

INSPECTION STANDARDS

Criteria for assessing the treatment of and conditions for prisoners



Revised July 2024



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Office of Inspectorate *Te Tari Tirohia*

Our whakatauki

Mā te titiro me te whakarongo ka puta mai te māramatanga

By looking and listening, we will gain insight

Our vision

That prisoners and offenders are treated in a fair, safe, secure and humane way.

Our values

We acknowledge the Department of Corrections' values: rangatira (leadership), manaaki (respect), wairua (spirituality), kaitiaki (guardianship) and whānau (relationships).

Office of the Inspectorate values:

Respect – We are considerate of the dignity of others

Integrity – We are ethical and do the right thing

Professionalism – We are competent and focused

Objectivity – We are open-minded and do not take sides

Diversity – We are inclusive and value difference



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Introduction

Inspection Standards guide inspectors from the Office of the Inspectorate |Te Tari Tirohia to deliver independent and objective assessments of the treatment and conditions of prisoners in New Zealand.

When these Inspection Standards were first released in August 2019, I made a commitment that they would be regularly reviewed to ensure they remained responsive to the needs of New Zealand prisoners and reflected the latest United Nations guidance on the standards of care for prisons and prison conditions.

The Inspection Standards were initially updated in March 2023 with the addition of Leadership Standards, which apply to staff with leadership or management responsibility in a prison.

At this time I also determined that the Inspection Standards would be comprehensively reviewed in full for the first time. This document is the outcome of that process.

The Inspection Standards are published on the Inspectorate website (<https://inspectorate.corrections.govt.nz/>) and key information is available in five other languages.

I will continue to periodically review these Inspection Standards to ensure they reflect developments in both domestic and international jurisdictions for the management of prisoners.

Inspections completed by the Office of the Inspectorate provide a 'window into prisons', giving early warning of emerging risks and challenges, and highlighting areas of innovation and good practice that other prisons are encouraged to follow.

Inspections play a critical part in ensuring independent oversight of the Corrections system.

The United Nations Office on Drugs and Crime publication 'Assessing compliance with the Nelson Mandela Rules: A checklist for internal inspection mechanisms' sets out the crucial reasons why inspection standards are needed:

"Monitoring and inspection mechanisms shed a fresh and critical light on institutions which, by their very nature, are closed environments, and therefore require particular efforts to counter the risk of abuse... It is to contribute to a safe, secure and humane prison environment."

The Office of the Inspectorate Inspection Standards describe the standards of treatment and conditions we expect a prison to achieve. They include indicators that inspectors will consider when assessing the treatment of prisoners and prison conditions. The indicators are not an exhaustive list and do not exclude other ways that a prison may achieve a standard. During inspections and investigations, inspectors will seek to identify evidence that standards are being met.

Assessments are guided by four key principles:

» **Safety:** Prisoners are held safely.



Inspection Standards: Criteria for assessing the treatment of and conditions for prisoners

- » **Respect:** Prisoners are treated with respect for human dignity.
- » **Purposeful activity:** Prisoners are able, and expect, to engage in activity that is likely to benefit them.
- » **Reintegration:** Prisoners are prepared for release into the community, and helped to reduce their likelihood of reoffending.

The Inspection Standards require inspectors to consider 11 areas of prison life: Leadership, prison staff, reception and admission, first days in custody, escorts and transfers, duty of care, health, environment, good order, purposeful activity and reintegration.

The Inspection Standards derive from the United Nations Standard Minimum Rules for the Treatment of Prisoners ('the Nelson Mandela Rules') and HM Inspectorate of Prisons Expectations (England's equivalent criteria for assessing the treatment of and conditions for men in prisons).

While the Nelson Mandela Rules apply to all prisoners, the development and inclusion of gender responsive standards in the Inspection Standards recognises the unique needs of women and transgender prisoners.

The gender-responsive standards derive from the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders ('the Bangkok Rules') and the Yogyakarta Principles,¹ which were developed to complement and supplement the Nelson Mandela Rules. The Office of the Inspectorate acknowledges that some of the gender responsive standards, such as those relating to parental responsibilities and preventive health care, will also apply to male prisoners.

The Inspection Standards are also informed by a number of other international instruments:

- » The United Nations Basic Principles for the Treatment of Prisoners
- » The United Nations Body of Principles for the Protection of Persons Under Any Form of Detention or Imprisonment
- » The United Nations International Convention on the Elimination of All Forms of Racial Discrimination
 - » The United Nations Convention on the Rights of Persons with Disabilities
 - » The United Nations Convention on the Rights of the Child
- » The European Prison Rules
- » The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment: Women in prison
- » The Guiding Principles for Corrections in Australia
- » Inspections standards documents from corrections' oversight jurisdictions in Western Australia, New South Wales, the Australian Capital Territory, and Queensland.

¹ The Yogyakarta Principles guide the application of international human rights law in relation to sexual orientation and gender identity.

Māori prisoners

The Office of the Inspectorate acknowledges that Māori are over-represented in New Zealand prisons.

While all standards and indicators in these Inspection Standards are applicable for Māori prisoners, specific culturally responsive standards and indicators acknowledge the particular needs of Māori in prison. These standards and indicators may in some cases also apply to other prisoners.

Women prisoners

While the population of women in prison is substantially less when compared to the male population, it is critical that the individual needs of women are recognised.

While all standards and indicators in these Inspection Standards are applicable for women prisoners, specific gender responsive standards and indicators acknowledge the particular needs of women in prison. These standards and indicators may in some cases also apply to other prisoners.

The women's standards are incorporated into the general standards and are highlighted in blue for ease of identification.

Acknowledgements

The Office of the Inspectorate acknowledges the current and past inspectors who have contributed to the development of these Inspection Standards.

I am indebted to Steven Caruana, Specialist Advisor OPCAT (Optional Protocol to the Convention Against Torture), Australian Human Rights Commission, who assisted with a comprehensive review of the initial Inspection Standards focussing on relevant international developments and best practice approaches from comparable jurisdictions that could be adopted into the revised Inspection Standards. His assistance and guidance have been invaluable.



Janis Adair
Chief Inspector

Basic Principles

1. Prisoners are treated with respect for their inherent dignity and value as human beings, as are other people working in and visiting prisons.
2. Safety is ensured for every person in prison, including prisoners, staff, service providers and visitors.
3. No prisoner shall be subjected to, and all prisoners shall be protected from, torture and other cruel, inhumane or degrading treatment, which is never justified.
4. Prisoners identified as victims of torture or other cruel, inhumane or degrading treatment are supported to address their specific health needs and take legal action, if they wish to do so.
5. Prisoners are not unlawfully discriminated against, while the needs of all prisoners are catered for, in particular the most vulnerable.
6. Prisoners have access to appropriate rehabilitation and reintegration activities and programmes, supporting their release pathway.
7. Prison life promotes personal responsibility, self-respect and dignity.
8. Imprisonment deprives a prisoner of their liberty, and they should not be unjustifiably punished further while in prison.
9. The prison works to improve outcomes for Māori, in accordance with Te Tiriti o Waitangi obligations.
10. Disabled prisoners have full and effective access to prison life on an equitable basis.
11. [Women's prisons operate under gender-responsive policies to ensure that the particular needs of women prisoners are taken into account.](#)

Leadership Standards

In these Standards, the term '*Leader*' refers to any person with leadership or management responsibility in a prison.

Direction

1. Leaders provide direction, and work collaboratively with staff, stakeholders and prisoners, to set and communicate strategic priorities that will improve outcomes for prisoners.

Key Indicators:

- 1.1 Leaders model the Department's values: rangatira (leadership), manaaki (respect), wairua (spirituality), kaitiaki (guardianship) and whānau (relationships).
- 1.2 Leaders are aligned to the Department's long-term strategy and demonstrate connectedness to this strategy in their care and management of prisoners and staff.
- 1.3 Leaders and staff understand the prison's strengths and weaknesses and where outcomes need to improve.
- 1.4 Leaders have a good understanding of the experiences of prisoners (their whānau and family) and staff in the prison.
- 1.5 Realistic, aspirational plans are in place to improve outcomes for prisoners.
- 1.6 Leaders communicate a shared and ambitious vision for the prison.
- 1.7 Leaders develop successful working relationships with key partners and stakeholders, including local Māori and iwi groups, to deliver the prison's aims.
- 1.8 Leaders understand the aims and priorities of the prison and can explain how they align to the Department's values and strategic direction.

Engagement

2. Leaders create a culture in which staff and other stakeholders willingly engage in activities to improve outcomes for prisoners.

Key Indicators:

- 2.1 Leaders promote a resilient and safe operating mindset with all staff.
- 2.2 Leaders at every level are visible and approachable.
- 2.3 Leaders take time to listen to staff and prisoners and follow up issues raised.
- 2.4 Leaders use effective communication channels to promote understanding of current priorities, to share information, and to encourage collaboration and multi-disciplinary working.
- 2.5 Leaders respect and uphold kaupapa Māori cultural values and tikanga practices.
- 2.6 Leaders set, model and enforce standards of staff behaviour and prisoner care that supports rehabilitation.
- 2.7 Leaders actively promote the wellbeing of staff.
- 2.8 Leaders demonstrate and encourage innovation and creativity to solve problems and meet the needs of prisoners.
- 2.9 Effective practice is recognised and shared.
- 2.10 Prison culture encourages staff to reflect on and learn from mistakes.
- 2.11 Staff are empowered to find solutions and take appropriate action.
- 2.12 Staff feel motivated and supported in their work.

Enabling

3. Leaders provide the necessary resources to enable good outcomes for prisoners.

Key Indicators:

- 3.1 Staffing levels are sufficient to deliver the needs and aims of the prison.
- 3.2 Staff have the necessary knowledge, skills, and attitudes to meet the needs of prisoners.
- 3.3 Leaders make good use of the staff and buildings at their disposal.
- 3.4 Leaders identify resource constraints and seek to resolve them.
- 3.5 Leaders and their management team have the experience and skills necessary to improve outcomes for prisoners.
- 3.6 Leaders support their staff, challenging performance where necessary to ensure that practice meets expected standards.
- 3.7 Leaders provide appropriate professional development opportunities for staff.
- 3.8 Leaders ensure resources are allocated transparently, fairly, consistently and effectively.
- 3.9 Information and communications technology systems support effective working practices.

Continuous Improvement

4. Leaders focus on delivering priorities that support good outcomes for prisoners. They closely monitor progress against these priorities.

Key Indicators:

- 4.1 Data is used effectively to understand the impact and fairness of policies, and to track progress against recommendations made.
- 4.2 Feedback from prisoners, staff and other stakeholders is used to generate ideas, create plans and measure progress.
- 4.3 Decisions are made and plans are amended in response to new information.
- 4.4 Leaders welcome and encourage external scrutiny such as from the Office of the Inspectorate, Office of the Ombudsman, Health and Disability Commissioner, the Human Rights Commission and civil society.
- 4.5 Recommendations, audit findings, serious incident reports and best practice ideas are used to promote continuous improvement.
- 4.6 There is evidence of implementation of recommendations. This evidence may include an action plan, business review meetings, and demonstrable change in conditions or approach in response. The implementation is communicated to staff. Staff know what the action plan entails, which areas are to be focused on, and are aware of their role.
- 4.7 Leaders use quality assurance processes to drive continuous improvement.
- 4.8 Collaboration with National Office teams, partner organisations across the Justice sector, and colleagues in other prisons supports improvement.
- 4.9 Leaders participate in professional activities to keep informed of current trends and issues.
- 4.10 Leaders integrate evidence-based theory and best practice into education activities.

