#### **EXECUTIVE SUMMARY**

This was the first visit by the CPT to the British Overseas Territory of Gibraltar. The CPT's delegation examined the treatment and conditions of detention afforded to persons held in various places of deprivation of liberty across Gibraltar. The co-operation received from both the Gibraltarian authorities and the staff at the establishments visited was excellent.

## Law enforcement agencies

The CPT's delegation found that most people deprived of their liberty by the police were treated in a correct manner. It did, however, receive some allegations of excessive use of force by police officers at the time of apprehension and of rough treatment during subsequent questioning as well as of handcuffs being applied excessively tightly at the time of arrest. The CPT recommends that the authorities make it clear that all forms of ill-treatment are prohibited, and that the perpetrators of ill-treatment will be punished.

The material conditions of the custody cells in New Mole House Police Station were generally of a good standard. There was, however, a lack of access to natural light in the cells, no privacy from the in-cell video-surveillance and no access to meaningful outside exercise for persons held longer than 24 hours. As regards safeguards for those deprived of their liberty by the police, the lack of legal aid meant that many detained persons did not have effective access to a lawyer prior to their first Court hearing. The CPT recommends that the authorities pursue their initiative to introduce a Duty Solicitor Scheme. The CPT's delegation also found that access to a doctor was, in practice, filtered by the duty custody sergeant. Effective access to a doctor should be granted upon request of the detained person and the right of access to a doctor should be guaranteed in law. Lastly, every effort should be made to avoid the detention of mentally-ill persons in New Mole House Police Station, and police officers should be provided with basic training on how to care for mentally-ill persons when they have to intervene and transport such persons to hospital.

As regards the material conditions at the Customs' holding facility at the Four-Corners' land border, these were currently not suitable for holding persons. Should the pending amendments to the relevant legislation come into effect authorising detention by Customs officials, the CPT recommends that the holding room not be used as a designated place of custody.

#### Windmill Hill Prison

The CPT's delegation observed generally good relations between staff and inmates. There were no allegations received during the visit of physical or psychological ill-treatment by prison staff towards the prisoners, although some tensions between prisoners did exist. There was, however, no clear anti-bullying policy in operation. Material conditions were generally satisfactory but a number of deficiencies required action, namely: many cells had corroded windows and vents; problems with hot water; non-functional flushes for some toilets and blocked drains. Further, cells of less than 8m² should not accommodate more than one prisoner.

At the time of the visit, two juveniles, one of whom was a 14-year-old, were being held in the prison. There were no specific rules for managing juveniles – as was evident by the disciplinary and induction procedures, no tailored regime was in place to support them and staff were not specifically trained to work with juveniles. In sum, Windmill Hill Prison is not a suitable place to accommodate juveniles. The CPT recommends that the Gibraltarian authorities develop a strategy for addressing the specific needs of juveniles deprived of their liberty, which might include establishing a small unit with a few secure places. As long as juveniles are kept in the prison, additional efforts must be made to provide them with a full range of purposeful activities and socio-educative support.

The provision of health-care in the prison suffered from a number of structural deficiencies. The CPT recommends that the authorities completely review the provision of healthcare to assess the somatic, psychiatric, dental, and other medical needs of the prisoners. This will require increasing doctor attendance and hiring the equivalent of one full-time registered nurse. The CPT also recommends that prompt and proper medical screening of every newly arrived prisoner be undertaken by a healthcare professional and that the existing injuries' recording procedures be reviewed. Further, a practice of conducting thorough autopsies and inquiries into all deaths in custody should be established.

The CPT is critical of the length of disciplinary punishments in which prisoners are confined to their cells alone for 23 hours a day for as long as six weeks with no stimulation. Likewise, the week-long induction procedure was found to be overly restrictive; the authorities' decision to reduce it to a maximum of 48 hours is welcome. As regards the regime, the CPT recommends that the range of purposeful activities be expanded, that all inmates be offered a minimum of one hour of daily outside exercise and that sentence plans be drawn up for all prisoners.

# Court holding cells and military facilities

The CPT noted that while the conditions were generally adequate in the Court holding cells, a register was absent as was any recording procedures for those persons detained. The CPT welcomes the steps subsequently taken by the authorities to address this matter. As regards the custody cells at the Royal Gibraltar Regiment's military barracks, the CPT requests information about amendments to the legislation that would authorise the use of this military custody suite.

### King George V Mental Health Hospital

The CPT's delegation observed staff providing care and treatment to patients in a dedicated and professional manner, in a challenging environment. Living conditions, however, were generally very poor but the imminent transfer of all patients to a new facility on the premises of the former Naval Hospital will provide a radical improvement. Further information on the new facility is requested notably in respect of the range of treatments offered to patients. The delegation found that the majority of patients on the long-stay ward appeared to be more in need of social care support than psychiatric in-patient treatment, and the CPT recommends that their situation be reviewed. Further recommendations are made for a central register to be introduced for the administration of ECT and for a clear policy for documenting and recording injuries to patients to be established and widely promoted.

In respect of the use of means of restraint, a specific register should be established to record all instances of recourse to manual restraint and seclusion. As regards the safeguards surrounding the placement of a patient involuntarily in hospital, the CPT recommends that long-term involuntary treatment orders always be based on the opinion of at least one doctor with psychiatric qualifications, and preferably two. Further, any extension of an involuntary treatment order should require a second independent external opinion prior to the decision on prolongation. It also recommends that patients should be placed in a position to give their free and informed consent to treatment and that the Mental Health Bill 2014 be amended to reflect this right. Lastly, a system of independent inspections of psychiatric establishments should be established.