

# OPCAT Expectations Corrections

Expectations for conditions and treatment of people in custody in prisons and otherwise in the custody of the Department of Corrections, and residents in residences established under section 114 of the Public Safety (Public Protection Orders) Act 2014

June 2023

 **Ombudsman**  
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Office of the Ombudsman  
Tari o te Kaitiaki Mana Tangata



OPCAT—Expectations – Corrections

Expectations for conditions and treatment of people in custody in prisons and otherwise in the custody of the Department of Corrections, and residents in residences established under section 114 of the Public Safety (Public Protection Orders) Act 2014.

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## The Ombudsman as a National Preventive Mechanism

As Ombudsman, I am designated to examine and monitor the treatment of persons in prisons, otherwise in the custody of the Ara Poutama Aotearoa – Department of Corrections (Corrections), and residences established under section 114 of the Public Safety (Public Protection Orders) Act 2014.<sup>1</sup>

The purpose of my role is preventive, aiming to ensure that safeguards against ill-treatment are in place, and that risks, poor practices, or systemic problems are identified and addressed promptly.

My role also helps to ensure New Zealand adheres to international human rights standards, to which all people are entitled. It also provides assurance that those in the custody of Corrections are treated humanely, and that their rights are respected, protected, fulfilled and promoted.

My role is broad and flexible. I examine the conditions of detention applying to, and the treatment of, people in custody ('conditions and treatment') and can make recommendations for improvement where I consider this to be necessary. I may also identify good practice in the hope that this will promote the highest attainable standard of care for people in custody throughout New Zealand.

My powers include unrestricted access to places of detention and information about detainees. Central to my examination function are my visits and inspections of prisons, other places where people are or may be in the custody of Corrections, and residences established under the Public Safety (Public Protection Orders) Act 2014. My inspectors may visit announced or unannounced and are able to request electronic and physical documentation, observe facilities and practice, and talk, in confidence, with people in custody, residents, staff and any persons who may be able to provide relevant information.

I am focused on the experience of, and outcomes for, those who are in the care of Corrections and who are unable to leave at will.

*"The National Preventive Mechanisms represent the most significant single measure which States can take to prevent torture and ill-treatment occurring over time."*

Ms. Aisha Shujune Muhammad, Vice-Chair, United Nations Subcommittee on Prevention of Torture

Further detail about the legal framework under which the Ombudsman operates is located in [Appendix 1](#).

1 Designation of National Preventive Mechanisms, Gazette Notice 2023-go2676, 22 June 2023.

## A note on terminology

### **Prisons and people in custody**

For these expectations, I use the overarching terms of 'prisons' and 'people in custody'. Prison(s) encompasses all prisons, corrections facilities and remand centres in New Zealand. 'People in custody' is used to reflect the language of my designation to monitor and examine these places of detention.

I acknowledge the importance of language around the justice system, and that people have different views on the meaning, accuracy, and effects of particular terms. I am open to hearing those views. Other terms frequently used include 'prisoners', 'tāne' or 'wāhine', and people in the care of Corrections. I may adopt or use other terms when appropriate, though only if this is consistent with a humanising approach to language.

### **Residences and residents**

Section 114 of the Public Safety (Public Protection Orders) Act 2014 provides for the establishment of secure 'residences' for the detention of people subject to public protection orders. When referring specifically to this cohort I therefore use the terms 'residence' and 'residents' to reflect the language of the Act.

## My expectations

This document sets out my seven overarching expectations for the conditions and treatment of people in custody and residents (people in custody). These are:

1. The rights of people in custody are upheld by people, principles and practices, at all levels.
2. People in custody are safe and their independence is promoted.
3. People in custody can build towards their future, through remaining connected with the wider community and access to meaningful development opportunities.
4. People in custody are treated with dignity and respect.
5. People in custody enjoy the highest attainable standard of physical and mental health.
6. People in custody are in an environment that promotes their safety, independence, culture, dignity, and wellbeing.
7. People in custody are supported by skilled, motivated, and engaged people.

I have an additional expectation for the conditions and treatment of residents in residences established under section 114 of the Public Safety (Public Protection Orders) Act 2014:

8. The distinct legal status of residents is recognised and reflected in the conditions and treatment they experience.

These expectations are intentionally high-level and apply to all people in custody. All places where people are in the custody of Corrections, or under public protection orders, should be able to demonstrate how they are meeting, or working towards achieving, these expectations.

My intent, with these expectations, is to provide people in custody, their whānau<sup>2</sup>, any person or agency involved with people in custody, Parliament, and the public with an understanding of some of the matters that I consider when fulfilling my examination function. These expectations will also guide my staff when they are carrying out my role, including when they are conducting visits and inspections.

Each expectation is accompanied in this document by **example areas of interest**. These areas of interest provide an indication of matters I may look at to consider whether or not my expectations are being met.<sup>3</sup> These are intended as a guide and do not exclude me from considering other areas that may demonstrate progress towards meeting these expectations, or considering the conditions and treatment of people in custody more generally.

My examinations are not a 'check list' exercise. I must respond flexibly to issues affecting people in custody. Therefore, the expectations and example areas of interest are indicative only – they are not exhaustive.

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2 This document refers to whānau rather than family. In Te Ao Māori whānau encompasses family in the fullest meaning. Whānau may include immediate and extended family through whakapapa (genealogy), as well as all persons connected by emotional or spiritual bonds. Any person who has been involved in the care or welfare of tāngata whai ora may also be considered whānau (kaupapa whānau).

3 Appendix 2 includes examples of evidence sources that may be used to inform the Ombudsman's view.

## Human rights

My expectations and areas of interest are based on international and domestic human rights law and guidance, some of which are listed in **Appendix 3** to this document. They also draw on applicable domestic legislation, regulations, and policies that inform, but may not necessarily determine, my observations and recommendations.

My role as a National Preventive Mechanism, and therefore my expectations, must be **responsive to rights of particular groups**. I am therefore informed by law, policies, standards and best practice for upholding the rights and ensuring the specific needs of these groups are met. This includes the rights of Māori, other ethnic groups, women, LGBTQIA+ persons, young and older people, and disabled people. The realisation of my expectations requires Corrections and others to be aware of the individual and collective rights of people in custody. Responsive monitoring means I will also have this awareness when examining conditions and treatment of people in custody, looking to be assured that human rights for these particular groups are evident in the experience of, and outcomes for, people in custody.

