the CPT would like to receive any instructions or guidelines that might have been drawn up by the central authorities concerning the approach to be adopted vis-à-vis HIV+ prisoners and prisoners who have developed AIDS.**

¹⁵ Circular No. 61/4/88

c) suicide prevention

106. Reference should be made to the subject of suicide prevention, in particular as a result of the information received at **Helsinki Central Prison**. A prisoner had committed suicide in the establishment only a few days before the delegation's visit, and other suicides had apparently occurred in the fairly recent past.

107. The custodial registers and medical questionnaires completed at the time of a prisoner's reception did not solicit any information which might bear upon the risk of an inmate becoming suicidal; nor were any other elements of a structured policy of suicide prevention found in the establishments visited.

The findings of the enquiry into the suicide which occurred in Helsinki Central Prison shortly before the delegation's visit should also be mentioned. It appears that a prisoner who was in an abnormal mental state had been transferred to a cell in the isolation unit of the prison, where he continued to display signs of agitation. When the cell door was opened on the following morning he was found dead, having hanged himself from the cell bars with an elastic bandage. The deceased inmate had not been visited by the prison doctor or psychiatrist whilst placed in solitary confinement.

The Department of Prison Administration report on the incident concludes that the medical supervision of his state of health had been insufficient,- " ... considering the provisions of the relevant legislation and provisions of the Decree on Prison Administration concerning the prison physician's duty to monitor the state of health of isolated prisoners, taking into account that signs of disturbed mental health had already been observed when he was placed in isolation ... "

108. The CPT wishes to underline that the reception process, including medical screening, has a crucial role to play in the context of suicide prevention; performed properly, that process can both identify those most at risk and relieve some of the anxiety experienced by all newly-arrived prisoners.

Further, all prison staff, whatever their particular job, should be on the look out for (which implies being trained in recognising) indications of suicidal risk. Steps should also be taken to ensure a proper flow of information - both within a given establishment and, as appropriate, between establishments - about persons who have been identified as potentially at risk.

109. Of course, persons identified as a suicide risk should be subject to special precautions. In particular, they should not be placed alone in a cell with easy access to means of killing themselves (cell window bars, broken glass, belts or ties, etc), should benefit from counselling, support and appropriate association, and should, for as long as necessary, be kept under a special observation scheme.

110. The CPT recommends the Finnish authorities to draw up a suicide prevention programme for prisons, taking into account inter alia the points made above.

More generally, the CPT would appreciate receiving information on the number and causes of deaths in Finnish prisons over the last three years.

d) psychiatric services

i. *Helsinki Central Prison Psychiatric Unit*

111. The psychiatric unit in Helsinki Central Prison was a 15 bed ward, staffed by a full-time psychiatrist who was assisted by two part-time clinical psychologists. Patients were encouraged to take part in a range of occupational and group therapy activities. The CPT considers that the psychiatric services available in the ward were adequate, but that its potential to provide a therapeutic environment would be greatly enhanced by rectifying the serious shortcomings in the material conditions of detention there. In this respect, the CPT recalls its recommendation at paragraph 82.

ii. *Turku Prison Mental Hospital*

(1) *introduction*

112. Turku Prison Mental Hospital provides the main secure psychiatric facility within the Finnish prison system, although state mental hospitals also have some secure accommodation for chronic cases. The prisoners living there were either involuntary patients, (admitted on the basis of a psychiatric referral from a prison) or voluntary patients who had been transferred to Turku with the consent of a prison doctor. Involuntary patients were treated under the provisions of mental health law, whereas voluntary patients were subject to prison law. Around half of the patients were readmissions and the average length of stay in the hospital was six to eight weeks.

(2) *material conditions of detention*

113. Patients admitted to the hospital were accommodated on the two upper floors of the building, referred to as wards 2 and 3 (ward 1, which previously housed patients, contained offices and facilities for the staff). Allocation to a ward was based on age, with younger patients living on ward 2 and older ones on ward 3.

114. Most patients lived in single rooms which measured 8m² and were adequately equipped. However, they lacked integral sanitation. Patients had free access to lavatories during the day, but from 6pm to 8am when locked in their rooms, were obliged to rely upon plastic buckets which they "slopped out" when their rooms were opened in the morning.

Some of the patients had chosen to share dormitory accommodation, measuring 29m² and designed to accommodate four people. Each dormitory had its own sanitary annex containing a lavatory and wash basin, to which the patients had access at all times. They were also adequately equipped in other respects.

The CPT recommends that plans be drawn up designed to give all patients in Turku Prison Mental Hospital ready access to toilet facilities at all times, including at night.

115. None of the patients were provided with any lockable space in which to keep their personal belongings. In this respect, it should be emphasised that the single rooms in which patients lived were left unlocked throughout the day. The provision of such a facility, (perhaps in the form of individual lockers to which staff have master keys) can be particularly important in a psychiatric establishment. The failure to provide lockable space of this kind can impinge upon a patient's sense of security and autonomy.

The CPT invites the Finnish authorities to consider implementing the above-mentioned proposal.

(3) regime

116. The delegation was impressed by the relaxed nature of the regime at the hospital. As already indicated, most patients only stayed for short periods, often seeking respite from the difficulties which they had experienced elsewhere in the prison system. The majority of the patients interviewed stated that they derived benefit from their stays and they had few, if any, complaints about the regime.

117. The rooms and dormitories are unlocked from 8am to 6pm, during which time patients had access to books and daily newspapers. They might also listen to music and watch television. In addition, they were allowed to use a communal kitchen.

118. The only work opportunities were cooking and cleaning duties on the wards. Given the short average length of stay in the hospital, there are clearly difficulties involved in offering more challenging work. Nonetheless, the delegation considered that the range of activities (especially occupational therapy activities) was unduly limited. **The CPT recommends that the possibility be explored of offering additional forms of occupational therapy.**

(4) treatment of patients in isolation

119. The CPT has misgivings about the isolation arrangements at the hospital, where patients admitted voluntarily may be isolated under the relevant prison law, and non-voluntary patients under the provisions of section 28 of the Mental Health Act (14 December 1990/1116). The Hospital had produced its own "policy document" on isolation which inter alia states that the "...isolation of a psychiatric patient is always the physician's responsibility. Therefore attempts must be made to call a doctor to be present in situations where isolation is considered."

