

EXECUTIVE SUMMARY

In the course of the March/April 2022 visit to Italy, the CPT's delegation examined the treatment and the conditions of detention in which persons were held in four prison establishments. Particular attention was paid to those persons on restrictive regimes, the impact of overcrowding and the restrictions imposed in the context of the Covid-19 pandemic, the situation of female prisoners and the treatment of persons with a mental disorder.

In addition, the delegation examined the treatment of patients in psychiatric wards of four civil hospitals (*Servizi psichiatrici di diagnosi e cura* or SPDCs) and of non-autonomous elderly persons accommodated in two nursing homes (*Residenze sanitarie assistenziali* or RSAs). Special attention was paid to the use of means of restraint and seclusion of patients/residents in these establishments. The delegation also examined the treatment of persons deprived of their liberty by law enforcement agencies.

The co-operation received throughout the visit, from both the national authorities and staff at all the establishments visited, was excellent.

Law enforcement agencies

The vast majority of persons met by the delegation who had recently been deprived of their liberty by officers of several law enforcement agencies (that is, State Police, Municipal Police and *Carabinieri*) indicated that they had been treated correctly. However, the delegation did receive a number of allegations of physical ill-treatment (including excessive use of force) by law enforcement officials and in particular by State Police and *Carabinieri* officers. The Italian authorities should ensure that police officers are properly trained and equipped to carry out apprehensions using no more force than is strictly necessary. The introduction of body worn video cameras might also be considered.

The CPT reiterates the importance of ensuring that all persons deprived of their liberty are able to benefit from the fundamental safeguards against ill-treatment: the right to inform a relative or third party of their detention; the right of access to a lawyer; the right of access to a doctor; and the right to be informed of these rights in a language the person understands.

The conditions of detention in the law enforcement establishments visited were generally acceptable for short stays. Nevertheless, action is required to ensure that the cells in these facilities are cleaned after each use and the blankets changed. Also, every cell should have artificial lighting adequate for reading purposes and it would be preferable for all cells to be equipped with a washable mattress.

Prison establishments

Overcrowding is a long-standing concern to the CPT. The Committee has noted that the overall size of the Italian prison population decreased significantly as a result of the unprecedented situation caused by the Covid-19 pandemic. However, with the return to a normal functioning of the judiciary, the prison population has begun to rise once again and, at the time of the visit, stood effectively at 114% of the official capacity of 50 863 places. The CPT reiterates that addressing the issue of overcrowding requires a broader coherent strategy, covering both admission to and release from prison, to ensure that imprisonment really is the measure of last resort.

The CPT delegation received a few allegations of ill-treatment of prisoners by staff in each of the establishments visited. However, the vast majority of persons met in the prisons visited stated that custodial staff behaved correctly towards them. On the other hand, many accounts of inter-prisoner violence and intimidation were received in the prisons visited. The Italian authorities need to put in

place a comprehensive strategy for preventing inter-prisoner violence and intimidation through *inter alia* the promotion of a real dynamic security (*sorveglianza dinamica*) approach by prison staff.

To this end, action needs to be taken by the Prison Administration (DAP) to develop a real dynamic security approach which should complement the positive open cell regime for medium security prisoners, enhancing control and security and rendering the work of prison officers more rewarding. As part of this approach, prison officers should develop as integrated players in the provision of purposeful activities designed to prepare prisoners for reintegration into the community. Moreover, such an approach will necessitate prison officers being permanently placed within the wings and enable them to have a more pre-emptive approach towards tackling intimidation and violence.

With respect to restrictive measures and separation regimes, the CPT calls for a series of steps to be taken, notably: the abolition of the measure of court-imposed solitary confinement under Article 72 of the Criminal Code known as *isolamento diurno*; the review of the separation measure under Article 32 of the Prison Regulations to ensure placement and renewal decisions are fully reasoned, an appeal to an independent body is in place and a programme of individually tailored activities is on offer; and the review of the management of prisoners subject to a “41-bis” regime, in line with CPT recommendations, which the Committee considers could be achieved through the adoption of a revised Circular issued by the DAP.

As regards material conditions, the CPT recommends that greater efforts be invested in all the prisons visited to ensure that *inter alia* cells are properly equipped, windows repaired, radiators function, the pervasive green mould in the common shower rooms is addressed and the provision of hot water improved. Further, all persons held in prison must be provided with a minimum standard of living conditions that guarantees their dignity; every person should be provided with a regular supply of personal hygiene and cleaning products as well as clean bedding and a pillow. In addition, the quality of the food in prisons should be improved.

While the provision of activities was still in the phase of being developed following the Covid-19 pandemic, there is clearly a need to invest further energies in the range of programmes on offer to prisoners to provide them with a structured day of activities.

The provision of healthcare services in the prisons visited was very good. Nevertheless, several specific recommendations are made to improve the confidentiality of medical examinations, the way insulin injections are performed at Monza Prison and the recording of injuries.

Likewise, the psychiatric healthcare screening and staffing was very good. However, prisons do not offer a therapeutic environment and it is not appropriate for persons who require specialised psychiatric treatment, such as REMS patients, to be accommodated in prison. In addition, it is important to provide prison officers working in units which accommodate persons with mental disorders with appropriate training, notably inter-personal skills. More specifically, at Regina Coeli Prison, the integrated mental and substance use disorder team should be provided with the necessary working conditions, and in both this prison and at Lorusso e Cutugno Prison, persons placed under observation for a mental disorder should be accommodated in the mental health unit under the direct supervision of healthcare staff. Further, persons assessed as being at high risk of committing an act of self-harm or suicide should be accommodated in safer cells.

