

	MONITORING TOOL FOR PERSONS DEPRIVED OF LIBERTY – FOR JAILS AND PRISONS (MALE POD ONLY)	DOCUMENT CONTROL NO.: CHR- Revision No. 001 Revision Date: ____ June 2023
	Visitorial Division, Prevention Cluster Owner	

MONITORING OF THE HUMAN RIGHTS SITUATION OF PERSONS
DEPRIVED OF LIBERTY IN _____
CONDUCTED ON _____

CHR Region _____

I. PDL Profile

Name					
Address					
Sex		Age		Date of Birth	
Religion		Citizenship		Ethnicity	
Civil Status		No. of dependents, if any			
Highest Educational Attainment					

II. Manner of Arrest

As to the Manner of Arrest	YES	NO	PDL CANNOT RECALL
Was the PDL informed of his rights?			
Did the arresting officer show proper identification?			
Did the arresting officer physically hurt the PDL?			
Did the arresting officer use profane or vulgar words during arrest?			
If the PDL was a minor, was he handcuffed?			
Was the PDL tortured to admit the crime alleged?			

III. Findings/Observations

Fill out the tables under this section by checking the appropriate spaces based on the response/s of the PDL/s being interviewed.

1. Accommodation	Yes	No	Remarks
Do the cells have artificial light and ventilation?			
Are sanitary installations adequate?			
Are adequate bathing and shower installations available?			
Are all parts of the facility regularly used by the PDL always maintained properly and kept clean?			

2. Clothing and Bedding	Yes	No	Remarks
Is a PDL who is not allowed to wear his own clothing provided with clothing?			
Are PDL allowed to wash and change their clothes as often as necessary?			
Are PDL allowed to wear their own clothing when removed outside the facility?			
Is every PDL being provided with a separate bed?			
Is every PDL provided with sufficient beddings, i.e. pillowcase, blanket, bedsheet?			

3. Separation of Categories	Yes	No	Remarks
Are PDL undergoing trial kept separate from convicted PDL?			



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Are minor PDL kept separate from adults?			
Are PDL under special categories (older persons, Persons with Disabilities, LGBTQIA+) kept separate?			
Are PDL with highly communicable or infectious diseases isolated / kept separate?			

4. Personal Hygiene	Yes	No	Remarks
Are PDL provided with water throughout the day?			
Are PDL provided with toiletries, i.e soap, shampoo, toothpaste?			

5. Food and Drinking Water	Yes	No	Remarks
Are all PDL provided with breakfast, lunch, and dinner every day?			
Is the food served nutritious, well-prepared and served?			
Is drinking water available to every PDL whenever he wants it?			
Are dietary, religious, or culture restrictions of PDL considered in food preparation?			

Additional questions:

a. How many meals are provided in a day? _____

b. Can you cite a sample menu of meals provided? _____

6. Exercise, Sport and Recreation	Yes	No	Remarks
Are PDL allowed to have at least one (1) hour of suitable exercise in the open air daily?			
Are spaces, installations and equipment for physical exercise and recreational training available for PDL use?			
Are recreational and cultural activities provided in the facility for the benefit of the mental and physical health of PDL?			

Additional Question:

What are the kinds of recreational programs that are being provided by the facility?

7. Health-care Services	Yes	No	Remarks
Are PDL provided access to necessary healthcare services free of charge?			
Is the facility hospital/clinic, if any, adequately staffed and equipped to provide PDLs with appropriate treatment and care?			
Is there adequate and regular supply of medicine for common ailments of PDL?			
Is there continuity in treatment and care of infectious diseases, including for HIV and tuberculosis.			
Does the facility have rehabilitation and treatment services and programs for drug offenders?			



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Are PDL provided access to services of a qualified dentist?			
Are PDL provided with prompt access to medical attention in urgent cases?			
Are PDL in need of specialized treatment referred to a capable hospital?			
Are PDL with mental disabilities referred to specialized facilities?			
Are PDL suspected of having contagious diseases given adequate treatment?			
Does the facility conduct torture screening on newly-admitted PDL?			
Are PDL allowed to access their individual medical files?			
Are all medical examinations undertaken in full confidentiality?			

Additional questions:

a. In a female facility, are arrangements made for an infant to be born in a hospital outside the facility? _____

b. Is the newborn child allowed to stay with the PDL mother? If yes, for how long? _____

8. Restrictions, discipline and sanctions	Yes	No	Remarks
Are there alternative dispute resolution mechanisms employed in the facility to prevent disciplinary offences or to resolve conflicts?			
Are the imposed disciplinary sanctions fair?			
Are PDL informed of the nature of the accusation against them and are given time and facilities for the preparation of their defense?			
Are PDL allowed to defend themselves in person or through legal assistance, particularly in cases involving serious disciplinary charges?			
Are opportunities to seek judicial review of disciplinary sanctions available to PDL?			
Are PDL subjected to torture or other cruel, inhumane, or degrading treatment or punishment as a form of restriction or disciplinary sanction?			
Are PDL subjected to solitary confinement as a form of punishment?			
Is prolonged restriction of family contact being imposed as a form of disciplinary sanction?			