I recognise the **rights of staff** and others, as well as the obligations to staff under the Health and Safety at Work Act 2015, and my expectations should not be read in a way that is inconsistent with those rights or obligations. I believe that the conditions and treatment promoted through my expectations will ultimately also contribute to positive outcomes for staff, whānau, and others who spend time in places of detention.

## Te Tiriti o Waitangi | the Treaty of Waitangi

My expectations are informed by Te Tiriti o Waitangi | The Treaty of Waitangi<sup>4</sup> and its principles, including those articulated in the Waitangi Tribunal's report *Tū Mai Te Rangī! The Report on the Crown and Disproportionate Reoffending Rates (Wai 2540)*. These must be given due regard in the care of people in custody, including when interpreting my expectations.

I acknowledge Te Tiriti o Waitangi | The Treaty of Waitangi and will ensure my own processes and decision-making are consistent with its principles. One of my highest priorities as Chief Ombudsman is to be more responsive to tangata whenua. More information on what this means for my role is available in my **Annual Report 2021/2022**.

### This is a living document

This is the first version of my 'OPCAT – Expectations – Corrections'. The expectations will be updated over time. I welcome feedback on this document, recognising that best practice is continually evolving, and that there will always be further or new areas relevant to monitoring places of detention.

Please visit the website at <https://www.ombudsman.parliament.nz/what-ombudsman-can-help/monitoring-places-detention> for more information about the Chief Ombudsman's monitoring role, including information on how to provide feedback on these expectations.

4 I acknowledge there are two texts with different meanings.

## Scope of my expectations

My role is focused on the outcomes for, and experience of, people in custody.

My expectations are therefore for all persons and agencies who may influence the conditions and treatment experienced by those people. This includes those responsible or accountable for the legislation, policies, standards, and practice, at the national, regional, and facility level. It may involve government and non-government agencies. Where I consider improvements are needed I may make recommendations to the person or agency with responsibility to make the necessary changes.

My expectations also apply across a variety of prison and detention environments, including during transportation or management of people in custody 'outside the wire'.<sup>5</sup>

While my overarching expectations remain the same, achieving them may look different depending on the nature and purpose of the prison or unit, and the needs of the people held in custody there. It is for this reason that my expectations are focused on the outcomes I expect to see, and are not prescriptive about how these should be achieved.



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5 Where people in custody are detained in Court facilities, my OPCAT – Expectations – Court cells will apply, once available.

# 1. People, principles, and practice

## **Expectation: The rights of people in custody are upheld by people, principles, and practice at all levels**

Dedicated, rights-promoting leadership, policy, and governance is evident in the management and operations of custody. Governance arrangements give genuine effect to Te Tiriti o Waitangi | The Treaty of Waitangi<sup>6</sup> and its principles. There is Māori leadership and partnership with Māori, including within facilities.

Human rights standards are understood and met, including but not limited to those particular to Māori, children and/or young people, women, disabled people, LGBTQIA+ people, older people, and foreign nationals.

Organisational culture reflects a person centred and holistic approach to the care of people in custody with emphasis on restoration, whakahoki mauri<sup>7</sup>, and rehabilitation, in a safe and humane environment.

People in custody, whānau and others, including staff members, have a voice in decision-making. They are able to share their views and concerns, in particular about the conditions and treatment of people in custody.

### *Examples of areas of interest*

#### Leadership, engagement, integrity, and accountability

Leadership at all levels are committed to, and take responsibility for, promoting human rights and providing safe, responsive and high quality care for people in custody. This is evident in the outcomes for people in custody.

Strategic and operational plans, including considerations such as staffing, resourcing and quality improvement, show how the organisation realises, maintains and progresses best practice.

Leaders have genuine insight and understanding of the culture and operational reality within relevant facilities, and are engaged in monitoring and ensuring appropriate conditions and treatment are provided. They act with integrity and take accountability, creating an organisational culture that reflects this.

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6 I acknowledge there are two texts with different meanings.

7 Restoring peace and balance within the whanau and wider community, see: New Zealand Law Society, *We can learn from traditional Māori practices*, 25 September 2020.

## Organisational culture

All staff respect the dignity of people in custody at all times. Clear organisational values and strong leadership support this.

A constructive, collaborative, and supportive culture is fostered in all parts of the organisation.

## Representation, participation, and engagement

People in custody, whānau, and community members are represented, and have avenues for participation, in matters that affect them. Decision making processes involve meaningful consultation and effective communication with those parties, as well as wider stakeholders such as those who have experience of custody, tāngata whenua, and civil society.



## Equality, diversity, and inclusion

Behaviours, policies, strategies, and processes promote equality, respect diversity, and contribute to an inclusive organisational culture.

The conditions for, and treatment of, people in custody are fair and non-discriminatory, including when meeting the distinct needs of people in custody, or groups of people in custody.

## 2. Safety and independence

### **Expectation: People in custody are safe and their independence is promoted.**

No person is deprived of their liberty unless in accordance with the law, and with all associated legal protections.

People in custody are fully informed about their legal and detention status, including legal options available to them. They have timely and comprehensive access to legal advice and support around these processes.

Rights inherent in security of the person are respected and protected. People in custody are able to maintain independence and autonomy to the fullest extent practicable, and the importance of this in terms of rights, wellbeing, and rehabilitation is well understood. People in custody have opportunities to be responsible for themselves, their environment, and their future. They are supported, well informed, and have opportunities for meaningful engagement with others.

People in custody are safe from harm, abuse, or neglect (including but not limited to physical, emotional, spiritual, cultural, financial, or sexual). Risks and harm are identified, recorded, and addressed.

Safety and security are preserved with no more restrictions than are allowed for by the principles of legality, necessity, proportionality, accountability, and non-discrimination. There is regular and responsive consultation with people in custody about their safety and wellbeing. An objective, fair, and consistent approach is applied to all those in custody.

The rights of people in custody to statutory protections and complaints processes are respected and realised. Feedback and input is sought and considered; people in custody can trust the processes and systems around them to be effective and fair.

### *Examples of areas of interest*

#### Placement and separation

People in custody are accommodated in a facility, and unit, that is appropriate for their needs, including proximity to their whānau. The requirement to provide separation between certain groups, such as on the basis of gender, age (youth from adult), and legal status (in particular those who are accused from those convicted) are met, in accordance with international human rights obligations.

Information for, and communication with, people in custody about their placement, including reviews and any movement/transfer between placements, is timely, clear, and reliable.

