

COLLECTION POINTS/HOLDING AREAS CHECKLIST

Facility

1. Are detainees/prisoners exposed to fire of the combat zone?
2. Are detainees/prisoners segregated by category?
3. Are detainees/prisoners quartered under conditions as favorable as those of detaining power?
4. Are there adequate blankets/bedding for population?
5. Is adequate heat and light provided ? (In particular between dusk and Lights out)
6. Are there separate dormitories for men and women?
7. Is there an interview/screening area?

YES	NO	REMARKS

Detainees/ Prisoners

1. Have there been any detainees/prisoners killed in your facility?
2. Are detainees/prisoners protected against acts of violence/intimidation?
3. Are detainees/prisoners subjected to physical/mental torture?
4. Are detainees/prisoners questioned in their own language?
5. Are detainees treated with respect?
6. Are women treated with all regard due their sex?

YES	NO	REMARKS

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7. Are all detainees/prisoners treated equally with no distinction based on race, nationality, religious belief or political opinions?
8. Are detainees'/prisoners' classification known by facility OIC/NCOIC?
9. Are detainees/prisoners asked if they would like to have their family notified of their detention?
10. Are family members notified upon request?
11. Are detainees/prisoners allowed visits from family or Religious Leaders?

YES	NO	REMARKS

Religious Freedoms

1. Are detainees/prisoners permitted complete latitude in the exercise of their religious duties, including attendance at the service of their faith?
2. Are detained Chaplains authorized to conduct services and visit with other detainees in other camps?
3. Do detainees/prisoners who are Ministers of Religion receive the same treatment as Chaplains?

YES	NO	REMARKS

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Food

1. Are detainees/prisoners receiving basic daily food rations?
2. Are rations sufficient in quality, quantity, and variety to keep detainees/prisoners in good health and prevent loss of weight or the development of nutritional deficiencies?
3. Are additional rations supplied to those that conduct work?
4. Are detainees/prisoners receiving sufficient drinking water?
5. Are detainees/prisoners permitted the use of tobacco?
6. Are there adequate facilities for messing?

YES	NO	REMARKS

Canteens

1. Are detainees/prisoners allowed to procure foodstuffs, soap, tobacco, and ordinary articles for daily use?

YES	NO	REMARKS

Clothing/Personal Effects

1. Are detainees/prisoners clothing, underwear, and footwear Supplied in sufficient quantities?
2. Are detainees/prisoners retaining personal effects and articles used for their clothing or feeding?

YES	NO	REMARKS

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Hygiene

1. Do detainees/prisoners have access to all sanitary measures, baths and showers?
2. Are separate conveniences provided for women?
3. Are detainees/prisoners provided sufficient water and soap for personal toilet and laundry use?

YES	NO	REMARKS

Medical Attention

1. Is there an adequate infirmary/aid station?
2. Is there an isolation ward if necessary for cases of Contagious or mental disease?
3. Are detainees/prisoners suffering from serious disease, or whose condition requires special treatment admitted to a hospital? (Military or Civilian)
4. Are detainees/prisoners paying for medical attention?
5. Medical emergency transportation within 10 minutes away.

YES	NO	REMARKS

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Medical Inspections

1. Are medical inspections being conducted atleast once a month?
2. Are detainees/prisoners weight checked and recorded? (DA Form 2664-R)

YES	NO	REMARKS

Recreation, Study, Sports and Games

1. Are detainees/prisoners given the opportunity for taking physical exercise, including sports and games outdoors?
2. Is sufficient open space provided for recreation, study, sports and games?

YES	NO	REMARKS

Evacuation of Detainees/Prisoners

1. Are detainees/prisoners evacuated in a timely manner?
2. Are detainees/prisoners exposed to danger while awaiting evacuation?
3. Are detainees/prisoners supplied with sufficient food and potable water, clothing and medical attention?
4. Are detainees/prisoners passing through transit camps and is Their stay there as short as possible.

YES	NO	REMARKS

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Overall Condition of Facility

FAIR	GOOD	ABOVE AVG	EXCELLENT

Person Conducting Assessment: _____

Comments: _____

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