Prison staff

5. Staff have the necessary knowledge and skills to work in a prison, and are trained to high standards of professional competence and integrity.

Key Indicators:

- 5.1 Prisons have appropriate staffing levels to function effectively.
- 5.2 Staff are assigned duties consistent with their role and experience.
- 5.3 Staff demonstrate the knowledge, attitude and skills to perform their work professionally.
- 5.4 Staff are given the opportunity for continuous learning and training.
- 5.5 Staff receive training about the Department's values and long-term strategy and embed this in their day-to-day work.
- 5.6 All staff are culturally competent. They have specific awareness of the various cohorts within the prison population, particularly Māori, and young adults, older and disabled prisoners.
- 5.7 Staff responsible for segregation and other separation regimes are specifically trained. These staff are rotated at appropriate intervals to manage stress and security issues.
- 5.8 Staff understand the legislation and policies which guides and directs their work.
- 5.9 Staff understand the role and function of independent oversight bodies and cooperate fully with these agencies.
- 5.10 Staff are aware of, and familiar with, the Inspection Standards/Expectations which guide the inspections of prisons.
- 5.11 Appropriate support is available to prison staff to enable them to manage their wellbeing.
- 5.12 Prison staff with specialised functions have received training relevant to their role.
- 5.13 Prison staff include a sufficient number of specialists, which could include social workers, teachers, trade instructors, counsellors and psychologists.
- 5.14 Staff at women's prisons have received training and ongoing support on working effectively with women.
- 5.15 Women's prisons are staffed predominantly by women, including in senior roles.
- 5.16 Staff can adequately and appropriately manage the gender-specific risks and needs of women.
- 5.17 All staff working in women's prisons are selected based on their suitability to work with women.
- 5.18 Units in women's prisons are never staffed solely by men.

6. Staff are good role models for prisoners and relationships between them are professional, positive and courteous.

Key Indicators:

- 6.1 Staff are good role models and demonstrate ethical, professional, accountable, respectful behaviour.
- 6.2 Staff and prisoners demonstrate positive and constructive working relationships.
- 6.3 Staff engage proactively with prisoners and seek to know prisoners as individuals.
- 6.4 Staff understand the impact of life experiences, such as trauma, abuse and mental distress, on their own and prisoner behaviour.
- 6.5 Staff maintain an accurate record of contact and engagement with prisoners.

Reception, induction and escorts

Escorts and transfers

7. Prisoners travel in safe and humane conditions, are treated with respect, and due attention is paid to their individual needs.

Key Indicators:

- 7.1 Prisoners are informed in advance of the destination and duration of the journey and can inform their family/whānau and their lawyer, if possible, unless there are clearly documented security reasons not to.
- 7.2 Prisoners only travel when reasonably required, and when they are suitably fit to travel by the means used.
- 7.3 Transfers do not take place without an up-to-date assessment of the prisoner's risk of harm and rehabilitation needs.
- 7.4 Prisoners with physical or mental illness, disability, injury, or who are pregnant are not transferred unless specific arrangements are made to ensure their wellbeing and that their health needs can be met at the receiving prison.
- 7.5 Prisoners who have scheduled appointments with external specialist health providers are not transferred. If a transfer must take place, arrangements must be made to minimise any delay in the prisoner receiving necessary assessment or treatment.
- 7.6 Any special needs of the prisoner for travel must be identified prior to the journey, and the vehicle/journey modified accordingly. This includes the needs of prisoners with illness, disability, injury or those who are pregnant.
- 7.7 Escorting staff are aware of the individual needs of the prisoners in their care and provide an effective briefing to receiving staff, including the prisoner escort record.
- 7.8 Prisoners are only restrained during travel where there are legitimate security grounds to do so, and where appropriate measures are in place to ensure their safety in case of an accident or unexpected stopping.
- 7.9 Measures exist to minimise a prisoner's exposure to public view, insult, curiosity and publicity in the course of transfers.
- 7.10 Prisoners are not kept waiting unnecessarily in escort vehicles before departure and after arrival.
- 7.11 Prisoners are given adequate food and comfort breaks during travel.
- 7.12 Unless not possible, a prisoner's personal property is moved at the same time as the prisoner is transferred to a new prison.
- 7.13 Prisoners arrive at their new prison in sufficient time to allow reception and first night procedures to be conducted effectively.

8. Prisoner escort vehicles are fit for purpose and adequately maintained.

Key Indicators:

- 8.1 Escort vehicles meet minimum requirements regarding safety, space, ventilation, heating, light and hygiene.
- 8.2 All escort vehicles and equipment, including CCTV, heating and ventilation, are checked for serviceability before travel commences. These checks are recorded.
- 8.3 Escort vehicles are clean and meet the different needs of prisoners where practicable.

- 8.4 Escort vehicles allow for the separation of categories of prisoners where necessary, and prisoners are separated during transport where there is any risk to safety, including from bullying or harassment.
- 8.5 Every journey is recorded in a log.

9. Appropriate measures are in place to assess and address risks associated with prisoner travel.

Key Indicators:

- 9.1 Prisoners are monitored (both visually and verbally) at appropriate intervals while in transit to ensure their safety and wellbeing, and this is recorded in a log.
- 9.2 Escort staff are appropriately trained in first aid.
- 9.3 Contingency plans exist for dealing with emergencies, breakdowns and other unexpected occurrences. These plans provide for the welfare and safety of staff, the public and prisoners.
- 9.4 Staff are adequately informed about and, where relevant, trained about such contingency plans.

Reception and induction

10. Prisoners are safe and treated with respect on their reception and during their first days in prison. Prisoners' immediate needs are identified on arrival and addressed.

Key Indicators:

- 10.1 The Receiving Office is a welcoming and supportive environment that helps to reduce the anxiety of arriving in prison, and prisoners are treated with decency and respect during the reception and induction process.
- 10.2 Receiving Office staff inspect the warrant or other evidence of authority for the detention, to ensure there is a proper legal basis for holding prisoners.
- 10.3 Receiving Office staff have access to all relevant risk assessment and management information, to ensure they can make informed and appropriate arrangements for the management of the prisoner.
- 10.4 Prisoner privacy is safeguarded to the maximum extent possible during the Receiving Office process.
- 10.5 Regular welfare checks are carried out on new prisoners by staff in person, including through observations and interactions with prisoners in the Receiving Office, until appropriate assessments have been completed.
- 10.6 Interviews are private, take account of all available information and identify vulnerability and risk. Reception staff provide an effective briefing to unit staff.
- 10.7 As far as practicable, newly received prisoners are accommodated separately from the rest of the prison population during the reception and induction process.
- 10.8 For prisoners who have difficulty understanding English, or have an impairment that inhibits hearing or understanding, appropriate supports are in place including access to interpreters.
- 10.9 Prisoners are asked for their ethnicity and (when applicable) iwi affiliation in a respectful manner.
- 10.10 Meals are available for those arriving at or returning to the prison at differing times.
- 10.11 Prisoners can shower on their first night.

- 10.12 On reception, women's individual circumstances and specific needs are documented and dealt with sensitively, and information is shared appropriately. Particular attention is given to:
- family/whānau circumstances/contact with relatives and dependents
 - age, including older and younger women
 - pregnant or breastfeeding women
 - previous history of abuse
 - potential victims of trafficking
- 10.13 The number and personal details of a prisoner's dependent children are recorded on the mother's admission to prison.
- 10.14 Pregnant women and women who are mothers of children under 24 months are given information on reception about Mother with Babies Units, and supported to make an application to have their child with them.
- 10.15 Breastfeeding and pregnant women are identified and given appropriate advice and support by a health care practitioner.

11. Newly received prisoners can inform their family/whānau and access services to resolve any family, domestic and financial issues as soon as reasonably practicable.

Key Indicators:

- 11.1 Prisoners who are primary caregivers are provided with facilities to make telephone calls to family/whānau and organise care for dependent children and other dependents on arrival in prison. They are told how to access a social worker, counsellor and other services to reduce the trauma of separation.
- 11.2 A free telephone call is offered and additional support is provided to those who have limited external support.
- 11.3 Prisoners should receive a reasonable level of support to put their affairs in order, including making any arrangements for the wellbeing of their family/whānau and pets.

12. Prisoner induction (both at site and unit level) is timely, accessible, appropriately targeted, and carried out in a respectful manner.

Key Indicators:

- 12.1 Prisoners promptly receive comprehensive information about the prison rules, regime, and services available in a language and format they understand.
- 12.2 Foreign national prisoners are informed of their right to request that a diplomatic or consular representative of their country is told of their detention.
- 12.3 Staff are respectful and seek confirmation that prisoners have understood the induction, and this is recorded in IOMS.
- 12.4 Prisoners receive basic supplies, such as clothing, bedding and toiletries.
- 12.5 Prisoners understand that their personal mail and telephone calls may be monitored.
- 12.6 Prisoners know how to access help and support from staff and family/whānau.
- 12.7 Prisoners know how to access support within the prison, including counselling services.
- 12.8 Induction information, notices, and other information are prominently displayed in prison units.

Health care on reception

13. Appropriate initial screening of health and wellbeing and identifiable needs, including prescription medication, and needs arising from a disability or substance use, are carried out upon reception and follow-up assessments and other necessary steps are taken to address these.

Key Indicators:

- 13.1 Prisoners' right to health privacy and confidentiality is safeguarded during reception health screening.
- 13.2 There is effective communication and information sharing between key stakeholders (e.g. Police, health, and custodial staff) in relation to health and wellbeing needs of new prisoners.
- 13.3 Health screening is conducted on the day of arrival by appropriately qualified health staff including, where necessary, mental health professionals and Māori health providers.
- 13.4 Health screening will have regard to hauora (overall wellness), including cultural considerations.
- 13.5 Reception screening promptly assesses prisoners' needs to ensure their immediate and ongoing safety, particularly regarding their risk of self-harm and suicide. Where a risk is identified, the prisoner receives safe and effective interventions to support their wellbeing.
- 13.6 Reception screening identifies substance use and any immediate risks of harm associated with withdrawal. Interventions to support withdrawal and detoxification commence immediately.
- 13.7 Prisoners are able to access smoking cessation support.
- 13.8 If health screening is not immediately possible, prison management ensures the prisoner's safety until their health status is known.
- 13.9 Particular attention is paid during reception screening to identify prisoners with a physical or mental illness, learning disability, cognitive impairment, low literacy level, communication or any other identified need.
- 13.10 On reception, steps are taken to ensure that prisoners who are prescribed medication or are receiving specialist medical or mental health care are supported to ensure continuity of treatment.
- 13.11 Health staff are sensitive to concerns prisoners raise about threats to their health and wellbeing and take appropriate follow-up action where required.
- 13.12 Health staff will obtain a prisoner's previous health care history where possible. This may include obtaining health records from community or specialist providers, or from previous periods of imprisonment (if applicable). Efforts are made to seek informed consent from prisoners for the sharing of their health information, where required.
- 13.13 Information on reception is accessible in a language and format that the prisoner understands, including how to contact health staff, health services available (including mental health and psychological services), and the process for making health appointments.
- 13.14 Following reception health screening, prisoners are offered a detailed clinical assessment appropriate to their individual needs. This includes age appropriate preventive screening, family and whānau history, spiritual, cultural, and mental health and addiction care needs.
- 13.15 Prisoners should be informed of any illness or medical condition that is detected during the screening process.
- 13.16 As soon as possible after their arrival in prison, women are offered a confidential, gender specific health assessment including reproductive health history and age appropriate and gender specific preventive screening. If appropriate, women are offered a pregnancy test.
- 13.17 Information on pregnancy, parenting, and other related topics is accessible in a language and format the prisoner understands.