## Classification and/or categorisation

There is a well-designed and managed classification process, and this is used effectively to match the risks and needs of individual people in custody with the most suitable regime and resources for them.

All people in custody, irrespective of classifications/ categorisations, experience appropriate conditions and treatment while in custody. In particular, they are provided with access to relevant support, opportunities, and benefits, including access to programmes and activities.

## Transportation

Transport and travel arrangements for people in custody are well planned and managed, taking into account the welfare and individual needs of those traveling. This includes, but is not limited to, food, bathroom, medical, hygiene, and rest considerations.

Attention is paid to the health and wellbeing of people in custody throughout any journey. People in custody are not left without sufficient oversight, or means to ask for assistance, during any journey or while in a transport vehicle.

All vehicles used to transport people in custody are clean, safe, and humane, and suitable for the people they are transporting (ie disabled people in custody or people in custody with specific needs are reasonably accommodated).

## Reception and induction

Before and on arrival, people in custody are treated with dignity and respect, and efforts are made to make them feel safe and supported. The reception environment and processes are conducive to this.

There is comprehensive handover of information to the receiving office. Any immediate needs of people in custody upon arrival are identified and met.

Individual and particular needs and risks are identified before the person in custody is allocated to any particular area. Assessment takes place promptly and in private.

People in custody are informed about the reception and induction processes, including their entitlements (to phone call, property, shower etc), and how to access support.

Each person in custody receives a comprehensive induction and is provided with information in an appropriate language and accessible format to assist with the settling in process. Every person in custody has all necessary information about their rights, responsibilities, and entitlements, and the operating and administrative arrangements relating to their detention, in a language and accessible format which they can understand.

The particular difficulties of being newly arrived in the facility are recognised and staff are responsive to this, conducting regular welfare checks and having ongoing communication with people in custody who have recently arrived.

## Safe custody

The safety and security of people in custody, staff, service providers, and visitors are provided for at all times. National and site-specific strategies and procedures are in place to support this.

Dynamic security<sup>8</sup> is well understood and utilised, and is complemented by physical and procedural security. Those working with people in custody are trained and encouraged to develop professional and constructive relationships with those in their care. They know, understand, and engage with them as individuals. Staff are alert to what is going on where they work, able to identify concerns and know how to act on or report these. They are skilled in prevention, de-escalation, and management of complex behaviour.

Safety and security measures take into account particularly vulnerable groups including, for example, minority groups, young people, women, LGBTQIA+ persons, disabled people, pregnant people, people with babies, foreign nationals, and people detained for immigration related purposes.

People in custody are regularly consulted about their safety, and action is taken to address their concerns. Safety and security measures are subject to oversight and regular review by senior managers to ensure standards are consistently achieved.

## Feedback, concerns, and complaints

Feedback from people in custody and their whānau is actively sought, considered, and used to inform and improve governance arrangements and operations.

People in custody are listened to when they raise concerns or make complaints, and the issues raised are considered and addressed. Their views are taken seriously and responded to sensitively.

Complaints systems are accessible to people in custody and others (such as whānau and advocates), culturally safe, well communicated<sup>9</sup>, confidential and effective. Outcomes are transparent, fair, well communicated, timely, documented, and in line with a policy of full disclosure.

There are accessible avenues to raise concerns and complaints independent of staff, and for decisions to be reviewed without difficulty.<sup>10</sup> People in custody and others trust the complaints process because it is effective and fair.

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8 'Dynamic security' is used to describe security which depends on an alert staff who interact with people in custody, who have an awareness of what is going on in the prison and who ensure that people in custody are kept active in a positive way. See, for example, United Nations Office on Drugs and Crime (UNODC) **Handbook on Dynamic Security and Prison Intelligence**, December 2015.

9 See 'Communication and language', under the expectation for 'Health, care, and wellbeing'.

10 See 'Health services and equivalence of care', under the expectation for 'Health, care, and wellbeing' regarding health complaints.

## Advocacy and support

People in custody, whānau, and others (as appropriate) are informed of, and have unobstructed and confidential access to independent advocates and services, including legal representatives, support people, the Inspectorate, and the Ombudsman, in a timely manner and in accordance with the roles of those bodies.

## Privacy and confidentiality

The privacy and confidentiality of people in custody is respected and preserved. Any infringement on privacy is justified and proportionate, including in relation to searches, monitoring of communications, and surveillance technology.

Confidentiality and its limits are explained to people in custody as soon as practicable on admission and as necessary. This is done in an appropriate language and/or an accessible format, and it is recorded that this information has been provided.

All personal information is kept securely. Information sharing protocols are in place and followed.

## Safeguarding (freedom from abuse or neglect)

People in custody are safe at all times, including in the prison, and in transport to-and-from the prison.

People in custody are not subjected to discrimination, coercion, harassment, bullying, or any form of exploitation. All concerns (including potential concerns or indications) regarding exploitation, violence, abuse, or neglect are promptly documented and investigated, or referred to the appropriate authority for investigation. All appropriate steps are taken to prevent harm, and to provide restoration and redress where it occurs.

Prison and system-wide multi-disciplinary strategies are developed and implemented to reduce bullying, violence, harassment, and anti-social behaviour. Individuals are supported, in response to identified risks or particular vulnerabilities, by skilled staff.

## Discipline and sanctions

Discipline and order are maintained with no more restrictions than are reasonably necessary to ensure safe custody. Restrictions and disciplinary measures adhere to the principles of legality, necessity, proportionality, accountability, and non-discrimination. They never amount to ill-treatment.

People in custody are informed of and understand the expectations and rules that apply to them. Information about rules and procedures is provided in an appropriate language and accessible format to people in custody.

People in custody have good awareness of disciplinary measures, are treated fairly in disciplinary procedures, and receive sufficient warnings and notice of disciplinary decisions. The procedures follow due process, including appropriate avenues for review and appeal of decisions.

## Coercive powers<sup>11</sup>

Coercive powers are recognised as serious interventions with potentially harmful effects on people in custody. Legislation, policy, guidance, and training support staff to understand this.

All use of coercive powers adheres to the principles of legality, necessity, proportionality (including shortest period of time), accountability, and non-discrimination.

Appropriate oversight and approval processes are in place. Timely and comprehensive recording, debrief, and review occurs.

The specific needs, including cultural needs, of people in custody are met throughout the use of coercive powers, and relevant advice is sought in order to maintain safety and minimise harm.

