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

from 6 to 12 July 1993

The Icelandic Government has decided to publish this report.

Strasbourg/Reykjavik, 28 June 1994

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TABLE OF CONTENTS

	<u>Page</u>
Copy of the letter transmitting the CPT's report	7
Preface	9
I. INTRODUCTION	11
A. Dates of the visit and membership of the delegation	11
B. Establishments visited	12
C. Consultations held by the delegation	12
D. Co-operation encountered during the visit.....	13
II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED	15
A. Police establishments	15
1. General information	15
2. Torture and other forms of ill-treatment.....	16
3. Conditions of detention in police establishments.....	17
a. introduction.....	17
b. situation in the establishments visited.....	18
4. Safeguards against the ill-treatment of detained persons	20
a. information to a close relative or another third party	20
b. access to a lawyer.....	21
c. access to a doctor	21
d. information on rights.....	22
e. conduct of interrogations	22
f. custody registers.....	24
g. complaints procedures	24

B. Prisons	25
1. General information	25
2. Torture and other forms of physical ill-treatment	27
3. Solitary confinement of remand prisoners for investigation purposes.....	29
4. Conditions of detention in general	31
a. Litla-Hraun State Prison	31
i. <i>material conditions of detention</i>	31
ii. <i>regime</i>	32
b. Kópavogur State Prison	33
i. <i>material conditions of detention</i>	33
ii. <i>regime</i>	33
c. Siðumúli Prison, Reykjavik	34
d. Skólavörðustigur Prison, Reykjavik	35
5. Medical services	37
a. introduction.....	37
b. staff	37
c. medical facilities and confidentiality of medical information	38
d. examination on admission.....	39
e. medical care	39
f. alcohol and drug addiction.....	41
g. issues linked to the Human Immuno-deficiency Virus (HIV).....	41
6. Other issues of relevance to the CPT's mandate.....	42
a. the separation of different categories of prisoners	42
b. contacts with the outside world.....	42
c. solitary confinement.....	44
d. security cells.....	44
e. discipline	47
f. complaints and inspection procedures	47

C.	Sogn Institution for Mentally Ill Offenders.....	48
1.	General information	48
2.	Material conditions.....	48
3.	Staff	49
4.	Treatment of patients.....	50
5.	Solitary confinement	51
6.	Patients' rights and complaints procedures.....	52
III.	RECAPITULATION AND CONCLUSIONS.....	53
A.	Police establishments.....	53
B.	Prisons.....	54
C.	Sogn Institution for Mentally Ill Offenders	56
D.	Action on the CPT's recommendations, comments and requests for information.....	57
APPENDIX I :		
	SUMMARY OF THE CPT'S RECOMMENDATIONS, COMMENTS AND REQUESTS FOR INFORMATION	59
APPENDIX II :		
	LIST OF THE NATIONAL AUTHORITIES WITH WHICH THE CPT'S DELEGATION HELD CONSULTATIONS AND OTHER PERSONS CONSULTED	69

Copy of the letter transmitting the CPT's report

Strasbourg, 23 March 1994

Dear Mr Thors,

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 Government of Iceland drawn up by the European Committee for the prevention of torture and inhuman or degrading treatment or punishment (CPT) after its visit to Iceland from 6 to 12 July 1993. The report was adopted by the CPT at its twentieth meeting, held from 28 February to 3 March 1994.

I would draw your attention in particular to paragraph 179 of the report, in which the CPT requests the Icelandic authorities to provide an interim and a follow-up report on action taken upon its report. The CPT would be grateful if it were possible, in the event of the reports forwarded being in Icelandic, for them to be accompanied by an English or French translation.

More generally, the CPT is keen to establish an ongoing dialogue with the Icelandic 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 Icelandic 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,

Claude NICOLAY
President of the European Committee for
the prevention of torture and inhuman
or degrading treatment or punishment

Mr Jón Thors
Director of Civil Affairs
Ministry of Justice
ISL - 150 REYKJAVIK
Iceland

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 prejudicial 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 membership of the delegation

1. In accordance with Article 7 of the European Convention for the prevention of torture and inhuman or degrading treatment or punishment (hereafter referred to as "the Convention"), a delegation of the CPT visited Iceland from 6 to 12 July 1993. The visit formed part of the Committee's programme of periodic visits for 1993.

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

- Mr Günther KAISER (Head of the delegation)
- Mrs Pirkko LAHTI
- Mrs Nora STAELS-DOMPAS
- Mr Stefan TERLEZKI.

It was assisted by:

- Mr James MacKEITH, Consultant in forensic psychiatry at the Bethlem Royal and Maudsley hospitals, London (expert)
- Mrs Thora ANDERSEN (interpreter)
- Mr Bogi Arnar FINNBOGASON (interpreter)
- Mr Gauti KRISTMANNSSON (interpreter).

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

- Mr Trevor STEVENS, Secretary of the CPT
- Mr Fabrice KELLENS.

B. Establishments visited

3. The delegation visited the following places of detention:

EYRARBAKKI

- Litla-Hraun State Prison

KEFLAVÍK

- Keflavík Air Base Police Station
- Keflavík Police Station

KÓPAVOGUR

- State Criminal Investigation Department
- State Prison

REYKJAVIK

- Siðumúli State Prison
- Skólavörðustigur State Prison
- Police Headquarters

SELFOSS

- Sogn Institution for Mentally Ill Offenders

C. Consultations held by the delegation

4. In addition to meetings with the local officials in charge of the places visited, the delegation held consultations with the competent national authorities as well as individuals active in areas of concern to the CPT. A list of the national authorities with which the delegation held talks and other persons consulted is set out in Appendix II to this report.

D. Co-operation encountered during the visit

5. The talks with the national authorities, both at the beginning and at the end of the visit, took place in a spirit of close co-operation. Fruitful discussions were held with the Minister for Justice and numerous senior officials from the Justice Ministry and from the Department of Health, with the State Public Prosecutor and with the Ombudsman.

The CPT wishes to underline the assistance provided to the delegation by the Government's liaison officers, Mr Jón Thors and Mr Thorsteinn A. Jónsson, not only during, but also before and after the CPT's visit to Iceland.

6. The CPT's delegation had no difficulty gaining access to the establishments visited; in this regard it should be noted that members of the delegation were supplied with a letter of accreditation by the Icelandic authorities. Moreover, in all the establishments visited, including those which had not received prior notice of the visit, the delegation's reception by both senior and junior staff was very satisfactory. The delegation noted that all of those staff were aware of the possibility of a CPT visit and that they had at least some knowledge of its terms of reference.

7. At the end of its visit to Iceland, the delegation gave a brief oral report to senior officials of the Ministries concerned. In accordance with Article 8, paragraph 5, of the Convention, immediate observations were made on certain issues relating to the prisons visited. These issues will be considered in more detail below. However, the CPT would like to draw attention to the constructive manner in which the Icelandic authorities took note of, and subsequently acted on, those observations. In a letter of 27 December 1993, the Icelandic authorities indicated that steps had already been taken in response to the delegation's concerns.

8. In conclusion, the CPT welcomes the excellent spirit of co-operation encountered before, during and after the delegation's visit to Iceland; this was fully in accordance with Article 3 of the Convention.

II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

A. Police establishments

1. General information

9. In Iceland, the police fall under the authority of the Ministry of Justice¹. There is a single, national, police force divided into 26 geographical districts, each headed by a Chief of Police. The Reykjavik police exercise a number of national functions, particularly with regard to anti-drug measures. There is also a Criminal Investigation Department, created in 1976 and located in Kópavogur, a suburb of Reykjavik. This department assists the other police districts with difficult inquiries and is responsible for investigating serious crimes in Reykjavik.

The delegation was informed that a Committee had been set up in the Ministry of Justice to review the organisation of the Icelandic police force. **The CPT would like to receive, in due course, the Committee's conclusions.**

10. Under Icelandic law, police officers may arrest a person under a warrant issued by the judicial authorities. Police officers may also arrest on their own authority in certain situations; in particular, they may arrest someone if there is a reasonable suspicion that he has committed an indictable offence, provided arrest is necessary to prevent a continuing offence, ensure a person's accessibility and safety or prevent him from destroying evidence.

According to the Constitution and the Criminal Procedure Act (hereafter referred to as the CPA), persons deprived of their liberty by the police must be brought before a judge without undue delay. The Icelandic authorities informed the delegation that, in practice, the term "without undue delay" was interpreted to mean that - except in unavoidable circumstances - the police should not detain a suspect for more than twenty-four hours without applying to a judge for the individual's detention on remand. The fact that this period expired during a weekend or public holiday made no difference in this regard.

Once a suspect is brought before a judge, the latter must decide within twenty-four hours whether or not to order his detention on remand. According to information supplied to the delegation, in the great majority of cases, judges make their decision immediately after they have heard the parties involved. If the decision is deferred, the individual concerned remains in police custody.

¹ There is, however, one exception - the police station at Keflavík Air Base falls under the authority of the Ministry of Foreign Affairs.

11. Individuals who are detained on remand are normally transferred immediately to a prison. However, the delegation was informed that outside Reykjavik, such a person could spend a short period (5 to 6 days) in a police station, pending transfer to prison.

It should also be noted that during the period of detention on remand, a prisoner may be placed in solitary confinement on the orders of the police officer responsible for the investigation, if the interests of the investigation so require. The accused is, however, entitled to appeal against this decision to a judge.

12. Torture is not explicitly prohibited by Icelandic legislation. However, such conduct - or at least that which is physical in nature - clearly falls within the scope of bodily harm prohibited under sections 217 and 218 of the Criminal Code.

In this context, **the CPT would like to be informed of the legal provisions which would apply to psychological forms of ill-treatment.** Further, **the CPT would like to know whether the Icelandic authorities envisage including an express prohibition of torture in Icelandic law.**

2. Torture and other forms of ill-treatment

13. The CPT's delegation heard no allegations of torture of persons detained by the police in Iceland. Moreover, no other evidence of torture was found by the delegation.

In addition, none of the detained persons whom the delegation met made any allegations of physical ill-treatment during their period of police custody. However, the authorities consulted - including a Chief of Police - and other persons whom the delegation met, stated that from time to time allegations of ill-treatment were made against the police. They principally concerned blows inflicted at the time of arrest and/or during the transfer of the arrested person from the place of arrest to a police station. The delegation was informed that one such case, which had arisen shortly before its visit, was in the process of being investigated by the Reykjavik judicial authorities.

14. Although the delegation heard no allegations of physical ill-treatment by the police during interrogation, a number of detainees whom it met referred to threats to place or maintain them in solitary confinement (see paragraph 11) made by police officers during interrogation, as a means of exerting pressure.

15. To summarise, the information received by the CPT's delegation during its visit suggests that persons deprived of their liberty by the Icelandic police run little risk of being ill-treated.

Notwithstanding this positive finding, **the CPT would like to receive the following information for 1991, 1992 and 1993:**

- **the number of complaints of ill-treatment lodged against police officers and the number of criminal/disciplinary proceedings which were instituted as a result of such complaints;**
- **an account of the criminal/disciplinary sanctions imposed during that period following complaints of ill-treatment.**

16. In respect of the allegations referred to in paragraphs 13 and 14, **the CPT would stress that it is most important for senior police officers to make it quite plain to their subordinates that ill-treatment of persons in custody, whether of a physical or a psychological nature, is unacceptable and will be subject to appropriate sanctions.**

3. Conditions of detention in police establishments

a. introduction

17. Custody by the police is, in principle, of relatively short duration. Consequently, physical conditions of detention cannot be expected to be as good in police establishments as in other places of detention where persons may be held for lengthy periods. However, certain elementary material requirements should be met.

All police cells should be of a reasonable size for the number of persons they are used to accommodate, and have adequate lighting (i.e. 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 clean mattress and 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.

b. situation in the establishments visited

18. The material conditions of detention in the police establishments in Iceland visited by the delegation were, on the whole, acceptable.

19. The conditions observed in the main detention area of the Reykjavik Police Headquarters were, in general, satisfactory.

The detention area for men contained some twenty cells. The majority of them were designed for single occupancy and were of an adequate size (6+ m²) for that purpose. Two larger cells (12+ m²) were intended for shared occupancy. The cells were appropriately equipped (concrete sleeping platform, mattress, water fountain and call system) and well maintained. The artificial lighting and ventilation were satisfactory. Natural light was good in the multi-occupancy cells; however, in the single cells it was often mediocre and sometimes very limited. Very well maintained sanitary facilities (lavatories, washbasin and shower) adjoined the cells.

