



**HM Inspectorate of Prisons and HM Inspectorate of Constabulary** 

# **EXPECTATIONS**

## FOR POLICE CUSTODY

Criteria for assessing the treatment and conditions for detainees in police custody



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#### Introduction

In 2008 HM Inspectorate of Prisons and HM Inspectorate of Constabulary began a programme of joint inspections of police custody suites in England and Wales. These inspections form part of a wider programme of joint work by criminal justice inspectorates and contribute to the United Kingdom's compliance with its international obligations to ensure regular independent inspection of all places of custody.<sup>1</sup>

In line with standard inspection methodologies, the two inspectorates have devised detailed inspection criteria, or *Expectations*, against which to assess the practice found in police custody. These provide a transparent basis on which inspectors will assess the treatment and conditions of those detained in police custody. They also offer a guide to senior police officers and police authorities as to the standards that the two inspectorates expect to find in these settings and the sources of information and evidence upon which they will rely.

Expectations are informed by, and referenced against, the Police and Criminal Evidence Act (PACE) codes (1984) and Home Office guidance on the safe detention and handling of persons in custody (2006). However, they are also informed by the experience of two inspectorates over many years. More fundamentally, they are also informed by, and referenced against, international human rights norms, a task for which we are grateful to the International Centre for Prison Studies. Ultimately, *Expectations* are set at the level determined by the independent Chief Inspectors of Prisons and Constabulary in order to ensure best practice.

The development of Expectations has also benefited greatly from the assistance of an expert stakeholder group, including representatives from a wide range of organisations, including: the Association of Police Authorities, the Independent Custody Visiting Association, the Independent Police Complaints Commission, the Association of Chief Police Officers, the Police Superintendents' Association, the Police Federation, the National Policing Improvement Agency, the Home Office, INQUEST, the Care Quality Commission and representatives of forensic medical examiners.

<sup>1</sup> Optional Protocol to the United Nations Convention on the Prevention of Torture and Inhuman and Degrading Treatment

#### Introduction

Expectations provide the essential basis for robust, independent and evidence based assessment of the treatment and conditions of those detained in police custody in England and Wales. We hope that they will also assist police forces and police authorities by offering a clear benchmark against which they can judge their efforts to achieve appropriate standards in this sensitive and important custodial setting.

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# Strategy

#### Force wide

There is a strategic focus on custody that drives the development and application of custody-specific policies and procedures to protect the wellbeing of detainees.

### **Expectations**

#### 1. There is a policy focus on custody issues at a chief officer level.

Evidence	References
<ul> <li>Chief officer: ask him/her if the policy focus includes:</li> <li>developing and maintaining the custody estate. Ask about the estates strategy, and specifically how it relates to his/her custody suites</li> </ul>	PACE Codes of Practice Code C 3.7 ICCPR 10 (1)
<ul> <li>staffing of custody suites with trained staff</li> </ul>	CCLEO 2
<ul> <li>managing the risks of custody</li> </ul>	BOP 1, 4, 5
<ul> <li>meeting the mental and physical health and wellbeing needs of detainees</li> </ul>	POR 20
<ul> <li>meeting the diverse needs of detainees</li> </ul>	
<ul> <li>working effectively with colleagues in the health service, immigration service, youth offending service, criminal justice teams, CPS, courts and other law enforcement agencies.</li> </ul>	
Ask about the Police Authority oversight: how effective and proactive is it? Ask if there are independent bodies that have oversight and what impact they have.	
Documentation: check that:	
<ul> <li>the business plan for the force covers custody and reflects the elements listed above</li> </ul>	
<ul> <li>there is a custody link into the strategic documents</li> </ul>	
<ul> <li>there is a chief officer lead for safer detention and handling of persons in police custody</li> </ul>	
<ul> <li>there is a Police Authority member with responsibility for custody</li> </ul>	
<ul> <li>there is an effective custody visitors scheme</li> </ul>	
• there is effective liaison between the police and local	

services, for example the local youth offending team

manager and health services.

There is an effective management structure for custody that ensures that
policies and protocols are in place and implemented and that there are
mechanisms for learning from adverse incidents, rubbing points or complaints.

Evidence References

**Chief officer:** ask him/her what quality assurance procedures are in place. Ask what procedures exist to ensure annual inspection, audit findings and observations by the independent custody visitors are considered and how actions are implemented. Ask how s/he ensures the policies and procedures are adhered to and how s/he satisfies him/herself that there is a corporate approach.

ICCPR 10 (1) CCLEO 2 BOP 1, 4, 5 POR 20

**Documentation:** check there are policies and procedures for:

- delivering healthcare and working with partners in local community mental health teams
- · drug testing and treatment
- a duty solicitor scheme
- an 'appropriate adult' scheme
- detainee escort
- bail management
- enhanced Criminal Records Bureau checks for all staff
- the taking, storing, tracking, auditing and destruction of DNA and forensic samples. This should be in line with ACPO policy.

#### Check:

- the minutes of custody manager meetings for evidence that practices are monitored and that there is a mechanism for responding to and learning from adverse incidents, complaints or investigations, which results in improved practice. Ensure this includes links with the healthcare provider regarding healthcare complaints
- that there are arrangements for ensuring a sufficient and appropriate pool of trained staff in custody suites, including provision of training, succession planning and gender balance of staff
- staff training records and that staff have access to training materials and IPCC 'learning the lessons' circulars.

#### 3. The use of force is monitored locally and at a force-wide level.

# Evidence References Chief officer: ask him/her what the procedures are for monitoring the use of force at both local and force-wide level and whether use of force is monitored by: ICCPR 10 (1) CCLEO 3 BPUF 1

- ethnicity
- nationality
- gender
- age
- disability
- religion
- sexual orientation
- location
- the officer involved

Ask whether patterns and trends in use of force have been identified and what action has been taken

#### **Documentation:** check:

- the availability of management information on trends and patterns
- how often management information on trends and patterns is fed back to individual forces/boroughs and who receives it
- the outcome of any identified patterns/trends in usage.



# Treatment and conditions

# Individual custody suites

Detainees are held in a clean and decent environment in which their safety is protected and their multiple and diverse needs are met.

### **Expectations – respect**

# 1. Detainees are transported in vehicles that are safe, secure, clean, comfortable and appropriate to any specific needs.

