

NPM Annual Report 2020

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2. Introduction

The Optional Protocol to the Convention against Torture (OPCAT) ratified by the Maldives on 15 February 2006 obliges each State party to “maintain, designate or establish, one or several independent national preventive mechanisms for the prevention of torture at the domestic level”. In 2008 the government of the Maldives designated the Human Rights Commission of the Maldives (HRCM) as the National Preventive Mechanism (NPM) under the OPCAT. The HRCM as a result established a specific department to carry out the functions of the NPM in 2009. These functions are also stated in Act 13/2013 Anti Torture Act.

OPCAT article 4 states that visits must be allowed to “any place under the jurisdiction and control of the State party where persons are or may be deprived of their liberty, either by virtue of an order given by a public authority or at its instigation or with its consent or acquiescence.” Deprivation of liberty is defined as “any form of detention or imprisonment or placement of a person in a public or private custodial setting from which that person is not permitted to leave at will by order of any judicial, administrative or other authority.” This means that the Optional Protocol does not apply solely to prisons; it applies to all places in the country where people may be detained, whether legally or illegally. The NPM must be allowed unfettered access to all of these locations, persons and information.

On 28th April 2008, the HRCM appointed staff for the NPM and officially commenced fulfilling the country’s obligations under OPCAT. A separate department for NPM was established in 2009.

In response to the rapid rise in Novel Coronavirus (COVID-19) cases which led to the increase in COVID-19 quarantine and isolation facilities, advice on conducting visits to these facilities was sought from the international monitoring body developed under OPCAT, the Subcommittee on Prevention of Torture and Other Cruel, Inhuman, or Degrading Treatment or Punishment (SPT). The 40th session of SPT held from 10th February 2020-14th February 2020, SPT published a guideline advising the NPMs relating to the COVID-19 pandemic which states that “NPMs cannot be completely denied access to official places of detention, including places of quarantine”. In 2020, NPM conducted visits to state care facilities and detention centers in accordance with OPCAT’s “Guidance on Monitoring Places of Detention through the COVID-19 pandemic”.

This report reflects the summary of the work carried out by the NPM of Maldives to deliver the respective mandate, the adaptations made and responsibilities added in response COVID-19, and the challenges faced by the NPM in the year 2020

3. Activities conducted by NPM in 2020

3.1 Visits

One of the main priorities of NPM is to establish regular visits to places of detention to analyze if there is any cruel, inhuman, or degrading treatment happening against people that are or maybe deprived of liberty. These visits include:

3.1.1 Monitoring Visits

Monitoring visits are conducted to assess and monitor the status of the state care institutions. The visit focuses on the services provided and treatment of the detainees or those deprived of liberty placed under state care, assessing the level of protection and security, health and medical services provided at the facility, incentives provided to the detainees and inmates, as well as extra activities conducted for them in addition to assessing the status of the employees working in these institutions. A list of monitoring visits conducted in 2020 are listed in the table below.

3.1.2 Follow-up Visits

Follow-up visits are conducted to assess the implementation of the recommendations provided to the state institution after a monitoring visit. A list of follow-up visits conducted in 2020 are listed in the table below.

3.1.3 Thematic Visits

Thematic visits are conducted focused on specific areas identified during a monitoring visit. No thematic visits were conducted by NPM in 2020.

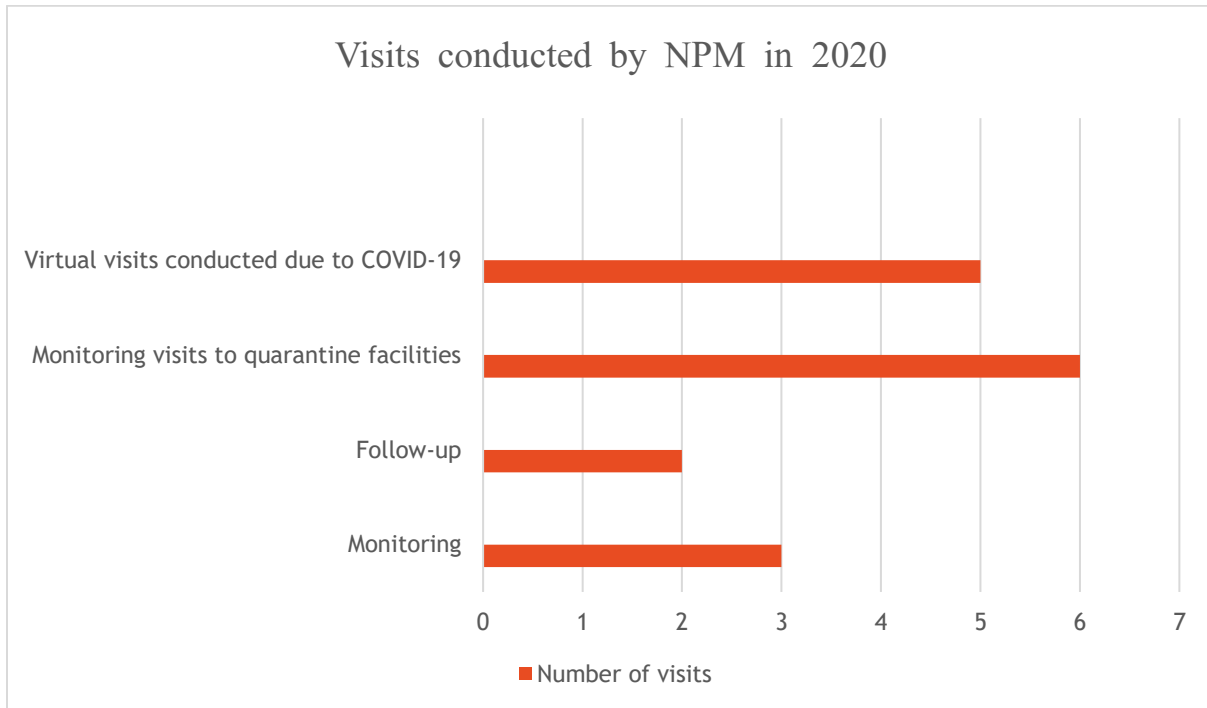
4. List of Monitoring visits conducted in 2020

No.	Place of visit	Date of visit
1	K. Hinmafushi National Rehabilitation Center	5 th February 2020
2	R. Ungoofaaru Police Station	24 th , 25 th , and 26 th February 2020
3	Farukolhufushi Quarantine Facility	12 th April 2020
4	Hulhule Island Hotel Quarantine Facility	12 th April 2020
5	Hulhumale Hiya Facility (Monitoring visit)	16 th May 2020
6	K. Vilivaru Island Quarantine/ Isolation Center (Monitoring visit)	18 th May 2020
7	China State Hiya Quarantine Facility	20 th May 2020
8	Drug Treatment and Rehabilitation Center (Virtual visit)	22 nd July 2020
9	Addu City Drug Treatment and Detoxification Center (Virtual visit)	22 nd July 2020
10	G.Dh. Thinadhoo Drug Treatment and Detoxification Center (Virtual visit)	22 nd July 2020
11	K. Guraidhoo Home for People with Special Needs (Virtual visit)	23 rd July 2020
12	Fiyavathi (Virtual visit)	23 rd July 2020
13	Kudakudhinge Hiya (Virtual visit)	7 th September 2020
14	Beach Palace Guest House- The designated COVID-19 quarantine facility for the children and employees of Fiyavathi	8 th October 2020
15	Asseyri Jail	8 th , 9 th , and 10 th November 2020

5. List of Follow-up Visits conducted in 2020

No.	Place of visit	Date of visit
1	Dhoonidhoo Police Custodial	20 th October 2020
2	National Reintegration Center	8 th November 2020

6. Visits conducted by NPM in 2020



There were 13 visits planned by NPM for 2020. However, due to the COVID-19 pandemic and the declaration of a Public Health Emergency which led to a mass lockdown, the visits were not conducted according to the annual work plan and virtual/remote visits had to be conducted instead of physical ones. Visits were conducted as follows: 03 planned monitoring visits, 02 planned follow-up visits, 06 monitoring visits and 06 virtual visits to COVID-19 quarantine facilities.

