

# INSPECTION STANDARDS

*Criteria for assessing the treatment of and conditions for prisoners*



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## Office of Inspectorate *Te Tari Tirohia*

### **Our whakataukī**

*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



## Introduction

Inspections completed by the Office of the Inspectorate *Te Tari Tirohia* 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 basic function of a prison inspection is to:

*"contribute to a safe, secure and humane prison environment by (a) getting a proper understanding of all relevant aspects of prisons, including structural causes of any problems identified; (b) comparing actual prison conditions, management and practice against relevant provisions in national and international law, and by (c) submitting a report and recommendations on how the prison system and the treatment of prisoners could be improved".<sup>1</sup>*

The *Inspection Standards* for the Office of the Inspectorate *Te Tari Tirohia* 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.

The *Inspection Standards* replace the *Healthy Prison Standards* and guide inspectors to deliver independent and objective assessments of the treatment and conditions for prisoners in New Zealand. 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
- » **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 10 areas of prison life:

- » Reception and admission
- » First days in custody
- » Escorts and transfers
- » Duty of care
- » Health
- » Environment
- » Good order
- » Purposeful activity
- » Reintegration
- » Prison staff

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<sup>1</sup> Assessing compliance with the Nelson Mandela Rules. UNODC. (2017). From time to time, Inspectorate reports may make findings not recommendations.



The *Inspection Standards* derive from the United Nations Standard Minimum Rules (SMR) 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* occurred in recognition of the unique needs of women and trans 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,<sup>2</sup> which were developed to complement and supplement the Nelson Mandela Rules. The Office of the Inspectorate *Te Tari Tirohia* acknowledges that some of the gender-responsive standards, such as those relating to parental responsibilities and preventative health care, will apply to male prisoners as well.

Each standard relates to a Nelson Mandela Rule, Bangkok Rule or Yogyakarta Principle.

The Office of the Inspectorate *Te Tari Tirohia* acknowledges that Māori are over-represented in New Zealand prisons compared with other ethnic groups. Therefore, specific standards and indicators have been introduced to acknowledge the needs of Māori. When assessing the treatment of and conditions for prisoners, inspectors will consider how prison systems and practices impact Māori prisoners.

### **Review**

The *Inspection Standards* will be regularly reviewed to ensure they remain responsive to the needs of New Zealand prisoners and reflect the latest United Nations guidance on the standards of care for prisons and prison conditions.

### **Acknowledgements**

The Office of the Inspectorate *Te Tari Tirohia* acknowledges the current and past inspectors who contributed to the development of these *Inspection Standards* as well as the Corrections staff who supported the development of the standards for Māori, women and trans prisoners.

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<sup>2</sup> The Yogyakarta Principles guide the application of international human rights law in relation to sexual orientation and gender identity.

# Inspection standards for all prisoners

## Basic Principles

The Basic Principles apply to all prison functions, staff and prisoners.

### Standard<sup>3</sup>

1. Prisoners are treated with respect for their inherent dignity and value as human beings.
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, for which no circumstances whatsoever may be invoked as a justification.
4. Prisoners identified as victims of torture or other cruel, inhuman or degrading treatment are supported to address their specific health needs and take legal action, if they wish to.
5. Prisoners are not unlawfully discriminated against, while the needs of all prisoners are catered for, in particular the most vulnerable categories in prison settings.
6. Prisoners with physical, mental or other disabilities have full and effective access to prison life on an equitable basis.
7. Prisoners have access to appropriate rehabilitation and reintegration activities and programmes, supporting their release pathway.
8. Prison life promotes personal responsibility, self-respect and dignity for oneself.
9. Imprisonment deprives a prisoner of their liberty, and they should not be unjustifiably punished further while in prison.

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<sup>3</sup> SMR 1, 2, 3, 4, 5 and 34

## Reception, induction and escorts

### Escorts and Transfers

#### Standard<sup>4</sup>

10. Prisoners travel in safe, decent conditions and are treated with respect, and attention is paid to their individual needs.
11. Prisoners understand why and where they are being transferred to.

#### Key Indicators

- » Prisoners are given sufficient notice of transfer, the identified reason(s) for their transfer (which must be subject to well-evidenced security considerations), and information about the prison to which they are being transferred.
- » Escort vehicles are clean and meet the diverse needs of prisoners.
- » Prisoners are not kept waiting for long on vehicles after arrival.
- » 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.
- » Prisoners are given adequate comfort breaks and refreshments during transfer.
- » Prisoners arrive in sufficient time to allow reception and first-night procedures to be conducted effectively.
- » Conditions of transport meet minimum requirements regarding safety, space, ventilation, light, hygiene and nutrition.
- » Measures exist to minimise prisoners' exposure to public view, insult, curiosity and publicity in the course of transfers.

### Reception and induction

#### Standard<sup>5</sup>

12. 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 staff ensure that individuals' immediate anxieties are addressed before the end of the first day.
13. Prisoners are promptly inducted and supported to understand life in prison and know what will happen to them next.
14. Prisoners can access legal advice and, where applicable, a consular representative.
15. Information relating to prison life is accessible for all prisoners.

#### Key Indicators

- » Prisoners promptly receive comprehensive information about the prison rules and regime in a format and language they understand.
- » Interviews are private, take account of all available information and identify vulnerability and risk. Reception staff provide an effective briefing to unit staff.

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<sup>4</sup> SMR 73

<sup>5</sup> SMR 54 and 55

- » Prisoners are asked for their ethnicity, ethnicities and iwi affiliation (when applicable) in a considered and respectful manner.
- » Prisoners understand that their personal mail and telephone calls may be monitored.
- » Prisoners know how to access help and support from staff, family/whānau and other appropriate prisoners.
- » A free telephone call is offered and additional support is provided to those who have no external support.
- » Prisoners receive basic supplies.
- » Regular welfare checks are carried out on new arrivals.
- » Upon reception, prisoners are informed about internal and external complaints mechanisms and how to use them.

## Health screening on reception

### Standard<sup>6</sup>

16. Prisoners' immediate physical and mental health needs, including substance use and prescription medication needs are assessed on reception and responded to promptly and effectively.

### Key Indicators

- » A health professional screens all new prisoners on the day of arrival to identify their immediate needs and make appropriate onward referrals.
- » With consent, the patient's community clinical records are obtained promptly and reviewed by a health professional.
- » Patients later receive a comprehensive health assessment from a health professional, including health promotion, education and health screening.
- » During initial screening, particular attention is paid to signs of psychological or other stress, including self-harm risks and withdrawal symptoms.
- » During initial screening particular attention is paid to identifying prisoners with physical and intellectual disabilities, literacy levels and other special needs, or limited ability to understand English.
- » Screening for substance abuse is undertaken.

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<sup>6</sup> SMR 30

## Duty of care

### Access to legal advisers and attendance at court hearings

#### Standard<sup>7</sup>

17. Prisoners have reasonable access to consult with a legal advisor.

#### Key Indicators

- » Remand prisoners can access information and are appropriately supported to apply for bail.
- » Prisoners know what resources are available in the prison to help meet their legal needs and are supported to find a legal representative if necessary.
- » Prisoners can communicate with their legal representatives in confidence by telephone, letter, and/or audio visual link.
- » An audio visual link can be used for eligible court cases and for other legal consultations.
- » Where appropriate prisoners have access to a computer and printer to prepare legal correspondence and documents.
- » Legally privileged correspondence is not opened by staff unless there are exceptional circumstances.
- » Prisoners can meet their legal representatives face to face, in private, out of the hearing of staff, including for parole purposes.

### Bullying and violence reduction

#### Standard<sup>8</sup>

18. Prisoners feel safe from bullying, abuse and violence.

#### Key Indicators

- » Staff promote positive and supportive relationships, identify and challenge problematic behaviour and model pro-social behaviour.
- » Allegations of violence and antisocial behaviour are investigated promptly and thoroughly and action is taken where required.
- » Vulnerable prisoners are protected (for example those who have been bullied or are vulnerable because of their offence) and victims can access appropriate support.
- » Perpetrators of violence and antisocial behaviour receive support to change their behaviour.

<sup>7</sup> SMR 53, 61, 119 and 120

<sup>8</sup> SMR 1

## Prisoner Files

### Standard<sup>9</sup>

19. A prisoner file management system is in place and used to record all information about that prisoner, and confidentiality is maintained.

#### Key Indicators

- » All information relating to a prisoner while in custody is recorded accurately.
- » Procedures are in place to prevent unauthorised access or modification of prisoner files.
- » Prisoners can access the information contained in their personal file, subject to authorised redactions, including if requested upon release.

## Separation of prisoner categories

### Standard<sup>10</sup>

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

#### Key Indicators

- » Remand accused prisoners are separated from convicted prisoners.
- » Young prisoners (aged 17) and those aged 18 and 19 who are considered vulnerable are separated from adult prisoners.
- » Segregated prisoners are separated from mainstream prisoners.

## Accommodation

### Standard<sup>11</sup>

21. The placement of prisoners in shared cells is done after careful consideration of their suitability for associating with one another.

#### Key Indicators

- » Where possible, prisoners do not share cells.
- » If necessary, prisoners share cells only following a suitable risk assessment process.
- » Staff promptly respond to emergency cell call bells.
- » Cell observation panels remain free from obstruction.