Evidence	References
<b>Escort and custody staff:</b> ask them about local procedures for transporting detainees.	ICCPR 10 (1) CCLEO 2
<b>Observation:</b> check the quality of transportation as detainees are picked up or dropped off. Does the type of transportation take account of a detainee's specific needs, such as pregnant women and those with disabilities?	BOP1
<b>Detainees:</b> ask about their escort experience and what they thought of the escort vehicle.  Cross-reference with the diversity inspector.	

### 2. Custody staff are respectful in their day-to-day working with detainees.

Evidence	References
Custody staff: ask staff to describe their interaction with	ICCPR 10 (1)
detainees.	CCLEO 2
Observation: check:	BOP 1
<ul> <li>how staff talk about detainees in their care</li> </ul>	POR 20
<ul> <li>how staff talk to detainees</li> </ul>	
<ul> <li>whether staff use first names or a title with a family name when referring or speaking to detainees</li> </ul>	
• the interactions between staff and detainees.	
<b>Detainees:</b> ask if they feel they have been treated respectfully by staff.	

- 3. The diverse needs of detainees are met. This includes the specific needs of:
  - women
  - black and minority ethnic detainees
  - · foreign nationals
  - those with a disability
  - immigration detainees
  - those with different religious needs
  - older detainees
  - · detainees of all sexualities
  - · transgender detainees.

Evidence	References
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#### Custody sergeant and staff: ask them:

- if they are aware that the impact of detention on women, for instance, is different to the impact on men for example, they are more likely to be primary carers and are at greater risk of self-harm. Does the level of observation and support take this into account?
- how the diverse needs of detainees are identified and assessed
- how they meet the diverse needs of their detainees, for example women, black and minority ethnic detainees, those of different religions, detainees with disabilities, those whose first language is not English, immigration detainees, etc
- if staff feel equipped to deal with detainees' diverse needs
- what the procedures are for transgender detainees.

**Documentation:** check the custody records for evidence that the diverse needs of detainees are correctly identified and catered for, for instance are searching procedures sensitive to gender, age, different religions, etc?

#### **Observation:** check that:

- the booking in desk is of an appropriate height and allows sufficient privacy to disclose any vulnerabilities or for confidential information to be passed on
- reasonable adjustments have been made to the facilities to account for the needs of detainees with disabilities as defined under the DDA (2005).

**Detainees:** speak to any detainees in custody about their diverse needs and whether they feel that these have been met.

CERD 2 DEDRB 2 DHRIN 5 DRM 4 CEDAW 2 BOP 5 DDA RRAA

**POR 20** 

# 4. All custody staff recognise and understand the distinct needs of children and young people and treat them accordingly.

Evidence	References
Custody sergeant: ask him/her:  • how s/he makes a decision about who is an appropriate adult  • at what point s/he would call an appropriate adult.  Staff: ask them:  • what child-centred training they have had  • whether any of the custody staff are trained in child welfare  • if all custody and healthcare staff, including agency staff, have an enhanced Criminal Records Bureau check  • if they feel they have the skills and competence to deal with detainees under the age of 18	PACE Codes of Practice Code C 3(b) Detained persons – special groups CRC 3, 37 RPJDL 18 CCLEO 2 BOP 5 (2)
<ul> <li>what their awareness of child protection issues is and what they would do if they were concerned about the safety or welfare of any young person who has come into custody</li> <li>how they ensure children and young people are separated from Schedule 1 offenders and those who might pose a risk to them</li> <li>whether all girls under the age of 18 remain in the care of a woman during detention as required under section 31 of the Children and Young Persons Act 1933.</li> </ul>	
Documentation: check:	
<ul> <li>that there is a separate policy for the detention of children and young people that refers to:         <ul> <li>the limited use of restraints</li> <li>location in close proximity to the custody desk, where possible, for observation purposes</li> <li>how and by whom strip-searches are conducted</li> <li>the young person being looked after until the appropriate adult arrives</li> <li>the possibility for the relative, guardian or appropriate adult to remain with the young person during waiting</li> </ul> </li> </ul>	
periods o separation from adults at all times, including in showers and in the exercise yard	

#### **Section 2** – treatment and conditions

- young people's custody records for recognition of their distinctive needs
- the recording of any child protection concerns
- custody records to ensure that young people are not held overnight unless there is an outstanding warrant, there is an investigation into a serious offence and/or a need to present at court the following morning.

**Observation:** observe how under 18s are treated while in custody.

#### Expectations – safety

#### Custody staff have the skills and competencies to manage detainees at risk of harm to themselves.

Evidence	References
<ul> <li>Custody sergeant and staff: ask them:</li> <li>about the normal procedure for assessing the risk detainees pose to themselves. Do assessments take into account the different risks they pose to themselves, for example, attempted suicide, drugs, medical conditions, alcohol?</li> <li>if they are aware of the paperwork that may come in with a detainee who has transferred from prison, for example an assessment, care in custody and teamwork (ACCT) document</li> <li>if a risk assessment is completed and how this is done</li> <li>what happens if a detainee is unwilling or unable to cooperate with the risk assessment</li> <li>how they manage high numbers of detainees coming into custody at peak times</li> <li>what the arrangements are for monitoring those assessed as a risk</li> <li>if they understand the importance of regular monitoring and rousing, and that rousing means eliciting a verbal or physical response</li> <li>what reliance is given to the use of CCTV and life signs monitoring, rather than physical checks</li> <li>if all staff carry keys to cells and ligature knives at all times</li> <li>if cells are checked thoroughly for any unauthorised items between use</li> </ul>	PACE Codes of Practice Code C 3.6– 3.10 SDHP Section 2 UDHR 3 ICCPR 10 (1) CCLEO 6 POR 20

- whether the relevant 'learning the lesson' reports from the IPCC have been taken into account
- if they feel competent in managing those at risk of harm to themselves
- if prisoners' escort record (PER) forms are completed for all detainees to be transported, by whom and what information is passed on to escorting staff about those considered a risk to themselves

#### **Documentation:** check:

- the records of risk assessments. Is it clear that the custody officer has asked the detainee a series of questions and noted their responses, or did they make an assessment themselves?
- staff training records. Are staff trained according to the safer detention and handling guidance? How many staff are trained? How often is the training updated?
- the records for evidence that cells are safety-checked each day for self-harm risks, as well as checks between occupants
- the recording of incidents of self-harm and the recorded actions and outcomes.

#### **Observation:** observe:

- assessment procedures on reception
- whether actual checks are carried out at the cells
- whether the CCTV is working, whether it records and for how long the recordings are kept
- staff handovers for the sharing of risk information
- cells and whether they are checked by staff for any unauthorised items between occupants
- the skills and competence of staff.