The separate detention area for women contained five cells. They resembled the men's cells in size and equipment, and had the same shortcomings with regard to natural light.

Although detained persons spend only brief periods in these premises and hardly ever more than twenty-four hours, **it would be desirable for improvements to be made as regards access to natural light in the cells in Reykjavik Police Headquarters.**

20. As a rule, suspected persons were questioned in the offices of detective officers. Officers in the drugs section had the use of two interrogation rooms; conditions there call for no particular comment from the CPT.

21. The premises of the State Criminal Investigation Department included two cells, one of which had been turned into a storage area. The remaining cell was rather small (barely more than 4 m²). It was equipped with a sleeping platform, mattress and call system and enjoyed adequate artificial lighting and ventilation; however, there was no natural light.

22. State Criminal Investigation Department officers informed the delegation that persons were only detained in the cell for a few hours at most and were never kept there overnight. The delegation noted that the Criminal Investigation Department used the Siðumúli State Prison for prisoners required to spend the night in custody (see paragraph 49).

The CPT welcomes this state of affairs; **the cells in the State Criminal Investigation Department are not appropriate for detention lasting more than a few hours and should not be used for holding persons overnight.**

23. The Keflavík Police Station was of recent construction. It contained six detention cells, one of which was equipped to accommodate two persons. This latter measured nearly 7 m², the others approximately 5 m². The facilities (sleeping platform, mattress and water fountain), artificial lighting and ventilation in the cells were satisfactory. Moreover, the cells and the adjacent sanitary facilities (including a shower) were well maintained. As regards natural light, it was good in certain cells but poor in others (the windows of the latter giving onto the interior of a garage which adjoined the police station).

24. The majority of detained persons remained in these cells for a short time (up to a maximum of twenty-four hours). Nevertheless, an examination of the custody register revealed that, on occasion, this police station had been required to accommodate persons detained on remand for longer periods - up to five days in exceptional cases (see also paragraph 11).

In this context, it should be noted that the police station was not equipped with an outdoor exercise area. However, police officers indicated that persons detained there who had been placed on remand were authorised to take exercise inside the garage.

25. The CPT recommends that, as far as possible, any remand prisoner detained in Keflavík Police Station should be accommodated in the largest of the cells. It also recommends that the Icelandic authorities examine the possibility of offering such persons proper outdoor exercise every day.

The CPT wishes to add that it would be far preferable for persons placed on remand to be transferred immediately to a prison.

26. The Keflavík Air Base Police Station had four cells, two of which had been turned into storage areas.

The remaining cells were very small (approximately 3.5 m²). Nevertheless they were each equipped with a sleeping platform, mattress, table and chair. The natural and artificial lighting and the ventilation were satisfactory.

27. An examination of the custody register revealed that persons (often foreigners about to be expelled from the country) were fairly frequently required to spend the night, and, exceptionally, twenty-four hours, in these cells.

In the CPT's opinion, the cells are adequate for detention of up to a few hours but should not be used to detain anyone overnight, on account of their very small size. In consequence, **the CPT recommends that the use of these cells be reviewed in the light of the above-mentioned considerations. Should the authorities wish to continue using them to accommodate detainees held overnight, they should be enlarged.**

4. Safeguards against the ill-treatment of detained persons

28. The CPT attaches particular importance to three rights for people detained by the police:

- the right of those concerned to inform a close relative or another third party of their choice of their detention,
- the right of access to a lawyer,
- the right to request a medical examination by a doctor of their choice.

The CPT considers that these rights constitute three fundamental safeguards against the ill-treatment of persons detained, which should apply from the very outset of custody (that is, as soon as those concerned are obliged to stay with the police).

29. Moreover, it is equally fundamental that such persons should be informed without delay of all their rights, including those referred to above, in a language which they understand.

- a. information to a close relative or another third party

30. The CPT considers that the right of a person detained by the police to immediately inform a close relative or another third party of his choice of his detention should be expressly guaranteed. The exercise of this right could, of course, be made subject to certain exceptions in order to protect the interests of justice. However, any such exceptions should be clearly defined and they should be applied for as short a time as possible.

31. In Iceland, section 32.1 of the CPA entitles a person arrested by the police to inform immediately a close relative of his custody, unless there is a specific reason to believe that this could prejudice the inquiry. **The CPT recommends that the possibility to delay the exercise of the right to notify custody be more closely circumscribed and made subject to appropriate safeguards (for example, any such delay to be recorded in writing together with the reasons therefor and to require the approval of a public prosecutor or senior police officer).**

b. access to a lawyer

32. Section 32.1 of the CPA entitles a person detained by the police to contact a lawyer immediately. In addition, the police must inform the detained person of this right (section 38.1 of the CPA). The detained person may consult the lawyer in private and the latter may be present during questioning (section 42 of the CPA).

33. Certain police officers whom the delegation met said that they were entitled to object to the lawyer chosen by the detained person, if special circumstances so required. In such cases, the police would themselves nominate a lawyer, if the person concerned requested one.

The CPT would like to receive more detailed information on the right of police officers to object to a detained person's choice of a particular lawyer and on the operation in practice of the system of officially appointed lawyers.

34. It should also be noted that the delegation heard several allegations that police officers had attempted to dissuade detained persons from contacting a lawyer.

The CPT recommends that the Icelandic authorities draw to police officers' attention that they should not seek to dissuade arrested persons from contacting a lawyer.

c. access to a doctor

35. Under existing legislation, persons detained by the police in Iceland do not have a formal right of access to a doctor.

However, the delegation was informed that police officers would not hesitate to summon a doctor if the health of an arrested person gave cause for concern. In general, the local emergency medical services were contacted. Certain police officers also said that they would agree to a request from the person concerned to be seen by his own doctor.

36. The CPT recommends that specific legal provisions be adopted regarding the right of persons detained by the police to have access to a doctor. These provisions should stipulate, in particular, that:

- a detained person has the right to be examined, if he so wishes, by a doctor of his choice, in addition to any examination by a doctor summoned by the police;
- all medical examinations are to be conducted out of the hearing and - unless the doctor concerned requests otherwise - out of the sight of police officers;
- the results of every medical examination, as well as relevant statements made to the doctor by the detainee and the doctor's conclusions, are to be recorded in writing by the doctor and made available to the detainee and his lawyer.

d. information on rights

37. The CPT has already stressed the importance which it attaches to persons detained by the police being immediately informed of all their rights - including those referred to in paragraphs 28 to 36 - in a language which they understand.

To ensure that persons in police custody are duly informed of their rights, **the CPT recommends that a form setting out those rights be given systematically to such persons at the outset of their custody. The form should be available in different languages. The person concerned should also certify that he has been informed of his rights** (see also paragraph 43).

e. conduct of interrogations

38. Police interrogations are the subject of certain provisions of the CPA. Section 33.2 lays down the manner in which interrogations should be conducted (the questions put to the person interviewed must be clear and unambiguous; false information should not be given; any illegal pressure, in word or deed, is forbidden; promises of reduction in sentence should not be made; etc). Further, section 66.2 states that a person may not be questioned for more than six hours at a time, and that during intervals, he should be offered adequate rest and sleep. Moreover, the times at which an interrogation starts and finishes are to be recorded. In addition, any investigatory or prosecution official who obtains confessions in an illegal manner is punishable under section 131 of the Icelandic Criminal Code.

In this context, **the CPT would like to know whether a detained person could be interrogated for six hours without any break whatsoever, and to be informed of the minimum length of intervals between interrogation periods.**

39. The CPT considers that the provisions of the CPA could usefully be supplemented by a code of conduct for interrogations, setting out in detail the procedure to be followed on a certain number of points. The existence of such a code would, inter alia, help to underpin the lessons taught during police training.

The code should cover inter alia the following points: the systematic informing of the detainee of the identity (name and/or number) of those present at the interrogation; rest periods between interrogations and breaks during an interrogation; the places in which interrogations may take place; whether a detainee may be required to remain standing during questioning; the questioning of persons who are under the influence of drugs, alcohol, medicine or who are in a state of shock. The code should also provide for a systematic record to be kept of the persons present during each interrogation and of any request made by the detainee during the interrogation.

The position of particularly 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 be drawn up for the Icelandic police.

40. The CPT considers that the electronic recording of police interrogations represents another important safeguard for detainees, as well as offering advantages for the police. The delegation was informed that it was not normal practice in Iceland for interrogations to be electronically recorded, but that in special circumstances (for example, the questioning of a young person) a police officer could make such a recording. This was authorised under section 72.1 of the CPA.

The CPT recommends that the Icelandic authorities explore the possibility of making the electronic recording of police interrogations a standard practice. The system to be introduced should offer all appropriate guarantees (for example, the use of two tapes, one of which would be sealed in the presence of the detainee and the other used as a working copy).

41. Further, section 72.2 of the CPA stipulates that, as far as possible, an "articulate and reliable witness" should be present at police interrogations.

The CPT would like to receive information on how this system operates in practice and, more particularly, clarification of the criteria for the choice of such witnesses and of the precise role of a witness during the interrogation process.

42. Finally, the delegation noted that, for interrogation purposes, police officers in Iceland had free access to persons on remand held in prison and that they could even take such prisoners back into their custody for questioning, without the involvement of a judge or public prosecutor.

Notwithstanding its observation in paragraph 15 regarding the risk of ill-treatment occurring, the CPT remains concerned about the granting to police officers of such a facility, which could easily lend itself to abuse.

The CPT recommends that the return to police custody of a remand prisoner held in prison should be subject to the authorisation of a judge or public prosecutor.

f. custody registers

43. The delegation noted that certain aspects of the detention of persons in police establishments were recorded on computer and others in registers.

The CPT considers that the fundamental safeguards granted to persons in police custody would be reinforced if a single and comprehensive custody record were kept for each person detained, on which would be recorded all aspects of his custody and the action taken regarding them (when arrested and the reasons for that measure; when notified of rights; signs of injury, mental illness, etc; contacts with and/or visits by next of kin, lawyer, doctor or consular official; when offered food; when interrogated; when released or brought before the public prosecutor/judge etc). For certain matters (for example, personal effects taken from the detainee, the fact of being told of one's rights and of invoking or waiving them), the detainee's signature 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 Icelandic authorities examine the possibility of establishing such an individualised custody record.

g. complaints procedures

44. According to information received by the delegation, responsibility for examining complaints of ill-treatment by police officers is vested in the Criminal Investigation Department, which submits a report to the State Public Prosecutor (in cases where the Criminal Investigation Department is itself involved, the inquiry is carried out by the Public Prosecutor's office, acting in conjunction with the Ministry of Justice).

The delegation was informed that the system for examining complaints was currently under review and that, in particular, it was envisaged to involve persons from outside the police service. Indeed, it seems that there has been criticism of the fact that the police are required to conduct inquiries into their own shortcomings. Moreover, members of the Criminal Investigation Department whom the delegation met indicated that they did not appreciate the role which they had been given in such cases.

The CPT considers that the existence of an independent mechanism for examining complaints about treatment received during police custody represents an important safeguard. **The CPT would like to receive more detailed information on this subject from the Icelandic authorities.**

45. Any individual who has suffered ill-treatment during police custody may also contact the Ombudsman, an institution established in 1988.

The CPT would like to receive information on the types of action which the Ombudsman can take in such cases and on his activities in this area to date.

B. Prisons

1. General information

46. The CPT delegation visited four prisons in Iceland: the Litla-Hraun State Prison in Eyrarbakki, the Kópavogur State Prison and the Siðumúli and Skólavörðustigur State Prisons in Reykjavik.

47. The Litla-Hraun State Prison in Eyrarbakki is the largest prison in the country and has been operational since 1929. It has a total capacity of 52 and was operating at full capacity at the time of the visit. All of the inmates were sentenced prisoners, and three were of foreign origin.

The establishment comprises three buildings:

- the oldest building (wing 1) contains 21 single cells on two floors; this building also includes the refectory, canteen, medical rooms, an interview room, sanitary facilities and a small recreation area;
- the annexe building (wing 2), opened in 1972, contains 21 single cells on two floors, together with common rooms, including a library and a recreation area;
- the most recent building (wing 3), opened in 1980, comprises two distinct sections, which can accommodate respectively 4 and 6 prisoners in single cells, as well as a security cell.

48. The Kópavogur State Prison, also equipped with single cells, was opened in 1989. The prison has a total capacity of 12. It was originally intended to house convicted female offenders but has had a mixed population since it was opened. At the time of the visit, the prison was at full capacity, with five female and seven male inmates.