120. The delegation found that two of the four isolation rooms in the hospital were in a poor state of repair and that, although all four rooms were fitted with call systems, none of them were in operation at the time of the visit.

It was also a matter of concern that newly-admitted patients were routinely placed in isolation as the first stage in the reception process. Whilst it may be necessary to closely observe new admissions to a psychiatric facility, the CPT considers that isolation rooms should not be used for this purpose on a routine basis.

121. Deficiencies were also found in the notes which were taken at the time a patient was isolated. Although these recorded the prisoner's mental state they usually omitted a clear statement of the reason for the application of the measure of isolation. Notwithstanding the terms of the above-mentioned policy document it appeared that, in practice, the decision to isolate a patient was taken by nursing staff. A doctor would be informed about the decision, but would make no written notes about it, or on reviews of a patient's placement in isolation.

122. **The CPT recommends that,**

- **the material conditions of detention in the isolation rooms at Turku Prison Mental Hospital be improved and, as a matter of urgency, the call system be rendered operative;**
- **the practice of the routine use of isolation cells for the observation of newly admitted patients should cease;**
- **the decision on placement of patients in isolation be taken by a doctor and the reasons for making such placements be recorded in writing and made available to the patient, unless clinically inappropriate;**

(5) external control

123. Finally, the delegation noted that there was little or no outside supervision of the quality of the psychiatric care in the hospital. The local health authority apparently had a formal consultative role, but rarely visited the establishment. Similarly, although officials in the Prison Medicine Division of the Department of Prison Administration would sometimes discuss individual cases by telephone they seldom visited the hospital and never inspected the regime as a whole.

The CPT considers that external control and supervision of the quality of medical care provided in a hospital is an important safeguard for both patients and staff. It is worthy of note, in this context, that the Chief Medical Officer at Turku Prison Mental Hospital expressed strong support for this view.

The CPT would like to receive the views of the Finnish authorities on the possibility of reinforcing external control and supervision of the quality of the psychiatric services at Turku Prison Mental Hospital.

6. Other issues of relevance to the CPT's mandate

a) staff training

124. The CPT places a high premium on the training of prison staff. There is arguably no better guarantee against the ill-treatment of a person deprived of his liberty than a properly trained prison officer.

In this connection, **the CPT believes that aptitude for interpersonal communication should be a major factor in the process of recruiting prison personnel and that, during training, considerable emphasis should be placed on developing interpersonal communication skills, based on respect for human dignity.** The possession of such skills will often enable a prison officer to defuse a situation which could otherwise turn into violence, and more generally, will lead to a lowering of tension, and raising of the quality of life, in prison establishments, to the benefit of all concerned.

125. The CPT has taken note of the range of courses in "correctional treatment education" which are offered by the Prison Staff Training Centre. Custodial staff may study for basic and higher examinations in prison administration and are offered other forms of in-service training.

126. The discussions which the delegation held with prison officers in the establishments visited led it to conclude that staff members were not always in a position to take advantage of training opportunities to the extent to which they might have wished. Indeed, as noted above (cf. paragraph 61), some officers in Helsinki Central Prison stated that they had received no training at all, despite having worked in the establishment for more than a year. It appears from the information at the CPT's disposal that this might be because the three week long "new officials' introductory course" is offered as a form of in-service training, rather than provided as a mandatory training period before prison officers take up their duties.

The CPT wishes to receive clarification from the Finnish authorities on whether this is indeed the case and to receive information about the percentage of prison officers who studied for the basic and higher examinations in prison administration in 1991 and 1992.

b) discipline

127. The Enforcement of Sentences Decree¹⁶ provides for the imposition of a variety of disciplinary sanctions: warnings, loss or reduction of privileges, solitary confinement and loss of remission. The sanction of solitary confinement may be imposed by the Director of an establishment (for up to seven days) and by the Prison Board (for up to twenty days). If a prisoner has been held in solitary confinement for twenty continuous days, seven days must elapse from the end of that period before another period of solitary confinement can be implemented.

128. As regards the material conditions of detention in the disciplinary cells visited, the CPT has already drawn attention to the situation encountered in the isolation unit of **Helsinki Central Prison** and recommended that improvements be made to the cells in that unit (cf. paragraph 71). As regards more particularly the cells used to accommodate those undergoing cellular confinement as a disciplinary sanction, in addition to improving hygiene within the cells, **the CPT considers that it would be desirable for them to be equipped with a table and chair, if necessary fixed to the floor.**

The disciplinary cells for women in **Hämeenlinna Central Prison** were also a matter of concern. In particular, the cells were very small (4.2m²). The delegation were told that, in addition to providing places for those serving disciplinary penalties, they were sometimes used to accommodate prisoners placed in solitary confinement for other reasons. The CPT considers that the cells in question are not suitable for use as accommodation for prisoners placed in solitary confinement for non disciplinary reasons. Further, their very limited size renders them unsuitable for use even for disciplinary reasons, for other than short periods of time. **The CPT recommends the Finnish authorities to review the use made of the above-mentioned cells at Hämeenlinna Central Prison in the light of these remarks.**

129. Prisoners have the right to a hearing before a disciplinary sanction is imposed - furthermore, every decision must be reviewed by the Director of the establishment, together with a member of the Prison Board and, in more serious cases, by the Board itself. The CPT has noted that, under the terms of section 73 of the Decree on Prison Administration¹⁷, a prisoner may appeal to the Ministry of Justice against the imposition of loss of remission as a disciplinary sanction, but apparently not in respect of any other punishment, including solitary confinement.

The CPT recommends that a right of appeal to a higher authority be introduced in respect of all types of disciplinary sanctions.