**Detainees:** ask those identified as at risk what level of attention they have received from custody staff.

# 6. Custody staff have the skills and competencies to deal with detainees at risk of harm to others.

Evidence	References
<ul> <li>Staff: ask them:</li> <li>if escort staff alert them if they are bringing a violent detainee into the custody suite and what arrangements they make for clearing the reception area of people and hazards/ weapons in preparation for their arrival</li> <li>how they would assess a detainee's risk to others</li> <li>if they access ViSOR for risk information</li> <li>what the procedures are for managing that risk.</li> <li>Documentation: check:</li> <li>the policy on cell sharing. Is cell sharing only authorised in exceptional circumstances? Does it ensure detainees are not placed in cells together unless a risk assessment indicates it is safe to do so? Do risk assessments include whether the detainee has previous convictions for racially aggravated offences?</li> <li>a sample of risk assessments, if possible.</li> <li>Observation: check:</li> <li>the skills and competence of staff</li> <li>that detainee's offence details are not on display for others to see.</li> </ul>	PACE Codes of Practice Code C 3.6– 3.10 and 8.1 SDHP Section 2 UDHR 3 ICCPR 10 (1) CCLEO 6 POR 20

### Expectations – use of force

#### Force is only used within a custody suite as a last resort and is proportionate and lawful.

Evidence	References
Custody sergeant and staff: ask them:	SDHP
<ul> <li>how they define the use of force</li> </ul>	section 4
• what methods of de-escalation they use before force is	ICCPR 10 (1)
applied	CCLEO 3
• in what circumstances they would apply force	BPUF 1, 15
what methods of restraint they think are most appropriately applied in the enclosed custodial setting	POR 20

#### **Section 2** – treatment and conditions

- if there have ever been circumstances in which detainees have been handcuffed while in secure areas, other than when they pose a risk to other detainees or staff
- if the dangers of and potential injuries resulting from different methods of force are recognised and taken into account
- under what circumstances it would be considered appropriate to use incapacitant sprays in this confined environment and what safeguards are in place
- what guidance has been given on the use of Tasers in custody
- what alternative procedures are applied to those with a known health problem, children and young people or women who are known to be pregnant.

**Documentation:** check the custody records.

**Observation:** check CCTV recordings.

**Detainees:** where possible talk to detainees who have been subject to the use of force about their experiences.

# 8. Where force is used, trained staff use only approved techniques with no more force and for no longer than is necessary.

#### force and for no longer than is necessary. **Fyidence** References Staff: ask them: SDHP section 4 • what training they have had in the use of force, when this occurred and whether they have had any refresher training ICCPR 10 (1) • what guidance they are aware of and whether guidance CCLEO 3 includes the use of Tasers, incapacitant sprays, handcuffs, BPUF 1, 15 limb restraints and empty hand techniques POR 20 how they make a decision about what level of force to use • how many staff would be deployed to apply force and how this decision is made **Documentation:** check: • whether all staff have been trained in the use of force and how recently they were trained • the records of where force was used, the reason for the use of force and the type of force used.

 Detainees are examined by an appropriately qualified healthcare professional as soon as practicable, but in any case within two hours of any force being used in custody.

Evidence	References
What the arrangements are for detainees who have been subject to the use of force before coming into custody to see a healthcare professional     if every detainee is seen by a healthcare professional following any use of force in custody     what the arrangements are for accessing a healthcare professional	SDHP section 4 ICCPR 10 (1) CCLEO 6 BOP 24
<ul> <li>how quickly a health check occurs after the use of force in custody – ask for examples.</li> </ul>	
Speak to healthcare professionals about when they were last asked to examine a detainee who was subject to the use of force and what the procedure was for accessing their services.	
<b>Documentation:</b> check the custody records for evidence that a health examination took place after the use of force in custody, how quickly the detainee was seen after the use of force incident and the outcome of the examination.	

10. Use of force within custody suites, including the use of control and restraint equipment, is documented within the individual custody record and a separate written account made to the custody manager within 72 hours of the incident.

manager manager are and an analysis	
Evidence	References
Custody sergeant and staff: ask them:	CCLEO 3
• if every incident of use of force is recorded and where	BPUF 1, 15
• if a written account is received by the custody manager and how long after the incident this is submitted	POR 20
<ul> <li>what happens to the written account</li> </ul>	
• if use of force is collated.	
<b>Documentation:</b> check:	
• the custody records	
• the written accounts of use of force incidents	
• that an accurate record of the use of control and restraint equipment is kept.	

# **Expectations – physical conditions**

# 11. All areas of the custody suite that are used by detainees are clean, safe, in a good state of repair and fit for purpose.

Evidence	References
<b>Documentation:</b> check:	PACE Codes
<ul> <li>whether cells are certified as clear of graffiti before they are occupied</li> </ul>	of Practice Code C 8.2
<ul> <li>the cleaning contract and schedules and the policy on clearing up spillages</li> </ul>	ICCPR 10 (1) BOP 1
• what the policy is if detainees deface or damage the cells	
• the records detailing the maintenance and testing of fire and smoke detection.	
Observation: check:	
<ul> <li>the holding areas, cells, interview and detention rooms and showers</li> </ul>	
<ul> <li>that staff inspect the cells before and after occupancy and how thoroughly</li> </ul>	
• that checks and findings or damage are recorded	
• that facilities:	
o look and smell clean	
o are free from graffiti	
o are in good decorative order	
o are of a suitable temperature with heating facilities	
o are well ventilated, either naturally or by a system that is not oppressively noisy	
o are well lit, including adequate provision of natural daylight. Night-time light should be at a level that allows detainees to sleep while ensuring safety	
o are equipped with somewhere to sit	
o are equipped with smoke and fire detection	
o are free of ligature points	
• facilities for detainees with disabilities, for example, are there lower hand washing facilities and easily accessible call bells?	

# 12. The custody suites are properly maintained and ongoing maintenance work does not have a negative impact on the treatment and conditions of detainees.

Evidence	References
Chief officer and staff: ask them:	ICCPR 10 (1)
• how a decision is made about required maintenance work	BOP 1
<ul> <li>what the maintenance procedure is and what impact it has on provision</li> </ul>	
• what excess custody capacity the force has to allow suites to be shut so that essential maintenance can be carried out	
<ul> <li>about the frequency of workplace inspections by safety representatives and their relevance to the experience of detainees.</li> </ul>	
<b>Documentation:</b> check:	
the maintenance regime	
• workplace inspection reports and whether actions relevant to the detainees' experience are taken.	