9. Instruments of restraint	Yes	No	Remarks
Are instruments of restraints, i.e. handcuffs, chains, irons, and other instruments, used as sanction for disciplinary restraints on PDL?			



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10. Searches of PDLs and cells	Yes	No	Remarks
Are searches conducted in a manner that is respectful of the inherent dignity and privacy of the PDL being searched?			
Are PDL subjected to intrusive searches, including strip and body cavity search?			

11. Information for PDL on facility's regulations, PDL rights and obligations	Yes	No	Remarks
Are PDL informed of the facility regulations, as well as their rights and obligations?			
Are PDL given written information about facility regulations, and about his/her rights and obligations?			

12. Requests or complaints by the PDL	Yes	No	Remarks
Are PDL given the opportunity to make uncensored requests or complaints?			
Are PDL subjected to any risk of retaliation, intimidation, or negative consequences as a result of having submitted a request or complaint?			
Are allegations of torture or other cruel, inhuman, or degrading treatment or punishment of PDL dealt with immediately?			

13. Torture	Yes	No	Remarks
Were you subjected to any form of torture or other cruel, inhuman, or degrading treatment or punishment while in the facility?			
If yes, did you inform the facility of such incidence?			
Did the facility act on this information?			
Have you witnessed any torture or other cruel, inhuman, or degrading treatment or punishment against other PDL?			

14. Visitation/Contact with the outside world	Yes	No	Remarks
Are PDL allowed to communicate in writing or using electronic/digital means with their family and friends?			
Are PDL allowed to receive regular visits from family?			
Are PDL allowed to receive visits from friends?			
Are the search and entry procedures for visitors not degrading?			
Are children subjected to body cavity searches?			
Are PDL provided with adequate opportunity, time and facilities to be visited by and to communicate with a legal counsel or a legal aid provider?			
Are foreign PDL allowed to communicate with the diplomatic or consular representatives of their country?			
Are PDL informed regularly of the important items of news?			



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Additional question:

1. Are conjugal visits allowed by the facility? _____

15. Exercise of Religion	Yes	No	Remarks
Are PDL allowed to practice their religion openly and without any restrictions?			
Are religious organizations allowed to hold regular services and to pay pastoral visits to PDL?			
Are PDL allowed to attend the religious services provided in the facility?			
Can the PDL choose not to participate in religious services or freely decline any religious education, counselling or indoctrination?			
Have you observed any discriminatory acts against a practice of religion of a fellow PDL committed by the facility personnel?			

16. Work and Livelihood	Yes	No	Remarks
Do PDL have the opportunity to participate in livelihood programs?			
Are PDL required to work for the personal or private benefit of any facility personnel?			
Is there a system of equitable remuneration of the work of PDL?			
Does the facility provide vocational training for PDL?			

Additional Questions:

a. What type of livelihood programs are offered by the facility?

b. Are such programs beneficial to the PDL? _____

c. How can the PDL participate in livelihood programs? _____

17. Education and Books	Yes	No	Remarks
Are there educational opportunities offered to PDL?			
Is there a library within the facility that may be used by PDL?			

Additional Question:

a. What is the selection/application process to be able to avail educational opportunities _____ in _____ the _____ facility?

18. Removal and Transport	Yes	No	Remarks
Are PDL exposed to public view when removed from the facility?			
Are PDL provided proper safeguards to protect them from insult, curiosity, and publicity in any form?			



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19. Grant of Time Allowances and Release of PDL	Yes	No	Remarks
Does the facility have a clear written protocol in granting Time Allowances?			
Does the facility provide a certification of Time Allowances credited to PDL?			
Are the lists of PDL qualified for release posted in conspicuous places within the facility premises?			

IV. REQUEST FOR ASSISTANCE BY THE PDL (IF ANY)

Action Type:

- ☐ Legal Assistance
☐ Referral to other agencies/organizations
☐ Follow-up case in court
☐ Facilitate transfer of PDL
☐ Forensic Investigation
☐ Psychosocial Intervention
☐ Others _____

Details of Request:

Date of Request (mm/dd/yyyy): _____
Complaints /Other Requests (if any): _____

FOR REQUEST OF LEGAL ASSISTANCE

Details of Imprisonment

Date of Arrest: _____
Arrested with a Warrant? (Yes/No): _____
Date of Detention by Arresting Officer (mm/dd/yyyy): _____
Date of Commitment in BJMP Jails/Provincial Jails/
BUCOR Prisons/Others (mm/dd/yyyy): _____
Case Number: _____
Crimes Committed/Charged: _____

Case Status

Court where case is filed: _____
Branch: _____
Name of Lawyer: _____
Private: _____ PAO: _____

Case Status: _____
Status Date (mm/dd/yyyy): _____
Convicted? Yes / No If yes, Date of Conviction: _____
Sentence: _____ Minimum Sentence Served? Yes / No
Nature of Conviction: __ Final __ On-Appeal :
If On-Appeal, Date of Appeal (mm/dd/yyyy) : _____
Court where Appeal is Filed : _____
Branch : _____

Initial action/s taken, if any

Interview conducted by:

Name: _____
Position: _____
Signature: _____
Date: _____