¹⁶ cf. Chapter 2, section 10 of the Enforcement of Sentences Decree 1889/39

¹⁷ Decree on Prison Administration 13.6.1975/431

c) complaints and inspection procedures

130. The existence of an authority which is independent of the prison administration, with the power to hear (and if necessary take action upon) complaints from prisoners in a particular establishment about their treatment and to inspect the prison's premises, is a fundamental safeguard against ill-treatment.

131. The CPT is aware that, in addition to the normal procedures for complaints, (complaint at local level to the Prison Director, followed by complaint to the Department of Prison Administration), a prisoner in Finland may submit complaints to the Parliamentary Ombudsman. Further, it notes that letters sent by a prisoner to the Ombudsman must be forwarded without scrutiny. The Ombudsman also has the power to visit prisons. The work which is being done by the Office of the Ombudsman in this area is most impressive; however, given the broad range of other fields of public administration which are subject to his review, it may be difficult for him to supervise and inspect each and every prison establishment in Finland on an ongoing basis.

132. In many countries, each prison establishment is visited at regular intervals by an independent body (e.g. a Board of Visitors or supervisory judge), which is empowered to inspect the premises and listen to any grievances that prisoners might have. Such bodies can inter alia play an important role in bridging differences that arise between prison management and a given prisoner or prisoners in general. The CPT considers that the introduction of such a system of regular outside control in Finnish prisons would bring significant advantages for both prisoners and the prison administration.

The CPT recommends that the Finnish authorities explore the possibility of establishing a system under which each prison establishment would be visited on a regular basis by an independent body, possessing powers to inspect the prison's premises and hear complaints from inmates about their treatment in the establishment.

d) contact with the outside world

133. It is very important for prisoners to be able to maintain reasonably good contact with the outside world. Above all, they must be given the opportunity to preserve their relationships with their families and/or friends, and in particular with their spouse or partner and children. The maintenance of such relationships can be of critical significance for all concerned, particularly in the context of the prisoners' social rehabilitation. The guiding principle should be to promote contact with the outside world; any restrictions on such contacts should be based exclusively on security concerns of an appreciable nature or considerations linked to available resources. This is in the spirit of several recommendations of the European Prison Rules, in particular those set out in paragraph 43, sub-paragraph 1 and paragraph 65, item c.

134. The arrangements for visits in the establishments visited were found to be satisfactory. The visiting times allowed were adequate and prisoners were allowed extra visiting time if someone had travelled a long way in order to see them. It was also noteworthy that inmates were permitted from time to time to have extended and unsupervised visits with their close relatives or other persons approved by the prison authorities. The CPT considers that granting prisoners the right to receive such visits is a commendable practice.

135. In the context of the maintenance of family and personal relations, the CPT has noted that the new **Hämeenlinna Local Prison** has been built in the countryside at a considerable distance (over 40 kilometres) from the existing town centre site. **The CPT would like to be informed about any planned special arrangements to assist visitors to travel to the new prison and about the existence of any such special arrangements elsewhere in Finland.**

136. Prisoners were permitted to make telephone calls at their own expense and to send and receive letters. The law states that letters may be examined but are not to be read, unless there are reasonable grounds to suspect that this is necessary to prevent a criminal act or other misuse of the right to correspondence¹⁸. Letters must be forwarded without examination if they are addressed to a prisoner's lawyer or to "authorities supervising the operations of a penal institution". These latter are defined as including the President of the Republic, the Chancellor of Justice, the Parliamentary Ombudsman, the Minister of Justice, the Prison Department of the Ministry of Justice, the National Board of Health, the European Commission of Human Rights and the United Nations Human Rights Committee.

The CPT invites the Finnish authorities to consider adding the President of the CPT to the list of authorities to whom prisoners' letters must be forwarded without examination.

e) problems in relation to the placement of prisoners

137. One of the more difficult tasks which confronts any prison administration is the development of an effective policy on the placement of prisoners. The current Finnish placement provisions¹⁹ take a flexible approach, which leaves a degree of discretion to the Directors of individual institutions. The main criteria for placement are a prisoner's place of residence and the number of previous custodial sentences which he has served. One very positive result of this policy is that the majority of Finnish prisoners are able to serve their sentences comparatively close to their homes.

¹⁸ cf. Chapter 2, section 9(1) of the Enforcement of Sentences Decree.

¹⁹ In the form of a circular from the Director General and the Senior Inspector of Prisons, which has been in force since 1 October 1981.

138. On the other hand, the current provisions contain little guidance on the placement of prisoners according to their legal status or individual characteristics (youth or adult, sentenced or on remand, low risk or potentially dangerous) and the delegation found that there were some striking anomalies in the placement practices followed in the establishments visited.

In **Hämeenlinna Local Prison**, for example, it was found that prisoners serving sentences were accommodated in the same areas, and sometimes in the same cells, as those on remand. In addition, some prisoners serving very long sentences (including life imprisonment) had been placed there and were subject to the restricted regime to which the CPT has already referred (cf. paragraph 95). At **Kerava Juvenile Prison** (during the course of a brief visit to the local prison within the same compound as the juvenile units) it was found that youth and adult prisoners were sharing cells throughout the local prison.

Similar mixes of prisoners were found in the large dormitories (known as "travelling cells") in which prisoners may have to stay overnight during transfers between prison establishments. Such cells are a feature of the Finnish prison system and it was notable that the existing travelling cells in Hämeenlinna Local Prison are to be reproduced in the new prison building.

139. The placement of different categories of prisoners in shared living areas can create a risk to the safety and well-being of the inmates concerned.

Moreover, it will often be unrealistic to expect a single establishment to provide all of the different regime and security conditions which will be required for diverse categories of prisoners. The result of a failure to take full account of this consideration may be that prisoners are placed in institutions which are unable to provide them with an appropriate regime.