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<sup>9</sup> SMR 6, 8, 9 and 10

<sup>10</sup> SMR 11

<sup>11</sup> SMR 12

## Complaints

### Standard<sup>12</sup>

22. Complaints procedures are effective, timely and well understood.
23. Staff and prisoners are encouraged to resolve complaints at the lowest level in the first instance; when this is not possible prisoners understand how to make a complaint, and are able to do so easily.
24. Prisoners feel safe from repercussions when using complaints procedures and can appeal decisions easily.
25. Where a prisoner raises a concern about their safety, these matters are prioritised.

### Key Indicators

- » Staff and prisoners are encouraged to resolve requests informally, before making a formal, written complaint.
- » Prisoners know how to complain and have access to information about complaints procedures.
- » Prisoners have easy access to complaint forms and can submit them to staff in confidence.
- » Where necessary, prisoners receive help from staff to make their complaint.
- » Complaints are investigated by staff appropriately and fairly.
- » If prisoners believe their complaint has been treated unfairly or unreasonably there is an internal process they can use to escalate it.
- » Responses to complaints are easy to understand, comprehensive, respectful, prompt and address the issues raised.
- » Prisoners can challenge decisions appropriately and are confident that their views are taken seriously.
- » Complaints about health care provision and treatment are managed separately from the main complaints system.
- » Complaints can be sent in confidence to independent monitoring and other external assurance agencies.
- » If a prisoner is unable to file a complaint, their legal advisor, a member of the prisoner's family/ whānau or any other person with knowledge of the case may do so.
- » Where inappropriate or abusive practice is found, staff are held to account.

## Māori prisoners

### Standard<sup>13</sup>

26. Māori prisoners can access and practise their Māori culture and customs.
27. Māori prisoners have access to kaupapa Māori informed and tikanga-based rehabilitation and reintegration programmes.
28. Māori prisoners receive practical help to access stable whānau support.

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<sup>12</sup> SMR 56 and 57

<sup>13</sup> SMR 2 and 4



### Key Indicators

- » Staff respect kaupapa Māori cultural beliefs and tikanga practices, and pronounce prisoners' names correctly.
- » Staff respect and uphold Māori prisoners' mana and dignity.
- » The importance of te reo Māori in prisons is appreciated.
- » Programmes designed to meet the needs of Māori are available to all prisoners, but particularly to those who identify as Māori.
- » Corrections collaborates with Māori partners (e.g. mana whenua, iwi, hapu, NGOs) to develop programmes and services suitable to meet the needs of Māori offenders.
- » Prisoners have access to Kaiwhakamana, as appropriate.
- » Prisoners are, as much as practical, housed in prisons close to their network of stable whānau support.

## Foreign national prisoners

### Standard<sup>14</sup>

29. The specific needs of foreign national prisoners are met, including practical help so they can keep in touch with family overseas.
30. There are prison staff with the skills to communicate with all prisoners on site. Where required, interpreters are provided.

### Key Indicators

- » Staff are informed of the distinct needs and cultural preferences of foreign nationals.
- » Staff know which prisoners find communicating in English a challenge. Prisoners have access to accredited translation and interpretation services whenever accuracy or confidentiality is required.
- » Foreign national prisoners receive help to keep in touch with family overseas.
- » Foreign nationals' individual rehabilitation and release needs are met.
- » Foreign national prisoners understand their immigration status and what will happen on completion of their custodial sentence.
- » Foreign nationals are informed of, and granted, the right to notify and to communicate with their consular representatives.

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<sup>14</sup> SMR 62 and 80

## Relationships with family and whānau

### Standard<sup>15</sup>

31. Prisoners are located as close as possible to their family/whānau and the community they have a strong attachment to. If prisoners are placed in prisons outside their home region, it is for the minimum time necessary and for an identified reason.
32. Staff support prisoners to maintain close relationships with stable family or whānau.
33. Prisoners can promptly inform their family or whānau or designated contact person about their imprisonment, transfers, illness or injury.
34. Prison staff notify prisoners of the serious illness or death of a family/whānau member or significant other, and a risk/wellbeing assessment is subsequently conducted.

### Key Indicators

- » Prison staff ensure that prisoners can inform their family/whānau or designated contact person about their imprisonment or transfer to another institution.
- » Prison staff ensure that prisoners can inform their family/whānau or designated contact person of any serious illness or injury.
- » Designated contact people are notified of changes in prisoner circumstances by prison staff in a timely manner.
- » If a prisoner receives bad news about their family/whānau, prison staff consider the wellbeing of the affected prisoner and offer appropriate support.
- » Prisoners are informed and supported to apply for temporary release, if appropriate, when they are notified of a critical illness or death of a family or whānau member.

## Death in custody or serious incident

### Standard<sup>16</sup>

35. The Prison Director promptly notifies all relevant parties about any death in custody, escape, serious injury or incident, and facilitates investigations.
36. The Prison Director promptly notifies the nominated contact person or next of kin following any prisoner death in custody or in cases of a serious injury or illness, subject to the prisoner's consent.
37. The body of a deceased prisoner is treated with dignity and respect, and appropriate actions are taken at the time of, and following, the death.
38. Police are promptly notified of any deaths in custody.

### Key Indicators

- » Any case or allegation of abuse, custodial death, escape or serious injury of a prisoner, is investigated and reported to the proper authorities.
- » When prisoners die in custody, a cultural adviser, kaitiaki, and/or local kaumātua are brought onsite to perform any necessary and appropriate cultural practices.

<sup>15</sup> SMR 68, 69 and 70

<sup>16</sup> SMR 71 ad 72

- » Prison management cooperates with the authorities conducting investigations into any such cases and the circumstances surrounding them.
- » Evidence is preserved, victims and witnesses are protected, and potentially implicated staff are excluded from the investigation.
- » Following a death in custody or serious incident, prison staff consider the wellbeing of any affected prisoner and offer appropriate support.
- » Prisoners involved in serious incidents are promptly informed in writing about their rights and obligations, the applicable legal framework, and any other relevant matters.

## Property

### Standard<sup>17</sup>

- 39. Prisoners' property held in storage is secure, and prisoners can access it on reasonable request.
- 40. Prisoner funds are managed securely and are accounted for.

### Key Indicators

- » Prisoners can receive property subject to security and volume considerations.
- » The list of property that prisoners are allowed is adequate to meet the needs of the prison population.
- » All property is returned to prisoners on release or transfer.
- » Prisoners are fairly compensated for clothing and possessions that are lost or damaged in storage.
- » Prisoner funds are managed securely and are accounted for and prisoners understand this process.

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<sup>17</sup> SMR 67

# Health

## Provision of health care

### Standard<sup>18</sup>

41. Prisoners have timely access to community-equivalent health and dental services, and receive treatment which is sensitive to their diverse needs from competent staff in an environment that promotes dignity and maintains privacy.
42. Prisoners are supported and encouraged to optimise their health and well-being.
43. Prisons have a health-care service which ensures professional care of the physical and mental health of prisoners.
44. Health files are accurate, up-to-date and confidential, and accompany the prisoner when they are transferred.
45. Prisoners have access to specialised external secondary and tertiary health care services when required.
46. On reception, prisoners are made aware of the prison health services available and how to access them.
47. Prisoners have a right to health confidentiality and do not have to provide information, undergo health interventions or screening.

### Key Indicators

- » Staff are well trained, have on-going professional development, are supported to maintain their professional registration where appropriate, and have regular clinical and managerial supervision.
- » Health facilities and equipment, including medical supplies, are adequate and correspond to the actual health needs in the prison population.
- » Prisoners can easily access health checks, disease prevention, screening programmes and sexual health services, where appropriate.
- » All necessary medications are prescribed and administered appropriately to provide best therapeutic effect for prisoner care, where possible.
- » Older prisoners receive proactive screening, assessment and care.
- » Prisoners can access smoking cessation support.
- » There are robust systems to prevent, identify, monitor and manage communicable diseases.
- » Prisoners, where possible, receive continuity of care on arrival, during and on release.
- » Health care professionals demonstrate knowledge and understanding of the different health and socio-economic status of Māori and non-Māori, and actively work towards achieving equity in health for Māori.
- » There are sufficient facilities to provide a range of health services.
- » Prisoners are seen in private, except in clearly documented circumstances, where there is a risk to safety or of escape.
- » Prisoners are seen by health services in a timely manner.

<sup>18</sup> SMR 24, 25, 26, 27, 31 and 32

- » Prisoners can complain about their treatment in confidence without recrimination. Responses are timely, easy to understand and address all the issues raised, where possible.
- » Prisoners have timely access to a qualified dentist, including emergency dental services.
- » Information is shared within the bounds of medical confidentiality to promote continuity of care and maintain patient safety. Procedures are in place to ensure prompt access to urgent medical attention (such as on-call arrangements on a 24-hour basis).
- » Prisoners who require specialised health treatment, which exceeds the capacity of the prison's health facilities, are treated in hospital.
- » Prisoners can request appointments with health staff confidentially, without requests being screened by custodial staff.
- » Prisoners receive health services that are not unnecessarily restricted by security procedures.
- » Health-care professionals act in full clinical independence. All their health-related decisions are based purely on clinical grounds.
- » The autonomy of prisoners regarding their own health is respected, including their free and informed consent to health interventions.
- » Prisoners are informed about their health conditions and possible treatment, including access, upon request, to their health files.
- » All health incidents are appropriately reported and monitored.