7. Reports

Following each visit, NPM produces a report based on the observations of the visit and issues recommendations in these reports. A quick report consisting of a summary of findings and major concerns is shared with relevant stakeholders within a week of the visit. A comprehensive final report with recommendations is later shared with the relevant stakeholders. A compilation of the quick reports and final reports shared with the authorities by NPM in 2020 is in the tables below.

7.1 Quick Reports Shared

No.	Report	Date shared
1	Quick Report on the Follow-up visit to Kudakudhinge Hiya conducted on 28 th November 2019	20 th January 2020
2	Quick Report on the Monitoring visit to R. Ungoofaaru Police Station carried out from 24-26 th February 2020	27 th February 2020
3	Quick Report on the Follow-up visit to Dhoonidhoo Police Custodial conducted on 20 th October 2020	1 st December 2020
4	Quick Report on the Monitoring visit to Asseyri Jail carried out on 8 th November 2020	29 th December 2020

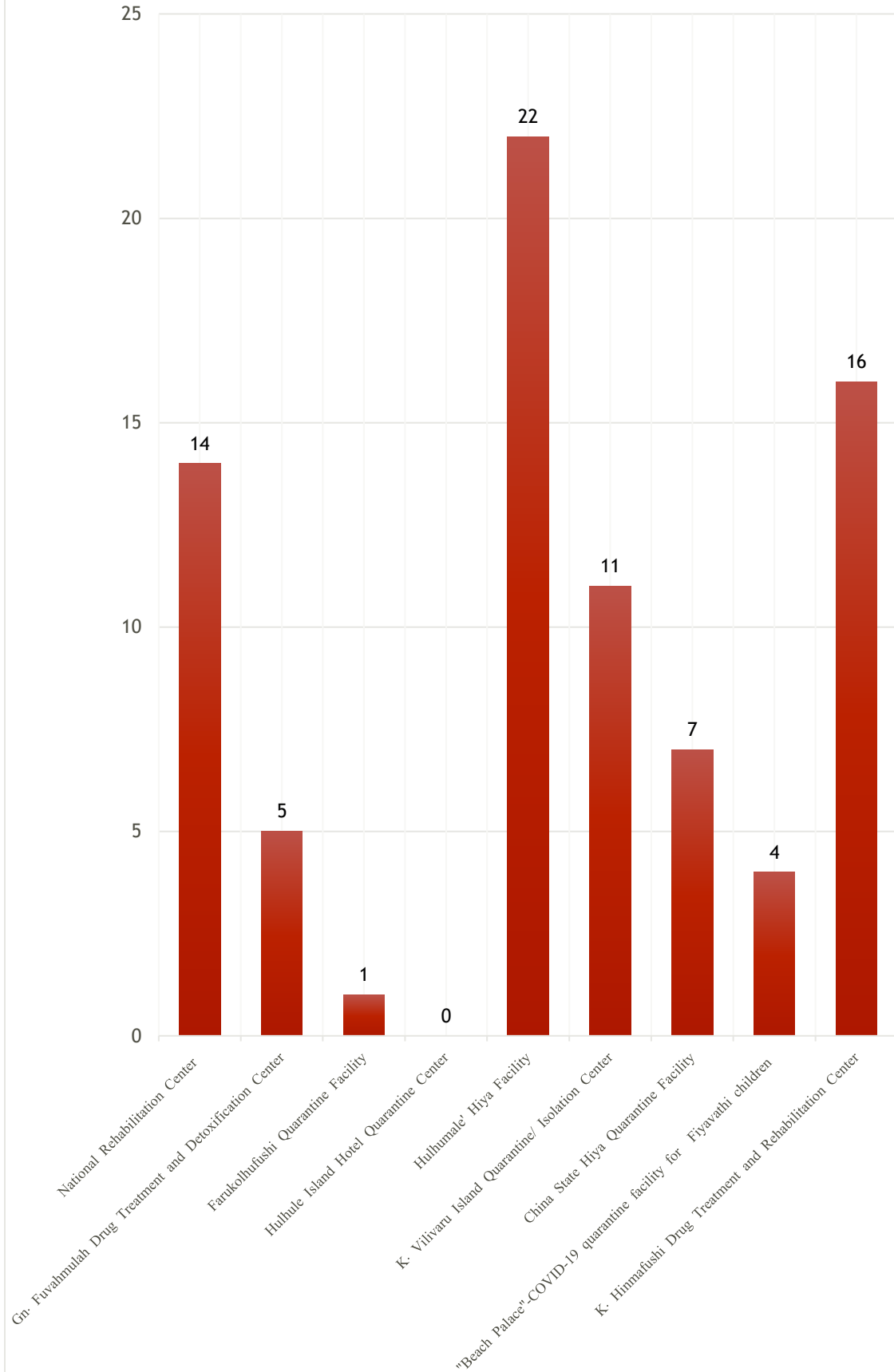
7.2 Final Reports Shared

No.	Report	Date shared	Authorities shared with
1	Final Report on the Monitoring visit to National Rehabilitation Center conducted on 5 th February 2020	10 th February 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Maldives Police Services • Ministry of Home Affairs • National Counter-Terrorism Center
2	Final report on the Follow-up visit to Gn. Fuvahmulah Police Station conducted on 15 th July 2019	11 th February 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Ministry of Home Affairs • Maldives Police Service
3	Final report on the Follow-up visit to Gn. Fuvahmulah Drug Treatment and Detoxification Center conducted on 16 th July 2019	18 th March 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Ministry of Gender, Family and Social Services • National Drug Agency
4	Final Report on the Monitoring visit to Farukolhufushi Quarantine Facility conducted on 12 th April 2020	21 st April 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • National Disaster Management Authority • National Emergency Operation Center
5	Final Report on the Monitoring visit to Hulhule Island Hotel Quarantine Facility conducted on 12 th April 2020	21 st April 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • National Disaster Management Authority

			<ul style="list-style-type: none"> • National Emergency Operation Center
6	Final Report on the Monitoring visit to Hulhumale Hiya Facility conducted on 16 th May 2020	18 th May 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • National Disaster Management Authority • National Emergency Operation Center
7	Final Report on the Monitoring visit to K. Vilivaru Island Quarantine/ Isolation Center conducted on 18 th May 2020	22 nd May 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • National Disaster Management Authority • National Emergency Operation Center
8	Final Report on the Monitoring visit to China State Hiya Quarantine Facility conducted on 20 th May 2020	28 th May 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • National Disaster Management Authority • National Emergency Operation Center
9	Final Report on the Monitoring visit to "Beach Palace"- The designated COVID-19 Quarantine Facility for the children and employees of Fiyavathi conducted on 8 th October 2020	15 th October 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Ministry of Gender, Family and Social Services • Health Protection Authority (HPA)