Geographical placement

14. Prisoners are located close to their family/whānau and community, where possible.

Key Indicators:

- 14.1 Remand prisoners are held in the most convenient local prison for their domestic and legal visits, where possible.
- 14.2 If prisoners are placed in prisons outside their home region, it is for the minimum time necessary and for an identified reason.
- 14.3 Proximity to home is considered in transfer decisions.
- 14.4 Prior to release prisoners are transferred to a prison close to their release address, where possible.
- 14.5 Proximity to family or whānau support is given higher priority for women with young children.

Duty of care

Māori prisoners

15. Māori prisoners are acknowledged and respected as tangata whenua, in accordance with Te Tiriti o Waitangi obligations.

Key Indicators:

- 15.1 Māori prisoners' ethnicity is entered correctly in IOMS, including iwi and hapū affiliations where known.
- 15.2 Māori prisoners are supported to discover and explore their whakapapa connections and stories (pūrākau).
- 15.3 Staff are trained and supported to understand, respect and uphold Te Ao Māori for Māori prisoners.
- 15.4 Māori prisoners are supported to learn and encouraged to practise tikanga Māori, including te reo and their pepeha, karakia, waiata and kapa haka, and the tikanga of their marae.
- 15.5 Staff are supported to learn and pronounce Māori words (kupu) correctly, especially Māori names (ingoa), and encouraged to learn the meaning of Māori prisoners' names where possible.
- 15.6 Staff create conditions where the mana of both prisoners and staff are upheld.
- 15.7 Kaumātua and kuia are available to address the emotional and spiritual needs of Māori prisoners.
- 15.8 Māori prisoners are supported to maintain regular contact with whānau and other supports in the community, preferably in person.
- 15.9 Māori prisoners have their therapeutic and cultural identity needs assessed when they are received into prison and this is recorded in a plan developed with the prisoner and, where appropriate, the prisoner's family/whānau.
- 15.10 Recreational and cultural activities are available to benefit Māori prisoners' physical health, mental health, and spiritual growth and whanaungatanga.
- 15.11 [The prison respects the important role of Wāhine Māori in their communities, including their responsibilities and obligations to whānau. Wāhine Māori are supported by staff to access whānau support.](#)

16. Māori prisoners have access to kaupapa Māori rehabilitation and reintegration programmes and pathways.

Key Indicators:

- 16.1 Kaupapa Māori rehabilitation programmes and pathways are available to prisoners who identify as Māori, to strengthen their sense of identity and belonging and their connection to their whānau, hapū and iwi.
- 16.2 The prison partners with Māori such as mana whenua, iwi, hapū, and kaupapa Māori NGOs, to develop and create access to Māori rehabilitation and reintegration programmes and services.
- 16.3 Māori prisoners have access to a Kaiwhakamana or other kaupapa Māori supports and services. Kaiwhakamana are appropriately supported and resourced and are treated respectfully.
- 16.4 [Wāhine Māori have access to gender-specific kaupapa Māori informed and tikanga-based rehabilitation and reintegration programmes that are specifically designed to meet their needs.](#)

Pregnant women and post-natal support

17. Pregnant women, those who have recently given birth or whose pregnancy has ended, and those caring for a child in prison have their mental, physical, emotional, cultural and health needs fully supported by appropriately trained staff.

Key Indicators:

- 17.1 Pregnant women and those who have given birth can appropriately access medical care, advice, counselling, and support services to meet their needs, including in the event of miscarriage, termination or removal of their child into State care.
- 17.2 Ante-natal and post-natal services are equivalent to those provided in the community, including the option of termination.
- 17.3 Information on pregnancy, parenting and other related topics is accessible in a language and format the prisoner understands.
- 17.4 Care planning, including diet, starts from the earliest knowledge of pregnancy, or following the prisoner's admission to custody.
- 17.5 Appropriate support is provided when a pregnancy ends prematurely.
- 17.6 Counselling services are available for those who have experienced loss or bereavement, including miscarriage, termination or post-adoption.
- 17.7 The needs of pregnant women are considered as a priority when decisions are made about which prison they are placed in and which part of the prison they are accommodated in.
- 17.8 Women are supported to breastfeed their children, if they choose to, unless there are specific health reasons not to do so.

Foreign national prisoners

A foreign national prisoner is defined in the Corrections Regulations 2005 as "A prisoner detained in a prison who is not a New Zealand citizen".

18. The specific needs of foreign national prisoners are met, including practical help to keep in touch with family overseas.

Key Indicators:

- 18.1 Staff are informed of the needs and cultural preferences of foreign national prisoners.
- 18.2 Staff know which foreign national prisoners find communicating in English a challenge, and enable timely access to appropriate translation and interpretation services when required.
- 18.3 Key information about prison life is available in a range of languages.
- 18.4 Foreign national prisoners are encouraged to maintain connections to their family overseas and understand how to do so.
- 18.5 Foreign national prisoners receive extra telephone and/or video calls, particularly if they are unlikely to receive regular visits. Calls are facilitated at a mutually appropriate time of day, where practicable.
- 18.6 Foreign national prisoners are able to communicate with diplomatic or consular representatives.
- 18.7 Foreign national prisoners' individual rehabilitation and release needs are met.
- 18.8 Foreign national prisoners understand their immigration status and what will happen on completion of their sentence. Those who are to be deported should be prepared for this during release planning.
- 18.9 Prison staff understand the potential impact of deportation decisions on an individual's mental health and provide appropriate support.

- 18.10 Foreign national prisoners with children at risk of deportation are supported and able to access independent advice.

Transgender prisoners

19. Transgender prisoners are managed with respect and dignity.

Key Indicators:

- 19.1 Transgender prisoners are consulted and their preference is considered, along with evidence of living in their gender identity, when deciding whether to place them in a men's or women's prison.
- 19.2 Wherever possible, and subject to a risk assessment, transgender prisoners are placed in a prison consistent with their gender identity.
- 19.3 Transgender prisoners are informed of their right to apply to be transferred to a prison that houses prisoners of their preferred gender identity and are supported by staff to apply if they choose.
- 19.4 Transgender prisoners are routinely addressed, and referred to, as the gender they identify with.
- 19.5 Staff consult the prisoner about their preferred name and pronoun, and records accurately reflect prisoner details.
- 19.6 Searches of transgender prisoners are carried out with respect and dignity, and searches are only conducted where necessary.
- 19.7 Transgender prisoners can nominate staff of their preferred gender identity to perform searches.
- 19.8 Protective measures for transgender prisoners involve no greater restriction of rights than is experienced by the general prison population, and they are not unduly segregated.
- 19.9 Transgender prisoners are allocated single cells, unless two transgender people of the same gender identity reside in the prison, and a risk assessment is completed indicating they are suitable for placement together, and they choose to be placed in a shared cell.
- 19.10 Transgender prisoners have individualised support plans that address their specific needs and requirements, which are regularly reviewed.
- 19.11 A support plan is completed promptly, and includes information on cell placement, safety, maintaining gender identity, searching arrangements and escort preferences. The plan is shared with appropriate staff.
- 19.12 Transgender prisoners are able to access support or counselling services where needed, including external support networks as appropriate.
- 19.13 Training is available to staff, to enable them to adequately support transgender prisoners.
- 19.14 Staff ensure transgender prisoners' right to privacy.
- 19.15 Transgender prisoners have equal access to rehabilitation, industry, treatment and learning opportunities.
- 19.16 Transgender prisoners have access to the items they use to maintain their gender appearance and identity.
- 19.17 Transgender prisoners have access to gender-affirming health care that adequately and appropriately meets their needs, equal to that which they can receive in the community.
- 19.18 Transgender prisoners have continuity of care, particularly with regard to hormone therapy and specialist care, on arrival at and release from prison.
- 19.19 The prison has effective measures to prevent violence against or abuse of transgender prisoners.

Young people under 18 years

20. The distinct needs and entitlements of young people under 18 years are identified and appropriately responded to.

Key Indicators:

- 20.1 Young people under 18 years are flagged in IOMS, and those with current care and protection orders are identified in alerts.
- 20.2 Young people under 18 years can access support services they are entitled to, for example, Oranga Tamariki social workers, youth workers and kairaranga, cultural supports, advocacy services, youth mental health and addictions services (including youth forensic services) and education.
- 20.3 Young people under 18 years on remand are actively supported to identify bail plans if appropriate with input from the Bail Support Service, if available, and Oranga Tamariki (if entitled), to spend the shortest time in custody.
- 20.4 Young people under 18 years are supported to develop plans and pathways that will help reduce their risk of harm to the community and spend the shortest amount of time in prison through early access to age-appropriate rehabilitation and reintegration services (if serving a sentence over two years).
- 20.5 Young people under 18 years are kept separate from adults and placed in a youth unit with 18 and 19 year olds assessed as suitable to mix with people under the age of 18 years. Where this is not practicable, they should be accommodated in an appropriate environment for their age, including considerations for mixing with anyone over 18 years.
- 20.6 Prison staff understand the susceptibility to negative influences of young people under 18 years and ensure they are safe from harassment, victimisation, and bullying.

Prisoners under 25 years (including young people under 18 years where relevant)

21. The distinct needs and entitlements of young people under 25 years are identified and appropriately responded to.

Key Indicators:

- 21.1 All 18 and 19 year olds are flagged in IOMS and have an alert with the outcome of their Assessment for the Placement of Young Adults (APYA), including the decision for placement in a youth unit or key considerations if placed outside a youth unit.
- 21.2 Young prisoners are, and feel, safe from other prisoners, and are actively supported by staff and effective peer support processes.
- 21.3 Prisoners under 25 years have multidisciplinary, cultural and gender specific care plans developed, implemented, and regularly reviewed. They are involved in all stages, with inclusion of family, whānau or other key supports identified by the prisoners.
- 21.4 Prisoners under 25 years receive age-specific health screening and health education.
- 21.5 Staff are trained and aware of the distinct needs of prisoners under 25 years, recognising and responding to individual levels of maturity. This is accounted for in behaviour management and disciplinary processes, including support to develop skills, attitudes and behaviours to reduce security classifications from the earliest opportunity.
- 21.6 Prisoners under 25 years have access to age-appropriate, culturally relevant rehabilitation programmes, reintegration support services, educational, vocational and developmental support services and recreation activities. They are consulted about the range of activities

offered and supported to access services that promote their wellbeing, rehabilitation, goals and aspirations.

- 21.7 Prison staff encourage and facilitate the maintenance of family/whānau connections, unless in specific circumstances where this may cause harm.

Children living in prison

22. Decisions about whether a child stays with their mother are made in the best interests of the child, based on the conditions in prison, the risk (if any) the mother poses to the child, the quality of care children receive in prison and what quality of care they can expect to receive outside prison, and the remaining length of the mother's sentence.

Key Indicators:

- 22.1 There is a clear, effective and fair policy about children staying with their mother in prison. Women have access to information about this policy that is easy to understand.
- 22.2 There is sufficient capacity in the Mothers with Babies Unit to meet demand.
- 22.3 The application process for the Mothers with Babies Unit is fair, equitable and timely, and women are supported to make an application.
- 22.4 Decisions regarding the removal of a child from prison are based on individualised and comprehensive assessments focussed on the best interests of the child. Mothers are given appropriate support in these circumstances.
- 22.5 Where a child is separated from its mother before the mother's release date, the mother is fully supported both emotionally and practically in making the arrangements for separation.
- 22.6 The actual separation is undertaken with sensitivity, and the child's safety is the primary consideration during separation.
- 22.7 Once a child has been removed from prison, staff work with the parties involved to ensure that the child can visit their mother as frequently as possible.

