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**Follow-up report  
of the Finnish Government in response  
to the report of the European Committee  
for the Prevention of Torture and Inhuman  
or Degrading Treatment or Punishment (CPT)  
on its visit to Finland**

**from 7 to 17 June 1998**

The Finnish Government has requested the CPT to publish this follow-up report. The CPT's report on its visit to Finland (CPT/Inf (99) 9) and the interim response of the Finnish Government (CPT/Inf (99) 14) were made public respectively on 11 May and 9 November 1999.

The Appendix (only available in Finnish) to which the follow-up report refers may be obtained from the Committee's Secretariat:

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Strasbourg, 7 September 2000



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## **Follow-up Report of the Finnish Government – Response to the Report of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) on Its Visit to Finland on 7 – 17 June 1998**

### **Introduction**

Below is the follow-up report of the Finnish government. It is a response to the report of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) on its visit to Finland on 7 – 17 June 1998.

This follow-up report complements the information provided in the interim report of the Finnish government submitted to the CPT in November 1999. It uses the same headings as Appendix I of the CPT report and the interim report. The page numbers refer to the pages in the English interim report.

### **A. Police and Frontier Guard Establishments**

#### **1. Preliminary remarks**

##### **Reply to paragraphs 10, 19 and 22 (p. 3 of the interim report)**

The term of the working group considering the detention of people on the basis of the Aliens Act has been extended to 31 December 2000. In addition, its commission has been expanded. In this stage of the work it looks obvious that the placing of detainees in particular facilities requires more extensive amendments to the Aliens Act than what was expected when the working group was appointed. The group is *inter alia* to draft special provisions on the treatment of people detained pursuant to the Aliens Act.

#### **2. Ill-treatment**

##### **Reply to paragraph 12 (p. 5 of the interim report)**

The pre-trial investigation concerning the four named officials reported for ill-treatment has been completed. Having considered it, a district prosecutor of the Prosecutor's Office of the Helsinki State Administrative District decided to waive prosecution as regards all four on 1 December 1999.

The reported officials have contested all charges against them. The district prosecutor found that this contestation was supported by the accounts of those heard during the pre-trial investigation. Additionally, no further evidence of illegal or otherwise reprehensible action on the part of the reported officials was discovered in the pre-trial investigation.

The decision to waive prosecution has been sent to all parties and to the Refugee Advice Centre.

### **3. Conditions of detention in police and frontier guard establishments**

#### **Reply to paragraph 17 (p. 6 of the interim report)**

In 2000 the yearly spring-clean of the Helsinki Police Prison takes place at the end of June and beginning of July. At the same time the surfaces of the cells are renovated, *i.e.* the walls and ceiling are painted and the cells floored. The outdoor facilities are painted and the structures renewed.

The lighting of the cells has been improved with the aid of bigger lamps. However, the increased lighting has led to complaints about blinding.

#### **Reply to paragraph 22 (p. 8 of the interim report)**

The instructions of the Police Department of Lappeenranta State Administrative District for the outdoor exercise of remanded and arrested people has been amended in accordance with the recommendations of the CPT.

In 1999 washable and fireproof mattresses were acquired for people taken into custody because of intoxication.

The possibility of remand prisoners to watch a television that they bring with them is implemented in 2000. The work required is taken care of by the State Real Estate Administration, which has informed that it will do the work before 31 August 2000. The possibility to watch television has, however, already been implemented through interim arrangements, *e.g.* extension cords. Nevertheless this poses a particular security threat to the clients and personnel – thus it has not always been possible to apply the interim arrangements.

Structural changes in order to increase natural light in the cells are not possible because of the considerable costs connected with the work.

A long-term plan is to close the police prison and other detention facilities of the Imatra Police Department, and to transfer these duties to the Lappeenranta Police Department. If this plan is carried out, there is a good chance to receive enough funding for the complete renovation of the police prison in Lappeenranta.