# 13. A no-smoking policy for staff and detainees is enforced that respects the right of individuals to breathe clean air in the custody suite.

Evidence	References
Staff: ask them:	SDHP 7.10
• what the no smoking policy is and whether it is followed	ICCPR 10 (1)
<ul> <li>whether nicotine replacement is provided to detainees on request and whether they are informed of this on arrival</li> </ul>	BOP 1
• whether nicotine replacement is provided by a healthcare professional.	
<b>Documentation:</b> check that there is a no smoking policy.	
<b>Observation:</b> if a smoking area is provided, check it is appropriately supervised. Observe what detainees are told about the no smoking policy and the availability of nicotine replacement.	
<b>Detainees:</b> ask them if they:	
<ul> <li>know what the no smoking policy is</li> </ul>	
• are able to request and receive nicotine replacement.	

#### 14. Custody suite staff can safely evacuate the custody suite in the event of a fire.

Evidence	References
Staff: ask them:	SDHP 15.4
what fire safety training they have received	UDHR 3
<ul> <li>how frequently fire evacuation drills are held and whether</li> </ul>	ICCPR 10 (1)
these are just desktop exercises or also include a practice evacuation	FPWR 4, 5
• when the force last carried out a cell smoke test at each site	
<ul> <li>whether custody suites can be evacuated safely in emergencies, taking into account the physical security, the need for ready access to keys and the fact they may have detainees with disabilities</li> </ul>	
<ul> <li>what they would do in the event of a fire.</li> </ul>	
Documentation: check:	
staff training records	
• the frequency of fire evacuation drills and the type of drill	
contingency plans.	

# 15. All cells are equipped with call bell systems and their purpose is explained to detainees. They are responded to promptly.

Evidence	References
Staff: ask them:	SDHP 12.1.5
<ul> <li>what they tell detainees they can use the call bell for and how they ensure that detainees understand what they are being told</li> <li>how quickly they respond to call bells.</li> </ul>	UDHR 3 CCLEO 2
<b>Documentation:</b> check the custody records for the recording of call bell usage and response times.	
<b>Observation:</b> listen to what detainees are told about the call bells when they are placed in a cell and how staff ensure that detainees understand, especially those whose first language is not English and those with a disability, such as hearing difficulties or learning disabilities. Check that call bells are provided and are connected and working.	
<b>Detainees:</b> ask them:	
<ul> <li>what they were told they could use call bells for and if they understood</li> </ul>	
• if they have used their call bell, how long it took staff to respond to it.	

# Expectations – personal comfort and hygiene

#### 16. Detainees are provided with a mattress, pillow and clean blankets.

Evidence	References
Documentation: check:	PACE Codes
• for a policy on mattress and pillow cleaning between uses	of Practice
• the custody records for evidence that a clean mattress, pillow and blankets are provided.	Code C 8.3 ICCPR 10 (1)
Observation: check:	BOP 1
• that a mattress, pillow and blankets are provided, that all are clean and that staff safety-check them before they are used by a new detainee	
• that the mattress and pillow are cleaned with anti-bacterial cleaner between uses	
• that the number of blankets provided is sufficient for the season and the duration of stay	
<ul> <li>that blankets are anti-tear and anti-flammable for those assessed as at risk</li> </ul>	
• the bedding store for provisions.	
<b>Detainees:</b> ask them if the items with which they were provided were clean.	

### 17. Hygiene packs for women are routinely provided.

Evidence	References
	ICCPR 10 (1)
are detained.	BOP 1
<b>Documentation:</b> check the custody records.	
<b>Detainees:</b> ask women if they have been offered hygiene packs	
rather than having to ask for them.	

# 18. Detainees are able to use a toilet in privacy, and toilet paper and hand washing facilities are provided.

Evidence	References
<ul><li>Staff: ask them:</li><li>how detainees get access to the toilet if there is no integral sanitation</li></ul>	PACE Codes of Practice Code C 8.4
• if the facilities are sufficient for the number of detainees held at any one time.	SDHP 7.8.4 ICCPR 10 (1)
Observation: check:	BOP 1
<ul> <li>the cleanliness of the integral sanitation, if available, or the communal facilities, and whether they are in a good state of repair</li> </ul>	
• that integral sanitation has privacy screening and is excluded from CCTV monitoring	
• that cell viewers are covered so that the detainee cannot see people walking along the corridor, and the people cannot see in	
• that toilet paper and soap are provided in cell where integral sanitation exists	
• that facilities are suitable for detainees with disabilities.	
<b>Detainees:</b> if there is no integral sanitation ask them if they have to make repeated requests to access the toilet. If there is integral sanitation ask if they have been reassured that it is not covered by CCTV. Ask them if they have access to washing facilities for religious purposes.	

### 19. Detainees are offered the opportunity to have a shower.

Evidence	References
<b>Documentation:</b> check the custody records for evidence that showers have been offered and at what point during custody.	PACE Codes of Practice
Observation: check that:	Code C 8.4
• detainees who require a shower are offered the opportunity	ICCPR 10 (1)
and are given clean and suitable towels for this purpose	BOP 1
• showering can be done with a proper degree of privacy. Check the arrangements for women and children. Check the CCTV of showers.	
<b>Detainees:</b> ask them if they have been offered a shower.	

# 20. Detainees whose clothing is seized are provided with suitable alternative clothing.

Evidence	References
Staff: ask them when the alternative clothing was last used.  Observation: check that a supply of appropriate alternative clothing (not paper suits) is available for detainees of different genders and age.  Defence solicitors: ask them whether their clients are ever released in replacement clothing and what form this takes.	PACE Codes of Practice Code C 8.5 SDHP 6.6.3 ICCPR 10 (1) BOP 1

#### 21. Changes of clothing, especially underwear, are facilitated.

Evidence	References
<b>Staff:</b> ask them if a detainee's family or friends are able to bring them items of clothing. How are changes of clothing facilitated? What arrangements are in place for those who may not have family or friends to bring in personal items?	PACE Codes of Practice Code C 8.5 SDHP 7.8.1
<b>Documentation:</b> check the:	ICCPR 10 (1)
<ul> <li>protocol for bringing in clothes</li> </ul>	BOP 1
• custody records to see how often this is facilitated.	

# **Expectations – catering**

Fuldance

# 22. Detainees are offered sufficient refreshments at recognised mealtimes and at other times that take into account when the detainee last had a meal.