The policy on the placement of prisoners which was in force at the time of the delegation's visit gives rise to concern on both of these grounds. **The CPT would like to receive the comments of the Finnish authorities on this matter.**

140. The CPT also wishes to stress that special care must be taken to ensure that prisoners are not placed at risk through their temporary placement whilst in transit. In particular, it is important to ensure that vulnerable prisoners are adequately protected and that an establishment's staff receive sufficient information about prisoners in transit to enable them to make decisions about their temporary placement. The CPT is not convinced that this can be achieved through the system of "travelling cells" which is currently used in Finland. **The Committee would also welcome the comments of the Finnish authorities on this question.**

f) treatment of foreign prisoners

141. The delegation met only a small number of foreign prisoners in the establishments visited, but almost without exception they stated that they encountered major difficulties because very little information was available in languages other than Finnish. Often, the internal rules of an establishment were not even available in Swedish, the other official language in Finland.

It also appeared that, despite the provisions of Finnish law on a prisoner's right to benefit from the assistance of an interpreter (cf. section 22 of the Act on Administrative Procedure), in practice such assistance was often difficult to procure.

142. **The CPT recommends that:**

- **the internal rules of every prison establishment, together with other basic information about prisoners' rights, should be available to inmates in a variety of languages;**
- **foreign prisoners should have an effective right to the assistance of an interpreter when required to participate in proceedings which concern them (including internal disciplinary proceedings).**

g) access to toilet facilities

143. The CPT has already suggested that steps be taken in several of the establishments visited in order to ensure that prisoners have ready access to toilet facilities at all times. More generally, it understands that slopping out is still a feature in prisons, or parts of prisons, elsewhere in Finland. **The CPT would like to receive further information on this question and, as appropriate, details of any plans by the Finnish authorities to bring an end to the practice of slopping out.**

h) carrying of firearms in direct contact with prisoners

144. In the course of the visit to **Helsinki Central Prison** it became apparent that certain custodial officers who worked inside the prison in direct contact with prisoners carried loaded firearms whilst on duty. This was also the case at **Kerava Juvenile Prison**, when inmates were taken outside the accommodation blocks in order to play sports. The delegation was told by the Director General of the Department of Prison Administration that the current policy was to permit the Director of each establishment to decide whether staff might carry firearms. In Helsinki Central Prison the Director had apparently decided that this was a matter for the individual choice of custodial staff.

145. In the view of the CPT, the carrying of firearms by staff who are in direct contact with prisoners is a dangerous and undesirable practice. It could lead to high-risk situations for both prisoners and prison officers. In this respect, reference might also be made to the provisions of Rule 63(3) of the European Prison Rules, which stipulate that:

"Except in exceptional circumstances, staff performing duties which bring them into direct contact with prisoners should not be armed. Furthermore, staff should in no circumstances be provided with arms unless they have been fully trained in their use."

146. **The CPT would like to receive information about existing practice in this area including, in particular:**

- **a list of the establishments in which staff have been authorised by the Director to carry firearms;**
- **details of instructions/guidelines concerning the situations in which prison officers may use their firearms;**
- **details of the training given to prison officers in the use of their firearms.**

More generally, and bearing in mind the comments in paragraph 145, **the CPT would like to receive the views of the Finnish authorities on the possibility of revising the current policy on the carrying of firearms by prison staff in direct contact with prisoners.**

III. RECAPITULATION AND CONCLUSIONS

A. Police establishments

147. The CPT's delegation heard no allegations, and found no other evidence of torture or other forms of physical ill-treatment of those deprived of their liberty in police establishments in Finland. The information which the delegation received during its visit suggests that there is currently little risk of people deprived of their liberty by the Finnish police being physically ill-treated.

Further, material conditions of detention in the police establishments visited were of a very high standard (with the exception of the Helsinki Police Detoxification Centre). The cells seen were large, well lit, adequately heated and contained lavatories and drinking fountains.

148. The CPT has examined the safeguards offered to those detained by the police and made several recommendations in this area: detained persons should be expressly guaranteed the right to inform without delay a close relative or third party of their detention, and any possibility exceptionally to delay the exercise of that right should be clearly circumscribed and made subject to appropriate safeguards and an express time limit; the existing provisions on the right of access to a lawyer should be reviewed in order to ensure that, in all cases, a detained person is able to consult in private with a lawyer, (though not necessarily his own lawyer); a form setting out their rights in a straightforward manner should be given to detainees at the outset of their period of police custody; a code of conduct for police interrogations should be drawn up and consideration should be given to introducing electronic recording of police interrogations and to developing a single and comprehensive custody record.

149. In respect of the medical examination of detained persons, the delegation found that current practice in the police stations visited was satisfactory. Nevertheless, the CPT has sought clarification on whether the right of a person in police custody to be examined by a doctor of his own choice is expressly guaranteed by law. Furthermore, the Committee has recommended that all medical examinations of persons in police custody be undertaken out of the hearing and, preferably, out of the sight of police officers and that the results of every examination, as well as any relevant statements by the detainee and the doctor's conclusions, be recorded in writing by the doctor and made available to the detainee and his lawyer.

150. By contrast with the police stations, the situation found by the delegation at the Helsinki Police Detoxification Centre was a cause for concern. Despite the large number of intoxicated persons passing through the Centre every day there was no ongoing health care service. The CPT has recommended that improvements be made to the Centre's medical service. More generally, the Committee has recommended that staff in all such detoxification centres receive specialised training in the care of intoxicated persons and in the recognition of conditions which could be mistaken for a state of intoxication.

The Committee was also concerned by the material conditions of detention in which most intoxicated persons were held at Helsinki Police Detoxification Centre. The CPT considers that the permitted occupancy levels in the cells in the Centre are excessive and has recommended that they be reduced.

151. The Committee considered the issue of the regimes offered to those detained on remand on police premises and, in respect of Helsinki, Hämeenlinna and Turku Police stations, it formed the view that they did not include an appropriate range of activities. It has recommended that those regimes be reviewed and, if they cannot be rendered satisfactory, that the accreditation of those establishments by the Ministry of Justice as suitable places to hold detainees on remand should be withdrawn.

The Committee has also recommended that a similar review be conducted in other police establishments which have been accredited by the Ministry of Justice for the detention of remand prisoners.