23. Women whose child is with them in prison are provided with a safe, supportive and comfortable environment which prioritises the care and development of the child.

Key Indicators:

- 23.1 Children entering prison are treated with sensitivity and staff ensure they are protected, cared for, feel safe and made comfortable.
- 23.2 The Mothers with Babies Unit environment is suitable, child safe, and includes well maintained outdoor play spaces.
- 23.3 Women are responsible for the care of their child living in the prison, exercising their parental responsibilities through informed choices.
- 23.4 Resident children are not treated as prisoners.
- 23.5 Women whose child is with them in prison shall be provided with the maximum possible opportunities to spend time with their child.
- 23.6 Mothers with Babies Units are always supervised by at least one trained female member of staff.
- 23.7 Mothers are able to cook for their child and receive support to do so.
- 23.8 Mattresses, bedding, clothing and all other equipment in the Mothers with Babies Unit are regularly checked to ensure they are in an appropriate condition.
- 23.9 Mothers living in the Mothers with Babies Unit can receive extended visits from family/whānau members and their other children in a homely environment.
- 23.10 Women can access parenting support programmes equal to those in the community.

- 23.11 Women are provided with the knowledge and skills necessary for child emergencies, including first aid.
- 23.12 The psychological/emotional needs of the child are closely monitored to assess any adverse effects of living in a closed environment and measures are taken to reduce any negative psychological impact, based on individual needs.
- 23.13 Children have opportunities to experience community activities and are prepared to leave the prison in accordance with their development needs and best interests.
- 23.14 Efforts are made to eliminate as far as possible the differences between life in prison and outside prison for children.
- 23.15 Staff working with children have undergone specific training including child development, child protection issues and infant resuscitation.
- 23.16 Respite care is available for mothers who need a break from their childcare duties.

24. The health care needs of children living in prison are adequately met.

Key Indicators:

- 24.1 The child is able to access health care in the community, as required. Mothers have the opportunity to be present during their child's health interventions.
- 24.2 The prison facilitates regular visits from the child's WellChild provider. Access is equal to that available in the community.
- 24.3 Services include access to the child's regular vaccinations and any other preventive health care and treatment provided for children in the community.
- 24.4 Health centre staff can advise on and assess the health care needs of resident children in emergencies.

Relationships with family and whānau

25. Prisoners are supported to maintain relationships with their family/whānau and friends.

Key Indicators:

- 25.1 Prisoners can inform their family/whānau as soon as practicable after their reception to prison, upon their transfer between prisons, and about any serious illness or injury.
- 25.2 If appropriate and necessary, prison staff will ensure that a prisoner's family/whānau and/or designated contact person are informed about the prisoner's imprisonment and/or transfer, and how they can contact and support the prisoner.
- 25.3 Prisoners' approved telephone numbers are entered on the telephone system as soon as possible after arrival.
- 25.4 Prison staff notify prisoners of the serious illness or death of a family/whānau member or significant other person, and a risk/wellbeing assessment is subsequently conducted. Prisoners are supported to apply for temporary release, if appropriate.
- 25.5 Prisoners have regular access to mail and other forms of communications.
- 25.6 Prisoners have regular access to make telephone calls to family/whānau and friends, in addition to calls to outside agencies and legal advisors. Telephones can be used in private, where possible, and calls are not prohibitively expensive.
- 25.7 Prisoners have regular access to visits, including extended visits for those travelling long distances.
- 25.8 Prisoners are encouraged to have visits with their children unless this is not in the child's best interests.
- 25.9 Family/whānau days are held, where appropriate.

- 25.10 Prisoners and their family/whānau can access interventions for improving parenting and relationship skills.
- 25.11 The overall treatment of a prisoner, including any segregation or disciplinary action, must not unreasonably deprive the prisoner of communication with family/whānau and friends.
- 25.12 Methods for encouraging family or whānau contact (for example, audio recordings of stories) and opportunities for prisoners to celebrate their successes with their family, whānau and friends are available.
- 25.13 Consideration is given to providing parents with the ability to video conference with children, particularly in an emergency (e.g. a sick child).
- 25.14 Parents in prison have access to programmes and interventions to help them improve their parenting skills, understand the potential impact of their imprisonment on their children and maintain relationships from prison.
- 25.15 Visitors are informed about relevant changes to visiting routines and, where eligible, about possible financial assistance for meeting the costs of travelling to prisons.
- 25.16 Women's prisons employ a specialist social worker to help women who are primary carers to maintain contact with their children and fulfil their parental responsibilities, to support those undergoing separation and child protection procedures, and to assist those seeking to re-establish contact with family/whānau members.
- 25.17 Women, particularly those who are primary caregivers, are assisted to contact and consult with legal representatives in relation to family/whānau matters.

Access to legal advisers and attendance at court hearings

26. Prisoners have confidential and reasonable access to legal advisers and resources, and the prison supports prisoners to prepare for their court appearances.

Key Indicators:

- 26.1 Prisoners know what resources are available to help meet their legal needs and are supported to find a legal adviser if necessary.
- 26.2 Remand prisoners are appropriately supported to apply for bail.
- 26.3 Prisoners can maintain sufficient confidential contact in person with their legal adviser (whether face to face or by other means, out of the hearing of staff).
- 26.4 Prisoners can communicate with their legal representatives in confidence by telephone, letter, and/or audio-visual link.
- 26.5 Where possible, facilities are available for legal advisers to review digital evidence with prisoners.
- 26.6 Prisoners should have reasonable access to legal resources, which should be regularly updated.
- 26.7 Where appropriate, prisoners have access to a computer and printer to prepare legal correspondence and documents.
- 26.8 Legally privileged correspondence is not opened by prison staff unless done so lawfully.
- 26.9 Prisons maximise the use of audio-visual technology for video court appearances where practicable.
- 26.10 Remand prisoners can wear their own clothing when appearing in court.
- 26.11 Prisoners are provided with information and/or guidance to prepare them for Parole Board hearings.

Bullying and violence reduction

27. Prisoners feel safe from bullying and victimisation.

Key Indicators:

- 27.1 The prison has an effective bullying and violence reduction strategy overseen by an appropriate manager, which is regularly reviewed taking into account identified trends within the prison.
- 27.2 Risk assessments for prisoners who are placed in shared accommodation are carried out to reduce the likelihood of intimidation or bullying.
- 27.3 Staff promote positive and supportive relationships, and identify and model pro-social behaviour.
- 27.4 Prison staff are trained to detect, prevent and effectively respond to bullying behaviour.
- 27.5 The prison promptly investigates allegations of bullying, abuse, or violence, and responds appropriately.
- 27.6 If harm, abuse, or bullying is alleged or suspected, prompt action is taken to protect the prisoner and prevent retaliation.
- 27.7 Staff encourage prisoners to report concerns they have about their safety and wellbeing or threats they receive, and respond appropriately.
- 27.8 Vulnerable prisoners are protected (for example those who have been bullied or are vulnerable because of their offence), and victims can access appropriate support.
- 27.9 Perpetrators of violence and antisocial behaviour receive support to change their behaviour.

Victims of abuse or trauma

28. Prisoners who are victims of abuse or trauma receive timely and appropriate interventions and support, and can seek redress if they wish to do so.

Key Indicators:

- 28.1 Prisoners can disclose a history of ill-treatment, abuse, or trauma at any time during custody.
- 28.2 Staff are trained to recognise the psychosocial needs of prisoners including the impact of previous trauma related to violence and abuse.
- 28.3 Disclosures or evidence of abuse or trauma are handled sensitively and professionally by trained staff. Accurate records are kept and chain of evidence procedures are followed.
- 28.4 Any prisoner complaining of ill-treatment, torture or sexual violence, is assessed by an appropriate health professional.
- 28.5 Prisoners who have been ill-treated or abused are adequately supported through individualised, gender sensitive, culturally appropriate, trauma informed and comprehensive services, including health services, counselling and programmes.
- 28.6 Prisoners who have been ill-treated or abused can access legal representation and information about their rights.

Separation of prisoner categories

29. Prisoners of different categories are separated, where possible, by allocating them to separate parts of the prison.

Key Indicators:

- 29.1 Remand prisoners are managed separately from sentenced prisoners, unless there is an approved exemption in place.
- 29.2 Remand accused prisoners are managed separately from remand convicted and sentenced prisoners, unless there is an approved exemption in place.
- 29.3 Segregated prisoners are managed separately from mainstream prisoners.
- 29.4 Seventeen year olds remanded in Corrections' custody under the Oranga Tamariki Act or the Criminal Procedure Act are placed in a prison Youth Unit.
- 29.5 Young people under 18 years are kept separate from adults and placed in a Youth Unit with 18 and 19 year olds assessed as suitable to mix with those under 18. Where it is not practicable to place a person under 18 in a Youth Unit, they should be accommodated in an appropriate environment for their age, including considerations for mixing with anyone over 18.
- 29.6 Prisoners under 25 years are accommodated separately from older prisoners as far as practicable and if appropriate (especially if under 20 years and/or it is their first time in custody).

Complaints and feedback

30. The complaint system is accessible to complainants and their advocates.

Key Indicators:

- 30.1 The complaint resolution system is easy for potential complainants and their advocates to understand and access, and information is available at induction and during time in prison.
- 30.2 Prisoners have options to submit complaints in ways that suit their needs, without fear of intimidation or other adverse consequences.
- 30.3 Staff provide prisoners with reasonable assistance to make a complaint, particularly if they have challenges such as communication difficulties, or other diverse needs.
- 30.4 Prisoners are supported to authorise an advocate to assist them in making and progressing a complaint.²
- 30.5 Site leaders promote a culture where complaints are viewed by staff as a positive opportunity to learn and improve systems, policies, procedures and practices.

31. Complainants feel respected, heard, and understood.

Key Indicators:

- 31.1 Complaints are dealt with at the lowest and most informal level, if possible in the circumstances. Where that is not possible, or where a complainant wishes to escalate an issue, complaints are dealt with internally on a formal basis.

² Except where Privacy Act 2020 withholding provisions apply, such as where a person's safety may be compromised, or another person's rights unreasonably infringed.

- 31.2 Staff acknowledge complaints in a timely manner and triage them appropriately.
- 31.3 Complaints about safety are prioritised. Prisoners who allege physical or sexual abuse are given appropriate health care and other support.
- 31.4 Staff investigate complaints in a fair, timely and effective manner, and in a way that is sensitive to the cultural needs of the complainant.
- 31.5 Staff use kanohi ki te kanohi (face to face) dialogue, if possible, throughout the complaint resolution process.
- 31.6 Staff who investigate complaints respect and uphold the dignity and mana of all people involved in the process.
- 31.7 Staff communicate with complainants and advocates in a way that enables them to understand any information provided.
- 31.8 Complainants and advocates are told of opportunities for internal and external review of a complaint, such as by an Inspector of Corrections or an external oversight agency.

32. Complaints facilitate organisational learning.

Key Indicators:

- 32.1 Staff accurately record and categorise complaints, including those resolved at the lowest level.
- 32.2 Site leaders respond promptly to Office of the Inspectorate and/or external agency complaint investigations and recommendations.
- 32.3 Site leaders regularly review insights from complaint trends to inform continuous improvement to internal systems, policies, procedures and practices.

33. Prisoners can proactively provide feedback to senior staff via forums or by other means.

Key Indicators:

- 33.1 Prisons operate unit-based, part-site, or whole-of-site forums where it is safe to do so.
- 33.2 Forums are held frequently enough and for long enough to address matters of importance to staff and prisoners.
- 33.3 The most appropriate senior staff consistently attend forums, and other appropriate attendees are invited as required.
- 33.4 Prisoner representatives have the opportunity to volunteer to participate in forums.
- 33.5 Where forums cannot operate safely, staff provide other mechanisms for prisoners to give feedback, such as individual surveys.