#### **Reply to paragraph 20 (p. 9 of the interim report)**

A renovation of the Detoxification Centre of the Helsinki Police Department was begun according to plan in late 1999. The main work was completed by 1 May 2000.

In connection with the renovation the floors of the detoxification rooms were renewed and the damage caused by dampness addressed. The walls and ceilings were repaired and painted. The lighting in the rooms and the camera surveillance equipment was also renewed.

The common areas and corridors of the Detoxification Centre were similarly renovated. New air-conditioned lockers for storing the possessions of people taken into custody were installed. Air-conditioned lockers were also installed for the personnel.

The air-conditioning equipment of the Centre was cleaned and adjusted. The circulation of warm air was prevented – thus the bad smells in the system no longer return to the rooms but are led outside. In late June 2000 a new effective machine was added to the air conditioning. This machine further improves the system. In order to eliminate the heat produced by the monitors in the surveillance room a new refrigeration machine was installed.

#### **4. Safeguards against the ill-treatment of persons deprived of their liberty**

##### **Reply to paragraph 31 (p. 12 of the interim report)**

The supreme police command has considered the issuing of separate instructions concerning the obligation to inform every apprehended person of the right of access to counsel. However, as the legal provisions are clear cut and explicit and as this issue already is emphasised in the training of police officers, separate instructions were considered superfluous.

The right of access to counsel and informing about it are nevertheless an important detail of the pre-trial investigation, and its importance will continuously be highlighted. Therefore, the supreme police command has decided to internally inform the police and to advise everyone involved in training and in other police activities to pay close attention to the fact that a suspect has the right to counsel immediately after apprehension, and that the suspect shall be informed of this right.

##### **Reply to paragraph 37 (p. 13 of the interim report)**

In principle a conceptual difference has to be made between a detoxification centre and a place where intoxicated people are kept. Even after the renovation of the Helsinki Detoxification Centre, it is not an actual detoxification centre including all social and health services.

A detoxification centre proper with ten beds will separately be built next to the Helsinki Detoxification Centre by the end of this year. According to the plans the entrance will be the same to both, and they will have a common entrance hall. A door will connect the two facilities.

Until the completion of the detoxification centre, the Police Department will continue its established cooperation with the Social Welfare Office. A social worker and two nurses of the Office work full time at the Helsinki Detoxification Centre. The services of a doctor are arranged on a “visit basis” and by taking clients to a public health centre.

Considering the amount of medical personnel it has not been possible to arrange medical services at the Centre round-the-clock. This lack will be remedied by the end of this year with the completion of the detoxification centre. Then the clients of the detoxification centre proper and of Helsinki Detoxification Centre can be offered medical services 24 hours a day. A particular working group of the health-care authorities is considering the level of services to be provided (doctor/nurse).

**Reply to paragraph 37 (pp. 13-14 of the interim report)**

The experiences of the bio mattress experiment in Vantaa were positive. In this experiment the vital signs of several intoxicated persons taken into custody were measured with a so-called SCSB probe in the mattress. This information was relayed to a computer through wires. A goal of the experiment was to collect enough information on medically determinable changes in *inter alia* pulse and respiration in order to determine emergency and limit values. For practical surveillance these limits are a reference for a guard when to personally control the state of a person.

Before taking a final decision to extensively introduce this method, the functionality of the SCSB method in a wireless mode is also tested (so called distance surveillance). A system for the distance surveillance of intoxicated persons is to be tested in the area of Kajaani-Sotkamo. The goal is to transfer sound and image together with other data. This, however, is still connected with technical problems related to data transfer.

After these problems have been solved the initiation of a test will be considered either with the SCSB mattress or with some other system relaying corresponding information.

The police supreme command is working on a legislative amendment, which would lay down in law the technical and distance surveillance of intoxicated persons in police custody.

