

EXECUTIVE SUMMARY

In the course of the 2017 visit the CPT's delegation reviewed the treatment of persons deprived of their liberty by the police and the conditions of detention of inmates in the country's two prison facilities. The delegation also examined the treatment of psychiatric patients at Dobrota Special Psychiatric Hospital and Podgorica Psychiatric Clinic, and conducted follow-up visits to Komanski Most Institute for People with Special Needs and Ljubovic Centre for Juveniles.

On the whole, the CPT's delegation received excellent co-operation during the visit from the Montenegrin authorities at all levels. That said, when it comes to the implementation of its previous recommendations, the report notes that several long-standing issues remain unaddressed. For example, the lack of implementation in practice of fundamental legal safeguards against ill-treatment for persons deprived of their liberty by the police; inappropriate and prolonged resort to mechanical restraint using metal hand- and ankle-cuffs to fixate inmates to beds in prison establishments; and continued overcrowding and poor conditions at Dobrota Special Psychiatric Hospital. On these latter two issues, the CPT's delegation made immediate observations at the end of the visit.

Law enforcement

The report notes some overall improvement since the 2013 visit in the treatment of persons detained by the police. Nevertheless, a significant number of allegations of physical ill-treatment by police officers were received. The alleged ill-treatment consisted of punches, slaps, kicks, baton blows and strikes with non-standard objects and the infliction of electro-shocks from hand-held electrical discharge devices. This was said to have occurred either at the time of apprehension or during the pre-investigation phase for the purpose of extracting confessions. The Committee concludes that persons deprived of their liberty in Montenegro still run an appreciable risk of being ill-treated by the police and that there is the need for the police senior management to enforce a multi-faceted strategy to tackle this phenomenon. Further, an analysis of the effectiveness of investigations into allegations of ill-treatment reveals a need to enhance the independence and resources of the Internal Control Department of the Ministry of the Interior. Recommendations are also made to remind prosecutors of the need to carry out comprehensive and timely investigations and to ensure that prosecutorial authorities are not hindered, as was the case following mass protests in October 2015, in investigating cases of alleged police ill-treatment.

In terms of the operational safeguards related to deprivation of liberty by the police, access to a lawyer remains problematic and is still not guaranteed from the outset of a person's deprivation of liberty. The report also points to difficulties for detained persons in receiving effective and prompt access to a doctor, in being able to notify a third party of their detention and in receiving clear information on their rights (in particular as concerns foreign nationals). The Committee also considers that it would be desirable for the National Preventive Mechanism (NPM) to explore in greater depth the manner in which persons are treated when apprehended and questioned by police officers.

The material conditions in police stations have not improved since 2013 and many cells are still not suitable for detaining persons for up to 72 hours due to structural deficiencies such as poor access to natural light, inadequate ventilation, poor conditions of hygiene and irregular provision of food to detained persons.

Prison establishments

The CPT notes with approval the efforts invested in the reform of the penitentiary system since 2013, in particular in relation to the development of a system of alternative sanctions. Nonetheless, clarity is required concerning the long-standing and urgently needed projects to build a prison in Bjelo Polije and a Special Prison Hospital in Podgorica.

The majority of persons met by the CPT's delegation indicated that they had been treated correctly by custodial staff. That said, the report refers to a significant number of allegations of physical ill-treatment consisting of slaps, punches and kicks as well as prolonged fixation to a bed with metal hand- and ankle-cuffs. Another long-standing and persistent problem is the level of serious inter-prisoner violence identified at the Remand Prison and Institute for Sentenced Prisoners (KPD), where the CPT recommends that a clear strategy at the national level be developed and enforced.

As regards material conditions, the refurbishment works conducted at all prison establishments had generally improved matters since the 2013 visit. However, some sections in both establishments continued to display serious deficiencies which should be remedied (e.g. poor hygienic conditions at Pavilion A of the KPD). Problematic levels of prison overcrowding (i.e. below 3m² per inmate in multiple-occupancy cells) were also observed in certain sections and the CPT calls upon the authorities to ensure that all prisoners are provided with a minimum of 4m² of living space each in multiple-occupancy cells.

In terms of activities and the regime on offer to inmates, the situation remained unsatisfactory, as less than 30 percent of sentenced persons at the KPD were involved in a purposeful activity. The CPT qualifies the regime on offer to remand prisoners as a "relic of the past" as inmates are confined to their cells for 23 hours a day and are offered no activities for months or even years on end. The authorities are called upon to put in place a comprehensive regime of out-of-cell activities for remand prisoners. The report also states that the lack of separation between sentenced juveniles and adult prisoners at the KPD must be remedied.