Coercive powers are never used as a punishment or for disciplinary purposes. Practices which are inherently cruel or degrading are never used. Practices which are unsafe, including restraint in any way that impacts on airway, breathing, or circulation, are not used.<sup>12</sup>

## Segregation

All forms of segregation, where people in custody are separated from the general prison population, is recognised as a highly restrictive practice. The use of segregation is minimised and subject to robust oversight.

Segregation is only used in accordance with the principles of legality, necessity, proportionality (including shortest period of time), accountability, and non-discrimination. The reasons justifying segregation are recorded, regularly reviewed, and communicated to the person in custody. The wellbeing, and impact of segregation on the person, is also regularly reviewed and recorded.

Segregation is an end in itself and does not involve further disadvantages or restrictions being imposed on the person in custody. For example, access to amenities, activities, contact with the outside world, and healthcare is maintained for those segregated. The specific needs, including cultural needs, of people in custody are met throughout segregation.

## Meaningful human contact

All people in custody have the opportunity for meaningful human contact (contact that is of sufficient quality and duration) daily. Communication with whānau, in-person association with other people in custody, and empathetic engagement with staff, other professionals, volunteers and community members, are supported and encouraged to the greatest extent possible for the person in custody.

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11 Under the Corrections Act 2004, Subpart 4, coercive powers include use of force and restraint, searches, monitoring or withholding correspondence (mail or telephone calls), and alcohol and drug testing.

12 The mouth and/or nose are never covered and no pressure applied to the neck region, rib cage and/or abdomen. Planned or intentional restraint in a prone position (lying face down) on any surface, not just the floor, does not occur.

## Time outside of cell

All people in custody are afforded the maximum possible time outside of their cell daily. This is at least two hours a day, to avoid potential solitary confinement. Where people in custody are confined for more than 22 hours within a day, this is recorded and monitored.

## Solitary confinement

Solitary confinement does not occur, meaning no person in custody is confined (physically isolated) for 22 hours or more a day without the opportunity for meaningful human contact.<sup>13</sup>



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13 Solitary confinement for indefinite or prolonged periods (more than 15 days), or as a disciplinary measure, or involving particularly vulnerable persons (including young people, or those with physical or mental health disabilities) is recognised to potentially amount to cruel, inhuman or degrading treatment or punishment and contrary to Article 16 of the United Nations Convention against Torture.

### 3. Planning for the future

#### **Expectation: People in custody can build towards their future, through remaining connected with the wider community and access to meaningful development opportunities.**

From the beginning of their time in custody there is a focus on providing individuals with the support, skills, and tools they need for the future.

The conditions and treatment experienced during custody are conducive to this, and to positive outcomes before, on, and after release.

People in custody are connected to life outside the prison, and have opportunities to create and maintain supportive relationships. The impact of a person's time in custody on whānau, especially tamariki and rangatahi, is recognised. People in custody are therefore able to stay meaningfully connected with those people.

People in custody are afforded the rehabilitation opportunities and support needed to prepare for parole and safe release. There are co-ordinated rehabilitation and reintegration services. People in custody receive regular, timely, and comprehensive case management. Their voice is sought and heard in these processes.

A range of activities that support rehabilitation and reintegration are offered. These activities are culturally safe, and appropriate for the individual concerned. People in custody are well prepared for the conclusion of their detention, including by specific plans for employment, training, education, mental and physical healthcare, cultural and/or spiritual support, disability support, housing, financial management assistance, and community connections, as needed.

#### *Examples of areas of interest*

##### Case Management

There is timely allocation of case managers for all people in custody. People in custody are able to meet with their case manager early in their custody and at regular intervals.

Case management procedures are implemented according to best practice and take account of critical dates for progression.

People in custody and their whānau, where appropriate, participate in their case management. People in custody are consulted about case management decisions, are able to contact their case manager, and are well informed of their case management plans.

## Release planning

Planning takes place with enough time, support, communication, and information for people in custody and their whānau to be, and feel, prepared for release.

The needs and concerns of people in custody in relation to transition out of prison, or arrangements for their release, are considered and discussed with them. They are encouraged and supported to engage with and involve their family, whānau, hapū, and iwi in planning for the future.

There are coherent care pathways in place to support people in custody in accessing specialist services prior and on release, as needed. Continuity of care in relation to specific health or disability needs are assured by appropriate referrals and planning.

## Purposeful activity

All people in custody, including those on remand, are supported and encouraged to use their time constructively, including through meaningful activities and offence focused rehabilitation opportunities.

Time outside of cell is maximised (people in custody can spend the majority of their time outside their cell). They are provided with a broad range of activities, opportunities and services based on their needs and preferences. There are sufficient and suitable education, cultural, skills, work, and programme places to meet the needs of the population, including the specific needs of particular groups such as young people.

Programmes such as guided release and release to work are resourced and supported, and access to these are provided on a fair and transparent basis.

There is continued consideration and review of how people in custody can use their time to support their current and future wellbeing, and people in custody are involved in this.

## Access to services

People in custody are supported to access services, activities, groups, and resources based on their individual need, including those that are associated with specific cultural, spiritual or other practices.

Good relationships with these groups and services are developed and maintained by staff. Opportunities for collaboration and innovation are explored when there is potential for this to benefit people in custody.

## 4. Dignity and respect

### **Expectation: People in custody are treated with dignity and respect.**

All people in custody are valued as individuals, with their own history, experience, views, needs, and abilities. They are able to maintain and foster connections that are important to them, including with loved ones, with spiritual or cultural practices, and through opportunities to express themselves.

Responsiveness to diversity is demonstrated through specific strategies and services, which are based on a well-informed understanding of the relevant population groups of people in custody and which do not take a 'one size fits all' approach.

Staff and people in custody have constructive and positive relationships, and these are seen as an integral part of maintaining a safe environment with the best outcomes for people in custody.

### *Examples of areas of interest*

#### Respect for the individual

The views and preferences of people in custody are sought, recorded, and evident in the management and support they receive. They are respected and valued as individuals, whose background, age, culture, religion or nationality, disability, among other factors, are important to who they are, their wellbeing, and sense of self.

#### Choice

Opportunities for people in custody to have choices in day-to-day life, and on matters which affect them, are maximised. Those choices are respected and honoured, and if it is not possible to honour their choice the reasons why are appropriately explained to the person in custody. Coercion is avoided; support to make positive choices, which contribute to health and wellbeing, is provided through engagement, education, and encouragement.