## Substance abuse

### Standard<sup>19</sup>

48. Prisoners with a history of substance abuse receive specialised and individualised treatment and culturally appropriate support (including aftercare).

### Key Indicators

- » Prisoners can access information about the effects of substance abuse and the support available to them in the community or prison.
- » Prisoners can access appropriate clinical, psychosocial and harm reduction substance abuse interventions when required.
- » People who receive substance abuse treatment in the community are supported to continue their treatment and receive ongoing support if they go to prison.
- » Prisoners who receive substance abuse treatment in prison are supported to continue their treatment and/or avoid relapse when they resettle in the community.

## Mental health care

### Standard<sup>20</sup>

49. Prisoners with mental health needs are identified promptly and supported by community-equivalent services to optimise their well-being during their time in prison and on release.
50. Prisoners at risk are appropriately located in a therapeutic environment and supported by trained staff who are resourced to meet their individual needs.

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<sup>19</sup> SMR 24

<sup>20</sup> SMR 109 and 110

## Key Indicators

- » Prisoners' immediate mental health needs are assessed during their reception health screening and appropriate onward referrals are made.
- » Corrections officers receive training to enable them to recognise when a prisoner requires referral for mental health assessment, and there is a clear referral pathway.
- » Staff act to overcome cultural barriers that may impede access to mental health services.
- » Staff collaborate with kaupapa Māori service providers and other culturally specific services and providers, as needed.
- » Referrals are actioned promptly and appointments are based on physical and mental health clinical need/risk.
- » Mental health interventions in prisons achieve an equivalent standard of care to those available in the community.
- » Prisoners with complex or severe mental illness have written care plans which are regularly reviewed with their mental health practitioners.
- » Prisoners with complex self-harm behaviours are managed using enhanced multidisciplinary case reviews.
- » All staff engage, where possible, in a supportive and constructive way with prisoners in crisis.
- » Information about prisoners at risk of self-harm is communicated to Community Corrections, when release is imminent, and continuity of health care after release is arranged
- » Prisoners at risk of harm are located in an environment where they can easily access the clinical support they need and a purposeful regime.
- » Prisoners at risk of harm are held in segregation temporarily and only when it is properly authorised and recorded.
- » Those who should not be detained in prison due to severe mental disabilities are promptly referred to mental health facilities.
- » Those who should not be detained in prison due to severe intellectual disability are referred to an intellectual disability care agency.

# Environment

## Residential units

### Standard<sup>21</sup>

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

### Key Indicators

- » Prisoners should live and eat in a hygienic environment.
- » Cells and communal areas are clean, free of graffiti, well lit (with adequate natural light) and in good condition.
- » Prisoners have access to appropriate personal washing facilities.
- » Outside areas are well maintained and clean.
- » Air, lighting, heating and ventilation in all accommodation used by prisoners meet requirements of health.
- » Cells are ventilated, with fresh air where possible.
- » All parts of the prison used by prisoners are properly maintained and kept clean.
- » Hygiene and ventilation in kitchen areas is adequate.
- » No restriction or disciplinary sanction shall negatively affect legal minimum living conditions.
- » Prisoners with a disability or age related needs are placed in a cell that is suitable and appropriate for their health related needs.

### Standard<sup>22</sup>

52. Prisoners have sufficient bedding that is laundered regularly.

### Key Indicators

- » Sufficient clean bedding is provided for each new prisoner on arrival and is laundered regularly to ensure cleanliness.
- » Mattresses and pillows are clean and replaced when needed.

## Hygiene

### Standard<sup>23</sup>

53. Prisoners are encouraged to keep themselves clean and are provided with the appropriate toiletries.

### Key Indicators

- » Prisoners are provided with basic toiletry items for their personal use, including razors for shaving.

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<sup>21</sup> SMR 13, 14, 17 and 42

<sup>22</sup> SMR 21

<sup>23</sup> SMR 15, 16 and 18

- » Prisoners have access to sufficient cleaning materials to keep their cells and communal areas clean.
- » Prisoners can use the toilet when they require it and shower in private, except where the prisoner's safety is considered to be at risk.
- » Sanitary facilities in the prison are clean, adequate and accessible whenever needed.
- » Adequate water, of appropriate temperature, should be available for prisoners' hygiene.

## Clothing

### Standard<sup>24</sup>

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

### Key Indicators

- » Prison issue clothing is decent, fits appropriately, is fit for purpose and is in good repair.
- » Prisoners are provided with enough clean underwear and socks to be able to change them daily.
- » Prisoners are issued with enough seasonally appropriate clothing and footwear.
- » Prisoner clothing is washed in appropriate laundry facilities.
- » Prisoners are allowed to wear their own clothing while on remand or temporary release.

## Food

### Standard<sup>25</sup>

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

56. Upon request, the prison provides meals and food in line with religious, cultural and other special dietary requirements.

57. Prisoners' food and meals are stored, prepared and served in line with hygiene regulations.

58. Clean drinking water shall be available to every prisoner.

59. Meal times are reasonable and generally match those in the community, where possible.

### Key Indicators

- » Menus are agreed following advice from dieticians and nutritionists and meet the needs of the prison population.
- » Prisoners can eat out of their cells, with others, wherever possible.
- » Prisoners are provided meals that meet medical dietary requirements.
- » Staff ensure that prisoners do not miss out on receiving meals, and gaps between meals are reasonable.
- » Managers ensure that relevant food safety and hygiene regulations are adhered to in all areas where food is stored, prepared or served.
- » Prisoners have access to clean drinking water.

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<sup>24</sup> SMR 19, 20 and 115

<sup>25</sup> SMR 22

## Good order

### Security

#### Standard<sup>26</sup>

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

#### Key Indicators

- » The physical and procedural security of the prison is robust.
- » Staff provide good supervision of prisoners during association and movement around the prison.
- » The risk of escape is well managed, including while prisoners are being escorted or temporarily removed.
- » Restraints are used only during escort when justified by individual risk assessment.
- » Individual assessments form the basis for a prisoner's allocation to a certain prison regime with the least restrictive environment necessary.

### Classification and placement

#### Standard<sup>27</sup>

61. Classification, placement and treatment are based on an individual assessment of each prisoner's risks and needs.

62. Prisoners are held in the appropriate security conditions and can seek review about decisions on their security classification.

#### Key Indicators

- » Remand prisoners are held in the most convenient local prison for their domestic and legal visits.
- » Classification documentation contains accurate and detailed information, taking account of the individual needs of the prisoner.
- » Proximity to home is given strong importance in transfer decisions.
- » Classification reviews are conducted within the authorised timeframes or sooner where appropriate.
- » Classification reviews involve the prisoner and all relevant staff. Prisoners are informed of the outcome in writing and told how to appeal.
- » Transfers do not take place without an up-to-date assessment of the prisoner's risk of harm and rehabilitation needs.
- » Prisoners are transferred to an appropriate reintegration prison for their release.
- » Every sentenced prisoner is classified as soon as possible to assess the risks that prisoner may pose and to design a suitable offender plan that supports the prisoner's release.

<sup>26</sup> SMR 36

<sup>27</sup> SME 89 and 93

## Segregation and cell confinement

### Standard<sup>28</sup>

63. Prisoners are placed on directed segregation only with proper authority and for the shortest time period, which is regularly reviewed. Prisoners understand why they have been segregated.
64. Prisoners are kept safe at all times while on directed segregation and individual needs are recognised and given proper attention.
65. Cell confinement is subject to strict policies and procedures.
66. Prisoners suspected of internal concealment are located in a dry cell as a last resort and the proper authorisation is recorded.

### Key Indicators

- » Prisoners are not segregated except as a last resort, for as short a time as possible and subject to proper recorded authorisation.
- » Prisoners are informed of the reasons for their segregation in a format and language they understand.
- » Prison staff monitoring segregated prisoners receive appropriate training and are supported to recognise mental health issues or distress.
- » Prison staff monitoring segregated prisoners are vigilant in detecting signs of decline in mental health, mitigate the social isolation inherent in segregation and escalate concerns.
- » Efforts are made by staff to understand and address the behaviour leading to segregation.
- » The use of a dry cell is properly authorised and recorded. Such a cell is used only for the shortest possible period.
- » Monitoring of prisoners in a dry cell is carried out in accordance with clinical advice.

## Incentives

### Standard<sup>29</sup>

67. Systems of rewards and privileges appropriate for different categories of prisoners are established, in order to encourage prosocial behaviour, develop a sense of responsibility and secure the interest and cooperation of prisoners.

### Key Indicators

- » Prisoners are encouraged to demonstrate prosocial behaviour in prison through an authorised and fair system of rewards and privileges.
- » Behaviour is reviewed regularly and prisoners are able to demonstrate their progress.
- » Staff support prisoners to change their behaviour, giving them advice and opportunities to improve their behaviour.
- » Prisoners know how they can appeal decisions about privileges and sanctions and are helped by staff appropriately to do so.

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<sup>28</sup> SMR 38, 43, 44 and 45

<sup>29</sup> SMR 95



## Discipline

### Standard<sup>30</sup>

- 68. Disciplinary sanctions against prisoners are imposed by the proper authority.
- 69. Prisoners are subject to disciplinary procedures which are fair and proportionate and follow due process.
- 70. Prisoners are promptly informed of any disciplinary sanction, and understand the charges and procedures they face.
- 71. Interpreter services will be used, where necessary, to explain any disciplinary charges, procedures and the process for defending the charges.
- 72. Prison management does not rely on prisoners for any disciplinary functions, whether in a formal or informal manner.