152. More generally, the CPT considers that it would be preferable, from the standpoint of the prevention of ill-treatment, for all persons remanded in custody to be held in premises managed and staffed by the prison authorities.

B. Prisons

153. The delegation heard no allegations of torture or other forms of ill-treatment of detainees by prison staff in the establishments visited. Further, the CPT's delegation heard very few allegations of such treatment having occurred in other establishments in Finland.

154. In contrast to the information received about prisoner-staff relations, numerous allegations were heard of frequent and severe acts of violence between inmates in Helsinki Central Prison. Certain other findings and information received (the high number of inmates placed in solitary confinement at their own request, statements made by staff) confirmed that inter-prisoner violence was a significant problem in the establishment. The Committee has made some general comments on this subject and recommended that the Finnish authorities carry out a detailed examination of the problem of inter-prisoner violence in Helsinki Central Prison and draw up an appropriate plan of action.

155. Conditions of detention in the isolation unit at Helsinki Central Prison were not satisfactory. The Committee has recommended that steps be taken without delay to improve material conditions for all persons held in the isolation unit, including those undergoing disciplinary sanctions. Furthermore, the CPT considered that the regime applied in that unit to prisoners who were not undergoing cellular confinement as a disciplinary punishment, failed to provide them with purposeful activities and appropriate human contact. A review has been recommended.

156. More generally, the CPT has made a certain number of recommendations concerning the legal and medical safeguards to be accorded to prisoners held in solitary confinement.

157. Material conditions of detention in the prisons visited were, in general, of an acceptable standard. This was not true of the existing premises of Hämeenlinna Local Prison; however, the CPT is satisfied that the material shortcomings of that building will be rectified by the new establishment nearing completion. Conditions in the night cells west and psychiatric cell areas at Helsinki Central Prison also left much to be desired - they were small, dim and stuffy. There were plans to renovate these areas and the CPT has recommended, in this context, that the cells be enlarged and equipped to provide adequate ventilation, light, heating and ready access at all times to a toilet facility.

The lack of ready access to toilet facilities was also an issue at Hämeenlinna Central Prison and at Turku Prison Mental Hospital. The CPT has recommended that plans be drawn up to address this problem. It has also requested the Finnish authorities to provide it with information about any plans to bring an end to the practice of slopping out in prisons elsewhere in Finland.

158. The quality of the regimes available to prisoners were found to be variable; in particular, it was not clear that the adult establishments visited were able to provide an adequate number of work and education places. The Committee has requested more detailed information about the regimes offered in Helsinki Central and Hämeenlinna Central and Local Prisons.

159. The general level of medical care provided in the establishments visited was found to be high. The Committee had few reservations about the staffing levels or equipment, although it considered that it would be desirable to supplement the current health care team at Kerava Juvenile Prison by ensuring the presence of a nurse in the establishment at weekends.

Nevertheless, the CPT has some misgivings about present arrangements for medical screening on reception, especially in those establishments which represent a point of entry into the prison system. It has recommended that every newly-arrived prisoner be properly interviewed and, if necessary, physically examined by a medical doctor as soon as possible after his admission.

160. The CPT has also examined the question of suicide prevention, in particular in relation to Helsinki Central Prison, and has recommended that the Finnish authorities draw up a suicide prevention programme, taking the Committee's comments into account.

161. The CPT's delegation gained a positive overall impression of conditions in Turku Prison Mental Hospital (with the exception of access to toilet facilities). Nevertheless, the Committee has recommended that consideration be given to offering additional forms of occupational therapy activities.

The situation of patients placed in isolation at the hospital was not satisfactory. The CPT has recommended that material conditions in the isolation rooms be improved and the call system in them be rendered operative. Further, it has been recommended that the practice of routinely using the isolation rooms to observe newly admitted patients should cease. In respect of procedures for the placement of patients in isolation, the CPT has recommended that the decision on placement be taken by a doctor and the reason for making such placements be recorded in writing and made available to the patient, unless clinically inappropriate.

162. The CPT has made recommendations, comments and requests for information on various other matters related to its mandate, (staff training, discipline, complaints and inspection procedures, contact with the outside world, problems in relation to the placement of prisoners, treatment of foreign prisoners and carrying of firearms in direct contact with prisoners). Attention has been drawn in particular to the importance of appropriate professional training for prison officers, including in the area of interpersonal communication skills. Another recommendation to which the CPT attaches great importance relates to the provision of a system for regular visits to every prison establishment by a independent body possessing powers to inspect the premises and hear complaints from inmates about their treatment.

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163. In conclusion, the CPT wishes once again to underline the general spirit of co-operation which obtained before, during and after the visit to Finland, at both national and local level.

C. Action on the CPT's recommendations, comments and requests for information

164. The various recommendations, comments and requests for information formulated by the CPT are summarised in Appendix I.

165. As regards more particularly the CPT's recommendations, having regard to Article 10 of the Convention, the CPT requests the Finnish authorities:

- i) to provide within six months an interim report giving details of how it is intended to implement the CPT's recommendations and, as the case may be, providing an account of action already taken (N.B. the CPT has indicated the urgency of certain of its recommendations);
- ii) to provide within twelve months a follow-up report providing a full account of action taken to implement the CPT's recommendations.

The CPT trusts that it will also be possible for the Finnish authorities to provide in the above-mentioned interim report reactions to the comments formulated in this report which are summarised in Appendix I as well as replies to the requests for information made.

APPENDIX I

SUMMARY OF THE CPT' RECOMMENDATIONS, COMMENTS AND REQUESTS FOR INFORMATION

A. Police establishments

1. General information

request for information

- a detailed explanation of the practical operation of section 1 of the Remand Imprisonment Act, together with copies of any subordinate legislation which contains provisions for its implementation, (paragraph 11);

2. Torture and other forms of ill-treatment

requests for information

- information on the number of complaints of ill-treatment by police officers made in Finland during 1991 and 1992 and on the number of cases in which disciplinary/criminal proceedings were initiated, with an indication of any sanctions imposed, (paragraph 13);
- information on the circumstances under which Chapter 26 of the Penal Code (on false and unsubstantiated denunciations) may be invoked in relation to allegations of ill-treatment by police officers, (paragraph 13).