#### Whānau and community connections

The importance of loved ones in the life of people in custody is acknowledged and valued. People in custody are encouraged and supported in developing and/or maintaining positive relationships with whānau, especially tamariki and rangatahi, and the wider community, in diverse ways and in line with their preferences and circumstances.

People in custody are located as close to their home, whānau, hapu, iwi, other community connections, and whenua as possible. Measures are taken to prevent and address disadvantages faced by people in custody who are located far from their homes.

Foreign nationals, or those whose connections are outside of New Zealand, have access to the appropriate services and supports, such as those of the relevant consulate.

People in custody can connect with the wider community and be engaged as citizens. They have opportunities to follow the news, keep informed of key events and are able to exercise their relevant civil and political rights.

## Visits

People in custody are offered the fullest visiting arrangements possible, in terms of frequency, duration and quality, and not less than their legal entitlement. Visitors are made to feel welcome. The visitor environment is accessible, safe, comfortable, and child friendly.

## Temporary release

People in custody are supported to have temporary release where it is safe and beneficial for them to do so, including for compassionate reasons.

## Identity, culture, faith, and lifestyle

Diversity is welcomed. No person in custody experiences discrimination based on their identity, culture, faith (or spirituality) or lifestyle or any of the 'prohibited grounds' for discrimination.<sup>14</sup>

People in custody are asked about what matters to them. They are able to observe practices and traditions that are important to them. Provisions are made to support the expression of identity, culture, or faith. For example, they have access to kaumātua and/or kuia, and others who can provide cultural and/or spiritual support.



## Communication<sup>15</sup> and language

Communication with, and about, people in custody is humanising and respectful.

Communication and language are understood to be central to identity and well-being of people in custody.<sup>16</sup> Communication used is responsive to the individual, including their gender identity, age, and needs.

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14 The prohibited grounds are outlined in Section 21 of the Human Rights Act 1993.

15 Article 2 of the Convention on the Rights of Persons with Disabilities provides a useful definition of 'communication' as including *'languages, display of text, Braille, tactile communication, large print, accessible multimedia as well as written, audio, plain-language, human-reader and augmentative and alternative modes, means and formats of communication, including accessible information and communication technology'*.

16 This includes how we express and receive communication, how we interact with others and with the world around us.

People in custody are supported to communicate as freely as possible. Speech, language, and communication needs are well understood and accommodated, including through specialist advice and services, functioning devices, communication tools and practices, as required and according to their needs and wishes.

Language interpretation and translation services and tools are used, and are tailored to the individual and the situation.

Information, resources, and activities are provided in appropriate languages and accessible formats that reflect the needs and preferences of the people in custody.



## 5. Health, care, and wellbeing

### **Expectation: People in custody enjoy the highest attainable standard of physical and mental health.**

People in custody are cared for in a holistic manner that nurtures and strengthens all areas of their wellbeing, including taha tinana, taha hinengaro, taha whānau and taha wairua.<sup>17</sup> Health is understood in its broadest sense, and all aspects of life at the prison are conducive to the wellbeing of people in custody.

People in custody are listened to, and their health, disability, and wellbeing needs are effectively identified and addressed. People in custody receive timely care and support from appropriately trained practitioners, and have access to the range of services and supports they need.

Services provided are of the same quality as those provided in the community ('equivalence of care') and there is a sufficient level of health services staffing in a range of specialities relevant to the health needs of the prison population.

Continuity of care is assured through close work with health services in the community. As patients, people in custody are treated with dignity, respect, and kindness. Their right to privacy and medical confidentiality is respected. Preventive health services are implemented, and staff are aware of their role in documenting and reporting health, care, and wellbeing matters.

### *Examples of areas of interest*

#### Welfare

People in custody receive the care and support they require in a manner that is person-directed, demographically appropriate, trauma-informed, and maintains dignity.

Day-to-day life for a person in custody is conducive to maintaining their welfare. Staff are mindful of the physical and mental wellbeing of people in custody, and respond to their needs appropriately.

People in custody have the opportunity to participate in recreational, sporting, religious, and cultural activities to support wellbeing, including tikanga Māori, te reo Māori, and principles relating to Māori health practice. They have a say in the activities offered.

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17 The four pillars of health under the Te Whare Tapa Whā model. Taha tinana (physical health), taha hinengaro (mental health), taha whānau (family health), taha wairua (spiritual health).

## Health services and equivalence of care

People in custody have access to health care and services on an equitable basis, or of an equitable standard, as the general population. They have direct confidential access to healthcare professionals (including health and disability advocacy services) to discuss their health, care and support needs.

Healthcare staff are appropriately qualified and have the necessary professional supervision and support. They exercise full clinical independence in their role (meaning that they act only on the basis of their professional judgement regarding the care and treatment of their patients).

Health services are evidence based, informed by the assessed needs of the prison population, and are appropriately planned, provided, and quality assured.

Concerns and complaints about health services are raised, listened to, and addressed through a confidential health complaints system, that is independent of the custodial complaints mechanism

## Health assessment

People in custody have a comprehensive health assessment on admission and regularly thereafter. This includes assessing and recording any evidence of prior ill-treatment<sup>18</sup>, and identifying any physical or mental health condition requiring medical attention, in a timely manner. Health examinations are conducted in a private setting, in a manner which is appropriate and comfortable for the individual and their needs. Continuity of care is maintained when possible and preferred. In particular, medication needs are assessed on admission and met without delay, as appropriate.

People in custody consent to, are informed about, and engaged in, health assessments, including their processes and outcomes.

## Health promotion

Healthcare professionals play an effective role in preventing harm and in promoting the health and wellbeing of all people in custody. People in custody are supported and encouraged to optimise their health and wellbeing.

Healthcare staff are aware of the public health needs of specific populations, particularly Māori, and health promotion and disease prevention advice meets those needs.

People in custody receive the education and information they need to optimise their health outcomes.

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18 In line with the 'Role of health professionals in documenting torture and ill-treatment in different contexts' outlined in the United Nations *Istanbul Protocol: Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment*, 2002.

## Mental health

People in custody are supported to understand their own mental health and wellbeing needs and they know how to seek assistance. Particular mental health needs are identified promptly and supported by community-equivalent services. People in custody receive effective and compassionate mental health care and support from appropriately trained and supported staff on an ongoing or as needed basis.

There is a clear and effective referral pathway for people in custody requiring mental health assessment or services, including to Kaupapa Māori services. People in custody who require assessment or treatment under the Mental Health (Compulsory Assessment and Treatment) Act 1992 or the Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003 are assessed and transferred promptly, safely, and in a dignified manner.