Regarding the female sections within Milan San Vittore and Turin Lorusso e Cutugno Prisons, the CPT makes several recommendations to improve the material conditions and, notably, to provide a structured programme of activities for women with a mental disorder. Further, prison staff should be trained on the use of trauma informed practices to enable them to support and manage women with mental disorders and other traumas.

More generally, the Italian authorities should take active steps to develop a gender specific approach towards women in prison.

As regards transgender persons in prison, the CPT found that there was no clear policy or guidelines in place for their management and that the transgender women met were often accommodated on wings where their specific needs were not catered to. Action is required to address these important deficiencies.

Finally, the fairness of the disciplinary procedures should be enhanced and newly-arrived persons should be offered one short phone call to a family member as part of the prison admission procedure.

Psychiatric establishments

No credible allegations of physical ill-treatment of patients by staff were received at the SPDCs visited although some sporadic episodes of verbal offences and derogatory comments by nurses and nursing assistants (*Operatori Socio Sanitari* or OSSs) were reported.

The SPDCs visited offered in general satisfactory living conditions in terms of living environment and level of hygiene. That said, at Rome San Camillo SPDC the communal room was in a state of neglect and the overall level of hygiene in the ward left a lot to be desired. Further, the CPT recommends that the Italian authorities reflect on the possibility of designing single rooms in future SPDCs.

No sign of excessive resort to psychopharmacological care was found by the CPT's delegation at the SPDCs visited. That said, the CPT found a penury of rehabilitative, recreational and therapeutic activities on offer to patients which was partly due to the longstanding Covid-19 restrictions that limited the access of various personnel to the SPDCs. In the CPT's view, the treatment of patients hospitalised in SPDCs should be more variegated and diversified.

None of the SPDCs visited possessed an operational outdoor facility and in principle patients had access to fresh air only in secured terraces at the respective wards. The CPT recommends that the Italian authorities engage in a serious reflection to the necessity of equipping SPDCs with adequate outdoor facilities.

The report takes note of the fact of the efforts invested by the Italian authorities in view of the reduction and possible abolition of the practice of applying mechanical restraint to patients hospitalised at SPDCs. However, the findings of the CPT in the course of the 2022 visit indicate that patients with mental health disorders in a serious state of agitation were frequently submitted to mechanical restraint for periods of up to nine days with no changes to their legal status (in terms of initiation of a TSO procedure). Although the measure was in principle adequately monitored and recorded by healthcare staff of the SPDCs, the CPT retains concerns as to the unclear legal framework regulating its application as well as its excessive duration and reiterated nature. At the Melegnano SPDC the CPT was concerned about the administration of chemical restraint of an anaesthesiologic nature to agitated patients.

The CPT considers that the Italian authorities should clarify the legal safeguards surrounding the use of means of restraint in a SPDC setting and that a TSO procedure be initiated any time a voluntary patient is fixated.

As regards the legal safeguards afforded to psychiatric patients the CPT notes with concern that the procedure in view of the imposition of a TSO remains of a standardised and repetitive format and that the guardianship judge never meets the patients in person. In addition, patients continue not to be informed of their legal status and avenues to lodge complaints and information leaflets are either missing or of an incomplete nature.

Social care establishments

The CPT considers that in the light of the high level of segregation due to the prolonged and indefinite Covid-19 related restrictions and the lack of viable alternatives in the community residents of the two RSAs visited could be considered as de facto deprived of their liberty.

The report provides an accurate description of the context in relation to the application of the protective and preventive measures applied in respect of RSA residents in the context of fight against the Covid-19 pandemic. In particular, the restrictions in place at the two RSAs visited since February 2020 (notably in terms of absence of access to fresh air, reduced rehabilitative and recreational activities and family visits) had gradual and deleterious effects on the residents' mental and somatic healthcare state notably at the Pio Albergo Trivulzio RSA. The Italian authorities should take urgent measures to reduce the restrictions in place and to ensure a less restrictive interpretation of the applicable regulations in the future in the light of clear scientific evidence and special epidemiological circumstances.

Living units at both RSAs were in principle in a good state of repair, properly equipped, spacious, well ventilated and the level of hygiene was impeccable. The CPT found certain deficiencies at Istituto Palazzolo consisting of an overall hospital-like design, insufficient ratio of sanitary facilities per resident and depersonalised and poorly decorated communal rooms.

The levels of staff assigned to the relevant living units of the RSAs visited was in line with the criteria foreseen by the regional legislation. That said, a reinforcement of the nursing and OSS component at the Istituto Palazzolo is recommended in order to better assist residents when eating and for supervising their personal hygiene. Further, the resort to outsourced personnel should be limited in order prevent their frequent turnover.

The CPT gained a very good impression of the level of health care provided to residents at both RSAs. That said, the level of physiotherapeutic interventions should be increased.

As regards the resort to means of restraint in respect of RSA residents (i.e. bed rails, pelvic belts and mobility lap trays), the report indicates that there was no excessive and disproportionate resort to their use and recommends that this specific practice be regulated at the national level in an uniform manner due to its potential intrusive and abusive nature.

The report also recommends that guardianship judges from the competent territorial courts pay regular visit to RSA residents under a measure of support administration (*amministrazione di sostegno*). The Committee also welcomes the efforts invested by the Italian authorities in assisting elderly persons with limited autonomy in formulating an individual project of life which includes viable alternatives to the placement in a residential facility.