Evidence	References
Staff: ask them:	PACE Codes
<ul> <li>when detainees are offered food and/or drink</li> </ul>	of Practice
<ul> <li>what type of food is offered and how this meets special, including clinical, diets and religious requirements</li> </ul>	Code C 8.6, 8.9 and guidance
• if detainees are offered at least two light meals and one main meal in any 24-hour period, with the opportunity to	note 8B
make additional reasonable requests	ICCPR 10 (1)
• if further food can be supplied by friends and family.	BOP 1

#### **Section 2** – treatment and conditions

#### **Documentation:** check:

- custody records to see when detainees were offered meals and drinks and that meals met special dietary, medical and religious requirements
- the food hygiene training records for staff preparing food.

#### Observation: check:

- the reception procedures are detainees asked when they last had a meal or drink and offered appropriate refreshment?
- that food is prepared in a hygienic environment, separate from the area for staff, that meets religious, cultural and other special dietary requirements
- that food is healthy and balanced and there is enough of it
- that a temperature probe is used to ensure food is of the correct temperature at the point of serving
- that detainees have regular access to drinks.

#### **Detainees:** ask them:

- when they have been offered suitable food and drinks
- what type of food was offered and whether this was sufficient.

### **Expectations – activities**

#### 23. Detainees have access to a period of outdoor exercise.

Evidence	References
• if detainees are allowed access to an exercise area, and if so, when this would be offered, if it is supervised and what the barriers are to its use	PACE Codes of Practice Code C 8.7 SDHP 7.5.1
<ul> <li>what the outdoor exercise arrangements are for men, women and children.</li> </ul>	ICCPR 10 (1) BOP 1
<b>Documentation:</b> check custody records for evidence that outdoor exercise has been offered.	
<b>Observation:</b> check whether there is an outdoor exercise area. Does it appear to be used regularly?	

#### 24. Those held in custody are provided with suitable reading material.

Evidence	References
<b>Staff:</b> ask them what they provide for:	ICCPR 10 (1)
• detainees and how long they provide this after their arrival	BOP 1, 28
• those with learning difficulties (for example material in easy- read format) and those who do not speak English.	
<b>Documentation:</b> check custody records for evidence that reading material was offered.	
<b>Observation:</b> see whether reading material is available and offered to detainees.	
<b>Detainees:</b> ask them whether they have been offered anything to read or to keep them occupied.	

### 25. Visits are allowed, especially for those held for more than 24 hours.

Evidence	References
<ul> <li>Staff: ask them if:</li> <li>visits are offered and to whom</li> <li>parents or carers are able to visit children, especially if they are held overnight.</li> </ul>	PACE Codes of Practice Code C 5.4 BOP 19
<b>Documentation:</b> check how often visits are held.	
<b>Observation:</b> check the visiting facilities. Are they suitable? Are visits adequately facilitated for those with disabilities?	

# Individual rights

Detainees are informed of their legal rights on arrival and can freely exercise those rights while in custody.

#### Expectations – rights relating to detention

1. Detention is appropriate, authorised and lasts no longer than is necessary. In the case of immigration detainees alternative disposals are expedited.

Evidence	References
Custody sergeant: ask him/her:	ICCPR 9
<ul> <li>how s/he decides whether detention is appropriate</li> </ul>	BOP 4, 9
<ul> <li>how s/he ensures the period of detention is kept to a minimum</li> </ul>	
• whether there is regular contact with the UK Border Agency and whether this is effective in ensuring progression of immigration detainee cases.	
<b>Documentation:</b> check custody records for:	
• the reasons for initial detention	
• a subsequent review of the detention by the inspector, superintendent or magistrate. Is this process meaningful, i.e. do they speak to the detainee?	
the number of times detention or an extension of detention     has been allowed or disallowed.	

2. Police custody is not used as a place of safety for children and young people under section 46 of the Children Act 1989.

Evidence	References
<b>Custody sergeant:</b> ask him/her whether police custody has been used as a place of safety in the last six months and what arrangements are in place to prevent this from happening again.	ICCPR 9 CA 46
<b>Documentation:</b> check that details and management information are kept in respect of section 46 detainees.	

# 3. Detainees, including immigration detainees, are told that they are entitled to have someone concerned for their welfare informed of their whereabouts.

E Codes actice	
actice e C graphs 3 5 13, 16	
5	

## 4. Detainees who have difficulty communicating are provided for.

Evidence	References
Staff: ask them: • if translation services are available, when they would be used	PACE Codes of Practice
and by whom	Code C 3.12
<ul> <li>what arrangements are in place for those with learning difficulties/disabilities</li> </ul>	CCLEO 2 BOP 14, 16 (3) DDA
• what other communication formats and aids are available for those who need them.	
<b>Documentation:</b> check the usage of telephone interpretation services.	
Observation: check:	
<ul> <li>that information is available in different languages and formats</li> </ul>	
<ul> <li>what aids are in place for those who require them, for example hearing loops, etc</li> </ul>	
• if written information is available in easy-read format.	

#### 5. Persons detained who have dependency obligations are catered for.

References
ICCPR 10 (1)
BOP 16, 31

# 6. Pre-release risk management planning for vulnerable detainees is conducted to ensure they are released safely.

Evidence	References
Documentation: check:	SDHP 8.3
• custody records for evidence of pre-release risk management	ICCPR 10 (1)
plans in accordance with safer detention and handling of	CCLEO 2
persons in police custody	BOP 1
<ul> <li>that information about and contact details for support organisations is provided.</li> </ul>	POR 20

### **Expectations: rights relating to PACE**

7. All detainees are able to consult with legal representatives in private for free. Those under the age of 18, vulnerable adults or those with learning disabilities are not interviewed without a relative, guardian or appropriate adult present.

Evidence	References
Custody sergeant: ask him/her:	PACE Codes
<ul> <li>how s/he makes a decision about who would be an appropriate adult</li> </ul>	of Practice Code C 3(b)
<ul> <li>what the arrangements are for providing an appropriate adult outside normal working hours.</li> </ul>	Detained persons
Documentation: check:	– special groups
that there is a duty solicitor scheme	PACE Codes
<ul> <li>that there are competent and qualified legal advisers available who specialise in immigration advice</li> </ul>	of Practice Code C 6
<ul> <li>that detainees are able to have a private consultation with their legal adviser face to face or by phone when required</li> </ul>	Right to legal advice
<ul> <li>that reasons are recorded if detainees decline the right to speak to a legal adviser</li> </ul>	PACE Codes of Practice
• that detainees are able to have a legal adviser present when interviewed by police officers	Code C 3.1–3.5
• the custody records for evidence that PACE procedures have been followed and for the length of time that elapses before legal advisers or advocates arrive.	CRC 3 (1), 40 (2Bii)
Observation: check:	RPJDL 17, 18 (1)
	BPRL 1, 2, 3,
<ul> <li>that information describing a detainee's legal rights is displayed in various languages and formats</li> </ul>	5, 6, 7, 8
what detainees are told about their right to a legal adviser	BOP 11, 16

• video and audio tapes, especially if detainees claim to have

experienced oppressive conduct.