10	Final Report on the Monitoring visit to L. Gan Police Station conducted on 6 th -7 th August 2019	15 th October 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Ministry of Home Affairs • Maldives Police Service
11	Final Report on the Monitoring visit to K. Hinmafushi Drug Treatment and Rehabilitation Center conducted on 28 th -29 th August 2019	22 nd October 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Ministry of Gender, Family and Social Services • National Drug Agency
12	Final Report on the Follow-up visit to Villimale' Kudakudhinge Hiya conducted on 28 th November 2019	22 nd October 2020	<ul style="list-style-type: none"> • President's Office • People's Majilis • Ministry of Gender, Family and Social Services

Details of the Recommendations Proposed to the Government Authorities in 2020



8. Activities carried out by NPM in response to COVID-19

The COVID-19 pandemic and the subsequent announcement of the public health emergency by the Ministry of Health brought a temporary halt to the regular planned visits to places of detention by NPM. To ensure the protection of detainees or persons deprived of liberty in the midst of the pandemic, NPM monitored the preventive measures taken, changes in the standard operating procedures, and the general state of the detention centers in response to COVID-19. While regular visits to the state care facilities and detention centers were temporarily discontinued, NPM fulfilled the responsibilities through the following avenues:

8.1 Media Monitoring

During the state mandated lockdown, NPM monitored the daily press briefing and latest media releases to remain up to date with the different changes within the government institutions and the decisions taken in response to COVID-19

8.2 Standard Operating Procedure (SOP)

In response to the COVID-19 pandemic, a standard operating procedure for conducting NPM visits in case of National Health Emergencies was developed and translated to English.

8.3 Developing Questionnaires for Remote Monitoring

To ensure a continuous monitoring of the detention centers and state care institutions, remote monitoring questionnaires were developed, revised, and sent to the respective institutions in order to gather information. This information was then updated to a google sheet and used for report compilation purposes.

8.4 Obtaining Updates from State Institutions via Google forms

Due to COVID-19, NPM remotely monitored the below mentioned state care institutions and detention centers via weekly google form questionnaires.

- State Care Shelters:
 - ✓ Villimale Kudakudhinge Hiya
 - ✓ Hulhumale Amaanhiya
 - ✓ H.Dh., N., B., M, G.Dh., Dh., Gn., S., Atoll Family and Children Services

- Jails:
 - ✓ Asseyri Jail
 - ✓ Maafushi Jail
 - ✓ Male' Jail
 - ✓ Hulhumale' Jail and Hulhumale' Detention Center

- K. Guraidhoo Home for People with Special Needs
- K. Hinmafushi Rehabilitation Center

8.5 Virtual Visits

Skype video calls were used to conduct random interviews among people deprived of liberty and conduct virtual visits to identify the changes in the general operational guidelines due to COVID-19 and assess the material conditions of the detention centers. The following list consists of the virtual visits conducted by NPM.

- Dhoonidhoo Police Custodial
- K. Maafushi Jail
- Male' Jail
- Asseyri Jail
- Hulhumale' Jail and Hulhumale' Detention Center
- Villimale' Kudakudhinge Hiya
- K. Guraidhoo Home for People with Special Needs
- K. Hinmafushi Rehabilitation Center and Women's Rehabilitation Center
- K. Hinmafushi Central Detoxification Center
- Drug Detoxification and Community Rehabilitation Center (S. Hithadhoo)
- Drug Detoxification and Community Rehabilitation Center (G.Dh. Thinadhoo)

9. Important findings from the visits conducted in 2020 to police stations, police custodials, rehabilitation and detoxification centers, state care shelters, and quarantine facilities

9.1 Findings from visits to police stations

9.1.1 Monitoring visit to R. Ungoofaaru police station

- It was observed that overall, the station was clean and sanitary, which included the cells, the toilets, corridors, open area surrounding the station, and the employee accommodation
- It was observed that the rules for using the mess room was fixed at a visible area and regular meal records were maintained in a book
- The employees noted that sometimes the holding cells needed to house detainee over capacity, where cells allotted for two may house three without any categorization or regards to the type of crime
- It was stated that there was no designated isolation cell however if the need arose, cell number 10 was used for this purpose. It was observed that this cell was designed similar to the other cells.
- It was observed that no cell was specified for children / women
- The detainees informed that while the cells had an increased number of insects including mosquitoes, however it was informed to the team that mosquito repellent sticks were no longer provided. According to the employees, the provision of mosquito repellent sticks was halted due to detainees using the lit sticks to light the sleeping mats on fire.
- It was observed that the fire extinguishers installed within the police station had expired in 2015 and 2018, and had not been renewed
- It was observed that the kitchen that prepared food lacked hygiene and cleanliness. The visiting team also noticed that the kitchen employees did not wear aprons or gloves or kitchen hair nets.
- It was observed that the quality of food provided in this station was poor, further affirmed by complaints from the employees and detainees
- According to the employees, if the detainees needed to be moved out of the premises, they had to be handcuffed and walked from one location to another as the station's mode of transport

was not functional. The management of station disclosed that as the court was located in front of the school and the official court timings coincide with the school hours, the students witnessed and were negatively impacted by the scene of detainees being taken to court in handcuffs. Further, the officials agreed that they shared the concerns of the parents and the island council regarding the negative impact of witnessing such scenes would have the students.

- It was observed that the facility lacked human resources, especially female employees which caused a lot of challenges for the smooth functioning of the facility itself

9.2 Findings from visits to police custodial

9.2.1 Dhoonidhoo police custodial

- It was observed that the custodial held a total of 107 detainees which consisted of one woman and 106 men. The custodial also housed 3 children under the age of 18
- It was observed that the facility's special holding cell for children, which is the 1st cell of unit 5, housed two children while the remaining child was housed in the 2nd cell of unit 2. Additionally, it was observed that the children could clearly hear conversations from the holding cells with adult detainees and the adult holding cells were visible from where the children were held
- Though Article 19 of the Juvenile Justice Act (Act 18/2019) states that a special juvenile officer should be present for all communication with children in detention, it was observed that this custodial did not house such a juvenile officer
- Detainees informed the visiting team of the use of degrading language and torture towards them by the officials of the custodial
- Although this facility is a custodial jail designed to house detainees, it was observed that at the time of the visit the facility housed 12 sentenced prisoners and 33 remand prisoners
- It was observed that the cells were monitored by closed-circuit television (CCTV). Though CCTV coverage included the toilets in the cells, they have blanked out and excluded the toilet area. However, the detainees had expressed undergoing mental distress upon the toilet area being included in the CCTV coverage as they were uninformed of the specific area being blanked out from the monitoring

- It was observed that the cells were hot due to poor ventilation. While cells in unit 2 were notably smaller, the cells had the capacity of 2 and held 2 detainees which made the condition worse
- A mosquito infestation was observed in the custodial, including mosquito larvae near the toilets of the unit 6 cells. While mosquito repellent lotion was provided to detainees, they were reluctant to use it as it increased the heat
- Upon analyzing samples of the water used in the facility for drinking and other basic needs, it was found that the water contained a high number of Coliform bacteria. Further, the water did not meet the minimum water quality standard set by the World Health Organization (WHO) and was not appropriate for drinking or using for other basic needs. Experts at the Food and Drug Authority and Health Protection Agency (HPA) have linked the high number of skin issues observed among the detainees with poor water quality
- It was observed that this facility housed foreign detainees however did not have an in-house translator to communicate with these detainees. Further, all the documents and notices regarding the prison rules were in the local language. However, it was observed that foreign detainees had also signed and provided finger prints on these forms though the contents of the forms were not conveyed to these detainees through a translator.
- According to the observations of the visiting team and information gathered from the detainees, it was noted that even when interacting with detainees, some employees did not have their name or service number visible on their uniforms
- It was observed that the medical services have developed and improved with the establishment and operation of the Dhoonidhoo Clinic. This clinic was opened with 2 consultation rooms, an emergency room, reception and a separate ward to treat admitted male and female patients. However, these 2 medical wards noted in a follow-up visit in 2017 were currently being used as storage space
- It was observed that the facility did not have a vehicle to transport detainees to the clinic on the premise in a medical emergency and in such an emergency the detainee had to be moved in a stretcher. However, it was noted by the employees that there were delays in moving the detainees on stretcher and sometimes attempting to move the detainees on a stretcher led to additional injuries. Further, the information gathered from the employees also indicate that there are challenges in obtaining a vehicle due to budget constraints