The building has three floors, two for prisoner accommodation and the other containing the medical facilities, an interview room, a laundry and other common rooms.

49. The Siðumúli State Prison in Reykjavik, opened in 1972, has a total capacity of 13. It mainly accommodates persons detained on remand. However, prisoners from other establishments may be transferred there to be placed in solitary confinement (particularly for disciplinary reasons). The State Criminal Investigation Department also uses this establishment to accommodate persons which it keeps in custody overnight (see paragraph 22). At the time of the delegation's visit, there were four prisoners.

The single-storey building comprises individual cells, a security cell, two interview rooms and a medical room. In 1992, the building was divided into two sections, one for prisoners in solitary confinement and the other, termed "semi-open", for the remaining prisoners.

50. The Skólavörðustigur State Prison in Reykjavik was opened in 1874. It has a total capacity of 19. At the time of the delegation's visit, there were 17 prisoners, all of them convicted offenders.

The premises - which are listed as a historical building - contain 14 cells, five of which accommodate two prisoners. There is a medical room, but no common room for the use of prisoners.

51. A policy of one prisoner per cell is applied in all the establishments², in accordance with Icelandic law (see section 16 of the Prisons and Imprisonment Act (PIA)). At the time of the delegation's visit, the establishments were nearly all operating at their official capacity levels, but were not overcrowded.

It should be noted that in order to avoid overcrowding, the Icelandic authorities apply a so-called "queuing" system. On average, about a hundred individuals who have been sentenced by the courts to terms of imprisonment remain at liberty, pending a summons from the Prison Service to serve their sentence.

52. The Icelandic authorities informed the delegation quite openly at the start of its visit that there was a serious need to improve various aspects of prison accommodation, the ability of the prisons to carry out their functions and the living conditions of prisoners.

Following a report submitted to the Minister for Justice on 20 June 1991 by the Director of Prisons, the Minister announced, in a letter dated 18 July 1991, the establishment of a committee to carry out an in-depth examination of prisons and prison policy and submit proposals for future policy. Having completed its work, the committee submitted a detailed report to the Minister in March 1992. The report's main findings were passed on to the delegation during its visit.

In a press release dated 5 May 1992, following the report's submission to the Minister for Justice, the latter stated:

"It is clear that a reform of the shameful state of prison accommodation cannot be postponed any longer. The Reykjavik [Old] Prison, the Siðumúli Prison and the oldest part of the Litla-Hraun Prison cannot be used in future to house prisoners, and in fact have been unusable for a long time.

The Minister intends to draw up a four year programme of action regarding the prisons, which will achieve a satisfactory state of affairs in prison accommodation. This decision extends to the definition by the Ministry of the priority position for this programme within its expenditure framework under the Budget."

² With the exception of the five double cells in Skólavörðustigur Prison referred to above.

53. In the light of the delegation's on-the-spot observations, the CPT can only share the views expressed by the Minister for Justice. The material conditions of detention in certain cells in the Litla-Hraun and Skólavörðustigur prisons led the delegation to make certain immediate observations, in accordance with Article 8, paragraph 5, of the Convention (see paragraphs 70 and 88).

Aside from these specific matters, **The CPT recommends that the Icelandic authorities give the highest priority to implementing the four-year programme of action referred to above.**

In this context, **the CPT would like to receive information on the practical implementation of the programme of action (the dates on which the Skólavörðustigur and Siðumúli prisons and the old wing of Litla-Hraun prison will be taken out of service; a description of the new establishments to be built or already under construction, including prison regimes envisaged, etc).**

2. Torture and other forms of physical ill-treatment

54. The CPT delegation heard no allegations of torture or physical ill-treatment of prisoners by prison staff in Iceland. Moreover, no other evidence of such behaviour was found during its visit.

The delegation noted that relations between staff and prisoners were on the whole relaxed, although at the Litla-Hraun Prison they were somewhat distant.

Despite this positive finding, **the CPT would like to receive information on:**

- **the number of complaints of ill-treatment lodged against prison staff in 1991, 1992 and 1993;**
- **the number of cases over the same period in which disciplinary/criminal proceedings were initiated as a result of complaints of ill-treatment, with an indication of any sanctions imposed.**

55. The CPT's mandate is not limited to ill-treatment of persons deprived of their liberty which is inflicted or authorised by prison staff. Naturally, the Committee pays close attention to such ill-treatment; nevertheless, it is also concerned when it discovers a prison culture which fosters inter-prisoner violence.

In this context, the delegation heard from various sources that relations between prisoners in wings 1 and 2 of Litla-Hraun Prison were often tense, a situation apparently linked to the circulation of drugs in the establishment. The existence of this problem was acknowledged by the Prison Director and confirmed by the delegation's conversations with prisoners in both Litla-Hraun and Skólavörðustigur. Several of these prisoners claimed to have been subjected to various forms of pressure by other prisoners who were engaged in drug trafficking. In addition, there were reported to be numerous thefts from cells and trafficking of various kinds in order to raise money to pay for drugs. The delegation noted in this regard that, in addition to security locks, the majority of cells were equipped with padlocks fitted by the prisoners to protect their belongings in their absence.

The delegation also heard that, from time to time, the situation described above led to inter-prisoner violence, sometimes of a serious nature. Apparently, prison staff were not always aware of these incidents and, when they did discover them, did not always react effectively.

It is also interesting to note that prisoners whom the delegation met in Skólavörðustigur Prison said that they far preferred to remain in that establishment, despite their much less favourable material conditions of detention, because of the climate of tension which existed in Litla-Hraun.

The delegation raised the issue of inter-prisoner relations with the Prison Director, but was not informed of any specific measures planned in that area.

56. 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. 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.

57. In the light of the above remarks, **the CPT recommends that the Icelandic authorities carry out a detailed examination of the problem of inter-prisoner violence in Litla-Hraun Prison and draw up an appropriate plan of action.**

58. Although the delegation did not hear any allegations of physical ill-treatment of prisoners by staff, it did receive complaints about the solitary confinement regime - and more particularly its duration - to which remand prisoners were subjected for investigation purposes.

3. Solitary confinement of remand prisoners for investigation purposes

59. The CPT pays particular attention to prisoners who - for whatever reason (disciplinary sanctions, "dangerousness", disruptive behaviour, the needs of a criminal investigation, at their own request) - are held under conditions akin to solitary confinement.

The principle of proportionality calls for a balance to be struck between the requirements of the situation and the imposition of a solitary confinement-type regime, which 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 last for as short a time as possible.

60. Until mid-1992, persons remanded in custody in Iceland were systematically placed in solitary confinement. The regime could be applied for extended periods - often several months and in rare cases more than a year³.

61. With the entry into force of the new Criminal Procedure Act and the Regulations on Detention on Remand (hereafter "RDR"), placement in solitary confinement is no longer automatic. Thus, section 108.1.b of the CPA stipulates that accused persons shall only be placed in solitary confinement "if the needs of the investigation so require". This provision is further clarified in the Regulations.

Section 15 of the Regulations states that "the party responsible for the investigation" shall decide whether the accused should be placed in solitary confinement for reasons associated with the investigation. According to the information received by the delegation, the decision whether or not to impose solitary confinement was in fact taken by police officers. Those concerned nevertheless have a right of appeal against such a decision to the courts.

The implementation of these new provisions has coincided with the creation of the semi-open section in Siðumúli Prison, to accommodate remand prisoners not subject to solitary confinement (see paragraph 84).

62. The CPT welcomes the changes in the provisions relating to the solitary confinement of remand prisoners in Iceland; according to information received by the delegation at Siðumúli Prison, those changes seem to have resulted in an end to the practice of long periods of solitary confinement such as those recorded in the past. Nevertheless, the CPT wishes to make a number of observations on the subject.

³ This situation has been the subject of criticism and the CPT notes that the report of the committee set up by the Minister for Justice states that "psychiatrists, psychologists and other specialists have stressed that solitary confinement as practised in Siðumúli Prison has a harmful effect on prisoners' mental and physical health, particularly in the case of those detained for long periods".

63. First of all, it could be argued that a decision to place a remand prisoner in solitary confinement for the purposes of the investigation falls more within the domain of judicial authorities than of the police. Admittedly, a remand prisoner placed under such a regime does enjoy a right of appeal to the courts; however, the delegation's conversations with both prisoners and persons in authority showed that the existence of this right of appeal was still not widely known.

The CPT recommends that:

- **any remand prisoner placed in solitary confinement for the purposes of the investigation be informed in writing of the possibility to appeal against that decision;**
- **the reasons for a decision to place in solitary confinement be recorded in writing and that the person concerned be informed of them.**

64. Further, the CPT recognises that, in certain circumstances, it may be necessary to impose restrictions on contacts between a remand prisoner and other persons. However, such restrictions must only be for the purpose of protecting the interests of justice (in particular, to avoid collusion, threats to others or interference with evidence). In this context, **the CPT would like to receive clarification of the precise meaning of the phrase "if the needs of the investigation so require" in section 108.1.b. of the CPA.**

65. Clearly, particular attention should be paid to the mental and physical state of all prisoners placed in solitary confinement, whether for the purposes of the investigation or for other reasons.

In this context, **the CPT recommends that whenever a prisoner in solitary confinement, or a prison officer acting on his behalf, asks for a doctor, the doctor is called forthwith to examine the prisoner. The findings of the examination, including an assessment of the prisoner's physical and mental health, and, if appropriate, an opinion on the likely effects of continuing solitary confinement, should be set out in a written report to be sent to the relevant authorities.**

66. It should be added that, despite the improvements introduced to Siðumúli Prison in 1992, the conditions of detention for prisoners in general, and more particularly for remand prisoners held in solitary confinement, remained poor (see also paragraphs 81 et seq.). In this regard, **the CPT can only reiterate its recommendation in paragraph 53.**

67. Finally, in order to obtain a better picture of the changes which have occurred since the entry into force of the new Criminal Procedure Act, **the CPT would like to receive the following statistics, for the period from 1 July 1992 to the end of 1993:**

- **the number of remand prisoners placed in solitary confinement for the purposes of the investigation, expressed as a percentage of the total number of persons remanded in custody;**
- **the length of each of the placements in solitary confinement for the purposes of the investigation.**

4. Conditions of detention in general

a. Litla-Hraun State Prison

i. *material conditions of detention*

68. The conditions of detention in Litla-Hraun Prison in Eyrarbakki varied considerably according to the prison wing concerned; they were poor in wing 1, acceptable in wing 2 and good - indeed very good - in wing 3.

69. In wing 1, eleven of the twenty-one cells were less than 5 m² in size. Moreover, some of the remaining cells, although a little larger, were not sufficiently wide (under 2 m). As well as being small, certain cells were in a poor state of repair, although others were receiving a superficial renovation at the time of the visit. The cells had the basic minimum equipment (bed, table, frequently a chair, occasionally a cupboard) and the lighting and ventilation were of an acceptable standard. Nevertheless, the cramped space offered prisoners an extremely poor quality of life.

The twenty-one cells in wing 2 were of a satisfactory size (7+ m²) and suitably equipped. The lighting and ventilation were also satisfactory.

The cells in wings 1 and 2 did not include sanitary facilities (lavatory or wash basin), and the delegation received several complaints that some time could elapse before a prisoner's request to be released from his cell to use a toilet was granted. **The CPT wishes to stress the importance of enabling prisoners to have ready access to toilet facilities at all times (including at night).**

In wing 3, the ten cells - divided into two units of, respectively, six and four cells - were of a very good size (approximately 10 m²). The cells were fitted with a lavatory and wash basin, and their standard of equipment was very high.

All cells in the prison were fitted with a call system.

70. At the end of its visit to Iceland, the delegation formulated an immediate observation about the excessively confined conditions in which certain prisoners in wing 1 of Litla-Hraun Prison were accommodated. It recommended that the smallest cells (those under 5 m²) should be either enlarged or taken out of service⁴.

⁴ It should be noted that three cells measuring under 4 m² had already been taken out of service by the Prison Administration in 1990.

71. In their reply to the immediate observation, dated 27 December 1993, the Icelandic authorities confirmed their commitment to withdraw from service the whole of wing 1 of Litla-Hraun Prison in mid-1995 (when the construction of a new wing at Litla-Hraun will be completed). In the meantime, the number of cells measuring less than 5 m² had been reduced from eleven to eight and certain other improvements had been made to wing 1.