3. Conditions of detention in the police establishments visited

(a) recommendations

- the permitted occupancy levels in the cells at the Helsinki Police Detoxification Centre to be reduced, (paragraph 20);
- the regimes applied to remand prisoners in Helsinki, Hämeenlinna and Turku Police Stations to be reviewed in order to ascertain whether they are capable of offering a satisfactory regime to those detained on remand and, if that appears unrealistic, the accreditation of those establishments by the Ministry of Justice as suitable places to hold detainees on remand to be withdrawn, (paragraph 25);
- a similar review to be conducted in other police establishments which have been accredited by the Ministry of Justice for the detention of remand prisoners, (paragraph 25).

(b) comment

- it would be preferable to provide all intoxicated persons held by the police with mattresses, (paragraph 17).

4. Safeguards against the ill-treatment of persons detained by the police

(a) recommendations

- an apprehended person to be expressly guaranteed the right to inform without delay a relative or third party of his situation, (paragraph 28);
- the possibility exceptionally to delay the exercise of the right to have the fact of one's custody notified to a relative or other third party to be clearly circumscribed and made subject to appropriate safeguards (e.g. any such delay to be recorded in writing together with the reasons therefor and to require the approval of a senior officer or public prosecutor) and to an express time limit, (paragraph 30);
- the existing provisions on the right of access to a lawyer to be reviewed in order to ensure that they include the right for the person in custody to consult in private with a lawyer, (paragraph 32);
- all medical examinations of persons in police custody to be undertaken out of the hearing and, preferably, out of the sight of police officers (unless the doctor concerned requests otherwise), (paragraph 36);
- the results of every medical examination, as well as any relevant statements by the detainee and the doctor's conclusions, to be recorded in writing by the doctor and made available to the detainee and his lawyer, (paragraph 36);
- improvements to be made to the medical service provided at Helsinki Police Detoxification Centre and, in particular, the presence of a nurse in the Centre at weekends to be guaranteed, (paragraph 39);
- staff in all detoxification centres to receive specialised training in the care of intoxicated persons and in the recognition of conditions which could be mistaken for a state of intoxication, (paragraph 39);
- a form setting out the rights of persons in police custody in a straightforward manner to be given systematically to detainees at the outset of their custody. This form to be available in an appropriate range of languages. Further, detainees to be asked to sign a statement attesting that they have been informed of their rights, (paragraph 43);
- a code of conduct for police interrogations to be drawn up, (paragraph 45);
- the possibility of making the electronic recording of police interrogations a standard practice to be examined, the system to be introduced to offer all appropriate guarantees, (paragraph 48);
- the Finnish authorities to endeavour to develop a single and comprehensive custody record for each person detained, (paragraph 49).

(b) comments

- it is inappropriate to record the fact that a detainee is HIV positive on the door of a cell, (paragraph 40);
- a continuing programme of information for police officers in general on the subject of AIDS (risks of transmission and means of protection) is most important, (paragraph 40).

(c) requests for information

- information about the operation of section 31 of the Pre-Trial Investigation Act in practice, in particular, on the percentage of cases in which lawyers were excluded from interrogations under that provision during 1991 and 1992, (paragraph 33);
- the comments of the Finnish authorities on the fact that it is extremely rare for a lawyer to become involved before the arrest of his or her client, (paragraph 34);
- information on whether the right of a person in police custody to be examined by a doctor of his own choice is expressly guaranteed by law, (paragraph 35);
- the views of the Finnish authorities on the possibility of locating detoxification facilities within hospitals, rather than on police premises, (paragraph 39);
- copies of any guidelines or regulations on the procedures to be followed by the police in respect of detainees who are known to be HIV+ or to have developed AIDS, (paragraph 40);
- full information on the circumstances of all deaths in the Helsinki Police Detoxification Centre in 1991 and 1992, including the results of any enquiries which were carried out, (paragraph 41);
- the comments of the Finnish authorities on the use of police officers as witnesses during interrogations and clarification about the precise role of a witness in the interrogation procedure, (paragraph 47);
- information about the progress being made towards the creation of an independent mechanism for examining complaints about the treatment of detainees whilst in police custody, (paragraph 51);
- the comments of the Finnish authorities on the practice of holding remand prisoners on police premises, (paragraph 53).

B. Prisons

1. Torture and other forms of ill-treatment

(a) recommendation

- the Finnish authorities to carry out a detailed examination of the problem of inter-prisoner violence in Helsinki Central Prison and, taking into account the remarks in paragraphs 60 to 64, to draw up an appropriate plan of action, (paragraph 65).

(b) requests for information

- information on the number of complaints of ill-treatment by prison officers, if any, made in Finland during 1991 and 1992 and on the number of cases in which disciplinary/criminal proceedings were initiated, with an indication of any sanctions imposed, (paragraph 59);
- details of the action taken to implement the recommendations in the report of the Working Group on Increasing the Efficiency of Drug Abuse Prevention and Welfare for Abusers of Drugs and Other Intoxicants During the Time of Imprisonment, (paragraph 66).

2. Solitary confinement

(a) recommendations

- steps to be taken without delay to improve the material conditions of detention of all prisoners held in the isolation unit at Helsinki Central Prison for whatever reason, (paragraph 71);
- prisoners held in the isolation unit at Helsinki Central Prison who are not undergoing cellular confinement as a disciplinary punishment to be accommodated in cells which contain the same equipment as that found in ordinary cells in the establishment, (paragraph 71);
- the regime applied to prisoners held in solitary confinement for non-disciplinary reasons in Helsinki Central Prison to be reviewed in order to ensure that they are offered purposeful activities and appropriate human contact, (paragraph 73);
- any prisoner placed in solitary confinement or whose solitary confinement has been renewed to be informed in writing of the reasons for the decision, unless compelling security requirements dictate otherwise, and to be given an opportunity to present his views on the matter to the relevant authority before any final decision on placement in, or renewal of, solitary confinement is taken, (paragraph 74);

- the position of a prisoner held in solitary confinement for an extended period to be subject to a full review (including a psychiatric assessment) at least every three months, (paragraph 74);
- the Finnish authorities to take the necessary steps to ensure that whenever a prisoner in solitary confinement asks for a medical doctor - or a prison officer asks for one on his behalf - the doctor is called immediately to examine the prisoner. The results of the medical examination, including an assessment of the prisoner's mental and physical state and, if necessary, the likely consequences of continuing solitary confinement, to be set out in a written report and sent to the relevant authorities, (paragraph 76).