- It was observed that the facility lacked human resources, especially female employees which caused a lot of challenges for the smooth functioning of the custodial
- It was observed that while the accommodation block housed a significant number of employees, the utilities were inadequate including being limited to 1 washing machine and prolonged issues with some of the air conditioners which has not been fixed
- Staff relayed that during the wet monsoon, flooding and water damage to the accommodation was common due to the rain. Further, it was also noted that the cupboards and the locks on the cupboards were broken
- The employees noted that masks, face shields, and sanitizers were provided and routine disinfection was carried out. They also noted that though face shields were used previously and still available, with the current eases in mind, face shields are not utilized now
- It was observed that the used surgical masks were not properly disposed. Further, the detainees were not provided with face masks and sanitizers and social distancing could not be maintained due to overcrowding.

9.3 Findings from visits to jails

9.3.1 Asseyri jail

- The capacity of the jail is recorded to be 326. During this visit there was 319 prisoners which consisted of 313 adults and 6 children under the age of 18.
- According to the information from the prisoners and the observations of the visiting team it was noted that the prisoners were not categorized based on the types of crimes. Prisoners informed that this lack of categorization created difficulty for those who did not want to share cells with prisoners who had committed certain types of crimes
- It was observed that the overall material condition including the staff and detainee toilets, shower areas, and accommodation was poor
- According to the information gathered and observations of the visiting team, it was noted that the holding cells for the children had poor ventilation, no natural light, and was generally unsanitary. Additionally, it was also noted that at entrance of the cell there was a bucket used for waste disposal which contained perishable waste, leaving a bad smell and attracting houseflies.

- It was observed that a new building was being constructed on premise to house detainees and prisoners under 18 years
- Upon analyzing samples of the water used in the facility for drinking and other basic needs, it was found that the water did not meet the minimum water quality standard set by the World Health Organization (WHO) and was not appropriate for drinking or using for other basic needs.
- It was observed that the jail lacked the human resources required for the smooth functioning of the facility
- It was observed that there were challenges in managing the security of the jail

9.4 Findings from visits to reintegration centers

9.4.1 National Reintegration Center

- It was observed that as the center is being established, there were no furniture and no fire safety and evacuation plans in place. Further, it was noted that the facility was inaccessible for persons with disabilities.
- The management noted that the guidelines and standards for the center were being developed
- Inadequate ventilation in Block “D” and Block “E” was observed by the visiting team. Moreover, it was noted that the CCTV Cameras installed within the facility invaded the privacy of those entering and leaving the bathrooms in the facility
- It was observed that the blocks allocated to isolate individuals kept at the facility did not have doors installed within the bathrooms to ensure their privacy
- It was observed that the room allocated to provide conjugal visits was not enclosed by a fence
- It was observed that cameras were installed in the room allocated for security screening individuals before entering the premises of the facility
- It was observed that the monitoring systems in the blocks were not centralized
- The lack of a panic button inside the counseling room allocated for providing counseling and psychosocial services was observed by the visiting team
- Based on the findings, 14 recommendations were made to the relevant government authorities

9.5 Findings from visits conducted by NPM to quarantine facilities in response to COVID-19

9.5.1 Hulhumale' Farukolhufushi Quarantine Center

- A monitoring visit was conducted to this facility on 12th April 2020
- This facility was designated for COVID-19 positive patients therefore had no restrictions in interacting with one another during the quarantine stay
- It was observed that a caretaker or guardian was allowed to quarantine with elderly persons, children under 18, or individuals with special needs
- Past quarantine and isolation experience was used in designing the ward in a manner which best regulated temperature and decreased mosquitoes
- It was observed that an automatic air purifier which circulates air every hour was in place to increase the airflow in the wards
- It was observed that there was a designated nurse's station and work was being carried out to facilitate CCTV access from this station
- Based on the findings, 1 recommendation was made to the relevant government authorities

9.5.2 Hulhule Island Hotel Quarantine Center

- As the Hulhule Island Hotel was temporarily being used as a quarantine center, a monitoring visit was conducted on 12th April 2020
- It was noted that the facility had the capacity to house 49 suspected cases and 44 recovered cases
- It was noted that the individuals had to remain in the assigned rooms and were not allowed to go out
- It was observed that a caretaker or guardian was allowed to quarantine with elderly persons, children under 18, or individuals with special needs
- It was observed that there was a designated nurse's station and work was being carried out to facilitate CCTV access from this station

9.5.3 Hulhumale Hiya Facility

- A monitoring visit was conducted on 16th May 2020
- This facility has a capacity of 626 and had the occupancy of 326 expatriate workers at the time of the visit. However, it was observed that the details of only 302 individuals were noted in the logbook kept at the facility. The management informed that there were individuals from Bangladesh, India, and Nepal at the center.
- It was observed that the first floor had 6 wards and the wards consisted of dorm style rooms. The management noted that currently these wards were vacant and would house the next batch of patients
- It was observed that some of the wards had beds and pillows. According to the observations of the visiting team and the information given by the staff, it was noted that the expatriates in the various areas of the wards were there for some solitude and to get some fresh air. As per the staff, this floor held a mess that could accommodate 80 people and if a patient declined to eat at the mess, patients were allowed to eat where they preferred
- It was noted that the second floor held 12 wards with one ward allotted as a prayer area and the rest being used for patient care. Further, the visiting team also observed that while there were 30-36 people in each ward, with the exception of one ward, all the wards had bunk beds which were kept close to one another. As per the Quarantine Facility Management Handbook published by Ministry of Health in relation to COVID-19 if individual rooms are not provided for the patients, a distance of 1-meter should be kept between the beds in halls and dorms
- It was observed that due to overcrowding the adequate social distancing was not maintained within the wards in accordance with the Quarantine Facility Management Handbook by Ministry of Health
- It was noted that basic necessities such as toothpaste, toothbrush, and towels were provided at the initial admittance. Further, the visiting team also observed that all the beds prepared for use had mattresses, pillows and bedsheets
- While the wards were adequately clean and sanitary, it was observed that due to a lack of proper space to keep the slippers, they were unorganized and all over the place
- According to the information given by the patients and the observations of the visiting team, it was noted that the patients washed and dried their own clothes. However, it is stated in the COVID-19 Quarantine Facility Management Handbook by Ministry of Health that clothes

and personal items such as pillow cases used by patients should be washed at a specific temperature at a designated area