### Key Indicators

- » Disciplinary processes are governed and delivered according to clear regulations and policy that is fair, proportionate and follows due process.
- » Prisoners who lack capacity to obey a prison rule as a consequence of mental illness or disability are not unfairly sanctioned or adjudicated.
- » No collective sanctions that amount to torture or other cruel, inhumane or degrading treatment or restriction are used.
- » Prisoners subject to disciplinary processes can access legal advice and defend themselves.
- » Prisons conduct adjudications regularly and routinely quality assures a proportion of adjudications conducted by other managers.
- » Prison management does not rely on prisoners for any disciplinary functions, whether in a formal or informal manner.

## Health professionals' role in discipline

### Standard<sup>31</sup>

- 73. Health professionals do not participate in disciplinary sanctions.

### Key Indicators

- » Health professionals do not undertake searches of prisoners.
- » Health professionals monitor the condition of prisoners subject to disciplinary measures and report concerns.
- » Health professionals are not involved in imposing disciplinary sanctions or non-clinical restrictive measures.
- » Health professionals provide prompt health assistance and treatment to these prisoners, if needed.

<sup>30</sup> SMR 37, 39, 40, 41 and 43

<sup>31</sup> SMR 46

## Use of force

### Standard<sup>32</sup>

74. 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.
75. Instruments of restraint are used only in clearly defined circumstances, when lesser forms of control fail, and only for the time strictly required.

### Key Indicators

- » Custodial staff have up-to-date training in approved use of force methods, which emphasise the routine use of de-escalation techniques.
- » Planned use of force is properly authorised.
- » All staff involved in the use of force are debriefed and complete appropriate reports promptly.
- » Prisoners are debriefed verbally after an incident and receive an explanation of why force was used on them with a view to preventing recurrence.
- » Prisoners with challenging behaviours as a result of physical disability, mental illness or distress, learning disability or personality disorder are identified and staff understand how to manage their behaviour.
- » Health staff receive training to recognise risks associated with restraint, attend all planned use of force situations, brief staff appropriately and comprehensively assess prisoners' well-being prior to, during and after the incident and initiate all required treatment or interventions promptly.
- » Use of force data is monitored and any emerging patterns are identified and acted on.
- » Use of force documentation and associated CCTV or video footage is retained appropriately and is scrutinised by senior managers to identify good practice, opportunities for improvement and possible ill-treatment.
- » Mechanical restraints are properly authorised, recorded, and used only for the shortest possible period.
- » Instruments of restraint are applied only when no lesser form of control is effective, with the least intrusive method and for the shortest time necessary.
- » Instruments of restraint are never used as a disciplinary sanction.
- » Instruments of restraint used during transfers are removed when prisoners appear before a judicial or administrative authority.

## Searches

### Standard<sup>33</sup>

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

<sup>32</sup> SMR 47, 48, 49 and 82

<sup>33</sup> SMR 50, 51 and 52

### Key Indicators

- » Cells and property are left in the same condition they were found in after a search.
- » Searches are thorough and systematically recorded.
- » Prison staff in charge of conducting searches have received appropriate training.
- » Alternatives to intrusive body searches (such as scans) are available, where possible.
- » Records of all searches are kept, including the reasons, identities of the persons involved and the results.



## Purposeful activity

### Exercise

#### Standard<sup>34</sup>

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

#### Key Indicators

- » Exercise areas are fit for purpose, and have adequate equipment.
- » Prisoners can shelter from rain and sun in exercise areas.
- » Prisoners do not have to choose between access to the open air and other important activities.
- » Prisoners understand that time in the open air is important to their mental and physical health.
- » Outside exercise is cancelled only in severe weather conditions.
- » All prisoners, including those subject to disciplinary sanctions or restrictive measures, spend at least one hour per day in the open air.
- » Prisoners, in particular young people, have access to physical/recreational training/equipment during exercise.

## Communication with family or whānau

#### Standard<sup>35</sup>

- 79. Prisoners are encouraged and receive practical help to maintain contact with family/whānau members.
- 80. Prisoners have regular access to visits.
- 81. Prisoners have regular access to mail, telephones and other communications, subject to a risk assessment.

#### Key Indicators

- » Subject to risk assessment, prisoners can visit sick relatives and attend funerals, where possible.
- » Temporary Release is used appropriately to help maintain contact with dependents.
- » There are 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.
- » Prisoners' approved telephone numbers are entered on the telephone system as soon as possible after arrival.
- » Telephones can be used in private, where possible.
- » All prisoners can make at least one outgoing telephone call of up to five minutes duration per week, in addition to calls to outside agencies and legal advisors.

<sup>34</sup> SMR 23

<sup>35</sup> SMR 58 and 106

## Visits

### Standard<sup>36</sup>

- 82. Prisoners are aware of prison procedures and their visits entitlements.
- 83. Prisoners and their visitors are able to attend visits in a clean, safe and respectful environment which meets their needs.
- 84. Visitors are informed about search procedures, and understand of their right to refuse the search and leave the prison.
- 85. 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.
- 86. Visits areas are child friendly and allow for physical contact.
- 87. There is special provision of visits for children at times which are least interruptive of their education and other activities.

### Key Indicators

- » Security arrangements and restrictions on physical contact are not excessive.
- » Prisoners are able to receive a visit within one week of admission and thereafter at least one visit a week for a minimum of 30 minutes including at weekends.
- » Prisoners' visitors are given information about how to get to the prison, visiting hours, what to expect and how to complain.
- » There is a welcoming visitors' centre, which has activities to keep children entertained.
- » Search and entry processes for visitors are proportionate and child-friendly.
- » Booth visits are authorised only when there is a significant risk arising from visits justified by security intelligence. Decisions are reviewed at least monthly.

## Library

### Standard<sup>37</sup>

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

### Key Indicators

- » Prisoners can access library resources.
- » The library provides an opportunity for both learning and social interaction in an informal, relaxed setting.
- » The quantity and quality of library materials is sufficient to meet the needs of the prison population.
- » Prisoners can easily access documents relating to their management, rights and entitlements.
- » The library promotes literacy effectively.

<sup>36</sup> SMR 60 and Bangkok Rule 21 and 28

<sup>37</sup> SMR 64

## Rehabilitation

### Standard<sup>38</sup>

89. Appropriate interventions are provided to reduce the likelihood of reoffending and promote successful reintegration.
90. Rehabilitation programmes, targeting the specific needs of the prisoner, are available and accessible.
91. There is good cooperation and communication between the prison and social support organisations, including those that deliver rehabilitation programmes in the prison.

### Key Indicators

- » Prisoners are encouraged and helped to take responsibility for their own rehabilitation.
- » Prisoners are able to participate fully in rehabilitation opportunities and staff reinforce their learning and progress.
- » Prisoners can access appropriate offending-focussed cognitive behavioural programmes that help them change their attitudes, thinking and behaviour.
- » Prisoners know what interventions and services are available and can access them easily.
- » Prisoners, especially those on indeterminate sentences, have opportunities to practise necessary life skills such as cooking and information technology (IT) in preparation for independent living.
- » There are arrangements for sharing relevant information about individual prisoners, ensuring confidentiality.
- » Staff have a good working knowledge of the rehabilitation services available to prisoners and actively promote them.
- » Relevant voluntary and community sector organisations are supported to work with prisoners.
- » A named manager is responsible for coordinating the work of voluntary and community sector organisations.

## Offender Plans

### Standard<sup>39</sup>

92. All prisoners have an offender plan.
93. All prisoners receive support to achieve the targets in their offender plans and progress through their sentence.

### Key Indicators

- » Case managers coordinate interventions with individual prisoners.
- » Staff support and motivate prisoners to engage positively with activities designed to reduce their risk of reoffending and help them prepare for release.
- » All prisoners have an offender plan, including those on remand and those serving short sentences.

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<sup>38</sup> SMR 86, 88 and 91

<sup>39</sup> SMR 92 and 94

- » The offender plan includes an assessment of the likelihood of reoffending, including factors relating to a prisoner's community reintegration.
- » Prisoners are involved in preparing an offender plan based on the likelihood of reoffending, the risk of harm to others and their individual strengths, skills and goals.
- » Release plans include outcome-focused objectives identifying relevant time-limited and appropriately sequenced interventions and reintegration support.

## Education

### Standard<sup>40</sup>

94. Education and vocational training programmes are offered in line with the needs of the learners.

### Key Indicators

- » An assessment of individual learning needs is timely and accurate upon arrival into prison.
- » Education programmes respond to different learner abilities and a range of education and vocational training opportunities are available to prisoners, including self-directed learning opportunities.
- » Young prisoners and prisoners assessed as having low levels of literacy and/or numeracy can access appropriate education programmes as soon as they arrive in prison.
- » Curricula used for education classes and vocational training, including self-directed learning, are similar to those used in the community.
- » Education and vocational training typically lead to formal qualifications.

## Supporting prisoner wellbeing

### Standard<sup>41</sup>

95. Prisoners can access out of cell activities which promote learning, well-being and support rehabilitation.

### Key Indicators

- » Prisoners are encouraged to engage in activities to promote more formal learning and boost employability.
- » Prisoners have access to opportunities that improve health and wellbeing.
- » Recreational and cultural activities are available to benefit the mental and physical health of prisoners.