(3), 18

8. All detainees can consult a copy of the PACE Code of Practice C.

Evidence	References
• that the custody suite holds a copy of PACE Code of Practice C • the custody records to see if detainees have asked to consult the document.  Detainees: ask them if they have been told about PACE Code of Practice C and that they can consult a copy.	PACE Codes of Practice Code C 3.1 (iii) BOP 13 POR 20

 Detainees are not interviewed by police officers while under the influence of alcohol or drugs, or if medically unfit, unless in circumstances provided for under PACE.

Evidence	References
<b>Documentation:</b> check the custody records for any evidence that this has occurred and for the recorded reasons.	PACE Codes of Practice
<b>Detainees and defence solicitors:</b> ask them whether this has happened and what the circumstances were.	Code C 12.3 CCLEO 2 POR 20

 Detainees are not deliberately denied any services they need during the interview process and are granted a period of eight hours continuous break from interviewing in a 24-hour period.

Evidence	References
<b>Documentation:</b> check the custody records. Check detainees are not automatically left for eight hours when they are arrested during the night, i.e. is their case dealt with	PACE Codes of Practice Code C 12
expeditiously?	Interviews
<b>Detainees and defence solicitors:</b> ask them about their experiences of the interview process.	at police stations
	ICCPR 10 (1)
	BOP 23

#### 11. Robust mechanisms for ensuring continuity of evidence are in place.

Evidence	References
Custody staff: ask them:	CCLEO 1
• what the procedure is for taking forensic samples	POR 20
<ul> <li>who is responsible for the upkeep of the fridges and freezers.</li> </ul>	
<b>Documentation:</b> check the:	
• submission records for forensic samples	
• audit trail for the safe and confidential destruction of forensic samples.	
Observation: check:	
• the quality, cleanliness and upkeep of fridges and freezers	
<ul> <li>that fridges and freezers storing exhibits and DNA do not contain any other items such as food</li> </ul>	
• the number of samples and the dates of collection, including whether they have been submitted for processing	
• the integrity of forensic samples.	

# 12. Detainees who have been charged appear at court promptly, either in person or via video link.

Evidence	References
<b>Custody sergeant:</b> ask him/her what the arrangements are with the local court for transport and video links.	ICCPR 9 (3, 4)
Documentation: check:	BOP 37, 38
• the custody records for the timeliness of court appearances	
• for the existence of a video link and its usage	
<ul> <li>that there is regular contact with the UK Border Agency for immigration detainees, ensuring due diligence in the progression of their cases.</li> </ul>	
<b>Defence solicitors:</b> ask them about the timings around court appearances.	

 Detainees or their legal representatives are able to obtain a copy of their custody record on release, or at any time within 12 months following their detention.

Evidence	References
Custody sergeant: ask him/her:  • if detainees are told they can request a copy of their records  • how often requests are made.  Documentation: check the custody records for evidence of copy requests.	PACE Codes of Practice Code C 2.4A BPRL 13 BOP 12
<b>Defence solicitors:</b> ask them how easy it is to get a copy of detainees' records.	

### **Expectations: rights relating to treatment**

14. Detainees are told how they can make a complaint about their care and treatment and are enabled to do so if they wish.

Evidence	References
Custody sergeant: ask him/her:     how detainees are informed about the complaints procedures and if their understanding is confirmed	PACE Codes of Practice Code C 9.2
• if they are given help to fill in a complaints form if they need it.	ICCPR 10 (1)
<b>Documentation:</b> check the records of complaints and their outcomes.	BOP 33
<b>Detainees:</b> ask them if they have been easily able to make complaints.	

# 15. There is an effective system in place for reporting and dealing with racist incidents.

Evidence	References
<b>Documentation:</b> check the system for recording racist incidents. Are incidents reported to Professional Standards Departments? Would any trends be picked up locally?	PACE Codes of Practice Code C 9.2
<b>Defence solicitors:</b> ask them:	CERD 5 (a), 7
how detainees are treated	
• what the procedure is for reporting complaints about racist incidents.	
<b>Detainees:</b> ask them about their experiences of making complaints about racist incidents.	

# Healthcare

Detainees have access to competent healthcare professionals who meet their physical health, mental health and substance use needs in a timely way.

### **Expectations – clinical governance**

 Detainees are treated by healthcare professionals and drug treatment workers in a professional and caring manner that respects their decency, privacy and dignity and is sensitive to their situation and diverse needs, including language needs.

Evidence	References
Healthcare staff: ask them:  if women can see a female doctor on request  if there are arrangements for a chaperone to be present if required	PACE Codes of Practice Code C 9.5–9.14
<ul> <li>what arrangements are in place for detainees who cannot speak English.</li> </ul>	SDHP 9.3 SfBH D2b,
<b>Documentation:</b> check:	D11, C13a
<ul> <li>clinical notes or notes made by arrest referral workers for evidence of the involvement of family, carers, caseworkers or advocates</li> </ul>	HSfW 1, 2, 6, 8, 10 ICESCR 12 (1) CCLEO 6 BOP 24 PME 1
• for any use of interpreters or telephone translation.	
<ul><li>Observation: observe:</li><li>the interactions between detainees and healthcare staff</li><li>the time given for each consultation.</li></ul>	
<b>Detainees:</b> ask them about their treatment and whether their diverse needs are respected.	

2. Clinical governance arrangements include the management, training and supervision and accountability of staff.

Evidence	References
Custody sergeant: ask who is responsible for monitoring the contracts of, for example, forensic medical examiners (FMEs), nurses or other healthcare professionals.  Healthcare staff: ask different healthcare professionals:  what their contract arrangements are  who they report to  what the staffing arrangements are.  Documentation: check:  that there is a clinical governance policy  that clinical governance arrangements are explicit in the service level agreement or contract  the contract for healthcare services – to whom do staff (FMEs, nurses or other healthcare professionals) report within the constabulary?  who monitors the service delivery within the terms of the contract	References  SDHP 9.3 and appendix 11 SfBH C7, D3, D4, D5b HSfW 27, 28 ICESCR 12 (1) CCLEO 6 BOP 24 PME 1
<ul> <li>whether doctors are contracted solely to FME duties when on duty and whether the hours of work are appropriate</li> <li>the reporting structures for the healthcare professionals</li> <li>where the line manager is based and what the arrangements for contact are</li> <li>the rotas – is there continuity of staff?</li> </ul>	

3. Patients are treated by healthcare staff who receive ongoing training, supervision and support to maintain their professional registration and development. Staff have the appropriate knowledge and skills to meet the particular healthcare needs of detainees in police custody.

such as primary care, mental health and substance use.