72. The CPT welcomes the above-mentioned interim measures and notes the commitment of the Icelandic Government to cease using wing 1 of Litla-Hraun Prison in mid-1995 (cf. also the recommendation and request for information in paragraph 53).

ii. regime

73. Prisoners in Litla-Hraun Prison enjoyed generous out-of-cell time; they were locked in their cells only between 11.40 pm and 8 am. Each section had its own recreation area, whose facilities varied in quality. The conditions in the small recreation room in wing 1 were particularly limited, whereas the recreation facilities in wing 3 were of a very high standard. In this regard, the CPT welcomes the improvements made to the recreation room in wing 1 (cf. letter of 27 December 1993 from the Icelandic authorities).

74. The CPT has noted from the same letter that a separate 12-place unit has been created on the first floor of wing 2, for prisoners who have shown "model conduct" and who have undertaken to stay there. A recreation area has been placed at their disposal and they have access to a card-payment telephone. These prisoners will apparently be separated from the others, apart from work and study activities.

The CPT would like to receive more detailed information on the admission criteria for this unit and would also like to know whether its creation was designed to assist in resolving the tensions between prisoners referred to earlier (see paragraph 55).

The CPT also noted from the letter that wing 3 was reserved for "difficult and/or dangerous" prisoners, whereas at the time of its visit the delegation was informed that this wing - and in particular the six-place unit - accommodated "trusted" prisoners.

The CPT would welcome clarification of the criteria for admission to wing 3 of the prison.

Further, the CPT would like to be informed of the authority which decides on the prisoners to be admitted to the above-mentioned units, of the procedure followed in this regard (hearing of the prisoner, provision of reasons, etc.) and of any rights of appeal which apply in this area.

75. Various types of work were available for prisoners. These included a workshop for making car number plates (4 places); a wrought iron workshop (3 to 4 places); a workshop for manufacturing paving stones and associated activities (15 to 18 places), and a greenhouse (2 places). As a result, 50 to 60% of the prisoners could be offered employment, which usually lasted 3½ hours per day.

According to a number of people whom the delegation met and its own on-the-spot observations, the majority of jobs available to prisoners had little educational or vocational training content. **The CPT recommends that the Icelandic authorities expand and diversify the employment opportunities at Litla-Hraun Prison, with an emphasis on the provision of vocational training.**

76. The Selfoss Comprehensive School organised English, Icelandic and Mathematics courses in the prison. It should be noted that the prisoners concerned (an average of 10 to 15) were paid for regular attendance; as a result, prisoners with no resources were able to take part in the courses.

The prison also had a library, weight training room and an outdoor exercise/sports area.

77. With reference to the planned construction of a new detention facility at Litla-Hraun Prison, **the CPT wishes to stress the importance of ensuring that sufficient provision is made for activities such as work, education and sport, having regard to the establishment's intended capacity.**

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78. Finally, the CPT understands that a significant disturbance occurred at Litla-Hraun Prison last year, some time after the CPT's visit. **It would like to be informed of the causes of this disturbance and of any measures subsequently taken.**

b. Kópavogur State Prison

i. material conditions of detention

79. The material conditions of detention at Kópavogur State Prison were very good. Each prisoner had his/her own room, which was of a satisfactory size (7.5 to 11 m²) and very well equipped. In addition, the lighting and ventilation were adequate.

ii. regime

80. Prisoners at Kópavogur Prison spent a considerable amount of time outside the cell. Unfortunately, the employment opportunities -in the laundry - were very limited: a total of three places for the twelve prisoners of either sex. Courses were not provided in the prison, although prison staff did sometimes organise leisure/hobby activities for the inmates.

The CPT recommends that work, study and other activities available to prisoners in Kópavogur Prison be expanded and diversified.

c. Siðumúli Prison, Reykjavik

81. Conditions of detention at Siðumúli Prison in Reykjavik, a building originally designed as a police vehicle washing centre and storage depot, were not satisfactory.

82. The single cells were rather small (5 to 5.5 m²) and spartanly furnished, with only a bed, table and chair. The lighting was, however, satisfactory⁵. At the time of the visit, the cells were in an acceptable state of cleanliness and repair and all were equipped with a call system linked to the duty room.

It was difficult for the delegation to form an opinion about the ventilation/heating system because of the time of year when the visit was carried out. However, the above-mentioned report of the Committee on Prisons (see paragraph 52) had highlighted the system's shortcomings, including noise and dust, and, during the visit, the Prison Director confirmed that this still continued to be a problem.

83. However, the greatest source of concern was the total absence of activities for the prisoners. There were no employment opportunities, education programmes or sporting activities.

84. As indicated above, the detention area had recently been divided into two sections, one for prisoners undergoing solitary confinement and the other for the remaining prisoners.

For prisoners in solitary confinement, the only available out-of-cell activity was one hour of outdoor exercise. Although the exercise yard was sufficiently large (some 80 m²), it provided an extremely austere environment: there was no equipment whatever - not even a bench - and prisoners had no protection against inclement weather; moreover, the only view available was of the sky, visible through a meshed roof. In-cell activities amounted to reading and listening to music.

The situation of prisoners in the semi-open section was slightly better. They could leave their cells between 8 am and 11.30 pm and move about within their section. They were provided with a living/recreation room, measuring about 12 m², where they could associate. This room was furnished with a table, chairs and a television. Subject to certain conditions, they could use a telephone located in the corridor and receive visits. However, as was the case with the prisoners in the other section, there were no organised activities for them.

To sum up, the inmates of Siðumúli Prison benefitted from no prison regime worthy of the name; they were simply stored in the establishment.

⁵ Two cells located in the centre of the building which had no access to natural light had been withdrawn from service by the Prison Administration.

85. The CPT has noted the intention of the Icelandic authorities' to build a new prison in Reykjavik, which would lead to the closure of Siðumúli Prison. The CPT has already formulated a recommendation, and asked for information, on this subject (see paragraph 53).

In this respect, the CPT wishes to stress that a satisfactory programme of activities (work, education, sport) is of crucial importance for the well-being of prisoners, whether they are serving sentences or on remand. The organisation of regime activities in a remand prison - which has a fairly rapid turnover of inmates - is not a straightforward matter; clearly, there can be no question of individualised treatment programmes of the sort which might be aspired to in a prison for those serving medium/long term sentences. However, prisoners cannot simply be left in a state of idleness for weeks, possibly months. The CPT considers that one should aim at ensuring that prisoners in remand establishments are able to spend a reasonable part of the day (8 hours or more) outside their cells, engaged in purposeful activity of a varied nature.

The CPT recommends that the Icelandic authorities take these considerations into account in planning the prison regime for the new establishment to be built in Reykjavik.

86. In the meantime, **the CPT recommends that the Icelandic authorities attempt to provide additional activities for the inmates of Siðumúli Prison, particularly those detained there for a prolonged period.**

It also recommends that conditions in the outdoor exercise yard be improved, in the light of the remarks made above (see paragraph 84).

d. Skólavörðustigur Prison, Reykjavik

87. The conditions of detention in Skólavörðustigur Prison in Reykjavik also left a great deal to be desired.

The single cells were of an adequate size (approximately 7 m²), but the double cells offered a more cramped living space (about 9 m²). They were all properly furnished (bed, mattress, table, chair, cupboard and call system), but in a somewhat dilapidated condition.

In certain cells, access to natural light was inadequate. This was the case in cells 8 to 10, whose windows resembled portholes, and even more so in cells 13 and 14, where a light well in the ceiling measuring some 30 x 40 cm allowed only a feeble shaft of daylight to filter through.

88. Having regard to the material conditions in cells 8 to 10 and 13 and 14, the CPT's delegation made an immediate observation at the end of its visit. It recommended that significant improvements be made, without delay, to the access to natural light in the above-mentioned cells.

In their reply, transmitted to the CPT on 27 December 1993, the Icelandic authorities stated that the building in which the prison was located was listed, and that they were therefore unable to make any changes to its structure without consulting the Buildings Conservation Commission. When consulted by the Ministry of Justice, the Commission stated that in view of the establishment's planned closure in mid-1995, it did not consider that any substantial modification to the building would be justified. The Ministry of Justice had therefore decided to modify, without enlarging, the windows of cells 8 to 10, in order to increase the amount of natural light. However, the Ministry considered that no modifications to the windows of cells 13 and 14 were possible.

89. The CPT welcomes the measures taken regarding cells 8 to 10. In the case of cells 13 and 14, the CPT takes note of the arguments advanced by the Icelandic authorities. Under the circumstances, **it recommends that consideration be given to withdrawing those two cells from service, as cellular accommodation, without waiting for the prison's scheduled closure in mid-1995.**

90. Prisoners could spend a considerable amount of time outside their cells (from 8 am to 11.30 pm). However, as in Siðumúli Prison, there were no activities for prisoners apart from one hour of outdoor exercise. The prison did not even have any common rooms for prisoners; those who left their cells had only a long, gloomy corridor at their disposal, devoid of any amenities other than a television fixed close to the ceiling.

91. The CPT can only welcome the decision of the Icelandic authorities to close this establishment in mid-1995. Pending this closure, **it recommends that the Icelandic authorities attempt to provide additional activities for inmates at Skólavörðustigur Prison, particularly those detained there for a prolonged period.**

5. Medical services

a. introduction

92. Section 2.5 of the Prisons and Imprisonment Act requires the Prison Administration to ensure the provision of specialist services, particularly health care, in prison. However, the Act makes no reference to the organisation of health care in Icelandic prisons.

In opinion no. 102/1989 (on the costs of dental care for prisoners), the State Public Prosecutor attempted to clarify the role of the Prison Administration with regard to prisoners' health care - as provided for in section 2.5 of the Act - and the cost of these services. He considered that the national health authorities had ultimate responsibility for prisoners' health care and that the latter were entitled to the same treatment as the rest of the Icelandic population.

93. The independence of doctors vis-à-vis the Prison Administration would appear to be guaranteed: they are not officials of that department and the latter does not influence their professional activities or exercise any authority over them. The doctors are remunerated by the national health authorities for their services in the prisons; **however, those authorities appear to exercise no effective supervision over their work.**

94. Health care in prisons is provided through a system of part-time external medical practitioners. At the time of the visit, six doctors were attached to the Icelandic prisons, offering medical services to approximately a hundred sentenced and remand prisoners.

b. staff

95. The medical service in Litla-Hraun Prison was provided by two general practitioners and a nurse. Every week, on an alternating basis, the doctors held two surgeries in the prison, each lasting two hours or more. The nurse visited the establishment once a week, mainly to prepare medicines, and could be contacted during the week and carry out additional visits in cases of need. Further, two psychologists, one from the probation department and the other from the local health centre, each held a weekly consultation in the prison. A psychiatrist visited on request.

96. The prisons in Reykjavik and its surrounding area were covered by a team of two doctors. They held two weekly surgeries in Siðumúli and Skólavörðustigur prisons and one in Kópavogur. Physiotherapy sessions were also available in Skólavörðustigur Prison. However, none of these establishments had the services of a nurse⁶.

⁶ A nurse had been recruited for Skólavörðustigur and Siðumúli prisons, but, several months later, it had apparently not been possible to renew her contract because of financial constraints.

97. Overall, the staffing by doctors appears to be satisfactory. However, the total absence of nursing staff in the three Reykjavik prisons is unacceptable. Moreover, the presence of a nurse for just a few hours once a week in an establishment of the capacity of Litla-Hraun Prison is far from ideal.

The CPT welcomes the information supplied by the Icelandic authorities on 27 December, that a nurse had been recruited for the prisons in Reykjavik and its surrounding area. However, **it considers that the nursing staff presence in Litla-Hraun Prison could usefully be reinforced.**

98. In emergencies, medical assistance could be rapidly obtained from the Reykjavik or Selfoss hospitals. However, **the CPT recommends that someone qualified to provide first aid always be present on prison premises.**

c. medical facilities and confidentiality of medical information

99. As regards medical facilities, there was a medical surgery on the ground floor of wing 1 of Litla-Hraun Prison, comprising two separate rooms, one for the doctor and one for the nurse. The Reykjavik prisons also each had a medical surgery. In principle, these facilities were adequate for prisoners' medical consultations and primary care.

100. However, the delegation was very concerned about the inadequate protection of the confidentiality of medical records in the prisons visited.