- It was observed that while there was a total of 30 toilets (18 toilets on the ground floor, 4 toilets on the 1st floor, and 8 toilets on the 2nd floor) the toilet seats not being properly installed in the 1st and 2nd floor. Due to this, patients at the facility had to navigate from one floor to the other to use the toilets which was inconvenient
- There were 32 shower areas on the ground floor. It was observed that as the showers were installed close to one another, an appropriate distance could not be maintained in the showers. Additionally, due to improper water drainage, water flow outside the shower areas was observed
- The staff and patients informed that the toilets and wards were being cleaned by the patients with the management providing the cleaning products such as bleach, floor cleaner, 'wing' cleaner
- It was observed that while the wards were designed as big dorms and had proper ventilation, there were no fans installed. The patients stated that the lack of fans resulted in the dorms being hot during the day
- The patients noted that there was adequate light in the wards during night
- The employees noted that there was a high number of mosquitoes and this was being addressed by fogging the facility once every two days
- The management informed that the meals were catered by Brothers' Catering. This included 3 meals, with accommodations made for breakfast and suhoor if the patient was fasting, which were provided in disposable Styrofoam packs
- Patients conveyed that while three meals were provided, their hunger remain unsatisfied as the meal portions were small and they did not get extra food when requested
- The visiting team noted that each patient received 2 mineral water bottles of 1.5 liters on a daily basis and if they required more water, tap water was accessible from each floor
- It was observed that though the employees informed that the mess room has the capacity for 80 people, this area was not big enough to accommodate all the occupants of the facility. The visiting team noted that the tables had space for 2 people to sit 1-foot apart
- The employees informed that everyone was provided the same meals and individuals were not inquired about dietary restrictions or special meal requirements

- From the observations of the visiting team and the information gathered from the patients, it was noted that the patients at this quarantine facility did not receive information on their rights, how to seek medical assistance if required, the services provided at the facility, or the guidelines adhered at the facility. However, it is stated in the Quarantine Facility Management Handbook by Ministry of Health that the patients should receive the aforementioned details along with the contact numbers of the management and medical team
- It was observed that though this facility housed foreign patients, they did not have an in-house translator to communicate with these patients. However, it was noted that writings in Bengali and English were present in the toilets and near the water supply area. According to the employees, these were translated using google
- It was noted by the management that while the individuals were transferred from Male' and other quarantine facilities to this center for being COVID-19 positive, there were no personal or medical documentation of the patients provided
- According to the patients, COVID-19 positive results were conveyed through a phone call by HPA but they had not received a document stating such. However, some of the patients at the facility presented the visiting team with HPA documents on their phones stating they tested negative. It was also observed that the facility had no documentation on the positive or negative status of the patients
- It was observed that the patients were not categorized. Further, the patients informed that no sample had been taken after the initial testing even though some of them has been quarantined for 28 days. It was noted that none of this information is documented at the facility.
- According to the staff, patients were not categorized based on elderly and special needs status. They further noted that there were no patients with special needs present at the facility at the time of the visit
- It was observed that the patients were not categorized based on country. According to the employees, this led to disputes between the patients
- It was observed that there was no monitoring system in place at the facility. There is a designated person from each ward selected from the patients who acts as a focal point to convey messages from the other patients and convey information from the management. However, it was noted that when called for sampling and other purposes, calls were declined without a proper response

- The employees noted that if a patient requires emergency medical treatment, there was no way for the patients to contact the employees except through the designated individual from the ward. However, it is clearly stated in the Quarantine Facility Management Handbook by Ministry of Health that the medical condition of the patients such as symptoms of fever, cold, and breathing difficulties should be checked for at least once a day
- It was conveyed by employees and the patients that the center was not providing patients with masks or hand sanitizers and the masks being used by the patients were either brought by them at admittance or sent to them by family and friends. The visiting team observed that while some patients did not wear masks, others had resorted to using their clothes as masks
- According to the patients, while liquid handwash was available in the 2nd floor toilets, liquid handwash was not adequately provided
- The visiting team observed that there were 3 doctors and 5 nurses of which the doctors were sent by the Bangladesh government and the nurses were employees of the local Indira Gandhi Memorial Hospital (IGMH)
- According to the doctors at the facility, the doctors only consulted the Bangladesh citizens as the doctors were sent by the Bangladesh government. However, the employees of the facility informed that occasionally, the doctors did consult patients of other countries
- The visiting team observed that the doctors consulted from 0900-1300 and patients who wanted a consultation queued up at that time. The staff note that if the patients displayed symptoms of hypertension, they were transferred to other centers and this has been the case on two separate occasions
- The medical staff noted that sufficient amount of medication was not available and generally the patients were prescribed Panadol and cough syrup. The COVID-19 Quarantine Facility Management Handbook by Ministry of Health state that quarantine facilities should have basic first aid, medication, and consumables
- The staff and patients informed that no outside doctors visited for consultations
- The visiting team observed that the patients were not provided with medical information verbally or through information leaflets
- It was noted that there was no psychosocial support available at the center. The doctors on premise note that if a patient exhibits signs of excessive worrying or stress during a consultation the doctors talk them through it in the consultation. The COVID-19 Quarantine Facility

Management Handbook by Ministry of Health state that quarantine facilities should provide psychosocial support to the individuals who require the service

- The management stated that the facility had a sufficient supply of Personal Protective Equipment (PPE), masks, gloves, and sanitizer for the doctors and nurses. The visiting team noted that a proper inventory was maintained of such stock used at the facility
- It was observed that there were designated donning and doffing areas which was equipped with dustbins. The staff noted that these items were disinfected and disposed by waste management corporation.
- It was noted by the employees and patients that the wards were not being disinfected at all. The COVID-19 Quarantine Facility Management Handbook by Ministry of Health state that door handles, tables, chairs, staircase railings which are accessed and used by the patients should be disinfected using bleach
- While the patients relayed that they contacted their families from their personal phones, the management stated that the center did not provide the facility of family phone call
- Management informed that if the patients require anything, they can request family or friends to deliver the items to Kalaafaanu School where the National Emergency Operation Centre (NEOC) would check, disinfect and deliver the items to the facility
- The visiting team noted that there were no entertainment facilities available at the center. The COVID-19 Quarantine Facility Management Handbook by Ministry of Health state that wi-fi and educational material should be provided at quarantine facilities
- It was noted by the patients and the management that a complaint mechanism had not been established
- According to the management, some patients had been moved to other facilities due to disputes and altercations. Further, management also notes incidents of patients attempting to flee from the facility
- It was observed that the incidents have been recorded in the designated incident record book
- The management stated that there is a fire safety mechanism and evacuation plan in place which the staff is well informed about
- Management noted that while the center does have a SOP, it is currently not being followed or implemented. The management shared that they have plans to familiarize the staff and

implementing the SOP as soon as possible. Further, it was also stated that the management was made aware of the standards set for the person in charge of the center before coming to the facility

- While the COVID-19 Quarantine Facility Management Handbook by Ministry of Health has provided guidance on how to record room checklists, information of the patient at initial admittance, symptoms displayed, medications taken by patients getting treated for specific conditions, any allergies to food or medication, daily records of the patient, and information on the discharged, it was observed that the only records being maintained were the total number of patients, date of arrival, if they were shifted to another facility and any incidents that occur.
- According to the information provided by the management, the facility had 3 duty shifts (morning, noon, and night) and each shift consisted of 5-6 employees. They further noted that 19 Maldives National Defense Force personnel and 2 female employees were present at the center.
- The management and staff confirm that food and accommodation has been provided to the MNDF personnel, doctors, and nurses from guest houses in Hulhumale and that the food and accommodation provided was satisfactory
- The visiting team observed that there were 2 security duty posts outside the facility which was manned by Maldives Police Service. However, the management also state that 2 duty posts were not enough to manage the security and 2 additional duty posts were required for a smooth operation of the center. Further, the management noted that the police at the duty posts did not enter the premises.
- Based on the findings, 22 recommendations were made to the relevant government authorities