Religious or spiritual support

34. Prisoners' freedom of religion is respected and they can practise their religion or beliefs safely.

Key Indicators:

- 34.1 Prisoners have access to religious services and facilities, where possible, and prison staff are respectful of prisoners' religious and spiritual beliefs.
- 34.2 Prisoners have reasonable access to representatives from their religion for religious or spiritual support.
- 34.3 Where appropriate and practical, prisoners can participate in religious celebrations.

34.4 Prisoners have reasonable access to books and other items associated with their religious or spiritual practices.

34.5 Upon request, the prison provides food, where possible, that takes into account prisoners' religious dietary requirements.

35. Prisoners are supported by the chaplaincy, which contributes to their overall care, support, and rehabilitation.

Key Indicators:

35.1 Prison chaplains represent the broad range of faiths in the prison population.

35.2 Chaplains are involved immediately when a prisoner is near to death or has died, to support the dying prisoner, family and whānau, other prisoners and staff.

35.3 Chaplains provide support to prisoners who have experienced bereavement or loss.

35.4 Chaplains are available to support all prisoners, including those of no faith.

Property

36. Prisoners' property held in storage is secure, and prisoners can access it on reasonable request.

Key Indicators:

36.1 Prisoners can receive property subject to security and volume considerations.

36.2 The items of property that prisoners are permitted is adequate to meet their needs.

36.3 Prisoner property is appropriately registered and stored.

36.4 Property required to support health and accessibility needs is made available to prisoners.

36.5 Prisoners have adequate space to store approved personal items.

36.6 Prisoner funds are managed securely. Prisoners are able to access sufficient funds for prison expenditure. Prisoners understand the processes around how their funds are managed.

36.7 On the release of a prisoner, all prisoner property and funds are promptly returned.

36.8 On the transfer of a prisoner, all prisoner property is promptly transferred and this is communicated to them.

36.9 Prisoners are fairly compensated in a timely way for property that is lost or damaged in storage or transfer.

36.10 Prisoners should not be arbitrarily deprived of property without being informed of the reason, and having a right of appeal.

36.11 Prisoners' property cannot be destroyed by the prison, unless appropriately authorised.

Health

Provision of health care

37. Prisoners should have timely access to necessary health and disability services at a level reasonably equivalent to that provided in the community, in an environment that promotes dignity and maintains privacy, and without discrimination on the grounds of their legal status.

Key Indicators:

- 37.1 The relationship between health care professionals and prisoners is governed by the same ethical and professional standards as those applicable to people in the community.
- 37.2 Health care facilities, screening and services available to prisoners should reflect the health needs of the prison population.
- 37.3 Health care facilities, equipment and medical supplies are fit-for-purpose and are maintained and compliant with relevant national guidance and standards.
- 37.4 The health service provides 24 hour a day access to medical practitioners and nursing staff who are either available on the site, or on call.
- 37.5 Staff are well trained, have on-going professional development, and have regular clinical and managerial supervision.
- 37.6 Health staff treat prisoners as individuals, taking into account values, beliefs, culture, religion, disabilities, gender, sexual orientation and other social identities or characteristics.
- 37.7 Health care professionals demonstrate knowledge, understanding and application of Te Tiriti o Waitangi and this is reflected in day-to-day service delivery.
- 37.8 Prisons seek to establish partnerships with local Māori health services to support the cultural responsiveness of the health service.
- 37.9 Māori prisoners have access to rongoā, where appropriate and practicable.
- 37.10 There is a multidisciplinary approach to prisoner health care.
- 37.11 Prisoners can access accurate information about their health in a language and format they understand.
- 37.12 Prisoners receive continuity of health care on arrival, during and on release from custody.
- 37.13 Where a triage policy is used to assess the health needs of prisoners, this is undertaken by an appropriately qualified health professional.
- 37.14 All prisoners who have a health concern are assessed by a health practitioner as promptly as circumstances permit and at intervals appropriate to the nature or diagnosis of the health concern raised, according to best practice.
- 37.15 All clinically indicated medications are prescribed and administered appropriately to provide the best therapeutic outcome for prisoner care.
- 37.16 Prisoners are able to access urgent, specialised healthcare without delay with special attention paid to any individual needs. Prisoners are supported by staff at this time.
- 37.17 Prisoners who have been placed on a waiting list for a health service are informed of expected waiting times and any delays.
- 37.18 Older prisoners receive proactive screening, assessment and care.
- 37.19 Prisoners have timely access to a qualified dentist, including emergency dental services.
- 37.20 All health staff understand the importance of reporting health incidents and risk. Health incidents are appropriately reported and monitored.
- 37.21 Health service delivery is informed by effective prisoner consultation and lessons are learned (for example from surveys, incidents and complaints).

- 37.22 A clinical governance structure is in place to provide accountability and responsibility for clinical safety, quality and risk management, as well as ensuring services are being delivered which improve outcomes and achieve equity for Māori.
- 37.23 Women's complex health and wellbeing needs are adequately identified, treated and managed holistically, with trauma informed processes, and where necessary account for grief and anxiety associated with separation from children and other dependents.
- 37.24 Women can access female doctors, if possible, where this is preferred. They can have a female support person present if they receive treatment from male health staff.
- 37.25 Women can refuse to provide information or undergo screening relating to their reproductive history.

38. A health file is established for each prisoner on reception and all subsequent health contacts are recorded in the file.

Key Indicators:

- 38.1 Health files contain all relevant aspects of a prisoner's health care needs, assessments and treatment. Files comply with relevant legislation, health information standards and professional guidelines.
- 38.2 Health files are securely stored, and access is limited to health staff. Appropriate action is taken when prisoners request access to their own health information.

39. Prisoners are supported and encouraged to optimise their health and wellbeing.

Key Indicators:

- 39.1 Information about available health services and current national health campaigns is easily accessible in all required formats and languages.
- 39.2 Prisoners receive non-judgmental and culturally appropriate preventive health education and information, and are supported and encouraged to optimise their health and wellbeing through preventive health measures.
- 39.3 Health promotion and health education is evidence-based.
- 39.4 Health prophylactics for harm minimisation (including condoms and dental dams) are available in a confidential, non-judgemental context with appropriate education.
- 39.5 Where required, support and counselling are provided to assist prisoners to manage their health issues.
- 39.6 Prisoners can request appointments with health staff confidentially, without requests being screened by custodial staff.
- 39.7 Prisoners receive health services that are not unnecessarily restricted by security procedures.
- 39.8 Prisoners are seen by health staff in private, except in clearly documented circumstances, where there is a risk to safety or of escape. If the presence of custodial staff at health appointments is necessary, this should be handled with sensitivity and care, and risk managed appropriately.
- 39.9 Declining of treatment is documented and the implications of not receiving health care are fully explained to the prisoner in a language and in terms that they understand.
- 39.10 On release, all prisoners receive a summary of their health status and are provided an appropriate level of support to maintain continuity of health care in the community.
- 39.11 Prisoners who take prescribed medication are provided an appropriate supply of their medication when they are released.
- 39.12 Women can access gender-specific preventive health services equal to those available in the community, including regular cervical and breast screening.

39.13 Contraception and related advice is available to all women prior to release.

39.14 Women are encouraged to access and learn about preventive health care. Predisposed women, older women, and those with family histories of disease are particularly encouraged.

40. There are robust systems to prevent, identify, monitor and manage communicable diseases.

Key Indicators:

- 40.1 There is appropriate cleaning and disinfection of the environment and other frequently touched surfaces within the health care facility, which is monitored. Remedial actions are taken promptly to address any non-compliance.
- 40.2 All staff tasked with managing body fluid spillages, contaminated items or isolation facilities must be appropriately trained and have available all necessary appropriate cleaning and personal protective equipment.
- 40.3 Prisoners give informed consent before testing for communicable diseases and receive education and counselling if appropriate when informed of the test results.
- 40.4 If a prisoner is found to have an infectious disease, they are managed by health services to minimise the possibility of contamination of the prison population.
- 40.5 All necessary infection control procedures must be implemented and prison management advised of any special requirements needed.
- 40.6 Prisoners who are segregated for health reasons are afforded all rights and privileges that are accorded to other prisoners, wherever practicable and so long as such rights and privileges do not jeopardise the health of others. Prisoners must be provided with meaningful human contact every day while ensuring all parties are kept safe.
- 40.7 In the event of a pandemic or contamination of a prison, the fundamental rights of prisoners must be fully respected.

Substance use

41. Prisoners with a history of substance use receive specialised and individualised assessment, education, treatment, and culturally appropriate support (including aftercare).

Key Indicators:

- 41.1 Assessments are conducted with prisoners to identify if substance use is problematic or whether there are drug dependency issues, so they can be supported with appropriate clinical, psychosocial, harm reduction interventions or programmes.
- 41.2 All prisoners can access basic education programmes on alcohol and other drugs, including information about the side effects of alcohol and drug use and the support services that are available in prison and the community.
- 41.3 Where clinically appropriate, replacement pharmacotherapy is available. Processes are in place to ensure regular review of treatment occurs for all prisoners on opioid maintenance therapy.
- 41.4 Partnerships are developed with local drug rehabilitation, counselling, and education organisations, including Māori health organisations. With prisoner consent, the prison liaises with these agencies to ensure appropriate information sharing and joint planning to ensure continuity of care upon release.

- 41.5 Prisoners with mental health and substance-related concerns have prompt access to joined-up, comprehensive support.
- 41.6 Prisoners receive information on how to avoid substance and/or alcohol-related overdose, injuries and death post-release.
- 41.7 Treatment regimes are flexible, conform to national clinical guidelines and are provided by specialist staff in a safe environment.
- 41.8 Women's complex substance use issues, including poly-substance use, are identified, and appropriately managed with gender-specific treatment, programmes, support, and counselling.
- 41.9 Access to treatment for women is substantively equal to that available to male prisoners and does not require women to be transferred to another prison away from their family/whānau and community of interest.

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

Key Indicators:

- 42.1 A range of evidence-based and evaluated drug and alcohol programmes are available for prisoners, to match identified demand.
- 42.2 Staff are trained to identify, effectively support and manage prisoners with substance use disorders and to recognise when a prisoner requires referral to addiction services.
- 42.3 Testing for illicit substances is carried out respectfully, and is subject to oversight and record keeping.

Mental health

43. Prisoners' mental health needs are adequately and appropriately met.

Key Indicators:

- 43.1 Health professionals working in prisons have mental health training and deliver a community-equivalent range of evidence-based interventions and support for prisoners with mental health needs, such as distress and mental illness, learning disabilities, trauma, neurodiversity and personality disorders.
- 43.2 Staff receive ongoing training to enable them to recognise when a prisoner requires referral for mental health assessment, and there are clear referral pathways.
- 43.3 Mental health referrals are triaged promptly and appointments allocated based on clinical need/risk.
- 43.4 Staff collaborate with kaupapa Māori service providers and other culturally specific services and providers, as needed.
- 43.5 A psychological counselling service is available to prisoners. Trauma and grief counselling services are offered where appropriate.
- 43.6 Prisoners with complex or severe mental illness have written care plans which are regularly reviewed with their mental health practitioners.
- 43.7 Prisons seek to minimise the adverse impacts of imprisonment on the mental health and wellbeing of prisoners. This is particularly important with prisoners who are experiencing suicidal or self-harming ideation.
- 43.8 Consideration is given to a prisoner's mental health prior to disciplinary action being taken.