It noted that the medical room in Skólavörðustigur Prison was sometimes used for other purposes, particularly police interrogations. Moreover, ordinary prison staff in the different establishments visited invariably held the key to the surgery. Finally, the delegation observed at first hand that the cabinets containing medical records in Litla-Hraun, Siðumúli and Skólavörðustigur prisons were not locked (or that the lock was broken).

101. The CPT considers that respect for the confidentiality of medical information is at the core of the trust which is necessary in doctor-patient relations. The delegation therefore made an immediate observation on this subject at the end of its visit.

In their reply dated 27 December 1993, the Icelandic authorities stated that steps had been taken to ensure that only health care staff had access to prison medical facilities. It had also been impressed upon the staff concerned that cabinets containing medical records should always be locked; further, a new records cabinet had been acquired for Siðumúli Prison. Finally, it was indicated that one of the first tasks of the nurse recently recruited for the Reykjavik prisons would be the organisation of medical records.

The CPT welcomes the above-mentioned steps.

d. examination on admission

102. Section 30 of the Regulations on Detention on Remand make it mandatory for prisoners to be examined by a doctor as soon as possible after their arrival in prison. In addition, if such prisoners appear to be ill or to require medical treatment, the doctor must be summoned at once. From the information gathered by the delegation on the spot, it appears that examinations of newly arrived prisoners are only carried out systematically in Skólavörðustigur Prison.

103. The CPT considers that every newly arrived prisoner, whether convicted or on remand, should be seen on reception by a member of the prison health service, who should be either a doctor or a qualified nurse reporting to a doctor. This is important because, while most prisoners are young men, many will have medical and psychiatric problems to a greater extent than the population at large.

The CPT recommends that the Icelandic authorities take appropriate measures in this respect.

e. medical care

104. From the observations made on the spot, it appeared that the medical care of prisoners in the establishments visited was generally satisfactory. However, this finding is subject to certain qualifications.

105. Firstly, with regard to access to a doctor, the delegation heard several allegations of undue delays when prisoners had asked to see a doctor. In Siðumúli Prison, the delegation was informed by a prison official that there was sometimes an unacceptable delay before a doctor came, after being called. During its visit to Litla-Hraun, it heard that if an inmate requested the attendance of a doctor, a prison officer might decide not to pass on the request immediately. This state of affairs was confirmed by the Prison Director. At Kópavogur, one prisoner alleged that her requests to see a doctor were not complied with promptly (an allegation supported by fellow prisoners).

106. The CPT considers that prisoners should be able to have access to a doctor at any time. The health service should be so organised as to enable requests to consult a doctor to be met without undue delay, and prison staff should not seek to screen such requests. Moreover, prisoners should be able to communicate with the health service confidentially, for example by sealed envelope.

The CPT recommends that the Icelandic authorities take all necessary steps to ensure that the practice in this area is in accordance with the above considerations.

107. Access to specialist care, via the prison doctor, appeared to present no difficulties. When a prisoner's state of health so required, an appointment with a specialist or a transfer to hospital were apparently arranged satisfactorily within a reasonable time.

108. One exception seemed to be access to psychiatric care. The delegation heard allegations, including some from medical sources, that it was not easy to secure the transfer of a prisoner whose mental state required care in a psychiatric hospital (see, however, paragraphs 139 et seq.).

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

109. The delegation heard numerous complaints, particularly in Litla-Hraun Prison, about the method of payment for certain forms of treatment. For example, prisoners alleged that they had to pay for medicines and blood tests prescribed by the doctor, and that only emergency dental treatment (namely extractions) was free. They claimed that the policy on payment for treatment prevented certain destitute prisoners from obtaining the necessary care.

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

110. The CPT considers that a prerequisite for a properly functioning health service is for doctors and other care staff to be able to meet regularly and form a working team, under the leadership of a head doctor. The delegation noted that at Litla-Hraun Prison there did not appear to be any regular co-ordination between the doctors, the nurse, the psychologists and the social workers.

It also goes without saying that, in order to ensure the effective medical follow-up of prisoners, their medical records should be forwarded to successive doctors whenever they are transferred. However, according to the delegation's observations, this did not appear to be the case in Iceland.

111. The CPT welcomes the information supplied by the Icelandic authorities in their letter of 27 December 1993, according to which efforts will be made to secure co-operation between the different health professions providing services to prisoners in the Reykjavik area. **It recommends that comparable steps be taken as regards Litla-Hraun Prison.**

It also recommends that appropriate steps be taken to ensure that when a prisoner is transferred to another establishment, his medical record is also transferred.

f. alcohol and drug addiction

112. The problem of alcohol and drug addiction is one of the major challenges facing the Icelandic Prison Administration. According to information supplied by the Icelandic authorities, approximately 70% of prisoners exhibit alcohol or drug abuse problems on admission to prison.

Weekly visits were made to Litla-Hraun Prison by the probation department psychologist and two social workers from the social services department, inter alia to help the drug addicts. Assistance was also provided by certain outside bodies such as SAA (Alcohol Concern), VERND (the Society for the Assistance of Former Prisoners) and AA (Alcoholics Anonymous). However, the available resources were not sufficient to meet the prisoners' needs in this regard. It was acknowledged, for example, that the average waiting time to see a psychologist was between three and six months, if not more. Moreover, several prisoners stated that they had no hope of undertaking a course of treatment before the end of their prison sentence.

113. It is clear that appropriate medical, psychological and social provision within prisons, if necessary in conjunction with outside therapeutic agencies, must accompany control measures. The objective should be to avoid interrupting any treatment begun before imprisonment of an alcohol or drug addicted prisoner and to assist preparations for the prisoner's release, with a view to guarding against a relapse into addictive behaviour.

The CPT had the impression that the preventive aspects of the anti-addiction programme operated by the Icelandic authorities could be further developed and **therefore recommends that the means devoted to this subject be reinforced.**

g. issues linked to the Human Immuno-deficiency Virus (HIV)

114. Section 24 of the Prisons and Imprisonment Act authorises the taking of urine and blood samples from prisoners. The CPT also notes that section 35 of the RDR requires prisoners to give a blood sample or submit to any other examinations if the doctor considers this necessary for health inspection purposes.

In this context, the delegation heard that newly arrived prisoners had to give a blood sample at their medical examination on admission.

The CPT wishes to know whether HIV tests are carried out on prisoners and, if so, under which conditions (whether the prisoner's consent is sought, whether counselling is provided before and - if necessary - after such a test, etc).

115. More generally, **the CPT would like to receive any instructions or guidelines drawn up by the national authorities regarding the approach to be adopted towards prisoners who are HIV positive or have developed AIDS.**

The CPT also wishes to stress the importance of a continuing programme of information for prisoners and prison staff on communicable diseases (in particular, hepatitis, AIDS, tuberculosis and skin diseases), with particular emphasis on the risks of transmission and means of protection.

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

a. the separation of different categories of prisoners

116. The separation of sentenced and remand prisoners is, for the most part, assured in Iceland. However, the delegation observed that the Icelandic Prison Administration found it difficult to ensure the separation of different categories of sentenced prisoners. This was particularly the case in Litla-Hraun Prison, where offenders serving long and short sentences were intermixed, as were young prisoners and adults. Further, a mixed male-female prison population was noted in Kópavogur (although the men's and women's cells were located in two distinct areas). It must be stressed that a failure to separate adequately different categories of prisoners may be - and in the case of Litla-Hraun and Kópavogur prisons certainly was - a source of resentment and interpersonal tension.

117. The existing situation was, in large part, a consequence of the limited facilities currently available and the small number of prisoners in Iceland as a whole. In this context, the Prison Administration stated that the separation of different categories of prisoners was one of its primary objectives but that this objective was very closely bound up with the implementation of the measures contained in the Ministry of Justice's four-year plan (see paragraph 52).

The CPT would like to receive more detailed information on the measures envisaged to separate different categories of prisoners in Iceland.

118. The delegation also discovered that, exceptionally, a female prisoner could be detained in Skólavörðustigur Prison. Given the conditions of detention - and in particular the layout - of this establishment, it is very difficult to ensure the safety and dignity of such a prisoner. **The CPT therefore recommends that the detention of female prisoners in this establishment be avoided.**

b. contacts with the outside world

119. It is very important for prisoners to be able to maintain good contacts 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 their children. The maintenance of such relationships can be of crucial 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.

In Iceland, both the regulations and practice appear on the whole to offer prisoners reasonable opportunities to maintain such contacts.

120. All prisoners - whether on remand or serving sentences - are entitled to receive visits from members of their family. Other visits are subject to the approval of the Prison Director (see section 17 of the PIA, sections 12 to 24 of Regulation no. 119/1990 on correspondence, the use of the telephone and visits by prisoners serving sentences, hereafter referred to as the RCTV, and sections 41 to 54 of the RDR). Prisoners are allowed at least a one-hour visit per week, mainly at the weekend. Restrictions on outside contacts may be imposed on remand prisoners for the purposes of an investigation, but the prisoners concerned are entitled to appeal against such decisions to the courts.

In the different establishments visited, prisoners usually received visitors in their cells; no visiting areas existed.

121. Both remand and convicted prisoners are entitled to have telephone contacts with the outside (section 19 of the PIA and sections 27-28 of the RCTV), although certain restrictions may be applied to remand prisoners for the purposes of an investigation (section 62 RDR).

In practice, the delegation observed that in Litla-Hraun Prison, prisoners could make three six-minute calls per week and receive three calls per week from the outside; similarly, prisoners in the Siðumúli and Skólavörðustigur State Prisons could make outside calls three times per week between 6 and 8 pm, for periods of ten minutes.

In both cases, staff might monitor conversations; however, the prisoner concerned receives prior notification that the conversation is to be monitored. The monitoring of conversations between sentenced prisoners and their lawyers, or with certain administrative or judicial authorities, the Ombudsman and the European Commission on Human Rights, is expressly prohibited. **The CPT would like to know whether the same applies to remand prisoners' telephone conversations with their lawyers, or with any of the authorities referred to above.**

122. Sentenced prisoners' correspondence may be censored for security purposes, if this is deemed necessary (section 18 of the PIA and sections 1 to 7 of the RCTV). However, prisoners may send confidential correspondence to certain authorities (see above) and to lawyers. **The CPT invites the Icelandic authorities to add the President of the CPT to the list of authorities to which prisoners may send confidential correspondence.**

Remand prisoners' rights with regard to correspondence are governed by sections 55 to 61 of the RDR. In certain circumstances, correspondence may be inspected, but the individual concerned has a right of appeal to the courts. **The CPT would like to know whether remand prisoners' letters to lawyers, or to any of the authorities referred to above, may be inspected, and if so, in what manner.**

c. solitary confinement

123. Section 25 of the PIA provides a number of grounds for non-voluntary solitary confinement, in addition to solitary confinement for the purposes of an investigation (already considered by the CPT in paragraphs 59 to 67) or for disciplinary reasons (see paragraphs 134 to 136). These grounds include national security, the danger that the prisoner poses to himself and the prevention of escape.

Section 25 contains two safeguards: the decision to impose solitary confinement and the reasons for it must be properly recorded and the period of confinement may not exceed thirty days, unless the Minister for Justice gives his authorisation. Moreover, Act no. 31 of 19 March 1991 established a right of appeal to the Minister for Justice. The prisoner concerned must be informed of this right when the decision to place him in solitary confinement is announced and the Minister must reach a decision within 48 hours of an appeal being lodged, failing which the original decision becomes invalid.

124. The CPT welcomes the existence of these safeguards. Nevertheless, **it would like to receive clarification on the following points:**

- **whether prisoners placed in solitary confinement are informed in writing of the reasons for the decision;**
- **whether prisoners have an opportunity to express their point of view to the competent authority before any final decision is taken.**

125. With regard to the mental and physical state of any prisoner placed in solitary confinement, **the CPT refers to its general recommendation in paragraph 65.**

d. security cells

126. Two of the establishments visited - Litla-Hraun and Siðumúli - contained a so-called "security" cell, one of a range of security measures to which the prison management could have resort in certain circumstances.

In the case of remand prisoners, the use of security cells was governed by detailed regulations set out in sections 99 to 104 of the RDR.

The CPT would like to know whether the use of security cells and/or means of physical restraint vis-à-vis sentenced prisoners is the subject of detailed regulations.

127. Under section 99 of the RDR, a remand prisoner may be placed in a security cell if this is strictly necessary to prevent violence, to contain violent resistance, to prevent suicide or to prevent self-mutilation. A number of safeguards are provided for: the involvement of a doctor; a visual check on the prisoner at least once every twenty minutes, and even a permanent presence in certain circumstances; the placement decision to be taken by the Prison Director, or in emergencies by his authorised representative; formal recording of the decision together with the reasons for it; notification to the prisoner of the decision and of his right of appeal to the Ministry of Justice; placement in the cell to last no longer than one week, unless the Prison Administration authorises a longer period.