Evidence	References
Healthcare staff: ask them:	PACE Codes
<ul> <li>what training, supervision and support they receive</li> </ul>	of Practice
<ul> <li>whether they feel they have the skills, knowledge and competencies to meet the healthcare needs of all detainees,</li> </ul>	Code C Note 9A

**Documentation:** check:

- the training registers and training plans. Are they relevant to the service being delivered?
- whether the service level agreement or contract stipulates the need for staff to receive ongoing training and support to maintain professional registration
- job descriptions and arrangements for appraisals
- where professional registration details are held
- what the system is for verifying registration
- the arrangements for clinical supervision
- skills and training needs analysis.

**SDHP** 7.2.1, 9.3, appendix 11 and 12 SfBH C5c. C10a, C10b, C11a, C11b, C11c HSfW 22. 24. 28 ICESCR 12 (1) CCLEO 6 PMF 1

4 Clinical examinations are conducted confidentially unless risk assessment

privacy and dignity. Infection control facilities are impleast one room that is capable of being used for the ta and it is clean.	lemented. There is at
Evidence	References

#### Custody nurses: ask them:

- what the normal procedures are
- if the treatment rooms are shared facilities

#### **Documentation:** check:

- the arrangements for clinical examinations
- the conditions of treatment rooms and infection control facilities and procedures
- whether an infection control audit has been carried out if so, by whom?
- the cleaning schedules.

**Detainees:** ask them about their clinical examination experiences.

**Observation:** check the rooms to ensure that they:

- provide decency and privacy
- are clinically clean
- meet infection control best practice.

Observe examinations being carried out.

SDHP 10.2.8, 12.6.5 and Appendix 14 SfBH, C4a. C21 HSfW 5 ICESCR 12 (1) ICCPR 10 (1) PMF 1

5. All medications on site are stored safely and securely, and disposed of safely if not consumed. There is safe pharmaceutical stock management and use.

Evidence	References
Healthcare staff: ask them:	SDHP 7.2.4
• how the range of stock medicines is decided and reviewed	SfBH C4 d, e
<ul> <li>how stock levels are determined</li> </ul>	HSfW 19
• if health professionals carry medications and if so, whether	UDHR 3
they are in a secure container at all times	CCLEO 6
• whether healthcare staff have access to the support of a	PME 1
pharmacist throughout the 24 hours	POR 20
<ul> <li>if medications that are brought in by the detainee are returned to them when they are released.</li> </ul>	
<b>Documentation:</b> check how:	
• the administration of medications is recorded	
• stock levels are recorded and monitored.	
<b>Observation:</b> check arrangements for the storage, dispensing and disposal of pharmaceuticals. Are they appropriately labelled?	

6. All equipment (including resuscitation kit) is ready for use and regularly checked and maintained and all staff (healthcare and custody staff) understand how to access and use it effectively.

Evidence	References
Staff: ask them if:	http://www.
• they know the location of the equipment	resus.org.uk/
• they know how to use it	siteindx.htm
• all staff who are trained receive annual resuscitation training.	SDHP
Documentation: check:	10.2.5 and
equipment records	appendix 14
• training registers.	SfBH C1b C4b, C4c,
Observation: check:	HSfW 19, 14
• that equipment is available and includes equipment for the	UDHR 3
maintenance of an airway, oxygen and defibrillator	CCLEO 6
where the equipment is stored.	PME 1

### **Expectations – patient care**

7. Detainees are asked if they wish to see a healthcare professional and are able to request to see one at any time, for both physical and mental health needs.

Evidence	References
<b>Custody staff:</b> ask what the procedure is for calling a health professional and whether women can request to see a woman.	SfBH C6, C18, D11b
Documentation: check:	HSfW 2, 3, 7
<ul> <li>that there is a record of calls and responses. How are response times monitored?</li> </ul>	ICESCR 12 (1)
• the arrangements for out of hours cover	CCLEO 6
• complaints concerning healthcare provision.	BOP 24, 25
<b>Observation:</b> observe whether custody staff offer detainees the opportunity to see a health services professional.	
<b>Detainees:</b> ask whether their health needs have been met.	
<b>Defence solicitors:</b> ask whether the detainees they represent have made any complaints concerning healthcare provision.	

8. Detainees continue to receive prescribed medication for any clinical condition, and to receive medication to provide relief for drug and alcohol withdrawal symptoms if needed.

ferences
CE Codes Practice ode C 9–9.12 and 15–9.17 HP 7.2.4 IfW 7 ESCR 12

 Each detainee seen by healthcare staff has a clinical record containing an up-todate assessment and any care plan conforms to professional guidance from the regulatory bodies. Ethnicity of the detainee is also recorded.

Evidence	References
• a sample of clinical records from the last six months includes a record of the detainee's ethnicity, the problems experienced, the diagnosis and treatment and referral letters • detainees sign the clinical records to determine consent for the sharing of information.  Observation: check that records are kept confidentially, in line with Caldicott guidelines.	PACE Codes of Practice Code C 9.15(e) and 9.16 SfBH C9 HSfW 7, 8, 25, 26 ICESCR 12 (1) BOP 26 PME 1

10. Any contact with a doctor or other healthcare professional is also recorded in the custody record, and a record made of any medication provided. The results of any clinical examination are made available to the detainee and, with detainee consent, his/her lawyer.

Evidence	References
Healthcare staff: ask them:     about the arrangements for recording health interventions and transferring information about medication to the custody record     how information is shared with the detainee     how the consent of detainees is obtained and how the results of clinical examinations are shared with detainees' legal representatives.	PACE Codes of Practice Code C 9.15–9.17 SDHP 7.2 CCLEO 6 BOP 26 PME 1
<b>Documentation:</b> cross-reference clinical records with custody records.	
<b>Defence solicitors:</b> ask whether the results of a detainee's clinical examination are shared and if their consent is sought in advance.	