- 43.9 Where a need or vulnerability is identified that cannot be met by the prison due to severe mental distress or illness, or severe cognitive impairment, prompt referral should be made to a more therapeutic and appropriate setting.
- 43.10 Discharge planning systems are in place to ensure that prisoners with mental distress or illness preparing for release have a care plan developed and documented to facilitate supportive pathways through to community health services.
- 43.11 Prisoners who should not be detained in prison due to severe mental disabilities are promptly referred to mental health facilities.
- 43.12 Prisoners who should not be detained in prison due to severe intellectual disability are referred to an intellectual disability care agency.
- 43.13 Gender-specific multidisciplinary mental health services, including counselling and support, are provided to address the risks and needs of women.
- 43.14 Staff identify when women are feeling particularly distressed, and ensure sensitivity and support is provided at these times.

44. Prisoners at risk of self-harm or suicide are supported in a therapeutic environment with trained staff who are resourced to meet their individual needs.

Key Indicators:

- 44.1 All staff are trained in identifying self-harm and suicidal behaviour, and suicide prevention.
- 44.2 Prisoners showing self-harm or suicidal behaviour are identified early and managed effectively under the least restrictive regime for their risk.
- 44.3 Prisoners at risk of self-harm are placed in an environment where they can easily access the clinical support they need and a purposeful regime with meaningful activities and regular engagement with other people.
- 44.4 All staff engage in a supportive and constructive way with prisoners in mental crisis, in a culturally appropriate way.
- 44.5 Prisoners being managed in an alternative or restrictive regime due to their risk of self-harm are consulted and informed about their care, including how to return to a standard regime.
- 44.6 Any prisoner being managed in an alternative or restrictive regime due to their risk of self-harm should be visited daily and as frequently as is necessary by a health professional to monitor physical and mental health.
- 44.7 Prisoners with complex or persistent self-harming behaviours are managed using enhanced multidisciplinary case reviews.
- 44.8 Information about prisoners at risk of self-harm is communicated to Community Corrections, when release is imminent, and arrangements for support in the community after release are made.
- 44.9 The physical features and layout of specialised units where prisoners are being managed due to their mental health or risk of self-harm promote the humanising and healing of prisoners.
- 44.10 Prisoners at risk of harm are only segregated when absolutely necessary, with the proper recorded authorisation and only for the duration required to mitigate the risk of self harm.
- 44.11 Prisoners who have been identified as at risk of self harm or suicide are able to wear their usual clothing, including underwear. If a prisoner is required to wear specific clothing to minimise their risk of self harm, this is reviewed regularly so that it is worn for the least amount of time before the prisoner is able to return to wearing their usual clothing.
- 44.12 Responses to risks of self-harm and suicide are gender-specific, culturally appropriate, and individualised to the woman's specific needs.

44.13 Staff have received training in identifying and providing cultural and gender-specific support to causes of distress including separation or loss, after childbirth, if prisoners are unable to see or contact family/whānau, and prior to release.

Disabled prisoners

45. The specific needs of disabled prisoners are met.

Key Indicators:

- 45.1 Proactive steps are taken to identify prisoners' needs arising from a disability.
- 45.2 Where needs are identified, appropriate interventions are made including access to services, support, programmes, work, recreation activities and equipment.
- 45.3 Prisoners under legal guardianship are appropriately represented while in prison, when there is a decision that the guardian is appointed to make.
- 45.4 Prisoners with a disability or age related needs are placed in a cell that is suitable and appropriate for their health related needs.
- 45.5 Prostheses and other assistive devices are provided where recommended by an appropriately qualified health professional, to a standard equivalent to that available in the community, and replaced or repaired as necessary. Prisoners who require these devices can keep them in their cells, with appropriate controls.
- 45.6 Disabled prisoners can access disability advocacy support.
- 45.7 Where possible and appropriate, prisoners with disability or age-related needs have equal access to prison facilities as able-bodied prisoners.
- 45.8 Written material is provided in formats that can be understood, for example, by people with a learning disability.
- 45.9 Staff are trained to recognise behaviours associated with neurodivergence or learning disabilities, and to support these prisoners.

Environment

Residential units

46. Prisoners live in a clean and suitable environment which is in a good state of repair and fit for purpose.

Key Indicators:

- 46.1 Prison facilities, including outside spaces, are adequate for the operation of the prison. There are an appropriate range of spaces for the different activities the prison offers.
- 46.2 Buildings and equipment are properly maintained, and there is a process for faults or defects to be logged and dealt with efficiently.
- 46.3 Appropriate precautions are in place to minimise health hazards. Vermin and pests are controlled.
- 46.4 Cells and communal areas are clean, free of graffiti and mould, well lit (with adequate natural light), have appropriate heating and are in good condition.
- 46.5 Cells are ventilated, with fresh air where possible.
- 46.6 Cells are physically safe, with ligature points minimised, and fitted with a sprinkler system.
- 46.7 Cells have an intercom, which staff respond to promptly and which is checked regularly.
- 46.8 Where possible, prisoners do not share cells. The placement of prisoners in a shared cell happens only after a formal risk assessment is carried out and the prisoners involved are consulted.
- 46.9 Shared cells provide adequate privacy for prisoners using the toilet and shower areas.
- 46.10 Cell observation panels are free from obstruction.

47. Cells have suitable clean bedding.

Key Indicators:

- 47.1 Sufficient clean bedding is provided for each new prisoner on arrival.
- 47.2 Bedding is laundered regularly.
- 47.3 Mattresses and pillows are clean and replaced when needed.
- 47.4 Mattresses meet required standards, including being non-flammable.

Hygiene

48. Prisoners are encouraged to keep themselves, their cells, and communal areas clean.

Key Indicators:

- 48.1 Prisoners have access to a shower and a toilet, with due regard for privacy. Communal showers and toilets are clean, adequate and well-maintained.
- 48.2 Adequate water, of appropriate temperature, should be available for prisoners' hygiene.
- 48.3 Prisoners are provided with basic toiletry items for personal use, including razors and sanitary items.
- 48.4 Prisoners have access to regular haircuts.
- 48.5 Toiletries and personal hygiene items available from the canteen allow for personal choice and prisoner budgets.
- 48.6 Sufficient day to day cleaning is carried out to maintain proper standards of hygiene.

- 48.7 Cleaning materials are available to prisoners to maintain their cell and communal areas to a clean and hygienic standard.
- 48.8 Health information and education materials promoting good hygiene practices are available to prisoners.

Clothing

49. Prisoners have adequate access to a variety of clean clothing, including underwear and footwear, which is seasonally appropriate, of the right size and quality.

Key Indicators:

- 49.1 Prison issued clothing is decent, fits appropriately, is fit for purpose and is in good repair.
- 49.2 Prisoners are provided with sufficient underwear and socks to be able to change them daily.
- 49.3 Prisoners are issued with sufficient seasonally appropriate clothing and footwear.
- 49.4 Prisoners are permitted to wear culturally appropriate and religious items of clothing, where assessed risk permits.
- 49.5 Laundry arrangements are sufficient to ensure prisoners have access to a regular change of clean clothes.
- 49.6 When attending court or for other reasons (e.g. a funeral or tangi), prisoners are permitted to wear their own clothing.
- 49.7 Gender-appropriate clothing, including underwear, is available for women prisoners.
- 49.8 Suitable clothing is provided for the specific needs of pregnant women and nursing mothers.

Food

50. Prisoners have a varied, healthy, and balanced diet which meets their individual needs.

Key Indicators:

- 50.1 Prisoners are provided with sufficient quantities of nutritious, palatable food, in line with the national menu.
- 50.2 Upon request, the prison provides meals in line with religious, cultural, health and other special dietary requirements.
- 50.3 Clean drinking water is available to every prisoner.
- 50.4 Prisoners eat their meals in communal areas, with others, wherever possible.
- 50.5 Meals times are reasonable and generally match those in the community.
- 50.6 Healthy food choices are available, including for self-care units and canteen purchases.

51. Prisoners' food and meals are stored, prepared, and served in line with hygienic practices.

Key Indicators:

- 51.1 Food safety and hygiene practices are adhered to in all areas where food is stored, prepared or served.
- 51.2 Prisoners and staff who work with food are trained, health-screened, and wear appropriate clothing.
- 51.3 Staff supervise the serving of food to prisoners.

Good order

Security

52. Prisoners are held in a safe environment where security is proportionate to risk and not unnecessarily restrictive.

Key Indicators:

- 52.1 The physical and procedural security of the prison is robust.
- 52.2 Security systems are sufficient to identify current and emerging risks.
- 52.3 The general location of all prisoners is known at all times and there is an effective and robust system for counting prisoners, including those outside the prison.
- 52.4 Staff supervise prisoners during association and movement around the prison.
- 52.5 Effective processes and procedures control entry and exit, and manage movements in and around the prison.
- 52.6 Daily activities and out-of-cell hours are not unduly restricted, even during staff shortages. Any restrictions are lawful, authorised and appropriately recorded.
- 52.7 Decisions affecting access to regimes and the ability to mix with others based on intelligence are proportionate to the risk posed.
- 52.8 Prisons have clear, site specific and comprehensive strategies for emergency preparedness, disaster/emergency response which appropriately balance prisoners' rights and needs with the security and safety of the prison.
- 52.9 The risk of escape is well managed, including while prisoners are being escorted or temporarily removed.

53. There is an effective drug supply reduction strategy.

Key Indicators:

- 53.1 Random and targeted drug testing takes place to detect and deter illicit drug use.
- 53.2 The testing of prisoners is subject to appropriate oversight.
- 53.3 The site has a robust strategy to detect the introduction of contraband.

Segregation

54. Prisoners are placed on segregation only with proper authority and for the shortest time period, which is regularly reviewed. Prisoners understand why they have been segregated.

Key Indicators:

- 54.1 Prisoners are not segregated except as a last resort, for the shortest time possible and subject to proper authorisation.
- 54.2 Accurate records for segregation are maintained, including documenting its duration.
- 54.3 The legal basis under which a prisoner has been segregated is correctly documented in writing.
- 54.4 Prisoners are informed of the reasons for their segregation, in writing, in a format and language they understand.

- 54.5 Prison staff receive training on the legal basis under which a prisoner may be segregated, and the purpose of each category of segregation.
- 54.6 If prisoners suspected of internal concealment are placed in a dry cell, the proper authorisation is recorded. A dry cell is used only for the shortest possible period.
- 54.7 Decisions about a prisoner's segregation are made in consultation with health staff, where appropriate.
- 54.8 Segregation is not used on prisoners with mental distress without prior consultation with a mental health professional, except in exceptional circumstances.
- 54.9 Appropriate health staff review the health records for all directed segregated prisoners to confirm that the segregation creates no special risks for that prisoner and/or whether any further health assessment is required.
- 54.10 Health staff monitor the welfare of prisoners who are segregated.
- 54.11 Segregation is not used as a long-term management strategy, nor as a punishment.
- 54.12 A decision to segregate a prisoner is regularly reviewed and revoked as soon as there are reasonable grounds for the belief that segregation is no longer justified.
- 54.13 All segregated prisoners have management plans which are tailored to each prisoner's behaviour and needs.
- 54.14 The prison has dedicated staff responsible for ensuring that segregation documentation is correct and is provided to prisoners. A robust assurance process is in place.
- 54.15 If appropriate, family/whānau should be notified of a prisoner's segregation and the reason for that segregation, where it is likely to impact on regular contact between the prisoner and their family/whānau.