128. Means of physical restraint may also be applied to remand prisoners in a security cell for a maximum of twenty-four hours, unless the Prison Administration authorises a longer period. **The CPT wishes to stress that the application of means of physical restraint would be one of the circumstances when staff should be permanently present.**

Section 104 of the RDR stipulates that placement in a security cell and/or the use of means of physical restraint must last no longer than necessary. In this context, **the CPT would emphasise that cases where means of physical restraint need to be applied to a prisoner for more than twenty-four hours will be rare, particularly if the observation requirement provided for in section 101 of the RDR is understood to include the role of providing support to the prisoner.**

129. According to section 100 of the RDR, a doctor must be called as soon as possible to examine a prisoner vis-à-vis whom physical means of restraint have been applied. In cases where a prisoner is placed in a security cell but physical means of restraint are not applied, a doctor must be informed of the placement as soon as possible, so that he can assess whether a medical examination is necessary.

In this connection, **the CPT recommends that:**

- **any detainee placed in a security cell (whether means of physical restraint are applied or not) should have the right to be examined and, if necessary, treated by a doctor without delay;**
- **such a medical examination should be performed out of the hearing and, unless the doctor requests otherwise, out of the sight of non-medical personnel;**
- **the results of the medical examination as well as any relevant statements by the detainee and the doctor's conclusions should be duly recorded in writing and made available to the detainee.**

130. As far as the delegation could establish, the use of the security cell and of means of physical restraint in Litla-Hraun Prison was not the subject of detailed regulations. The delegation's discussions with prison staff confirmed that there were no written directives on the use of the cell.

Staff also indicated that the cell was used, among other things, when a prisoner returned late from outside leave or was under the influence of alcohol or drugs. It appeared that the decision to place a prisoner in the security cell was taken by the officer on duty, and was only brought to the attention of the Prison Director - by means of the daily report - the following day. There was apparently no provision for the involvement of a doctor. It is also noteworthy that the nurse working in the prison informed the delegation that she had never seen the security cell in question.

In the light of these observations, **the CPT recommends that the Icelandic authorities take immediate steps to draw up regulations for the use of the security cell and means of physical restraint in Litla-Hraun Prison** (where appropriate, drawing on the procedures and safeguards applying to remand prisoners).

131. The security cell in Litla-Hraun Prison was located in wing 3. It was of an appropriate size and equipped with a bed (with a mattress, pillow and duvet) fixed to the floor and fitted with four metal buckles, to which could be attached leather straps for immobilising a prisoner's wrists and ankles. The lighting and ventilation were satisfactory and there was a call system. The delegation noted, however, that the cell window was broken and represented a potential hazard. This was brought to the attention of the Director, who stated that the window would shortly be repaired. **The CPT would underline the importance of avoiding such material hazards, in particular in a security cell.**

132. The security cell in Siðumúli Prison was somewhat more cramped (a little over 5 m²). It was equipped in a manner similar to the Litla-Hraun cell. However, the cell could be monitored by a video camera. The artificial lighting was satisfactory but the cell had no access to natural light. **The CPT recommends that the Icelandic authorities take steps to remedy this shortcoming.**

133. Neither Litla-Hraun nor Siðumúli Prison maintained a register concerning the use of the security cell and of means of physical restraint.

The CPT recommends that such a register be established, in which should be recorded the times when the relevant measure started and finished and the circumstances of, and reasons for, its use.

e. discipline

134. Section 26 of the PIA lists the disciplinary sanctions which may be imposed in response to infringements of prison laws or regulations. The sanctions range from a simple warning to a maximum of thirty days' solitary confinement.

The Prison Director is responsible for ordering disciplinary sanctions. Before taking a decision, he must hear the prisoner concerned. Any disciplinary decision must be recorded in writing and presented to the prisoner in the presence of a witness.

Section 2 of Act no. 48 of 19 March 1991 established a right of appeal against disciplinary decisions to the Minister for Justice. Those concerned must be informed of this right when the disciplinary decision is announced and the Minister must reach a decision within 48 hours of an appeal being lodged, failing which the original decision becomes invalid.

The disciplinary procedure is thus accompanied by appropriate safeguards.

135. The delegation noted that prisoners placed in solitary confinement could be kept in their cell or sent to the closed section of Siðumúli Prison. The material conditions in that section have already been described in paragraph 82 above.

136. Finally, an examination of disciplinary registers in the establishments visited did not reveal an excessive use of solitary confinement or other disciplinary sanctions.

f. complaints and inspection procedures

137. Effective complaints and inspection procedures are fundamental safeguards against ill-treatment in prisons. Prisoners should have avenues of complaint open to them, both within and outside the prison system, and be entitled to confidential access to an appropriate authority. The CPT attaches particular importance to regular visits to each prison establishment by an independent body (for example, a board of visitors or supervisory judge) empowered to hear (and, if necessary, take action upon) complaints from prisoners and to inspect the premises.

138. The CPT has already noted, in paragraph 122, that prisoners are entitled to send confidential correspondence to certain administrative and judicial authorities (including the Minister for Justice and the Prison Administration), as well as to the Ombudsman. The delegation was informed that - at present - no independent body carried out visits to Icelandic prisons. Nevertheless, the Ombudsman signified to the delegation his intention of undertaking such visits in the future.

The CPT welcomes the Ombudsman's expressed intention to undertake such visits **and would like to receive details of his powers and activities in this regard.**

C. Sogn Institution for Mentally Ill Offenders

1. General information

139. The Institution for Mentally Ill Offenders (Sogn) is a specialist establishment run by the Ministry of Health and serving the whole country. It is located in a rural setting near Selfoss. It was opened on 5 October 1992, following criticisms which had emerged in Iceland about the treatment of mentally ill offenders. These had formerly been detained either in prisons - which were inappropriate for their condition - or in psychiatric hospitals abroad.

The new establishment has an official capacity of 7. At the time of the visit, 7 patients were detained, including one woman. The care and custodial staff to patient ratio is high - more than 3:1.

140. The institution is designed to accommodate those who are considered to be the most dangerous psychiatric patients in Iceland; all have committed serious crimes and have been placed in the institution under the security measures provided for in section 62 of the Criminal Code. Four of them had been transferred from a specialist establishment in Sweden, two had been in prison in Iceland and one came from an ordinary psychiatric hospital.

141. The delegation was informed that there was no specific legislation governing the Sogn Institution for Mentally Ill Offenders.

More generally, many of the persons whom the delegation met - including psychiatrists - stated that Iceland lacked a satisfactory legal framework as regards the deprivation of liberty on grounds of mental health.

The CPT would like to receive the comments of the Icelandic authorities on this subject.

2. Material conditions

142. The institution comprises two buildings: the main building, which houses the patients, and an annexe, which can accommodate members of staff coming off duty if they need to spend the night there, particularly when weather conditions so dictate.

143. The main building is on three levels. The basement contains a games room, a smoking room and a solitary confinement cell. The ground floor comprises a refectory/day room, a kitchen, offices for the psychologist and the head nurse, a staff rest room and an outside exercise area (approximately 110 m², equipped with a basketball net). Finally, the first floor contains seven bedrooms for the patients, in two separate sections, a common room and a staff duty room. The entire building was in an excellent state of cleanliness and repair.

Patients all had their own room, for which they held the key (a security lock could be used by the staff, if necessary). The bedrooms were of a satisfactory size (12+ m²) and very comfortably furnished. Each section contained fully equipped sanitary facilities.

144. To summarise, the living conditions of patients were excellent.

3. Staff

145. The Icelandic authorities did not conceal from the delegation the initial difficulties they had experienced in recruiting qualified staff for the establishment. A range of factors were involved: reservations among Icelandic psychiatrists about the establishment's creation; a shortage of forensic psychiatrists and psychiatric nurses; the presumed difficult and dangerous nature of the patients; the establishment's relative isolation; etc. However, the delegation noted during its visit that the planned staffing level had been almost attained.

146. Since the institution opened, psychiatric support had been the responsibility of two part-time psychiatrists: the first, employed at a psychiatric hospital in Akureyri, visited Sogn every two months, while the second held weekly consultations. The procedure for the recruitment of a full-time psychiatrist was underway at the time of the visit.

The CPT would like to know whether the post of full-time psychiatrist has been filled.

147. Four nurses, recruited from Selfoss Hospital, were responsible for the day-to-day medical and psychiatric care of patients on a rotating basis. In practice, the head nurse acted as the Director of the Institution. None of them had psychiatric nursing qualifications but they had received training in secure psychiatric units abroad.

It should be noted that no nurse was present in the establishment at night or at weekends (although a nurse could be contacted). One of the consequences of this was that patients' medication was administered during these periods by unqualified custodial staff. Both the external consultant psychiatrist and the head nurse expressed concern about this situation.

The CPT considers that a specialist psychiatric establishment as important as Sogn should have sufficient nursing staff to ensure round-the-clock coverage. **The CPT recommends that steps be taken immediately to ensure permanent nursing cover in the establishment, including at night and over weekends.**

148. A part-time psychologist attached to the local health centre was also allocated to the institution (and to Litla-Hraun Prison, see paragraph 95). He visited Sogn once a week. In addition, two part-time and untrained staff organised activity sessions four afternoons per week.

149. Security and control of patients were the responsibility of 19 custodial staff - including three women - mainly recruited from the prison service or the police. They had received special training.

150. Members of the medical and care staff informed the delegation that a part-time social worker could make a very useful contribution to the establishment, particularly by helping to arrange outside contacts for patients who were no longer supported by their families.

The CPT considers that this idea merits close attention from the Icelandic authorities.

4. Treatment of patients

151. During the day, patients were looked after by a nurse and six custodial staff; at nights and weekends, only three custodial staff were on duty (see paragraph 147). The different teams devoted thirty minutes, three times per day, to exchanging information necessary for the smooth running of the establishment and the monitoring of patients.

A daily programme was organised for patients, with their active participation. It included various activities: activity workshops (ceramics and woolcraft), recreation and games activities, and ordinary domestic activities.

152. A number of the patients took part in accompanied outings and a return to normal society was envisaged for some of them in the medium term, which might involve moving into sheltered flats.

Certain other measures had been introduced to prevent the patients becoming isolated from the outside world. For example, they could receive visits once a week, receive and send letters and twice a day make two outside telephone calls lasting ten minutes, at the expense of the State (staff could monitor the calls, provided the patient received prior notification).

153. The delegation's psychiatric expert examined the medical records of certain of the patients. The records, which were very well maintained, indicated that the patients benefited from regular pharmacological treatment, counselling and activity programmes. The delegation was satisfied that the patients received individualised treatment appropriate to their condition.

154. Various effective steps were taken within the institution to ensure the confidentiality of medical information, to which only health care staff could have access.

Non-medical personnel were provided with any information which was essential for carrying out their custodial and support tasks. Their status as civil servants required them to observe the rules in force within the public service and they had also signed a special document concerned with professional confidentiality.

An ingenious system for allocating the keys in the institution made it possible to ensure that only medical staff had access to medical rooms and files.

155. The delegation was informed that, at the time the institution was created, difficulties had arisen regarding the necessity - in the patients' own interests - of collating all the medical information necessary to produce individual diagnoses for each patient and draw up appropriate treatment programmes. Because of reservations among Icelandic psychiatrists, the Sogn institution had only received summarised information. Even securing the patients' consent to the transfer of their records had not always had the desired effect, with some records arriving incomplete (there were similar problems in Iceland with regard to the transfer of prisoners' records, see paragraph 110).

The CPT refers in this context to its recommendation in paragraph 111.

5. Solitary confinement

156. The CPT considers that a violent psychiatric patient should be treated through close supervision and nursing support, combined, if considered appropriate, with sedatives. The use of means of physical restraint shall only rarely be justified and must always be either expressly ordered by a medical doctor or immediately brought to the attention of such a doctor for approval.

157. During its visit, the delegation found that the solitary confinement cell in the basement had been converted into a music room. The delegation was also told that the cell was never used for solitary confinement, and that the institution's management had no intention of using it for this purpose.