9.5.4 K. Vilivaru Island Quarantine Facility

- A monitoring visit was conducted on 18th May 2020
- This facility has a capacity of 218 which is designed and distributed among 3 large tents

- It was observed that each patient had a separate bed and a 1-meter distance was maintained between the beds in accordance with the Quarantine Facility Management Handbook published by Ministry of Health
- The staff stated that the entrance flaps of the tents would be kept open for airflow and the visiting team observed that there were multiple Air Conditioners (AC) in each tent
- It was noted that the tents had adequate lighting with 24 lights in the first two tents and 22 lights in the third one
- The management stated due to the design of the tents, with the top of the tents being sheltered using tarpaulin, when the weather was rainy or windy, it was exceptionally loud in the tents and the sound of the wind was a constant within the tent on such instances
- The visiting team noted that there were 2 toilet rows which included 14 showers, 10 toilets, and 4 facewash area in one row and 15 showers, 10 toilets and 3 facewash area in the second row. It was observed that as the showers were installed close to one another, an appropriate distance could not be maintained in the showers. Further, if it was rainy, the patients would have to navigate the open space in the rain to access the shower and toilet area
- According to the information provided by the management and the observations of the visiting team, it was noted that there were 10 washing machines for general use
- It was observed that though the floors of the tents were tiled, there was a chance of water clogging and flooding the tents during rainy weather. Further, the visiting team also noted that if it rained with strong winds, the tents would be impacted by the rain
- According to the information provided by the management and the observations of the visiting team, it was noted that televisions and stands for the televisions were present and were in the process of attaching the television stands. Additionally, the management assured that wi-fi would be provided for the individuals staying at this facility.
- Through the information provided by the management and the observations of the visiting team, it was noted that a consultation area, medicine storage room, and areas for donning and doffing were in the works of being established
- The management stated that food would be provided to the staff and individuals staying at the facility from the kitchen established on the island and the food for individuals staying at the center would be provided food in in Styrofoam packs

- It was observed that the kitchen utilized for meal preparation was small, unhygienic, and the exhaust had dust stuck to it
- According to the kitchen employees that while an accommodation of 2 rooms close to the kitchen area was provided, they did not have separate toilet or shower areas and had to walk 4-5 minutes to the general employee accommodation for access. It was noted to be inconvenient by the visiting team and the kitchen employees
- A high housefly population was observed in general and in the kitchen area. This was noted as a concern by the visiting team as it increases the risk of the individuals at the facility being presented to additional illnesses
- A high mosquito population was also observed and according to the management, this was being addressed by fogging the facility once every two days. However, according to the management, this island was previously a resort and unoccupied for a long period of time and had a high amount of non-biodegradable waste which stored water during rain contributing to the mosquito population
- The management stated that an accommodation of 30 rooms were allotted for staff, including doctors, nurses, police and MNDF personnel. These rooms had attached toilets, beds, cupboards, and AC's. Further, the staff also had a TV hall and the staff confirmed that they used this facility
- The staff noted that though the island did not have a launch readily available in case of an emergency, in such an instance the staff can contact the MNDF personnel who in turn would coordinate with National Disaster Management Authority (NDMA) and organize the mode of transport
- The management highlighted that a 1000-tonne water plant which had the capacity to store 60,000 liters was present on the island. They also stated that a 100-kilowatt generator and a 300-kilowatt generator would be utilized to provide electricity to the facility
- According to the management, this facility did not have the adequate fire safety systems in place
- Based on the findings, 11 recommendations were made to the relevant government authorities

9.5.5 China State Hiya Quarantine Facility

- This visit was conducted on 20th May 2020 before the official opening of the facility to ensure that the facility was designed in accordance with and adhered to the national and international standards set for a COVID-19 quarantine facility
- According to the information gathered from the management and the observations of the visiting team, this facility had the capacity of 800, 6 blocks were allotted for accommodation, each block had two levels with 10 rooms on each level bringing the total number of rooms per block to 20 rooms. The management further stated that when the facility opened, one block would be used as staff accommodation
- It was observed that each room had 10 bunk beds next to one another with a designated switch board and as the facility was not open yet, there were no mattresses, pillows, or clothe storage areas
- Though the Quarantine Facility Management Handbook published by Ministry of Health states that distancing of 1-meter should be kept, it was observed that adequate distancing was not maintained between the beds in the accommodation
- The visiting team noted that there were 2 toilet rows in the compound which could be used by 70 people at once. This included 35 showers, 42 toilets, and 6 facewash areas
- It was observed that as the showers were installed close to one another, an appropriate distance could not be maintained in the showers. The management noted that these facilities would be shared with the employees
- Information from the management and the observations of the visiting team note that this facility had a fully equipped kitchen established at the facility along with kitchen utensils and equipment and a pantry. However, management state that discussions were underway to decide if meals would be provided from the kitchen or outsourced and catered to the facility.
- It was observed that a mess room with a capacity for 150 was present at the facility
- It was noted that there was each block had an open yard which could be used for exercise and the management assured that games such as chess and carrom would be available by the time the facility is complete
- It was noted by the management that there is no fire safety system in place yet, one would be established before the facility opened
- The management stated that cameras would be placed at the entrance to ensure security

- Though the COVID-19 Quarantine Facility Management Handbook by Ministry of Health state that quarantine facilities should have basic first aid, medication, and consumables, it was observed that the facility did not have a designated storage space for medical items and equipment. Further, it was also noted that the facility did not have a designated area for laundry and ironing. However, the management assures that these spaces would be available when the facility is complete
- The management noted that when the facility was complete, the doctor stationed at Farukolhufushi would consult at this facility on a daily basis to provide medical support
- Based on the findings, 7 recommendations were made to the relevant government authorities

9.5.6 Beach Palace Guest House Quarantine (designated COVID-19 quarantine facility for the children and employees of Fiyavathi)

- A monitoring visit was conducted to Beach Palace Guest House in order to assess the condition of the staff and children under state care due to being direct contacts or positive for COVID-19
- According to the designated Ministry of Gender, Family, and Social Services official, 19 children between 6-9 years and 10 employees were quarantined at the time of the visit
- According to the ministry official, samples were taken to test for COVID-19 from the children and staff by HPA on the day of the visit
- According to the ministry official, the details of the children and employees under quarantine was shared with the ministry. However, these details were not available in documentation at the time of the visit
- It was observed that the HPA guideline on quarantine was not present and the HPA document identifying the residence as a place of quarantine had not been received. However, the ministry official assured that moving children to the facility and taking care of them was carried out in accordance to the HPA guidelines
- According to the ministry official, guideline on entrance, exit, and work was in the process of being developed for the employees of the guest house to be utilized in the duration of the quarantine period of the fiyavathi children and staff.

- According to the official, the families of the children have not been informed that they have been transferred to the guest house for quarantine
- Based on the findings, 4 recommendations were made to the relevant government authorities of which 3 recommendations were implemented and informed to the commission through letter. It was noted that remaining 1 recommendation that could not be implemented was related to HPA.