55. Where prisoners are subject to segregation, they are treated with respect and dignity.

Key Indicators:

- 55.1 Segregated prisoners retain all their entitlements under relevant legislation.
- 55.2 Prisoners are not subjected to a regime which amounts to prolonged solitary confinement.
- 55.3 Segregated prisoners have meaningful daily interaction with staff.
- 55.4 Segregated prisoners are provided with opportunities for human interaction as is safe and appropriate, including family/whānau visits and by telephone or other electronic means.
- 55.5 Segregated prisoners continue to have access to a wide range of purposeful activity as is safe and appropriate, and which is suited to each prisoner's needs.
- 55.6 Segregated prisoners can exercise in the open air for at least one hour every day if weather permits, where possible, in a space large enough to enable adequate exercise.
- 55.7 Segregated prisoners are never denied access to necessary health assessments, interventions or medication.
- 55.8 Segregated prisoners' individual needs, including mental health, sentence management and programme needs, continue to be met.
- 55.9 Health staff advise prison management if termination or amendment of a prisoner's segregation is necessary on the grounds of physical or mental health or disability.
- 55.10 Prison staff monitoring segregated prisoners receive appropriate training, are vigilant in detecting signs of decline in mental health, mitigate the social isolation inherent in segregation and escalate concerns.
- 55.11 Care is taken to reduce risks of prisoner self-harm including through effective monitoring and dynamic security measures, and to ensure the environment and regime is the least restrictive in the circumstances.
- 55.12 Prisoners are supported as they transition from segregation back to a mainstream unit.

Incentives

56. The prison has an incentive system, appropriate for different categories of prisoners, to encourage pro-social behaviour, develop responsibility and secure the interest and cooperation of prisoners.

Key Indicators:

- 56.1 Prisoners are supported to demonstrate pro-social behaviour in prison through an authorised and fair system of rewards and incentives.
- 56.2 Staff support prisoners to change their behaviour, giving them advice and opportunities to improve.

Discipline

57. Disciplinary sanctions against prisoners are imposed by the proper authority, are fair and proportionate, and follow due process.

Key Indicators:

- 57.1 Prisoners are informed about misconduct offences and disciplinary action at induction, and information is easily accessible in the prison.
- 57.2 Prison staff are equipped and supported to apply constructive, restorative approaches as a first response to non-compliance, incidents and misconducts, before resorting to formal disciplinary processes where appropriate.
- 57.3 Disciplinary processes are governed and delivered according to clear regulations and policy, are fair and follow natural justice principles.
- 57.4 Staff who make an initial report about an alleged disciplinary offence must not investigate or review the offence.
- 57.5 Prisoners subject to disciplinary processes can access legal advice and defend themselves.
- 57.6 Prisoners are informed, without delay and in a way they understand, of the allegations against them and are given adequate time and facilities to prepare their defence.
- 57.7 Where necessary a prisoner may use an interpreter, culturally appropriate adviser, or a support person for disciplinary procedures.
- 57.8 Disciplinary processes are accurately recorded.
- 57.9 Prisons conduct adjudications regularly, and there is an appropriate quality assurance process.
- 57.10 A prisoner who receives a penalty for a misconduct is informed about the duration and nature of the penalty.
- 57.11 Prisoners know how they can appeal decisions about penalties and are helped by staff to do so.
- 57.12 Penalties are proportionate to the seriousness of the misconduct, and do not include prohibiting family/whānau contact or one hour daily of physical exercise in the open air.
- 57.13 Mitigating circumstances are considered by the prison before the final decision is made and sanctions are imposed.
- 57.14 Prison management does not rely on prisoners for any disciplinary functions, whether in a formal or informal manner.
- 57.15 No sanctions that amount to torture or other cruel, inhumane or degrading treatment are used.

- 57.16 Disciplinary action is only undertaken in respect of individual behaviour and no blanket disciplinary sanctions are imposed.
- 57.17 Prisoners are not transferred between prisons as a disciplinary measure.
- 57.18 Health professionals do not participate in disciplinary matters involving prisoners.
- 57.19 Health professionals monitor the condition of prisoners subject to disciplinary measures, provide healthcare if needed, and report concerns.
- 57.20 Prisoners who lack capacity to obey prison rules as a consequence of mental illness or disability are not unfairly sanctioned.
- 57.21 Cell confinement is subject to strict policies and procedures.
- 57.22 Penalties take into account the circumstances of pregnant and breast-feeding women, and penalties such as cell confinement or segregation for these women are imposed as a last resort.

Use of force

58. Force is used only against prisoners as a last resort and never as a disciplinary procedure. When used, force is legitimate, necessary, proportionate and subject to rigorous governance.

Key Indicators:

- 58.1 Custodial staff have up-to-date training in approved use of force methods, which emphasise the routine use of de-escalation techniques.
- 58.2 Planned use of force is properly authorised.
- 58.3 Prisoners with challenging behaviours as a result of neurodiversity, physical disability, mental distress or cognitive disability are identified and staff understand how to manage their behaviour. Force is not used unless the prisoner poses an immediate risk to themselves or others.
- 58.4 Where possible, and in all cases where use of force is planned, the use of force is digitally recorded by trained staff.
- 58.5 All uses of force are recorded in writing and a post incident review is conducted.
- 58.6 CCTV footage and body-worn camera footage of use of force is preserved in accordance with policies and procedures.
- 58.7 Staff involved in a use of force are debriefed and complete appropriate reports promptly. They can access support where required.
- 58.8 Prisoners are debriefed verbally after an incident and receive an explanation of why force was used on them with a view to preventing recurrence.
- 58.9 Health staff receive training to recognise health risks associated with restraint, and provide appropriate information and support to custodial staff for planned use of force situations, where possible.
- 58.10 Health staff support the physical and mental wellbeing of prisoners who have been subject to a use of force, comprehensively assessing prisoners' wellbeing prior to, during and after the incident, and initiate all required treatment or interventions promptly.
- 58.11 Use of force data is monitored and emerging patterns are identified and acted on. Documentation and associated footage is securely retained and scrutinised by prison management to identify good practice, opportunities for improvement, and possible ill-treatment.
- 58.12 Use of force is subject to effective, independent and timely review.
- 58.13 Force is not used against pregnant women or women with resident children unless absolutely necessary, all de-escalation options have failed and other means have been exhausted. The safety of the unborn baby or resident child is paramount.

- 58.14 Staff are aware of prisoners who are pregnant, and are specifically trained in the control and restraint of women who are pregnant.
- 58.15 The use of force and restraints on women are administered by female staff only, where possible.
- 58.16 Pepper spray is not used on pregnant or breastfeeding women and mothers of young children in prison.

59. Mechanical restraints are used only in clearly defined circumstances, when lesser forms of control fail, and only for the time strictly required.

Key Indicators:

- 59.1 Use of mechanical restraints is always in accordance with law, appropriately recorded, used in the least restrictive manner possible, and in a way that is mindful of prisoner dignity.
- 59.2 Mechanical restraints are never used as a disciplinary sanction.
- 59.3 Mechanical restraints are removed during medical examinations, tests and procedures unless there are compelling security grounds to retain them.
- 59.4 Mechanical restraints are only applied by staff who are appropriately trained.
- 59.5 Mechanical restraints used during transfers are removed if appropriate when prisoners appear before a judicial or administrative authority.
- 59.6 Mechanical restraints are never used when a prisoner is in labour, giving birth or immediately following delivery.
- 59.7 Pregnant women are not routinely restrained. Where there is a documented specific risk which cannot be managed by other reasonable means, pregnant women are only ever restrained with handcuffs, and at the front of their body.

Searches

60. Searches of cells and prisoners are carried out only when necessary and are proportionate, with due respect for privacy and dignity.

Key Indicators:

- 60.1 Reasonable ground searches only occur when there are reasonable grounds to suspect a prisoner has a contraband item concealed.
- 60.2 Prisoners are made aware that their cells or personal property are being searched.
- 60.3 Searches are thorough and, after a search, cells and property are left in the same condition they were found in.
- 60.4 Prisoners can keep documents relating to their legal proceedings. These cannot be read by staff.
- 60.5 Rub-down searches are conducted with decency and sensitivity and in a manner that affords the person being searched the greatest degree of privacy and dignity consistent with the purposes of the search.
- 60.6 Where available, scans are used in preference to strip searches.
- 60.7 Staff conducting searches are appropriately trained and provided with personal protective equipment.
- 60.8 Corrections officers performing rub-down or strip searches must be of the same gender as the person being searched.³

³ This is different for transgender prisoner. See indicator 19.7.

- 60.9 Prisoners are never fully naked when being strip-searched.
- 60.10 At least two appropriately trained staff are present for strip searches. The number of staff present during a strip search is no greater than necessary and reasonable to ensure the search is carried out as safely and effectively as possible.
- 60.11 Strip searching of prisoners is carried out on reception, and otherwise only on reasonable grounds, and staff record the reason for this.
- 60.12 Strip searching is carried out in the least restrictive manner, and is respectful of prisoner dignity.
- 60.13 Strip searches are conducted in an area that provides reasonable privacy for the prisoner being searched, and are not filmed by either CCTV or body-worn cameras.
- 60.14 Prisoners are never subjected to an internal examination for the purposes of a search.
- 60.15 Accurate records of all searches are maintained and include the reason for the search, the results, and the people involved.
- 60.16 Searches are respectful and have regard for prisoners' possible experiences of trauma, violence, and abuse.

Security classification

61. Security classifications are based on an individual assessment of each prisoner's risks and needs.

Key Indicators:

- 61.1 Every sentenced prisoner is classified as soon as possible to assess the risks that prisoner may pose.
- 61.2 Every sentenced prisoner (sentenced to two months or more) has a suitable offender plan that supports the prisoner's progression and eventual release.
- 61.3 Security classification documentation contains accurate and detailed information, which takes into account the individual needs of the prisoner.
- 61.4 Security classification reviews are conducted within the authorised timeframes and involve the prisoner and all relevant staff. Prisoners are informed of the outcome in writing and told how to appeal.
- 61.5 Behaviour is reviewed regularly, and prisoners are able to demonstrate their progress towards reducing their security classification.
- 61.6 Prisoners of different security classifications should be managed according to their classification, and should not mix without the considered approval of staff responsible for making the decision.

Prisoner Files

62. The prison has comprehensive, accurate and secure records management processes.

Key Indicators:

- 62.1 Official records are kept for each prisoner and all records are comprehensive, accurate, and securely managed and archived. This applies to both electronic and paper records.
- 62.2 All records are kept confidential and made available only to those whose professional responsibilities require access. There is a secure audit trail to prevent unauthorised access to, or modification of, information.
- 62.3 All paper records are held securely in fireproof cabinets.



- 62.4 Arrangements are in place to facilitate the timely and appropriate exchange of information relevant to the management of prisoners, including with courts, Police and health services.
- 62.5 Prisoners can access the information contained in their personal file, subject to authorised redactions, including if requested upon release.
- 62.6 All information relating to the identity of prisoners' children is kept confidential, and the use of such information complies with the requirement to consider the best interests of the children.

Purposeful activity

Education

63. Education opportunities relevant to prisoners' needs and interests are offered, and participation is encouraged.

Key Indicators:

- 63.1 A range of education opportunities are available, including self-directed learning, which respond to different learner abilities. These can lead to formal qualifications and employment upon release.
- 63.2 Prisoners receive a timely and accurate assessment of their learning needs, wants and abilities when they arrive in prison.
- 63.3 Prisoners are encouraged to access educational opportunities and, where necessary, receive assistance to do so. Barriers to participation are identified, assessed and addressed.
- 63.4 Young prisoners and prisoners assessed as having low levels of literacy and/or numeracy are prioritised to access appropriate education programmes as soon as they arrive in prison.
- 63.5 Prisoners undertaking education and vocational training receive an incentive allowance at a rate equivalent to prisoners who work.
- 63.6 Prisoners' achievements are recognised appropriately.
- 63.7 Instructors and education staff are suitably qualified to customise and deliver programmes, education and training to suit the varying needs and learning styles of the diverse range of prisoners.