Strategies are implemented to prevent suicide and self-harm among people in custody and to provide appropriate, individualised, and specialised support to those vulnerable and/or at risk. Suicide and self-harm risk is assessed and managed in an effective, person centred, and trauma informed way.

## Substance misuse

People in custody dealing with substance misuse are identified promptly and supported. They have timely access to specialised, safe, effective, and individualised clinical and psychosocial support. Those with both mental health and substance-related needs receive joined-up, comprehensive services and support.

An effective whole-of-prison strategic approach to misuse of drugs and alcohol ensures the demand for drugs and alcohol is minimised.

## Disability identification and supports

There are consistent and comprehensive ways to identify disabled people in custody and ensure their needs are well understood, recorded, and known by appropriate parties. This includes learning/intellectual disabilities. Screening for disability happens early in the custody journey, recognising that the custodial environment can be further disabling, and if a disabled person's needs are not properly identified and reasonably accommodated this adds an additional barrier to their experience in custody.

Staff have a good understanding of the social model of disability.<sup>19</sup> Disabled people in custody are appropriately supported, including with physical and cognitive tasks such as showering, reading, understanding rules, participating in programmes and making complaints. Disabled people in custody are consulted and provide informed consent, including on decisions pertaining to their disability, and if or when other people in custody may provide support.

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19 'The social model of disability specifies that individuals do not have disability - it lies in society. The experience of disability occurs when people with impairments are excluded from places and activities most of us take for granted. It happens when our infrastructure and systems do not accommodate the diverse abilities and needs of all citizens. The experience of disability is influenced by the nature of a person's impairment. Gender, age, ethnicity and culture can also have a profound and sometimes compounding effect on an individual's experience of disability'. See the Office for Disability Issues | Te Tari Mō Ngā Take Hauātanga, [Guidance for policy makers](#), and the [New Zealand Disability Strategy 2016-2026](#).

## Aging

People in custody can age with dignity. The experience and needs, whether physical, mental or psychosocial, of older people in custody are well considered and provided for, including for those who are, or become, disabled.

## Reasonable accommodation

Barriers that may exist for individuals or groups are recognised and addressed through positive action or/and reasonable accommodations.<sup>20</sup> People in custody receive the resources and aids they require to meet their mobility and sensory needs. Support is individualised and aligns with individual circumstances and preferences.

## Medication and health treatments

People in custody, and their whānau (as appropriate) are involved in, and able to make decisions about, the medication and treatment they receive. They are helped to understand the clinical actions and effects, limitations, and potential side effects of the medication or treatment prescribed and to contribute to decisions about these.

Medication and other treatment changes are discussed with people in custody, and any changes agreed before they commence, including change in treatment from community-services. Informed consent is sought and people in custody are able to exercise their right to decline or refuse medication or health treatments, except as provided for in law.

The medication and treatment needs of people in custody are met by staff who are qualified and competent to do so. They are prescribed safely, in accordance with evidence-based practice, are documented, reviewed regularly, including through second opinions when requested or necessary, and administered at clinically appropriate times by qualified staff, with due regard for confidentiality and security.

## Dental care

People in custody have timely access to quality dental services based on clinical need, including oral health promotion.

## Referrals

People in custody are referred, with their consent and having been fully informed of the reasons for the referral (unless urgent/emergency care is required), to appropriate health, care, and wellbeing services or specialists in a timely manner.

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<sup>20</sup> "Reasonable accommodation" is defined in Article 2 of the Convention on the Rights of Persons with Disabilities to mean 'necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms'.

For more information on reasonable accommodations, see the guide 'Removing barriers: A guide for reasonable accommodation of disabled people in Aotearoa from New Zealand's Independent Monitoring Mechanism, available at: <https://www.ombudsman.parliament.nz/resources/removing-barriers-reasonable-accommodation-disabled-people-aotearoa>

## 6. Living environment

### **Expectation: People in custody are in an environment that promotes their safety, independence, culture, dignity, and wellbeing.**

People in custody experience a safe and healthy physical environment, which is fit-for-purpose. Material conditions, including the space, ventilation (including fresh air), temperature, lighting (including natural light), utilities and fixtures are all conducive to this, and are well maintained.

Design and resourcing of the facility ensures an environment that is appropriate for the varied needs of the prison population, which includes those related to disability, culture, age, gender, or health.

People in custody's fundamental rights are met, including to adequate and nutritious food, meaningful human contact, clothing, fresh air, rest, exercise, and purposeful activity. They have access to the natural environment, and are able to spend sufficient time outdoors regularly (at least daily).

People in custody have a say on their living environment to the greatest extent possible and individually appropriate, including within their personal space.

### *Examples of areas of interest*

#### Physical environment

The prison building, facilities, and grounds are appropriate for their purpose, and well maintained. People in custody live in a clean and decent environment, which is conducive to their health and wellbeing.

The physical environment meets best practice design principles and ensures equitable access to facilities for disabled people in custody, including the accommodation of physical, sensory, and learning needs. Care is taken to ensure signage and information is presented in languages and formats suited to the needs of people in custody.

There are appropriate, designated spaces for people in custody, based on their needs and risks.

#### Outside space, fresh air, and nature

All people in custody have regular access to safe outside areas, at least one hour daily. The outside areas provide ample space for social interaction (as appropriate) and exercise, as well as fresh air and natural light.

Outside spaces enable engagement with the natural environment to the greatest extent possible. Ways of enhancing outside spaces and access to nature are considered and implemented, in recognition of the important benefits connection with the natural environment provides for people in custody and staff.

## Food, drink, and nutrition

Safe drinking water and food are available to people in custody in sufficient quantity and quality. Food and drink options are varied. People in custody have input into the options provided.

Meals and food served to people in custody provide for their dietary, cultural or religious needs, and are nutritionally sufficient and well balanced. Meals are well prepared, and served at an appropriate temperature and times.

People in custody have independent access to food and drink options, unless individual circumstances restrict this. Drinking water is freely available to every person in custody.

Food and drink are recognised to be important to people in custody for a variety of reasons. Food and drink are provided in a manner that recognises and respects people in custody's religious, cultural, and personal practices and customs, unless there is a justifiable and proportionate reason that this is not possible.

## Personal possessions, property and provisions

People in custody are afforded some personal space (such as cell), and can personalise this, as appropriate. Restrictions on items are fair and reasonable, they are well communicated, including the reasons for them.