### Expectations - substance use

11. Detainees are offered the services of a drugs or alcohol arrest referral worker where appropriate and referred on to community drugs/alcohol teams or prison drugs workers as appropriate.

Evidence	References
<b>Custody sergeant and drug/alcohol arrest referral workers:</b> ask them:	SDHP – custody
<ul> <li>what arrangements are in place to provide services</li> <li>if health services staff liaise with drug/alcohol arrest referral workers</li> </ul>	process map ICESCR 12 (1)
• if detainees who are to be released into the community are offered clean needles by drug referral workers.	BOP 24
<b>Detainees:</b> ask whether they have been offered the services of a drug or alcohol arrest referral worker.	

### **Expectations – mental health**

12. A liaison and/or diversion scheme enables detainees with mental health problems to be identified and diverted into appropriate mental health services, or referred on to prison health services.

Evidence	References
Custody sergeant: ask him/her whether such a scheme exists and what the arrangements are to have detainees referred.	SDHP 2.4.5 ICESCR 12
Mental health staff: ask them:	(1)
<ul> <li>what the arrangements are for diversion</li> <li>what works well and what the barriers are to effectiveness</li> <li>what the on call arrangements are for mental health professionals.</li> </ul>	BOP 24
<b>Documentation:</b> check that there:	
• are information-sharing protocols in place to ensure that there is efficient sharing of relevant health and social care information	
• is a published rota for mental health staff cover	
• is monitoring of responses times and outcomes.	
<b>Observation:</b> if possible check the section 136 suite.	

### 13. Police custody is not used as a place of safety for section 136 assessments.

Evidence	References
<b>Custody sergeant:</b> ask what the local arrangements are and whether protocols are in place.	PACE Codes of Practice
<b>Documentation:</b> check:	Code C
• the nature of the local arrangements – look for exclusion	Annex E
clauses that might result in police custody being used as a place of safety	SDHP 2.4.5, 3.4
• that details and management information are kept in respect of section 136 detainees.	ICCPR 9

# Glossary of acronyms

# **International Human Rights Instruments**

# Legally hinding

Legally binding	
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women, G.A. res. 34/180, 34 U.N. GAOR Supp. (No. 46) at 193, U.N. Doc. A/34/46 (entered into force Sept. 3, 1981)
CERD	Convention on the Elimination of All Forms of Racial Discrimination, 660 U.N.T.S. 195 (entered into force January 4, 1969)
CRC	Convention on the Rights of the Child, G.A. res. 44/25, annex, 44 U.N. GAOR Supp. (No. 49) at 167, U.N. Doc. A/44/49 (1989) (entered into force September 2, 1990)
ICCPR	International Covenant on Civil and Political Rights, G.A. res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 52, U.N. Doc. A/6316 (1966), 999 U.N.T.S. 171 (entered into force March 23, 1976)
ICESCR	International Covenant on Economic, Social and Cultural Rights, G.A. res. 2200A (XXI), 21 U.N.GAOR Supp. (No. 16) at 49, U.N. Doc. A/6316 (1966), 993 U.N.T.S. 3 (entered into force January 3, 1976)
UDHR	Universal Declaration of Human Rights
Normative	
ВОР	Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment, G.A. res. 43/173, annex, 43 U.N. GAOR Supp. (No. 49) at 298, U.N. Doc. A/43/49 (1988)

UDHR	Universal Declaration of Human Rights
Normative	
ВОР	Body of Principles for the Protection of All Persons under Any Form of Detention or Imprisonment, G.A. res. 43/173, annex, 43 U.N. GAOR Supp. (No. 49) at 298, U.N. Doc. A/43/49 (1988)
BPRL	Basic Principles on the Role of Lawyers, Eighth United Nations Congress on the Prevention of Crime and the Treatment of Offenders, Havana, 27 August to 7 September 1990, U.N. Doc. A/CONF.144/28/Rev.1 at 118 (1990)
BPUF	Basic Principles on the Use of Force and Firearms by Law Enforcement Officials, Eighth United Nations Congress on the Prevention of Crime and the Treatment of Offenders, Havana, 27 August to 7 September 1990, UN Doc. A/CONF.144/28/Rev.1 at 112 (1990)
CCLEO	Code of Conduct for Law Enforcement Officials, Adopted by General Assembly resolution 34/169 of 17 December 1979
DEDRB	Declaration on the Elimination of All Forms of Intolerance and of Discrimination Based on Religion or Belief Proclaimed by General Assembly resolution 36/55 of 25 November 1981
DHRIN	Declaration on the Human Rights of Individuals who are not Nationals of the Country in which they live, adopted by the General Assembly resolution 40/144 of 13 December 1985

#### Glossary of acronyms

DRM Declaration on the Rights of Persons Belonging to National or Ethnic, Religious

and Linguistic Minorities Adopted by General Assembly resolution 47/135 of 18

December 1992

PME Principles of Medical Ethics relevant to the Role of Health Personnel, particularly Physi-

cians, in the Protection of Prisoners and Detainees against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, G.A. res. 37/194, annex, 37 U.N.

GAOR Supp. (No. 51) at 211, U.N. Doc. A/37/51 (1982)

RPJDL United Nations Rules for the Protection of Juveniles Deprived of their Liberty, G.A. res.

45/113, annex, 45 U.N. GAOR Supp. (No. 49A) at 205, U.N. Doc. A/45/49 (1990)

#### **Regional Human Rights Instruments**

#### **Legally binding**

**ECHR** Convention for the Protection of Human Rights and Fundamental Freedoms, as

amended by Protocol No. 11 (Rome, 4.XI.1950)

Protocol 1 [First] Protocol to the Convention for the Protection of Human Rights and

Fundamental Freedoms, as amended by Protocol No. 11 (Paris, 20.III.1952)

Protocol 12 Protocol 12 to the Convention for the Protection of Human Rights and Fundamental

Freedoms (Rome, 4.XI.2000)

#### **Normative**

#### National Legislation

CA Children's Act 1989

DDA Disability Discrimination Act 2005

**FPWR** Fire Precautions (Workplace) Regulations 1997

**HSA** Health and Safety Act 1974

HSfW Healthcare Standards for Wales 2005

PACE Police and Criminal Evidence Act (1984)

Code C sets out the requirements for the detention, treatment and questioning of

suspects not related to terrorism in police custody by police officers

POR The Police Regulations 2003

RRAA Race Relations (Amendment) Act 2000

SDHP Safer Detention and Handling of Persons in Police Custody (2006)

SfBH Standards for Better Health (2004)