The delegation was informed that in emergency cases involving violent behaviour, the patient concerned would, in case of need, be confined to his room and be kept under permanent supervision by staff. If necessary, tranquillisers might be administered. The use of means of physical restraint was formally prohibited. These different measures were spelt out in sections 15 to 21 of the institution's rules. Staff added that in such cases the doctor would immediately be contacted and, if appropriate, his permission sought for the administration of tranquillisers.

The CPT welcomes the institution's approach to violent psychiatric patients.

6. Patients' rights and complaints procedures

158. When they arrive in the institution, patients are informed of its internal regulations, which set out their basic rights and duties. The delegation also noted from its conversations with patients that they were aware of the avenues of complaint open to them (particularly their right to appeal once a year against the decision to place them in the institution, provided for in section 62 of the Criminal Code).

159. Nevertheless, as far as the delegation could establish, there were no written instructions regarding complaints procedures. The head nurse did, however, inform the delegation that complaints could be submitted to the head of the Icelandic Health Service, the consultant psychiatrist or to herself.

The CPT recommends that the Icelandic authorities establish formal internal machinery for receiving complaints from patients, and ensure that patients have confidential access to an appropriate authority.

The CPT would also like to know whether the Ombudsman's terms of reference also cover mentally ill offenders detained in Sogn.

III. RECAPITULATION AND CONCLUSIONS

A. Police establishments

160. The CPT delegation heard no allegations of torture of persons detained by the police in Iceland. Moreover, no other evidence of torture was found by the delegation.

In addition, none of the detained persons interviewed by the delegation made any allegations of physical ill-treatment by the police. However, the authorities consulted - including a Chief of Police - and other persons whom the delegation met, stated that from time to time allegations of ill-treatment were made. They principally concerned blows inflicted at the time of arrest and/or during the transfer of the arrested person from the place of arrest to a police station.

It should be added that a number of detainees whom the delegation met referred to threats to place or maintain them in solitary confinement made by police officers during interrogation, as a means of exerting pressure.

161. The CPT has concluded that persons deprived of their liberty by the Icelandic police run little risk of ill-treatment; however, the Committee has stressed the importance of senior police officers delivering the clear message to their subordinates that ill-treatment of persons in custody, whether of a physical or psychological nature, is unacceptable and will be subject to appropriate sanctions.

162. The material conditions of detention in the Icelandic police establishments visited by the delegation were generally acceptable.

The CPT has recommended that conditions of detention at Keflavík Air Base Police Station be reviewed; the cells currently in use are too small to serve as accommodation for persons detained in custody overnight. Other improvements on specific matters have been proposed as regards Reykjavik Police Headquarters and Keflavík Police Station.

More generally, the Committee has indicated that whenever possible, persons placed on remand should be transferred immediately to prison.

163. The CPT has considered the safeguards against ill-treatment offered to persons detained by the police and made a certain number of recommendations: the possibility to delay the exercise of the right to notify one's custody to a relative or other third party to be more closely circumscribed and made subject to appropriate safeguards; specific legal provisions to be adopted regarding a detainee's right of access to a doctor (including a doctor of his own choice); a code of conduct for interrogations to be drawn up and the possibility of making the electronic recording of interrogations a standard practice to be explored.

164. The CPT is concerned by the fact that police officers have free access to persons on remand held in prison and, more particularly, can take such prisoners back into their custody for the purposes of further questioning. In the Committee's opinion, the present situation could lend itself to abuse; it has recommended that the return to police custody of a remand prisoner held in prison should be subject to the authorisation of a judge or public prosecutor.

B. Prisons

165. The CPT delegation heard no allegations of torture or other forms of physical ill-treatment of prisoners in the prisons visited or in other penal establishments in Iceland; moreover, no other evidence of such behaviour was found during its visit. Further, the delegation noted that relations between staff and prisoners were on the whole relaxed.

166. Naturally, the CPT pays close attention to possible ill-treatment by staff; but it is also concerned when it discovers a prison culture which fosters inter-prisoner violence.

In this connection, the delegation heard from various sources that relations between prisoners in wings 1 and 2 of Litla-Hraun Prison were often tense, a situation apparently linked to the circulation of drugs in the establishment. It appeared that this situation could, from time to time, lead to inter-prisoner violence, sometimes of a serious nature.

The Committee has made some general remarks on this subject and recommended that the Icelandic authorities make a detailed examination of the problem of inter-prisoner violence in Litla-Hraun Prison and draw up an appropriate plan of action.

167. The CPT's delegation paid particular attention to the question of solitary confinement of remand prisoners for investigation purposes, a matter about which it received a number of complaints. Indeed, until mid-1992, persons remanded in custody in Iceland were systematically placed in solitary confinement, and this regime could be applied to them for extended periods - often several months and in rare cases more than a year. With the coming into force of the new Criminal Procedure Act, placement in solitary confinement is no longer automatic, and prisoners not placed in solitary confinement are held in a newly created "semi-open" section in Siðumúli Prison. The CPT welcomes the changes that have been made in this area in Iceland, which seem to have put an end to long periods of solitary confinement for investigation purposes.

168. A person placed in solitary confinement for investigation purposes may appeal against that decision to the courts. However, the existence of that right does not as yet appear to be widely known. In this context, the CPT has recommended that the reasons for a decision to place in solitary confinement should be recorded in writing, and that the remand prisoner concerned should be notified of them and of his right of appeal. It has also been recommended that the physical and mental state of such a prisoner should be the subject of particular attention.

169. Conditions of detention at the Siðumúli and Skólavörðustigur Prisons and in certain parts of the Litla-Hraun Prison were poor, a fact openly admitted by the Icelandic authorities. In this context, the CPT has recommended that the highest priority be given to implementing the four-year plan drawn up by the Ministry of Justice designed to bring conditions of detention in certain Icelandic prisons to a satisfactory level.

170. As regards more particularly material conditions of detention, the CPT delegation's on-the-spot findings led it to make immediate observations at the end of its visit concerning certain cells in Litla-Hraun and Skólavörðustigur Prisons.

The CPT welcomes the interim measures taken by the Icelandic authorities in response to those observations. However, the Committee has recommended that consideration be given to withdrawing from service, as cellular accommodation, two particular cells at Skólavörðustigur Prison, without waiting for the establishment's scheduled closure in mid-1995.

It should be added that material conditions of detention in Kópavogur Prison and in wing 3 of Litla-Hraun Prison were very good, and were of an acceptable level in wing 2 of Litla-Hraun Prison.

171. Prisoners in the different establishments visited were offered generous out-of-cell time (with the exception, of course, of the closed section at Siðumúli Prison); however, the regime activities were not adequate. The CPT has recommended that employment opportunities at Litla-Hraun Prison be expanded and diversified, with an emphasis on the provision of vocational training, and that activities in general for prisoners at Kópavogur be improved.

At Siðumúli and Skólavörðustigur Prisons, there was no prison regime worthy of the name; the establishments acted simply as "warehouses" for human beings. Pending the closure of these establishments - apparently programmed for 1995 - the CPT has recommended that steps be taken to organise additional activities for inmates, particularly those detained in the establishments for prolonged periods. The CPT has also recommended that when planning the prison regime for the new establishment to be built in Reykjavik, the aim should be to ensure that prisoners are able to spend a reasonable part of the day (8 hours or more) outside their cells, engaged in purposeful activity of a varied nature.

172. As regards medical services, the staffing by doctors and health service facilities in the establishments visited were generally satisfactory. However, the Committee has indicated that the nursing staff presence at Litla-Hraun Prison could usefully be reinforced and has also recommended that someone qualified to provide first aid should always be present on prison premises.

The delegation was very concerned about the inadequate protection of the confidentiality of medical records in the prisons visited; this was the subject of an immediate observation. The CPT welcomes the measures introduced by the Icelandic authorities in response.

173. The CPT has made several other recommendations and comments in the area of medical services: examination on admission; access to a doctor any time; transfer of prisoners to psychiatric hospitals; coordination of the activities of medical staff; transfer of medical records; alcohol and drug anti-addiction programmes; etc.

One issue of particular concern relates to payment for treatment. The delegation heard allegations that prisoners had to pay for medicines and blood tests prescribed by a doctor and that only emergency dental treatment (i.e. extractions) was free. It was claimed that as a result, certain destitute prisoners were not able to obtain necessary medical care. The CPT has sought the comments of the Icelandic authorities on this matter.

174. The CPT has made recommendations, comments and requests for information on a number of other issues relating to its mandate (the separation of different categories of prisoners, contacts with the outside world, solitary confinement, discipline, complaints and inspection procedures). The Committee attaches particular importance to its recommendations that regulations be drawn up for the use of the security cell and means of physical restraint in Litla-Hraun Prison and that the detention of female prisoners in Skólavörðustigur Prison be avoided.

C. Sogn Institution for Mentally Ill Offenders

175. The CPT welcomes the creation of the Sogn Institution for Mentally Ill Offenders, putting an end to criticisms which had emerged in Iceland about the treatment of such patients. Both the living conditions of patients and the standard of treatment provided were of a high order.

The Committee has nevertheless recommended the introduction of permanent nursing cover in the establishment, including at night and over weekends, the establishment of a formal internal mechanism for receiving complaints and the provision to patients of confidential access to an appropriate authority. The Committee also noted that, as in the case of prisons, there are problems associated with the transfer of medical records to the institution. It has recommended that appropriate steps be taken to remedy this situation.

176. The professional qualities, dedication and enthusiasm of the staff of this recently created establishment deserve to be highlighted.

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177. In conclusion, the CPT wishes to stress once again the general spirit of co-operation, at both the national and local levels, shown before, during and after the delegation's visit to Iceland.

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

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

179. As regards more particularly the CPT's recommendations, having regard to Article 10 of the Convention, the CPT requests the Icelandic 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 (NB: 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 Icelandic 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'S RECOMMENDATIONS, COMMENTS
AND REQUESTS FOR INFORMATION**

A. Police establishments

1. General information

requests for information

- the conclusions of the Committee set up within the Ministry of Justice to review the organisation of the Icelandic police force (paragraph 9);
- the legal provisions which would apply to psychological forms of ill-treatment by the police (paragraph 12);
- whether the Icelandic authorities envisage including an express prohibition of torture in Icelandic law (paragraph 12).

2. Torture and other forms of ill-treatment

comments

- it is most important for senior police officers to make it quite plain to their subordinates that ill-treatment of persons in custody, whether of a physical or a psychological nature, is unacceptable and will be subject to appropriate sanctions (paragraph 16).

requests for information

- in respect of 1991, 1992 and 1993:
 - . the number of complaints of ill-treatment lodged against police officers and the number of criminal/disciplinary proceedings which were instituted as a result of such complaints;
 - . an account of the criminal/disciplinary sanctions imposed during that period following complaints of ill-treatment(paragraph 15).

3. Conditions of detention in police establishments

recommendations

- any remand prisoner detained in Keflavík Police Station to be accommodated, as far as possible, in the largest of the station's cells and the possibility of offering such persons proper outdoor exercise every day to be examined (paragraph 25);
- the use of the cells at Keflavík Air Base Police Station to be reviewed in the light of the Committee's remarks in paragraph 27. Should the authorities wish to continue using the cells to accommodate detainees held overnight, they should be enlarged (paragraph 27).

comments

- it would be desirable for improvements to be made as regards access to natural light in the cells in Reykjavik Police Headquarters (paragraph 19);
- the cells in the State Criminal Investigation Department are not appropriate for detention lasting more than a few hours and should not be used for holding persons overnight (paragraph 22);
- it would be far preferable for persons placed on remand to be transferred immediately to a prison (paragraph 25).