In relation to health-care services in prison, the CPT expresses its conviction that the transfer of this responsibility to the Ministry of Health could raise standards of service. The CPT also requests clarification regarding the long-standing project to construct a Special Prison Hospital. The health-care units in both establishments visited had recently been refurbished and they were adequately staffed. However, several deficiencies are enumerated, notably: the conduct of medical screening of inmates upon admission; cursory recording of injuries; an absence of confidentiality of medical examinations; the prolonged prescription of benzodiazepines to inmates; and the lack of psychological and rehabilitative activities offered to inmates suffering from drug addiction. Concrete action should be taken to address these issues.

The CPT also recommends that the custodial staffing levels be reinforced and that custodial officers cease to carry truncheons and pepper spray canisters in detention areas. Further, the report calls on the Montenegrin authorities to end the current practice of fixation of inmates in prisons and to end immediately the use of metal hand- and ankle-cuffs and chains to fixate inmates. Action should also be taken to improve the conduct of disciplinary proceedings and the manner in which sanctions are enforced, and consideration be given to ending the measure of solitary confinement as a disciplinary sanction for juvenile prisoners. The CPT also urges that steps be taken to improve contact with the outside world for remand prisoners and that the old-generation minivans for the transport of prisoners be progressively replaced.

Psychiatric establishments

At Dobrota Special Psychiatric Hospital, the chronic overcrowding led to several patients having to sleep on mattresses on the floor and to the discharge of other patients into the community for extended leave, contrary to clinical indications. Further, the situation was exacerbated by the fact that around one third of the patients did not require further hospitalisation but could not be discharged due to the absence of adequate community care facilities.

The CPT found that psychiatric patients were treated respectfully by staff. Nevertheless, it requests to be updated on the ongoing investigation by the Kotor District Prosecutor into a series of episodes of alleged ill-treatment of patients by staff.

In addition to the above-mentioned overcrowding, the material conditions in the chronic and acute wards were poor; they were dilapidated and in need of urgent repair. The CPT also found that the layout of the forensic ward remained carceral and did not provide an adequate rehabilitative and therapeutic environment for patients. Material conditions were also poor and impersonal at Podgorica Psychiatric Clinic.

In terms of treatment, the absence of a structured therapeutic approach and the penury of rehabilitative activities were evident at Dobrota Special Psychiatric Hospital, where treatment remained anchored to pharmacotherapy. The CPT is critical of the prolonged prescription of benzodiazepines and advocates that their prescription should be brought into compliance with the relevant standards of the Montenegrin Agency for Medicines and Medical Devices (CALIMS). The report also urges that a systematic policy on the conduct of autopsies be put in place, which is urgently needed given the significant number of patients who die at the Dobrota Hospital. Recommendations are also put forward to properly regulate the use of means of restraint in line with principles set out by the CPT, and to reinforce the safeguards surrounding the involuntary placement and treatment of patients.

Komanski Most Institution for Persons with Special Needs

The CPT noted the ongoing improvements introduced since 2008. The atmosphere at the institution was relaxed and staff displayed a caring attitude towards residents.

Although living conditions have improved there is still a need to improve the conditions of hygiene in rooms in Ward A and the state of repair of the sanitary facilities. The report acknowledges that a wide range of rehabilitative activities are on offer to residents and the Committee notes with approval the development since 2013 of detailed individual treatment plans.

In terms of health-care provision the CPT considers that the residents would benefit from the presence of a full-time general practitioner. The Committee is very concerned by the prolonged prescription of benzodiazepines and the provision of PRN (*pro re nata*) medication which should be better regulated. Finally, the report reiterates the CPT's previous recommendations that the reinforcement of safeguards on the placement of residents and their periodic review by judicial authorities have still not been implemented in practice.

Ljubovic Centre for Juveniles

The centre offered conditions of detention of a high standard to the various categories of juvenile residents accommodated. Further, staff were respectful of residents and no indication of inter-resident violence was detected. There is however a need to address certain deficiencies such as: the absence of screening for transmissible diseases; the preparation and distribution of medicines to juveniles by educators; and the lack of a clear policy on the use of the so-called time-out rooms for agitated residents. In addition, the Montenegrin authorities should ensure that self-harm is not regarded as a disciplinary offence and should abolish the practice of locking residents in their rooms for prolonged periods in conditions akin to solitary confinement. The CPT also considers that disciplinary sanctions should never lead to the total prohibition of family contacts and that any restrictions on family contacts should be applied only when the offence relates to such contacts.