10. Important findings from the virtual visits conducted by NPM in response to COVID-19 in 2020

Objectives of the visit:

- To ensure that individuals detained under state care are guaranteed of their constitutional rights, no fundamental human rights are violated, and to monitor the general condition of the detainees deprived of their liberty under state care during Public Health and other Emergencies declared in the country
- To identify the challenges faced by the employees working at the station, and to ensure that all the provisions in laws and international convention are guaranteed while exercising their duties and to identify general condition of the employees during Public Health or other Emergencies declared in the country
- To monitor if the detention centers and state care facilities adhere to the national and international standards set by the respective agencies to combat COVID-19 and to identify the general conditions of the facilities during the COVID-19 pandemic

10.1 Drug Treatment and Rehabilitation Center (DTRC)

- Weekly updates on the general conditions of the K. Hinmafushi Drug Treatment and Rehabilitation Center were obtained via google forms and a virtual visit was conducted on 21st

July 2020. It was noted that 9 individuals who enrolled for treatment were completing a 14-day quarantine period

- From the information given by the officials at the center and the observations of the virtual visit team, it was noted that certain changes had been implemented in the mess room, capacity of 7, due to COVID-19. A main change noted was shifting the seating to accommodate for clients at both ends of the area.
- The management stated that due to the pandemic, there had been a decrease in the number of individuals seeking treatment and thus the designated client accommodation was currently vacant
- From the information given by the management and the observations of the virtual visit team, it was noted that the 10 toilets of the center had been renovated
- The virtual visit facilitator stated that due to the pandemic, the masjid was not being used
- The virtual visit facilitator stated that the library had been moved to the administrative department due to the material condition of the library area being poor
- From the information given by the facilitator and the observations of the virtual visit team, it was noted that there were 7 beds in the medical area that can be utilized for medical examination and admittance if necessary
- From the information given by the staff and the observations of the virtual visit team, it was noted that the designated medical supply storage had an AC. Further, the facilitator stated that the center has started accepting individuals for treatment though there was a deficit in the medicine stock as the medicine at the center had been taken to be used at a detoxification center in Male'
- From the information given by the staff and the observations of the virtual visit team, it was noted that the laundry area had been renovated and 3 additional washing machines had been procured for client use.
- It was noted that due to the ongoing pandemic at the time of the virtual visit, the individuals seeking different treatments at the center had been placed in different areas to ensure that proper physical distancing was maintained throughout the quarantine duration. While Intake was the designated accommodation for the individuals seeking first treatment, due to COVID-19, Intake had been temporarily divided in to two areas. One area assigned as the quarantine area for the clients seeking treatment at the facility and the second area was designated as staff

accommodation for the employees stationed at the center to assist the individuals' seeking treatment during the quarantine duration. The facilitator noted that there were 14 employees at Intake which included 8 security guards, 4 phase residents (former treatment seekers at the center who volunteer after treatment completion), one OJT (on the job trainee), and one laborer. The virtual visit team noted that the material condition of the space could not be assessed as the staff present worked closely with the staff in quarantine.

10.2 Detoxification Center of Drug Treatment and Rehabilitation Center

- On a monitoring visit conducted by NPM from 28th-29th August 2019 it was observed that the clients seeking treatment from DTRC and the individuals' seeking treatment from the "central detoxification" were mixed and the final report submitted to the authorities included recommendations to provide separate care for both groups. It was remotely observed that this recommendation was taken into consideration and the clients and centers have been separated based on the treatment sought.
- From the information given by the visit facilitator and the observations of the virtual visit team, it was noted that from the 13 individuals who enrolled for treatment and arrived on 20th July 2020, 5 individuals were completing a 14-day quarantine period

10.3 K. Hinmafushi Drug Treatment and Rehabilitation Center for women

- The virtual visit facilitator stated that 1 individual enrolled for treatment was in quarantine at the time of the virtual visit and that since the arrival of the client, 4 security guards had been stationed on premise
- Though previously the main entrance of this center was through DTRC, it was observed that the entrance has been shifted towards the beach
- From the information given by the virtual visit facilitator and the observations of the virtual visit team, it was noted that the mess, toilets, client accommodation, and masjid had been renovated
- The visit facilitator informed that a medical treatment room was being constructed and a designated detoxification treatment area was going to be established soon.

- In comparison to the monitoring visit to the facility in 2019, several positive changes were remotely observed. This included a multi-purpose hall which was utilized for vocational training, indoor exercises, and television watching purposes.

10.4 G. Dh. Thinadhoo Drug Detoxification and Community Rehabilitation Center

- This center was officially opened in April 2019 for detoxification treatment and community rehabilitation purpose.
- The management stated that the security of the facility was contracted to 3 different companies and 24-hour security was maintained at the center
- From the information given by the virtual visit facilitator and the observations of the virtual visit team, it was noted that the center had a medical room, consultation room, nursing station, clinical room, mess, classroom, 2 toilets, a dormitory with a capacity of 12, administration room, store room, reception, and counseling room to serve the clients
- The management stated that the doctors and nurses got an accommodation allowance with their salary as their accommodation was allocated outside the facility and in the island
- From the information provided by management and the observations of the virtual visit team, it was noted that there was a big open space in the compound of the center which was used for physical activities such as football
- From the information given by management and the observations of the virtual visit team, it was noted that National Drug Agency (NDA) supplied the necessary medication every three months, the medicines were kept in an AC room to regulate the temperature, and the controlled drugs were kept in a locked cabinet
- The management stated that the catering for the center was contracted to a local restaurant and that while generally the food provided by the caterers tasted good, occasional complaints of the food being too spicy or salty were present. From the information given by management and the observations of the virtual visit team, it was noted that the mess was spacious with windows, had good ventilation and natural light
- From the information given by management and the observations of the virtual visit team, it was noted that if the clients were sick, special meals were provided under doctors instructions

- It was remotely observed that the facility had a spacious multi-purpose hall which had good airflow and natural light. Information gathered revealed that this space was utilized for family meeting, sessions, praying and indoor games.
- According to remote observation and the information by the management, it was noted that the counseling room was inside the clinic. However, employees having to vacate the clinic for counseling sessions and other people having easy access to the clinic even during counseling sessions are significant challenges noted by the commission

10.5 Home for People with Special Needs (HPSN)

- A virtual visit was conducted on 23 July 2020 via skype. Information was gathered through the skype video call, conversations with the officials of the center and from the weekly responses to the remote monitoring question sheets.
- It was noted that the center had a guideline on workplace functioning and safety during COVID-19 and the staff was familiar with the guideline. The virtual visit team observed that this guideline consisted of the steps that had been and was being taken to raise awareness regarding COVID-19, safety and preventative measures taken against COVID-19, and emergency response measures
- It was observed that lockdown guidelines had been established within the facility with ward 1 being assigned for female employees and ward 4 being assigned for male employees. If HSPN goes into lockdown, employees would work in 3 shifts and the designated quarantine wards would be cleaned thoroughly 4 times
- It was noted that during the Public Health Emergency that family visits had been halted and a complaint mechanism had not been established.
- It was noted that the patients were not allowed to leave the wards
- The management noted that during the public health emergency, the individuals and children at the facility was being consulted by the medical officer and nurse stationed at the facility. However, they state that if additional consultation or treatment is required, patients would be transferred to Male'

- It was remotely observed that there was no psychiatrist at the facility at the time of the virtual visit. The management conveyed that though they have announced the vacancy for psychiatrist, there has been some difficulty getting a psychiatrist due to COVID-19
- It was noted that COVID-19 testing service was not available on the premises and if the need for sampling arises, it would be carried out in accordance with HPA guidelines
- The management informed that if a patient displays symptoms of COVID-19, 2 rooms of ward 7 have been designated as quarantine areas. Further, they noted that each room had the space for 4 people and one room was for men and the remaining one for women
- The information gathered states that there was no designated isolation area for patients who test positive for COVID-19 and there was no ventilator on premise
- It was stated that while the center has requested Ministry of Gender, Family, and Social Services to organize a COVID-19 training for the medical officer and nurse and the training had not been organized at the date the information was gathered
- The management noted that personal protective equipment for staff use was available at the center which included sanitizers, gloves, 10 PPE sets, and 70 N95 masks.
- The management stated that 3 weeks' supply of medicine was in stock and if they ran out or required any medication in an emergency, they can contact K. Guraidhoo Health Center for medicine
- It was noted that the staff did not have access to psychological support to properly address the issues faced while working in a Public Health Emergency
- It was informed that the CEO and the head of the institute had met with the staff to identify their concerns and was currently addressing these concerns