(b) comment

- the CPT's observations on the treatment of those held in solitary confinement (paragraphs 69 to 76) apply equally to prisoners classified under the Dangerous Recidivists Act who are held under such conditions, (paragraph 78).

(c) requests for information

- the routes of appeal open to prisoners to contest a solitary confinement measure, (paragraph 74);
- the number of prisoners currently classified under the Dangerous Recidivists Act and, in respect of each of them, the total length of time during which they have been subject to a solitary confinement-type regime, (paragraph 78);
- information about any steps being taken to repeal the Dangerous Recidivists Act, (paragraph 78).

3. Conditions of detention in general

(a) recommendations

- the plans to renovate the night cells west and psychiatric unit cell areas in Helsinki Central Prison to include:
 - . enlargement of the cells (or the removal from service as living accommodation for prisoners of any cells which cannot be enlarged);
 - . the provision of adequate ventilation, light (including daylight) and heating as well as of ready access at all times to a toilet facility, (paragraph 82);

- any request made by a prisoner in Hämeenlinna Central Prison to be released from his or her cell during the day in order to use a toilet facility to be granted, unless significant security considerations require otherwise, (paragraph 89);
- plans to be drawn up, designed to give all prisoners in Hämeenlinna Central Prison ready access to toilet facilities at all times, including at night, (paragraph 89).

(b) comments

- it would be preferable for the integral sanitation facilities at Helsinki Central Prison to be partitioned off from the living areas in the cells, (paragraph 80);
- the Finnish authorities are invited to take the necessary remedial measures to address the poor general state of repair in Helsinki Central Prison and the dirty condition of some areas, (paragraph 83);
- prisoners should have access to programmes of activities which enable them to spend a reasonable part of the day (eight hours or more) outside their cells, engaged in purposeful activities of a varied nature (group association activities, education, sport, work with vocational value). Further, the different legal status and needs of sentenced and remand prisoners should be reflected in the regimes applied to them, (paragraph 96).

(c) requests for information

- the comments of the Finnish authorities on the sufficiency of the range of work and educational activities available to prisoners at Helsinki Central Prison, as well as detailed statistics on the number and types of work and educational places available in the establishment, (paragraph 85);
- the percentage of prisoners in Hämeenlinna Central Prison who have access to work and/or educational places, (paragraph 90);
- notification of the bringing into service of the new Hämeenlinna Local Prison premises and confirmation that the present prison premises will no longer be used to accommodate prisoners once the new buildings are brought into service, (paragraph 94);
- full information on the nature and capacities of the programmes of activities planned for the new Hämeenlinna Local Prison, (paragraph 96).

4. Medical issues

(a) recommendations

- someone competent to provide first aid always to be present on prison premises, preferably someone with a recognised nursing qualification, (paragraph 101);
- every newly-arrived prisoner to be properly interviewed and, if necessary, physically examined by a medical doctor as soon as possible after his admission; save for in exceptional circumstances, this interview/examination to be carried out on the day of admission, especially in respect of persons beginning a period of imprisonment, (paragraph 104);
- a suicide prevention programme for prisons to be drawn up, taking into account inter alia the points made by the CPT in paragraphs 108 and 109, (paragraph 110);
- at Turku Prison Mental Hospital:
 - . plans to be drawn up designed to give all patients ready access to toilet facilities at all times, including at night, (paragraph 114);
 - . the possibility to be explored of offering additional forms of occupational therapy, (paragraph 118);
 - . the material conditions of detention in the isolation rooms to be improved and, as a matter of urgency, the call system to be rendered operative, (paragraph 122);
 - . the practice of the routine use of isolation cells for the observation of newly admitted patients to cease, (paragraph 122);
 - . the decision on placement of patients in isolation to be taken by a doctor and the reason for making such placements to be recorded in writing and made available to the patient, unless clinically inappropriate, (paragraph 122).

(b) comments

- it would be desirable to supplement the current health care team at Kerava Juvenile Prison by ensuring the presence of a nurse in the establishment at weekends, (paragraph 100);
- the Finnish authorities are invited to consider providing patients at Turku Prison Mental Hospital with lockable space in which to keep their personal belongings, (paragraph 115);
- external control and supervision of the quality of medical care provided in a hospital is an important safeguard for both patients and staff, (paragraph 123).

(c) requests for information

- information about the existence of any formal guarantees of the clinical independence of doctors working in Finnish prisons, (paragraph 102);
- the approach followed concerning HIV testing of newly-arrived prisoners, (paragraph 105);
- copies of any instructions or guidelines that might have been drawn up by the central authorities concerning the approach to be adopted vis-à-vis HIV+ prisoners and prisoners who have developed AIDS, (paragraph 105);
- the number and causes of deaths in Finnish prisons over the last three years, (paragraph 110);
- the views of the Finnish authorities on the possibility of reinforcing external control and supervision of the quality of the psychiatric services at Turku Prison Mental Hospital, (paragraph 123).