## Work

### Standard<sup>42</sup>

96. All prisoners, where possible, can engage in work that is purposeful, benefits them and increases their employability.

<sup>40</sup> SMR 104

<sup>41</sup> SMR 105

<sup>42</sup> SMR 96, 97, 98, 99, 100 and 116



### Key Indicators

- » Prisons offer opportunities for all prisoners who choose to engage in constructive work.
- » Prison-based work resembles similar work in the community.
- » No work involves labour of a harmful nature, slavery or servitude, or prisoners working for the personal or private benefit of staff
- » The prison has beneficial links with suitable employers.
- » Work supervisors have appropriate qualifications, experience and expertise.
- » Placement of prisoners to work opportunities is timely, voluntary, equitable, transparent and appropriate.
- » Prisoners are occupied in work that will benefit them, enhances their self-esteem, and improves their wellbeing and chances of successful reintegration.
- » Prisoners are not prevented or deterred from gaining work experience through disincentives, unofficial sanctions, clashes in their individual schedules or on the basis of health needs.
- » Prisoners are able to combine work and education.
- » Prisoners are able to choose the type of work they wish to perform, taking into account security/safety and their skills.
- » Work programmes are primarily oriented towards supporting reintegration.
- » Work in prison reflects, where possible, the work opportunities available in the community.

### Standard<sup>43</sup>

97. Prisoners' health and safety is safeguarded during all work activities to the same standards as in community based work.

### Key Indicators

- » Health and safety standards for prison-based work are similar to those applicable to work in the community.
- » Prisoners receive information, instruction, training and supervision on their work placement that is equivalent to community-based employment.

### Standard<sup>44</sup>

98. Prisoners receive a fair incentive payment for the work they perform.

### Key Indicators

- » Incentive payments encourage self-improvement and prisoners are paid fairly, accurately and on time.
- » Prisoners are allowed to spend a part of their earnings on approved items in prisons.
- » Prisoners on Release to Work are paid at market rates.

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<sup>43</sup> SMR 101 and 102

<sup>44</sup> SMR 103

## Religious or spiritual support

### Standard<sup>45</sup>

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| 99. Prisoners are supported by the chaplaincy, which contributes to prisoners' overall care, support and rehabilitation. |
| 100. Prisoners' freedom of religion is respected and they are able to practise their religion.                           |

### Key Indicators

- » Prisoners have access to worship and faith-based classes and groups.
- » Prison chaplains represent the broad range of faiths in the prison population.
- » Chaplains are involved immediately when a prisoner is near to death or has died, to support the dying prisoner, relatives, other prisoners and staff.
- » Chaplains are able to provide support to prisoners who have experienced bereavement or loss.
- » Prisoners of no faith can, where appropriate, access their preferred spiritual support.
- » Upon request, the prison administration provides food, where possible, that respects prisoners' religious dietary requirements.

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<sup>45</sup> SMR 65 and 66

## Reintegration

### Standard<sup>46</sup>

101. Where possible, prisoners are housed in prisons close to their families or in prisons which meet their rehabilitative needs.

#### Key Indicators

- » Prisoners are housed in prisons close to their families or place of social reintegration where possible.
- » Prisoners are housed in prisons which can meet their rehabilitative needs.

### Standard<sup>47</sup>

102. Prisoners are able to keep up to date with news and the outside world while in prison, where appropriate.

#### Key Indicators

- » Prisoners have access, where appropriate, to important items of news and current events, e.g. through newspapers, radio, television and other means.

### Standard<sup>48</sup>

103. Prison management actively prepares prisoners for their release by facilitating access to post-release services.
104. Prisoners with continuing health and social care needs are prepared and assisted to access appropriate services in the community prior to their release.
105. Prisoners with drug and/or alcohol problems are prepared for release and have access to appropriate support and continued treatment in the community.
106. Prior to release, prisoners have an up-to-date plan for addressing outstanding rehabilitation needs, which is managed in partnership with Community Corrections.
107. Prisoners are given all necessary practical support and support information ready for their day of release.

#### Key Indicators

- » Prisoners are connected to reintegration services or other community-based programmes and services towards the end of their sentence to enable them to gradually re-establish relationships and seek assistance with employment, housing and other practical and legal matters in preparation for their eventual release.
- » Prison staff assist prisoners in establishing or maintaining relations with post-release service providers.
- » All necessary work required to support a prisoner's release to the community is completed in good time for release.
- » Risk and support needs are shared with Community Corrections in advance of any release.

<sup>46</sup> SMR 59

<sup>47</sup> SMR 63

<sup>48</sup> SMR 87, 90, 107 and 108

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

- » Prisoners understand the requirements of their parole conditions and have the opportunity to discuss their rights and responsibilities prior to release.
- » Every effort is made to ensure that prisoners, including those on remand, have appropriate accommodation on release.
- » Prisoners are provided with the knowledge and skills required to manage their finances.
- » The safe release of the highest risk prisoners is supported by close collaboration with justice system partners.
- » Prisoners with social care needs are promptly identified and referred for a social care assessment.
- » On release prisoners receive all their property.
- » Prisoners are given information about sources of help and support in the community.
- » Representatives of post-release service providers have access to prisoners and are consulted by prison staff in a timely manner.
- » Prisoners have appropriate identity documents, information and means to reach their destination upon release, and to start reintegration.

## Prison staff

### Standard<sup>49</sup>

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| 108. All prison staff, who work with prisoners, have the necessary knowledge, skills and attitude, and are trained to work in line with professional and human rights standards. |
| 109. There is an adequate number of custodial staff to manage prisoners safely.  |

### Key Indicators

- » Prison staff demonstrate the knowledge, attitude and skills to perform their work professionally.
- » Prison management ensures the availability of, and promotes participation in, continuous in-service training courses for prison staff.
- » All prison staff have undergone training in communication skills and attitudes supporting respect for human dignity.
- » Prison staff have received training about policies and procedures for dealing with inter-prisoner violence.
- » Prison staff conducting searches have received appropriate training.
- » Prison staff are adequately trained in the use of force, in particular in techniques for restraining aggressive prisoners.
- » Appropriate support is available to prison staff to enable them to manage the risks of compassion fatigue, burn out and vicarious trauma as a result of their work with prisoners.
- » Staff receive necessary training and are supported to work effectively and respectfully with Māori, and have access to ongoing support.
- » Initial training of prison staff includes, at a minimum, the following:
  - Relevant national legislation, regulations and policies, as well as applicable regional and international instruments
  - Rights and duties of prison staff in the exercise of their functions, including the prohibition of torture and abuse
  - Security and safety, including the concept of dynamic security, the use of force and instruments of restraint and the management of violent offenders, including negotiation and mediation
  - First aid, the psychosocial needs of prisoners and social care/assistance
- » Prison staff with specialised functions have received training relevant to their role.

### Standard<sup>50</sup>

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| 110. Staff are good role models for prisoners and relationships between them are professional, positive and courteous. |
| 111. Prisoners have a dedicated member of staff who supports them to make positive changes in their lives.             |

<sup>49</sup> SMR 74, 75 and 76

<sup>50</sup> SMR 77



### Key Indicators

- » Staff and prisoners are fair and courteous to each other and have positive relationships.
- » Staff engage proactively with prisoners and seek to know prisoners as individuals.
- » Managers lead by example and regularly engage with prisoners in units.
- » Staff understand the impact of life experiences, such as trauma, abuse and mental illness, on their own and prisoner behaviour.
- » Staff maintain an accurate record of contact with prisoners.

### Standard<sup>51</sup>

112. Prison staff include a sufficient number of specialists, which could include social workers, teachers, trade instructors, counsellors and psychologists.

### Key Indicators

- » Prisons have sufficient staff to deliver the specialist services required by prisoners.

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<sup>51</sup> SMR 78

## Gender-responsive inspection standards

### Women prisoners

The number of women<sup>52</sup> prisoners in New Zealand and worldwide is increasing. Women prisoners are considered to be a vulnerable group with specific needs and requirements.

The Office of the Inspectorate *Te Tari Tirohia* acknowledges that Māori women are over-represented in prison compared with women from other ethnic groups. Specific standards have been developed for Māori women, and other relevant standards and key indicators are interspersed throughout this section.

While the Nelson Mandela Rules apply to all prisoners, the United Nations recognised that these Rules, initially adopted more than 50 years ago, did not draw sufficient attention to women's particular needs.

The United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders ('the Bangkok Rules') were developed to complement and supplement the Nelson Mandela Rules.

Inspectors will consider the following standards when assessing the treatment of women prisoners and prison conditions. However, the following standards may also apply to prisoners of any gender without discrimination.

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<sup>52</sup> For the avoidance of doubt, references to 'women' in this section, include trans women. Some standards, for example, testing for pregnancy or access to sanitary items, may also apply to trans men.

## Non-discrimination

### Standard<sup>53</sup>

113. Women's prisons operate under gender-sensitive prison management policies in order to ensure that the particular needs of women prisoners are taken into account in the management and treatment of prisoners.

#### Key Indicators

- » Prison management policies are gender-sensitive, identifying the specific needs of women and vulnerabilities of different groups of women prisoners, based on their ethnicity, race, nationality, gender identity, sexual orientation, age or other status.
- » Staff work to foster good relationships with prisoners, promote equality and diversity, and provide support.
- » Women's prisons have women on the senior management team and in the staff group to ensure that women's gender-specific needs are readily recognised and met.