4. Safeguards against the ill-treatment of detained persons

recommendations

- the possibility to delay the exercise of a detained person's right to inform a close relative of his detention to be more clearly circumscribed and made subject to appropriate safeguards (for example, any such delay to be recorded in writing together with the reasons therefor and to require the approval of a public prosecutor or senior police officer) (paragraph 31);
- police officers to be informed that they should not seek to dissuade arrested persons from contacting a lawyer (paragraph 34);
- specific legal provisions to be adopted regarding the right of persons detained by the police to have access to a doctor. These provisions to stipulate, in particular, that:
 - . a detained person has the right to be examined, if he so wishes, by a doctor of his choice, in addition to any examination by a doctor summoned by the police;

- . all medical examinations are to be undertaken out of the hearing and, preferably, out of the sight of police officers;
- . the results of every medical examination, as well as relevant statements made to the doctor by the detainee and the doctor's conclusions, are to be recorded in writing by the doctor and made available to the detainee and his lawyer (paragraph 36);
- a form setting out their rights to be given systematically to persons detained by the police at the outset of their custody. The form should be available in different languages. The person concerned should also certify that he has been informed of his rights (paragraph 37);
- a code of conduct for interrogations to be drawn up for the Icelandic police (paragraph 39);
- the possibility of making the electronic recording of police interrogations a standard practice to be explored. The system to be introduced to offer all appropriate guarantees (for example, the use of two tapes, one of which would be sealed in the presence of the detainee and the other used as a working copy) (paragraph 40);
- the return to police custody of a remand prisoner held in prison to be subject to the authorisation of a judge or public prosecutor (paragraph 42);
- the possibility of establishing an individualised custody record to be examined (paragraph 43).

requests for information

- more detailed information on the right of police officers to object to a detained person's choice of a particular lawyer, and on the operation in practice of the system of officially appointed lawyers (paragraph 33);
- information on whether a detained person could be interrogated for six hours without any break whatsoever, and on the minimum length of intervals between interrogation periods (paragraph 38);
- the operation, in practice, of the system providing for the presence of an "articulate and reliable witness" during police interrogation and, more particularly, clarification of the criteria for the choice of such witnesses and of the precise role of a witness during the interrogation process (paragraph 41);
- information on the subject of the examination of complaints about treatment received during police custody (paragraph 44);
- the types of action which the Ombudsman can take when contacted by persons who allege that they have suffered ill-treatment during police custody, and information on his activities in this area to date (paragraph 45).

B. Prisons

1. General information

recommendations

- the highest priority to be given to implementing the four-year programme of action for prisons (paragraph 53).

requests for information

- information on the practical implementation of the four-year programme of action for prisons (the dates on which the Skólavörðustígur and Siðumúli prisons and the old wing of Litla-Hraun prison will be taken out of service; a description of the new establishments to be built or already under construction, including prison regimes envisaged, etc.) (paragraph 53).

2. Torture and other forms of physical ill-treatment

recommendations

- a detailed examination of the problem of inter-prisoner violence in Litla-Hraun Prison to be carried out and an appropriate plan of action to be drawn up (paragraph 57).

requests for information

- in respect of 1991, 1992 and 1993:
 - . the number of complaints of ill-treatment lodged against prison staff;
 - . the number of cases in which disciplinary/criminal proceedings were initiated as a result of complaints of ill-treatment, with an indication of any sanctions imposed(paragraph 54).

3. Solitary confinement of remand prisoners for investigation purposes

recommendations

- any remand prisoner placed in solitary confinement for the purposes of the investigation to be informed in writing of the existence of a right of appeal against that decision (paragraph 63);
- the reasons for a decision to place a prisoner in solitary confinement for the purposes of the investigation to be recorded in writing and the person concerned to be informed of them (paragraph 63);
- whenever a prisoner in solitary confinement, or a prison officer acting on his behalf, asks for a doctor, the doctor to be called forthwith to examine the prisoner. The findings of the examination, including an assessment of the prisoner's physical and mental health, and, if appropriate, an opinion on the likely effects of continuing solitary confinement, should be set out in a written report to be sent to the relevant authorities (paragraph 65).

requests for information

- clarification of the precise meaning of the phrase "if the needs of the investigation so require" in section 108.1.b of the Criminal Procedure Act (paragraph 64);
- for the period from 1 July 1992 to the end of 1993:
 - . the number of remand prisoners placed in solitary confinement for the purposes of the investigation, expressed as a percentage of the total number of persons remanded in custody;
 - . the length of each of the placements in solitary confinement for the purposes of the investigation(paragraph 67).

4. Conditions of detention in general

recommendations

- employment opportunities at Litla-Hraun Prison to be expanded and diversified, with an emphasis on the provision of vocational training (paragraph 75);
- work, study and other activities available to prisoners in Kópavogur Prison to be expanded and diversified (paragraph 80);

- the considerations set out in paragraph 85 to be taken into account in planning the prison regime for the new establishment to be built in Reykjavik (paragraph 85);
- the Icelandic authorities to attempt to provide additional activities for the inmates of Siðumúli Prison, particularly those detained there for a prolonged period (paragraph 86);
- conditions in the outdoor exercise yard at Siðumúli Prison to be improved, in the light of the remarks set out in paragraph 84 (paragraph 86);
- consideration to be given to withdrawing from service, as cellular accommodation, cells 13 and 14 at Skólavörðustígur Prison without waiting for the prison's scheduled closure in mid-1995 (paragraph 89);
- the Icelandic authorities to attempt to provide additional activities for inmates at Skólavörðustígur Prison, particularly those detained there for a prolonged period (paragraph 91).

comments

- it is important to enable prisoners to have ready access to toilet facilities at all times (including at night) (paragraph 69);
- in the context of the planned construction of a new detention facility at Litla-Hraun Prison, it is important to ensure that sufficient provision is made for activities such as work, education and sport, having regard to the establishment's intended capacity (paragraph 77).

requests for information

- the admission criteria for the 12-place unit on the first floor of wing 2 at Litla-Hraun Prison, and whether its creation was designed to assist in resolving the tensions between prisoners referred to in paragraph 55 (paragraph 74);
- clarification of the criteria for admission to wing 3 of Litla-Hraun Prison (paragraph 74);
- as regards admission to the 12-place unit on wing 2 and to wing 3 at Litla-Hraun Prison, information on: the authority which selects the prisoners concerned; the admission procedure followed (hearing of the prisoner, provision of reasons, etc.); and any rights of appeal which apply in this area (paragraph 74);
- the causes of the disturbance which occurred at Litla-Hraun Prison in 1993, some time after the CPT's visit, and any measures subsequently taken (paragraph 78).

5. Medical services

recommendations

- someone qualified to provide first aid always to be present on prison premises (paragraph 98);
- appropriate measures to be taken in order to ensure that every newly arrived prisoner, whether convicted or on remand, is seen on reception by a member of the prison health service, who should be either a doctor or a qualified nurse reporting to a doctor (paragraph 103);
- all necessary steps to be taken to ensure that the practice as regards access to a doctor is in accordance with the considerations set out in paragraph 106 (paragraph 106);
- steps to be taken to ensure co-operation between the different health professions providing services to prisoners at Litla-Hraun Prison (paragraph 111);
- appropriate steps be taken to ensure that when a prisoner is transferred to another establishment, his medical record is also transferred (paragraph 111);
- the means devoted to the preventive aspects of the anti-addiction programme to be reinforced (paragraph 113).

comments

- the national health authorities appear to exercise no effective supervision over the work of doctors in prison establishments (paragraph 93);
- the nursing staff presence in Litla-Hraun Prison could usefully be reinforced (paragraph 97);
- it is important that there be a continuing programme of information for prisoners and prison staff on communicable diseases (in particular, hepatitis, AIDS, tuberculosis and skin diseases), with particular emphasis on the risks of transmission and means of protection (paragraph 115).

requests for information

- the comments of the Icelandic authorities on allegations heard that it was not easy to secure the transfer of a prisoner whose mental state required care in a psychiatric hospital (paragraph 108);
- the comments of the Icelandic authorities on the method of payment for medical care provided to prisoners (paragraph 109);

- whether HIV tests are carried out on prisoners and, if so, under which conditions (whether the prisoner's consent is sought, whether counselling is provided before and - if necessary - after such a test, etc) (paragraph 114);
- any instructions or guidelines produced by the national authorities regarding the approach to be adopted towards prisoners who are HIV positive or have developed AIDS (paragraph 115).

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

recommendations

- the detention of female prisoners in Skólavörðustígur Prison to be avoided (paragraph 118);
- as regards the use of a security cell:
 - . any detainee placed in such a cell (whether means of physical restraint are applied or not) to have the right to be examined and, if necessary, treated by a doctor without delay;
 - . such a medical examination to be performed out of the hearing and, unless the doctor requests otherwise, out of the sight of non-medical personnel;
 - . the results of the medical examination as well as any relevant statements by the detainee and the doctor's conclusions to be duly recorded in writing and made available to the detainee (paragraph 129);
- immediate steps to be taken to draw up regulations for the use of the security cell and means of physical restraint in Litla-Hraun Prison (paragraph 130);
- steps to be taken to remedy the absence of natural light in the security cell of Siðumúli Prison (paragraph 132);
- a register of the use of security cells and means of physical restraint at Litla-Hraun and Siðumúli Prisons to be established, in which should be recorded the times when the measure started and finished and the circumstances of, and reasons for, its use (paragraph 133).

comments

- the Icelandic authorities are invited to add the President of the CPT to the list of authorities to which prisoners may send confidential correspondence (paragraph 122);
- the application of means of physical restraint to a prisoner in a security cell would be one of the circumstances when staff should be permanently present (paragraph 128);

- cases where means of physical restraint need to be applied to a prisoner for more than twenty-four hours will be rare, particularly if the observation requirement provided for in section 101 of the RDR is understood to include the role of providing support to the prisoner (paragraph 128);
- it is important to avoid material hazards such as broken windows, in particular in a security cell (paragraph 131).

requests for information

- more detailed information on the measures envisaged to separate different categories of prisoners in Iceland (paragraph 117);
- whether it is expressly prohibited to monitor telephone conversations between a remand prisoner and his lawyer, or with certain administrative or judicial authorities, the Ombudsman and the European Commission on Human Rights (paragraph 121);
- whether remand prisoners' letters to lawyers, or to any of the authorities referred to in paragraph 121, may be inspected, and if so, in what manner (paragraph 122);
- regarding solitary confinement:
 - . whether prisoners placed in solitary confinement are informed in writing of the reasons for the decision;
 - . whether prisoners have an opportunity to express their point of view to the competent authority before any final decision is taken (paragraph 124);
- whether the use of security cells and/or means of physical restraint vis-à-vis sentenced prisoners is the subject of detailed regulations (paragraph 126);
- details of the powers and activities of the Ombudsman as regards visiting Icelandic prisons (paragraph 138).

C. Sogn Institution for Mentally Ill Offenders

recommendations

- steps to be taken immediately to ensure permanent nursing cover in the establishment, including at night and over weekends (paragraph 147);
- appropriate steps to be taken to ensure that, when a patient is transferred to the Sogn Institution, his medical record is also transferred (paragraph 155);
- the Icelandic authorities to establish formal internal machinery for receiving complaints from patients and to ensure that patients have confidential access to an appropriate authority (paragraph 159).

comments

- the idea of employing a part-time social worker merits close attention from the Icelandic authorities (paragraph 150).

requests for information

- the comments of the Icelandic authorities on the adequacy of the present legal framework as regards the deprivation of liberty on grounds of mental health (paragraph 141);
- whether the post of full-time psychiatrist has been filled (paragraph 146);
- whether the Ombudsman's terms of reference also cover mentally ill offenders detained in the Sogn Institution (paragraph 159).

APPENDIX II

**LIST OF THE NATIONAL AUTHORITIES WITH WHICH THE CPT'S
DELEGATION HELD CONSULTATIONS AND OTHER PERSONS CONSULTED**

Ministry of Justice

- Mr. Thorsteinn Pálsson, Minister for Justice
- Mr. Thorsteinn Geirsson, Secretary General
- Mr. Ólafur W. Stefánsson, Deputy Secretary General
- Mr. Ari Edvald, Special Adviser
- Mr. Jón Thors, Director of Civil Affairs and Liaison Officer to the CPT
- Mr. Thorsteinn A. Jónsson, Head of the Criminal Affairs Division and Liaison Officer to the CPT
- Mr. Haraldur Johannessen, Director of the Prison Administration
- Mr. Erlendur S. Baldursson, Head of Department
- Mr. Sigurdur Gíslason, Head of Department
- Mr. Guðmundur Gíslason, Director of the Reykjavik Prisons and of the Prison Administration's School
- Mr. Gústaf Lilliendahl, Director of Litla-Hraun Prison

Ministry of Health

- Mr. Gudjón Magnússon, Secretary General
- Mr. Làrus Helgason, Psychiatrist, University Hospital of Reykjavik
- Mr. Sigmundur Sigfússon, Psychiatrist, Akureyri Hospital
- Mr. Ásgeir Karlsson, Psychiatrist, Reykjavik City Hospital

Judicial authorities

Mr. Hallvarður Einvarðsson, State Public Prosecutor

Mr. Julius Georgsson, Judge at the Reykjavík District Court

Office of the Ombudsman

Mr. Gaukur Jörundsson, Ombudsman

Other persons met by the delegation

Mr. Ragnar Aðalsteinsson, Lawyer