**B.Prisons**

**2. Ill-treatment**

**Reply to paragraph 61 (pp. 20 – 21 of the interim report)**

Intraprisoner violence is a problem tackled through several means. However, this violence is largely concealed and does not always come to the attention of the guards. Therefore in addition to reporting and recording investigations and disciplinary actions, the health-care personnel of the Department of Prison Administration has begun to record and report suspected instances of violence from the beginning of 2000. A form filled out by the prison health-care personnel has been adopted for this purpose (appended). By 23 May 2000 the Department of Prison Administration has received altogether 30 reports, most of them from the central prisons. Most injuries have been bruises and contusions. On the basis of these reports the Department tries to identify general means to prevent violence.

Additionally, on 22 October 1999 the Department of Prison Administration appointed a working group to formulate an action policy in order to decrease 1) intraprisoner violence, 2) the threat and violence against prison personnel, and 3) mental violence within the working community. The working group will submit an interim report in early June 2000. This report takes up the violent behaviour of the prisoners. Intrapersonnel mental violence will be considered in the final report that will be submitted by the end of 2000.

This work is based on the assumption that the concept of violence includes both physical and mental violence. An incident is defined by subjective experience. This experience is then complemented with observations and the consequences of the incident.



In addition to a general level the working group approaches the issue from the point of view of prevention, reaction, investigation, consequence and after-treatment. According to the group a decrease in violence requires measures in all areas of prison administration.

The working group has considered *inter alia* the following factors that influence or may be used to influence violence: prison culture, contents and organisation of prison functions, common personnel praxis, control and analysis of information about incidents, personnel quantity and quality, use of intoxicants, knowing the prisoners, surveillance, security equipment, alarm systems, assisting equipment, and ward size. These factors are going to be considered further in the guidelines for an action policy.

### **3. Conditions of detention**

#### **Reply to paragraph 67 (p. 23 of the interim report)**

The west night-cell wing of Helsinki Central Prison will be completed in early 2001. Thereafter the renovation of the east and north cell wings will be begun. The planning of this renovation has already been initiated.

The construction of a new provincial prison is taking place in Vantaa. This prison will be ready in spring 2002, and it will replace Helsinki Provincial Prison. In addition, the psychiatric unit currently operating in the east night-cell wing of Helsinki Central Prison will be transferred to the new provincial prison.

### **4. Health care**

#### **Reply to paragraph 83 (p. 27 of the interim report)**

It has not yet been possible to fill the part-time office of a psychiatrist in Riihimäki. The plan is to establish a joint full-time office for Riihimäki Central Prison and Kerava Juvenile Prison.

### **5. Other issues related to the CPT's mandate**

#### **Reply to paragraph 95 (pp. 31-32 of the interim report)**

An amendment granting prisoners a more extensive right of appeal is being prioritised. The commission of the imprisonment committee was extended in June 2000 to include the drafting by the end of its term, i.e. 31 March 2001, of a proposal for an amendment to the prisoners' right of appeal in disciplinary matters. In addition, the committee is to draft an interim report by the end of October 2000 including a proposal on the prisoners' right of appeal at least as regards such discretionary administrative decisions that, in fact, constitute a prolonged term of imprisonment in a penal institution.

## **C. Muurola Psychiatric Hospital**

### **2. Ill-treatment**

#### **Reply to paragraph 119 (p. 37 of the interim report)**

From the beginning of 2000 the statistical practices of the supervising authorities have been standardised. The state provincial offices and the National Board for Medicolegal Affairs record complaints in greater detail, and complaints about psychiatric treatment may be separated from other health care. The nature and amount of the sanctions also appear in the new statistics. The first reports according to the new system will be available in summer 2000. Another goal is to effectively publicise decisions.

The National Board for Medicolegal Affairs has informed that this summer it will retroactively go through the complaints submitted to it in 1997 – 1998, and submit information on the psychiatric share and on the consequences. This information will be submitted to the CPT as soon as possible.