People in custody have, or have timely access to, their possessions, and are able to access their stored property on request. Respect and appropriate care is shown for the personal possessions and property of people in custody. Clear, timely, and effective processes are in place for the storage and transfer of property.

People in custody have the basic requirements of a decent life met, including access to a range of toiletries, suitable clothing, bedding, personal hygiene materials and menstrual products. Disability aids, where needed, are available to people in custody, these are individualised and well maintained.

There are adequate cleaning and laundry facilities and practices. Items that need to be washed, such as clothing and bedding, are kept clean and in good condition.

People in custody are able to access accurate and up-to-date records of their finances. They can purchase goods, of a sufficient range and quality, in a fair and timely manner. Pricing is transparent and reasonable, based on the normal market value of the goods.

Any searches of personal property are lawful, necessary, reasonable, proportionate, and in accordance with best practice. Search procedures are documented and well communicated to people in custody.



## Rooms and sleep

People in custody have a dedicated and comfortable place to sleep, store their belongings, and relax in privacy. In all circumstances people in custody are accommodated in cells or rooms that meet their health requirements, including adequate floor space, and appropriate lighting, temperature and ventilation/fresh air.

People in custody have their own cell. There is active work to reduce and eliminate 'double bunking' or multiple occupancy where it occurs, unless it is the expressed preference of the individuals concerned to share a cell. No person in custody is double bunked without prior, thorough risk assessment, and confidential consultation between each person in custody concerned and a trusted staff member. All cells provide adequate space, facilities, and privacy for the number of people they accommodate.

## Emergency preparedness

There are clear, site specific, comprehensive strategies for responding to disasters and emergency situations, preventing infection, and managing potential infection outbreaks. Policies and practices appropriately prioritise people in custody's rights and needs along with their safety. Plans and procedures are well communicated, tested, and understood.



## 7. Staffing and quality improvement

### **Expectation: People in custody are supported by skilled, motivated, and engaged people.**

Staff across all areas of the agency or organisation reflect the diversity of New Zealand society, are appropriately qualified, and employed in sufficient number. Staff are supported and equipped to carry out their roles safely and responsibly.

Staff are conscientiously selected and trained, recognising that the safety and wellbeing of people in custody depends upon the staff members' integrity, humanity, knowledge, skills, and personal suitability. This is reflected in how staff engage directly with people in custody, as well as in policy and practice development, management, leadership, training, administration, communication, and all other areas working in, with, or for the Corrections system.

Continuous quality improvements and innovation are evident. Transparency and openness among staff and people in custody support this. Findings and learnings, including from oversight bodies, incidents, complaints, reviews, and developments in best practice, are shared and acted upon. There is an ongoing commitment to the best outcomes for people in custody.

### *Examples of areas of interest*

#### Staff resourcing

Sufficient permanent staff, with the appropriate training, knowledge, and cultural competency, are employed across all roles to ensure the prison is safe, the rights of people in custody are respected and their needs met, including cultural safety and responsiveness/responsivity.

Staffing arrangements are determined based on the purpose, nature and needs of the specific unit or area of custody. Staff resourcing prioritises people in custody's safety, wellbeing, dignity and rights.

People in custody are never unsafe due to staffing shortages. Staff shortages do not inhibit people in custody from having the opportunities or resources they are entitled to, such as access to programmes, health care, or sufficient time out of cell.

#### Staff recruitment, training and development

All staff are aware of the important role they play in conditions and treatment experienced by people in custody. Their work is acknowledged and they receive the support, training, and supervision necessary to be able to do their best for people in custody.

Staff are recruited and supported to provide a high standard of care, support and management to every person in custody. Facility and role specific induction and training is provided, including training in dynamic security and trauma-informed care. Records of training are kept up to date.

All staff receive training on, and are familiar with, the rights of people in custody under New Zealand law, and relevant international law, including on the prevention of torture, and cruel, inhuman or degrading treatment or punishment. They are informed on the rights of particular groups such as Māori, Pacific peoples, women, LGBTQIA+, young people, disabled people, older people, foreign nationals, asylum seekers, migrants and refugees.

Cultural education is valued at all levels within the facility and organisation, and is reflected in training opportunities being provided and required for all staff. This training includes the principles within the articles of the United Nations Declaration on the Rights of Indigenous Peoples and te Tiriti o Waitangi | the Treaty of Waitangi. Staff are able to demonstrate an understanding of tikanga Māori values, te reo Māori and principles relating to Māori health practice.



## Quality improvement

There are quality improvement strategies across the organisation, including at head office and the prison level, used to continuously assess and improve the care and management of people in custody. Strategies include responding to actions and learnings arising from past issues, incidents and complaints, and keeping good records. Best practice models and up to date research are used to improve operations and outcomes.

There are processes in place to ensure staff, people in custody, whānau and those with lived experience are able to influence and contribute to quality improvement initiatives.

Sufficient information is gathered and analysed to ensure that management is aware of any concerns about the conditions or treatment of people in custody, and to address these.

## People detained in residences established under section 114 of the Public Safety (Public Protection Orders) Act 2014

My seven expectations apply to all those in the custody of Corrections and to people detained in residences established under the Public Safety (Public Protection Orders) Act 2014. An additional expectation for the conditions and treatment of these residents is outlined below.

### **Expectation: The distinct legal status of residents is recognised and reflected in the conditions and treatment they experience.**

The significant impact on rights inherent in the public protection order scheme is recognised and understood by staff at all levels, and this is reflected in policies and practices. Residents are afforded as much autonomy as possible, and their rights are not restricted beyond what is necessary to meet the purpose of the public protection order.

#### *Examples of areas of interest*

##### Legal status

Residents are well informed about their legal status, the purpose of the public protection order as it relates to them, and their rights as residents under a public protection order.

Residents' orders are re-evaluated regularly (no less than annually), and access to the court review process is promptly facilitated when requested by the resident. They can access legal advice and support as needed.

Residents' rights under the Public Safety (Public Protection Orders) Act 2014 are respected – for example, to vote, to receive a benefit, to receive rehabilitative treatment, etc.

##### Opportunities to support release

The strategic focus and operational practices and policies reflect that rehabilitation is the primary pathway for risk to the public to be reduced and for residents to be released from detention. Residents are therefore able to engage in individualised and tailored, high quality, rehabilitation activities aimed at reducing their assessed risk to public safety.

Personalised management plans for each resident are completed and implemented, and regularly reviewed. Plans clearly set out a pathway for the resident to transition out of detention.