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<sup>53</sup> Bangkok Rule 1

## Reception and induction

### First days in custody

#### Standard<sup>54</sup>

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| <p>114. On arrival in prison, women's needs are accurately assessed and facilities are provided to contact their families and dependents.</p> <p>115. Children accompanying prisoners are cared for and feel safe.</p> <p>116. The safety of a prisoner's children and other dependents is assessed and action is taken by staff to promote their safety.</p> |
|---|

#### Key Indicators

- » 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 circumstances/contact with relatives and dependents
  - age, including older and younger women
  - pregnant or breastfeeding women
  - previous history of abuse
  - potential victims of trafficking.
- » Pregnant women and women who are mothers of children under 24 months are given information on reception about mother with baby units, and supported to make an application to have their child with them.
- » Breastfeeding and pregnant women are identified and given appropriate advice and support by a health care practitioner.
- » Children entering prison are dealt with sensitively and staff ensure they are protected, cared for, feel safe and made comfortable.
- » Appropriate action is taken to identify children or other dependents whose safety may be at risk as a result of their carer's imprisonment and action taken to promote their safety where necessary.
- » Parents are provided with facilities to make phone calls to family and organise care for dependent children and other dependents on arrival in prison.
- » Reception staff have ready access to social services contacts in the event that they cannot resolve concerns about the welfare of a prisoner's children and other dependents.
- » All prisoners who are primary carers with dependents are informed how to access a social worker, counsellor and other services to reduce the trauma of separation.

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<sup>54</sup> Bangkok Rule 2

## Placement

### Standard<sup>55</sup>

117. Women are located as close to their family or whānau support as possible, in prisons that will meet their rehabilitation and reintegration needs.

### Key Indicators

- » Placement decisions are based on proximity to family or whānau support and the availability of rehabilitation interventions.
- » Closeness to family or whānau support is given higher priority for parents with young children.

## Classification and accommodation

### Standard<sup>56</sup>

118. Prisoners are classified based on their gender-specific needs and circumstances. Prisoners are housed in units and managed in regimes which match their gender-specific risks and needs.

119. Prisoners are accommodated in units that have the lowest possible security level.

### Key Indicators

- » Classification processes consider:
  - A prisoner's background
  - Offence type
  - Gender-specific mental health needs, including any past victimisation
  - Substance abuse
- » Prisoners are accommodated in the least restrictive environment and the lowest security level necessary based on gender sensitive assessment and classification methods.

## Clothing

### Standard<sup>57</sup>

120. Prisoners have adequate access to a variety of clean clothing, including gender appropriate underwear, of the right size and quality, which is seasonally appropriate and designed for their gender-specific needs.

### Key Indicators

- » Prison issue clothing is designed for specific genders, is clean, in good repair, and provided in a full range of sizes.
- » Suitable clothing is provided for pregnant prisoners.

<sup>55</sup> Bangkok Rule 4 and SMR 11

<sup>56</sup> Bangkok Rule 40 and 41

<sup>57</sup> SMR 19

## Health

### Hygiene

#### Standard<sup>58</sup>

121. Prisoners have gender appropriate and reasonable access to facilities and sanitary items for their specific hygiene needs, including during escort.

#### Key Indicators

- » Hygiene needs are catered for on arrival to prison, and prisoners have gender appropriate access to necessary supplies of hygiene items and sanitary products.
- » Prisoners are escorted in vehicles that are safe, secure, clean and comfortable, with gender appropriate sanitary provision.

### Gender responsive health assessment on entry

#### Standard<sup>59</sup>

122. Prisoners receive a gender-specific confidential assessment of their physical and mental health upon arrival at the prison, including urgent health needs (e.g. daily medications, injuries, self-harm and suicide risk assessment).

123. As soon as possible after their arrival in prison, prisoners undergo a confidential, gender specific health examination and screening which includes detection of sexually transmitted diseases, mental health needs, post-traumatic stress disorder, reproductive health history, drug or alcohol dependency, ill-treatment and sexual abuse. Referral is made to the appropriate services for treatment or support relating to issues identified during screening.

#### Key Indicators

- » Systems and processes are in place to support prisoners who have experienced abuse or other violence.
- » Staff are trained to recognise and support, in a sensitive and professional manner, prisoners who have experienced abuse.
- » Any prisoner complaining of ill-treatment, torture and sexual violence, is able to be examined by a health professional.

### Victims of ill-treatment, torture or sexual violence

#### Standard<sup>60</sup>

124. Prisoners identified as victims of abuse or trauma on arrival in prison are supported to address their specific health needs and take legal action, if they wish to.

<sup>58</sup> Bangkok Rule 5

<sup>59</sup> Bangkok Rule 6

<sup>60</sup> Bangkok Rule 7

### Key Indicators

- » Prisoners who state they have been subjected to abuse or trauma are given full information about their rights and have access to legal counsel before they take any action or make any decision.
- » Prisoners feel safe and feel comfortable to disclose any experience of abuse or trauma. Disclosure is managed sensitively by appropriately trained staff.
- » Specific interventions, such as counselling services, are available to prisoners who have experienced abuse and trauma.
- » Prisoners receive information on the support available to them in the community.
- » Prison staff work closely with external organisations to address the range of reintegration support needs of prisoners who have experienced abuse or trauma.
- » Prisoners are helped to prepare safety plans.

## Complaints of abuse

### Standard<sup>61</sup>

125. Prisoners who report abuse while in prison are protected and provided with support and access to gender-specific counselling.

### Key Indicators

- » Prisoners are able to make complaints in an environment free of fear of intimidation or hostility.
- » Prisoners who report prison-based abuse are protected from retaliation and are not disadvantaged.
- » Prisoners have access to legal assistance (aid) if they wish to take legal action regarding their abuse.
- » Complaints of abuse receive a response in all cases in a timely manner and, where relevant, an independent investigation of any allegation is undertaken.

## Gender responsive health care services

### Standard<sup>62</sup>

126. Gender-specific health care services, at least equivalent to those available in the community, shall be provided to prisoners.

127. Prisoners receive the option of having a chaperone present if they receive health treatment from a nurse or doctor of a different gender.

### Key Indicators

- » Unbiased information about choices in pregnancy is available.
- » The presence of custodial staff at health appointments should be handled with sensitivity and care, and risk managed appropriately.
- » Internal examinations occur only for health reasons and with the consent of the prisoner. They are carried out by an authorised health professional.

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<sup>61</sup> Bangkok Rule 25

<sup>62</sup> Bangkok Rule 10 and 8

- » All medical examinations take place in private.
- » Prisoners can refuse to provide information or undergo screening relating to their reproductive history.

## Mental health and care

### Standard<sup>63</sup>

128. Gender-specific mental health needs are recognised, treated and supported by health staff and specialist services at the prison, and they have appropriate access equivalent to that available in the community.

### Key Indicators

- » The range of gender-specific mental health needs is known and staff are competent to identify and assess them.
- » Multidisciplinary mental health services are available to prisoners.
- » Gender-specific services are available to prisoners who need additional therapeutic/meaningful support for emotional, behavioural and common mental health problems.
- » Mental health programmes are gender-specific, taking into account any trauma that a prisoner may have suffered.

## Self-harm

### Standard<sup>64</sup>

129. The gender-specific needs of all prisoners are recognised to prevent self-harm and suicide and therapeutic responses are implemented and are culturally appropriate.

130. Staff are able to identify and support women at times when women may feel particularly distressed.

### Key Indicators

- » Staff have received training in identifying the gender-specific causes of distress including separation or loss, receiving bad news from home, after child birth, trauma or violence, health reasons or concerns, if prisoners are unable to see or contact family, and prior to release.
- » Staff have the skills to provide gender-specific support to prisoners when they are distressed.
- » A multidisciplinary approach is used to support prisoners when they are distressed.
- » If prisoners at risk of self-harm or suicide are segregated and removed from the mainstream population:
  - the segregation was required to preserve their safety and wellbeing
  - there are plans in place to address the prisoner's mental health and other needs, and to return them to a mainstream unit
  - prisoners are managed in a way that protects their safety and enhances wellbeing

<sup>63</sup> Bangkok Rule 12

<sup>64</sup> Bangkok Rule 13 and 16

- prisoners can access meaningful activities and have regular direct contact and engagement with other people.

## Substance abuse treatment

### Standard<sup>65</sup>

131. Prisoners dependent on drugs and/or alcohol receive prompt clinical treatment which is effective, meets individual and gender-specific needs and offers the same services as those available in the community.

### Key Indicators

- » Treatment regimes are flexible, gender-specific, conform to national clinical guidelines, adequately meet the needs of drug or alcohol dependent prisoners and are provided by specialist staff in a safe environment.

## Preventative health care services

### Standard<sup>66</sup>

132. Prisoners receive gender appropriate information about health promotion and the control of communicable diseases.

133. Preventative health screening, equivalent to that provided in the community, is available to prisoners of any gender.

### Key Indicators

- » Prisoners are provided with information on the main gender-specific health conditions, modes of transmission of sexually transmitted infections and blood borne disease, risk factors and measures that can be taken to protect themselves from these conditions.
- » Prisoners have access to disease prevention programmes and gender-specific screening programmes that mirror national and local campaigns.
- » Prisoners have access to age appropriate screening programmes, and immunisation and vaccination programmes. Contraception and related advice is freely available to all prisoners.
- » Women's contraceptive needs are addressed prior to release.