10.6 State care shelter- Fiyavathi

- A virtual visit was conducted via zoom on 23rd July 2020
- According to the information gathered from the management and through the virtual visit, the general condition of the staff and children seemed to be well

- It was noted that special preventative measures were in place in accordance with the HPA guidelines to ensure the safety of the staff and children in relation to COVID-19
- It was noted that medical services were available throughout and there was no difficulty in obtaining the medication required for the children
- It was noted that classes were conducted online and carried out with the assistance of the teachers

10.7 State care shelter-Kudakudhinge Hiya

- A virtual visit was conducted via zoom on 07th September 2020
- According to the information gathered from the management and through the virtual visit, the general condition of the staff and children seemed to be well
- It was noted that special preventative measures were in place in accordance with the HPA guidelines to ensure the safety of the staff and children in relation to COVID-19
- It was noted that medical services were available throughout and there was no difficulty in obtaining the medication required for the children
- It was noted that classes were conducted online and carried out under the guidance of Ministry of Education

11. Sessions conducted by NPM

Though the information sessions provided by NPM had to be paused due to the restrictions of COVID-19, NPM was able to conduct information sessions for the following institutions.

11.1 Information Sessions conducted by NPM

No.	Date	Conducted for
1	19 th January 2020	Employees of the R. Ungoofaaruu Police Station

2	20 th September 2020	Counselors of the National Drug Agency Centers (Virtually)
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12. Recommendations Implementation Status

A plan was constructed to follow-up and update the implementation status of the recommendations. Though the COVID-19 pandemic and the public health emergency announced set back the plan, letters were dispatched to Ministry of Gender, Family and Social Services, Ministry of Home Affairs, and Maldives Police Service regarding 05 state care facilities and/or detention centers operating under these authorities. From these parent institutions, letters were only responded by Ministry of Home Affairs.

Additionally, NPM conducted visits to the quarantine and isolation facilities in response to the COVID-19 pandemic. Letters were dispatched following these visits were update the implementation status of the recommendations. No response was received from the relevant authorities.

13. Stakeholder Meetings

No.	Date	Stakeholders consulted
1	20 th January 2020	UNICEF Maldives
2	21 st January 2020	Ministry of Home Affairs, Maldives Correctional Services, and Maldives Immigration
3	28 th January 2020	Shelter Committee by the President's Office
4	20 th February 2020	Maldives Red Crescent
5	10 th March 2020	U.N. Special Representative of Secretary General on Violence against Children
6	12 th April 2020	National Emergency Operation Center
7	11 th June 2020	Subcommittee on Prevention of Torture (SPT) (via Skype)
8	17 th June 2020	Asia Pacific NPM's (via Skype)
9	18 th June 2020	Association for Prevention of Torture (APT) (via Zoom)
10	15 th November 2020	International Organization for Migrants (IOM)
11	22 nd November 2020	Ministry of Home Affairs and Maldives Police Service
12	17 th December 2020	Maldives Correctional Services

14. Mapping

The work of mapping the facilities under state care was also conducted at the end of the years as previous years and information was received from Ministry of Gender, Family, and Social Services, National Drug Agency, Maldives Correctional Services, and Maldives Police Service.

15. Legislative Proposals commented on by NPM

No.	Bill/ Standard / Policy	Details
1	Regulatory Requirements for Juvenile Detention Centers	Regulation/ Maldives Correctional Services
2	Standards for providing Social Services and Protection for Individuals in need of Social Housing	Standard/ Ministry of Gender, Family and Social Services
3	Standard Operating Procedure (S.O.P) for Working from Home developed by Human Rights Commission of the Maldives	Standard Operating Procedure
4	Standard for Rehabilitation and Reintegration	Standard/ Ministry of Home Affairs

16. Information shared regarding the work conducted by NPM concerning the Anti-Torture Act

Information was shared with Research and Monitoring Department regarding the work conducted by NPM from 1st July 2018 to 30th June 2019 in relation to the Anti-Torture Act.

17. Trainings Participated

No.	Training	Details
1	Webinar on COVID-19 and Psychiatric Institutions	18 th June 2020 (1.5 hours)
2	Combating Torture and Ill-treatment in times of COVID-19 conducted by APT on the International Day in Support of Torture Day	26 th June 2020 91 hour)

18. NPM Annual Report 2019

A report was compiled reflecting a summary of work conducted by NPM in 2019. This report was inclusive of visits conducted by NPM within the past year, recommendations provided throughout these visits to state authorities, work conducted to follow up on the implementation of these recommendations as well as the work conducted by NPM to encourage the implementation of the recommendations. Furthermore, the report also reflects the important observations of visits and other activities carried out by NPM, including the challenges faced and what was done to overcome the challenges. This annual report was published in the commission website on 15th October 2020.

19. Challenges

Several challenges were faced by NPM in delivering this year's mandate as well. While some of these challenges are repetitive from previous years, the COVID-19 pandemic brought a set of unique challenges. Some of the main challenges faced include:

19.1 Budget Constraints

While state parties have a legal obligation to make a specific allocation of the resources necessary to allow NPMs to function effectively and independently and carry out all OPCAT-related tasks, NPM faces annual budget constraints. In 2020, the government downsized the budget in order to reduce expenditures as a response to the COVID-19 pandemic was reflected in NPMs budget, which was initially set at MVR100,000. This led to fewer visits and the portion allotted for the translation of NPM Annual Report 2019 being removed.

19.2 Limited Human Resources and Limited Opportunities for Occupational Growth

As the number of state facilities where people deprived of their liberty are kept are increasing, with the increase if respective laws and regulations, it has been observed that the number of people in these facilities have also increased which requires to provide the team of NPM with adequate time, budget and human resources to conduct NPM's inspections and produce timely reports with constructive recommendations based on research and empirical evidence.

19.3 Limited Training Opportunities

In addition to being provided with incentives for progression and promotions at work, NPM's team require support and opportunities for professional growth such as staff development trainings for skills and newly introduced thematic areas

19.4 Challenges

Some notable challenges faced in conducting visits include staff shortage and inadequate resources essential for documentation such as camera, laptop, recording device. COVID-19 brought a set of new challenges such as adjusting to working remotely with inadequate resources and poor internet connection, developing new guidelines to remotely monitor the state care facilities and detention centers, adapting to conducting virtual visits and experiencing delays in administering the daily tasks while adjusting to the new normal approach to work.

21. Conclusion

This report was a compilation of the tasks and activities carried out by NPM in 2020. Therefore, this report consists of the details of the scheduled visits conducted in 2020 and the reports that were compiled and shared with the relevant government authorities after the visits. Though NPM had to temporarily discontinue the planned visits to state care facilities and detention centers when the Public Health Emergency was announced under the Public Health Protection Act (Act 7/2012) due to the COVID-19 pandemic, NPM adapted its mandate to accommodate to the public health emergency and executed its responsibilities even when physical monitoring was temporarily discontinued. This report includes the steps taken to monitor the general conditions, safety and preventative measures taken, and changes in brought to the accommodation of the state care facilities and detention centers in response to COVID-19.