Residents are able to take periods of leave outside the facility, in accordance with the law. The systems and procedures to facilitate leave are implemented fairly and effectively.

## Appendix 1. Overview of OPCAT Legal Framework

The Optional Protocol to the United Nations (UN) Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) is an international human rights agreement that New Zealand ratified in 2007.<sup>21</sup>

OPCAT establishes international and national monitoring mechanisms to visit places where people are detained, with the overall aim of preventing torture and other cruel, inhuman or degrading treatment or punishment (ill treatment).

Monitoring places of detention, including through inspections, helps to ensure that people who are deprived of their liberty are treated humanely, and their rights are respected, protected, promoted, and fulfilled. It also ensures New Zealand is seen nationally and internationally as a good global citizen, adhering to agreed international human rights conventions.

The Crimes of Torture Act 1989 (COTA) was amended by the Crimes of Torture Amendment Act 2006 to enable New Zealand to meet its international obligations under OPCAT.

### Places of detention

Section 16 of COTA identifies a *'place of detention'* as:

*...any place in New Zealand where persons are or may be deprived of liberty*

Pursuant to section 26 of COTA, an Ombudsman holding office under the Ombudsmen Act 1975 (Ombudsmen Act) was designated a National Preventive Mechanism (NPM) by way of Gazette Notice for certain places of detention, including prisons, those otherwise in the custody of the Department of Corrections and public protection order residences.

Under section 27 of COTA, an NPM's functions include:

- to examine the conditions of detention applying to detainees and the treatment of detainees; and
- to make any recommendations it considers appropriate to the person in charge of a place of detention:
  - for improving the conditions of detention applying to detainees;
  - for improving the treatment of detainees; and
  - for preventing torture and other cruel, inhuman or degrading treatment or punishment in places of detention.

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<sup>21</sup> Both OPCAT and the UN Convention it supplements – (the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment) are on the UN Human Rights Office of the High Commissioner's [website](http://www.ohchr.org) ([www.ohchr.org](http://www.ohchr.org)).

## Carrying out the OPCAT function

Under COTA, Ombudsmen are entitled to:

- access all information regarding the number of detainees, the treatment of detainees and the conditions of detention;
- unrestricted access to any place of detention for which they are designated, and unrestricted access to any person in that place;
- interview any person, without witnesses, either personally or through an interpreter; and
- choose the places they want to visit and the people they want to interview.

Section 34 of COTA provides that when carrying out their OPCAT function, Ombudsmen can use their Ombudsmen Act powers to require the production of any information, documents, papers or things (even where there may be a statutory obligation of secrecy or non-disclosure) (sections 19(1), 19(3) and 19(4) OA). To facilitate the OPCAT role, the Chief Ombudsman has authorised inspectors to exercise these powers on their behalf.

### More information

Find out more about the Chief Ombudsman's OPCAT role, and read reports online:

[ombudsman.parliament.nz/opcat](https://ombudsman.parliament.nz/opcat).

## Appendix 2. Examples of evidence sources

- Observation of facility and daily activities
- Observation of interactions amongst staff and people in custody
- Observation of daily routines such as scheduled activities and provision of healthcare
- Observation of meetings and review of minutes
- Discussions with people in custody
- Discussions with whānau
- Discussions with staff, including volunteers and outside agencies or services, e.g. Chaplain
- Discussions with advocacy services
- Survey responses (for those who are sent a survey, eg people in custody)
- Review of people in custody files and clinical notes
- Review of policies and procedures
- Review of documentation such as complaint registers, use of force logs and incident reporting
- Review of post-incident debrief documents
- Review of staffing data, including rosters
- Review of staff training records
- Review of menus, activities schedules
- Review of any Ara Poutama Aotearoa documentation that may inform how expectations are being implemented



## Appendix 3. Domestic legislation & international conventions, standards, and guidance

These lists are not exhaustive:

**Table 1: New Zealand legislation, standards and guidance**

Full title	Type	Abbreviation
Crimes of Torture Act 1989	Legislation	COTA
New Zealand Bill of Rights Act 1990	Legislation	NZBORA
Human Rights Act 1993	Legislation	HRA
Corrections Act 2004	Legislation	Corrections Act
Corrections Regulations 2005	Legislation	Corrections Regs
Parole Act 2002	Legislation	Parole Act
Public Safety (Public Protection Orders) Act 2014	Legislation	PS (PPO) Act
Te Tiriti o Waitangi / Treaty of Waitangi	Treaty	Te Tiriti o Waitangi / the Treaty of Waitangi
Prisons Operations Manual	Guidelines	POM

**Table 2: International treaties, standards and guidelines**

Full title	Type	Abbreviation
UN Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment	Treaty	'Convention against Torture' or 'the Convention'
UN Optional Protocol to the Convention Against Torture and other Cruel, Inhuman, and Degrading Treatment	Treaty	OPCAT
UN Universal Declaration of Human Rights	Treaty	UDHR
UN International Convention on the Elimination of All Forms of Racial Discrimination	Treaty	CERD
UN International Covenant on Civil and Political Rights	Treaty	ICCPR
UN International Covenant on Economic, Social and Cultural Rights	Treaty	CESCR
UN Convention on the Rights of Persons with Disabilities	Treaty	UNCRPD
UN Convention on the Elimination of All Forms of Discrimination against Women	Treaty	CEDAW
UN Standard Minimum Rules for the Treatment of Prisoners	Standards	Nelson Mandela Rules

UN Standard Minimum Rules for the Administration of Juvenile Justice	Standards	The Beijing Rules
UN Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders	Standards	The Bangkok Rules
UN Body of Principles for the Protection of all Persons under Any Form of Detention or Imprisonment	Principles	BOP
UN Basic Principles for the Treatment of Prisoners	Principles	BPTP
UN Basic Principles on the Role of Lawyers	Principles	BPRL (('Havana Rules')
UN Body of Principles for the Protection of all Persons under Any Form of Detention or Imprisonment	Principles	BOP
UN Principles for Older Persons	Principles	
Yogyakarta Principles and Yogyakarta Principles plus 10	Principles	
Istanbul Protocol: Manual on the Effective Investigation and Documentation of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment	Protocol	The Istanbul Protocol
UN Declaration on the Rights of Indigenous Peoples	Declaration	UNDRIP
Kiev Declaration on Women's Health in Prison 2009	Declaration	Kiev Declaration
UN Office on Drugs and Crime (UNODC) Handbook Series	Guidelines	