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<sup>65</sup> Bangkok Rule 15

<sup>66</sup> Bangkok Rule 17 and 18



## Good order

### Gender appropriate prisoner searches

#### Standard<sup>67</sup>

- 134. Women prisoners are searched only by female staff.
- 135. Strip searches are carried out only when necessary, women prisoners are never fully naked and only two appropriately trained female staff are present.

#### Key Indicators

- » Strip searches are not conducted in areas with surveillance cameras.
- » Alternative screening is used to replace strip searches where possible.
- » Staff are trained to understand the particular sensitivity and vulnerability of women prisoners during searches.

### Discipline

#### Standard<sup>68</sup>

- 136. Cell confinement or disciplinary segregation shall not be applied to pregnant or breastfeeding prisoners or prisoners with babies in prison.
- 137. Prisoner disciplinary sanctions do not include prohibition of family contact, especially with their children.

#### Key Indicators

- » Prisoner visits or contact with their children are restricted only when there are safety or welfare concerns.

### Instruments of restraint and use of force

#### Standard<sup>69</sup>

- 138. Staff are aware of those prisoners who are pregnant and are specifically trained in the control and restraint of people who are pregnant.
- 139. Restraints are never used when a prisoner is in labour, giving birth or immediately following delivery.

#### Key Indicators

- » Procedures defining the use of pepper spray are gender-specific and acknowledge, in particular, pregnant or breastfeeding prisoners and parents of young children in prison.

<sup>67</sup> Bangkok Rule 19 and 20

<sup>68</sup> Bangkok Rule 22 and 23

<sup>69</sup> Bangkok Rule 24

## Purposeful activity

### Contact with children, family or whānau

#### Standard<sup>70</sup>

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| <p>140. Prisoners are assisted to contact and consult with legal representatives in relation to family matters.</p> <p>141. A prisoner's family situation is identified and support planning undertaken to proactively assist them in maintaining contact with family.</p> <p>142. Prisoners and their families receive ongoing active support to maintain or re-establish relationships, where it is appropriate.</p> |
|--|

#### Key Indicators

- » Key staff, including social workers, case officers and case managers, know the home circumstances of the prisoners in their care.
- » Prisoners have individual support plans to assist them to maintain good contact with supportive family and friends.
- » There is a specialist social worker available to help primary carers 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 members.
- » Parents in prison have access to programmes or interventions to help them improve their parenting skills, understand the impact of their imprisonment on their children and maintain relationships from prison.
- » There is adequate provision of visits, audio-visual links and children/family days to meet the needs of parents in prison.
- » The prison administration promotes family links by:
  - Comfortable and pleasant visiting rooms with toilet facilities for prisoners and visitors
  - Facilitation of increased phone calls if visits are not possible
  - Extended visit times for those travelling long distances
  - Cooperating with social services to assist with contact between prisoners and their families
  - Establishing special days where all families can visit together and initiating special events
  - Providing other means of contact with families including email, digital recordings and audio-visual links
  - Allowing prisoners to determine who may visit them.

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<sup>70</sup> Bangkok Rule 26, 43 and 44

## Access to gender-responsive programmes

### Standard<sup>71</sup>

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| <p>143. A balanced and comprehensive programme of activities is provided that is gender responsive.</p> <p>144. Child care facilities are available in women's prisons when prisoners attend work, education, skills training and programmes.</p> |
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### Key Indicators

- » Programmes provided should consider the gender-specific needs of all prisoners including Māori, those with indeterminate and long-term sentences, those with short sentences, young adults, foreign nationals, those with mental health or learning based needs and those on recall or remand.
- » Offender plans take into account the prisoner's background, including any victimisation they may have experienced, existence of mental health-care needs or substance abuse, as well as parental and other care responsibilities.
- » Staff delivering reintegration and offender management services are aware of the specific needs of women in prison and are adequately trained and supervised.
- » Prisoners who need psycho-social support or counselling due to victimisation and sexual abuse are offered counselling.
- » The prison regime is flexible enough to allow for full participation in activities and programmes by pregnant or breastfeeding prisoners or women with children in prison.
- » Gender responsive programmes are available to women prisoners that provide education on pregnancy, childbirth, parenting skills, health care and nutrition for pregnant prisoners and children.

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<sup>71</sup> Bangkok Rule 42

## Reintegration

### Standard<sup>72</sup>

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| 145. Pre- and post-release reintegration programmes are available and are gender responsive.   |
| 146. Offender plans are gender responsive and take into account, and plan for, prisoner's post-release social reintegration requirements from the beginning of their sentence. |

### Key Indicators

- » Staff working in these areas have good links with statutory and community agencies in the areas where prisoners will be released.
- » Where appropriate, families are encouraged to be involved in supporting prisoners, such as during reintegration planning and assessment and case management reviews.
- » Measures are put in place for prisoners who have been the victim of violence to have the choice not to return to the same house/community on release. If prisoners do choose to return, there is a comprehensive safety plan in place.
- » Prisoners are connected to reintegration services or other community-based programmes and services towards the end of their sentence to enable them to gradually re-establish relationships and seek assistance with employment, housing and other practical and legal matters in preparation for their eventual release.

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<sup>72</sup> Bangkok Rule 45,46 and 47

## Prisoners and children

### Pregnant prisoners and post-natal support

#### Standard<sup>73</sup>

147. Pregnant and breastfeeding prisoners, people who have recently given birth, and those caring for a child in prison have their mental, physical, emotional, cultural, and health needs fully supported throughout their time at the prison by appropriately trained staff.
148. Prisoners should give birth in hospital wherever possible.

#### Key Indicators

- » Ante-natal and post-natal services equivalent to those provided in the community are available to pregnant prisoners or those prisoners who have recently given birth.
- » Care planning, including diet, starts from the earliest knowledge of pregnancy, or following the prisoner's admission to custody, to support decision making.
- » An individual risk assessment process is used to decide which location in the prison is most appropriate for pregnant prisoners.
- » Pregnant prisoners and those who have recently given birth receive advice on health, exercise and diet from a health practitioner, and are encouraged to follow it.
- » Pregnant and breastfeeding prisoners are accommodated in cells and bedrooms, with gender appropriate hygiene and sanitary facilities, and regular access to hot water, ventilation, fresh air, heating and exercise.
- » Appropriate support is provided when a pregnancy ends prematurely.
- » Counselling services are available for those who have experienced loss or bereavement, including post-adoption.

### Child well-being

#### Standard<sup>74</sup>

149. Decisions on whether a child stays with their mother are made in the best interests of the child based on the conditions in prison, the risk 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

- » There is a clear, effective and fair policy on children staying with their mother in prison. Women have access to information about this policy that is easy to understand.
- » Children have opportunities to experience community activities and are prepared to leave the prison in accordance with their development needs and best interests.
- » Decisions to remove a child from prison are undertaken only when satisfactory alternative care arrangements have been identified.

<sup>73</sup> Bangkok Rule 48

<sup>74</sup> Bangkok Rule 49

- » Efforts should be made to eliminate as far as possible the differences between life in prison and outside prison for such children.

## Children residing in prison

### Standard<sup>75</sup>

150. Prisoners whose child is with them in prison shall be provided with the maximum possible opportunities to spend time with their child.
151. Prisoners 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.
152. The psychological/emotional needs of the child are closely monitored to assess any adverse effects of living in a closed institution and measures are taken to reduce the negative psychological impact of institutionalisation, based on individual needs.

### Key Indicators

- » Mothers with their child/children in prison are able to undertake all caring responsibilities and spend the maximum possible time with their child/children. The child resides in prison with their parent in adequate facilities.
- » The prison provides facilities for mothers and babies that are clean, comfortable, safe and stimulating for both mother and child.
- » All staff working with children have undergone specific recognised training including child protection issues and infant resuscitation
- » Mother and baby units are always supervised by at least one trained female member of staff.
- » Mothers are able to freely leave their rooms at night.
- » Mothers are able to cook for their children and receive support to do so.
- » Mattresses, bedding, clothing and all other equipment are checked to ensure they are in an appropriate condition.
- » Provision of care for the mother and baby is consistent with the standards and procedures provided in the community.
- » Mothers are able to exercise parental responsibility through informed choices.

## Access to health care for children residing in prison

### Standard<sup>76</sup>

153. The prison provides a child living with his/her mother in prison access to health care in the community whenever appropriate.
154. Children undergo health screening before entry to prison and all health needs identified are met.
155. Mothers have the opportunity to be present during their child's health interventions.

<sup>75</sup> Bangkok Rule 50 and Bangkok Rule 51

<sup>76</sup> Bangkok Rule 9

### Key Indicators

- » The child is able to access health care in the community, as required.
- » Mothers are allowed to be with children during the health appointment in the community.
- » Services provided include access to the children's regular vaccinations and any other preventive health care and treatment provided for children in the community.
- » Mothers and staff have the knowledge and training to deal with child emergencies, including resuscitation and choking.

## The removal of a child from prison

### Standard<sup>77</sup>

156. Women who are separated or separating from their child/children are given appropriate support.
157. The best interest of the child is the primary consideration in decisions whether to allow children to stay with their mothers in prison.