Work

64. All prisoners, where possible, can engage in work that is purposeful, benefits them and increases their opportunities for future employment.

Key Indicators:

- 64.1 Prisons have adequate purposeful work opportunities for prisoners, which improves their chances of successful reintegration, subject to an appropriate assessment and approval process.
- 64.2 Prisoners receive an incentive payment for their work according to an established scale that recognises different levels of skill and effort. Prisoners are paid fairly, accurately and on time.
- 64.3 Prisoners' work is based on security classification, safety, skills and interest.
- 64.4 Where possible, prisoners can gain qualifications while working.
- 64.5 Work opportunities for prisoners with a disability and/or mental health concerns are considered and supported as far as practicable.
- 64.6 Prisoners assessed as posing minimal risk to the community are considered and encouraged to participate in Release to Work. The prison has constructive links with suitable employers and prisoners on Release to Work are paid at market rates.
- 64.7 Work supervisors have appropriate qualifications, experience and expertise.
- 64.8 All available work vacancies in the prison are fully utilised and prisoners are occupied in work or waitlisted as part of their offender plan.
- 64.9 Health and safety standards are enforced. Prisoners should have a suitable induction, including occupational health and safety training if necessary.

64.10 Prisoner work is not exploitative, harmful, or for the private benefit of staff.

64.11 Work opportunities for women reflect the diversity of female prisoners and are not limited to stereotypical gender skills and roles.

Exercise and recreation

65. All prisoners are able to spend at least one hour in the open air every day. Prisoners have access to physical exercise and recreational activities.

Key Indicators:

- 65.1 Prisoners are encouraged to spend time in the open air, if weather permits, given its importance for their mental and physical wellbeing.
- 65.2 Prisoners are informed about the daily routines for activities, association and exercise.
- 65.3 Staff encourage physical recreation, and appropriate facilities and equipment are provided. There are sufficient activities to minimise boredom.
- 65.4 Prisoners can shelter from rain and sun in exercise areas, and outside exercise is cancelled only in severe weather conditions.
- 65.5 Time spent exercising in the open air should not affect time spent on other out-of-cell activities, such as telephone calls.
- 65.6 Recreation areas and equipment are fit for purpose and maintained to ensure safety. Ageing and worn equipment is replaced.
- 65.7 Health staff are consulted about fitness and recreation opportunities for prisoners who have specific health needs.
- 65.8 Health staff advise custodial staff of any medical condition that may pose a risk to a prisoner if they engage in physical activity.
- 65.9 Exercise areas take into account the needs of disabled and older prisoners.
- 65.10 Prisoners can take part in recreational activities, such as books, cards, music, and art.

Visits

66. Prisoners have safe, secure, and direct contact with their visitors.

Key Indicators:

- 66.1 Prison procedures and visits entitlements are communicated clearly to prisoners.
- 66.2 Staff prioritise prisoners to have visits within a week of reception, where possible. Visiting times are reasonable and take into account the general availability of visitors during the week.
- 66.3 Visitors are given information about how to get to the prison, visiting hours, what to expect and how to complain.
- 66.4 The visitor approval process should be timely, with clear communication and updates provided.
- 66.5 Approved visitors are notified of their approved status as soon as possible.
- 66.6 The visits booking system is simple, accessible and flexible enough to deal with the number and requirements of visitors.
- 66.7 Prisons should make special arrangements for prisoners to receive additional and/or longer visits where necessary.
- 66.8 Prisoners are able to have visits with their children, in accordance with Corrections' visitors procedures and the Child Protection Policy.

- 66.9 Prisoners are informed in a timely way if their visit is denied or has been changed to non-contact, and the reason for this.
- 66.10 Non-contact visits are authorised only when there is a significant risk arising from visits. Decisions are reviewed and documented.
- 66.11 Visitors are informed about search procedures, and understand their right to refuse the search and leave the prison. Search and entry processes are child-friendly.
- 66.12 Searching of visitors and their property is carried out in a professional and respectful way, and the reason for and the outcome of the search are appropriately recorded.
- 66.13 Child visitors are searched only when there are reasonable grounds. Reasons for the search should be explained to the child, who should be searched in full view of his/her guardian.
- 66.14 There is consideration of visits for children at times which are least disruptive of their schooling and other activities.
- 66.15 Inter-prison contact (such as audio-visual link) is facilitated between whānau members in different prisons or youth facilities, where practicable and appropriate.
- 66.16 Women prisoners are supported to maintain relationships with their children in the community, including both in-person visits and telephone and video calls.

67. The prison has an accessible and child-friendly visitors' centre with adequate amenities.

Key Indicators:

- 67.1 Prisoners and their visitors are able to attend visits in a clean, safe and respectful environment which meets their needs.
- 67.2 There are sufficient visit spaces and non-contact rooms available for the prisoner population.
- 67.3 Visitor parking and access arrangements are appropriate, especially for visitors with a disability.
- 67.4 Facilities reflect the needs of visitors, including a suitable area to feed and change young children. Suitable clean play facilities, equipment and toys are also available for children, and child-parent interaction.
- 67.5 There is safe storage available for visitors' property.
- 67.6 Security arrangements and restrictions on physical contact are reasonable, proportionate and necessary, and do not unduly encroach on privacy.
- 67.7 Family support information is available before and after visits.

Library

68. Prisoners have regular access to a suitable library, library materials and additional learning resources that meet their needs.

Key Indicators:

- 68.1 Prisoners can regularly access the library and its resources.
- 68.2 The library provides an opportunity for both learning and social interaction in an informal, relaxed setting.
- 68.3 The library provides documents which relate to prisoner management, rights and entitlements.
- 68.4 Library resources should reflect the different needs of the prison population. For example, material for women, Māori prisoners, and in a range of languages should be available.
- 68.5 Library resources should support the prison education and training programmes.

Inspection Standards: Criteria for assessing the treatment of and conditions for prisoners

- 68.6 Prisoners have access to computers for legitimate purposes, subject to operational and security controls.
- 68.7 Prisoners can access news from the outside world, and keep themselves informed through a variety of media.
- 68.8 Disabled prisoners can reasonably access the necessary aids, technology, and support to engage with the library and learning materials.



Rehabilitation

69. Rehabilitation programmes, targeting the specific needs of the prisoner, are available and accessible.

Key Indicators:

- 69.1 Prisoners have access to effective offence-focused rehabilitation, including programmes and one-on-one psychologist intervention, where appropriate.
- 69.2 Prisoners are encouraged and supported to take responsibility for their own rehabilitation.
- 69.3 A range of rehabilitation programmes are available that address the identified needs of the prison population, including cultural needs.
- 69.4 Remand and short sentenced prisoners are prioritised for identified reintegrative interventions to better prepare them for release.
- 69.5 Interventions and services are communicated to prisoners, who can access them easily.
- 69.6 Programmes and interventions are effective for ensuring prisoners are parole-ready.
- 69.7 Staff have a good working knowledge of the rehabilitation programmes available to prisoners and actively promote them.
- 69.8 Staff support and motivate prisoners to engage positively with activities designed to reduce their risk of reoffending and help them prepare for release.
- 69.9 Relevant voluntary and community sector organisations have access to and are supported to work with prisoners.
- 69.10 Where possible and appropriate, family/whānau involvement in rehabilitation is supported at all stages of imprisonment.
- 69.11 Women can access comprehensive gender-specific programmes that are culturally appropriate.
- 69.12 Programmes are available to women that provide education about pregnancy, childbirth, parenting skills and child development, health care and nutrition.
- 69.13 Women generally have access to programmes that are substantively equivalent to those available to male prisoners and which do not require them to be transferred to another prison away from their family/whānau and community of interest.
- 69.14 The prison regime is flexible enough to allow for full participation in activities and programmes by pregnant or breastfeeding women or those with children in prison.
- 69.15 Childcare facilities are available in women's prisons when women attend work, education, skills training and programmes.

Remand/offender Plans

70. All prisoners have a remand/offender plan which meets their assessed rehabilitation and reintegration needs.

Key Indicators:

- 70.1 All prisoners have an up-to-date plan for addressing their rehabilitation needs. Plans are managed in partnership with Community Corrections, where necessary.
- 70.2 Case managers coordinate interventions with individual prisoners.
- 70.3 Remand/offender plans are developed and finalised within 40 days of a prisoner's arrival into custody.

- 70.4 Remand/offender plans include appropriate and sufficient purposeful activities and rehabilitation programmes to reduce a prisoner's risk of reoffending and help them prepare for release.
- 70.5 Prisoners are supported and encouraged to actively participate in developing their remand/offender plan and any subsequent reviews.
- 70.6 Remand/offender plans are based on risks, needs and responsivity factors relating to each individual prisoner and completed by a competent, trained assessor.
- 70.7 Remand/offender plans contain measurable and achievable short and long-term goals.
- 70.8 Accurate records are kept and updated regularly with progress and changes are clearly recorded.
- 70.9 Prison staff are aware of the purpose and required contents of a remand/offender plan in accordance with relevant law, procedures and policies.
- 70.10 For women prisoners, remand/offender plans take into account their background, including any victimisation they may have experienced, and parental and other care responsibilities.

Reintegration

71. Prisoners are prepared for release to the community at the earliest appropriate opportunity.

Key Indicators:

- 71.1 Prisoners are connected to reintegration services or other community-based programmes and services at the earliest appropriate opportunity to enable them to gradually re-establish relationships and seek assistance with employment, housing and other practical, financial and legal matters in preparation for their release.
- 71.2 Prisoners with continuing health and social care needs, including those who are at risk, are prepared and assisted to access appropriate post release services.
- 71.3 Prisoners with a history of drug and/or alcohol dependency are prepared and assisted to access appropriate post release services, including continued treatment.
- 71.4 Where possible, long-term prisoners who are nearing the end of their sentence are placed in a self-care unit.
- 71.5 Where appropriate, reintegration activities include Release to Work, temporary release and guided release.
- 71.6 Prisoners are supported to understand the requirements of their parole conditions and have the opportunity to discuss their rights and responsibilities prior to release.
- 71.7 All necessary work required to support a prisoner's release to the community is completed in good time for release.
- 71.8 Risk and support needs are shared with Community Corrections in advance of any release.
- 71.9 Prisoners, especially those on indeterminate sentences, have opportunities to practise necessary life skills such as cooking and information technology in preparation for independent living.
- 71.10 Where appropriate, family/whānau are encouraged to be involved in supporting prisoners during reintegration planning.
- 71.11 [The specific reintegration needs of women, in particular those who have experienced trauma or abuse, are met through individualised plans to maximise the likelihood of successful reintegration.](#)

72. On release, prisoners are provided with all the necessary and appropriate documentation, clothing and other required items.

Key Indicators:

- 72.1 Prisoners are provided with suitable clothes for their release, or can have clothes cleaned that have been stored at the prison for a long time.
- 72.2 Prisoners receive all their property on release.
- 72.3 Prisoners have appropriate identity and other documents.
- 72.4 Prisoners are given information about sources of help and support in the community.
- 72.5 Releasing prisons must ensure that prisoners have the means to safely reach their home on release.
- 72.6 Every effort is made to ensure that prisoners, including those on remand, have appropriate accommodation on release.
- 72.7 The safe release of the highest risk prisoners is supported by close collaboration with stakeholders, such as Police, Community Corrections, other government agencies and non-government organisations.