5. Other issues of relevance to the CPT's mandate

(a) recommendations

- the use made of the disciplinary cells for women at Hämeenlinna Central Prison to be reviewed, in the light of the CPT's remarks, (paragraph 128);
- a right of appeal to a higher authority to be introduced in respect of all types of disciplinary sanctions, (paragraph 129);
- the possibility to be explored of establishing a system under which each prison establishment would be visited on a regular basis by an independent body, possessing powers to inspect the prison's premises and hear complaints from inmates about their treatment in the establishment, (paragraph 132);
- the internal rules of every prison establishment, together with other basic information about prisoners' rights, to be available to inmates in a variety of languages, (paragraph 142);
- foreign prisoners to have an effective right to the assistance of an interpreter when required to participate in proceedings which concern them (including internal disciplinary proceedings), (paragraph 142).

(b) comments

- aptitude for interpersonal communication should be a major factor in the process of recruiting prison personnel and, during training, considerable emphasis should be placed on developing interpersonal communication skills, based on respect for human dignity, (paragraph 124);
- it would be desirable for the disciplinary cells in the isolation unit at Helsinki Central Prison to be equipped with a table and chair, if necessary fixed to the floor, (paragraph 128);
- the Finnish authorities are invited to consider adding the President of the CPT to the list of authorities to whom prisoners' letters must be forwarded without examination, (paragraph 136).

(c) requests for information

- clarification on whether the "new officials introductory course" for prison officers is offered as a form of in-service training, rather than provided as a mandatory training period before prison officers take up their duties, (paragraph 126);
- the percentage of prison officers who studied for the basic and higher examinations in prison administration in 1991 and 1992, (paragraph 126);
- any planned special arrangements to assist visitors to travel to the new Hämeenlinna Local Prison, and the existence of any such special arrangements elsewhere in Finland, (paragraph 135);
- the comments of the Finnish authorities on the observations made in paragraphs 137 to 139 about the policy on the placement of prisoners, (paragraph 139);
- the comments of the Finnish authorities on the adequacy of the current system of "travelling cells", (paragraph 140);
- information on the practice of slopping out in the Finnish prison system and details of plans to bring an end to that practice, (paragraph 143);
- information about the existing practice of carrying firearms in direct contact with prisoners, including, in particular:
 - . a list of the establishments in which staff have been authorised by the Director to carry firearms;
 - . details of instructions/guidelines concerning the situations in which prison officers may use their firearms;
 - . details of the training given to prison officers in the use of their firearms, (paragraph 146);
- the views of the Finnish authorities on the possibility of revising the current policy on the carrying of firearms by prison staff in direct contact with prisoners, (paragraph 146).

APPENDIX II

LIST OF THE NATIONAL AUTHORITIES AND NON-GOVERNMENTAL ORGANISATIONS WITH WHICH THE DELEGATION HELD CONSULTATIONS

A. National authorities

Ministry of Justice

Ms. Hannele Pokka	- Minister of Justice
Mr. Teuvo Kallio	- Secretary General
Mr. Pekka Nurmi	- General Director, Head of Department
Mr. Jan Törnqvist	- Legislative Director
Mr. Arto Kosonen	- Legislative Counsellor
Mr. Hannu Taimisto	- Senior Ministerial Secretary, Liaison Officer to the CPT

Ministry for Foreign Affairs, Legal Department

Mr. Tom Grönberg	- Head of Department
Mr. Veijo K. Sampovaara	- Ambassador, Special Advisor on Human Rights
Ms. Anja-Riitta Ketokoski	- Director (Human Rights) Legal Department
Ms. Irma Erdman	- Director, Consular Division
Mr. Timo Lahelma	- Director, International Law Division
Ms. Päiri Kankoranta	- Counsellor, International Law Division

Ministry of Justice, Prison Administration Department

Mr. K.J. Lång	- Director General, Head of Department
Mr. Risto Jalli	- Deputy Head of Department
Ms. Anna-Katrina Grönholm	- Ministerial Counsellor
Mr. Paavo Siltanen	- Ministerial Counsellor
Ms. Hellevi Ikävalko	- Inspector General of Prison Administration
Mr. Ahti Lempiö	- Head of Labour and Financial Office
Ms. Leena Arpo	- Head of Prison Medical Services

Ministry for Interior Affairs, Police Department

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| Mr. Reijo Naulapää | - Deputy Director General of the Police Force |
| Mr. Reijo Pöyhönen | - Senior Inspector |
| Mr. Kaarle J. Lehmus | - Senior Inspector |
| Ms. Mielikki Tenhunen | - Deputy Director General for the Office of Alien Affairs |

Ministry of Social Affairs and Health

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| Ms. Marita Liljeström | - Deputy Director, Department of Social and Health Services (Health Affairs) |
| Ms. Riitta Viitala | - Deputy Director, Department of Social and Health Services (Social Affairs) |
| Mr. Matti Mikkola | - Legislative Counsellor |
| Ms. Eeva Vattulainen | |
| Ms. Pia Huldin | - Counsellors, Bureau for Refugee Affairs |
| Ms. Marjukka Laine | - Ministerial Secretary, Bureau for International Affairs |

National Agency for Welfare and Health

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| Ms. Paula Kokkonen | - Deputy Director General |
| Mr. Erkki Kemppainen | - Legal Adviser |

Office of the Chancellor of Justice

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| Mr. Jorma S. Aalto | - Chancellor of Justice |
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Office of the Parliamentary Ombudsman

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| Ms. Pirkko K. Koskinen | - Assistant Parliamentary Ombudsman |
| Ms. Riitta-Leena Paunio | - Director of the Office |
| Mr. Eero Kallio | - Referendary Counsellor |
| Mr. Raino Marttunen | |
| Mr. Henrik Åström | - Senior Ombudsman Secretaries |

B. Non-governmental organisations

Ihmisoikeusjuristit (Lawyers for Human Rights - Finnish Section of the International Commission of Jurists)

Ms. Maija Sakslin
Mr. Martin Scheinin
Ms. Jaana Karhilo

Kriminaali Huoltoyudistys (After-Care Association for Prisoners)

Ms. Maija Kukkonen
Ms. Maija Salo

Suomen Punainen Risti - SPR (Finnish Red Cross)

Ms. Auli Valle

Vapautuvien Tuki ry (Support for the Released)

Mr. Risto Kyröläinen
Mr. Launi Siljoranta