### Key Indicators

- » Decisions about when a child is separated from its mother are based on individual assessments.
- » 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.
- » The actual separation is undertaken with sensitivity and kindness; the child's safety is the primary consideration during separation.
- » Once a child has been removed from prison those responsible cooperate to ensure that the child can visit their mother as frequently as possible and the mother is allowed home on temporary release or temporary removal unless security considerations prohibit it.

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<sup>77</sup> Bangkok Rule 52

## Special categories of women prisoners

### Māori Women

#### Standard<sup>78</sup>

- 158. Māori women can access and practise their Māori culture and customs.
- 159. Māori women have access to kaupapa Māori informed and tikanga-based rehabilitation and reintegration programmes that are specifically designed to meet their needs.
- 160. Māori women are supported by staff to access stable whānau support.

#### Key Indicators

- » Prison policies, practices and training programmes for staff are written from a Māori women's perspective.
- » Programmes designed to meet the needs of Māori women are available to all female prisoners, but particularly to those who identify as Māori.
- » Māori women prisoners are given opportunities to gain meaningful training, industry and education opportunities.
- » Corrections' collaborates with Māori partners (e.g. mana whenua, iwi, hapu, NGOs) to develop programmes and services to meet the unique needs of female Māori offenders.

### Young women, under 19

#### Standard<sup>79</sup>

- 161. Staff are trained and aware of the distinct needs of young women, under the age of 19, recognising and responding to individual levels of maturity.

#### Key Indicators

- » Comprehensive risk assessments are in place to ensure young women are, and feel, safe from other prisoners.
- » Young women arriving from youth justice facilities are carefully prepared for transfer into an adult prison, identified systematically on arrival and actively supported.
- » Young women are consulted about the range of age appropriate activities offered.
- » Prison authorities ensure that young women are given access to education and vocational training programmes which give them opportunities to gain meaningful employment on release to the community.
- » Prison authorities encourage and facilitate the maintenance of family links by young women, unless specific circumstances, such as abuse by parents or other members of their family require that the young woman be protected from her family.

<sup>78</sup> Bangkok Rule 54

<sup>79</sup> Bangkok Rule 37, 38, 39 and 40

## Foreign national women

### Standard<sup>80</sup>

162. Foreign national women receive practical help to keep in touch with family overseas.

#### Key Indicators

- » Foreign national women receive practical help to keep in touch with family overseas, including access to regular telephone calls at appropriate times of the day and of sufficient length to enable women to maintain good contact with their children and families.

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<sup>80</sup> Bangkok Rule 53

## Prison staff

### Staff training

#### Standard<sup>81</sup>

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|---|
| <p>163. Women's prisons are staffed predominantly by women, including in senior roles.</p> <p>164. All staff working in women's prisons have completed training in the gender-specific needs of women and gender sensitivity.</p> |
|---|

#### Key Indicators

- » All staff at women's prisons have received training on working effectively with women prisoners.
- » There is no ill-treatment or sexual misconduct by staff at women's prisons, whether verbal, psychological or physical.
- » Appropriate support is available to prison staff to enable them to manage the risks of compassion fatigue, burn out and vicarious trauma as a result of their work with prisoners.
- » Staff receive necessary training and are supported to work effectively and respectfully with Māori women, and have access to ongoing support Units in women's prisons are never staffed solely by men.

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<sup>81</sup> Bangkok Rule 29, 30, 31, 32, 33, 34 and 35



## Transgender prisoners

The number of trans people in the New Zealand prison system is small, with around 20-30 trans prisoners at any one time (around 0.02% of the prisoner population), and their needs are distinctly different from other prisoners.

International research shows trans prisoners are particularly vulnerable and at risk of human rights violations or abuses while in prison (Penal Reform, 2013). Affirmative action is required to meet the needs of this group, and protect them while in custody.

A trans person/prisoner is defined as someone whose gender identity (a person's sense of being a man or a woman or another gender) does not completely align with their assigned sex at birth. The word '**trans**' is used throughout the following standards to describe all people whose gender identity does not match their assigned sex at birth.

### The Yogyakarta Principles

The Yogyakarta Principles were developed in 2006 by a group of international experts in transgender issues, and were updated in 2017.

These focus on issues facing transgender people as a whole, but Principles 9 and 10 are specific to transgender people held in detention.

The following Standards are informed by the Yogyakarta Principles, along with New Zealand legislation and the Department of Correction's transgender guidelines.

### Principles (from the Department of Corrections' Transgender Guidelines)

Trans people are managed in a way that:

- » is individualised
- » seeks to preserve their dignity, safety and privacy
- » enables the maintenance of a person's gender identity
- » is not dependent on the gender the prison usually houses

## Placement

### Standard

- |   |
|---|
| <p>165. Trans prisoners are consulted and their preference is considered when deciding whether to place them in a men's or women's prison.</p> <p>166. Trans 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.</p> |
|---|

### Key Indicators

- » Decisions about the location of a trans prisoner are taken following a multidisciplinary case conference and take account of the views of the prisoner and any available evidence of living in their gender identity.
- » Wherever possible, and subject to an assessment of the relevant risk factors, trans prisoners are located in a prison consistent with their gender identity, or in the case of non-binary trans prisoners, a prison containing their preferred gender.
- » Staff support trans prisoners to complete a placement review.



## Escorts and transfers

### Standard

167. Trans prisoners may be transferred in a vehicle with other prisoners, only if it is determined to be safe and appropriate given the specific circumstances.

### Key Indicators

- » Trans prisoners are usually escorted in single-cell vehicles and will be kept separate from other transferring prisoners.
- » Trans prisoners are not prohibited from re-integrative temporary removals on the basis of their gender identity (e.g. shopping trips).

## Gender identity

### Standard

168. Gender identity disclosures are managed with sensitivity and care.  
169. Trans prisoners are routinely addressed as, and referred to in, the gender they identify with.

### Key Indicators

- » Staff check with the prisoner on arrival that their name and gender registered are correct.
- » Information is shared only with relevant staff that require it to manage the prisoner's safety and wellbeing.
- » Staff consult the prisoner about their preferred name and pronoun, and refer to them in their preferred way.

## Searches

### Standard

170. Trans prisoners can nominate staff of their preferred gender identity to perform searches, and their dignity and privacy is protected at all times.

### Key Indicators

- » Trans prisoners are not searched more often than other prisoners.
- » Trans prisoners are rubbed down, strip searched and will provide urine samples to nominated staff members of their preferred gender identity.

## Accommodation

### Standard

171. Trans prisoners are placed in single cells, unless a suitable trans prisoner of the same gender is identified.  
172. Trans prisoners' safety is assessed before placement in any cell or unit.

### Key Indicators

- » A thorough assessment of the trans prisoner and other prisoners in the unit is conducted to determine risk.
- » Trans prisoners are allocated single cells, unless two trans people of the same gender identity reside in the prison, and a risk assessment is completed indicating they are suitable for placement together, and two trans people choose to be placed in a shared cell.



## Support plans

### Standard

173. Trans prisoners have individualised support plans that address their specific needs and requirements and are regularly reviewed.

### Key Indicators

- » The support plan is completed promptly and within a reasonable timeframe of arriving in prison, and is specific to the trans prisoner
- » The support plan is shared with appropriate staff, who require the information to manage the trans prisoner while in custody
- » The support plan includes information on cell placement, safety, maintaining gender identity, searching arrangements and escort preferences.

## Staff

### Standard

174. Trans prisoners are treated with dignity and respect.
175. Trans prisoners are supported by appropriately trained staff.

### Key Indicators

- » Staff are aware of the principles of equality and non-discrimination relating to gender identity.

## Segregation

### Standard

176. The safety and wellbeing of trans prisoners is managed in the least restrictive manner possible.
177. Trans prisoners are not automatically placed in segregation.

### Key Indicators

- » Protective measures involve no greater restriction of trans prisoners' rights than is experienced by the general prison population.
- » Staff consider how to protect the trans prisoner's safety without limiting their opportunities.
- » Staff avoid restricting trans prisoners' association with other prisoners, where safety considerations allow.

## Access to rehabilitation

### Standard

178. Trans prisoners have equal access to industry, treatment and learning opportunities.



### Key Indicators

- » Trans prisoners do not have reduced access to activities if they are segregated for their safety.
- » Trans prisoners are not denied access to any programme or activities on the basis of their gender identity.

## Personal items

### Standard

179. Trans prisoners have access to the items they use to maintain their gender appearance and identity.

### Key Indicators

- » Trans prisoners have access to items required to maintain their gender identity. Items are withheld only if they pose a risk to the safety and security of the prison or prisoner.
- » Trans prisoners know how to apply to have items approved that they require to maintain their gender identity, and are supported to apply by staff.

## Health care

### Standard

180. Trans prisoners receive health care equivalent to that available to them in the community.

### Key Indicators

- » The prison provides adequate access to health care appropriate to the needs of those in custody, recognising any particular needs of trans prisoners.
- » Trans prisoners have continuity of care, particularly with regard to hormone therapy and specialist care, on arrival at and release from prison on release.

## Support

### Standard

181. Trans prisoners are able to access support or counselling services where needed, including external support networks.

### Key Indicators:

- » One-to-one support or counselling is provided to trans prisoners, where necessary.
- » A list of trans support networks and details on how to contact them is available to trans prisoners.
- » Trans prisoners are supported to contact external support networks.